EMPLOYEES' EXPERIENCES OF PSYCHOSOCIAL SUPPORT STRATEGIES FOR IMPROVING WORKPLACE MENTAL HEALTH: A QUALITATIVE STUDY IN A SOUTH AFRICAN STATE-OWNED ENTERPRISE

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February 2026

DECLARATION BY STUDENT

I declare that **"Employees' experiences of psychosocial support strategies for improving workplace mental health: A qualitative study in a south African state- owned enterprise"** is my own work and that all the sources I have used or quoted have been indicated or acknowledged through complete references. I further declare that I have submitted the thesis/dissertation to the originality checking software



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_____ **26 February 2026**

Dr E.M.C. Tabane **Date**

DEDICATION

This research dissertation is dedicated to all employers and employees whose dedication, perseverance and contributions continue to shape and inspire the world of work.

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ABSTRACT

The rising recognition of mental health in the workplace has been largely informed by the changing dynamics in social, economic and organisational factors. Despite the growing body of research on employee mental health, there remains a gap in context – specific knowledge of psychosocial support interventions in South African organisations, particularly within the state-owned Enterprises (SOE's). Anchored in the interpretivist paradigm, the study adopted a qualitative and exploratory. Semi-structured interview was conducted with ten permanent employees from the Operations and Maintenance Department at the State-Owned Enterprise (SOE) organisation. A combination of purposive and convenience sampling was used to identify participants, and the data were analysed through thematic analysis.

The study found that organisational culture, management styles, communication, organisational flexibility, and availability of continuous wellness programs has a significant impact on employees' mental health. These findings indicate that piecemeal and sporadic measures are not enough, but that a sustained and employee- focused approach is needed. This study expands on existing academic body in this area through its contextual contribution regarding psychosocial support in an organisational environment in South Africa.

This study's findings can be applied to organisations in practical ways through leadership development, mental health programs, flexible working, and improving the reward schemes. The development of psychosocial interventions that are culturally compatible is also very essential. Future studies should have a large sample and conduct their research longitudinally. They must examine more closely organisational leadership and organisational culture in their research.

KEY TERMS: psychosocial; support; strategies; mental health; workplace

ISIFINGQO

Ukukhula kokwazisa ngokubaluleka kwempilo yengqondo emsebenzini kukhathazwe kakhulu yizinguquko kwezobudlelwane, ezomnotho, nasezinhlakeni zenhlangano. Naphezu kokwanda kocwaningo ngempilo yemgqondo yabasebenzi, kusasele igebe olwazini olubhekiswe kumongo wolwazi olunzulu lwemisungulo yokusekela ngokwengqondo nezenhlalakahle ezinhlelweni zaseNingizimu Afrika, ikakhulukazi ngaphakathi kwamabhizinisi nenkampani kahulumeni (SOE's). Ngokusekelwe kubumqondiso bokuchaza, lolucwaningo lamukela indlela yokuhlaziya enezinga eliphezulu lokuchaza kanye nokuhlola. Igxile emgqeni wokuhumusha, ucwaningo, lwamukela indlela yekhwalithethivu neyokuhlola. Ukwenza izingxoxo ezihleliwe kwenziwa nabasebenzi abayishumi abaqashiwe abavela eMnyangweni Wezokusebenza Nokulungisa enkampanini kahulumeni (SOE). Kusetshenziswe inhlanganisela yamasampula anenhloso namasampula okulula ukuhlonza abahlanganyeli, futhi idatha yahlaziywa ngokuhlaziya izindikimba.

Ucwaningo luthole ukuthi isiko lenhlangano, izitayela zokuphatha, ukuxhumana, ukuhlela okuguquguqukayo kwenhlangano, nokutholakala kwezinhlelo zempilo enhle kunomthelela omkhulu empilweni yengqondo yabasebenzi. Lolu cwaningo lwandisa ulwazi olukhona kumzimba wezemfundo kulesi sikhala ngokunikela ehlobene nokwesekwa kwezemizwa nokuphatha kwabasebenzi endaweni yenhlangano eNingizimu Afrika.

Imiphumela yocwaningo lolu ingasetshenziswa ezinhlelweni ezinobungcweti ngokusebenzisa ukwakhiwa kobuholi, izinhlelo zempilo yengqondo ukusebenza ngokuvumelana nezimo, kanye nokwenza ngcono izinhlelo zemivuzo. Ukuthuthukiswa kwezinhlelo zokusebenza eziphathelene nengqondo nezokuxhumana ezihambisana nakho kubaluleke kakhulu. Ucwaningo lwesikhathi esizayo kufanele lube nesampula elikhulu futhi lwenze ucwaningo lwalo ngokulandela isikhathi eside. Kufanele luhlolisise kakhulu ubuholi benhlangano namasiko enhlangano ocwaningweni lwabo.

AMAGAMA ABALULEKILE: Ingqondo nenhlalo; Ukwesekwa; Amasu; Impilo yengqondo; Indawo yokusebenza

LIST OF ABBREVIATIONS

AI	Appreciative Inquiry
APA	American Psychological Association
CEHS	College of Human Sciences
CBT	Cognitive Behavioural Theory
CEO	Chief Executive Officer
DEI	Diversity, Equity, and Inclusion
EEA	Employment Equity Act
EAP	Employee Assistance Programme
EWP	Employee Wellness Programme
GDP	Gross Domestic Product
GIBS	Gordon Institute of Business Science
HR	Human Resource
IRB	Institutional Review Board
ITU	International Telecommunication Union
ILO	International Labour Organisation
JDCS	Job Demand-Control-Support
JD-R	Job Demands-Resources
NGO	Non-Governmental Organisation
NHI	National Health Insurance
O&M	Operations and Maintenance Department
OECD	Organisation for Economic Co-operation and Development.
OST	Organisational Support Theory
OHSA	Occupational Health and Safety Act
PSC	Psychosocial Safety Climate
POPIA	Protection of Personal Information Act
SACAP	South African College of Applied Psychology
SADAG	South African Depression and Anxiety Group
SDT	Self-Determination Theory
SCT	Social Cognitive Theory
SME	Small and Medium Enterprise
SEM	Social Ecological Model
SACAP	The South African College of Applied Psychology
SOE	State Owned Enterprise
TWH	Total Worker Health

UREC	University Research Ethics Committee
WHO	World Health Organisation

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CHAPTER 1

ORIENTATION AND BACKGROUND

1.1 INTRODUCTION

The nature of working life has changed significantly since the 1990s, driven by globalisation, economic shifts and rapid technological advances (Mokofe, 2024). These ongoing changes can bring both benefits and negative outcomes on employees' mental health. This study is driven by the urgent need backed by evidence of psychosocial strategies that enhance employee mental health and organisational performance. It is projected that the insights gained from this research will contribute to better mental health of the employees.

In this chapter, the study is contextualised by presenting its background, the problem being addressed and outlining the research questions, as well as the aim and objectives. The chapter also briefly outlines the paradigm perspective and the research design guiding the investigation. Lastly, to conclude, the chapter presents an overview of the dissertation's structure.

1.2 BACKGROUND TO THE RESEARCH

Mental health has emerged as a global workplace concern, with 62% of workers identifying it as a top challenge impacting productivity and overall work experience (Hess, 2020). From the lens of organisational psychology, mental health is recognised as vital to workforce engagement, satisfaction and retention. common work-related mental health difficulties include stress, burnout, anxiety and depression, which contribute to absenteeism, reduced performance, and high turnover (Rugulies et al., 2023; Sarkar et al., 2024). Factors such as job demands, organisational culture and work relationships are key influences on psychosocial outcomes. This research is of great significance because it provides insight into employees’ experiences of psychosocial support strategies used to enhance employees’ mental health in the workplace.

Psychosocial support refers to interventions that foster resilience, promote supportive environments and address mental health stigma. These include wellness programmes, peer support systems, manager training and shifts in organisational

culture. As mental health issues increasingly affect the sustainability of human capital, effective psychosocial interventions are no longer optional but vital (L.Stringer, 2023). The significance of the research comes from the mental health difficulties at the workplace which may result in low productivity, high absenteeism, poor morale, high attrition rates, and rising medical expenses. Despite the existence of support mechanisms including counselling services, wellness programs for employees, peer support, stress reduction programs, and flexible work schedules, there is a necessity to establish their effectiveness.

Despite growing awareness, many organisations predominantly focus on productivity rather than on psychosocial determinants of mental health (Wu et al., 2021). Moreover, existing research often focuses on individual-level factors, neglecting broader organisational influences such as management practices, culture and structural support (Boot et al., 2024). Although extensive research has been conducted in relation to employees' mental health and psychological interventions, limited attention has been given to its applicability in the telecommunication industry (Dhanpat et al.,2025). In many cases, the existing research has emphasised either healthcare or educational settings and the typical office environment, taking for granted that working conditions are identical in all sectors and ignoring the dynamics of different industries. These generalisations fail to consider the specific psychological challenges that exist in telecommunication sector.

As the result, there is a deficiency of attention to the distinct occupational risks in telecommunications that include, among others, high pressures at work, outdoor work hazards, and technological changes. This is an important aspect as the telecom industry faces certain occupational stresses not experienced by other industries.

According to the American Institute of Stress (n.d.), workplace stress is a leading cause of absenteeism and poor performance, with 77% of employees reporting having experienced burnout (Deloitte, n.d.). Poor mental health also increases healthcare costs and damages interpersonal relationships at work (Deloitte UK, 2024). By assessing current practices and identifying success factors, this study hopes to offer practical, actionable recommendations for businesses striving to create psychologically supportive workplaces.

This study on psychosocial support strategies to strengthen mental health in the workplace will likely make contributions in three areas: individual level, practical level and academical level. At the individual level, the study may enhance by identifying support strategies that can reduce stress, emotional exhaustion, burnout, and other mental issues (Dhanpat et al.,2025). At the practical level, the result may assist organisations, especially those in South African telecommunications industry, in designing psychosocial interventions, workplace mental programs, and mental health policies to create better work environments. This study may also guide managers and human resource professionals in implementing better practices for improving employee performance and well-being. On an academic level, the study will add to the already scarce literature pertaining to the use of psychosocial support measures in relation to the telecommunication sector in South Africa. Furthermore, the study may present a platform for future studies on organisational and occupational mental health, particularly with regard to developing countries.

1.3 THEORETICAL FRAMEWORK/INSIGHTS

In conducting a study, having a theoretical foundation is important for explaining the existence of the identified problem and for the implementation of the study (Sreekumar, 2023). In this study, the theoretical framework for this study draws on the Job Demands-Resources (JD-R) Model developed by Demerouti et al. (2001), and the principles of the theory of Social Support described by Cohen and Wills (1985), which provide insight into how psychosocial support strategies could foster a healthier work environment and the Organisational support theory (OST), which was introduced by Robert Eisenberger et al., (1986), and it describes that organisational commitment and performance will improve if employees have the perception that their organisation appreciates their efforts and is concerned by their welfare.

The research is built on the JD-R model, social cognitive theory, and the Organisational support theory. These theories create a comprehensive understanding of the psychosocial support interventions and their role in enhancing mental health within the workplace. As highlighted by the JD-R model, the mental health of employees is determined by a number of factors that include job demands such as workload, and other work stressors as well as job-related resources that

include social support, autonomy, and the provision of psychological assistance. In the current study, psychosocial support strategies were considered as essential job-related resources that may buffer the effects of job demands and promote better mental health and engagement in employees.

Complementing this, the concept of reciprocal determinism is central to SCT, whereby behaviour, individual characteristics, and environment act and react with one another. Regarding the present research, psychosocial support strategies such as counselling services, peer support programs, and awareness campaign can be seen as examples of the environment influencing an individual's self-efficacy and behaviour tendencies in order to ensure psychological resilience. Thus, the design of the study was influenced by SCT by focusing on both the presence of support strategies as well as their utilization by employees.

From the perspective of Organisational Support Theory, perceived organisational support influence their attitudes, commitment, and performance of employees (Eisenberger et al., 1986). Within the context of the telecommunications industry, wherein employees work under pressure and technologically intensive environments, the perception of organisational support becomes a key determinant of employees' mental health and performance. Employees who believe their organisation to value what they contribution and show concern for them tend to be highly satisfied, committed, and perform better than others (Kurtessis et al., 2017).

The concept of psychosocial support is based on a number of theories. The JD-R is particularly relevant, which implies that the presence of work resources, such as psychosocial support, can counteract the adverse effect of job demand (Bakker & Demerouti, 2007). SCT emphasise the role of supportive relationships in easing stress and fostering better mental health (Cohen & Wills, 1985). Organisational support theory (OST) adds to our understanding of how perceived organisational support impacts employees (Kurtessis et al., 2017).

The theoretical framework, including JD-R, SCT, and OST, guided the analysis of the obtained data by offering three distinct frameworks from which to interpret the data obtained. JD-R theory was useful in defining the type of work environment characterised by the organisation in terms of the job demand, which are factors that create demands on employees, and job resources, which make work easier for

employees. Self-efficacy and outcome expectations, among others, were used by SCT as indicators of how employees responded mentally and behaviourally, to the work environment and other factors related to work within the organisation. OST played its role in providing explanations regarding the impact of how employees perceive organisational support and care on employee attitudes and mental health. Reduced stress, for example, could be explained by increased self-efficacy and job resources, but also by the fact that employees felt appreciated by the organisation.

When interpreting the findings, all the three theories have been considered in relation to each other. In this respect, according to the JD-R theory, there is the requirements for psychosocial support strategies for handling difficult working situations, whereas the SCT showed the effect of these strategies on the mental health of the employees through cognitive and behavioural processes. On top of that, the OST made it possible to understand the role played by the organisational support in creating an emotional bond with the organisation.

Together, these theories imply that psychosocial support at work functions as a dual protective and motivational mechanism that helps employees respond to difficulties and enhance their engagement and productivity.

These theories collectively highlight the importance of psychosocial support strategies in the context of the workplace and mental health. They propose an important paradox for the workplace: both correcting structural issues such as workload and fairness as well as developing supportive relationships. These could include peer mentoring, employee assistance programmes, flexible hours and open communication.

By applying these theories, it is argued that the role of psychosocial support could and should be positioned within the context of a protective function that guards against workplace stressors and a proactive tool for improving mental health and sustaining employee resilience.

1.4 KEY CONCEPTS

In order to contextualising this study, it is important to define and explain the key concepts used within this study

1.4.1 Psychosocial

The term psychosocial was first introduced in the 1980s and refers to how one's internal wants, concepts and though relate to hie/her external social world (Carnevale & Cheprasov, 2023). It refers to a person's capacity to handle stress, acceptance of oneself and how inner mental functioning impacts interactions with peers, family, friends and society at large.

Stubley and McCroy (2014) defines psychosocial as the intersection of an individual's psychological and social aspects, including age, work, relationships, education and personal history, which shape their life experience. Psychosocial is a term used to describe how individual beliefs and actions are influence by social factors. It examines the way in which social environments, interpersonal relationships, culture and community affect psychosocial experiences, thinking, feeling and behaviour, and how they, in turn affect mental health and wellness. Essentially, the concept hinges on the active interaction between the social environment and the mind.

For the context of this research, psychosocial refers to conditions such as work environment, inter-personal relationships, individual psychological traits, organisational practices and policies as well as cultural factors. All these, combined, shape the attitude of employees towards their workplace and influence their overall and mental health. The purpose of psychosocial interventions, in this case, is to establish a safe and healthy work environment that fosters individual mental health and organisational efficiency.

1.4.2 Support

Support is maintaining and improving mental health since it provides individuals with the resources, tools, and inspiration to cope suitably with their mental health challenges (Felman& Tee-Melegrito, 2024). Support may be defined as providing assistance in terms of financial, social, emotion, technical or physical assistance. It might consist of being present emotionally, connecting with an individual and developing an environment of safety and empathy with or sometimes, even with solutions. Psychosocially, support is key to creating a healthy organisational culture. It allows employees to feel appreciated, listened to, and free to seek help when they need it. This kind of environment promotes open communication, reduces stigma around mental health, and encourages proactive coping strategies (Wu et al., 2021).

For the purposes of this research, support covers emotional, social, practical, technical, financial and organisational support. It is the process of creating a work environment where workers are made to feel appreciated, listened to and enabled to manage their mental health resulting in a healthier, happier workplace. The provision of assistance, resources and a friendly working environment is a significant requirement for psychosocial support interventions in the workplace. These parameters help employees manage stress, become resilient and maintain overall well-being (Wu et al., 2021).

1.4.3 Strategies

According to Horwath (2020), strategy is defined as the intelligent allocation of resources through a deliberate system of actions designed to achieve a specific goal. It includes determination of how best to use time, talent and funds to yield the optimum outcome. Similarly, Bukhari (2019) also indicates that strategy determines an organisation's long-term range and focus and how the resources need to be deployed to satisfy stakeholder requirements and evolve as per the requirements of the marketplace. This emphasises the future direction of strategy and its critical role in guiding decisions and resource allocation with an organisation. In essence, strategy can be defined as a deliberate plan of action aimed at achieving a specified goal. Strategy involves situational analysis, goal setting and selecting the most suitable means or actions to achieve the desired outcome. For purposes of this research, strategy entails several key elements: assessment and analysis, goal setting, intervention design, planning and implementation, monitoring and evaluation, sustainability and adaptation. Strategy is a scientific and comprehensive approach to promoting mental health in the workplace, aiming to implement meaningful, lasting change through systematically designed and well-implemented initiatives.

Boyles (2022) also defines strategy as a general direction for an organisation and its various units to achieve a desired future state. It is the outcome of a comprehensive strategic planning process, aligning organisational functions and utilising available scarce resources to meet existing as well as long-term objectives. Therefore, in this research, strategy is not just conceived as a theoretical framework but more so as an applied, practical blueprint. It is needed to guide interventions that foster

worker well-being, construct a healthy workplace culture and ultimately ensure organisational success.

1.4.4 Mental Health

Mental health is an individual's emotional, psychological and social well-being, and it plays a key role in how an individual's behave, think and feel, cope with stress, interact with others and make decisions (WHO, 2022). Being well mentally, according to Holland (2023) enables one to live a tolerably happy and healthy live and increases resilience, the ability to cope with life's challenges and setbacks. Tee-Melegrito (2024) also emphasises that mental health concerns the way people think, feel, and behave.

Mental well-being is important for overall well-being and quality of life. Mental health enables an individual to build positive relationships, excel professionally and perso nally and contribute positively to society (Holland, 2023). In general, mental health forms the foundation for an individual's daily functioning. It determines emotional stability, psychological functioning and social adaptability. Good mental health equips individuals to deal with stress, get along with others and accomplish daily tasks with competence and confidence.

In the study, mental health specifically refers to the psychological, emotional and social well-being of employees. It encompasses their ability to cope with good workplace relationships, maintain productivity and adapt to challenges or organisational adjustments. Having a healthy mind in the workplace promotes resilience, enhances job satisfaction and safeguards against mental health disorders such as burnout, anxiety, and depression. The intention of this research is to provide evidence-based guidelines for improving mental health in the workplace. These solutions are not only meant to address short-term mental health problems but also to establish a long-term well-being culture, engagement, and productivity within the workforce.

1.4.5 Workplace

Workplace is hereby referred to as the physical or virtual area where employees perform their work activities. It includes traditional office spaces, remote workplaces, co-working areas, and other physical environments modified according to the nature

of specific jobs (Wahocho, 2024). In the contemporary, rapidly transforming society, marked by technological advancement and evolving work notions, it is essential to make sense of the workplace nature and dynamics.

The Labour Relations Act 66 of 1995 provides a definition of a workplace as the location or locations where the employees of an employer work. It further distinguishes between operations that are differentiated due to disparities in size, function or locations where the employs work. It further distinguishes between operations that are differentiated due to disparities in size, function or organisational structure, each of which constitutes a separate workplace (Erasmus et al., 2018).

A workplace is not only a physical area in which individuals carry out the work expected by their employer, but also a broader social and organisational setting. Depending on the type of job, it can range from indoor office environments to outdoor working areas. The workplace significantly influences employees' productivity, job satisfaction and overall well-being through physical conditions, organisational culture and interpersonal relationships.

Briefly, the workplace has both tangible and intangible aspects, including physical environment, organisational culture, interpersonal relations and the legal framework that directs daily operations. For the purpose of this study, the workplace is defined as the organisational and physical setting in which employees carry out their tasks. This not only includes the physical built environment, but also the internal culture, interpersonal relationships, policies, and procedures that shape employee experiences. The workplace is a priority domain in the implementation and effectiveness of psychosocial support interventions, as it is where employees are exposed to both stressors and support systems. A mentally healthy and supportive workplace environment plays a crucial role in fostering well-being, facilitating good relationships and minimising factors that can adversely affect mental health.

1.5 PROBLEM STATEMENT AND RESEARCH QUESTIONS

1.5.1 Problem Statement

Despite growing global attention to workplace mental health, many existing psychosocial support strategies suffer from inadequate implementation, cultural insensitivity and long-term inefficacy (WHO, 2022; LaMontagne et al., 2021). There

exists a significant gap in the development of flexible, evidence-based models that successfully meet the diverse needs of employees across varying sectors and cultural contexts (Castillo et al., 2019). Also, there is a noticeable scarcity of high-quality studies assessing the cost-effectiveness and component-level impact of such interventions, particularly within non-Western and low-to-middle-income economies (Mutyambizi-Mafunda et al., 2023). This deficiency inhibits organisations from making informed decisions and achieving sustainable mental health outcomes in professional settings.

This study explores the hypothesis that psychosocial support interventions can serve as effective mechanisms for improving workplace mental health. While the significance of mental health is widely acknowledged, existing interventions often fail to adequately cater to diverse or underserved populations. Despite heightened awareness, numerous workplaces lack comprehensive strategies to support mental health, with stigma, limited resources, inadequate leadership support and insufficient training continuing to hinder progress. This research focuses on understanding the employees experience of psychosocial support strategies for improving mental health at the workplace, reducing stigma and enhancing access to care.

Mental health issues are inherently linked to social, economic and cultural determinants, contributing to the rising prevalence of disorders such as anxiety, depression and stress-related conditions. These challenges affect an individual's quality of life, productivity and interpersonal relationships. Despite growing recognition of mental health concerns, access to adequate care remains constrained.

Existing international research has demonstrated that psychosocial support interventions, such as community-based counselling, peer support groups and structured social services, constitute a fundamental component in improving mental health and reducing reliance on traditional clinical approaches (Bragin, 2023). These interventions are recognised for their accessibility, cultural adaptability and cost-effectiveness. Furthermore, empirical studies have established that psychosocial strategies play a crucial role in fostering resilience, facilitating trauma recovery and mitigating mental illness within supportive environments.

While prior studies affirm the efficacy of psychosocial support strategies across various contexts, there is still limited knowledge of how these interventions can be optimally adapted for distinct populations, particularly in settings where mental health stigma is pervasive, or healthcare services are limited.

This research is crucial to ensuring that psychosocial support techniques are culturally relevant, contextually relevant and long-lasting. This research seeks to contribute knowledge that will enable employees in accessing inclusive, effective and sustainable mental health care, especially in settings where stigma and resource constraints remain significant challenge.

1.5.2 Main Research Question

Based on the research problem, the study's primary research question was framed as follows: *What are employees experiences of psychosocial support strategies in improving mental health in the workplace?*

To address the main research question, it was necessary to consider the following sub-questions.

1. What are the current psychosocial support measures in the workplace?
2. What are the employees' views on mental health care?
3. What psychosocial support systems are required to support employees in the workplace?

1.5.3 Aim and Objectives

Based on the research question, this study aims to evaluate existing psychosocial interventions for workplace mental health and develop a culturally adaptive, evidence-based framework to improve their effectiveness, sustainability, and applicability across diverse organisational contexts.

The research objectives are:

1. To explore current psychosocial support measures in the workplace in order to identify efficiencies, exclusivity, and gaps.
2. To ascertain how employees view mental health care.
3. To offer recommendations on psychosocial support systems required to support employees in the workplace

1.6 RESEARCH METHODOLOGY

The design, approach, and strategy of the research project are all described in this section. According to Byrd (2020), researchers are expected to provide details on the logistical procedures to be used to implement the study design. A brief outline of the paradigm, the research approach and research design are presented as well as the methods that direct the entire research process.

1.6.2 Research Paradigm

A research paradigm is the underlying beliefs and assumptions on which the researcher relies to determine the research topic and approach (Byrd, 2020). This study supports the use of an interpretivist paradigm, exploring the subjective-belief approach to understanding human experience more broadly. It involves understanding how participants' views relate to one another in terms of interpreting their surrounding atmosphere (Byrd, 2020; Kivunja & Kuyini, 2023). Accordingly, the researcher engaged closely with participants, listening to their views and interpreting their meaning within the research context. Information was gathered from employees familiar with the organisational setting to address the research question. The study examined employees' experiences of psychosocial support strategies aimed at improving workplace mental health and considered employee perspectives to inform recommendations for enhancing the organisation's support systems.

The interpretivist paradigm focuses on understanding individuals under their unique circumstances rather than applying universal laws, recognising the importance of situational factors in addressing problems (Byrd, 2020; Kivunja & Kuyini, 2023). In validating research in the interpretivist paradigm, trustworthiness and authenticity are assessed using Guba's criteria, including credibility, transferability, dependability and confirmability; all of which were applied in this research. The interpretivist paradigm plays a regulatory, not a radical, role in describing organisational reality. In this research, demotivated employees were noted, and recommendations for improvement were sought, but in a non-critical manner. In this regard, the interpretivist paradigm was applied, allowing employees to express their needs while the researcher analysed and interpreted psychosocial support strategies provided by the organisation.

1.6.3 Research Approach

The qualitative research approach used in this study usually involves a limited number of cases or participants (Byrd, 2020). Qualitative research prioritises words and themes over numerical data, in contrast to quantitative methods (Byrd, 2020).

Understanding human behaviour and attitudes in natural settings is a key component of the qualitative approach (Braun & Clarke, 2021). As a result, the research sought to gain a deeper insight into psychosocial support strategies that could enhance mental health in organisational settings.

1.6.1 Research Design

The research designs serve as a guideline in data collection, as well as in the analysis of that data (Byrd, 2020). According to Creswell and Creswell (2018), a research design structures the research process by defining the purpose, location, participants, research methods and analysis strategy. The study research design allows for an in-depth investigation of data, and as suggested by Byrd (2020), the researcher typically does not initially know what they are researching. The research design was informed by the researcher's familiarity with the employees and experience within the organisation.

1.6.4 Research Methods

Research methods involve the specific techniques, approaches and tools used to collect and analyse data to address research questions and achieve the objectives of a study (Creswell & Creswell, 2018). The techniques involve not only the data-gathering approach but also the participant inclusion process within the data-gathering approach, as well as the participant inclusion process in a research study (Byrd, 2020). In a research study, the methods section describes the availability of the research site, participant selection, and data collection methods. In the study, access was sought in accordance with the research design through permission and consultation with relevant parties. Inclusion of the organisation was sought right from the beginning, with the objective of cultural background, site, and participant selection. In the study, these research methods aimed at determining the experiences, perceptions, and meanings of the research participants within a qualitative paradigm. This section outlines the methods employed in the study,

including data gathering and analysis of psychosocial approaches at workplaces. This section also outlines the use of individual interviews, participant engagement approaches, and the instruments employed in the qualitative analysis of data.

1.6.4.1 Sample

Employees from the SOE Operations and Maintenance Department (O&M) were sampled according to the inclusion criteria, which ensured that there was representation from all genders and racial groups to guarantee a range of viewpoints.

The researcher engaged the Sales Department (see Appendix D) to ask the gatekeeper to inform the employees about the research and ask the employees to contact the researcher if they wanted to participate. To choose people best suited to answering the research questions and objectives, purposeful sampling was used (Byrd, 2020). Additionally, convenience and purposeful sampling were applied. Convenience sampling made it easier to find people who were most available and eager to participate, whereas a purposeful sample guaranteed that participants had the requisite experience and contextual knowledge (Byrd, 2020). Instead of using predetermined numbers, sample size in qualitative research is based on the goal of the study, the type of inquiry, believability and the available resources (Dursun, 2023). As a result, it was not necessary to predetermine the population or sample size for this study.

The inclusion criteria below in section 3.4.2.1 defined the study population, specifying employees from the O&M Department with at least three years in the organisation and two years in the same department (Dursun, 2023). Diversity across genders and racial groups was ensured, with participants recruited to participate in semi-structured interviews in line with qualitative research that values depth of insight over sample size.

An email was sent to the employees by the gatekeeper from the Sales and Marketing Department, who was not affiliated with the researcher or participants. This was done to reduce bias and maintain an ethical recruitment process. The email reinforced the issue of confidentiality and voluntary engagement by summarising the study and encouraging staff me members to directly contact the researchers.

Employee participation was elicited through direct communication via email or phone to express interest, and a participant information sheet was also utilised as a measure of clarity and apparently transparent research methods.

Prospective participants were invited to contact the researcher via email or telephone if interested in the study. The researcher followed up by introducing herself and arranging Microsoft Teams meetings at times convenient for each participant. Interviews were conducted based on participant availability, and data saturation determined the final sample size.

1.6.4.4 Data Collection

Interviews are an efficient tool used in gathering qualitative data; they also enable in-depth analysis (Byrd, 2020). A pilot test was conducted involving two non-permanent staff members who were not part of the target research sample. The goal was to determine if data could be collected validly. The researcher also examined the feasibility of the study, the suitability of conducting interviews via Microsoft Teams, and whether the selected research instrument would be effective (Dursun, 2023).

In this research process, semi-structured interviews (see Appendix H) were conducted via Microsoft Teams, while one was conducted over the phone. The use of an interview schedule ensured consistency through predetermined questions, while still allowing flexibility to guide rather than constrain the discussion. With participant consent, all interviews were recorded, supplemented by researcher notes and subsequently transcribed for analysis (Dursun, 2023).

1.6.4.5 Data Analysis

In this study, thematic analysis was used to explore the data, identify key findings, and to develop recommendations on psychosocial support techniques for mental health in the workplace. Data analysis, according to Dursun (2023), may involve managing raw data derived from audio-recorded and transcribed interviews, with themes extracted from the coding of each transcript. It is known as thematic analysis, a widely used qualitative approach that highlights meaningful patterns within a dataset, as described by Dursun (2023). Thematic analysis was used in analysing the data based on methodological framework provided by Virginia Braun and Victoria

Clarke (2021), which is made up of six steps which are discussed in more detail in Chapter 3.

1.7 MEASURES FOR TRUSTWORTHINESS

In qualitative research, Trustworthiness plays a role in assessing the rigor and credibility of the study (Dursun, 2023). It is essential to evaluate whether the selected methodology is appropriate for the research. In the current research, trustworthiness was established using the four steps outlined in Dursun's (2023) concept: credibility, transferability, dependability and confirmability.

1.7.3 Credibility

Credibility relates to the extent to which the research findings can be trusted and accurately reflect participants' experiences. In this study, efforts were made to minimise bias throughout the research process (Dursun, 2023). To strengthen the credibility of the research, the researcher ensured that there was integrity in the conclusions that were drawn. Additionally, there was prolonged engagement with participants, peer debriefing, member-checking and journalling.

1.7.4 Transferability

Transferability is concerned with the applicability of research findings to other contexts or under different conditions beyond the original study (Dursun, 2023). This study conducted structured interviews, to enhance workplace mental health. The research process was thoroughly documented, enabling other organisations to draw on these findings to strengthen employee mental health initiatives. In doing so, organisations are provided with a comprehensive evidence base to inform decisions about improving psychosocial support strategies.

1.7.5 Dependability

In qualitative research, dependability is concerned with the systematic documentation of all phases of the study, including the formulation of the problem, participant selection, data collection, interview transcripts and data analysis, to indicate that proper procedures were followed. This study ensured dependability by systematically documenting each phase, safeguarding the transcripts and

maintaining consistency throughout the methodology. All records ensured accuracy of the research process.

1.7.6 Confirmability

Confirmability is an aspect that focuses on objectivity and reduces researcher bias in qualitative studies (Dursun, 2023). In this study, confirmation was strengthened through obtaining participants consent while audio recordings of interviews allowing the researcher to revisit the audio and verify the accuracy of the collected data.

1.8 ETHICAL CONSIDERATIONS

Ethics comprise a set of moral principles that establish rules and expectations for appropriate conduct toward research participants, employers and employees (The South African Ethics in Health Research Guidelines, 2024). Throughout the research process, the researcher upheld ethical standards by ensuring that all participants and stakeholders, including employees, were treated with dignity and respect. Ethical principles are fundamental in safeguarding the rights and well-being of research participants (Dursun, 2023). They also serve as standards by which researchers evaluate their behaviour toward stakeholders and participants, while ensuring their own protection throughout the research process (The South African Ethics in Health Research Guidelines*, 2024).*

For this study, an ethical clearance certificate (see Appendix A) was obtained from the College of Human Sciences (CEHS), where the researcher is enrolled in the Master of Psychology program. The approved proposal was subsequently shared with the SOE to facilitate data collection. Ethical considerations included safeguarding participants from harm, ensuring voluntary participation and informed consent, protecting privacy and confidentiality, avoiding deception, maintaining anonymity, and addressing issues such as compensation, debriefing, researcher competence, collaboration with stakeholders and the responsible publication of findings (Byrd, 2020).

Participants protection was prioritised from any potential harm, as the focus was on generating suggestions to enhance psychosocial support strategies for improving workplace mental health. Victimisation was not possible, and participation was entirely voluntary, with no individual being compelled to take part. Full details of the

study were provided, ensuring transparency and preventing any deception. Participants retained the right to withdraw at any stage of data collection or interviews.

Informed consent (see Appendix F) was obtained after participants were given sufficient information regarding the study's purpose, duration, procedures, potential benefits and risks and the researcher's credibility. All data shared were treated as private and confidential, with participants retaining control over when, where, and to what extent their views and behaviour were disclosed. Confidentiality was maintained by restricting access to the researcher and supervisors, while anonymity was ensured by replacing names with numerical identifiers so that no participant could be identified in the final study.

1.9 CHAPTERS DIVISION

Chapter 1 introduced the study present the background information. It outlined the main issue being addressed, the reason for conducting this research. The research questions, study purpose and research objectives were presented. The chapter then provided a brief outline to the research methodology which included the paradigm perspective and the research methodology and design, which is described in detail in Chapter 3.

Chapter 2 lays out the contextual, theoretical and conceptual underpinnings of the examination of psychosocial support interventions in promoting workplace mental health. It examines the nature, relevance, and dynamics of workplace mental health and discusses the benefits of effective psychosocial support. The literature review synthesises existing literature to establish the foundation of the study and identify areas to which the research seeks to add.

Chapter 3 describes the research methodology adopted for this study.

Chapter 4 presents findings and interprets them considering the research questions. outlines the findings from interview analysis, organises them under themes and sub-themes, and the following chapter discusses these findings against the backdrop of the literature reviewed.

Chapter 5 summarises key findings, draws conclusions and offers recommendations. concludes the research project and provides recommendations for future, including timelines and costings.

1.8 CHAPTER SUMMARY

In this chapter, the background and motivation for the research were introduced, along with the key issues to be addressed. This was followed by presenting the research questions, aim and objectives. It also presented an outline of the research comprising the research paradigm, research approach and research design. Research methods were also outlined and included sampling, data collection and data analysis. Finally, an outline of the chapters that follow was provided. This study focuses on developing strategic support mechanisms to improve mental health in the workplace.

CHAPTER 2

THEORETICAL FRAMEWORK AND LITERATURE REVIEW

2.1 INTRODUCTION

The aim of this chapter is to provide a general and critical overview of the existing theoretical and empirical literature on psychosocial support mechanisms that promote workplace mental well-being. By exploring this body of knowledge, the chapter aims to clarify the conceptual foundations and theoretical frameworks needed to discuss the research topic. The chapter further offers an explicit situational and contextual foundation for the research, particularly by tracing the evolution of mental health discourse in work settings from an international to a more specific South African context.

There have been a lot of studies done in the field of organisational research related to psychosocial support since it plays a role in shaping employees' performance and mental health. There are stressors which affect employees not only psychologically but also socially within the working environment (APA, 2024). This chapter is thus a crucial platform for understanding how psychosocial support can be harnessed to improve mental health outcomes as well as organisational sustainability.

2.2 CONTEXTUAL FRAMEWORK

A contextual framework is the construction of a structural lens through which the foundation for the study can be viewed. In this section, psychosocial support in the workplace is discussed from both an international and a local perspective.

2.2.1 Psychosocial support in the Workplace

Psychosocial support can be defined as the process by which one receives assistance from an emotional, social, and psychological point of view to cope with

stressful situations and enhance functioning (Inter-Agency Standing Committee, 2007). Psychosocial support involves two main forms: formal organisational psychosocial support (such as counselling services and wellness programmes) and informal psychosocial support (such as supervisory and peer support).

Psychosocial support can be seen by different scholars in various ways. To some, it can be viewed as part of organisational support theory, whereby employees feel and perceive that the organisation values their mental wellbeing (Mori et al., 2024). Others focus on how psychosocial support encourages resilience and coping with stress. Regardless of this disparity in perception, there seems to be consensus on how psychosocial support considers psychological and social aspect of support.

However, there is no universal consensus on its definition in the academic literature, which explains the inconsistencies related to the use and measurement of psychosocial support in various scholarly works (Miller et al.,2021; Augustinavicius et al.,2018). Psychosocial interventions are becoming more and more recognised in the workplace environment as an important part of the strategy that enhances mental health. Such interventions are used by organisations to address psychosocial needs.

This aspect of support has become even more critical for professionals operating within high-pressure environments because they face emotional and psychological stress. Psychosocial support not only benefits the individuals, but it can also help organisations operate effectively. Nonetheless, despite growing recognition, many organisations struggle to implement effective and accessible support systems, particularly in resource- constrained environments.

2.2.2 International Overview

The conversation about workplace mental health has changed from being primarily about curing illness to being more proactive and focused on fostering well-being on a global scale (Goetzel, 2018), The substantial economic and social costs of mental health disorders are becoming more widely acknowledged by organisations in developing economies. Research from the International Labour Organisation (ILO) and the World Health Organisation (WHO) (2022) emphasise workplace stressors and how they affect worker productivity and retention. For instance, a 2019 WHO report calculated that the annual lost productivity costs of anxiety and depression to the world economy are $1 trillion.

2.2.2.1 WHO Guidelines: Mental Health at Work

The WHO guidelines from 2022 are evidence-based recommendations to promote mental health in the work setting, adopting strategies that are both preventive and responsive (WHO, 2022b). Psychosocial risk management principles are also emphasised as fundamental to promoting mental health in the work setting. Sweden adopted strategies that recognise the integration of principles of psychosocial risk management into occupational safety laws to reduce stressors in the work environment. This is complemented by the emphasis on psychological health and safety principles in the Canadian approach to establishing the parameters of organisational management. Other strategies underpinning support strategies provided in the framework incorporate the use of EAPs, mental health days as part of work leave policies, and trauma-informed management training as strategies to support mental health needs of employees who have experienced trauma. A qualitative study found that while workplace mental health interventions such as digital support systems offer flexibility and convenience, employees often struggle with time constraints and engagement barriers (Carolan & de Visser, 2018).

At the organisational or work setting level, job redesign, workload management strategies emphasising work-life balance and autonomy are strategies provided to minimise the work setting as a source or contributory factor impacting the mental health of employees. Campaigns that target reducing mental health stigma and developing psychological health and safety standards are also designated goals. Overall, this framework is an integrative approach to mental health protection at work that stresses prevention, support and cultural change.

2.2.2.2 ILO Frameworks on Mental Health in the Workplace

Increasingly, the ILO has also incorporated concepts of mental health support in its occupational safety and health conventions and strategies, with their partnership in 2022 with the WHO further enhancing changes in policy at the country level WHO/ILO, 2022). Most countries have responded to this trend by developing frameworks to address psychosocial risks in working environments, with Sweden pioneering Human Resource (HR) law in 1974 that encompassed cooperation between social partners and managerial accountability for governing these risks (Boot et al., 2024). A study by Majikijela et al., (2025) found that employees experienced stigma and inadequate organisational support after returning from

mental health challenges, highlighting gaps in sustained psychosocial support systems.

Studies have clearly established the constructive role of psychosocial support in employee well-being across most working environments, with evidence from the American Psychological Association (APA) showing that flexible working hours and access to mental health support are effective in reducing burnout and increasing job satisfaction (Smith, 2021). However, despite such significant improvement, there still appears to be an implementation gap, where well-cited strategies and manuals are never effectively implemented to bring adequate change to the organisational setup.

2.2.3 The South African Context

In South Africa, work related stress is influenced by unique socio-economic and organisational challenges, including high workloads, inequality and job insecurity. These factors increase the importance of psychosocial support in promoting employee mental health.

Some studies have been conducted on the topic of mental health of employees and organisational support in South Africa, but there appears to be limited work on the topic of psychosocial support. Moreover, the provisions of support by organisations due to the existence of psychosocial issues is usually hampered by lack of resources. Such context – specific studies will help fill a gap that currently exist in the literature on this issue.

While general global trends provide a foundation for how workplace mental health may look, the South African context has very specific challenges and opportunities shaped by its complex socio-economic environment. High levels of unemployment, inequality and social and political instability contribute to increased workplace stressors. While there is relevant legislation, such as the Occupational Health and Safety Act (OHSA) in South Africa, which can be interpreted to include psychosocial hazards, there is no specific, enforceable legislation or widely applied national guidelines on mental health in the workplace. This policy gap is further exacerbated by a dearth of comprehensive research; existing evidence has been anecdotal or limited to small-scale studies illustrating an increasing trend of burnout, stress and anxiety among employees. A 2024 survey by the South African Depression and Anxiety Group (SADAG) indicated that many South Africans consider work stress a

leading cause of mental illness (Business Day, 2024), further emphasising how pressing it is to gather updated and systematic data to directly inform policy and practice. Research is South Africa shows that workplace mental health challenges such as anxiety and burnout are widespread, emphasising the need for context-specific psychosocial interventions (Dhanpat et al., 2025).

Thus, the lived reality in most South African workplaces reflects a disconnect between recognising the importance of mental health and providing adequate support mechanisms. Few organisations have specific mental health policies, and where they exist, they are often under-resourced or poorly communicated. Persistent stigma surrounding mental health further deters employees from seeking assistance, creating an empirical vacuum where the need for intervention is huge, but the strategic, evidence-led response remains negligible. Literature consistently demonstrates strong international support for proactive psychosocial interventions; yet little research has been conducted to determine which approaches are most effective within South Africa's socio-economic and cultural context. In a qualitative South African study, employees identified job and personal resources as critical to their wellbeing, highlighting that insufficient organisational support contributes to burnout and poor mental health outcomes (Gauche et al., 2017).

It is against this background that the present study sought to explore what psychosocial support interventions employers can realistically implement in order to enhance workplace mental well-being and, in turn, advance organisational goals. In addressing this problem, this study thus hopes to deliver practical, evidence-based conclusions appropriate to the South African scenario, thereby contributing to the broader understanding of workplace mental health in developing economies.

2.3 THEORETICAL FRAMEWORK

A theoretical framework is the foundational structure of a research study, serving as a ‘blueprint’ that grounds the investigation in existing, validated theories. This dissertation is underpinned by a multidisciplinary theoretical framework drawn from psychology, sociology, and organisational theory to describe workplace mental health. The evolution of workplace mental health interventions requires a combined theoretical foundation that captures the complex interactions among individual, interpersonal and system issues.

2.3.1 Transition from Biomedical to Holistic Paradigms

Historically, mental health in the workplace has been addressed using a biomedical and pathological approach, focused on the diagnosis and treatment of mental illness by reactive methods like EAPs (Black Dog Institute, 2025). However, recent research and policy (Mofatteh, 2020; WHO, 2022a&b) have required moving away from reactive and biomedical models towards preventive and organisational-level approaches to emphasising the importance of psychosocial work conditions, culture and leadership in contributing to employee mental health.

2.3.2 Multi-Theoretical Integration

Multi-Theoretical Integration involves the integration of a range of appropriate theoretical models, as depicted below:

- **Social Support Theory**

Social support theory proposes that social connections act as buffers to stress and play a significant role in mental health. In organisational contexts, support from colleagues and supervisors has been shown to mediate organisational justice perceptions and reduce psychological strain (Drageset, 2021).

- **Job Demands-Resources (JD-R) Model**

At the core of burnout and engagement theory, the JD-R model posits that job demands (for example, workload, time pressure) lead to energy depletion, but job resources (for example, autonomy, feedback, support) drive motivation and engagement (Bakker & Demerouti, 2017). The model is very valuable for identifying leverage points for intervention.

- **Job Demand-Control-Support (JDCS) Model**

An extension of the JD-R model, the JDCS model distinguishes job control and social support buffering effects in situations of high demand. The model provides a theory of how control over the task and supportive relationships relieve the aversive influence of job stressors (Portoghese et al., 2020).

- **Person-in-Environment Perspective**

This sociological perspective appreciates the interactive dynamic between people and their environments, and the person-environment fit is thought to be instrumental in mental health (APA, 2024). It emphasises the importance of matching job positions, values and personal abilities to improve well-being.

- **Cognitive Behavioural Theory (CBT)**

CBT offers an individual-level model for intervention in altering unhealthy patterns of thinking, enhancing emotional control, and augmenting coping abilities in high-stress work environments (McLeod, 2023). It is supportive of a wide variety of evidence-based workplace mental health interventions.

- **Self-Determination Theory (SDT)**

The theory emphasises three fundamental psychological needs: autonomy, competence and relatedness as core to intrinsic motivation and psychological flourishing (Lopez-Garrido, 2023). SDT is particularly effective for designing motivational and leadership practices in the workplace.

- **Positive Psychology**

Beyond remediation, Positive Psychology seeks to enhance workplace strengths, hope, and meaning. It provides tools for building psychological flourishing and maintaining organisational well-being cultures (Sutton, 2025).

- **Systems Theory**

Systems Theory conceives workplace mental health as a complex, emergent outcome of interdependent systems in an organisation (Patel, 2024). Systems Theory can accommodate whole-system, multi-level interventions, valuing the ripple effect of change across functions, teams, and leadership configurations.

- **Social Cognitive Theory (SCT)**

SCT highlights the significance of observational learning, self-efficacy, and reinforcement in building behaviour and attitudes. SCT is most relevant for designing peer-based mental health interventions and training programmes (Nickerson, 2025).

- **Appreciative Inquiry (AI)**

A strengths-based organisational development model, AI fosters constructive change through dialogue, teamwork and emphasising what works, rather than what is broken (Dash Bhatt & Singh, 2025). It is effective in creating inclusive, psychologically safe environments.

2.3.3 Influential Psychological Theories

This study is based on several significant psychological theories that provide a robust foundation for knowledge regarding the mechanisms of psychosocial support.

- **The Job Demands-Resources (JD-R) Model**

The Job Demands-Resources (JD-R) Model is the foundation of this model. The Job Demands-Resources (JD-R) Model assumes that job demands lead to health impairment, while job resources build motivation and involvement (Bakker & Demerouti, 2017). It assumes that all jobs contain two types of characteristics: job demands and job resources.

Job demands are those job dimensions that require sustained physical or mental effort at some cost (for example, heavy work, emotional labour, time pressure). Job resources are the job dimensions that are beneficial for fulfilling work goals, reducing job demands, and promoting personal development and growth (for example, autonomy, social support, performance feedback and opportunities for development).

According to the model, high job demands could lead to burnout and poor health, whereas a lack of job resources could lead to disengagement. On the other hand, adequate job resources could buffer against job demands and foster engagement and psychological well-being. This theory is relevant to this study because it provides a clear theoretical basis for defining and classifying the specific psychosocial support strategies employers can implement (that is, increasing job resources) to mitigate the negative effects of job demands.

- **Social Cognitive Theory** (SCT)

SCT is concerned with observational learning, self-efficacy, and reinforcement as mechanisms for behaviour change and mental health promotion (Nickerson, 2025). Developed by Albert Bandura, SCT emphasises the role of learning and modelling in human conduct. It postulates that people learn by observing others and that an

individual's belief in their capacity (self-efficacy) is at the core of their motivation and behaviour. It served as the foundation for this research's investigation of the way leadership influences organisational culture and promotes mental well-being. Healthy coping behaviours in leaders, concern for work-life balance and concern for well-being could effectively influence employee behaviour and psychological outcomes. This directly relates to the study's major problem, asking how employers could adopt strategies to promote mental well-being, as it identifies organisational role models and supportive environments as major keys.

- **Organisational Support Theory**

The organisational support theory, along with other relevant psychological theories including JD-R theory and SCT, is very useful as basis for the analysis of the issue related to the psychosocial support strategy used to improve mental health of employees. The OST states that employees perceived organisational support as an important factor affecting the employees and commitment, which positively influences the level of their psychosocial wellbeing (Eisenberger et al., 1986). JD-R theory is complementary to the organisational support theory in terms of the idea that resources at work (including supervisors support and autonomy of actions) may reduce adverse effects of job demands on the mental health of employees (Demerouti et al., 2021). Furthermore, SCT is useful because it helps explain the role of employees' belief about the self-particularly self-efficacy, which influences his or her response to stress factors and support system (Bandura, 1986).

2.3.4 A Proposed Integrated Theoretical Model

To synthesise these theoretical results, this study proposes a model that merges the provisions of the JD-R model, Social Cognitive Theory and Organisational Support Theory illustrating the flow of organisational influence on employee mental well-being.

2.3.4.1 Organisational and Leadership Factors

Leadership attitudes and behaviour, according to Social Cognitive Theory, have a pivotal role in shaping the nature and quality of support systems. SCT, as developed by Albert Bandura, posits that learning occurs in a social environment through the dynamic among personal factors, behaviour and environmental factors (Bandura, 1986). In organisational settings, leadership behaviour and organisational support

systems are powerful environmental forces that shape how individuals learn, behave and develop. Leaders, being role models, directly influence the development and effectiveness of such support systems.

2.3.4.2 Leadership Style

Leadership in an organisation is crucial for establishing a strategic vision, driving performance, and fostering a positive culture that aligns employee actions with organisational goals.

- **Supportive Leadership**

Supportive leadership helps create a trusting, collaborative and psychologically safe context, which is an indispensable precondition for the processes of modelling and learning, as explained within Social Cognitive Theory. Since people learn not only from personal experience but also from others, it becomes vital in team environments to have positive role models displayed through leadership. By promoting transparent communication, active listening and providing emotional and professional support, teams feel more connected and experience improved cohesion. Moreover, leadership described in this way has a more positive impact on the organisational learning environment by promoting psychologically safe experiments, thereby improving the organisational environment. This leadership type promotes the notion of bidirectional determinism, as introduced by SCT, whereby leadership activity directly influences team behaviour, which, in turn, influences leadership. Research has shown that the experience of wellbeing at work is heavily influenced by management behaviour and communication; lack of coherent policy results in poor organisational support perception (Department of Work and Pensions, 2026).

- **Transformational Leadership**

Transformational leaders inspire and empower followers by promoting a vision, encouraging innovation and developing individuals professionally and personally. Leaders set examples thereby strengthening observational learning as one of the SCT mechanisms.

Transformational leadership demonstrate integrity, authenticity, and commitment. In addition, it elicits intellectual stimulation and creativity and empowers individuals to take ownership of their jobs. It aligns individual objectives to broader organisational objectives. In the SCT model, transformational leadership enhances self-efficacy, an

individual's belief in their ability to achieve goals as a primary driver of performance and motivation.

2.3.4.3 Organisational Culture

In this study, organisational culture cites the shared values, beliefs, and practices that impact employee behaviour and wellbeing in the workplace. A positive and inclusive organisational culture supports the scaffolding necessary for healthy social learning. Individuals who feel represented, respected and valued are more likely to engage fully and adopt the desirable behaviours modelled in their environment. It recognises and respects diverse identities and perspectives and practices fair hiring, promotion and reward practices and cultivates a sense of belonging, shared identity and psychological safety.

In line with SCT, such environments reinforce observational learning and positive reinforcement, creating a cycle in which diversity and inclusion fuel employee engagement and development. Open communication forms the basis of feedback loops, transparency and continuous improvement. It complements SCT's observational learning principle, which holds that individuals learn by observing others and receiving feedback. It fosters two-way communication between staff and leadership. It offers chances for sharing knowledge and collaborative problem-solving, dispels confusion and induces trust. This trait enhances the social modelling aspect of SCT, observation and interaction with others in a communication environment.

2.3.4.4 Organisational Policies and Practices Diversity, Equity, and Inclusion Initiatives (DEI)

DEI initiatives are intentional practices to establish representation, fairness, and belonging at every organisational level. These practices:

- Align with addressing systemic barriers and unconscious biases.
- Foster inclusive leadership development.
- Develop opportunities for mentorship and sponsorship for underrepresented groups.

From an SCT perspective, DEI initiatives enhance vicarious learning by making diverse role models accessible, thereby expanding the repertoire of employee attitudes and behaviours that can be replicated.

2.3.4.5 Flexible Work Arrangements

A flexible work policy is crucial in this matter, as it supports work-life balance, flexibility and self-direction. This strategy is vital in shaping staff well-being and performance. This strategy is vital in shaping staff well-being and performance. Through flexible work policies, employees can adjust their schedules to suit their needs and goals, fostering self-direction and reducing stress and job dissatisfaction. Based on SCT, a flexible work policy instils the idea of agency, enabling individuals to gain control over their own behaviour and environmental modifications, thereby influencing their behavioural outcomes. Based on this, if such approaches were included in the organisational structure, they would not only ensure staff resilience but also create healthy work cultures.

Using SCT in organisational and leadership support structures, a vast tool for examination of the process of learned behaviours and their reinforcement through models has been established. Attitudinal and behavioural aspects of leadership influence organisational culture in relation to how employees engage with and respond to their environment. Transactional and transformational leadership styles in an organisational setting bring about aspects of trust and cooperation, and those of motivation and vision, respectively. In combination with supportive and motivational cultures within an organisation, these factors establish effective support structures that continuously influence learning and positive behaviours in an entity as a collective goal in pursuit of excellence in performance and its alignment with equity and well-being.

2.3.4.6 Psychosocial Support Strategies (Job Resources)

This section of the model directly responds to the research question by outlining specific strategies with which organisations can enhance employee well-being. These strategies are instantiated as job resources, factors that lower strain, enhance engagement and increase psychological health at work. Among the most critical resources are workload management to prevent burnout, role clarity to reduce ambiguity and stress, and opportunities for growth to ensure motivation and job

satisfaction. Furthermore, support from peers and management serves as crucial buffers to occupational stressors, whereas access to mental health resources, that is, EAPs and counselling, ensures prompt and professional support. Finally, autonomy and control over one's work can facilitate employee empowerment, making work easier and increasing competence and meaningfulness. Collectively, these resources provide a solid foundation for promoting well-being in organisational settings.

2.3.4.7 Employee Mental Well-being

This model demonstrates how the application of supportive workplace practices could directly impact positive outcomes for employees, including reduced stress and burnout, improved job satisfaction, increased resilience and employee engagement, and the promotion of employee psychological health. Organisations can improve the individual and collective performance of employees to ultimately create a culture of employee success by creating a focus on employee well-being.

2.3.4.8 Organisational Outcomes

The model links improved employee mental well-being to the attainment of organisational goals, such as enhanced productivity, lower absenteeism and turnover improved staff retention, improved innovation, and a positive employer brand.

2.3.4.9 Antecedents of Psychosocial Support in the Workplace

Several factors determine the provision and efficacy of psychosocial support. One major determinant is organisational culture, which is known to have an important influence on psychosocial support. For example, a positive organisational culture is more likely to encourage the management to focus on employee well-being. Leadership is another important determinant. Supportive leadership styles promote psychosocial support.

The workplace environment, which includes high job demands, workload, and ambiguous roles, also plays part in determining the need for psychosocial support. The need for such support will be even greater when employees work in environments that produce high levels of stress. However, despite the above, very little has been done to explore how these antecedents play out in particular settings, especially developing countries like South Africa.

There have been numerous studies carried out which reveal that psychosocial support is beneficial not only for individuals but also for organisation. For individuals, it leads to improve psychological mental health, decreased stress levels, and enhanced job satisfaction. For organisation, it leads to improved productivity, decreased absenteeism rates, and low turnover intention.

Moreover, psychosocial support helps employees stay engaged and become resilient, which allows them to work efficiently even in difficult circumstances. Some researchers argue that the effect of psychosocial support could be different depending on the environment, organisational setup, and individual characteristics.

This variation indicates the need for further research to better understand the conditions under which psychosocial support is most effective.

2.3.4.9 Research Gap and Justification

Although existing literature offers many contributions to knowledge about psychosocial support, some gaps persist. First, there is ambiguity in understanding the concept itself. Second, the majority of the studies done are carried out in developed countries, which makes the finding less applicable to developing countries like South Africa.

Furthermore, the existing literature fails to shed light on the way that psychosocial support works in certain work settings as well as the effect it has on the employees' welfare in such work environments. Therefore, the current research attempts to bridge these gaps through studying the issue of psychosocial support in South African work setting.

2.3.4.10 Synthesis and Link to Conceptual Framework

In summary, this theoretical framework moves beyond a simplistic individual pathology approach to a systems-level perspective on workplace mental health. It provides a clear theoretical structure that informs the entire research process, from the design of the research questions to the interpretation of the empirical findings (Creswell & Poth, 2018). It serves as a basis for discussing findings and formulating evidence-based recommendations in later chapters.

It integrates the wisdom of the Job Demands-Resources Model for formulating effective interventions, and that of Social Cognitive Theory, emphasising leadership

and organisational culture as the fulcrum. This synthesis will then inform the conceptual framework, which will translate these theoretical concepts into empirical variables and provide the empirical plan for the study. The framework is the bridge on which the entire study is built, ensuring that the study's findings are robust, relevant, and capable of informing academic theory and applied practice.

2.4 CONCEPTUAL FRAMEWORK

The conceptual framework translates theoretical and contextual knowledge into an implementable model that guides data analysis and collection. It acts as a bridge between theoretical abstraction and practice by articulating key concepts, variables, and the expected relationships between them (Byrd, 2020). This model works to address directly the central question of the research: *What is employees' experience of psychosocial support strategies for improving workplace mental health?* It also provides insight into what is currently dominant in the South African workplace.

The conceptual framework is the working blueprint for this study, serving as a central unifying bridge that transforms theoretical foundations and situational realities into an empirically testable model. It clarifies the connections between key concepts and variables directly, answering the ultimate research question. It is rooted in the theoretical 'why' of the Job Demands-Resources (JD-R) Model and Social Cognitive Theory, and in the contextual framework's practical insights, which determine the 'what' and 'where' of the study.

2.4.1 Policy and Legislative Foundations

Policy and legislation are essential to ensure legal compliance, mitigate risk, and create consistent, ethical, and efficient operations. In this case, certain Acts and Policies are pertinent to the issue of mental health in organisations.

2.4.1.1 Mental Health Care Act 17 of 2002

This Act, enacted in December 2004, was a significant step towards a human-rights-based approach, away from custodial care and towards integration across the health system (RSA, 2002). It promotes equal access to mental health care, it demystifies the roles of stakeholders, and it establishes Review Boards for protecting patient rights (Pienaar, 2025)

2.4.1.2 National Mental Health Policy Framework & Strategic Plan 2013 - 2020

According to the WHO Mental Health Action Plan, the strategic plan embraces task-sharing and integration into primary health care, thereby facilitating the adoption of global best practices for delivering mental health services (Marais & Petersen, 2015).

Despite robust legislative and policy frameworks, implementation lags persist. Its weaknesses include a small budget, human capital and weak cross-sector coordination (Morar et al.,2024). SADAG and other mental health stakeholders have criticised delays in policy updates and pushed for the application of precise, practice-based mandates, especially for employers and workplace environments (Department of Health, 2023)

2.4.1.3 National Mental Health Policy Framework & Strategic Plan 2023 - 2030

Launched in April 2023," The new framework enhances its predecessor's 12-point action plan and adheres to WHO standards on community- based, integrated mental health care (National Department of Health, 2023, p.24). "This new "Framework promotes more open monitoring systems and indicators and vows to "strengthen initiatives in the areas of prevention, promotion, and stigma reduction. (National Department of Health, 2023, p.28). "Moreover, it focuses on inter-sectoral collaboration, such as ties with "the Department of Employment and Labour", and vows to ensure "parity funding for mental health in National Health Insurance (NHI) or systemic change in mental health funding." (National Department of Health, 2023, p.30)

2.4.2.4 Framework influencing work mental health in South Africa

Understanding is needed for how legal frameworks, organisational practices, and context influence employee mental health within a hybrid workplace within the South African telecommunication sector.

2.4.2 Legal and Regulatory Framework

2.4.2.1 Occupational Health and Safety Act (OHSA) [Act No. 85 of 1993]

In South Africa, several legislative and regulatory frameworks establish employer responsibilities for workplace mental health. The OHSA Act No. 85 of 1993 obliges employers to ensure a safe environment that protects workers' physical and psychological well-being, requiring the appraisal and intervention of psychosocial risks (LabourLawLuzan, 2024). Complementing this, the SANS/ISO 45001

Occupational Health and Safety Management Systems standard of 2018 explicitly incorporates mental health into risk management processes, mandating employers to actively recognise and minimise psychosocial risks (Salt & Keil, 2023). The Employment Equity Act (EEA) [Act No. 55 of 1998] further prohibits discrimination based on mental health conditions and requires reasonable accommodations for employees with mental health impairments, such as flexible work arrangements, workload adjustments, and access to supportive services, such as counselling (Thorne, 2025; LabourLawLuzan, 2024). While the Act does not explicitly list mental health accommodations, its provisions under Section 6, which prohibits unfair discrimination on arbitrary grounds, including disability, and Section 1, which defines disability to encompass mental health impairments, place a clear obligation on employers to remove barriers and promote equity in the workplace.

2.4.2.2 Labour Relations Act

Under the Labour Relations Act, employers must enquire into mental health-related issues before disciplinary action or dismissal, and performance-related issues caused by mental health must be handled in a reasonable manner, taking into account the person's incapacity (LabourLawLuzan, 2024).

2.4.2.3 Strategic Workplace Psychosocial Support Gaps in South Africa

While mental health awareness is on the rise in South Africa, significant gaps in the literature and actual practice of psychosocial support strategies at the workplace exist. These gaps erode efforts to create inclusive, equitable and mentally healthy workspaces.

2.4.2.4 Lack of Incorporation of Psychosocial Disability within Policies of Inclusion

Although the Employment Equity Act (EEA) makes it illegal to discriminate on the grounds of disability, the act is rather ambiguous in its approach to issues of mental health. Chronic psychosocial disabilities such as bipolar illness, schizophrenia and anxiety are rarely covered in inclusion strategies in the workplace (Holness, 2016). This means that in most cases, employees suffering from chronic mental health issues are not given targeted support to meet their unique needs. This makes inclusion in the workplace more of a compliance process, as diversity and inclusion initiatives rarely focus on mental health.

2.4.2.5 Inadequate Cross-Sectoral Coordination

There is limited inter-governmental ministry, public health infrastructure and private employer coordination. Fragmentation leads to tatting among services or discontinuity gaps. Small integration between clinical mental health services and workplace wellness programs, as well as missed potential for collaborative policy making and sharing of resources (Govender et al., 2021)

2.4.2.6 Marginalisation of Marginalised Worker Groups

Existing research disproportionately focuses on formal employment sectors at the expense of (ILO, 2021). Informal workers form a large percentage of the working population in South Africa. Gig economy participants, domestic workers and low-income workers, who mostly have no access to employer-sponsored mental health programmes. These categories exhibit compounded risks, including job instability, having no benefits and invisibility on the policy agenda.

2.4.2.7 Organisational Attitudes and Cultural Stigma

Nkuna (2025) believes that stigma remains a common barrier to engaging in mental health care. Contributing reasons are sociocultural beliefs of weakness or religious failure as being associated with mental illness. Organisational culture of not disclosing or seeking help, particularly in Small and Medium Enterprises (SMEs), which are a major force in the South African economy. Insufficient studies on how legacy differences and workplace culture influence perceptions and practices of mental health.

2.4.2.8 Underrepresentation in Workplace Mental Health Research: A South African Perspective

With more literature available on workplace mental health, most current research remains concentrated in the public sector and large corporations. This narrow concentration leaves an essential knowledge gap concerning the intricate reality of:

- Small and Medium Enterprises (SMEs), which represent over 90% of South African businesses and possess unique resource constraints and organisational characteristics (Labour Guide, 2025).
- Non-Governmental Organisations (NGOs), whose mission-driven structures and often precarious funding arrangements could affect worker stress and wellbeing (Sedibe, 2021).

- High-burnout industries such as agriculture, retail, mining and construction, where challenging physical environments, irregular hours, and inadequate job security generate acute mental health hazards (African Mining, 2025).

Besides, contemporary evidence is inclined to overlook the contributions of organisational culture and structural hierarchy to mental health outcomes (Joyce et al., 2022). Little variation is experienced in how mental health conditions arise and are dealt with in:

- Hierarchical compared to flat organisational cultures, where communication style and power dynamics play a major role in psychological safety and access to support (Routledge,2023).
- Urban versus rural workplaces, where physical remoteness, infrastructure limitations, and dominant cultural values concerning mental health services might differ significantly (HealthMag, 2023).

This knowledge gap further underscores the need for a more divergent and context-specific approach to workplace mental health, extending beyond conventional organisational forms, industries, and cultural environments into the academic literature (Nkuna, 2025).

Contemporary workplace mental health intervention literature is dominated by an emphasis on outcome measures, for example, gains in productivity, levels of absence and employee engagement, with relatively little focus on examination of the process elements of implementation. This limited assessment approach overlooks a range of important dimensions, such as implementation processes, which describe the specific steps and organisational mechanisms through which the intervention is put into practice. The stigma of mental illness, managerial support, confidentiality strategies and workplace communication norms are only rarely explored, though highly influential on intervention impact. Too little attention is given to the effects of organisational culture differences, sector-specific constraints and geographical variations on the consistency of delivery and impact.

Compounding this deficiency is a minimal assessment of organisational readiness. There are few empirical assessments of whether institutions possess leadership commitment, policies, and budgetary allocations to sustain psychosocial care systems in the long term.

Moreover, the absence of worker voice, particularly from historically marginalised and oppressed populations, is a critical shortcoming in the design and evaluation of interventions. By failing to place workers' lived realities at the forefront, extant research can perpetuate exclusionary practices and neglect context-driven demands central to programmatic success.

These gaps underscore the need for a process-informed, participatory, and context-sensitive research agenda to better comprehend the complexities of workplace mental health that go beyond metrics.

A further gap is the absence of an analysis of organisational readiness. There are limited empirical studies that assess whether institutions possess the leadership commitment, policy frameworks, and resource endowments necessary to sustain psychosocial support systems over the longer term (Gilek, 2023).

They call for an imperative for a participatory, process-focused, and context-focused research agenda, one capable of transcending metrics to understand the complexity of workplace mental health.

2.4.3 Synthesis and Theoretical Perspective

The promotion of workplace mental health through psychosocial support strategies is a multi-dimensional framework that combines empirical evidence and theoretical frameworks. For the South African setting, this synthesis must be undertaken at the interface between international currents in mental health, national socio-economic realities, and implementation practices.

Several overarching themes emerge:

- General frameworks, such as the Job Demands-Resources (JD-R) model and the Social Ecological Model (SEM), offer insightful lenses for analysing how work stressors and sources of support interact to impact employee wellbeing (Bakker & Demerouti, 2007; Bronfenbrenner, 1979).
- Local realities, e.g., high levels of unemployment, economic inequality, and stigma around mental illness, shape the viability and adoption of psychosocial interventions (De Jesus & O'Neil, 2024; Sedibe, 2021).
- Deliverables must be culturally appropriate, including organisational readiness and employees' voice, especially for marginalised populations, to

ensure sustainability and equity in mental health services (Gilek, 2023; Marange et al., 2024).

The global literature supports the precedence of psychosocial support arrangements such as EAPs, peer support groups, flexible work arrangements, and leader-driven mental health programs as core to the development of workplace well-being. These interventions have been shown to reduce burnout, enhance job satisfaction, and foster resilience across a range of organisational contexts (WHO, 2022a&b).

However, in the South African context, the implementation of such strategies remains spotty and uneven among industries. While multinationals increasingly meet global best practices, SMEs, informal enterprises, and gig apps remain behind.

Contributing factors include:

- Critical barriers undermine the effectiveness and accessibility of workplace mental health interventions. Most SMEs, with their limited resources, cannot afford to implement comprehensive programs, which require sustained investment and infrastructure (Labour Guide, 2025).
- The cultural stigma and low levels of awareness further hinder employees from acknowledging or disclosing their mental health challenges, further reducing program uptake and impact (Bam, 2025; Humanitas, 2024).
- Most interventions are under-researched in local contexts and often do not consider cultural norms, language diversity, and socio-economic realities (Bam, 2025; Grobler, 2020).

Such neglect reduces both relevance and effectiveness; therefore, it calls for context-sensitive approaches that address resource constraints, challenge stigma, and embed local cultural and social dynamics into workplace mental health strategies.

2.4.4 Dimensions of Psychosocial Support Strategies and Their Impact on Employee Mental Well-being

According to the JD-R model, Psychosocial Support Strategies are postulated as Job Resources that are key to achieving work goals, reducing job demands, and fostering personal growth. The study explored the strategies across three related dimensions:

2.4.4.1 Organisational-Level Support

The organisation now faces a line of work-related problems, primarily due to low employee motivation. Indicators of the issue include late arrival to work, frequent complaints about company culture, and general employee discontent. All these indicate potential inadequacies in the organisation's psychosocial support role.

A 2024 systematic review of 43 Total Worker Health (TWH) interventions provides robust evidence for comprehensive organisational initiatives combining personal-level support systems with structural design enhancements. Programmes incorporating elements of workload adjustment, job redesign, increased role clarity and participatory decision-making, the review argues, consistently yield measurable improvements in employee mental health, occupational safety, and general well-being (Leso et al., 2024).

These findings underscore the efficacy of a two-level approach that concurrently attends to individual and organisational domains in developing psychologically safe and resilient work environments. By combining health promotion and workplace design, TWH interventions not only minimise chronic disease and injury risk factors but also enhance employee engagement and long-term sustainability in complex occupational settings.

These are formal policies and mechanisms implemented by the employer. Such as flexible working, mental health leave, comprehensive EAPs and well-being promotion programmes.

2.4.4.2 The Evolving Landscape of Workplace Mental Health Interventions

New findings from a survey of 12,000 employees (Staton, 2024) refute the value of traditional workplace mental health interventions, such as awareness campaigns and EAPs, which show little impact on stigma reduction and perceptions of support. To the contrary, evidence testifies to the efficacy of skills-based managerial interventions, namely those aimed at developing relational competencies such as active listening and managing difficult conversations. These practical skills, rather than theoretical know-how, yield measurable gains in staff support and organisational dynamics.

Complementary research shows the importance of having a strong Psychosocial Safety Climate (PSC), or organisational commitment to psychological well-being

(Amoadu, 2023). High PSC values are associated with lower sick leave (43%) and presenteeism (72%), validating the value of psychologically safe workplaces in fostering resilience and reducing stress.

Together, these results confirm a shift towards relationally oriented leadership and an organisational culture that prioritises psychological safety and practical managerial competence as core motivators of employee performance and well-being.

2.4.4.3 Interpersonal-Level Support

At the individual level in hybrid workplaces, particularly in sectors like telecommunications, attention is disrupted in different ways. Managers themselves get confused in perceiving early warning signs of mental health problems among their workers because of less face-to-face interaction and fewer casual meetings. With this limited transparency, distress among workers may remain unnoticed and timely intervention gets postponed (IT-online, 2024). Furthermore, a majority of line managers lack the confidence, consciousness or skill to properly address mental illness, diluting the impact of otherwise good-intentioned support initiatives (Dimoff & Kelloway, 2019).

Although more businesses are spending money on wellness initiatives like adaptable work arrangements, days off for mental health and sensitisation campaigns, these initiatives could collapse if not supplemented by continuous, genuine person-to-person interaction. Strategies that are perceived as performative or disconnected from leadership's behaviour are most likely to discredit themselves among employees (LaMontagne et al., 2014b). SCT posits that leadership plays an important role in shaping attitudes and behaviours towards mental health and, therefore, shaping a psychologically safe culture. Supportive leadership, routine manager check-ins and peer support infrastructure, such as mental health champions, can contribute to building trust, normalising talking about mental health, and triggering help-seeking (Kemp et al., 2022).

However, functionality is occasionally constrained by cultural and organisational considerations. Such cultures or stigmatising cultures that prioritise productivity over well-being or stigmatise vulnerability, weaken support systems (Dollard & Bailey, 2021). Additionally, workers commonly complain about insufficient communication about available resources, particularly in hybrid models where home workers may

become isolated (Martin et al., 2022). Confidentiality fears and career stigma also restrict psychosocial support access (Corrigan et al., 2014).

Lastly, interpersonal-level success depends on how skilful managers are at providing relational, skill-based support rather than exclusively informational advice. Training in active listening and difficult-conversation management, when backed by visible leadership commitment, significantly improves workplace mental health outcomes (Amoadu et al., 2023; Staton, 2024). In hybrid work configurations, integrating these supports into broader plans that guarantee psychological safety for both in-office and remote staff is paramount.

2.4.4.4 Individual-Level Resources

Employee mental well-being is the primary dependent variable in this research. It was conceptualised as a multi-faceted phenomenon that transcends the absence of mental pathology. In line with contemporary definitions in positive psychology, mental well-being comprises positive functioning, emotional vitality and positive work satisfaction in the work environment.

2.4.4.5 Coping and Resilience Interventions

Due to mounting challenges and stressors faced by employees of the contemporary workforce, organisations are increasingly implementing interventions that enhance individual coping capacity and resilience. These interventions have been designed to build personal assets and shape adaptive coping mechanisms to stress, thereby improving mental health.

2.4.4.6 Organisational Outcomes

This idea is the final dependent variable, correlating worker well-being with business success. Important results to account are productivity, absenteeism and worker turnover rates. The model suggests that a higher level of the psychosocial support strategies would result in improved worker mental well-being, which would consequently affect these organisational outcomes in a positive way.

These concepts and their explanations systematically provide a cohesive, rigorous analysis. This approach provides a clear explanation of the reasons behind the utilisation of these specific variables, grounded in international literature as well as in the particular context of the research.

2.4.5 Contextual Factors at the SOE

These are organisation-specific dynamics that shape mental health outcomes:

1. *Hybrid Work Model*: Employees report to the office 10 times/month; remote work may cause isolation or blurred boundaries.
2. *Organisational Culture:* Complaints about culture and environment suggest low morale and psychological strain.
3. *Performance Pressure:* Late report submissions and demotivation may stem from high expectations and unclear communication.
4. *Size and Structure:* Medium-sized company with ~150 employees and six executives; limited HR capacity may affect mental health support.
5. *Telecom Sector Dynamics:* Fast-paced innovation and constant connectivity can lead to chronic stress and burnout.

2.4.6 Organisational Practices and Interventions

Organisational practices and interventions are designed to change how work is managed, designed, and organised, often focusing on reducing negative job demands (for example, high workload, conflict) and increasing resources (for example, autonomy, support).

- **Employee Assistance Programmes (EAPs)**

EAPs offer confidential counselling and wellness services, which destigmatises and increases access to help. Studies confirm that EAPs lead to improved morale and reduced absenteeism.

- **Wellness and Mental Health Awareness Campaigns**

Webinars, stress-reducing activities, panel discussions which employers host promote open discussion and help-seeking behaviour. These sessions work towards reducing stigma, promoting open communication and promoting behaviour which includes seeking help.



Figure 2.1: Employee mental well-being

This figure illustrates how legal obligations, and organisational practices converge into psychosocial support strategies that directly influence employee well-being and, ultimately, organisational success.

2.5 AN INTEGRATED CONCEPTUAL MODEL

The study began with highlighting the issue of workplace mental health, which is increasingly becoming a problem internationally and in South Africa. The problem is defined in the world and South African workplaces. The study applied the Job Demands–Resources (JD-R) Model and Social Cognitive Theory (SCT) to explain how psychosocial support could alleviate stress and enhance well-being. These theories are operationalised through measurable variables of psychosocial support tactics, staff mental wellness and company performance, which guided the research instrument. The study aimed to evaluate existing psychosocial interventions for workplace mental health and develop a culturally adaptive, evidence-based framework to improve their effectiveness, sustainability, and applicability across diverse organisational contexts. This layer integrates both international and South African contextual examination, reiterating that workplace mental health is a global concern with local nuances. Literature consistently refers to the fact that employees' mental health problems, such as stress, burnout, anxiety and depression, are increasing in all industries and regions (WHO, 2022a&b). Such problems not only affect individual well-being but also erode productivity, motivation and organisational viability.

Globally, employers are recognising the worth of psychosocial protection in the workplace. The success of multifaceted mental health interventions, including EAPs, flexible work arrangements and mental health literacy campaigns, is emphasised in high-income country studies (Harnois & Gabriel, 2000, LaMontagne et al., 2014b However, implementation remains disproportionate, and stigma continues to deter help-seeking behaviour.

In South Africa, the issue is compounded by systemic challenges. Despite the release of the National Mental Health Policy Framework and Strategic Plan 2023–2030 (Department of Health, 2023), stakeholders like SADAG have criticised delays in implementation and the lack of practice-oriented mandates for employers. Accessibility of mental health care while consumption of digital wellness products and mental health programmes like EAPs is rising, underutilisation is usually the primary barrier to their success. Common obstacles include the lack of active promotion of management, unfamiliarity with resources at hand and mental health stigma concerns (Hendrikx et al., 2023).

- **Behavioural Indicators**

Employees may demonstrate behavioural changes like increased substance use (for example, alcohol, tobacco, caffeine or sedatives), social withdrawal or unpredictable or bizarre behaviour (Mind, 2021; WHO, 2020a&b). These behaviours can also include excessive absence or unauthorised leave, increased use of grievance procedures, and increased hostility towards staff or management.

- **Emotional Indicators**

Excessive tearfulness, irritability or sensitivity are some of the presentations of emotional symptoms. Employees may be able to put into words how they feel unsupported by management, or they may become fixated on matters concerning justice and fairness at work. There may also be a noticeable decrease in confidence or self-esteem (Lockett, 2025)

- **Cognitive and Performance-Related Symptoms**

Work output and intellectual functioning are often hampered by mental illness. Some telltale signs include inability to focus, forgetfulness or indecisiveness, inability to get ordinary tasks done or meet deadlines and grievances about workload or inability to

keep up, higher frequency of errors or small accidents and lower involvement in meetings, teamwork or projects

These warning signs are signals that a person may be troubled and would do well with assistance or intervention but does not necessarily indicate mental illness. They could become full-blown mental disorders if neglected, which would impact organisational performance and individual well-being (National Alliance on Mental Illness, 2022).

- **Psychosocial Support Strategies in the Workplace**

Hybrid work environments, where work and life boundaries are increasingly blurred, need psychosocial support systems more than ever to protect workers' mental health. These support systems are of the utmost importance but challenging to implement powerfully within the telecommunications industry, which is characterised by high performance demands, fast rates of technological advancement, and dispersed teams.

These contextual insights validate the need for this study, which seeks to develop psychosocial support strategies to improve mental health in the workplace that align with both global best practices and local realities.

2.5.1 Job Demands-Resources (JD-R) Model

The JD-R Model (Demerouti et al., 2001) posits that every occupation has unique job demands (for example, workload, emotional strain) and job resources (for example, support, autonomy). Mental well-being is shaped by the balance between these two forces:

Job Demands: Excessive demands can lead to burnout, stress and psychological strain.

Job Resources: Adequate resources such as managerial support, peer networks and wellness programs can buffer the impact of demands and foster engagement.

In this study, the JD-R Model helps categorise psychosocial support strategies as either mitigating demands or enhancing resources. It also provides a lens to examine

how these strategies influence organisational outcomes such as productivity, retention, and morale.

- **Social Cognitive Theory (SCT)**

Developed by Bandura (1986), SCT emphasises the role of self-efficacy, observational learning, and reciprocal determinism in shaping behaviour. In the workplace context:

- Employees' belief in their ability to manage stress (self-efficacy) affects their mental resilience.
- Organisational culture and leadership behaviours serve as models that influence employees' attitudes toward mental health.
- The interaction between personal, behavioural, and environmental factors determines the success of psychosocial interventions.

SCT guides the researcher to explore how employees internalise support mechanisms and how workplace environments can be structured to reinforce positive mental health behaviours.

- **Organisational Support**

Derived from the job resources dimension of the JD-R Model, this concept refers to the formal structures, policies and programmes employers provide to support mental well-being. It includes:

- Employee Assistance Programs (EAPs)
- Mental health policies and training
- Flexible work arrangements
- Access to professional psychological services

Interview questions assess employees' awareness, accessibility and perceived effectiveness of these supports.

- **Interpersonal Support**

Interpersonal support is the social capital and relational capital in workplace interactions. The theory maps most closely to the Job Demands-Resources (JD-R) model, which categorises social support as a primary job resource that buffers stress and Social Cognitive Theory (SCT), which suggests that observational learning and

social reinforcement constitute a fundamental process of behaviour development and coping skill acquisition.

The most important dimensions of workplace interpersonal support are:

- *Manager and supervisory support*: Emotional leadership, access to aid, and sensitivity to employee complaints.
- *Team cohesion and peer relationships:* Joint dynamics, reciprocal support, and psychological safety amongst workers.
- *Trust and communication climate:* How much are transparency, open communication, and relational trust fostered in the company?
- **Personal Resources**

Rooted in SCT, psychological resources are the internal capacities at the individual level that allow workers to manage stressors, adapt to adversity, and maintain mental well-being. According to Bandura (1986), these internal resources affect people's perceptions of stress, judgments of coping ability, and proactive actions to maintain psychological well-being.

Key aspects of personal resources include:

- *Self-efficacy:* Belief in the ability to manage tasks, problems, and emotions effectively.
- *Emotional regulation:* The capacity to recognise, process, and cope with emotional responses in adaptive ways.
- Resilience and coping skills: The ability to recover from setbacks and employ positive coping skills in response to adversity.
- **Employee Mental Well-being**

As the outcome variable in this study, mental well-being of employees reflects the psychological state of individuals with regard to their working life. It is the net result of organisational, interpersonal and individual influences on the cognitive, emotional and behavioural functioning of the employee.

2.5.2 Culturally Responsive Intervention Model

Based on these results, the study suggests a framework for culturally responsive interventions that are inclusive, flexible and long-lasting. It incorporates the following essential elements:

Contextual Sensitivity: Interventions must be sensitive to the cultural diversity, socio-economic disparities and organisational diversity of South Africa to ensure that no segment lags behind.

Multi-Level Strategy: Support mechanisms must collaborate at the organisational, interpersonal and individual levels in an effort to construct an integrated mental health culture.

Participatory Design: By involving employees in co-design and implementing initiatives, organisations are able to increase relevance, take-up and sustainability over the long term.

Sustainability Focus: Well-being must be embedded in organisational culture and the operational plan, rather than introduced as a short-term or defensive response.

As a Practical Guide for South African Employers, this evidence-based framework offers organisations the tools to:

- Combat stigma surrounding mental health through education and dialogue
- Improve access to psychosocial support systems across workforce levels
- Promote inclusive and supportive workplace relationships and policies
- Empower employees with personal development and coping tools that enhance resilience

2.6 CHAPTER SUMMARY

In Chapter 2, a comprehensive review of the literature of psychosocial support interventions established a foundation on how such interventions can significantly enhance mental health in the workplace setting. In the review, several prevailing themes were recognised: differentiated support systems for tailored needs, the role of leadership in the creation of a supportive culture and the necessity of integrating mental health initiatives into organisational policy.

Drawing on these conclusions, this qualitative study focused on identifying effective, context-sensitive psychosocial approaches that address the specific challenges in different work settings. Examining how these approaches can be applied and evaluated, the aim was to address the gaps the literature has identified in their practical application and worker activation.

The implications of this chapter emphasised the need for an evidence-based approach. It is crucial that the empirical research not only tests the theoretical models under consideration but also uses them for practically applicable practices that organisations can adopt in order to enhance the mental well-being of employees. This aligns with the realisation that mental well-being is an intricate issue influenced by various organisational factors, underscoring the need for comprehensive, responsive strategies to support it.

In the next chapter, the rationale for conducting this empirical research is outlined, with the central concern being the need for greater attention to mental health in workplaces and the potential of psychosocial support measures to transform organisational cultures and improve employees' well-being.

CHAPTER 3

RESEARCH DESIGN AND METHODS

3.1 INTRODUCTION

Building upon the insights presented in the preceding chapter, which explored a range of psychosocial strategies aimed at enhancing mental health within the workplace, Given the complex interaction between the cultural, economic, and organisational factors unique to South Africa, a context-oriented approach is imperative. The research used a qualitative approach, yielding detailed insight into employees' day-to-day experiences and their understanding of mental health.

This chapter outlines the research methodology and design which guided this study. It begins by detailing the rationale guiding the research process, the research paradigm, qualitative approach and research design. The chapter then describes the methods used such as study population, sampling strategy, and procedures used to select participants. Furthermore, it elaborates on the methods of data collection and analysis, including the techniques used to verify data integrity and reliability. Finally, ethical considerations relevant to the study are discussed to ensure adherence to academic and professional standards.

3.2 RATIONALE FOR EMPIRICAL RESEARCH

The growing prevalence of workplace mental health challenges, including stress, burnout, anxiety, and depression, have become a key issue not only globally but also in South Africa. These challenges are not limited to individual health but have substantial impacts on organisations and even the national economy. For example, according to Koteli (2024), employee mental health is responsible for a loss of 250 billion per year in South Africa. 0

While some of the approaches towards tackling workplace mental health have been identified in the extant literature (counselling, mental health training, peer support programs, and flexible working), there is no empirical evidence on the effectiveness of these interventions among organisations in South Africa. Hence, an empirical study on the issues become essential. The following study therefore uses an empirical research design in exploring the research question:

Employees' experiences of psychosocial support strategies for improving workplace mental health?

This question will need to be addressed in a manner that includes a deep appreciation of the lived reality, perceptions, and interpretations made by employees regarding the mental health programs offered in their workplace. For this reason, a qualitative research method is most appropriate.

It is evident from the literature reviewed that the mental health challenges faced by employees are not unique to South Africa but rather reflect a global concern. These challenges extend beyond individual well-being and have significant economic implications. According to Dr Frank Magwegwe, Principal Researcher and Senior Lecturer at the Gordon Institute of Business Science (GIBS), employee mental health issues cost the South African economy an estimated R250 billion annually in lost productivity, contributing to a reduction of up to 4.5% in the country's gross domestic product (GDP) (Koteli, 2024).

The increasing prevalence of mental health challenges in the workplace, manifested through stress, anxiety, depression and burnout, necessitates a robust and contextually grounded response. While existing literature highlights the potential of psychosocial support strategies such as peer support, counselling services, mental health training and flexible work arrangements, there remains a critical gap in empirical evidence that evaluates their effectiveness within specific organisational contexts, particularly in South Africa.

This study adopted an empirical research approach to address this gap by systematically investigating the design, implementation, and impact of psychosocial interventions in real-world workplace settings. Fieldwork is essential in this regard, as it allows for direct engagement with employees, managers, and organisational structures. The primary research question that this study aims to answer is: *Employees' experiences of psychosocial support strategies for improving workplace mental health*? This research question is focused on the experiences and perceptions of mental health strategies, and as such, it needed a qualitative method of data collection.

Moreover, this study goes beyond data collection by integrating conceptual, contextual, and theoretical frameworks to interpret findings. Drawing on models of organisational behaviour, occupational health and socio-cultural theory, the research situates empirical data within broader systemic and cultural narratives. This layered analysis enhances the relevance and applicability of the findings, offering both academic and practical contributions.

The rationale for this approach is further informed by the researcher's professional experience in organisational development and employee wellness initiatives. First-hand exposure to workplace environments has revealed the limitations of generic mental health programmes and underscored the need for tailored, evidence-based interventions. This experiential insight strengthens the study's design and ensures that the research remains grounded in the realities of organizational life.

As discussed in Chapter 1, Section 1.2 from the lens of organisational psychology, mental health is increasingly recognised as a critical factor influencing employee engagement, job satisfaction and retention. Recent findings from the American Psychological Association (APA, 2024) indicate that psychological safety significantly enhances productivity and employee loyalty. Similarly, Backhaus et al. (2024) demonstrate that organisational change, if not managed with psychosocial safeguards, can exacerbate mental health risks.

Common mental health challenges in the workplace include stress, burnout, anxiety, and depression; conditions that significantly contribute to absenteeism, reduced job performance, and high employee turnover (Rugulies et al., 2023; Sarkar et al., 2024). A growing body of research highlights that factor, such as excessive job demands, unsupportive organisational culture and strained work relationships, are key determinants of these outcomes. These psychosocial stressors not only undermine individual well-being but also pose risks to organisational effectiveness and sustainability. In response, psychosocial support strategies have emerged as critical interventions aimed at promoting resilience, fostering psychologically safe environments and reducing mental health stigma. These strategies encompass wellness programmes, peer support networks, managerial mental health training and broader cultural shifts within organisations. By addressing the root causes of mental health strain, these interventions contribute to healthier, more engaged workforces. As mental health challenges increasingly threaten the sustainability of human capital,

the implementation of effective psychosocial support systems has become not merely optional but essential to organisational success (L.Stringer, 2023).

A healthy work environment, underpinned by the psychological and physical well-being of employees, is increasingly recognised as a cornerstone of organisational success. Research consistently demonstrates that organisations which prioritise employee wellness experience measurable improvements in productivity, engagement and overall performance (Grawitch et al., 2006; Quick & Henderson, 2016). In the South African context, Dhanpat et al. (2025) emphasise that post-pandemic workplace dynamics have intensified the need for targeted mental health interventions, particularly in high-stress sectors.

Healthy employees contribute to reduced absenteeism, lower turnover rates and enhanced job satisfaction, all of which are critical to sustaining operational efficiency and institutional knowledge (Leka & Jain, 2010). Moreover, Rasool et al. (2025) found a direct correlation between employee well-being and daily work engagement, reinforcing the argument that mental health is a key driver of collaboration and resilience.

From a strategic perspective, organisations that foster psychologically safe environments are better positioned to attract and retain top talent, adapt to change and maintain a competitive edge. The American Psychological Association (APA, 2024) reports that employees who perceive their workplace as supportive of mental health are significantly more likely to feel valued and remain committed to their roles. This aligns with Schaufeli's (2017) assertion that embedding mental health into organisational culture is not only ethically sound but economically advantageous.

In conclusion, the promotion of a positive work environment is more than a human resources activity but is in fact a strategic need. By investing in work wellness, organisations can tap into long-term advantages that go beyond personal outcomes and impact overall organisational resilience and innovation. The empirical focus of the research is more than adequately supported by the subject material but is in fact necessary in order for the development of contextually relevant recommendations that can be used in policy and practice in order to improve labour conditions and overall organisational resilience.

3.3 RESEARCH METHODOLOGY

Research methodology is the systematic, theoretical analysis of the methods and principles associated with a branch of knowledge, acting as the blueprint for a research study.

3.3.1 Research Paradigm

The research is grounded in the interpretive paradigm, which assumes that reality is socially constructed and shaped by experiences of individuals and contextual factors. In contrast with positivism, interpretivism focuses on subjective interpretations rather than seeking objective facts that can be measured. As such, it is appropriate for the current study because it attempts to understand employees' experience of mental health challenges and workplace support systems withing the organisational context.

By adopting this paradigm, the researcher aimed to understand employees' lived experiences; To explore employees' perception of mental health initiatives and to identify context – specific psychosocial support strategies.

When conducting research, the researcher needs to embrace a set of beliefs and perspectives that shape the study's direction. According to Byrd (2020), research paradigm research is the underlying beliefs and assumptions on which the researcher relies to determine the research topic and approach. Ulz (2023) identified two basic research paradigms that serve as the foundation from which many other originate.

The foundation of the positivist paradigm is the conviction that there is only one objective reality that is observable and quantifiable. This type of research usually uses quantitative methods to develop hypotheses that are verified or disproved by gathering and analysing data. The interpretivist paradigm, on the other hand, is based on the notion that there are various realities that are influenced by social settings and personal experiences. In the social sciences, qualitative research frequently employs this paradigm.

The interpretivist paradigm, which emphasises comprehending people's subjective meanings and lived experiences within their social and organisation contexts, served as the foundation for the study. Interpretivists contend that statistical models cannot adequately capture the complexity of human behaviour. Rather knowledge is created by analysing the interpretations that people make of their experiences and

behaviours. Interpretivism supports the use of flexible, open-ended inquiry methods that prioritise depth over breadth, enabling the researcher to co-construct meaning with participants rather than impose predefined categories (Ulz, 2023).

Underpinned by the interpretivist paradigm, this research sought to understand how employees perceive and make sense of workplace mental health and wellness initiatives. The study aimed to uncover the meanings, beliefs, and experiences employees associate with these programmes, recognising that such perceptions are shaped by individual, social, and organisational contexts.

The study explored psychosocial support strategies to enhance mental health in the workplace. Aligned with the interpretivist paradigm, which prioritises understanding individuals within their distinctive contexts rather than applying universal laws. The research sought to grasp employees' perspectives on mental health challenges and potential support strategies before proposing interventions, recognising that contextual factors are essential to meaningful understanding (Nickerson, 2024).

The study focused on employees who had been with the organisation for over three years, as they were familiar with the work environment and had experience with the wellness programme offered by the organisation. The interpretivist paradigm emphasises understanding individuals within their specific contexts rather than applying general laws, and it recognises the importance of considering contextual factors when exploring a problem (Pervin, 2022). In line with this approach, the research aimed to gain insight into the employees' perspective rather than developing support strategies without first understanding their experiences and viewpoints (Pervin, 2022).

The researcher sought to understand and interpret the employees' insights on psychosocial support strategies that could enhance mental health in the workplace. The researcher refrained from imposing personal opinions and instead gathered insights from participants as they shared their challenges with the mental health resources available in the workplace, as well as their suggestions for additional resources or support that could be introduced to enhance mental health in the workplace.

The interpretivist paradigm guided this research not only as a methodological stance but also in its regulatory function, which requires describing and grasping

organisational dynamics. This paradigm was particularly appropriate as the research sought to examine employee lived experiences related to low morale, rising absenteeism and increased pessimism. By prioritising the subjective perspectives of employees, the research aimed to discover the underlying causes of these challenges and propose contextually grounded psychosocial support strategies to improve mental health and workplace productivity.

Rooted in a problem-solving orientation, the interpretivist paradigm provided an invaluable framework for this study. It enabled the research to examine the underlying factors contributing to low employee morale and increased absenteeism by prioritising the subjective experiences of employees within the organisational context. This paradigm also supported the adoption of a qualitative approach, perspectives and suggest psychosocial strategies to improve mental health in the workplace (Byrd, 2020).

3.3.2 Research Approach

The above research adopted the qualitative research design, which suits well in studying intricate social issues, including mental health at work. Qualitative research was chosen for following reasons; It enables in- depth exploration of subjective perspectives; it prioritises meaning-making rather than numerical measurements; It allows for flexibility during data collection process, and it produces rich, descriptive data. In view of research question cantering on experiences, perspectives and meaning, using a qualitative approach will give greater insights compared to quantitative research that only studies quantifiable variables.

Both qualitative and quantitative research methods, or even a mix of the two, may be used in a study. In qualitative research, statistical analysis is the preferred method; a greater number of cases or individuals is usually included, and the viewpoint frequently assumes a value-free, objective perspective. It cross-context generalisability of findings (McLeod, 2025). The interpretivist paradigm, on the other hand, is strongly aligned with qualitative research since it emphasises meanings, experiences and processes, focuses on understanding events in their natural environment and recognises that reality is socially constituted and constantly evolving (Creswell & Poth, 2018).

As a result, a qualitative research approach was used in this study, placing the investigation within a context-sensitive interpretive framework that prioritises participants' lived experience, meaning-making and depth of knowledge over general statistical generalisation. The qualitative research methodology used in this study is ideal for examining human behaviour, attitudes, and experiences in natural environments (Byrd, 2020). Due to its inherent flexibility and lack of structure, qualitative research enables the researcher to modify techniques and protocols in response to new information that emerges during the study (Braun & Clarke, 2021). Adaptability was demonstrated during the data collection phase, despite the original plan to conduct interviews using Microsoft Forms. Feedback from the pilot study showed that participants preferred Microsoft Teams interviews because they found them more interactive and took less time than filling out forms.

To examine psychosocial support techniques for improving mental health at work, a qualitative approach was selected. By using this approach, the researcher was able to thoroughly examine the nature of the issue while documenting the employees' varying subjective experiences and viewpoints (Byrd, 2020). In line with qualitative research methodologies that prioritise contextual awareness and field-based investigation, data were gathered directly from participants in the workplace (Bryd, 2020).

Qualitative research produces descriptive data from participants' written and spoken words, providing insight into the underlying values and beliefs related to the topic under study (Byrd, 2020). The researcher in this study focused on participants' narratives, closely observing their viewpoints and interpretations. The research was carried out by identifying and interpreting recurrent themes rather than by using numerical data or graphical representations. This thematic approach enabled the identification of insightful findings and the provision of practical suggestions for employee support.

Qualitative research emphasises thematic analysis and the use of language to examine complicated human experiences, in contrast to quantitative research, which depends on numerical measurement (Byrd, 2020). Rich, contextualised data is given priority in qualitative research, which aims to comprehend phenomena from perspectives of its participants. As a result, this study used techniques allow open-

ended responses and a more thorough examination of personal experiences. The design of this study included methods frequently employed in qualitative research, such as content analysis, focus groups, and participant observation (Creswell & Poth, 2018).

3.3.3 Research Design

The study employed an exploratory qualitative research approach. Exploratory research may be considered when there is lack of knowledge about the phenomenon being studied; There is limited context-specific research exists, and the goal is to generate insight rather than test hypothesis. With this research approach, the researcher was able to delve into the opinions of employees regarding mental health and psychosocial interventions.

Although the study was conducted within one organisation, it does not qualify as a case study since it uses no multiple data collection sources such as documents and observation. On the other hand, interviews serve as the main tool for collecting data in this research. Thus, this work should be considered as exploratory qualitative research carried out within a particular organisation.

According to Byrd (2020), a research design serves as a blueprint that guides the researcher in aligning data collection with the research question. The necessity of empirical research in this study stems directly from the nature of the central inquiry: *Employees experiences of psychosocial support strategies for improving workplace mental health and, in turn, support the attainment of organisational goals and objectives?* The above question demands more than theory; it requires urgent engagement with workers' lived experiences, attitudes and surrounding realities in an organisational setting.

The research site is a SOE (see Appendix C), which presents a unique organisational environment marked by hybrid work arrangements, spatial limitations and observable employee disengagement. Despite existing wellness interventions such as workshops and digital access to psychologists, absenteeism remains high, motivation is low, and productivity is compromised. These challenges are not theoretical; they are lived realities that require direct engagement with employees to uncover root causes and evaluate the effectiveness of current support mechanisms. This study adopted a multi-layered analytical framework that goes beyond

straightforward data collection. It examines how people's psychological states interact with broader social and organisational settings, with particular attention to leadership hierarchies, open-plan office spaces, and hybrid work patterns at the SOE

This triangulated approach allows for a richer interpretation of data, ensuring that the researcher's own professional experience within the organisation adds a critical dimension to the study. First-hand observations of absenteeism, low morale and underutilised wellness resources prompted the investigation. Despite the availability of support tools, such as a smartphone app for psychological support, employees remain disengaged, suggesting a disconnect between the intervention design and employee needs.

This insider perspective enhances the study's relevance by informing the design of interview questions and engagement strategies, facilitating trust and openness among participants and enabling a more nuanced understanding of organisational dynamics. Recommendations are both evidence-based and contextually relevant.

3.3.3.1 Research Type/Strategy

Ithy (2025) explains that exploratory research design as a first stage in developing hypotheses and elucidating concepts. It emphasises flexibility, economy and the application of unstructured techniques to explore poorly understood subjects.

This study adopted a qualitative, exploratory approach to look into psychosocial support techniques that will help improve employees' mental health in a south African telecom company. The research question, which aimed to understand not only theoretical ideas but also lived experiences, perceptions and contextual realities of employees in the corporate environment, was well-suited to this method.

Given the complexity of workplace mental health, a qualitative design enabled a thorough, interpretive understanding of how corporate culture, leadership styles, and work arrangements, such as open-plan offices and hybrid models, interact with individual psychological states. The approach placed through techniques such as interviews, which helped the researcher identify complex relationships between performance and well-being.

3.4 RESEARCH METHODS

This section outlines the research and data collection tools employed to address the study's central question. The instance in this study refers to the psychosocial assistance techniques meant to improve mental health at work.

Byrd (2020) asserts that research techniques are data-gathering procedures. Accordingly, the current work described and used suitable techniques to guarantee methodological rigour and applicability. According to Byrd (2020), research methods encompass the detailed logistical procedures required to implement the chosen study design. Central to these methods is the data collection process, which serves as the foundation for gathering meaningful insights aligned with the study's objectives. This section describes the target population, sampling strategies, and sample size employed in this research as well as the data collection tools.

The study was conducted at the SOE. The population for the research comprised about 150 employees from different departments. The sample population, however, was drawn from employees in the technical department only.

3.4.1 Population

The study population comprised employees of the SOE, a state-owned enterprise in South Africa and was carried out with the organisation's Technical Department. The researcher had limited direct interaction with technicians and engineers, as these employees were frequently deployed offsite.

The population in this study established the parameters for the research. According to Creswell and Poth (2024), the population includes every single person, event, organisational unit or case record that is pertinent to the subject being studied. A precise demographic definition was necessary to ensure the study remained focused and the findings were applicable to the appropriate group or context. All potential participants in each study are referred to as the research population (Majid, 2018). The population comprises approximately 150 employees, including interns from seven (7) different departments. It consists of all Head Office employees to ensure homogeneity in terms of work environment, organisational culture, and policies. A smaller group of participants chosen from the population is known as a sample (Majid, 2018).

The Protection of Personal Information Act (POPI Act), which regulates the gathering, storage, alteration, and processing of personal data belonging to South African individuals and legal entities, was followed in all procedures. All parties involved must abide by the POPI Act, which prevent abuse, and safeguard people's constitutional right to privacy. There are serious legal repercussions for breaking the Act, including potential civil class actions, fines of up to R10 million, and up to 10 years in prison (Raaff et al., 2022).

3.4.1.1 Access to the Research Site

The Chief Executive Officer (CEO) of the SOE gave the researcher official authorisation to carry out the study prior to data collection. To make sure the study followed institutional procedures and ethical research norms, this approval was crucial (see Appendix B & C).

An Institutional Review Board (IRB) or comparable ethics group must formally review any research involving human subjects, according to Capili and Anastasi (2020). Evaluating the study's ethical integrity and making sure that participant risks are kept to a minimum are the goals of this type of research.

Ethical considerations include the avoidance of harm protection of vulnerable populations, voluntary involvement, informed consent and the prevention of fraud. Additionally, the review procedure guarantees that concerns about confidentiality, privacy anonymity and data management are suitably handled at every state of the process.

Following these ethical guidelines, the researcher made sure that each participant understood the goal and design of the study before taking part and were informed of their freedom to withdraw from the study at any time without penalty. According to these ethical guidelines, the participants understood the goals, methods and right of the understood the goals, methods and rights of the study, including the freedom to discontinue participation at any time without repercussions These actions demonstrate a strong dedication to upholding moral principles and a dhering to national and institutional research ethics guidelines.

3.4.2.1 Inclusion Criteria

To guarantee the gathering of rich and pertinent data in line with the goals of the study, participants were chosen according to predetermined inclusion criteria. To

encourage variety and inclusive viewpoints, the study included staff members from all levels of the Technical Department, represent all gender and racial groups.

Permanent employees who had worked for the company for at least three years were eligible to participate, in accordance with best practice in qualitative research participant selection (Creswell & Poth, 2024). This time frame was designed to guarantee that participants were adequately acquainted with the organisation's values, procedures, and culture. To ensure their perspectives were grounded in current, relevant departmental experience, participants had to have worked in the same department for at least two (2) years.

3.4.2 Sampling strategy

Because the precise likelihood of choosing any given person was unknown and the size of the population was not exactly established, a non-probability sampling strategy was used in the study (Byrd, 2020; Dursun, 2023).

Purposive sampling and convenience sampling, two random sample techniques used in qualitative research were combined in this study. The intentional selection of participants based on traits or standards pertinent to the study is known as purposeful sampling (Shaheen et al., 2019)

The study adopted the non-probability sampling technique where; purposive sampling, participants were selected based on specific criteria- employees must have at least three years of experience in their job; must have been working in the same department for at least two years and familiarity with organisational wellness initiatives. The convenience sampling because of the participants who were available and willing to participate were included, ensuring feasibility.

With this method, the researcher concentrated on people who have the fundamental qualities and life experiences needed to fully understand the topic being studied. Purposive sampling was used in this study to identify staff in the Technical Department who satisfied the inclusion criteria, which included duration of service and participation in wellness initiatives. A purposive sampling strategy could provide informed insights into potential support strategies. This approach ensured that the sample was relevant to the research question and aligned with the interpretivist paradigm, which emphasises understanding individuals within their specific contexts.

Convenience sampling, sometimes referred to as availability sampling, was used in conjunction with a purposive sample to select participants who were most available and eager to participate (Simkus, 2023). This would save time and money while enabling cost-effective data gathering. This combination application of purposive and convenience sampling proved to be a useful method of participant selection.

A random selection process was applied to identify potential participants who met the inclusion criteria. All prospective participants received a participant information sheet from the researcher to help them make an informed decision about taking part in the study. Participation was entirely voluntary, and ethical principles of confidentiality and anonymity were strictly observed.

The organisation received the request to undertake the study, and on the 9 October 2023, formal approval was given (see Appendices B & C). After receiving approval, the researcher reached out to the gatekeeper from the Sales and Marketing Department facilitated participant recruitment by sending the email to potential participants within the organisation (see Appendix D). The email included information about the study and the researcher's contact details, enabling interested employees to contact the researcher and the participants Information sheet (see Appendix E). Initially, 45 employees received an email invitation. The responses in all were obtained by phone call and via email. This meant that ten (10) employees were interested in taking part in the study and thus, made up the sample, which is a smaller subset of this population (Majid, 2018).

Of these, ten (10) met the inclusion criteria (see Section 3.4.2.1). Two (2) of the eligible participants were included in the pilot study, and ten (10) participated in the main study. Two (2) prospective participants did not meet the inclusion criteria because they had not been employed in the same department for at least 2 years. There were a total of ten (10) people who participated in the main study and two (2) people who participated in the pilot study. The number of respondents was based on data saturation, where no more themes would emerge from data collection.

Byrd (2020) asserts that the sample size in qualitative research is determined by the researcher's goal, the study purpose, the stakes, what would be helpful, what would add credibility and what can be accomplished in the time and resources allotted. The sample size was determined based on data saturation, the point at which no new

themes or insights emerged from additional interviews. This approach is consistent with qualitative research practices, where depth of understanding is prioritised over breadth of representation. As indicated by Creswell and Poth (2018), to facilitate rich data collection and in-depth investigation, qualitative sample sizes are usually small and purposefully chosen.

Complete information regarding the study procedures was given to ensure informed participation (Byrd, 2020). The interested participants were then emailed the Participant Information Sheet (see Appendix E), Consent Form (see Appendix F) and Interview Schedule (see Appendices G) in preparation for data collection. In order to accommodate participants' work-related obligations and ensure that their participation did not conflict with their professional duties, participants were required to complete the interview response within a month; however, a longer term was offered, if necessary.

3.4.3 Pilot Testing

Pilot testing plays a significant role in assessing the feasibility, practicality, resource allocation, time, and cost implications of a research inquiry prior to its full-scale implementation (Byrd, 2020). According to Dursun (2023), pilot testing requires conducting a small-scale version of the inquiry to evaluate the effectiveness of the refined critical components of the main study, such as research instruments and sampling strategies, thereby improving the overall quality and reliability of the research design. Furthermore, pilot testing serves as a valuable mechanism for identifying and addressing potential ethical and logistical challenges that may arise during the main study (Byrd, 2020; Dursun, 2023).

The pilot study was carried out using two respondents to; trail the interview questions and examine the data collection procedure. Microsoft Forms was replaced with Microsoft Teams interviews. The objective was to determine whether meaningful data on psychosocial support strategies to improve mental health could be effectively collected from participants. The pilot also facilitated an evaluation of the inquiry's feasibility, the suitability of Microsoft Teams as an interview platform, and the functionality of the data collection instrument. Insight gained from this pilot informed necessary adjustments to the research protocol, ensuring methodological rigour and ethical soundness in the subsequent full-scale study.

3.4.5 Data Collection

Data Collection was through semi-structured interviews that provided flexibility and depth. Information was gathered by conducting interviews using a pre-developed interview guide and probing questions during Microsoft Teams interviews, where the participants had consented to audio recording, and notes were taken by the researcher to help in gathering experiences systematically.

Byrd (2020) asserts that interviews are a useful technique for effectively acquiring large volumes of data and are especially useful for acquiring detailed qualitative information. Semi-structured interviews (see Appendix G) were used in this study, which gave the researcher the freedom to use a planned set of questions while having the opportunity to delve deeper into newly developing subjects. By striking a balance between structure and flexibility, this method allowed participants to expound on their experiences while maintaining the conversation's focus (Dursun, 2023).

An interview schedule with pre-planned questions (see Appendix G) served to guide each interview. When required probing questions were employed to elicit clarification or promote further discussion of participant's answers. To supplement the data. The research wrote field notes throughout the interviews.

Depending on participants' availability, interviews were conducted either face-to-face or virtually via Microsoft Teams. Each participant was interviewed in depth by the researcher. Because of the open and detailed responses provided by this method, the researcher was able to gather thorough and insightful data (Bearman, 2019). To enable precise transcription and further research, the interviews were audio-recorded with the participants' consent.

As highlighted by Kang and Dursun (2023), it is essential that researchers communicate the confidentiality of the data to be collected and adhere to ethical principles throughout the research process. Permission to record the interview was acquired from each participant to prevent data loss. According to Byrd (2020), informed consent involves providing clear and accessible information about the study's purpose, plan, potential risks, and benefits, thereby enabling participants to make an informed decision about their participation. All interview recordings and

transcriptions were securely stored, and access was restricted to the researcher to maintain confidentiality and data integrity.

Before each interview started, the researcher confirmed that the participant had read the participant information (see Appendix E) sheet and interview schedule (see Appendix G) and signed the consent form (see Appendix F). After extending a warm greeting and reintroducing themselves, the researcher ensured that the participant was prepared to continue the interview.

According to Williams (2024), in qualitative studies, conducting interviews requires the researcher to possess specific skills such as question design, active listening, and rapport-building to ensure efficiency and depth. The researcher demonstrated strong interpersonal and active listening skills, which facilitated effective communication and rapport-building with participants during the interview. All interviews were conducted in English, as participants were familiar with English. However, for clarification or deeper probing, the researcher occasionally incorporated African languages such as IsiZulu. Both the researchers and participants were fluent in these languages, which are widely spoken in South Africa, thereby enhancing mutual understanding and ensuring the authenticity and richness of the data collected.

3.4.6 Data Analysis

Thematic analysis was used in analysing the data based on methodological framework provided by Virginia Braun and Victoria Clarke (2021). The steps that were followed in the analysis included becoming familiarised with the data through several readings of the interview transcript; coding the data to identify key segments; identifying themes; reviewing the themes; defining the themes; and, finally, reporting the results. Inductive reasoning was applied in the analysis to allow themes to evolve during the process. Thematic analysis was deemed suitable in this case because it facilitated the identification of themes and patterns in qualitative data.

In qualitative research, data analysis is a crucial stage in which the researcher methodically organises and evaluates unprocessed information from audio-recorded interviews. The main source of data for this study's analysis was the transcriptions (see Appendix H) of participant interviews. To find new themes, patterns, and insights pertinent to the study's goals, these transcriptions were carefully examined and

coded. This strategy supports Byrd's (2020) claim that transcription-based analysis improves the rigour of qualitative research and allows for a deeper comprehension of participant viewpoints.

The main technique used by the researcher to analyse the qualitative data in this study was thematic analysis. Thematic analysis, according to Naeem (2023), involves closely examining transcripts to identify thematic elements and gather examples of these themes across the dataset. Crucially, the researcher must maintain reflexivity at every stage, admitting their impact on interpretation and guaranteeing openness in coding choices. The findings are more credible and reliable as a result of this reflexivity. Thematic analysis, according to Byrd (2020), helps researchers find interesting patterns in qualitative data, a method crucial to this study.

This strategy was used in order to extract detailed, illustrative accounts that shed light on the mental health issues that the organisation faces. Transcribed interviews with members of the organisation provided the data used in this study's analysis. The basis for thematic investigation was provided by these transcripts. The focus of thematic analysis, according to Swain (2018), is to identify themes and group data into meaningful clusters. Kampira (2021) emphasises the inductive nature of this method, wherein themes are generated directly from the data rather than imposed by the researcher, allowing for concurrent data collection and analysis.

As recommended by Braun and Clarke (2021), the researcher used an inductive approach, allowing the data to guide the discovery of themes. This method made guaranteed that the depth and complexity of the experiences of the participants were accurately recorded.

- **Step 1: Familiarisation**

The chosen method is to gather in-depth, descriptive accounts of mental health issues within the company. In order to identify significant themes or trends that emerge in the data, this method entailed methodically organising and evaluating qualitative data. Before analysing the individual items, Braun and Clarke (2021) state that the first stage in theme analysis is to become familiar with the data by obtaining a comprehensive summary of all the data gathered.

The familiarisation phase, a critical initial step in thematic analysis, as outlined by Braun and Clarke (2021), requires immersing oneself in the data to acquire a comprehensive understanding before formal coding begins. In this study, the researcher engaged deeply with the qualitative data by listening to the audio recordings of each interview, reading through the corresponding transcript, and analysing the notes taken during the interviews. This iterative process enabled the researcher to identify initial ideas and patterns emerging from the report. Detailed notes were compiled to document these observations (see Appendix H), facilitating a detailed understanding of the participant's experiences. This procedure was systematically applied to all ten (10) interviews. To maintain analytical integrity, the researcher ensured that only the issues expressly raised by participants were considered, and all data selected for analysis were directly relevant to the central research question.

All interviews were transcribed word to word. The researcher read and re- read the transcripts to gain an in-depth understanding of participants' experiences and views. Initial notes were recorded to highlight recurring ideas related to mental health, work culture, and the support staff got psychologically.

- **Step 2: Coding**

In this stage of the research, coding is carried out by reviewing the data, highlighting meaningful segments, and assigning concise labels to represent their underlying meaning (Saldaña, 2021). The process of dividing qualitative data into understandable parts and giving each segment a descriptive title is known as coding. Braun and Clarke (2021) state that this step entails the researcher carefully going over each interview transcript and labelling any items that seem pertinent or important to the research topic. Sentences and phrases that correspond to specific codes are highlighted as patterns or noteworthy concepts appear and new codes may be developed as new information becomes apparent. After coding, the shared codes were used to group the data into clusters. The main concepts of feelings expressed in each data segment were captured by these codes.

Inductive coding was used for the process of data analysis. This implies that the themes emerged from the data itself, and not before conducting data analysis (Braun & Clarke, 2021). Patterns in the data were identified through a process of close

reading and rereading of the interviews conducted and were further categorised (Braun & Clarke, 2021).

- **Step 3: Generating Themes**

Saldaña (2013) states that themes are found by using a methodological coding procedure on every transcript. Themes in this approach are more general conceptual categories that include several related codes. To put it another way, several distinct codes can be used to create a single overarching theme. In the current study, for example, the theme content was created by combining the code's structure and technique. Nonetheless, certain codes might be thorough enough to continue existing as distinct themes. For instance, Application was kept as a separate theme in this study (Saldaña, 2021). Codes that had similar meaning were categorised, and through this process, allowing the researcher to identify patterns and relationship within the data, which were subsequently developed into overarching themes (Braun & Clarke, 2021). Codes were also classified into higher level categories based on their conceptual similarities.

- **Step 4: Reviewing Themes**

At this point in the study, the researcher makes sure that the themes that have bee n produced are accurate and meaningful representations of the data. To verify the data's quality and coherence, it must be reviewed and cross-checked against the emergent themes. To ascertain whether the themes adequately convey the patterns found in the data, they are thoroughly examined. Themes may be improved during this stage by merging, dividing, eliminating or creating new ones as needed (Braun & Clarke, 2021; Saldaña, 2021). After the formation of categories, the next step was the generation of themes. These themes were formulated by combining related categories into broader meanings that could be drawn from the dataset. This was done by making interpretations on how various categories were interconnected and organising them according to broad concepts that helped answer the research question. The inducive approach called for organic emergence of themes as opposed to forcing them on the data (Braun & Clarke, 2021). After establishing the initial set of themes, the researcher engaged in activity aimed at evaluating these themes to verify their relevance and coherence. The data was reviewed to determine whether these themes accurately captured the meaning contained in the dataset.

Individual themes were evaluated by assessing whether they had been appropriately captured based on the data extracted from the dataset. Additionally, the researcher ensured that each of these themes was consistent and distinct from other themes derived from the dataset. Through this approach, the reliability of the research analysis was improved significantly (Braun & Clarke, 2021).

- **Step 5: Defining and Naming the Themes**

According to Saldaña (2021), this phase focuses on defining and refining the themes, which involves clearly express the essence and meaning of each theme and determining how it promotes the overall understanding of the data. This process requires the researcher to formulate precise definitions that capture the scope and significance of each theme within the study's context. Furthermore, naming the themes implies assigning concise, clear and descriptive labels that effectively convey their core meaning (Braun & Clarke, 2021; Saldaña, 2021). For instance, in the present study, the theme ‘Emotional Wellbeing and Resilience’ was defined as *employees’ focus on emotional intelligence, stress management, and coping mechanisms*.

The last step in the thematic analysis consisted of definition and naming of themes. This process entailed defining and clarifying the content of each theme in order to establish its relevance to the research problem in terms of what data feature was reflected in the theme. The process involved reviewing and refining the definitions until the themes conveyed clear and logical patterns found in the data. Appropriate and succinct labels were used for each theme to capture the core meaning of the theme (Braun & Clarke, 2021).

- **Step 6: Writing Up**

The presentation and discussion of the study results constitute the last phase of th e analysis (Braun & Clarke, 2021; Saldaña, 2021). The study questions, objectives, and general analytical strategy are restated in this step's introduction. The methods used for gathering and analysis are described in the methodology section, guaranteeing rigour and openness. Each selected theme is then thoroughly presented and interpreted in the results section, which is backed up by pertinent data snippets. Lastly, the conclusion summarises the main conclusions, emphasising how

they answer the research questions and support the goals of the study. The comprehensive presentation of this stage is provided in Chapter 4.

3.5 MEASURES FOR TRUSTWORTHINESS

The concept of trustworthiness plays a central role in assessing how credible and rigour of qualitative research finding (Byrd, 2020). It requires the researcher to critically evaluate whether the methodological approach employed is appropriate and can be relied upon to offer credible findings. Within the interpretivist paradigm, the evaluation of research quality is grounded in the concepts of trustworthiness and authenticity as outlined by Guba (1981). Trustworthiness comprises four essential components: credibility, transferability, dependability and confirmability. In this research study, these criteria were carefully considered to ensure methodological rigour and validity. Each of these elements, credibility, transferability, dependability, and confirmability, is discussed in detail in the following sections.

3.5.1 Credibility

According to Ayton (2023), credibility refers to the extent to which research findings accurately represent participants' perspectives. Establishing credibility of researcher bias and that the research inquiries is aligned with the study's objectives (Ayton, 2023). This study explored psychosocial support interventions to support mental health in the workplace. To strengthen credibility, recent and relevant literature was incorporated to reflect contemporary workplace dynamics and mental health challenges. Additionally, the researcher ensured that the participants' responses formed the foundation of the findings, rather than relying on personal experiences or prior knowledge gained from working at the SOE.

3.5.2 Transferability

The degree to which study findings can be used or adapted to different contexts, sit -uations, or people is known as transferability, according to Ayton (2023). It relates to the researcher's capacity to show that a study's findings might be applicable outside of the original research context, enabling readers to assess if comparable results might be seen in similar setting. The findings of this study on psychosocial support strategies for enhancing mental health at work, may be applicable to various organisational contexts. For example, the solutions that have been found can be modified and applied in different institutional contexts, such as training supervisors

to identify indicators of distress and to respond sympathetically to employees experiencing mental health challenges. As a result, these findings could be used by other institutions or organisations to improve or bolster their own staff or student assistance programmes.

3.5.3 Dependability

Dependability refers to maintaining stability and accuracy throughout the research process, from problem formulation to data collection and analysis, including safe storage of transcripts and other materials. It assures that the findings of the study remain secure and replicable in the course of time if the study were to be repeated under similar conditions (Ayton, 2023). Dependability also emphasises adherence to correct and appropriate research procedures (Dursun, 2023). The researcher safeguarded all research records were stored in a password-protected storage system, ensuring they remain accessible when required and are safely stored for a period of five (5) years. Additionally, audio recordings were taken during interviews for accuracy and reliability of the data. The study participants comprised employees who had been working in the same department of the organisation for at least two (2) years and were actively involved in the organisation’s wellness initiatives. In essence, they were well positioned to offer informed suggestions on psychosocial support strategies to improve mental health in the workplace. The key findings of the study were therefore expected to provide valuable insights into how organisations can effectively support their employees' mental well-being.

3.5.4 Confirmability

Confirmability relates to safeguarding objectivity and minimising researcher bias during the research process (Dursun, 2023). It also emphasises the importance of the researcher maintaining an impartial stance throughout the study (Ayton, 2023). In this study, all participants gave informed consent to participate in the interviews, allowing others to verify the data and thereby enhancing the authenticity and coherence of the collected data. Furthermore, the researcher took detailed field notes to complement the audio recordings, ensuring consistency and accuracy in data interpretation.

3.6 ETHICAL MEASURES

The ethics approval process involved obtaining ethics approval from the company based on the approval received from the Chief Executive Officer. Ethical standards such as informed consent, voluntariness, confidentiality and anonymity were strictly followed in the research process. The Protection of Personal Information Act (POPI Act) was strictly followed throughout the research process in order to safeguard the privacy of participants' personal data. The participants were made aware of the purpose of conducting the research as well as their rights and the option to withdraw from the research whenever desired.

Byrd (2020) asserts that the avoidance of harm, respect for participant vulnerability, voluntary participation, informed consent, prevention of deception, protection of pri vacy, anonymity, confidentiality and appropriate data management are all crucial ethical considerations in research. In a similar vein, the South African College of Applied Psychology (SACAP) outlines fundamental guidelines for conducting ethical research including beneficence, transparency and conformity to accepted norms of scientific rigour. Additionally, research should be planned and carried out in a way that reduces the possibility of false or misleading findings. The researcher followed ethical rules set down by the University's Research Ethics Committee during the planning and execution phases of this research.

Prior to data collection, institutional consent was also acquired from the hosting organisation to guarantee adherence to professional and ethical research norms (Byrd, 2020; SACAP, 2023).

The College of Human Sciences, where the researcher is enrolled in the Master of Clinical Psychology degree, granted permission to conduct the study and approved the research proposal. To ensure adherence to institutional ethical standards, the research also obtained ethical approval from the University Research Ethics Committee (UREC).

3.6.1 Avoidance of Harm

Avoiding injury is a basic ethical guideline in research, according to Byrd (2020). It is the duty of researchers to ensure that volunteers are not harmed in any way either physically, psychologically or emotionally. Additionally, participants must be given the option to leave the study at any time without facing any penalties or repercussions.

Every attempt was made to protect participants from danger in the current study, and there were no incidents of harm. The intention of the study was to explore employees experience of psychosocial support interventions for improving workplace mental health.

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3.6.2 Vulnerability

According to Byrd (2020), when conducting research interviews, researchers shoul d identify and minimise the involvement of vulnerable people. Additionally, SACAP (2023) advise researchers to offer debriefing sessions to participants if the research process causes unpleasant emotional reactions. Furthermore, participants must be properly informed about the nature of the services offered as well as any risks, responsibility and restrictions that may be involved. To promote involvement, researchers should also refrain from providing excessive or improper money or other incentives, as this might be considered coercion. Participants in the current study were not given any incentives. Additionally, because the participants worked in the telecom sector, they were not deemed weak, hence there was little chance of victimisation.

3.6.3 Deception of Participants

According to Byrd (2020), deception in research refers to purposefully misrepresent ing facts or withholding information from participants, including giving false informat ion to obtain participation that might otherwise be declined. Researchers should never mislead participants about important factors that could influence their decision to participate, such as possible physical hazards, emotional distress, according to SACAP (2023). As a result, participants must be informed as soon as feasible about all pertinent facts on the design and execution of the study. A participant information sheet, consent form and interview schedule were sent to participants. This helped participants make an informed choice about their involvement, which was voluntary, in the study.

3.6.4 Voluntary Participation

Byrd (2020) recommends that, prior to conducting research, researchers and participants should reach a clear consensus regarding their respective responsibilities. Furthermore, Byrd (2020) proposes that researchers have a

responsibility to enlighten the participants about the nature of the study's results as well as the procedures that will occur during and after the research process. Likewise, SACAP (2023) it stresses the importance of voluntary participation, without any form of coercion.

For this study, in keeping with ethical requirements, the researcher ensured that the participants were fully informed about the purpose and nature of the study, adhering to ethical principles regarding the avoidance of deception. Participation was entirely voluntary, and no person was coerced into taking part. At no stage were participants misled or provided with incomplete information about the inquiry. They were also informed of their freedom to withdraw from the research at any point without penalty. Furthermore, participants had full control over the disclosure of their attitudes, beliefs, and behaviours, including deciding when, where, to whom, and to what extent such information could be shared. These measures collectively make certain that voluntary and ethically sound participation was upheld throughout the study.

3.6.5 Informed Consent

According to Byrd (2020), informed consent is a fundamental aspect of research which provides participants with enough detail to decide about whether to participate in the study. Participants must be made aware that participation is voluntary, and participants may withdraw at any time.

Therefore, before conducting interviews, researchers must get informed consent, and participants must be notified that the sessions will be audio recorded. SACAP (2023) asserts that accurate documentation of informed consent is equally crucial.

3.6.6 Privacy

Byrd (2020) defines privacy as a person's right to prevent others from sharing, observing or analysing specific information or characteristics of themselves. It involved the person's freedom to choose when, to whom and to what degree to reveal their views, ideas and behaviour. Therefore, privacy is a crucial component of personal safety, necessitating that researchers behave sensitively and respectfully. Choosing participants carefully, such that their participation is unaffected by the researcher's convenience or familiarity, is also essential to ensuring privacy.

By asking the organisation for help in finding possible participants who fit the inclus ion criteria, the researcher in this study complied with the requirements of the Prote

ction of Personal Information (POPI) Act. The random selection procedure was aided by the Human Resources department, which kept a record of every employee in the Chief Technical Officer division.

The organisation and the researcher were unaware of which employees would ultimately take part in the study. This method protected participants' privacy by preventing them from being chosen based on convenience or personal ties (Byrd, 2020). Moreover, none of the subjects was directly involved with the researcher. SACAP (2023) emphasises that providing information anonymously strengthens privacy.

3.6.7 Anonymity

Byrd (2020) defines anonymity as the idea that, after the study has been completed, no one, not even the researcher, should be capable of identifying the participants or connect them to the data they gave. By refraining from using participant names during data collection and analysis, the researcher in this study protected participants' anonymity. To ensure that no participant could be recognised after the trial, number IDs like R1 and R2 were used instead. It is important to note that anonymity is distinct from confidentiality (SACAP, 2023).

3.6.8 Confidentiality

Byrd (2020) defines confidentiality as the responsibility to ensure that the identify of participants is only known to the researcher and, if needed, a small number of authorised members of the research team. As a result, confidential information is regarded as privileged and needs to be treated carefully.

Confidentiality is based on an understanding between the participants and the researcher that protects personal information from being accessed by others, making it an extension of privacy. By solely sharing the research methodology and findings with the academic supervisors, the researcher was able to maintain confidentiality. The supervisor was not aware of the participants' identities and had no access to any identifying information. Throughout the research procedure, these precautions guaranteed the confidentiality of all participant information.

3.6.9 Data Management

According to Byrd (2020), researchers have an ethical duty to tell participants about how their data will be handled, including information about data storage practices and how long the data will be kept. Additionally, participants should be made aware of who will be granted access to the research results, how confidentiality will be upheld and where the findings will be kept.

Participants were told that all data would be held secure but after five years of storage in a password-protected electronic file, would be destroyed. Additionally, they were told that the study findings would be shared with the organisation and included in their master's dissertation once it was completed. The Human Resource Management division will also be informed of the findings to facilitate the creation of psychosocial support plans targeted at enhancing workplace mental health.

3.7 CHAPTER SUMMARY

This chapter gave a detailed description of the study's methodology and research strategy. While the methods described the steps, tools and data analysis techniques, the research methodology comprised the research paradigm, approach and design.

The study was set within an interpretivist research paradigm, and the data collection method was directed by a case study design to fully comprehend the issue being studied, an exploratory case study was used in conjunction with a qualitative approach. Purposefully chosen participants were interviews and them analysis was used to analyse the data.

Every facet of reliability and moral behaviour was described in detail. Trustworthiness and ethical issues were also discussed, especially with regard to the sample, which included workers who had been employed by the company for longer than two years.

The findings are disc in the following chapters, after which they are interpreted and discussed in light of the body of current research.

CHAPTER 4

FINDINGS AND DISCUSSION

4.1 INTRODUCTION

This chapter contains the results of the data analysis conducted for the purpose of the current study. The analysis is informed by the study's aim to evaluate existing psychosocial interventions for workplace mental health and to develop a culturally adaptive, evidence-based framework to improve their effectiveness, sustainability, and applicability across diverse organisational contexts.

This chapter consists of four main parts. Firstly, the demographics of participants is considered. Secondly, the methods of data analysis are explained. Thirdly, the findings are presented thematically based on qualitative data obtained through interviews. Lastly, findings are reviewed against the background of relevant literature and their similarities and disparities are identified.

This chapter discusses the results obtained from analysis the empirical data gathered during the study. Building upon the research design and methodology outlined in Chapter 3, the findings are analysed in relation to the study's aim to evaluate existing psychosocial interventions for workplace mental health and develop a culturally adaptive, evidence-based framework to improve their effectiveness, sustainability, and applicability across diverse organisational contexts. The chapter commences with an overview of the participants' profiles, followed by a thematic presentation of the findings from the analysis of interview-derived data. The discussion integrates the empirical findings with existing literature, highlighting areas of convergence and divergence.

4.2 BIOGRAPHICAL INFORMATION OF THE PARTICIPANTS

The table below presents the participants' demographic information, including gender, employment status, as well as mental health resources used, and workshops attended as well as benefits of training

Table 4.1: Biographical details of participants

Code	Gender	Race	Employed	MH Grasp	MH Resources Workshops	Benefits of Training
P1	Female	Black African	10 Years	Yes	Mental Health Posters	Finance Physical Psychological
P2	Male	Black African	15 Years	Yes	Regular Sessions	Awareness
P3	Female	Black African	12 years	Yes	Virtual Workshops	Coping Mechanisms
P4	Female	Black African	3 Years	Yes	Employee Wellness Programmes	Venting Confiding
P5	Female	Black African	5 Years	Yes	Employee Wellness Programmes	Mental health Challenges and Coping mechanisms
P6	Female	Black	3 Years	Yes	Employee Wellness Programmes	Financial Litera Handle Stress Health Care Physical Health
P7	Male	Black African	5 Years	Yes	Fliers sent via email, Awareness Workshop, Telephonic Helpline	Awareness
P8	Female	Black African	8 Years	Yes	Mental Health Awareness via emails	Mental Health Awareness
P9	Female	Black African	6 Years	Yes	Telephonic Helpline	Assist Employe with Mental Issues
P10	Male	Black African	7 Years	Yes	Mental Health Wellness Day	He doesn't kno

All ten participants in this study were Black African employees, both genders, male and females, were included in the study, but the greater number of the participants was comprised of women (n=7) as indicated in Table 4.1. Years of work ranged from three to fifteen, providing enough exposure to organisational processes.

The inclusion of work experience in the sampling criteria was necessary as guided by the JD-R Model by Bakker & Demerouti (2017). According to JD-R model, it is believed that employees' perception of job demands and resources is formed over time due to interaction within the working environment.

Seven (7) of the participants were female. To ensure that the participants had sufficient understanding and experience within their department, the inclusion criteria stipulated that they must have been with the same department for at least two years. This method aligns with the assumptions of the Job Demands-Resources Model, which states that employees' perceptions of job demand, and job resources are developed through extended exposure to the work environment (Bakker & Demerouti, 2017). The JD-R model states that job demands (such as workload, emotional demands, and administrative pressures) and job resources (such as supervisory support, autonomy, and organisational support) develop their motivational and strain-based effects over time. This requirement helped ensured that participants had sufficient exposure to these structural and interpersonal processes to provide informed insights into workplace mental health, flexibility, and support systems.

Employees of all racial backgrounds were treated equally in terms of being considered for the study, although the final sample only included Black African employees. From a JD-R theory standpoint, job demands and resources are seen as universal constructs that can be applied to all occupational and demographic groups, although the experience of these demands and resources can vary based on certain social factors (Bakker & Demerouti, 2017).

According to Bakker and Demerouti (2017), employee well-being and performance are considered dynamic processes that are affected by continuous interactions between job characteristics and contextual factors. Hence, it is significant to consider situational factors to enhance the methodological and theoretical consistency of the research.

4.3 PRESENTATION OF FINDINGS (QUALITATIVE DATA)

This section provides an overview of the findings derived from the qualitative data collected through interviews. The data are reported factually**,** in strict alignment with the research interview questions. No interpretation or explanation is provided in this section. Raw data, including full interview transcripts, are included in the Appendix. Participant responses are presented verbatim to ensure authenticity. To address concerns regarding transparency and rigour, the qualitative data were analysed using thematic analysis, following Braun and Clarke’s (2006) six-step framework.

This section describes the themes derived from the data analysis. To maintain the authenticity of the participants' opinions, their comments are provided verbatim. The themes were identified directly from the data and organized in a manner consistent with the sequence and structure of the semi-structured interview questions and strategies used during data collection. This is in line with the principles of qualitative research that require a systematic alignment between research questions, data collection tools, and themes. According to Byrd (2020), organising findings in a manner consistent with the structure of the interview guide improves methodological clarity and the logical flow between research and findings.

Furthermore, the identification of themes from the narratives of the participants indicates an inductive form of analysis, where themes are not predetermined but are identified from the data. Byrd (2020) argues that the attention given to the probing method in semi-structured interviews enables the researcher to obtain depth, explanation, and context, which is essential in the development of themes. The alignment of results with the probes used in the research indicates rigour in the analysis and ensures that the themes are not removed from the context of the participants' experiences.

By structuring the presentation of findings in a similar manner to the interview guide, the study ensures that there is consistency between the research design, the process of data collection, and the presentation of findings, thus improving the credibility and trustworthiness of qualitative research (Byrd, 2020). The themes with the relevant interview questions are presented in Table 4.2. The viewpoints and opinions of the participants in response to the interview questions are presented in the next sections

4.3.7 Coding Framework

Raw Data Extract	Code	Category	Theme
"Introduce mental health for manager" (P1)	Manager training	Leadership Development	Leadership and Management capacity
"Managers should be trained on people's skills" (P5)	People skills training	Leadership Development	

“Leadership training” (P8)	Leadership training	Leadership Development	
“Managers need proper training to support properly” (P1, P8, P9)	Unrealistic expectations	Leadership Development	
“Allow employees to work from home…office has a negative energy” (P2)	Flexible work /negative energy	Workplace environment	Organisational culture and Psychological Safety
“Change in company culture…overworked and underpaid” (P7)	Culture change/ workload stress	Workplace environment	
“Good communication skills” (P6)	Communication skills	Communication	Communication as psychosocial support
“Promotions, employees recognition rewards” (P3)	Recognition and rewards	Career development	Recognition, Rewards and Career Growth
“Team building to boost morale” (P4)	Morale building	Social support	Social Support and Team Cohesion
“Team building only after culture change” (P7)	Conditional team support	Social support	
“Regular check – ins not just once-off workshops” (P1)	Continuous monitoring	Wellness programme	Continuous wellness systems and monitoring
“Engage all employees in wellness workshops” (P9)	Participation in wellness	Wellness Programme	

“More wellness days…opportunity to express challenges "(P10)	Wellness initiatives	Wellness Programme	
“Having a gym” (P10)	Preventive wellness	Wellness Programme	

4.3.8 TRUSTWORTHINESS OF THE STUDY

In qualitative research, trustworthiness is used to assess the study’s rigour and quality of the study. To enhance rigour; The researcher used verbatim quotations to allow participants’ voices to be accurately represented; maintained a transparent record of coding and analysis process, ensured that interpretation were based on the data rather than personal bias, and included detailed descriptions to support the findings. This study ensured trustworthiness by addressing the four key criteria proposed by Lincoln and Guba (1985); credibility, dependability, conformability, and transferability.

Credibility

Credibility relates to how accurate the results are in capturing the experiences of the participants. Using semi structured interviews, giving participants the freedom to express themselves extensively using verbatim to ensure that results are based on the participants’ words. Spending ample time in dealing with the data via transcription and analysis using the inductive coding procedure, ensuring that themes are based on data. Though these approached, the finding were able to reflect the authentic experiences of employees.

Dependability

The term dependability pertains to the consistency and reliability of the research process through time. The study ensured dependability by providing a clear and detailed description of the research methodology and procedures; outlining in detail how data was collected and analysed using a systematic analysis approach (Braun & Clarke, 2021).

Confirmability

The term confirmability is used in research to refer to the objectivity of the findings, ensuring they reflect participant's responses rather than researcher bias. Confirmability was enhanced by using verbatim quotes to substantiate the study's findings; used inductive coding to facilitate emergence of themes; the researcher practised reflexivity, remaining aware of personal biases and avoiding influencing interpretations and maintained a clear record of how codes and themes were developed. All this contributed to the objectivity of the findings.

Transferability

The concept of transferability is all about applicability of results to other settings. Although qualitative research is context- specific, transferability was enhanced by providing a detailed depiction of research setting clearly outlining the participant selection criteria, describing the organisational and contextual factors influencing the study. This enables other scholars to judge whether the findings of the study may be applicable to similar organisations.

4.4 SUMMARY OF EMPIRICAL FINDINGS

The empirical study examined the use of psychosocial approaches to support mental health at work. Both male and female workers were considered, with a slight majority of female participants. This study considered workers with service durations ranging from three years to more than fifteen years, based on service duration, and sought views from both new and long-serving workers. The participants were quite diverse in age, ranging from young people in their early twenties to people in their late fifties.

The data obtained from the semi-structured interview process was analysed by employing reflexive thematic analysis approach which is based on the framework by Braun & Clarke (2021). The chosen technique was used owing to its capacity for discovering, organising, and interpreting themes that emerge from qualitative data.

The results demonstrated that participants, understood mental wellbeing to include not only emotional and psychological but also social aspects of well-being. It is often connected with resilience, stress management, and dealing with work and personal issues simultaneously. According to Holland (2023).

The analysis followed Braun & Clarke (2021) six- phase framework, ensuring transparency and rigour. With the use of thematic analysis, it was possible to

establish some critical psychosocial support approaches based on employees' lived experience. Each of these themes reflect a particular aspect of workplace psychological support, proving that intervention should not be only personal but systematic.

This section presents the key themes that emerge from the thematic analysis of participant responses. The result question informed the analysis "Employees experience of psychosocial support strategies for improving workplace mental health?"

The sub-questions were also addressed:

1. What psychosocial measures currently exist in the workplace?
2. How do employees perceive mental health?
3. What additional psychosocial support are required?

Using an inductive thematic analysis approach, six overarching themes were developed. These themes represent the employees' lived experiences and recommendations for enhancing employees' psychosocial support.

Participants suggested ways to enhance mental well-being during work hours, and their measures included organising various activities within the organisation, such as EAPs, stress management seminars, mindfulness activities, wellness days, and occasional guest lectures on mental wellness issues by experts. Inadequate wellness sessions, lack of involvement from HR and senior management, and heavy workloads are factors that contribute to irregular wellness sessions. The International Labour Organization (ILO, 2022) emphasised leadership commitment and organisational backing play a key role in the success of workplace mental health initiatives, while also recognising that increased workloads and poor work structure may limit the effectiveness of wellbeing initiatives.

The employees' perception that increased awareness, decreased stigma, improved coping strategies, better communication, and increased productivity are significant benefits is in line with the WHO and ILO (2022), who stress the importance of mental health promotion at the workplace through awareness, psychological safety, decreased stigma, and open communication, which are all important factors in improving wellbeing and productivity at the workplace. Some workers were

comfortable discussing the topic among their colleagues. Even then, they were rather apprehensive about approaching their superiors. Awareness-raising measures were viewed as inducing inclusiveness, understanding and openness. Although a lack of uniformity acted as a constraint in creating a sustained impact. Workers called for regular workshops, private counselling facilities, employee support groups and training for their superiors on increased sensitivity while dealing with mental ailments. Views were divided. Some workers were satisfied with the present strategy. The others called it a superficial activity. The factors that emerged as most impactful were counselling services, flexible work scheduling and stress management workshops. Stigma, fear of disclosure, lack of awareness about resource availability, workload pressures and confidentiality in team settings were major challenges.

Challenges mentioned by employees include stress related to deadline pressures, work overload and interpersonal conflicts. Strategies to cope with these issues include employee assistance programmes (counselling), self-care activities (exercise and meditation), and taking leave when needed. Strategies for handling psychosocial support were seen as positive but inadequate. The employees appreciated the efforts of the organisation but stressed the importance of consistency in mental well-being strategies, as Boot et al. (2024) has observed, that inconsistent or intermittent implementation of psychosocial interventions can undermine their effectiveness. This is about making strategies more routine and part of their normal work life. The organisation's culture stood out as a factor in influencing mental health outcomes. An organisation's supportive culture was seen as opening channels of communication regarding mental health issues and reducing their stigma.

4.4.1 Theme 1: Leadership and Management Capacity as a Psychosocial Resource

Participants repeatedly mentioned the necessity for managerial training and leadership training programs:

"Managers *must undergo adequate training to assist us adequately" (P1)*

"Managers must be given training in human relations." (P5)

*“Leadership training.” (*P8)

The finding suggests that workers believe managers be involved in psychosocial support in the workplace. Managers behaviour directly influence employees stress levels, their emotional state and workplace relationship.

This finding correlates with organisational psychology research studies which suggest that leadership is a significant predictor of employees’ mental health. Good relationship creates a psychologically safe environment for employees, reducing work -related stress (Schaufeli, 2017). In addition, according to WHO (2022), managerial actions considerably impact the mental health outcomes of organisations. This theme shows that effective psychosocial support requires leadership development, not just individual- based intervention.

Participants expressed that poor leadership contributes to high levels of stress, and experiences of inadequate support in the workplace. For example, P1 stated “Managers need proper training to support us properly.” While participant P5 noted “Managers should be trained on people skills.” Moreover, participants P8 and P9 also emphasise the training of leaders, pointing out the negative impact of leadership shortcomings.

The above findings indicate that the provision of psychosocial support should be considered in terms of what occurs during the day -to- day management of organisations rather than merely being an organisational program. In this respect, ineffective leadership practices were identified as a significant psychosocial risk factor, contributing to miscommunication, unresolved workplace challenges, and inadequate emotional support.

4.4.2 Theme: Organisational culture and Psychological Safety

This theme was developed through inductive coding of participants’ responses pertaining to their experiences at work, communication, and perception of organisational support. Codes like toxic work environment, excessive workloads, lack of flexibility, employees are overworked and underpaid and office has a negative energy were categorised in terms of organisational culture and psychological safety, thus developing this theme.

Employees tend to perceive mental health as significantly shaped by the organisational culture and working conditions, rather than just personal resilience.

Similar findings have been reported in the literature indicating that workplace stressors including high job demands and negative organisational culture are associated with burnout and psychological wellbeing (Rugulies et al., 2023). Psychological safety is important for enhancing employee wellbeing and productivity (APA,2024).

Psychological support should therefore address structural and environmental factors like workload and workplace culture. The participants highlighted the significance of a positive organisational culture in promoting employee wellbeing and fostering a healthy work environment. The need for effective coping strategies is crucial because it not only helps boost employee wellbeing within an organisation but also builds a successful organisation.

P1: *"Rather not say."*

P2**:** "*Very badly because the environment has a negative energy."*

P3**:** *"The organisation culture between employees has always had a positive impact. We are like family."*

P4**:** "*Rather not say."*

P5: "*It affects mental health because a person spends almost half of the day at work, when you feel sad, imagine spending eight hours in a place that makes you depressed."*

P6: "*The organisational culture is the life of the organisation, if it's good, everyone is happy and works with motivation and dedication."*

P7**:** *"It affects mental health big time. Toxic culture will impact productivity and worsen mental health."*

P8**:** *"It affects mental health dramatically because that is where employees spend almost half of their day, interacting with other employees like every day."*

P9: "*If the culture is not conducive to employees, then it makes it difficult for them to thrive in such an environment*."

P10: *"I think the organisation should invest in changing the organisational culture."*

Some participants (P2, P5, P7, P8, and P9) talked about the implications of toxic or negative work cultures on poor mental health conditions. This leads to stressed, depressed, unproductive, and underperforming employees. Some (P3 and P6) showed the positive implications of supportive, family-friendly work cultures. Family-friendly work cultures promote happiness, motivation, and employee loyalty. In some cases, participants (P1, P4) did not feel the need to answer this question, which could be a result of being careful when dealing with the culture of their workplaces.

According to research, employees tend to withhold or filter their responses in an organizational setting as a means of protecting themselves from possible negative outcomes (LaMontagne et al., 2014b). This may be particularly relevant when dealing with sensitive issues such as mental health, where concerns abour being judged or retaliation may influence individual's willingness to participate in research interviews or surveys. The study's recommendation that emerged from the participants was the need to improve work culture to ensure better employee well-being (P10). A positive organisational culture contributes to improved employee outcomes, including lower stress levels, enhanced mental health, increased engagement, and increased productivity as it promotes psychological safety in the workplace.

Participants described positive and negative organisational cultures: negative culture as stress, depression and lack of productivity and positive culture as in support, teamwork and motivation. Some participants did not respond indicating sensitivity around organisational critique.

4.4.3 Theme 3: Recognition, Rewards and Career Development

Participants associate recognition and promotion as key to wellbeing.

"Promotions, employee recognition rewards." (P3)

Recognition is perceived as psychological validation, influencing, self-esteem, motivation, and job satisfaction. This finding expands the concept of psychosocial support to encompass organisational justice and fairness. Empirical studies found that recognition positively influences employee involvement and psychological

wellbeing (Rasool et al., 2025). Psychosocial support is not limited to counselling but includes fair and transparent reward systems.

Findings indicate that psychological and social support does not only involve counselling or training, but also organisational justice (promotions), Reward/recognition mechanisms and morale- boosting activities. In line with organisational psychology research, the findings highlighted a strong link between recognition, reward system, and employee well-being.

The emphasise on promotions and reward suggest that employees' psychological wellbeing is affected greatly by their perception regarding their worthiness and fairness in the workplace. The process of rewarding employees makes them feel worthy, increases their motivation level, and helps them stay committed to their jobs. Similarly, promotions give a feeling of opportunity and growth and help in increasing wellbeing among employees. Frustration and stress among employees can be experienced when they feel that they are not rewarded adequately and do not have opportunities to grow at the workplace.

Research in South Africa highlighted that workplace mental health is associated with wider socio-economic and organisational influences, with employees reporting varying experiences based on gender, income, and social expectations (Shekhar & Saurombe, 2026). Participants were asked "*What additional psychosocial support strategies would you recommend for improving mental health in the workplace*?" they responded

P1 – "*Introduce mental health training for managers…".*

P2: "*Allows employees to work from home, where there is complete comfort, rather than office where there is negative energy."*

P3: *"Promotions, Employee recognition reward and Team building."*

P4: *"No answer provided."*

P5: *"Managers should be trained on people's skills."*

P6: "*Good communication skills"*

P7: "*Team buildings only after a workplace culture and value change."*

P8: "*Leadership training."*

P9: “*To offer mental health trainings to managers.”*

P10**:** “Having a gym internally*.”*

4.4.4 Theme 4: Social support and Team Cohesion

The participants identified teamwork and social interaction as important.

“*Team building to boost morale.” (P4)*

“Team building only after culture change.” (P7)

Social relationships offer emotional support and a sense of belonging, which are important for mental health. The perception of psychosocial support evolves from being associated exclusively with mental health strategies to an organisational wellbeing system. In context, a lack of recognition in the workplace can contribute significantly to employee stress, as individuals may feel that their efforts and achievements are undervalued. Similarly, limited promotion opportunities can affect employee motivation and psychosocial wellness by causing individuals to feel unproductive and stagnant at work. Furthermore, poor team cohesion can harm interpersonal relations between employees, which can deprive workers of much-needed emotional support when dealing with problems encountered in the workplace.

Social support is a well-accepted buffer from stress and burnout (Leka & Jain, 2010). However, the participants highlighted that superficial team building cannot work without deeper cultural change. This theme exhibit that psychosocial strategies must foster genuine interpersonal support systems within organisations.

Participants highlighted team building activities as important, indicating that social support and healthy interpersonal relationships in the workplace help to reduce stress and improve employee well-being. Positive interactions between coworkers may result in a sense of belongingness as well as facilitate effective communication to foster healthy work environment. However, as P7 suggested “Team building only after a workplace culture and value change.” Indicating that merely organising team building exercises is not enough for overcoming existing organisational challenges. Thus, the above quotation emphasises that such activities must be accompanied by an atmosphere of positivity, fairness, and organisational values to be successful.

Participants highlighted the concepts of mental health, focusing on emotional and psychological well-being and relationships. Coping skills, mental stability, stress management, daily functioning, and the effects of relationships and the workplace is some of the areas of focus. These areas of focus are consistent with the principles of qualitative research, which focus on understanding the experiences of individuals in their social and organizational contexts. According to Creswell and Poth (2018), qualitative research aims to explore how individuals make meaning of their experiences and as such, participants expressed the following views when asked "*What changes, in your opinion, could be made to improve the psychosocial support offered to staff members?*"

P1 – "*Introduce more workshop so that employees become more comfortable sharing their challenges with each other.*"

P2 – *"Allow them to stay away from a negative environment."*

P3 – "*Having Human Resource that will focus on employee relations, maintaining a safe work environment, and managing employee engagement to support the organisation's goal and optimise performance."*

P4 – "*Team building to boost the morale of the staff. Engage the employees in fun or awarding activities".*

P5 – *"Managers should be trained on people's skills*"

P6 – "*leadership skills".*

P7 – "*Change in company culture and values. Change in how managers view workload, most employees are overworked and underpaid.*"

P8 – "*Leadership skill".*

P9 – "*To have all employees engage in wellness workshop".*

P10 – "By having more wellness days where employees are also given an opportunity to express the challenges they face on daily basis."

4.4.5 Theme 5: Continuous Wellness Systems and Monitoring

Participants expressed dissatisfaction with current once -off interventions.

"Regular check-ins -not just once off workshops." (P1)

“More wellness days.” (P10)

Employees require ongoing and structured psychosocial support, rather than passive initiatives like emails and posters. This aligns with WHO (2022), which advocate, integrated workplace mental health programmes rather than isolated interventions. Effective psychosocial support must be sustained, monitored, and measurable.

This theme was developed through inductive coding of participants’ responses pertaining to continuous wellness systems, and regular check-ins. Participants recommended regular mental health check-ins and wellness monitoring, mental health training for managers, flexibility in the workplace in order to achieve better work-life balance, building a sense of teamwork and peer support, effective communication and leadership, and promotions and reward systems. participants expressed the following views when asked “*What kind of mental health resources or workshops are available in your workplace?*”

P1 – “*Employee programme that includes weekly mental health posters and training / workshop*.*”*

P2 – *“Regular session with health service provider”*

P3 – “*Virtual workshops were introduced a couple of months, nothing psychical, no tracking progress or attendance of these virtual workshops.”*

P4 – “*Employee wellness programme.”*

P5 – *“*Employee wellness”

P6 – “*Employee wellness”.*

P7 – *“Through fliers on mental health sent on e-mail, awareness workshops and telephonic helpline*”

P8 – *“Mental health awareness via email and telephonic helpline”.*

P9- “*Telephonic helpline, workshops via email.”*

P10 – “*Mental health wellness day.”*

4.4.6 Theme 6: Communication as a Cross-Cutting Psychosocial Enabler

This theme was identified through inductive thematic analysis of participants' responses to the question "What additional psychosocial support strategies would you recommend for improving mental health in the workplace? codes included manager's training, work-life balance, employee recognition, team building, communication as a cross-cutting psychosocial enabler.

Communication influences are clarity, trust and emotional safety.

"Good communication skills." (P6)

Poor communication is associated with workplace stress and disengagement, while effective communication improves employee mental health (Quick & Henderson, 2016). Communication is a foundation mechanism for delivering all other psychosocial support strategies.

P6 succinctly stated the importance of "good communication skills are important since poor communication results into misunderstanding, stress, and lack of support. Poor communication undermines trust, and psychological safety, while effective communication fosters clarity, inclusion, and emotional support.

Previous empirical studies show that effective psychosocial workplace environments are characterised by supportive leadership, autonomy, recognition, and multi-level support systems that promote employee wellbeing (Fukuura et al., 2026). "

P1: *"introduce mental health training for Managers. Conduct regular employee wellness surveys.*

P2**:** "*Allow employees to work from home, where there is complete comfort, rather than at the office where there is negative energy."*

P3**:** "*Promotions, Employee recognition rewards and Team Building."*

P4**:** *"Team building to boost morale of the staff, engaging employees in fun activities and rewarding activities".*

P5: "*Managers should be trained on people's skills*."

P6**:** "*Good communication skills"*

P7 "*Team buildings only after a workplace culture and value change*."

P8: "*Leadership training*."

P9: *“To offer mental health training to managers.”*

P10**:** “*Having a gym internally.”*

4.5 DISCUSSION OF FINDINGS+

The findings indicate that leadership practices have a crucial influence on the psychosocial wellbeing of their employees. Participants consistently emphasised that managers do not have sufficient skills to assist their employees’ psychological condition due to insufficient levels of emotional intelligence, communication skills, and managing workload. Some participants explicitly called for leadership development due to poor managerial skills in recognising employee psychological challenges.

Organisationally, things such as promotion of employees, giving them recognition, and rewarding them are essential since these practises are instrumental in improving morale and self-worth of employees. Structurally, approaches such as flexible working schedules and policies of workplace are key towards addressing issues related to work-life balance and work stress. Overall, all these dimensions illustrate that interventions to psychosocial needs should be part of the bigger system rather than individual effort.

As highlighted above, it is clear that the notion of psychosocial support among employees goes beyond mental support services offered through training and awareness programs. The aspect of promotion, recognition of employee, accomplishment, rewards, and team building emerged as other components that have strong connections with motivation, morale, and organisational commitment. This implies that factors such as organisational fairness, recognition, and employee career advancement play critical roles in enhancing employee wellbeing. Thus, psychosocial support strategies must be approached holistically, considering individual and organisational factors.

Communication was identified as an important part in psychosocial support, influencing how employees experience leadership, organisational culture, and

workplace relationship. Participants highlighted the need for improved communication skills among managers and teams.

These findings indicate that any successful intervention strategy require multidimensional approach to address different aspects of employees' wellbeing. Psychologically speaking, there is a need for organisations to increase awareness about mental health as well as develop the capability of employees to cope with stress. Socially there is a need to engage in activities like team building so that positive relations among employees can be created and prevent feelings of isolation at work.

Generally, the findings suggest that the employees recommend a holistic and integrated psychosocial strategy, encompassing mental health interventions but also recognition, organisational system, leadership practices and social engagement initiatives. The results highlight the need for organisations to adopt holistic strategies that include psychological, social, and organisational dimension of employee mental health.

4.6 CHAPTER SUMMARY

In summary, findings indicate that are knowledgeable about mental health and its relevance in the workplace. However, despite this awareness many employees still feel uncomfortable addressing mental health issues at work, suggesting that stigma remains prevalent. The finding further indicates that psychosocial support systems within the organisation were usually not reliable or strong enough.

The participants' recommendations underscore the need for a holistic approach to workplace mental health. While mental health challenges are on the rise around the world, it is necessary to prioritise employee well-being in promoting individual and organisational development. Participants recommended regular mental health check-ins and wellness monitoring, mental health training for managers, flexibility in the workplace in order to achieve better work-life balance, building a sense of teamwork and peer support, effective communication and leadership, and promotions and reward systems.

Further, training managers in empathy and mental health awareness demonstrate the important role of leadership in fostering a supportive work culture. Clear

communication about available resources and working hours highlights the need for an environment where employees feel safe and encouraged to seek help.

Incorporating mental health considerations into HR practices and performance reviews helps bring overall well-being to the forefront of organisational culture, acknowledging it as important rather than treating it as a secondary consideration. In conclusion, these practices and strategies aim to help employees in their overall mental health and well-being in addition to ensuring higher satisfaction levels and retention in their employment at a workplace, ultimately proving to be a profitable venture for organisations everywhere. The future of workplaces focused on mental health programs lies in building resilience and adaptability as employees change and evolve.

The following chapter presents the summary, conclusions and recommendations.

CHAPTER 5

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.1 INTRODUCTION

The earlier chapters outlined the findings of the study derived from the data analysis. The current chapter is guided by the study's objectives as well as the procedures that were followed. The research sought to explore the employees' experience of psychosocial support strategies for improving workplace mental health. Chapter 5 provides a summary and overview of the study's key findings. It includes a critical evaluation of the issues that emerged from the research. It offers insights into the disparities and similarities that emerged between the research study and the literature review regarding psychosocial support strategies to enhance mental health at work. Conclusions are drawn from the research questions.

5.2 SUMMARY OF LITERATURE REVIEW

In Chapter 1, the research contextualised a discussion of the exploration of the employees' experience of psychosocial support strategies for improving workplace mental health for the SOE employees in addressing current mental health concerns in the workplace, as Mokofe (2024) stated, "In today's integrated world, countries around the globe are constantly shaped by global changes that shape their economic, social and political landscapes"(p. 649) "the nature of working life has evolved substantially in the last few decades". Notably, despite these developments opening new horizons for employees, they pose potential threats to employees' mental health in the current globalised world. Current evidence reveals that 62% of employees perceive mental health issues as an important factor influencing employee productivity (Hess, 2020; H.Stringer, 2023).

The psychosocial issues mentioned as important in affecting employees include employment demands, working culture and social relationships. In addition, recognising the value of good mental health is important. With this kind of positive mental state, an individual can form healthy relationships, achieve personal and professional growth, and make significant contributions to society (Holland, 2023). Individuals with positive mental health have good emotional equilibrium, enhanced

psychological resilience, and social adaptability to tackle each challenge at work (Shisana et al., 2024).

Several studies have highlighted the role of the SOE in promoting macroeconomic growth. According to the SOE's Annual Report (2024), the significant effect of broadband on the country's Gross Domestic Product (GDP) was revealed: a 1% increase in broadband can add about R5 billion to GDP. Broadband infrastructure is recognised as a vital element for advancing macroeconomic growth, as underscored by various studies carried out by prominent bodies such as the World Bank and ITU (ITU, 2024). Apart from the economic considerations, the increasing connectivity of the digital age has altered the working environment, which has created different psychosocial risks such as information overload, feelings of isolation among teleworkers and heightened performance pressures. As a result, the current literature reflects the need for the adoption of psychosocial support approaches to promote the psychological wellbeing of employees in a digitalised working environment.

Psychosocial interventions in the workplace have been acknowledged not only for their potential to positively impact the well-being of employees as well as organisational outcomes, such as increased productivity and decreased absenteeism, as the study of psychosocial working conditions has emphasised the evidence base that has emerged to show that interventions targeting psychosocial factors can positively impact workers' health and functioning as well as organisational outcomes (Boot et al., 2024). The inclusion of technological strategies such as strong broadband infrastructure to support mental health in organisations is in line with the World Health Organisation's (WHO, 2022) highlights that the changing workplace shaped by digitalisation and global developments necessitates supportive structures, accessible resources, communication strategies and targeted interventions to promote employee mental health and well-being.

Chapter 2 investigated different psychosocial support practices that sought to enhance mental health in the workplace through a literature review. The chapter introduced theoretical notions and paradigm shifts associated with organisational psychosocial support, including the historical shift in occupational health from mere physical safety to the entire spectrum of physical, psychological, emotional and

social well-being. Modern workplace health research emphasises that addressing factors such as stress management, self-esteem, a strong sense of belonging, together with job satisfaction play an important role in supporting employee wellbeing and enhancing organisational performance, consistent with the World Health Organisation's (2022), Mental health is described as a positive state that supports individuals to cope with everyday stress, achieve their capabilities, perform well in learning and work, and actively contribute to society,"(p1) and highlighting that supportive work environments that prevent psychosocial risks and promote mental health contribute to better productivity and work functioning.

In meeting these needs, the chapter explained the importance and need for creating a mentally safe workplace through flexible working policies, mental health-related policies and programs, mental health worker training programmes and the implementation of EAP. Such interventions not only improve employee engagement and morale, but they also form an essential component of sustainable organisational performance. Moreover, aligning with the latest literature and policy trends (Mofatteh, 2020a&b; WHO, 2022a&b), this chapter explained that there is now a paradigm shift away from reactive and biomedicine solutions and instead the focus is on preventive and organisational levels that feature psychosocial work conditions, culture and leadership at the core of employee mental health outcomes. Taken in its entirety, this literature review provided an excellent base to address this study's research questions.

5.3 SUMMARY OF EMPIRICAL STUDY

In Chapter 3, the study technique was outlined, along with procedures for gathering and analysing the data. This chapter provides conclusions derived from the analysed findings in Chapter 4. The conclusions are formulated as responses to the research questions, grounded in evidence obtained from thematic analysis of participants' interviews. As a matter of tradition in research, the sub-research questions will be addressed first, as they form a basis upon which provides answers to the main research question.

This study adopted an exploratory case study design guided by an interpretivist research paradigm, as outlined in Chapter 3 of this study. The interpretivist paradigm prioritises the importance of exploring and understanding the subjective experiences

of individuals in research as Bryd (2020) argues, qualitative research aims to study human behaviour from the perspective of the participants, analysing how people interpret their experiences rather than focusing on an objective reality. This aligns with the principles of the interpretivist paradigm, where reality is understood as socially constructed and knowledge is derived from analysing participants' lived experiences. Semi-structured interviews with 10 participants were employed to gather data from participants, conducted using a predetermined interview schedule. Interviews were conducted via a Teams application and telephone, as described by Byrd (2020).

Permission for the research study was granted by the SOE. To qualify to participate in the study, participants had to hold permanent positions within the O&M department, who had served the organisation for more than three years and had also served within the same department for more than two years. All races and genders were included.

Participants were selected through a combination of purposive and convenience sampling chosen according to their availability and suitability of the study. Participants were identified from the organisation's database. A preliminary study with two employees was conducted to test and refine interview schedule and improve data collection process.

The data were analysed using thematic analysis, drawing on Tesch's framework, and themes were derived from the interview transcripts of participants. The study ensured trustworthiness through the application of credibility, transferability, dependability, and confirmability. The ethical issues considered in this study protected participants from harm, protected vulnerable participants, ensured voluntary participation, informed consent, privacy and confidentiality, as well as appropriate data management.

The conclusions drawn in this chapter, therefore, are not just a summary of the findings, but also an interpretation of the findings, as well as an indication of the contribution the study has made to the existing knowledge base regarding mental health in the workplace. Each conclusion is explicitly linked with the research questions.

5.3.1 RQ1: What are the current psychosocial support measures in the workplace? (see Chapter 4 sub-section 4.3.5,).

The findings of this study revealed employees a strong desire among for better psychosocial support systems within the organisation. Although the Employee Wellness Programme (EWP) is formally acknowledged as part of the psychosocial support systems, the overall narrative of the participants was one of inadequacy, limited scope, and the shortcomings of available psychosocial support systems in adequately addressing employees' mental health requirements. A few participants identified some positive aspects of the wellness program. The results suggest that although wellness programmes were formally introduced in the organisation, their effectiveness seems limited. Employees perceived wellness programmes in a positive manner by acknowledging the opportunity provided by the workshops for building trust and discussing personal and professional challenges. There was also recognition of the potential benefits associated with implementing the strategies discussed in the webinars and workshops.

However, these positive attitudes were clouded by more general concerns about the awareness, accessibility, and effective implementation of psychosocial support systems. Several employees reported that they were not aware of any formal psychosocial support system in place in the organisation. This lack of awareness raised questions about whether these systems were really in place. Moreover, there was also scepticism about the organisation's genuine interest in the well-being of the employees. The wellness programme was seen as being implemented merely for compliance purposes rather than being genuinely effective.

Overall, the study revealed a disconnect between the organisational discourse on employee wellbeing and employee experience. On the one hand, wellness initiatives are recognised and acknowledged; on the other hand, poor communication and inadequate engagement hinder the effectiveness of such initiatives. This disconnect underscores the necessity for transparent and visible psychosocial support initiatives to take employee wellbeing beyond organisational rhetoric into practice.

This conclusion is considered a new academic contribution, as it empirically illustrates the phenomenon in which psychosocial support structures can be both present and absent simultaneously, with the support structures formally present but

without practical relevance. This study contributes to the existing body of knowledge by distinguishing between available support structures and their perceived credibility.

5.3.2 RQ2: What are the employee's views on mental health care? (see Chapter 4 Sub-sections 4.3.1, 4.3.2 & 4.3.3)

The findings indicate that employees have a clear understanding of mental health care in the workplace. Mental health extends beyond merely the absence of illness but is "a positive concept of psychological well-being that equips individuals to cope with stress, to accomplish things for themselves, to learn as much as possible, to work in productive ways, and to contribute constructively to their communities." This is similar to the conceptualization of mental health by the World Health Organisation (WHO, 2022), as a dynamic and enabling concept of wellbeing.

Employees perceive the effectiveness of mental health awareness initiatives as multi-dimensional. Instead of being perceived as information-based initiatives, they are viewed as mechanisms that impact the nature of communication, participation, the working environment, and productivity. Mental health care is perceived not just as reactive care to address the mentally distressed individual, but also as a proactive organisational strategy.

The findings also indicate that workers perceive effective mental health care to be linked to open dialogue and positive working relationships. Awareness initiatives are perceived as promoting open conversations about stress and mental health, which helps reduce stigma and fostering collective coping strategies. In this respect, mental health care acts as a social enabler to overcome isolation and enhance social support structures.

Most importantly, employees understand that work stress is not just an individual concern but also an organisational one that is embedded in organisational structures and environmental stressors like workload and organisational climate. This is an appreciation of mental health care that includes individual interventions as well as organisational interventions. Employees thus understand that effective mental health care requires attention to organisational practices, not just individual practices.

In addition, mental health support is seen to have a strong association with productivity and performance. Because employees believe that a good mental health

and lower stress levels result in improved work performance, thereby enforcing the notion that mental health initiatives are beneficial for both employees and the organisations.

Regardless of differing engagement levels, the responses generally indicate that mental health care is viewed as a vital service for addressing workplace stress. Collectively, the findings contribute to the existing literature by indicating that employees view mental health care as an integrative resource in the workplace. The conclusion contributes to existing research by indicating that insufficient knowledge is not the main barrier to addressing mental health, with other factors potentially being more influential.

5.3.3 RQ3: What psychosocial support systems are required to support employees in the workplace? (see Chapter 4 sub-sections 4.3.4 & 4.3.6)

The results of this study indicate that a supportive psychosocial system must be systemic, culturally sensitive, and organisationally supportive rather than focusing solely on individual-based intervention strategies. Employees' ways of coping with stress are significantly influenced by the organisational culture and the organisational leadership style. Hence, a psychosocial support system cannot solely focus on the employee's capacity for coping with stress but must extend its focus to the organisational context in which the employee operates.

The findings highlight the necessity for a supportive and psychologically safe organisational culture. Workplace culture affects the extent to which employees feel at ease discussing mental health with others at work. Despite possessing good understanding of mental health, they frequently experience discomfort when discussing such issues at work, due to factors including organisational culture, gossip, professional boundaries, and perceived risk to their careers. This indicates that knowledge is not enough, and that culture is the gatekeeper of mental health conversations. Participants expressed that poor leadership leads to high stress level, frustration and feeling of not being valued but the good leadership is good for their mental wellbeing. Managers should be trained on people’s skills so that they will be able to offer help to those who are having mental health concerns and also trained on the communication skills. Promotion and reward helps stay committed and

increase their motivation level. The participants also recommended a continuous wellness system and regular check ins, not a once off workshop.

The findings also revealed that supportive and family-friendly work environments can facilitate adaptive coping, motivation, and commitment. On the other hand, hostile and non-supportive work environments can promote defensive coping styles, which tend to be limited in their effectiveness. The psychosocial support systems should focus on building supportive and stigma-free work environments where employees can discuss their mental health concerns without feeling isolated.

Competence and attitudes of managers are also found to be another important factor. Managers act as gatekeepers of access to psychosocial support. Mental health literacy, empathy, and responsiveness of managers play an important role in making employees feel safe to access support. This implies that good systems should have leadership development, accountability, and guidelines for supporting employees.

It is also important to consider structural accessibility. Delays in professional counselling, administrative issues, and lack of clear referral processes can limit the effectiveness of wellness programs and flexible work arrangements. The findings show that flexibility does not ensure psychological safety and effective access to support. To make flexible work arrangements and wellness programmes effective mental health interventions, they need to be culturally legitimised, managerially supported and structurally reinforced.

5.3.4 Main Research Question: What is employees' experience of psychosocial support strategies for improving workplace mental health?

The literature has highlighted the importance of leadership style in relation to mental health in the workplace. Supportive leadership style is associated with trust, empathy and psychological safety, whereas transformational leadership style is associated with motivation and inspiring employees, thereby reducing stress and increasing engagement. Leadership style is considered a psychosocial support mechanism that could affect the social environment of the workplace (Bandura, 1986)

Leadership was seen as one of the key elements that affected the psychosocial wellbeing of the employees. The empathic and supportive act of the leadership were

related to trust, psychological safety, and openness. On the other hand, when there was no such leadership support, the employees felt stressed. Employees found that organisational culture was an important factor when considering the success of psychosocial intervention programs. The organisation culture that existed was one of stigma, which made it difficult for employees to seek help due to issue around communication.

The use of flexible working conditions by employees was perceived to be helpful in dealing with stress and ensuring work- life balance. Nonetheless, the efficacy of the arrangement relied heavily on the backing of management and the organisation's openness to flexibility. Working staff reported both positive and negative feedback concerning wellness programmes, some finding them valuable but most considering them as inconsistent, inaccessible or even symbolic. Employees found peer support to be an effective form of informal coping, as it enhanced emotional support. Nevertheless, peer support was also reliant upon trust among colleagues.

In general, the experiences of employees reveal that psychosocial support strategies have a connection with each other, and they are highly dependent on organisational culture and leadership. However, just having psychosocial support approaches does not make much sense unless they can be experienced positively by employees.

Participants stressed the significance of promoting holistic well-being. This entails not just mental well-being but also physical and emotional well-being. A supportive work environment facilitates psychosocial support because behaviour is shaped by surrounding social environment (Bandura, 1986), this is further supported by evidence on how cultural factors affect mental health (Smith, 2021) and also validated by research indicating that organisational change can increase psychosocial risks (Backhaus et al., 2024).

Participants reported that there are strong connections among the topic and play a role in shaping how individuals perceive psychosocial support in organisations. For instance, a good communication plays an important role in raising awareness regarding wellness programs. On the other hand, a good organisational culture results from the presence of a supportive leadership style, which in turn creates psychological safety. Furthermore, appreciation and social support ensures that a

positive organisational culture prevails, and therefore, employees demonstrate a willingness to participate in mental health initiatives.

In summary, the responses of the participants show how the psychosocial support strategies can be executed on various levels and dimensions such as wellbeing strategies, workplace and organisational culture, stress management, support systems, and flexible working arrangements. Research suggest that positive mental health is associated with beneficial outcomes, including improved productivity, lower rates of absenteeism and better retention of employees (WHO, 2022 a&b). Therefore, the importance of the implementation of psychosocial support strategies is emphasised, considering the positive outcomes not only for the employees but for the organisation in general.

5.4 RECOMMENDATIONS

Recommendations are a product of the research conducted and serve as guidelines for future research. Hence, it is essential that they be clearly defined so that the relevant people can take the required actions in the given situation (Byrd, 2020). The study's findings are based on qualitative interviews conducted using a structured interview guide. The research provides recommendations on strategies that can be implemented to strengthen psychosocial support and promote mental health in the workplace.

5.4.1 Recommendations for National and Sectoral Workplace Mental Health Policy Framework

The Culture-Mediated Access Model of Workplace Mental Health (Kock, Graupner, & Baloyi, 2025), the findings highlight the role of organisational culture in shaping access to mental health resources and support its inclusion in national and sectoral policy framework.

It is recommended that national policymakers and relevant regulatory bodies integrate the Culture-Mediated Access Model into existing occupational health and wellness policies. The results of this study suggest that mental health outcomes are influenced by the interplay among awareness, culture, managerial practices, structural access and workplace flexibility. It is argued that policy frameworks that focus solely on the existence of wellness programmes or other requirements are

insufficient for effective mental health promotion in the workplace. Adoption of the model would provide a theoretically and empirically informed framework for holistic mental health interventions in the workplace.

National guidelines on workplace mental health need to include organisational culture and managerial competence as essential factors influencing access to psychosocial support. Informed by the research findings on stigma, managerial gatekeeping and symbolic support systems, it is recommended that national guidelines on workplace mental health go beyond individual-level factors. Clearer guidelines need to be developed on organisational culture to ensure alignment with employees' experiences.

5.4.2 Recommendations for the Organisation

The recommendations that emerged from this research are guided directly by findings, which clearly demonstrate the limitations of generic psychosocial interventions and stress the necessity of adopting more targeted, sustained, and organisational approaches.

First and foremost, training programs on mental health awareness should be provided for managers, since the participants noted leadership as an important area needing attention. This suggestion is based on the observation that employees do not receive sufficient support from managers. According to the literature review, it has been found that managers play an important role in the prevention of mental health concerns at work (Dimoff & Kelloway, 2019).

Secondly, organisations should conduct mental health assessments and wellness check-ups continuously rather than using the one-offs workshops. The participants stated the importance of consistent interventions since interventions that are currently used do not provide lasting effects. This aligns with research showing that programmes delivered over time yield better outcomes than one-time sessions. (Waddell et al., 2023).

Thirdly, the research recommends flexible work scheduling to improve work-life balance. The participants identified the work environment as one of the factors affecting their psychological state, especially citing stress as being caused by negative workplace conditions. Research shows that flexible work arrangements

are linked to lower stress levels, improved mental health and increased productivity (Shiri et al, 2023).

Fourth, organisations should strengthen employee recognition, reward, and promotional mechanisms as well as career advancement since the participants made direct correlations between these and positive psychological wellbeing and morale. The findings suggest that employees who feel undervalued or overlooked are more likely to experience stress and disengagement. Research indicates that recognition programs and fair reward systems significantly improve employee motivation and engagement (Kelloway & Day, 2020). This highlights the importance of integrating psychosocial support with broader human resource practices.

Fifth, team building and peer support programs need to be carried out to strengthen social cohesion and emotional support in the workplace environment. On this note, however, as per participants recommendations, the organisational culture needs to be improved first before undertaking any measures to guarantee their success. This suggestion is based on the premise that interventions cannot prove effective within toxic organisational cultures. Likewise, literature supports the assertion that organisational culture determines the effectiveness of interventions, requiring supportive environments for any wellbeing program among employees to prove effective (Creswell & Poth, 2018; Kelloway & Day, 2020).

Lastly, participants identified bad communication as one of the factors contributing to stress.

5.4.3 Recommendations for Employees

Involvement of employees should be encouraged in both planning and evaluation of mental health initiatives. The study identified various levels of engagement and support perceptions. It is recommended that an organisation design mechanism to encourage employee involvement in initiatives for promoting wellbeing and providing psychosocial support. This supports the study's conclusion that employee experiences are central to the provision of effective mental health support.

It is advisable to motivate employees to take an active action in supporting and safeguarding their mental health, including seeking professional help when faced

with stressors or personal challenges, in order for the mental health initiatives adopted by the organisation to be effective.

These recommendations collectively operationalise the major contribution of the research. They are based on the research findings and seek to bridge the gap between policy, culture, awareness and access. Implementation of the recommendations would help to move towards substantive, culture-based workplace mental health support, rather than symbolic compliance.

5.5 SUGGESTIONS FOR FURTHER RESEARCH

Although this study provides valuable insight into the effectiveness of psychosocial support strategies in the workplace, there are some areas where more research can be conducted.

Firstly, further research is required to evaluate the effectiveness of such psychosocial interventions over an extended period of time, especially when interventions are tailored for particular situations in organisations. From this current study, it was evident that most interventions were generic and did not have a lasting effect; therefore, longitudinal studies could examine whether context-specific and continuous interventions lead to improved mental health outcomes over time.

Secondly, it is recommended that future research explore the role of organisational culture in determining success of psychosocial interventions. Findings show that respondents perceive organisational culture strongly affects the success of mental health initiatives. Further studies could assess how leadership style, organisational values, and the organisational environment influence these interventions and contribute to their effectiveness or ineffectiveness.

Thirdly, the role played by mental health training programs aimed at managers cannot be overlooked. Considering the significant role of managers in this study, researchers can investigate how training managers on providing psychosocial support and managing people affects the performance of employees.

Fourth, future could examine the impact of flexible work arrangements on the psychological wellbeing of employees across different sectors. While this study highlights the perceived benefits of remote and flexible work, there is still a need

for empirical research on how such practices affect work-related stress and organisational performance.

Moreover, the findings suggest that employees associated mental health with recognition, reward, and career development. It is recommended that future research explores the link between HR practices and psychological wellbeing, with the aim of understanding how organisational policies influence or decrease mental health challenges.

In conclusion, it is recommended that future studies adopt mixed- method approaches, integrating qualitative and quantitative data to provide a more holistic understanding of workplace mental health. Larger samples should be included for better external validity. At the same time, qualitative perspectives may help to add another layer to mental health issues in workplace.

5.6 LIMITATIONS OF THE STUDY

Despite the valuable insights generated, this study has revealed several limitations. Limitations, according to Sumpter et al. (2023), the limitations of beyond researchers influence, encompassing factors such as the research design, statistical approaches, and funding constraints.

One of the main limitations of this study is that the sample size used in the study was very small. Although this aligns with qualitative research, which focuses on depth rather than breadth, it can be argued that it is insufficient, as it does not cover all perspectives, a factor researchers should consider (Sumpter et al., 2023). Since this study was qualitative in nature and was conducted in an organisation- specific environment, one cannot assume that its findings will apply to all employees from other organisations. In a qualitative study, however, it is important for the researcher to prioritise on depth rather than breadth (Creswell & Poth, 2018).

The second limitation in this study was that it relied on self-reporting from participants, which might be affected by bias. Participants may have provided socially desirable responses or may have withheld certain information due to fear of

judgement and negative organisational implications. This could have compromised the depth and reliability of the data.

The other constraint is associated with the context specificity of the study. The results were grounded in one organisational environment, which may have unique cultural, structural, and operational characteristics. Therefore, the findings may not be generalised in other settings.

Additionally, time constraints might also have affected the extent to which data was collected and analysed. An additional timeframe would have given us ample time to interact more deeply with our subjects, possibly conducting further interviews or even longitudinal research. This is a limitation related to the study's design, as discussed by Sumpter et al. (2023).

Lastly, the research focused primarily on employee perspectives, excluding views of management and organisational leaders. This implies that the results may be lacking an important perspective concerning the overall organisational dynamics affecting the psychosocial support approach.

5.7 CONCLUDING REMARKS

The purpose of this study is to examine employees experience of psychosocial. support strategies for improving workplace mental health. This research was motivated by increasing concerns regarding employee mental health in today's society work environment, which affect organisational functioning. The central problem addressed in this research is the growing prevalence of workplace mental health challenges in South Africa.

With an interpretivist methodology, the research yielded many insightful results about the lived experience of the employees. Based on the results obtained from a thematic analysis, there emerged several domains of experience which included work related stress, organisational culture / psychological safety, availability of psychosocial intervention, opinions about interventions available, and suggestions for improvement.

The participants described their experiences of workplace mental health had been impacted heavily by high work demands, organisational culture that did not provide adequate support, lack of awareness regarding support resources, and insufficient interventions. While some psychosocial support mechanisms were formally in place, many of the participants found these programs to be inadequate and infeasible. The employees expressed a strong need for continuous, visible and meaningful support systems that respond to their real need.

Theoretically speaking, employees' experiences were informed by the interdependence relationship between job demands, coping styles, and organisational support theory. For their perspectives, participants showed that their psychological wellbeing is not influenced solely by the availability of support but also by the way they perceive such support within their working environment.

From a practical perspective, it can be therefore concluded that the provision of mental health support to employees cannot rely solely on the existence of corporate wellness initiatives. On the contrary, employees highlighted the importance of tackling root workplace conditions, including high workloads, poor communication, and limited support from management. According to the participants, psychologically safe environments facilitate discussion of issues related to mental health without any fear of stigma and repercussions.

The findings indicated that leadership has a strong influence on the emotional wellbeing of employees. Responsive and empathetic leadership promoted safety and trust , while poor leadership contributed to stress and disengagement. Employees also emphasised the importance of interventions that are relevant, inclusive, and responsive to their specific needs and context.

Overall, the personal experiences of employees clearly show that an appropriate psychosocial intervention strategy is important not only for promoting psychological wellbeing among employees but is also strongly connected with their workplace involvement, motivation, and the sustainability of organisations. By foregrounding employees' voices and lived experiences, this study provides meaningful insights that can inform policy, organisational management, and the design of more responsive mental health interventions.

In summary, this study makes contributions to the field through empirical evidence regarding employees' experiences with psychosocial support programs. The research underscores the significance of using integrated and employee- focused programs that not only involve policymaking but also consider practical matters associated with employees' working environment.

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APPENDICES

Appendix A: College of Human Sciences Ethics Certificate

UNISA university of south africa

College of Human Sciences_CREC

NHREC Registration # : (Rec-240816-052)
Ref #: 5684
Name: Ms Thembelihle Eusebius Kunene
Student #: 50864513

Date: 30/01/2025

Dear: Ms Thembelihle Eusebius Kunene

Decision: Ethics Approval from 30 January 2025 to 29 January 2026

Researcher: Ms Thembelihle Eusebius Kunene

Broadband Infraco SOC

Johannesburg

euselily@gmail.com 0730610841

Supervisor: Dr Cily Tabane Tabanem@unisa.ac.za

Psychosocial support strategies to improve mental health in the workplace

Qualification: MA Clinical Psychology

Thank you for the application for research ethics clearance by the College of Human Sciences_CREC for the above-mentioned research study. Ethics approval is granted for one year.

The **medium-risk application** was **reviewed** by the College of Human Sciences_CREC on **30 January 2025** in compliance with the Unisa Policy on Research Ethics and the Standard Operating Procedure on Research Ethics Risk Assessment.

The proposed research may now commence with the provisions that:

1. The researcher(s) will ensure that the research project adheres to the values and principles expressed in the UNISA Policy on Research Ethics.
2. Any adverse circumstance arising in the undertaking of the research project that is relevant to the ethicality of the study should be communicated in writing to the College of Human Sciences_CREC.
3. The researcher(s) will conduct the study according to the methods and procedures set out in the approved application.
4. Any changes that can affect the study-related risks for the research participants, particularly in terms of assurances made with regards to the protection of participants' privacy and the confidentiality of the data, should be reported to the Committee in writing, accompanied by a progress report.

5. The researcher will ensure that the research project adheres to any applicable national legislation, professional codes of conduct, institutional guidelines and scientific standards relevant to the specific field of study. Adherence to the following South African legislation is important, if applicable: Protection of Personal Information Act, no 4 of 2013; Children's act no 38 of 2005 and the National Health Act, no 61 of 2003.

6. Only de-identified research data may be used for secondary research purposes in future on condition that the research objectives are similar to those of the original research. Secondary use of identifiable human research data requires additional ethics clearance.

7. No field work activities may continue after the expiry date (**29 January 2026**). Submission of a completed research ethics progress report will constitute an application for renewal, for Ethics Research Committee approval.

Additional Conditions

1. Disclosure of data to third parties is prohibited without explicit consent from Unisa.
2. De-identified data must be safely stored on password protected PCs.
3. Care should be taken by the researcher when publishing the results to protect the confidentiality and privacy of the university.
4. Adherence to the National Statement on Ethical Research and Publication practices, principle 7 referring to Social awareness, must be ensured: "Researchers and institutions must be sensitive to the potential impact of their research on society, marginal groups or individuals, and must consider these when weighing the benefits of the research against any harmful effects, with a view to minimising or avoiding the latter where possible." Unisa will not be liable for any failure to comply with this principle.

Note

The reference number 5684 should be clearly indicated on all forms of communication with the intended research participants, as well as with the Committee.

Kind regards,



Prof Khatija Khan
Chair of College of Human Sciences_CREC
E-mail: khankb@unisa.ac.za



Professor Omwoyo Bosire Onyancha
Executive Dean / By delegation from the Executive Dean of College of Human Sciences_CREC
E-mail: onyanob@unisa.ac.za

Appendix B: Request for permission to conduct research study with employees from Broadband Infraco SOC LTD

Title of the research study: Psychosocial support strategies to improve mental health in the workplace

Unit 14

Casa Mia

Radiokop

2040

Broadband Infraco (PTY)LTD

Octave Street,

Radiokop

2040

Dear Sir

REQUEST FOR A PERMISSION TO CONDUCT RESEARCH FOR STUDY PURPOSES

I hope this letter finds you well. I am writing to request permission to conduct research for study purposes as part of my master's degree in psychology at the University of South Africa. My research aims to formulate a framework for addressing mental health in the workplace and to establish whether the wellness workshop has a positive impact on the mental health of the employees. I wish to explore psychosocial support strategies that improve mental health in the workplace. This study is an essential component of my academic program, and I believe it will contribute to the body of knowledge in this field.

In this regard, I kindly request your assistance and approval to conduct my research at Broadband Infraco Head Office, located at Radiokop, Octave Street. I have carefully considered the ethical and logistical aspects of my study, and I am committed to adhering to any regulations and guidelines set forth by the organisation. I am also willing to cooperate fully with any requirements or conditions you may deem necessary.

I look forward to your positive response. Please feel free to contact me at euselily@gmail.com or 073 061 0841 to discuss in more detail.

Thank you.

Regards

Miss Thembelihle Kunene

Appendix C: Broadband Infraco Permission Letter

Broadband Infraco (SOC) Limited

Octave Street

Radiokop

Roodepoort

2040

Unit 14 Casa Mia

Radiokop

1724

Dear Ms T Kunene

RE: REQUEST FOR PERMISSION TO CONDUCT RESEARCH STUDY

Please be informed that your request to conduct your educational research in formulating the framework to address mental health in the workplace at Broadband Infraco (SOC) Limited, is hereby approved.

You are required to share the results of your study/report with BBI (myself or HR Executive) before being published publicly in order to align on all outcomes.

Wishing you the best in your research,

Yours Sincerely



Mr Gift Zowa

Acting Chief Executive Officer

Date: 09/10/2023

Appendix D: Participant Selection Email

Outlook

Invitation to Participate in Research Study on Workplace Mental Health

From Siphesihle Simelane <Siphesihle.Simelane@infraco.co.za>

Date Fri 2026-01-30 09:07

To **M a i n t e n a n c e** <Maintenance@infraco.co.za>

Cc Thembelihle Kunene <Thembelihle.Kunene@infraco.co.za>
1 attachment (37 KB)

Participant Information Sheet KUNENE 18 DECEMBER 2024.docx;

Good day Team,

I trust that you are well.

We have received a request from **Ms Thembelihle Kunene,** who is conducting a research study titled **"Psychosocial Support Strategies to Improve Mental Health in the Workplace."** The study aims to explore ways in which organisations can strengthen psychosocial support to enhance employees' mental health.
Employees in the Operations and Maintenance Department are invited to **voluntarily consider participating** in this study. Participation is entirely optional, and all ethical guidelines, including confidentiality and anonymity, will be strictly adhered to throughout the research process.

Eligibility criteria for participation:

- Permanent employees of the company
- A minimum of three (3) years' employment with the organisation
- At least two (2) years of continuous service in the same department
- Employees of all genders and races

Employees who meet the above criteria and are interested in participating are requested to **contact Ms Thembelihle Kunene directly** using the contact details provided in the attached information sheet. The information sheet also outlines the study details, participation requirements, and ethical considerations for your reference.
Your consideration of this request is appreciated, as the findings of the study may contribute to improving mental health support within the workplace.

Kind regards,
Siphesihle Simelane

Appendix E: Participant's Information Sheet

Research title: Psychosocial support strategies to improve mental health in the workplace.
Researcher: Thembelihle Eusebius Kunene

Ethics clearance reference number:
Research permission reference number (if applicable):

Date: 2025

Title: **Psychosocial support strategies to improve mental health in the workplace.**

Dear Prospective Participant

My name is Thembelihle Eusebius Kunene. I am researching with Dr E M Cily Tabane, a senior lecturer in the Department of Social Work, towards an MA in Clinical Psychology at the University of South Africa. We invite you to participate in a study titled "Psychosocial support strategies to improve mental health in the workplace."

WHAT IS THE PURPOSE OF THE STUDY?

I am conducting this research to understand the challenges that may impact the effectiveness of psychosocial support strategies, what might influence the effectiveness of the psychosocial support strategies and gather employee perspectives and suggestions related to mental health initiatives

WHY AM I BEING INVITED TO PARTICIPATE?

I chose this organisation for my research because there is a noticeable trend of employee demotivation, accompanied by frequent complaints regarding stress, burnout, and various mental health challenges. This reflects a significant concern for employees' well-being and overall productivity. The mental health issues faced by the workforce are likely impacting both individual performance and the organizational climate. Investigating these issues further could provide valuable insights into how

the organisation can better support its employees' mental health, improve workplace morale, and ultimately enhance overall performance and employee satisfaction. The sample size will be determined by saturation.

WHAT IS THE NATURE OF MY PARTICIPATION IN THIS STUDY?

The study involves audio and semi-structured interviews. The interview lasts an hour.

CAN I WITHDRAW FROM THIS STUDY EVEN AFTER HAVING AGREED TO PARTICIPATE?

Participation is voluntary, and there is no penalty or loss of benefit for non-participation.

Participating in this study is voluntary, and you are not obligated to consent to participate. If you decide to participate, you will be given this information sheet to keep and asked to sign a written consent form. You are free to withdraw at any time and without providing a reason.

WHAT ARE THE POTENTIAL BENEFITS OF TAKING PART IN THIS STUDY?

Participating in the study can empower employees to voice their concerns and needs, influence workplace practices, and contribute to a healthier, more productive working environment. There is no monetary value.

ARE THERE ANY NEGATIVE CONSEQUENCES FOR ME IF I PARTICIPATE IN THE RESEARCH PROJECT?

Participants may experience emotional discomfort and time commitment. steps will be taken to minimise negative consequences, such as providing support resources and ensuring that participation remains anonymous and confidential.

WILL THE INFORMATION I CONVEY TO THE RESEARCHER AND MY IDENTITY BE KEPT CONFIDENTIAL?

The information and identity will be kept confidential. The researcher is committed to ensuring that all personal data is protected and remains private.

Any information provided will be stored securely in password-protected files and locked lockers. Only authorised research personnel will have access to this data.

If the study findings are shared (in research reports or publications), the researcher will only include aggregated data or anonymised information, meaning your responses will not be identified.

Before participating, the participants will be fully informed about the confidentiality measures in place. Participants will be able to ask questions and ensure they feel comfortable with how the information will be handled.

Suppose the participants decide to withdraw from the study at any point. In that case, any information provided will not be used or deleted from the research records, ensuring your privacy is maintained.

HOW WILL THE RESEARCHER(S) PROTECT THE SECURITY OF DATA?

The researcher will store hard copies of your answers for at least five years in a locked cupboard/filing cabinet for future research or academic purposes; electronic information will be stored on a password-protected computer. Future use of the stored data will be subject to further Research Ethics Review and approval if applicable. *Hard copies will be shredded, and/or electronic copies will be permanently deleted from the computer's hard drive using a relevant software program*.

WILL I RECEIVE PAYMENT OR ANY INCENTIVES FOR PARTICIPATING IN THIS STUDY?

No payment or reward is offered for participating in the study.

HAS THE STUDY RECEIVED ETHICS APPROVAL?

YES

HOW WILL I BE INFORMED OF THE FINDINGS/RESULTS OF THE RESEARCH?

If you want to know the final research findings, please get in touch with Ms Thembelihle E. Kunene at 073 061 0841 or 50864513@mylife.unisa.ac.za. The findings are accessible for 5 years.

Should you require further information or want to contact the researcher about any aspect of this study, please get in touch with Dr E M Cily Tabane on 012 4298907.

Should you have concerns about how the research has been conducted, contact Dr E M Cily Tabane at Tabanem@unisa.ac.za. 012 429 8907.

Contact the research ethics chairperson of the College of Human Sciences Research Ethics Committee, Prof Khatija Khan, at E-mail: khankb@unisa.ac.za and 012 – 429 6549 if you have any ethical concerns.

Thank you for taking the time to read this information sheet and for participating in this study.

Thank you



Thembelihle E. Kunene

Appendix F: Informed Consent Form

Title: Psychosocial support strategies to improve mental health in the workplace.

I, _____ (participant name), confirm that the person asking my consent to take part in this research has told me about the nature, procedure, potential benefits and anticipated inconvenience of participation.

I have read (or had explained to me) and understood the study as explained in the information sheet.

I have had sufficient opportunity to ask questions and am prepared to participate in the study.

I understand that my participation is voluntary and that I am free to withdraw at any time without penalty if applicable.

I am aware that the findings of this study will be processed into a research report, journal publications and/or conference proceedings, but that my participation will be kept confidential unless otherwise specified.

I agree to the recording of the interview.

I have received a signed copy of the informed consent agreement.

Participant Name & Surname…… (please print)

Participant Signature……..Date……

Research's Name & Surname: Thembelihle E. Kunene



Research Signature

Date: 30 Jan 2026

Appendix G: Interview Schedule

Title of the research: Psychosocial support strategies to improve mental health in the workplace

Identifying Participants

Demographics

What is your age range: 23 to 40 or 40 to 65?

What is your gender: Male, Female, or prefer not to say?

What is your length of employment: 3 to 10 or 10 to 20?

1. **Mental Health Awareness**

- What is your understanding of mental health?
- What kind of mental health resources or workshops are available in your workplace?
- Who participates in these trainings or workshops related to mental health awareness?
- What are the benefits of these trainings or workshops related to mental health awareness?
- How comfortable do you feel discussing mental health issues with your colleagues/ manager?
- In your opinion, how does awareness of mental health issues impact overall workplace culture?
- What additional resources or training would you like to see implemented to improve mental health awareness in your workplace?
- How effective do you find the current psychosocial support strategies?
- What specific support strategies have you found most helpful?

- What barriers, if any, are there that employees face in accessing mental health support at work?

Individual Experience

- Could you share any experiences you've had with mental health challenges in the workplace?
- How did you overcome these challenges?

Perception of Current Strategies

- How do you feel about the psychosocial support offered by the organisation?
- What effect do you think these strategies have on employees' mental health?

Cultural Considerations

How does the organisational culture affect mental health in the workplace?

Recommendations for Change

- What changes, in your opinion, could be made to improve the psychosocial support offered to staff members?
- What additional psychosocial support strategies would you recommend for improving mental health in the workplace?

Appendix H: Participant Number 7 (P7) Transcript

Semi-structured interview schedule

Title of the research: Psychosocial support strategies to improve mental health in the workplace

Identifying Participants:7

What is your age range: 23 to 40 or 40 to 65?

Participant: 42

What is your gender: Male, Female, or prefer not to say?

Participant: Male

What is your length of employment: 3 to 10 or 10 to 20?

Participant: 5

1. **Mental Health Awareness**

- What is your understanding of mental health?

  Participant: Emotional, psychological, and social well-being on how you think, handle stresses that arise in your life.

- What kind of mental health resources or workshops are available in your workplace?

  Participant: Through fliers on mental health sent via email, awareness workshops and a telephonic helpline.

- Who participates in these trainings or workshops related to mental health awareness?

  Participant: All staff members, all employees from BBI.

- What are the benefits of these trainings or workshops related to mental health awareness?

Participant: You get to be aware of mental health. The downside is that awareness is fine, but if the company culture is toxic, it seems useless.

- How comfortable do you feel discussing mental health issues with your colleagues/ manager?

  Participant: Very comfortable, I am accepting of my mental health and would want to assist others to heal based on my experiences.

- In your opinion, how does awareness of mental health issues impact overall workplace culture?

  Participant: Happy employees mean a healthy workplace, good productivity and profits.

- What additional resources or training would you like to see implemented to improve mental health awareness in your workplace?

  Participant: Culture and values change; employers should implement a working culture and value, and practice it.

- How effective do you find the current psychosocial support strategies?

  Participant: Not useful. It seems impersonal, lacks accountability, and appears to be outsourced.

- What specific support strategies have you found most helpful?

  Participant: None of those provided by the employer

- What barriers, if any, are there that employees face in accessing mental health support at work?

  Participant: Fear of being seen as troubled, as weak due to mental health issues.

Individual Experience

- Could you share any experiences you've had with mental health challenges in the workplace?

  Participant: Toxic work culture and disconnected mindset from executives and senior managers in dealing with the root cause of mental health affecting employees' productivity.

- How did you overcome these challenges?

  Participant: Reached out to fellow employees.

Perception of Current Strategies

- How do you feel about the psychosocial support offered by the organisation?

  Participant: Not effective due to misalignment between the executive, senior managers and ordinary staff.
- What effect do you think these strategies have on employees' mental health?

  Participant: It's temporary and not effective, you get to speak with a professional, but in the workplace, the actions of management are the opposite

Cultural Considerations

How does the organisational culture affect mental health in the workplace?

Participant: It affects mental health big time. Toxic culture will impact productivity and worsen mental health.

Recommendations for Change

- What changes, in your opinion, could be made to improve the psychosocial support offered to staff members?

  Participant: Change in company culture and values. Change in how managers view workloads, most employees are overworked and underpaid.
- What additional psychosocial support strategies would you recommend for improving mental health in the workplace?

  Participant: Team building only after a workplace culture and value change.

Appendix I: Proof of Editing

Cilla Dowse Editing

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For editing of Master's Dissertations
and
Doctoral Theses

This letter serves to confirm that editing and proofreading were done for:

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General Psychology

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PSYCHOSOCIAL SUPPORT STRATEGIES TO IMPROVE MENTAL HEALTH IN THE WORKPLACE



Cilla Dowse
25 February 2026

Cilla Dowse
PhD in Assessment and Quality Assurance in Education and Training: University of Pretoria 2014
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Appendix J: Turnitin Report

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