Management Practices Surrounding Mental Health in the Workplace: Analysing the Context of the Maltese Public Service through the Views of Managerial Public Employees

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ABSTRACT

This research project aims to explore the viewpoints of individuals occupying leadership roles about mental health management within the workplace, with a specific focus on those employed within the public sector. The objective is to uncover the way these managerial figures conceptualise mental health within the professional setting. Furthermore, it delves into their assessments of the competencies and impediments they encounter when addressing the mental well-being of their workforce during employment.

The research employs a qualitative methodology to gain a comprehensive comprehension of management's outlook on mental health in the work environment. Data was gathered via eight semi-structured interviews involving individuals in leadership roles within the public sector. These participants, responsible for overseeing employee groups, were chosen to gain deeper insights into specific obstacles that necessitate resolution. Furthermore, alongside conducting interviews, this project chose to analyse two publicly accessible documents titled ‘Managing Mental Health at Work’ and ‘Employee Wellbeing: A Line Manager’s Guide’ released by the Employee Support Program (ESP) unit to gather a diverse array of viewpoints.

The findings shed light on the complexities of overseeing mental health in the workplace, encompassing both immediate and prolonged strategies that management employs to tackle mental health issues. Additionally, it unveils the hesitations some managers face when handling workplace crises. In light of these findings, the final chapter offers actionable recommendations to enhance managerial methods, fostering a better work environment that significantly impacts individuals. Moreover, this research opens avenues for further exploration in this critical domain, facilitating ongoing advancements in the realm of workplace mental health.

Keywords: Mental Health; Management; Public Service; Public Employees; Managers; Workplace; Managerial; Maltese; Malta

DEDICATION

I dedicate this research project to people dealing with mental health challenges, whose strength and determination have inspired my research, as well as to those who work tirelessly to raise awareness, reduce stigma, and improve mental health services and support for everyone.

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CHAPTER 1: INTRODUCTION

1.1 INTRODUCTION

Ongoing global transformations in social, economic, and cultural landscapes have collectively cast a profound influence on individuals worldwide (Bhavsar and Bhugra, 2018). Addressing these transformations requires mechanisms and policies from governments, NGOs, and employers to help communities adapt to these new realities (Bhavsar and Bhugra, 2018).

In the specific context of the Public Service in Malta, there has been a growing acknowledgment of the substantial impact that mental well-being has on an employee's productivity, engagement, and overall effectiveness. This recognition has led to significant investments in initiatives like the Employee Support Programme (ESP), a dedicated unit that provides an extensive array of complimentary and confidential support services tailored to address the unique challenges faced by public employees in both their professional and personal lives.

While the presence of robust human resources and accessible support services is undoubtedly crucial, the main key to fostering a mentally healthy work environment ultimately resides in the realm of management (Neal, 2017). It is, therefore, imperative to delve deeper into the intricate relationship that exists between managerial strategies and the management of mental health in the modern workplace. This study assumes paramount relevance in understanding the pivotal role that management plays in shaping the mental health landscape of the public service sector in Malta, consequently contributing valuable insights to the broader discourse on workplace mental health management.

1.2 MOTIVATION FOR TOPIC SELECTION

The decision to take on this research project emerges from a profound motivation rooted in the researcher's personal and professional experiences. Furthermore, it is substantiated by a body of empirical research. Notably, empirical evidence and research reveals that workplace management frequently encounters difficulties in recognising, mitigating, and adequately managing prevalent stressors within the work environment (Nielsen et al. 2017, Harvey et al. 2017, Stansfeld and Candy, 2006).

The repercussions of such inadequacies are significant, as managers play a pivotal role in facilitating the recovery and well-being of employees when they face mental health challenges (WHO, 2022). However, the prevailing uncertainty and perceived lack of competence among managers often hinder their ability to provide the necessary support to affected employees (WHO, 2022).

In light of these concerns, this research project seeks to delve into the intricacies of mental health management within the Maltese Public Service, as perceived and practiced by managerial staff, with the aim of shedding light on areas that require improvement and greater understanding.

1.3 OBJECTIVES AND RESEARCH QUESTIONS

This research project has the objective of exploring the viewpoints of individuals occupying leadership roles about mental health management within the workplace, with a specific focus on those employed within the public sector. Through semi-structured interviews with employees in a managerial grade and the analysis of two documents entitled "Employee Wellbeing: A Line Manager's Guide" (ESP, n.d.) and "Managing

Mental Health at Work" (ESP, n.d.), this research sought to investigate the following research questions:

1. How do managers working in the public service view mental health in the workplace? (Research Question 1)
2. What perceived skills and barriers do managers have when it comes to addressing employees' mental health at work? (Research Question 2)

Consequently, in light of the aforementioned inquiries, the researcher has opted for the utilisation of semi-structured interviews to address Research Question 1. This approach aims to gain comprehensive insights into the perspectives, attitudes, and convictions of managers within the public sector concerning mental health in the workplace. Furthermore, the responses gathered from these interviews will inform the findings related to Research Question 2. This facet of the study will focus on elucidating the barriers that managers encounter when managing mental health issues among their staff, as well as exploring their knowledge and the challenges they confront while addressing and supporting mental health issues within their workforce.

In addition to the interviews, the researcher will conduct a thorough examination of two documents published by ESP. These documents serve as practical manuals and guidelines aimed at assisting managers in preventing problems, intervening when required, and promoting a supportive work environment.

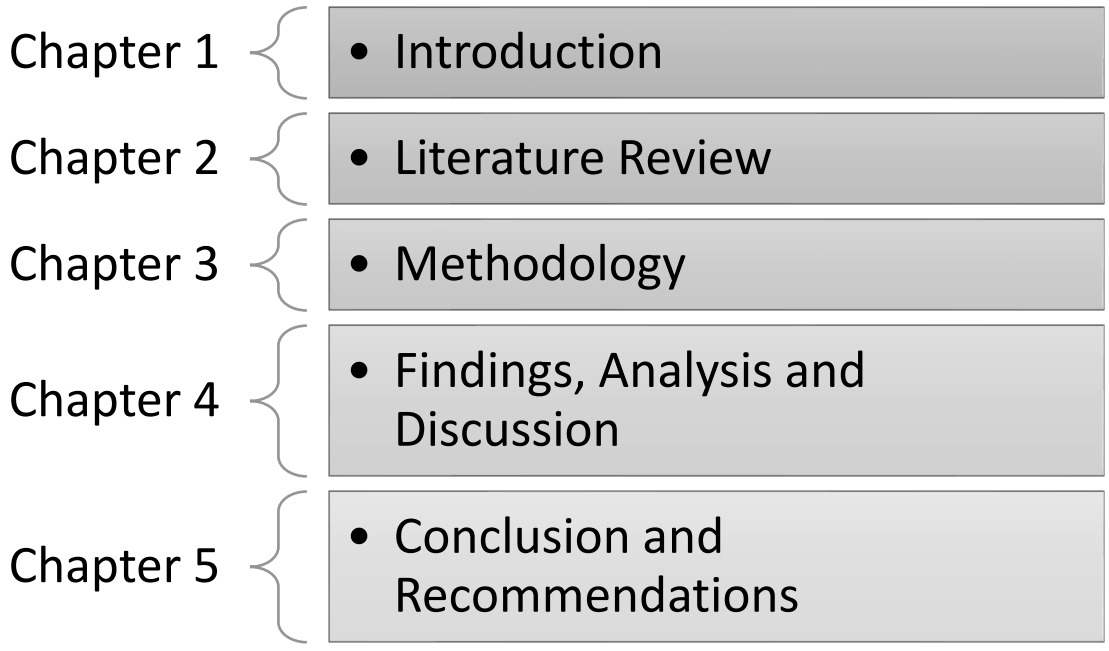
The inclusion of ESP's documents in the research design is specifically intended to provide valuable insights into how public service managers are advised by ESP to navigate and comprehend mental health issues in the workplace. This strategic choice not

only complements the investigative process but also aligns with the underlying objectives of Research Question 2. By analysing ESP's recommendations, we gain a distinct perspective on the skills that managers are encouraged to possess and the obstacles they are guided to anticipate when dealing with mental health matters in their professional roles.

As a result, the researcher will identify any specific language, recommendations, or ideologies presented to managers regarding their role in promoting mental health and addressing related issues among employees. The analysis will focus on identifying key themes and recommendations that reflect the intended perspective and approach towards mental health within the workplace.

1.4 STRUCTURE OF THE RESEARCH PROJECT

The study project is structured into five chapters, and for ease of reference, they are presented in the following diagram:



Chapter one serves as an introduction, orienting the reader by presenting an overview of the research field and elucidating the research problem. Additionally, it outlines how the research objectives will be achieved.

Chapter two reviews the literature relevant to the topic, and establishes the groundwork for this research project through a conceptual exposition of the definition of mental health. It delves into the potential hazards to mental well-being within the workplace, as well as an exploration of relevant literature concerning managerial intervention and training. The chapter concludes with an examination of the Maltese context, encompassing the availability of mental health services in Malta and local studies on workplace mental health.

Chapter three concerns the methodology, and provides an extensive examination of the researcher's reasoning and approach for data collection and analysis. A significant portion of this chapter is dedicated to justifying the selection of document analysis and semi-structured interviews as the most appropriate methods for data gathering in this study.

Chapter four presents the gathered findings, stemming from both documents and interviews. Additionally, a comprehensive discussion and interpretation of these findings are presented, with reference to relevant literature when needed.

Finally, chapter five concludes by summarising the key issues discussed and offers a set of recommendations for management to enhance workplace mental health management. It also acknowledges the research's limitations and suggests directions for future research.

CHAPTER 2: LITERATURE REVIEW

2.1 INTRODUCTION

The European Union (EU) has come to recognise how crucial it is to elevate mental health to the top of the list of priorities for public health. This acknowledgement is based on mounting evidence and knowledge of the severity of mental health issues in European nations, which have unfavourable outcomes on people's lives, society, and the economy, and account for a sizable portion of the disability burden in the EU (European Framework for Action on Mental Health and Well-being, 2016).

Mental health impacts all elements of our life, including employment performance. The World Health Organisation (WHO)'s World Mental Health Report of 2022 revealed that 15 percent of individuals within the working-age demographic encountered a mental disorder. The workplace may exacerbate broader societal problems that are detrimental to mental health. Still, it may also present an opportunity to enact supporting laws and regulations in labour, occupational health, and human rights (WHO, 2022).

This chapter will delve deeper into the subject by examining the meaning of mental health and the different hazards that individuals could encounter in a professional setting. In light of these potential hazards, the role of managers becomes pivotal in addressing and mitigating the impact of such challenges on employees' well-being.

2.2 DEFINING MENTAL HEALTH

According to a well-known and widely accepted definition provided by the WHO, 'Mental Health is defined as follows;

> "a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community."
>
> (WHO, 2004, p. 12)

While the above definition indicates a progression in transitioning away from the idea of mental well-being solely as the nonexistence of mental sickness., WHO's definition can raise concerns about potential misunderstandings by emphasising on good functioning and happy moods as essential components of mental health (Galderisi et al., 2015).

Experiencing sadness, anger, or unhappiness is an integral aspect of a complete human existence, and this holds true even for individuals in a state of sound mental well-being. (Galderisi et al., 2015). However, mental well-being is often perceived as a positive outcome characterised by sensations of satisfaction and control over one's environment. (Lamers et al., 2011). In fact, several papers on mental health focus mainly on emotions and positive functioning (Galderisi et al., 2015).

For example, Keyes (2014) classifies mental health into three distinct dimensions: emotional, psychological, and social well-being. Emotional well-being encompasses aspects such as happiness, interest in life, and overall satisfaction (Keyes, 2014). Conversely, psychological well-being pertains to facets like self-acceptance, competence in managing daily responsibilities, establishing positive interpersonal connections, and experiencing contentment with one's life (Keyes, 2014). Social well-being, in turn, denotes an individual's sense of meaningful contribution to society and a feeling of belonging within a community (Keyes, 2014).

However, Galderisi et al. (2015) offer an alternative definition of mental health, one that considers the instances of dysfunctionality experienced by individuals during the course of their lives. They defined the concept as follows;

> "Mental health is a dynamic state of internal equilibrium which enables individuals to use their abilities in harmony with universal values of society. Basic cognitive and social skills; ability to recognize, express and modulate one's own emotions, as well as empathize with others; flexibility and ability to cope with adverse life events and function in social roles; and harmonious relationship between body and mind represent important components of mental health which contribute, to varying degrees, to the state of internal equilibrium."
>
> (Galderisi et al. 2015, p. 231-232)

In their definition, they incorporate the idea that mentally healthy individuals can experience human emotions like grief while possessing sufficient resilience to return to a "dynamic state of internal equilibrium" (Galderisi et al. 2015, p.231). Another intriguing aspect of their definition is that they addressed the "harmonious relationship between body and mind" (Galderisi et al. 2015, p.232). This concept is supported by the knowledge that the relationship between the brain, body, and environment is extremely complex and that a person's overall experience of the outside world cannot be separated from the way their body interprets the environment (Fuchs and Schlimme, 2009).

The workplace environment will be a particular focus in the following sections, as it is widely known that a workplace can pose a risk to one's mental health because discrimination in employment opportunities and working conditions can all be sources of excessive stress, increasing the likelihood of developing new mental health conditions or aggravating pre-existing ones (WHO, 2022).

2.3 RISKS TO MENTAL HEALTH IN THE WORKPLACE

In the report “Implementation of the European Social Partners’ Framework Agreement on Work-Related Stress”, the European Commission (2011) delved into the different risk factors caused by the place of work. They established different factors which could be seen as a threat to the employee’s mental health well-being. For instance, having good working conditions and a positive working environment within the workplace is crucial for the employees’ mental well-being (European Commission, 2011). Exposure to abusive behaviours, dangerous substances, noise pollution and physical hazards, such as temperature extremes, can cause not only psychological distress but also long-term physical effects (European Commission, 2011).

Procedures and processes can also be a risk factor for one’s mental health well-being (European Commission, 2011). Case in point, having authoritarian supervision, inflexible hours, excessive workloads, under-skilled or under-use of skills for the task presented and lack of autonomy can all undermine mental health (European Commission, 2011). In fact, according to the WHO (2022), work should protect mental-health well-being by providing structured platforms and routines, along with family-friendly measures and benefits, which enhances employees’ ability to enjoy their job and career.

In addition to these factors, communication is vital for healthy relationships and well-being at work (European Commission, 2011). Research indicates that effective communication, along with managerial support and teamwork among employees, has the potential to empower workers, resulting in improved productivity, enhanced job satisfaction, increased engagement, and heightened morale (Bucăţa and Rizescu 2017, Nelson 2021). Moreover, as argued in the report, communication is essential to prevent

uncertainty and unnecessary anxiety (European Commission, 2011). Employees should always be aware of what is expected from them whilst being included in decisions which might bring changes that might affect their daily work (European Commission, 2011). Lack of communication brings other subjective factors, such as emotional and social pressures and feelings of helplessness due to lack of support (European Commission, 2011).

However, other elements contribute to mental health concerns at work that do not stem from the workplace. A significant life event that an employee has experienced can result in behavioural problems due to the employee's failure to cope with an emotionally challenging life event (WHO, 2005).

Given the complexities of how mental health issues might arise, the employer must implement practical steps to prevent, eradicate, and lessen them (European Commission, 2011). This emphasises the need to address these risks through awareness among managers and prompt response at the first sign of a mental health problem to prevent it from developing and escalating (Neal, 2017).

2.4 MANAGERIAL TRAINING AND INTERVENTION

The 'WHO Guidelines on Mental Health at Work' issued by WHO (2022) underscore the significance of managerial training due to its potential to enhance managers' understanding and conduct regarding mental health, alongside its impact on employees' tendencies to seek assistance.

In this publication, WHO (2022) also distinguishes between two types of managerial training. The first category is referred to as ‘manager training for mental health’, which includes awareness of psychosocial hazards and mental health issues, the ability to recognise emotional discomfort early and respond appropriately to it, and the ability to refer people in need of care and communicate effectively and actively listen. The second category is referred to as ‘leadership-oriented training’; it is a type of training in human resource management that aims to enhance manager-employee relations and managers’ ability to create a work environment and organisational structure that promotes health and well-being (WHO, 2022).

2.4.1 Transforming Mental Health Training

While WHO (2022) underscores that such training isn’t meant to equip managers to provide mental health care due to their inability to diagnose or treat mental illnesses, it has demonstrated significant advantages in influencing workers’ subsequent tendencies to seek help (Dimoff and Kelloway, 2019).

Notably, research highlights that managers often experience hesitancy or feelings of inadequacy when it comes to reaching out to employees on sick leave, particularly when the ailment pertains to mental health (Johnston et al., 2015). Despite this, businesses tend to only focus on training managers on how to lower risk factors for employees’ work-related mental health (LaMontagne et al., 2014) and tend to put an emphasis only on raising mental health literacy knowledge and lowering the stigma associated with mental illness (Tsutsumi, 2011).

While evidence shows that training focusing on work-related risks, literacy knowledge and overcoming stigma can directly influence and impact managerial behaviour (Gayed et al., 2018), Bryan et al. (2018) conducted a research with an alternative perspective, concentrating on different elements of managerial training.

As part of their study, they question if the focus must be more on improving skills and confidence rather than training which focuses on literacy knowledge. Bryan et al. (2018), therefore, intended to investigate whether the current emphasis on managerial training is more successful than other claims, such as changing attitudes, boosting manager confidence, or shifting managers' perceptions of their job while coping with a subordinate's illness.

In fact, Bryan et al.'s analysis revealed no evidence of a relationship between managerial communication and increasing mental health literacy. Therefore, having managers receive training does not guarantee they will feel comfortable approaching employees with mental health issues. However, it seems that rather than training, managers' confidence and non-stigmatising views tended to be the best predictors of their behaviour when approaching a worker who was either suspected of or experiencing a mental disorder (Bryan et al., 2018). Their findings also suggest that the focus of the training should be shifted from "didactic knowledge-based teaching to managers learning practical skills in having difficult conversations and allowing them space and time to practice these techniques" (Bryan et al., 2018, p. 466).

Another study by Kirsh et al. (2018) focused on the supervisors' views on mental illness and stigma in their workplace and sought to understand how it affects their job

performance. According to their findings, the supervisors who were interviewed felt that they lacked the confidence to deal with mental health concerns and adequately support their subordinates. This lack of confidence resulted from ambiguity on what constitutes as a privacy breach and how supervisors should react when confronted with employees' mental health difficulties. Supervisors struggled to understand the lines they needed to stay within when reaching out, and they were hesitant to go too far as they felt that they were stepping over boundaries. Another study by Malachowski et al. (2016) also raised this issue, finding that corporate policies emphasised employees' privacy, making it challenging to provide employees with mental health concerns with the required support.

Another important tension brought up by Kirsh et al. (2018) is the relationship between disclosure and stigma. It has been well-documented that employees may decide not to divulge information out of fear of being stigmatised (Center, 2010). However, the research conducted by Kirsh et al. (2018) demonstrated that managers have the ability to challenge absenteeism stereotypes, such as assumptions that cast doubt on the validity of mental health-related concerns that develop at work.

2.4.2 Strategies for Managerial Intervention

The research conducted by Kirsh et al. (2018) highlights the necessity for more training in domains like, "balancing privacy and supports" (pp.554) and "tailoring disclosure processes to suit individuals and workplaces" (pp.554). They also argue that training tailored to the supervisors' requirements can result in best practices for managing stigma and the mental health of their employees as well as for enhancing their leadership qualities.

All the above points were also summarised by the International Labour Organisation (ILO) and WHO. In this WHO/ILO policy brief (2022), they also proposed strategies for employers, and their respective organisations within both the public and private spheres. This policy brief delivers a framework for addressing mental health at work and suggests that strategies should be categorised under three main aspects: 1) Prevent, 2) Protect and promote, and 3) Support.

The preventive aspect of policy concentrates on restructuring workplace settings to mitigate psychosocial hazards and prevent employees from developing mental health disorders (ILO and WHO, 2022). These issues can be resolved through organisational interventions like offering flexible working arrangements, including employees in decision-making processes, and modifying workloads or work schedules to allow work-life prioritisation (ILO and WHO, 2022).

The second part focuses on protecting and promoting the well-being of all employees through activities such as increasing awareness and enhancing abilities and opportunities for early detection and intervention in mental health matters (ILO and WHO, 2022). Critical interventions mentioned under this part are managerial training, training of employees and individual interventions (ILO and WHO, 2022).

The third section focuses on strategies that help employees with mental health disorders access jobs, stay employed, and succeed at their workplace (ILO and WHO, 2022). This can be accomplished by providing individual workers with reasonable accommodations, such as adaptable work timetables, extended task deadlines, and allocated periods for mental health care, which may encompass the provision of confidential spaces for

medication storage. (ILO and WHO, 2022). They also suggest the design of return-to-work programmes after an absence associated with mental health conditions (ILO and WHO, 2022).

2.5 THE LOCAL CONTEXT SCENARIO

Similar to the ILO and WHO document that categorises strategies as Prevent, Protect and Promote, and Support, the Employee Support Programme (ESP) within the Government of Malta also provides written guidelines through two of their publications called: 'Managing Mental Health at Work' and 'Employee Wellbeing: A Line Manger's Guide'. These publications were designed to function as a resource for management to proactively address well-being concerns among employees and similar to the ILO/WHO framework, the ESP highlights the importance of creating a supportive work environment to prevent, identifying intervention cues to protect, and addressing warning signs to support. Both documents will be analysed and discussed in more detail in the findings chapter.

The ESP unit offers a comprehensive array of complimentary and confidential support services to government employees, aimed at aiding them in effectively handling challenges in their professional and personal lives (servizz.gov, n.d.). Additionally, they extend assistance to managers and conduct training sessions concerning the management of sick leave and the reintegration of employees into work (servizz.gov, n.d.). These sessions are tailored to equip managers with responsibilities in people management to gain a deeper understanding of mental health issues and raise awareness about common mental health challenges (servizz.gov, n.d.). The ultimate goal of these sessions is to empower managers to detect and manage early indicators, furnish the necessary

assistance, and foster a workplace culture that is supportive within their teams (servizz.gov, n.d.).

Another document issued by the Ministry for Health in 2019 titled ‘A Mental Health Strategy for Malta 2020-2030’ provides guidance for implementing investments and reforms into place to give general mental health the top priority in various social spheres within Malta’s health policy agenda for the foreseeable future. Regarding the part on employment, it was stressed that while employment provides income and personal growth, work-related stress frequently triggers mental health issues (Ministry for Health, 2019). Therefore, collaborating with employers to raise awareness about stress reduction methods holds advantages for both employees and business productivity (Ministry for Health, 2019). The strategy document also recommends services offered by the ESP unit to the public service, along with the provision of Mental Health First Aid training to employers and employees through the Richmond Foundation.

Richmond Foundation stands as Malta’s prominent non-governmental organisation providing community services for individuals dealing with mental health issues (Shalan, 2022). Their personalised assistance encompasses a spectrum of services, ranging from help groups, aided living options, educational programs, and counselling services. (Richmond Foundation, n.d.). Among their key initiatives is the ‘Healthy Mind Work’ program, specially designed for organisations, including those in the private sector, aiming to uphold the overall well-being of their workforce. In addition to offering professional emotional and psychological support, they also provide a variety of courses such as ‘Occupational Mental Health Training,’ ‘Awareness of Emotional Health and

Well-being,' 'Mental Health First Aid,' and customised programs (Richmond Foundation, n.d.).

In a study conducted by Misco (2022), it was discovered that a significant 84% of respondents expressed their willingness to participate in workshops aimed at achieving a healthy work-life balance, demonstrating a positive inclination towards seeking knowledge and support in the area of mental health. In addition, 74% expressed interest in going to workshops aimed at raising awareness of mental health concerns. These figures highlight the need for proactive engagement and education on mental health in the workplace (Misco, 2022).

Misco (2022) further documented respondents' assessments of their workplace well-being in this local study and offers light on the rising prevalence of mental health issues linked to work-related problems. The results show a significant rise in the number of people battling mental illness. Notably, 79% of the participants indicated that they have encountered mental health concerns such as stress and anxiety due to work-related factors (Misco, 2022). This figure marks a notable rise from 63% recorded in the preceding year, 2021, and 67% reported in 2020 (Misco, 2022).

Further exploration into the experiences of those who had previously faced mental health issues revealed that 68% of them had admitted to facing such difficulties at work in the previous year (Misco, 2022). This number signifies a rise in comparison to the 62% registered in the previous year, 2021, albeit a slight dip from the 70% reported in 2020 (Misco, 2022). This progression indicates a consistent upward trend in the prevalence of work-associated mental health issues over the last few years.

The study delved into the specific stressors encountered in work environments, revealing that factors like pressure, heavy workloads, and tight deadlines were commonly cited sources of distress. Approximately 50% of the respondents noted experiencing pressure, while 43% grappled with heavy workloads, and 41% struggled with tight deadlines (Misco, 2022). These factors collectively contribute to the mounting mental health challenges faced by employees in various professional settings.

An intriguing insight that emerged from the survey is that 48% of participants expressed uncertainty about whom to approach within their workplace if they were to confront mental health issues (Misco, 2022). The report also highlights a notable reluctance among respondents to disclose their struggles with unmanageable stress or mental health concerns to their current employers or managers.

A significant majority, constituting 72%, indicated that they had refrained from sharing such difficulties (Misco, 2022). This percentage has observed an increase from the 68% recorded in the year prior, 2021 (Misco, 2022). This hesitance to communicate such challenges suggests potential barriers to fostering open dialogues with management around mental health.

An article published by the Malta Chamber on October 12th, 2022, also emphasised how crucial it is for employers to pay attention to their employees' mental health. It is their concern because it affects everyone in the organisation, including other external stakeholders, not just employees who need assistance. The Occupational Health and Safety Authority (OHSA) Act (2002) (Cap. 424.) of the Laws of Malta makes the employer responsible for the health and safety of every employee at the place of work.

As a result, once an employer is aware of an employee's mental state, they have a responsibility to guarantee the safety of that employee, his or her co-workers, and the people they are required to serve. In other words, responsibility and accountability fall on employers, managers, or other influential people who significantly impact the social climate of the workplace.

2.6 CONCLUSION

The vast volume of scholarly research on the consequences of mental illness on people and the countless reports from internationally renowned health organisations show how important it is to prevent mental health problems from occurring and to protect those who are more vulnerable than others. It is also apparent that the workplace is a crucial setting where proper treatments may be beneficial and that the stigma associated with mental health can be reduced with effective managerial involvement.

The forthcoming chapter will delve into the research project's methodology, offering an intricate structure that outlines the methodical strategy employed for the exploration and acquisition of insights regarding diverse aspects of workplace mental health management.

CHAPTER 3: METHODOLOGY

3.1 INTRODUCTION

This chapter provides a comprehensive examination of the methodology employed in the research project, primarily focusing on the approach, methods, and procedures utilised to gather the necessary data and address the subsequent research questions:

1. How do managers working in the public service view mental health in the workplace?
2. What perceived skills and barriers do managers have when it comes to addressing employees' mental health at work?

The fundamental goal of this research project is to investigate the viewpoints of managers within the public service regarding mental health in the workplace. Specifically, the study aims to identify the obstacles that hinder the effective management of mental health and explore the correlation between organisational culture and mental health. Ultimately, these findings will contribute to a more comprehensive understanding of mental health in the workplace. The ultimate goal of this research is to assist the public service in developing evidence-based policies and practices that can have a positive impact on both employees and management as a whole.

3.2 EPISTEMOLOGICAL APPROACH

By exploring how managers perceive the perception of mental health, this research design acknowledges the existence of multiple constructed realities meaning that individuals have varied interpretations of reality and that they actively construct their own realities and attribute meaning to different situations and events (Savin-Baden and Major, 2023).

The research will adopt a social constructionist perspective. This perspective acknowledges the existence of an objective reality and focuses on the process of constructing and comprehending knowledge (Andrews, 2012). In simpler terms, social constructionism highlights the significance of everyday interactions and the role of language in shaping individuals' perception of reality (Andrews, 2012). It places the investigation's primary emphasis on the social practices in which people engage (Andrews, 2012).

This aligns with the researcher's aim to comprehend the participants' perspectives. It is essential to point out that there is no singular truth to be discovered, particularly in relation to the subject matter of this project. Nevertheless, the researcher will provide descriptions of the realities as experienced by the participants.

3.3 RESEARCH DESIGN

Instead of opting for a quantitative approach, which is limited in its ability to provide in-depth interpretations of human experiences (Bryman, 2012), the researcher deliberately chose a qualitative approach in order to achieve the desired objectives. The decision to utilise a qualitative approach was made to gain a comprehensive understanding of how managers perceive the reality surrounding mental health and the nature of their knowledge.

The qualitative approach is primarily concerned with aspects of reality that cannot be easily quantified (Queirós et al., 2017). Its fundamental objective is to grasp and gain insight into the "dynamics of social relations" (Queirós et al., 2017, p.370). Given that this form of research operates in the realm of interpretations, incentives, ambitions,

principles, and mindsets, it aligns with a profound domain of interactions, processes, and events (Maxwell, 2012).

3.4 RESEARCH METHODS OVERVIEW: STUDY 1 AND STUDY 2

To ensure the robustness of the research findings, the researcher opted to employ a dual data collection approach, utilising both document analysis (Study 1) and semi-structured interviews (Study 2), in order to triangulate the data and obtain a range of perspectives (Bryman, 2012), specifically from the Employee Support Programme (ESP) Unit and individuals holding headship positions in the public service.

3.4.1 Document Analysis (Study 1)

In this study, the researcher opted for document analysis of two publicly available documents issued by the ESP unit, which are the following:

1. **Employee Wellbeing: A Line Manger's Guide:** This booklet serves as a practical guide, equipping line managers with information and strategies to promote employee wellbeing and offer early intervention in addressing related concerns within their teams.
2. **Managing Mental Health at Work:** Also targeted at managers, this publication provides guidance on workplace mental health, offering information and practical advice to support employees returning from a long-term absence due to mental health conditions, ultimately aiding in the retention of experienced and valuable staff members.

Recognising the relevance of the aforementioned documents to the research objectives, the researcher deemed it necessary to analyse them, as they could potentially offer additional data that can help provide context and clarification to other data collection methods employed in this project (Elston and Fulop, 2002).

3.4.2 Semi-Structured Interviews (Study 2)

Semi-structured interviews were employed, providing greater flexibility to highlight the participant's perspective. These interviews allow for an adaptable approach, allowing public-sector managers to voice their distinct opinions on mental health in the workplace. The semi-structured style guarantees that the most important components of the study questions are covered while allowing participants to comment on their points of view. Furthermore, semi-structured interviews allow for a more in-depth examination of managers' perceived skills and barriers to addressing employees' mental health at work. This approach allows for knowledge of the complexities surrounding this topic and allows participants to explain and comment on their views, resulting in rich and nuanced data.

An interview guide was used during the interview in order to ensure that crucial aspects were addressed while granting the interviewee considerable freedom in their responses (Bryman, 2012). The interview guide prepared in English, comprised nine open-ended questions tailored to elicit deeper insights regarding the project. Additionally, the flexibility inherent in these interviews allowed both the researcher and participant to clarify specific points of interest while remaining true to the study's purpose.

The participant chose a convenient location and time for the interviews, opting for face-to-face interactions to enhance the richness of the results through both verbal and non-

verbal communication. By conducting interviews in person, the researcher was able to establish a better rapport with the participants and address any concerns they may have had, ultimately ensuring a more comfortable environment for sharing their perspectives.

3.5 SAMPLING AND RESEARCH PROCEDURE FOR STUDY 2

In qualitative research, purposive sampling, which involves intentionally selecting a relatively small sample (Miles and Huberman, 1994), is often utilised to broaden one's understanding (Palinkas et al., 2015). In this way, purposive sampling would "sample cases/participants in a strategic way, so that those sampled are relevant to the research questions that are being posed" (Bryman, 2012, p.418).

By employing this method, the researcher ensured that the sampled individuals meet specific criteria essential to the project's objectives. In the context of this project, which aims to explore the perspectives of public service managers on mental health in the workplace, the researchers specifically chose employees holding headship positions within the public service. These individuals are responsible for managing a group of people.

The researcher initiated the process of gaining access to the research participants after obtaining ethical clearance from the Faculty Research Ethical Committee (FREC). Subsequently, the researcher made contact and sent a signed official request (Appendix A) to the Office of the Prime Minister (OPM) on behalf of the Data Protection Office (DPO) to seek permission to conduct the project within the public service. Once permission was granted (Appendix B) the OPM facilitated the distribution of consent

forms (Appendix C), the interview guide (Appendix D), and an information letter (Appendix E), via email to public employees in managerial positions.

This led to the receipt of signed consent forms indicating participants' willingness to partake in the study. The researcher received a total of eight responses from participants holding headship positions, which represents a relatively small sample compared to the overall size of the public service.

Many researchers often inquire about the appropriate sample size for qualitative research (Dworkin, 2012), but unlike quantitative studies, the sample size for qualitative research is not predetermined (Malterud et al., 2016). Since qualitative research often does not aim to make statistical generalisations, many qualitative researchers assert that sample size is not a significant concern in their studies (Onwuegbuzie and Leech, 2005).

Bryman (2012) argues that qualitative researchers have to be aware that they "engaged in a delicate balancing act" (p.425). It is crucial because in qualitative research, the sample size must strike an equilibrium of being sufficiently large to ensure data saturation is obtained with being not too large that conducting a thorough case-oriented analysis becomes challenging (Onwuegbuzie and Collins, 2007). The researcher has effectively acquired valuable information and comprehension through conducting a total of eight interviews. Nevertheless, it would have been preferable if the researcher had received more responses to conduct additional interviews. This would ensure a higher level of certainty that saturation has been reached, meaning that no further new information would be generated.

3.6 DATA ANALYSIS

3.6.1 Document Analysis (Study 1)

Document analysis, like other qualitative research methods, entails a careful investigation and interpretation of data in order to derive meaning and improve comprehension (Corbin and Strauss, 2008).

According to Bowen (2009), document analysis includes components of both content analysis and thematic analysis. Content analysis is mainly concerned with categorising information related to the research objectives (Bowen, 2009), therefore the researcher must be able to recognise relevant information and separate it from that which is not (Corbin and Strauss, 2008). On the other hand, thematic analysis involves identifying patterns within the selected data, where emerging themes are established as categories for analysis (Fereday and Muir-Cochrane, 2006). In other words, thematic analysis;

> "offers qualitative researchers something specific (if not entirely unique)- a process for ensuring rigorous and systematic engagement with data, to develop a robust and defensible analysis, that is independent of any predetermined particular theoretical framework or cluster of other design considerations"
>
> (Terry et al., 2017, p. 34)

In this stage of analysis, the researcher conducted a thorough examination of the selected data, performing coding and constructing categories to uncover themes aligned with the project's objectives.

3.6.2 Semi-Structured Interviews (Study 2)

As a form of triangulation, which refers to the integration of methodologies in the study of the same subject (Denzin, 2017), document analysis is widely employed in conjunction with other research methods. In this case, the researcher decided to use semi-structured interviews to analyse information from other methods. Through this approach, the researcher can cross-validate the findings using multiple data sets, which helps reduce the impact of biases that may arise from a single study (Bowen, 2009). Additionally, this enhances the credibility of the study by strengthening the trustworthiness of the results (Bowen, 2009).

To facilitate data analysis of the conducted interviews, the researcher transcribed all recorded interviews word for word. Subsequently, the transcribed material underwent thematic analysis. This approach as previously mentioned involves the exploration and identification of themes within the transcripts, thereby organising and providing a comprehensive description of the dataset (Braun and Clarke, 2006).

Adopting the six-step theme analysis process proposed by Braun and Clarke (2006), the researcher meticulously followed their prescribed approach. Firstly, the researcher immersed themselves in the data by thoroughly reading and re-reading the content, while simultaneously taking notes to capture initial thoughts and impressions. Subsequently, the researcher systematically coded notable features, patterns, and meanings in the data, opting for manual coding. The codes were then organised into potential themes, considering shared patterns and exploring relationships among the codes to unveil overarching themes that encapsulated the essence of the data. The themes were refined and reviewed to ensure coherence and relevance to the data. Clear and concise names

were developed for each theme, and they were seamlessly integrated into a coherent narrative to present the findings. Relevant quotes were utilised to support the analysis, ensuring that the data analysis chapter remains engaging and provides a comprehensive understanding of the identified themes.

3.7 ETHICAL CONSIDERATIONS

Ethical considerations hold significance across all research domains; however, they assume heightened importance in qualitative research due to its comprehensive and immersive nature (Arifin, 2018). Qualitative researchers bear the responsibility of safeguarding participants' autonomy by providing them with the freedom to choose their involvement in the study (Arifin, 2018). Additionally, protecting participants' identities throughout the recruitment and dissemination processes is crucial (Arifin, 2018). Furthermore, it is essential to uphold principles of transparency and honesty in reporting research findings, ensuring that readers are not deceived in any way (Arifin, 2018).

As mentioned earlier in this chapter, participants were recruited voluntarily using an opt-in approach after obtaining FREC ethical clearance. The researcher took care to obtain signed consent forms, ensuring that participants provided informed consent and maintained their autonomy. Prior to the interviews, the researcher thoroughly explained the objectives of the project and provided a clear overview of the interview process to the participants. During the interviews, audio recording was utilised; however, before starting each interview, the researcher reaffirmed with the participants whether they were comfortable with the interview being recorded.

It was clarified that the audio recordings would remain confidential and not be shared with any external parties, with the exception of the researcher. To ensure data security, the audio recordings and transcripts would be stored on an encrypted drive. Once the official publication of results by the University of Malta is complete, any identifiable personal data will be securely destroyed. Only anonymised data will be retained. To maintain participant anonymity throughout the research process, participants will be referred to as 'Manager 1', 'Manager 2', 'Manager 3', etc., without any indication of their specific Ministry/Department/Unit in any chapter. This approach eliminates any risk of participant identification.

Overall, throughout the project, participants' consent was obtained voluntarily, and explicit permission was required. Participants were made fully aware of their right to opt out of the research project at any time before it was completed. The researcher took great care to ensure that no harm would be inflicted upon the interviewees as a result of their participation in the project.

3.8 LIMITATIONS OF THE STUDY

To acquire a deeper comprehension from the project participants, the researcher chose a qualitative approach. However, this decision also means that the findings cannot be generalised to a larger audience, as achieving external reliability is challenging in qualitative research (Bryman, 2012).

It would have been advantageous if the researcher had chosen a mixed-method approach incorporating both qualitative and quantitative methods. This combination would have enhanced the usefulness of the findings by allowing for the exploration of relationships

between variables through more comprehensive quantitative analysis (Bryman, 2012). However, due to time constraints in this project, undertaking a mixed-method approach was not feasible.

Another disadvantage is that qualitative research involves the active participation of the researcher in data collection and analysis, which introduces subjectivity stemming from the researchers' interpretations, perspectives, and personal biases (Bryman, 2012). Recognising the researcher as a pivotal instrument in shaping study outcomes, it becomes apparent that subjectivity can give rise to research bias (Bryman, 2012). This bias occurs when the researcher's (in this case, my own) personal beliefs, values, or preconceptions inadvertently influence the process of data collection, analysis, and interpretation, thereby posing a threat to the credibility, reliability, and validity of qualitative research (Bryman, 2012). Consequently, it was essential for the researcher to maintain constant awareness of their own biases, particularly throughout during the stages of data gathering and analysis in this project.

Another limitation encountered by the researcher was the limited number of responses received. Despite reaching out to the entire public service, only eight managers expressed interest in participating. It would have been beneficial for the researcher to have more responses and insights from other ministries and departments included in the data analysis.

3.9 CONCLUSION

In conclusion, this chapter has outlined the methodology employed in this project, ensuring an efficient data collection process. The research methodology was carefully

designed to effectively address the project objectives and yield meaningful outcomes that can contribute to future policymaking in the field.

Furthermore, this chapter has justified the selection of the target population and elaborated on the instrumentation employed to achieve the research project's goals. Additionally, the researcher will conduct a thorough analysis of relevant documents to enhance her understanding of the available resources for managers in addressing their subordinates' mental health. The subsequent chapter will present an analysis of the documents analysed and the responses obtained from the interviews conducted.

CHAPTER 4: FINDINGS, ANALYSIS and DISCUSSION

4.1 INTRODUCTION

This chapter is divided into two parts. The first section discusses the findings obtained from analysing two guideline documents titled ‘Managing Mental Health at Work’ and ‘Employee Wellbeing: A Line Manager’s Guide’ aimed at improving mental health management in the workplace, with a particular focus on the interaction between managers and their subordinates. Both documents offer guidance to managers on addressing mental well-being concerns, emphasising their pivotal role. The results are categorised into three main themes: ‘Establishing a supportive work environment,’ ‘Recognising signs for intervention,’ and ‘Addressing the Warning Signs.’

The second section delves into the findings obtained from interviews conducted with public service employees who hold headship positions. These interviews provided valuable insights into the subject matter, further contributing to the comprehensive exploration of the topic. The results are categorised into four main themes: ‘Defining Mental Health’, ‘Approaching Mental Well-Being in the Workplace’, ‘Employee Well-Being in the Public Sector and ‘Proposed Recommendations‘.

This chapter will revisit the fundamental questions that have directed this research. The first study emphasises the essential skill set needed for managers, whereas the second study centers on exploring the perspectives and challenges confronted by managers in the public sector concerning workplace mental health.

4.2 STUDY 1: ANALYSIS OF DOCUMENTS

4.2.1 Establishing a Supportive Work Environment

Both documents stressed the importance of prioritising a supportive work environment, considering that people dedicate a significant portion of their lives to their jobs. Such an environment benefits both employees and management alike. One of the documents highlights:

> "Good working relationships, effective communication and clear policies are essential for a healthy workplace as these foster an environment of trust between management and employees".
>
> (Employee Wellbeing: A Line Manager's Guide, p.5)

In other words, managers are encouraged to implement various measures to support their employees and strengthen the communication aspect. These measures include providing work-related adjustments tailored to each individual's specific needs.

> "Openness and flexibility are essential in assessing which activities a person can undertake, and how their job can be adjusted to make it possible for them to work productively".
>
> (Managing Mental Health at Work, p.9)

The suggested adjustments encompass flexible work schedules, reorganisation of tasks to reduce pressure, and breaking down large tasks into more manageable ones. Regular meetings with employees are recommended to prioritise tasks effectively and also to support them in certain complicated tasks.

Apart from communication, the documents also emphasise the significance of other specific management skills in fostering a supportive environment. These skills include fairness, consistency, clear guidance, empathy, and consideration. It was stressed that good management skills:

> "Prevent work-related stress by having managers behaving with integrity, managing emotions (both self and others) appropriately, empower team participation, managing conflict and taking responsibility to address difficult issues".
>
> (Employee Wellbeing: A Line Manager's Guide, p.12)

4.2.2 Recognising Signs for Intervention

While a manager strives to create a supportive work environment, they are also tasked with dealing with difficult circumstances that employees may encounter in their personal lives. Consequently, this theme emerged as the second primary duty for a manager to assume, a point reinforced by one of the documents:

> "Managers' responsibility lies within the early identification of such signs and taking the appropriate action to intervene".
>
> (Employee Wellbeing: A Line Manager's Guide, p.12)

These situations may encompass a range of issues, including family concerns, prolonged sickness absences, addiction problems, and various other personal challenges. Consequently, it is imperative for managers to provide assistance by recognising signs of distress, such as alterations in behaviour, deteriorating performance, or conflicts with colleagues. It is worth noting that if the manager lacks a strong rapport, effective

communication, and specific skills, they may struggle to identify these signals, which relates back to the initial theme identified. Therefore, these factors create a cycle, and every action taken by a manager can potentially have positive or negative repercussions on the employee's well-being.

To recognise these signs, both documents propose several methods. Managers should keenly observe and document any behavioural problems, take note of patterns in absenteeism and declining performance, and initiate open conversations solely on job performance with the concerned employees without immediately expressing their concerns. It was also highlighted that:

> "It is very important for the manager to stick to the facts and not on perceptions".
>
> (Managing Mental Health at Work, p.9)

In the document titled 'Managing Mental Health at Work,' a valuable insight is offered into prevalent mental health issues, such as stress, anxiety, depression, bipolar disorder, and schizophrenia. While the document provides a concise overview of these conditions, it is emphasised that managers are not expected to take on the role of diagnosing employees. Instead, they should prioritise awareness of potential symptoms associated with mental health challenges. This emphasis on awareness underscores the importance of equipping managers with the knowledge and sensitivity necessary to recognise signs of distress in their team members. By doing so, managers can assume a critical function in nurturing a workplace atmosphere that promotes appreciation and where workers feel esteemed and understood, ultimately contributing to overall well-being and productivity.

On the other hand, the second document, ‘Employee Wellbeing: A Line Manager’s Guide,’ shifts its focus to address additional personal challenges, including bereavement and addictions. These issues are recognised as potential contributors to elevated stress levels, which, if left unaddressed, could potentially lead to more severe mental health challenges. The document underscores the significance of early detection in these situations, emphasising that timely intervention is crucial for preventing the escalation of such problems. This perspective aligns with the broader goal of promoting employee well-being and highlights the pivotal role of line managers in identifying and addressing these personal issues before they have the opportunity to adversely affect an employee’s mental health and overall performance.

4.2.3 Addressing the Warning Signs

> “The earlier a problem is addressed, the better”.
>
> (Managing Mental Health at Work, p.5)

The above quotation encapsulates a fundamental principle that resonates throughout the discussion surrounding employee well-being in both documents, including ‘Employee Wellbeing: A Line Manager’s Guide’. It underscores the urgency of addressing mental health issues and personal challenges at the workplace. The latter document, in particular, offers valuable guidelines for management in handling these situations effectively. It emphasises the importance of maintaining objectivity and factuality during discussions with concerned employees, steering clear of direct references to suspected personal problems. Instead, it advocates for a constructive approach focused on potential consequences, necessary adjustments, and, notably, granting employees the space to suggest solutions for enhancing their performance. This approach aligns with the

overarching message that early intervention and support are paramount, ensuring not only the well-being of employees but also the overall working environment.

The fact that both documents are issued by the ESP unit highlights a crucial aspect of raising awareness among managers. These documents not only provide guidance on addressing mental health and personal challenges but also serve as a reminder that managers have access to valuable services. Specifically, they can formally refer concerned employees to the ESP unit for professional assistance or, if needed, seek guidance from the ESP themselves. This dual purpose of the documents underscores the commitment of the public service to foster a supportive work environment and ensure that managers have the necessary tools and information to efficiently oversee the welfare of employees. It also reinforces the idea that a proac8tive approach to addressing these issues is not only beneficial but also actively encouraged within the organisational framework.

Additionally, both documents offer valuable insights into the complex dynamics of employees' disclosure of mental health issues, however in different ways. 'Managing Mental Health at Work' acknowledges that some employees may choose not to disclose their mental health challenges to management, and it identifies several potential reasons behind this reluctance. These reasons encompass concerns about the stigma associated with mental health issues, fears of facing discrimination, or even a lack of self-awareness about their own mental health condition, possibly stemming from denial.

On the other hand, 'Employee Wellbeing: A Line Manager's Guide' delves deeper into the role of managers when employees do decide to disclose personal difficulties. It

provides guidelines on how managers should comport themselves during these discussions and how they can offer support in a compassionate and effective manner. This juxtaposition highlights the significance of managers being prepared to handle these situations with sensitivity, irrespective of whether employees choose to disclose their challenges or not, thereby promoting a workplace culture that fosters trust, understanding, and well-being.

4.3 STUDY 2: SEMI-STRUCTURED INTERVIEWS

4.3.1 Defining Mental Health

Every participant involved in the study agreed and perceived that good mental health corresponds to one's capacity to carry out everyday tasks. This suggests a shared understanding that mental well-being is crucial for overall functioning and productivity as also outlined by WHO (2004). Interestingly, participants offered similar understandings of mental health, by legitimated their views by recourse to different forms of argument. For instance, some participants highlighted the interconnectedness of physical and mental health, stressing that they should not be treated as separate:

> Mental health is the well-being of the whole. (Manager 3)
>
> At some time in history mental health become separated from physical health but now more than ever I believe that this separation was not required. Our body is whole and our mind is also another organ, I think that this separation of mind and body, is not doing any justice to mental health. (Manager 2)
>
> Mental health in a nutshell it means, your overall health that will affect your physical health. (Manager 6)

The above statements suggest a more integrated approach to health and well-being, considering mental health as an essential part of one's overall health. Also, Manager 5 expressed the belief that mental health issues are similar to any other physical illness and

can be resolved with adequate care. This viewpoint implies a hopeful and positive approach toward addressing mental health challenges:

> I believe that mental health issues are just like any illness that needs care and if you receive adequate care, it can be solved. (Manager 5)

When defining mental health and based on their personal experiences, certain participants associated certain mental health disorders, particularly anxiety and depression (Manager 5 and Manager 1). On the other hand, others delved deeper more into the factors that can trigger mental health issues, such as work-related issues or personal experiences (Manager 8 and Manager 7).

Additionally, Manager 3 highlighted the pressures resulting from the digitalised world which suggests a consideration of how technology and its demands impact mental health. The definition of mental health by Galderisi et al. (2015), which also takes into account the concept of "universal values of society" (p.231) similarly emphasises the environmental component. The above implies that the participants seem to have varying concerns about mental health, ranging from individual-level struggles to broader societal factors.

4.3.2 Approaching Mental Well-Being in the Workplace

Under this theme, three key sub-themes emerge. These sub-themes include 'Prevention as Necessary', focusing on proactive strategies to foster mental well-being, 'Shaping Managerial Intervention', addressesing the methods employed to influence the way managers get involved or take action in various situations within their team and

‘Hindering Factors’, exploring obstacles that may hinder effective workplace mental health initiatives.

4.3.2.1 Prevention as Necessary

When asked how to safeguard employees’ mental health, all managers emphasised the value of communication through in-person encounters while visiting offices, which is similar to what Bucăţa and Rizescu (2017) suggested. Furthermore, Managers 4 and 6 stressed the value of an open-door policy and fostering a supportive work environment where employees feel at ease seeking assistance and guidance. Nevertheless, they acknowledged that to make these efforts effective, managers must establish strong relationships with their subordinates, which can only be achieved through effective communication;

> Performance will then automatically increase, once you engage on a personal level with your subordinates. But if one has a closed-door policy, a manager would be not aware of certain team dynamics. (Manager 6)

Managers 3, 4, 6 and 5 also emphasised the importance of appropriately assigning tasks to employees, which involves processes like matching skills and breaking down tasks:

> Even it is important to breakdown a task by setting up time frames, schedules and deadlines with your subordinates, where both parties are comfortable in doing their work. (Manager 6)
>
> You have to assign tasks carefully, since assigning the tasks in a manner which do not match with the person, the employee can get burned out easily. (Manager 4)

Manager 4 stressed that creating a positive working environment goes beyond the confines of the office and extends to how managers treat their subordinates outside of working hours. This entails organising small events outside of the workplace and offering flexible work arrangements, which can help build a strong relationship with employees and safeguard their mental well-being. These efforts contribute to fostering a supportive atmosphere and better work-life balance for the employees;

> Through these small events a great difference can be made to the dynamics of the team. (Manager 4)

Three of the interviewed managers also brought up the significance of having designated individuals responsible for overseeing a group of people attending training programs, particularly focused on mental health first aid. Such programs aim to provide guidance on addressing issues and equipping individuals with the necessary skills to intervene when needed at the appropriate time.

Much like the findings presented by Bryan et al. (2018), which propose a shift in training emphasis from knowledge-based teaching to managers acquiring practical skills for handling challenging conversations, Manager 2 shares the belief that training should prioritise the acquisition of practical skills:

> Personally, I believe that from senior management it would be obligatory for them to attend sessions on mental health. There is first aid, an introductory session on mental health… because I do notice that people at my level regard mental health as taboo or s/he had some situations in their office and they did not know to handle these situations. (Manager 2)

4.3.2.2 Shaping Managerial Intervention

When asked how managers can distinguish whether an employee's declining mental health is a result of work-related issues or personal matters, the responses from all participants consistently underscored the importance of the manager-subordinate relationship.

> It comes goes down to the management's role… Head of section should be that person that provides the support needed, or be aware of when things are getting very stressful at work, you do something to calm down all the stressors at work. (Manager 6)

Upon analysing their responses, it became evident that they perceived effective intervention by a manager relies, on establishing trust with the employee, forming a reciprocal relationship and the manager's presence within the team.

> I believe in servant leadership when it comes to a managerial approach, which this helps me in dealing with these problems. (Manager 7)

In essence, when a manager fosters an environment characterised by trustworthiness, solidity, and approachability, employees become more inclined to confide in their manager and the manager would be more aware of issues and intervene when necessary.

> I think you have to bring yourself down at their level and listen to what they have to say. Just try to be his friend and after a certain time you start to gain their trust, and then you can do your role as a manager. (Manager 1)

These points raised are also supported by the European Commission (2011) in their report on the Implementation of the European Social Partners' Framework Agreement on Work-Related Stress.

However, none of the participants revealed a specific procedure or divulged into greater depth. This indicates a lack of awareness or mental health-related training to promptly address initial signs of certain mental health challenges, which is a crucial aspect emphasised by Neal (2017).

In fact, the aspect of training was highlighted by less than half of the respondents interviewed. Those who recommend managerial training when discussing intervention believe it is critical for managers to have appropriate mental health first aid skills when working with individuals who require assistance, particularly when an employee exhibits indicators of poor performance.

> Mental health first aid training gives a manager these skills, so they can better spot, handle, and take action on such issues in their team members. (Manager 8)

4.3.2.3 Hindering Factors

Intervening is often a complex task, and Managers 1, 4, 5, and 8 emphasised that individuals experiencing mental health challenges might lack self-awareness regarding their issues. Alternatively, they might believe that certain boundaries should be maintained, as those with mental health concerns can form quick attachments and misconstrue situations.

> Certain people with mental health issues can get attached more easily, so if you cross certain boundaries, the person can misunderstand the situation. Their behaviour can be unpredictable. (Manager 4)

This aspect stood out as particularly intriguing, as most managers expressed the view that maintaining a professional boundary is essential but at the same time they view this boundary as an impediment to intervention. This point was also raised in the studies done

by Kirsh et al. (2018) and Malachowski et al. (2016) fearing that crossing certain boundaries could undermine their effectiveness in carrying out their managerial responsibilities.

> Having certain boundaries is also very important otherwise it can become detrimental to my management function. (Manager 8)

Nonetheless, Manager 2 noted that individuals in distress may opt not to communicate, erecting a barrier to intervention due to apprehensions about the unknown, such as potential exclusion from future job advancements. This might occur because of existing societal attitudes towards mental health and the worry of being stigmatised (Center, 2010). Hence, based on the provided responses, when questioned about obstacles to their intervention, they perceived their employees' conduct as the primary hindrance.

> Fear from repercussions, fear of not being included anymore, fear of not being believed, of being dismissed and for promotional purposes. (Manager 2)

Manager 3 pointed out an environmental obstacle which this arises when management is not situated within the same workplace as their subordinates, resulting in a gap and vulnerability in the manager-subordinate relationship.

> The problem is that we are so spread out, I meet them once a week, and they do not have a manager to go to – therefore I fail to reach out individually. (Manager 3)

Manager 7 and 6, on the other hand, approached barriers to intervention through the lens of managerial outlook, emphasising the significance of a manager's emotional intelligence. This aspect was also highlighted by WHO (2022), in which managers must

be able to recognise emotional discomfort early and respond to it in an effective and professional manner.

4.3.3 Employee Well-being in the Public Sector

When questioned about their awareness of the services offered by the ESP unit to employees in public services, three indicated that they were unaware of the available services. Conversely, the remaining five managers demonstrated a clear understanding of the services, and, notably, some of them had availed of these services by recommending them to others when necessary.

The presence of ESP's services was positively received by the respondents, who perceived the public service as well-equipped to provide assistance. This sentiment was attributed to the high quality of service provided by ESP, which was noted to be accessible to all without any restrictions.

> I think the services that they are offering are successful. They offer very good service and give the opportunity for everyone to go unanimously. (Manager 2)

Additionally, a respondent shared instances where they utilised ESP's services to guide supervisors in effectively managing specific individuals under their supervision, indicating a practical application of the service.

> I also referred a supervisor to approach this service in order for him to have the necessary skills to handle a particular person. (Manager 7)

Additionally, two participants further proposed that the public service industry provides enhanced adaptability in comparison to the private sector.

> I think that the public service offers more flexibility than the private sector, in terms of the well-being of the employee. (Manger 7)

These individuals noted significant strides in prioritising employee well-being and ongoing efforts to foster a nurturing workplace ethos throughout the entire Public Service. It was also emphasised that the public sector is now notably receptive to addressing diverse requirements, encompassing aspects like staff advancement, equilibrium between work and personal life, and adept adjustments in response to evolving work conditions, particularly in the aftermath of the COVID-19 pandemic.

Nonetheless, Manager 2 presented an intriguing and somewhat contrasting viewpoint. They noted that following Manager 2's completion of a mental first aid training program, most participants were from government ministries with a social focus, such as the Ministry for Health, Ministry for Social Policy and Children's Rights, etc. This manager expressed concern because individuals from these ministries typically already possess a strong foundation in addressing certain mental health issues. The question then arises: what about those who come from ministries that primarily deal with other sectors like the economy, transportation, or tourism? They too require appropriate training to effectively support their subordinates during crises.

As a result, this observation led to questioning whether other government ministries also prioritise the mental well-being of their employees. It also highlights a significant concern regarding the differing approaches to managing employee mental health among various government ministries.

> We need to move out from the social, health and educational 'bubbles' and start to target other ministries where mental health for them is not the priority. (Manager 2)

4.3.4 Proposed Recommendations

As a result, Manager 2 proposed a mandatory requirement for individuals within the Human Resources Department, as well as directors and heads of departments/offices across the organisation, to undergo training in mental health first aid.

> For human resources, it must be mandatory for them to have mental health first aid. And they would be certified mental health first aiders. The problem is growing, or because there is more knowledge or in today's society there are a lot more triggers. (Manager 2)

Echoing Manager 2's sentiments, Manager 8 emphasised the tendency to overlook the human aspect within the domain of human resources, often viewing it solely as an administrative function. This manager further advocated for the consideration of candidates with a psychological academic background when appointing an HR manager.

> We tend to forget the human element in human resources. We tend to see their role as process related and an administrative role, however here we have human beings and not robots… when we will be recruiting an HR manager, I am looking for someone who would have a psychological background in order for the candidate to be equipped with certain skills. (Manager 8)

Manager 7 advocated for compulsory outreach efforts by the ESP unit, aimed at enhancing awareness regarding the services they offer. The mandatory nature of such outreach endeavours was posited as a more effective strategy for achieving the intended goals. Additionally, it was noted that not all individuals possess government-issued email accounts, thereby rendering them unable to receive regular ESP Unit newsletters.

> Mandatory Outreach is very important- in order to increase the knowledge of those who are not aware of the ESP services and of those managers who know about the service that exists but do not know what they really offer or what the service is really about… Even outreach could reach those people who do have a governmental email, since sometimes ESP sends newsletter through all employees in the public sector. (Manager 7)

> The internet can be a push, but it can also be used as the easiest way out. Even if you have an email delivered or read, it does mean that it is really read. Therefore,

> personal contact is vital here. Physical outreach in departments, making mandatory small meetings. (Manager 7)

Managers 3 and 4 underscored the significance of team-building events; however, a constraint highlighted was the absence of budgetary allocation within governmental entities to facilitate the organisation of such events.

> Unfortunately, governmental entities, per entity we are not budgeted for these things to organise it. (Manager 3)

It was suggested that the regular implementation of workshops and team-building activities throughout the year could have a favourable impact on enhancing team dynamics. These activities promote and reinforce teamwork, which, as articulated by Nelson (2021), is associated with heightened job satisfaction, increased engagement, and elevated morale among employees.

> Team building event and focusing on the social element can serve as a good relationship build-up with those persons that you don't easily get with on work related matters. (Manager 4)

When queried on potential solutions, the other Managers did not provide a definitive response. Nonetheless, they emphasised the pivotal role of management in addressing long-term challenges. This encompasses the implementation of sustained measures such as regular meetings and effective communication.

> It goes back to the role of the manager that s/he needs to be there in person and pay close attention when talking to their employees. This includes having meetings with their team every week to talk about what's happening at work. (Manager 6)

The responsibility for maintaining a conducive work environment falls upon the respective section heads, who should remain attuned to signs of workplace stress and take

appropriate actions. In the event of isolated issues arising from individual employees, managers are expected to address the root causes directly.

> I do not think that there is a program that one can implement, since here we are dealing with humans. And we are unpredictable and not easy to deal with. However, managers must make sure that they are in constant contact with their people so that they can pinpoint signals when someone is struggling with their mental health. (Manager 1)

4.4 DISCUSSION

The crucial involvement of managers in promoting mental well-being was highlighted in the first section, which carefully analysed guidelines materials. These materials stressed the critical need of providing a supportive environment in addition to outlining management options for a variety of mental health concerns.

On the other hand, the interviews in the second section revealed a deeper level of comprehension delving deeper into the realm of perception. A recurring topic across the observations taken was the need of fostering strong interpersonal bonds and fostering productive workplace communication.

In fact, the analysis revealed a significant degree of alignment between the practices of the interviewed managers and the recommendations outlined in the guideline documents. Both sources and even the literature emphasised the importance of open communication and fostering a supportive workplace culture, which emerged as a shared priority among the interviewed managers. For instance, both documents emphasised regular check-ins between managers and employees, encouraging open dialogue about work-related stressors and personal challenges. Several managers echoed this sentiment during their interviews, emphasising the significance of one-on-one conversations.

Interestingly, the investigation revealed that managerial approaches are influenced by organisational culture. Managers with a pronounced commitment to employee wellbeing appeared to be more inclined toward proactive adoption of the guideline recommendations, and they predominantly hailed from Ministries with a social-oriented mandate.

Another noteworthy divergence observed in the findings pertained to how managers approached the time aspect of aligning their practices with the guideline recommendations. On one hand, there were managers who exhibited a short-term orientation, emphasising immediate crisis intervention and providing timely support to employees facing immediate challenges. These managers believed in addressing issues as they arose, offering solutions to mitigate immediate stressors. Their approach mirrored a responsive and reactive stance, acknowledging the importance of timely interventions. Conversely, other managers adopted a longer-term perspective, where they believed in team-building activities and regular meetings aimed at fostering sustained employee welfare. These managers recognised the significance of preventing problems before they escalated, focusing on the cultivation of a workplace environment conducive to long-term employee mental health and satisfaction. Their approach was more proactive, seeking to create a foundation of wellbeing that could work for a long period of time.

The variation in how managers perceive time orientation sheds light on the multifaceted nature of alignment, a concept deeply intertwined with their perceptions of mental health and their personal priorities. This divergence stems from the recognition that managers' beliefs about mental health greatly influence their approach to employee wellbeing.

4.5 CONCLUSION

In summary, this chapter unfolded a comprehensive analysis of workplace mental health management, divided into two distinct yet harmonious sections. Together, these sections offered insights into the multifaceted realm of mental health management and its profound significance within the workplace landscape.

In the next chapter, the critical findings will come together, and a collection of recommendations will be proposed, paving the way for improved mental health management practices that may be used in real-world workplace circumstances.

CHAPTER 5: CONCLUSION AND RECOMMENDATIONS

5.1 INTRODUCTION

This research project aimed to investigate managers' perspectives within the public service regarding mental health in the workplace. It also sought to examine the perceived skills and obstacles that managers encounter when addressing employees' mental health issues at work. In the previous chapter, the study's findings resulting from document analysis and interviews were presented within overarching themes and subjected to a thorough discussion. In this concluding chapter, the limitations and primary conclusions drawn from both the existing literature and the research will be highlighted. Additionally, a series of recommendations will be provided for consideration and presentation.

5.2 LIMITATIONS

This study encountered several noteworthy limitations that should be considered when interpreting its findings. Firstly, the response rate to the researcher's invitation was limited, with only eight managers wanting to partake in the study. While the invitation was distributed to the entire public service, the low response rate raises concerns about whether the study achieved an adequate level of saturation during thematic analysis. It is essential to acknowledge that the perspectives of the eight managers interviewed might not entirely depict the diversity of opinions and practices within the broader public service context.

Secondly, a significant portion of the responses came from ministries tasked with societal roles such as healthcare, social well-being, and education. This skewed distribution limits the researcher's ability to account for potential variations in perceptions across different types of ministries within the public service. As perceptions and practices related to mental health management may differ significantly between ministries with diverse

functions, the study's findings may not provide a comprehensive understanding of the subject across the entire spectrum of the public service.

Another possible limitation is the presence of social desirability bias, which means that managers participating in the interviews were more likely to provide responses that conformed to perceived societal standards rather than their true opinions or experiences. This could potentially lead to a distortion of the data, undermining the study's validity. Moreover, the lack of socio-demographic diversity among the solely Maltese sample of managers is another noteworthy limitation. This homogeneity potentially hinders the examination of how cultural, demographic, or contextual factors might influence managerial perspectives and their behaviours.

5.3 MAIN CONCLUSIONS

One key finding is that managers in the public service who participated in this research generally hold a **favourable outlook on overseeing mental health in the workplace**. They recognise its significance and its impact on employee well-being and productivity. However, some managers tend to **narrowly define mental health** by associating it primarily with common mental health diagnoses such as depression and anxiety. This perspective may overlook the complexity and diversity of mental health issues, as mental health extends beyond these specific conditions. As stressed by WHO (2004) in their definition, which shifts from the concept of mental health as just being the absence of mental disorders, it is important for managers to recognise that employees may face a wide range of mental health challenges that may not fit into these common diagnoses.

On the other hand, some managers adopt **a more holistic approach to mental health**. They understand that mental health and physical health are interconnected and cannot be separated. Instead of treating mental and physical health as separate entities, these managers emphasise the importance of considering both as integral components of overall well-being. This perspective recognises that taking care of mental health is just as crucial as maintaining physical health for employees to thrive in the workplace. Galderisi et al. (2015) highlighted this aspect in their definition of mental health, claiming that "harmonious relationship between body and mind represent important components of mental health" (p.232).

Another important factor to consider is the fact that the majority of responses and willingness to participate in the study **came from ministries with a social function,** with only two responses received from ministries without a social function. This discrepancy in participation rates possibly reveals a lack of interest, despite the project's invitations being extended to all public service managers. This lack of enthusiasm was also emphasised by one of the interviewed managers, who noted that certain management teams in specific ministries are not inclined to learn how to handle various situations with their employees. **This is a finding in and of itself.**

In addition to training, it was also viewed that the managers interviewed although they did have a positive attitude towards managing mental health in the workplace, the researcher still noticed that there are **significant skills gap in effectively addressing employees' mental health concerns.** This gap exists because training is not mandatory, and at times, they struggled to distinguish between maintaining professional boundaries and handling complex, urgent situations involving employees.

Moreover, there were participants who were unaware of the services offered by the ESP unit. This situation raises questions about the sufficiency of their ability to access assistance when needed. The researcher emphasises that the **lack of awareness about ESP unit services** is particularly notable because it **involves individuals in leadership roles.** It underscores the importance of addressing this issue to ensure that those in leadership positions have the necessary access to support when it is necessary. Additionally, it suggests that this lack of awareness may hinder their ability to effectively lead and make informed decisions.

Another crucial aspect to consider is workplace culture, which received attention in both the guideline documents and the interviews. Emphasising the **importance of cultivating an environment characterised by openness and inclusivity**, as highlighted in the analysed documents titled 'Managing Mental Health at Work' and 'Employee Wellbeing: A Line Manager's Guide, can motivate employees to seek assistance when necessary. However, there remained a divergence in how managers addressed their employees' mental health. As previously mentioned in the earlier chapter, some managers were inclined to **prioritise short-term issues** and their adeptness in handling challenging situations. On the other hand, some managers leaned towards a more l**ong-term approach in managing their employees' mental well-being**, placing emphasis on their physical presence at the office, implementing open-door policies, and organising team-building activities. Both approaches hold equal significance and were underscored in the ESP guideline documents analysed in the previous chapter.

Finally, the significance of the ESP unit was emphasised both in the literature review and was strongly endorsed by managers familiar with and utilising the current public service

services. These managers **commended the unit's consistent efforts and dedication in providing necessary support.** This is further exemplified by the ESP's issuance of the analysed documents, in which they provide written guidelines to management on appropriate crisis management behaviours and how to establish a preventative workplace environment.

5.4 RECOMMENDATIONS

The research findings, along with their thorough analysis and subsequent discussion, facilitated the researcher in presenting the following recommendations. These suggestions aim to enhance awareness regarding the imperative of prioritising employee mental well-being as a top priority in public service management. Additionally, they seek to broaden the utilisation and accessibility of the services provided by the public service. The recommendations are presented in separate sub-sections below, for ease of access:

5.4.1 Obligatory Mental Health First Aid Training

One notable recommendation emerging from this study is the implementation of mandatory Mental Health First Aid Training for all levels of management within the public service sector. This suggestion is rooted in the recognition that managers play a pivotal role in fostering a mentally healthy environment and this is also emphasised by WHO (2022).

Mental Health First Aid Training moves away from the "didactic knowledge-based teaching" (Bryan et al., 2018, p. 466) and its main emphasis is to equip people with the abilities necessary to offer immediate support and help to those going through a mental health crisis or facing mental health issues. By making this training mandatory for all

managers, the public sector can achieve several significant benefits as it would be promoting a culture of empathy, understanding, and support within the workplace.

Another issue raised in the interviews was the managers' ambiguity about whether or not they are crossing a professional boundary when intervening. According to Kirsh et al. (2018), this ambiguity on what constitutes a privacy breach has resulted in a loss of managerial confidence to address a critical situation. However, this training can help managers be better prepared and confident in responding to indicators of mental distress in their subordinates. This is advantageous to both the workers and the organisation's culture, which is thereby made more empathetic and inclusive.

Also, as a general observation, this suggested recommendation ensures consistency in the approach to mental health across all levels of management. It sets a clear expectation that mental health is a priority and that managers are expected to be knowledgeable and proactive in addressing mental health issues.

Additionally, by making mental health first aid training obligatory, the public service will be a sending a strong message about the public service's commitment to the mental well-being of their workforce. This can enhance employee morale and trust, leading to increased job satisfaction and productivity.

5.4.2 Implementation of Low-Cost Team-Building Activities

Based on the findings that two of the managers underscored the significance of team-building events, it is evident that there is a need for a practical and cost-effective recommendation for improving team dynamics in public service. This should be done

without relying heavily on budget allocation, as they also highlighted budgetary constraints within governmental entities.

Governmental entities can optimise their existing resources and infrastructure to facilitate team-building activities. This may involve utilising available meeting spaces, conference rooms, or outdoor areas for such exercises. Simultaneously, these initiatives can be driven by employees themselves. Encouraging staff members to proactively initiate and organise team-building activities on a rotational basis can be an effective approach. This not only promotes teamwork but also empowers employees to take charge of their team dynamics.

Additionally, it is recommended that a small budgetary allocation may be prioritised for team-building activities in each ministry. Although financial limitations are a recognised constraint, allocating a small budget for these endeavours can result in notable advantages by empowering employees to enhance their productivity, elevate job satisfaction, foster engagement, and uplift their morale, as suggested by Nelson's research in 2021.

5.4.3 Revising the Role of Human Resources

Another recommendation, as also suggested by two of the interviewed managers, is a shift in the role of the human resources department. They proposed that human resources departments should transition their primary focus away from administrative duties and place a stronger emphasis on employee well-being. They argue that the role of human resources should prioritise the human aspect of work.

Meaning that their responsibilities would extend to collaborating with the ESP unit on various initiatives and organising mental health first aid training for managers at all

managerial levels. This approach would also allow for training programs to be customised to meet the specific needs and job roles of different management tiers and align with the nature of the work being conducted in that particular ministry/department.

By implementing this approach, human resources would function as decentralised units within each department, assuming responsibility for raising awareness about mental health and familiarising employees with the array of services available in the public service sector. They would also serve as accessible points of contact for employees at all levels seeking professional assistance and appropriate care when facing mental health challenges. In such cases, human resources could then refer individuals to the ESP unit for specialised support. Simultaneously, management would gain additional support from human resources in addressing intervention needs as they arise.

5.4.4 Ongoing Monitoring by Management

According to Neal (2017), it is crucial for managers to promptly address early indications of risks to mental health. However, as demonstrated by Misco's (2022) study and insights obtained from document analysis and interviews, individuals facing difficulties may opt not to disclose their concerns. Therefore, it is recommended that management establish a systematic approach to guide managers in their actions.

To put it simply, this could entail the implementation of anonymous surveys or suggestion boxes where employees can provide feedback on work-related difficulties or suggestions for improvement. This could help management detect risk aspects such as abusive behaviour, unfavourable environmental variables, and stressful processes or procedures, as laid out by the European Commission (2011) in their report 'Implementation of the

European Social Partners' Framework Agreement on Work-Related Stress'. Furthermore, management would benefit from keeping accurate records of specific factors such as absenteeism rates, instances of disruptive behaviour, declines in productivity, or workplace conflicts. And, as stated in the documents 'Managing Mental Health at Work' and 'Employee Wellbeing: A Line Manager's Guide,' the aforementioned factors are all occurrences that may necessitate attention.

However, there are major practical hurdles to relying simply on anonymous surveys and record-keeping to address mental health concerns, as these methods may lack the depth and nuance required to really understand and support individuals experiencing such issues. As a result, these strategies can be utilised in conjunction with one-on-one interactions and individualised attention, which can be critical in effectively addressing complex mental health concerns.

5.5 RECOMMENDATIONS FOR FURTHER RESEARCH

In the context of future research within this field, the researcher suggests that conducting comparative analyses of mental health perceptions across various public service sectors, including different types of ministries, can provide valuable insights for enhancing mental health practices. These comparative studies offer an opportunity to identify best practices and areas requiring improvement. Furthermore, such research can contribute to a more holistic comprehension of how organisational cultures, resources, and structures influence mental health outcomes, empowering public service organisations to adapt their strategies to meet the unique needs and contexts of specific sectors.

Another recommendation for further research is the possibility of gathering insights from a larger pool of managers within the public service by doing a survey. Since this study's sample size remained limited, potentially affecting the depth and comprehensiveness of the findings, a broader survey could have provided a more extensive and diverse perspective on the research topic, making the results more robust and representative.

5.6 CONCLUSION

This study has illustrated the wide range of perspectives that managers hold when it comes to defining and addressing the mental health of their subordinates. Some prioritise preventive measures, while others lean more towards crisis management in handling mental health issues. Notably, the ESP documents 'Managing Mental Health at Work' and 'Employee Wellbeing: A Line Manager's Guide' adopt a process-oriented approach, emphasising the importance of a continuous cycle involving prevention, early detection of warning signs, and timely intervention.

One common thread among all these varied viewpoints is the unanimous recognition of the significance of effective, regular communication within the workplace. On the contrary, obstacles were identified both at the individual level, where employees might choose to conceal their mental health challenges, and at the managerial level, where concerns about breaching professional boundaries could hinder proactive support measures.

This project's final assessment suggests that adopting the previously mentioned recommendations has the potential to enhance the management of mental health within the public service sector. This improvement can be achieved through increased emphasis

on research, systematic monitoring, and continuous training efforts, all of which contribute to heightened awareness, a vital component in combating stereotypes and stigma on mental health.

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APPENDICES

APPENDIX A: REQUEST LETTER

Request for permission to conduct research within the Public Service

To whom it may concern,

My name is Chanelle Spiteri and I am a post-graduate student at the University of Malta, reading for an Executive Master of Business Administration in Public Management. As part of my research project, I will be conducting a research titled 'Management practices surrounding Mental Health in the Workplace: Analysing the context of the Maltese Public Service through the views of managerial public employees'. This will be supervised by Dr Luke Joseph Buhagiar, luke.buhagiar@um.edu.mt.

The aim of my research is to explore the perspective of mangers on mental health in the workplace and, as a result, develop a set of recommendations for how current practices for dealing with mental health issues might be improved and what needs to be further addressed.

As part of my research, I have decided to carry out qualitative, semi-structured interviews with employees who have headship positions and work within the public sector. I would be conducting around ten qualitative interviews with people who have a role of managing a group of employees to gather more insight of certain barriers that need to be addressed. In addition, during these interviews, I will explore their perspectives on the policy options and what perceived skills do senior management have when it comes to addressing employees' mental health at work.

As a result, I am sending this request for your department to refer and grant me access to ten employees with a headship position working within the Public Service, that are willing to participate in my research project. I will not be focusing on any particular Ministry; therefore the participants can come from different ministries. The participants would not be identifiable at any stage of the research and the interview would last about 40 minutes. Attached with this letter, I have also included the ethics approval from the University of Malta to carry out this research and the sample questions which will be used during the interviews.

Would really appreciate your feedback and the way forward regarding the above.

Thank you for your time.

Regards,

Chanelle Spiteri

APPENDIX B: APPROVAL

Dear Ms. Spiteri,

Your request is approved and is now being directed to the Directors Corporate Services within all Ministries. They will in turn forward your request to all employees in a headship position.

This approval is given subject to acceptance of the following special conditions:

1. The personal data accessed or given are only to be used for that specific purpose to conduct the research and for no other purpose;
2. At the end of the research, all personal data should be destroyed;
3. All references to personal data should be omitted in the report unless consent is specifically obtained from the person being identified in the research report;
4. Participation by public officers in the research being conducted should be at their discretion, and they can refuse any participation whatsoever if they so wish;
5. The ministry/department is to be provided with a copy of the research report; and
6. Any other measure deemed fit by the respective Head, depending on the nature of the research to be carried out.

Please confirm acceptance to above special conditions.

I wish you success in your studies.

APPENDIX C: CONSENT FORM

Participant's Consent Form

Management practices surrounding Mental Health in the Workplace: Analysing the context of the Maltese Public Service through the views of managerial public employees.

I, the undersigned, give my consent to take part in the study conducted by Chanelle Spiteri, entitled "Management practices surrounding Mental Health in the Workplace: Analysing the context of the Maltese Public Service through the views of managerial public employees."

This consent form specifies the terms of my participation in this research study.

1. I have been given written and verbal information about the purpose of the study; I have had the opportunity to ask questions and any questions that I had were answered fully and to my satisfaction.
2. I also understand that I am free to accept to participate, or to refuse or stop participation at any time without giving any reason and without any penalty. Should I choose to participate, I may choose to decline to answer any questions asked. In the event that I choose to withdraw from the study, any data collected from me will be erased as long as this is technically possible (for example, before it is anonymised or published), unless erasure of data would render impossible or seriously impair achievement of the research objectives, in which case it shall be retained in an anonymised form.
3. I understand that I have been invited to participate in semi-structured interviews in which the researcher will ask specific questions to analyse the manager's perspective on mental health in the workplace. I am aware that the interview will take approximately 40 minutes. I understand that the interview is to be conducted in a place and at a time that is convenient for me.
4. I understand that my participation does not entail any known or anticipated risks.
5. I understand that there are no direct benefits to me from participating in this study.
6. I understand that, under the General Data Protection Regulation (GDPR) and national legislation, I have the right to access, rectify, and where applicable, ask for the data concerning me to be erased.
7. I understand that all identifiable personal data collected will be erased on completion of the study and following publication of results.

8. I have been provided with a copy of the information letter and understand that I will also be given a copy of this consent form.
9. I am aware that, by marking the first-tick box below, I am giving my consent for this interview to be audio recorded and converted to text as it has been recorded (transcribed).

    - ☐ I agree to this interview being audio recorded.
    - ☐ I do not agree to this interview being audio recorded.

10. I am aware that extracts from my interview may be reproduced in these outputs, using a pseudonym [a made-up name or code – e.g. respondent A].
11. I am aware that my identity and personal information will not be revealed in any publications, reports or presentations arising from this research.

I have read and understood the above statements and agree to participate in this study.

Name of participant: _____

Signature: _____

Date: _____

APPENDIX D: INTERVIEW GUIDE

Interview Guide

1. What do you understand by the term 'mental health' and how is it perceived at your place of work?
2. How can the mental health of employees be safeguarded in your sector?
3. Based on your experience as a manager, how can one tell if:
    a. The working conditions, environment, or any other factors are being detrimental to an employee's mental health?
    b. An employee has a mental health issue?
4. Based on your experience as a manager, what barriers are there when aiding subordinates with mental health difficulties?
5. In your opinion, which drivers can lead to a change in the previously mentioned barriers?
6. In your opinion, why would employees not tell employers about their mental health difficulties?
7. How can managers approach employees who are in distress?
8. Are you aware of the services offered by the Public Service when it comes to the protection of mental health? (Referring to the services offered by ESP Unit)
9. In your opinion, apart from training, what programmes or other initiatives are needed?

APPENDIX E: INFORMATION SHEET

Aims and Objectives

This research project aims to explore the manager's perspective on mental health in the workplace, focusing on managers working within the public service. Through semi-structured interviews with employees in a managerial grade, I would be investigating the following questions:

1. How do managers working in the public service view mental health in the workplace?
2. What perceived skills and barriers do managers have when it comes to addressing employees' mental health at work?

In other words, I will be identifying the barriers to effective management of mental health in the workplace. At the same time, I will be examining the relationship between organizational culture and mental health in the workplace. Which at the end this will all contribute to the broader understanding of mental health in the workplace.

Ultimately, this research aims to help the public-service develop evidence-based policies and practices that can benefit both employees and management as a whole.