

**A STUDY OF ANXIETY SYMPTOMS, WORK
ENVIRONMENT AND PSYCHOLOGICAL WELL-BEING
AMONG WORKAHOLIC AND NON-WORKAHOLIC –
BANKING EMPLOYEES IN DELHI, NCR**

Thesis Submitted for the Award of the Degree of

DOCTOR OF PHILOSOPHY

in
Psychology

By
Hitesh Mohan

41800237

Supervised By

**Dr. Zahoor Ahmed Lone (20966)
Psychology (Assistant Professor)**



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DECLARATION

I, hereby declared that the presented work in the thesis **entitled A Study of Anxiety symptoms, Work environment and Psychological well-being among workaholic and non-workaholic – Banking employees in Delhi, NCR**” in fulfilment of degree of **Doctor of Philosophy (Ph. D.)** is outcome of research work carried out by me under the supervision Dr. Zahoor Ahmed Lone, working as Assistant Supervisor, in the Psychology of Lovely Professional University, Punjab, India. In keeping with general practice of reporting scientific observations, due acknowledgements have been made whenever work described here has been based on findings of another investigator. This work has not been submitted in part or full to any other University or Institute for the award of any degree.

(Signature of Supervisor)

Name of the scholar: Hitesh Mohan

Registration No.: 41800237

Department/school: Psychology

Lovely Professional University,

Punjab, India

CERTIFICATE

This is to certify that the work reported in the Ph. D. thesis entitled “**A Study of Anxiety symptoms, Work environment and Psychological well-being among workaholic and non-workaholic – Banking employees in Delhi, NCR**” submitted in fulfillment of the requirement for the reward of degree of **Doctor of Philosophy (Ph.D.)** in the Psychology, is a research work carried out by Hitesh Mohan, (Registration No.) 41800237, is bonafide record of his/her original work carried out under my supervision and that no part of thesis has been submitted for any other degree, diploma or equivalent course.

(Signature of Supervisor)

Name of supervisor: Dr. Zahoor Ahmed Lone

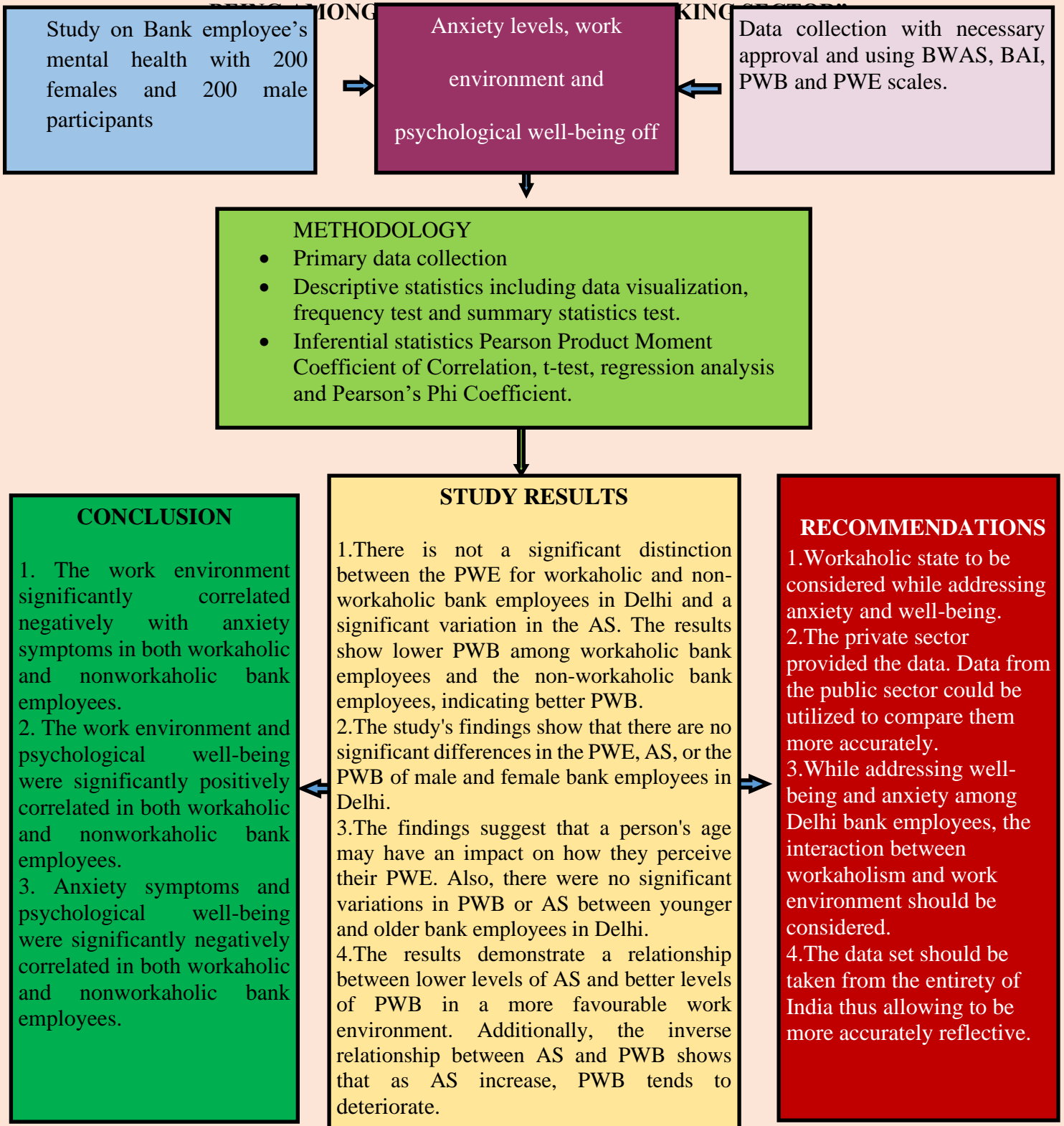
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ABSTRACT

“A STUDY OF ANXIETY SYMPTOMS, WORK ENVIRONMENT AND PSYCHOLOGICAL WELL-”



The term "workaholism," which was derived from the word "alcoholism," first appeared in a book by Oates in 1971. He defined it as an uncontrollable or obsessive drive to work nonstop, which has detrimental effects. Results from research on the effects workaholism can have on people's lives have been inconsistent. Workaholism is viewed positively by some authors (Machlowitz, 1980), but negatively by others (Robinson, 1998). This study is of Anxiety symptoms, work environment and psychological well-being among workaholic and non-workaholic. An online, self report questionnaire, which included the Bergen work addiction scale (BWAS), Beck Anxiety Inventory (BAI), Psychological well-being (PWB) and Perceived work environment (PWE), was completed by 400 bank employees of Delhi. Based on the study results, it is concluded that while addressing matters concerning Delhi bank employees state of well-being, workaholic state of participants plays a significant impact or as well as the age group, job position for anxiety levels, and state of relationship. This study results can be used alongside other works of literature to arrive at a conclusion regarding the influential factors affecting the Delhi bank employee's well-being and the anxiety levels. Equally, it can be used as a background for future scientific research that will define exhaustively the impactors of Delhi bank employee's anxiety levels and employee well-being. Finally, the study results can be used to for the purposes of learning by other individuals working on similar projects.

Rationale of the study

The conduction of literature review on the topic of anxiety symptoms, psychological distress and wellbeing and perceived environment in the workplace has revealed that there was a dearth of research: both quantitative and qualitative in the field of anxiety and stress related to workaholism

in private sector employees. Various studies have also focused on studying the prevalence of stress and impacts of workplace environment on the mental health and quality of life of private and government job employees in India. However, the interplay of workaholism and workplace environments on the development and progression of anxiety symptoms, psychological well-being. Literature review states that there have been several research concerned particularly in the field of government sector employees like police, military, healthcare professionals and teachers. Similar studies of workaholism and its impacts on the mental health and wellbeing of employees working in the private sector has not been studied (Russo & Terraneo, 2020). A gap in the research have been identified as to understanding the symptoms of mental health issues like anxiety in the active, high strain and work addicted employees of the private sectors.

The employees of the private sector are at a higher danger of mental and emotional damage as their job demand and pressure is very high in the employees of the private sector. The government sector jobs are mostly passive in nature as compared to that of the high strain and active job demands of the private sectors. Additionally, the employees of the private sectors are more stringently penalized for not being to perform and give expected production. This might lead to excessive anxiety and worry of losing their jobs which can lead to the development of anxiety symptoms. Therefore, this topic was developed to study the differences in impacts of workaholism and non-workaholism on development of anxiety symptoms and psychological wellbeing of the private sector employees. The banking sector has been targeted for this study as the banking sector as they shouldered the worst impacts of demonetization. In this regard, the study will be effective and appropriate to reduce the research gap that has been created. During the time of demonetization number of employees in private banking sector faced wide range of psychological issues Gupta and Aggarwal (2018). The sales of the service sector turned negative on a year-on-year basis at -

1.5% as informed by RBI. Additionally, there are other working sectors where the psychological state of equilibrium of psychological wellbeing is always at peril. Private sector employees are more vulnerable to various psychological issues. In this regard, the study will be effective and appropriate to reduce the research gap that has been created. Keeping in consideration all these phenomenal issues the present research topic has been chosen.

Significance of the Study

Mäkikangas et al. (2017) found that experts' dedication to their work is generally strong. Given the aforementioned idea, it may be discovered that job addiction surely causes a great deal of disruption, particularly in many areas of life. This is most frequently observed when someone's dedication to their task is at its limit. The majority of the time, overly committed employees, often known as "workaholics," are perceived to be unable to distance themselves from their profession. Working long hours frequently or overworking have a major negative impact on professionals' health and well-being, claim Andreassen et al. (2018). Denning et al. (2021) claim that the COVID-19 epidemic has put a significant amount of strain on healthcare organizations and staff worldwide. Such expectations might affect how people feel about their jobs, their mental health, and their sense of security. Despite this, no research has been done to examine the connection between safety attitudes and psychological outcomes. Additionally, very few research have examined the connection between individual differences and psychological consequences during COVID-19. Medical professionals from Singapore, Poland, and the United Kingdom were urged to take part in a cross-sectional study using a self-administered survey that included the Hospital Anxiety and Depression Scale, the Safety Attitudes Questionnaire, and the Oldenburg Burnout Inventory to evaluate the regulatory framework (HADS). The results of the study demonstrated that there is a sizable level of burnout, anxiety, and despondency among healthcare employees.

Gaps in the existing Literature

Griffiths et al. (2018) state that work addiction is characterized by "excessive engagement with work evidenced by indifference in other areas of life" (p. 71). According to the description given by Rumpf et al. (2018), those who have a work addiction are "those who spend a large amount of time in workplace activities at the expense of family and other outside duties, who continually think about work when they are not at work". Conflicts with other elements of life are one of the detrimental effects of job addiction, according to Bowen et al. (2018). They emphasized the issue's obsessive tendencies and lack of control over activities related to employment. To explain the patterns of excessive labour unique to addiction, they created the phrase "work addiction." He defined work addiction as an "obsessive-compulsive disease" that is manifested by self-imposed expectations, an inability to control work habits, and an excessive amount of work to the exclusion of the majority of other activities in life. Both the relevance of the negative repercussions of job addiction and the loss of control over one's work were included by Sussman (2012) as crucial elements in his definition.

Objectives of the Study

The following are the Objectives of the study

1. To determine whether there is a substantial distinction between workaholic & non-workaholic group over work environment, anxiety symptoms, and psychological well-being.
2. To examine gender differences in the work environment, anxiety symptoms, and psychological well-being among bank employees.

3. To establish the relationship between age group over work environment, anxiety symptoms, and psychological well-being
4. To determine the association between work environment, anxiety symptoms, and psychological well-being among bank employees.
5. To examine the inter-correlations matrix between work environment, anxiety symptoms, and psychological well-being in workaholic and non-workaholic bank employees.

Hypothesis

H_{A1a}: Workaholics significantly exhibit negative work environment as compared to non-workaholics.

H_{A1b}, Workaholics significantly exhibit higher anxiety symptoms as compared to non-workaholics.

H_{A1c}, Workaholics significantly exhibit lower psychological well-being as compared to non-workaholics.

H_{A2a}: Male gender has significantly higher positive work environment as compared to female gender.

H_{A2b}, Male gender has significantly lower anxiety symptoms as compared to female gender.

H_{A2bc}, Male gender has significantly higher psychological well-being as compared to female gender.

H_{A3a}: Younger employees have significantly higher positive work environment as compared to older employees.

H_{A3b}, Younger employees significantly have lower anxiety symptoms as compared to older employees.

H_{A3c}, Younger employees have significantly higher psychological well-being as compared to older employees.

H_{A4}: There is a significant relationship between gender and workaholics among bank employees.

H_{A5a}: There is a negative relationship between work environment and anxiety symptoms among bank employees.

H_{A5b}: There is a constructive relation between work environment and psychological well-being among bank employees.

H_{A5c}: There is a undesirable relationship between anxiety symptoms and psychological well-being among bank employees.

H_{A6a}: There is a negative relationship between work environment and anxiety symptoms among workaholic bank employees.

H_{A6b}: There is a constructive relation between work environment and psychological well-being among workaholic bank employees.

H_{A6c}: There is a negative relationship between anxiety symptoms and psychological well-being among workaholic bank employees.

H_{A7a}: There is a negative relationship between work environment and anxiety symptoms among non-workaholic bank employees.

H_{A7b}: There is a positive relation between work environment and psychological well-being among non-workaholic bank employees.

H_{A7c}: There is a negative relationship between anxiety symptoms and psychological well-being among non-workaholic bank employees.

Methodology

This study was a cross sectional research that was carried in the month of December 2021. After describing the study's objective to the bank management, formal consent for staff involvement was obtained. The data was collected on an online platform by conducting a self-administered survey which was circulated among 400 employees from selected banks of Delhi. Out of the 400 employees, 200 were females and 200 were males. The participants were selected through the process of stratified sampling based on the inclusion criteria. A person's overall score on each questionnaire was correlated with the values of each question. An alpha value greater than 0.70 was seen to be acceptable reliability. To assess this, a quantitative sociological study using a structured questionnaire was conducted among employed individuals between the age range of 21 and 64. The collected data was statistically analysed using Inferential statistics Pearson Product Moment Coefficient of Correlation, t-test, regression analysis and Pearson's Phi Coefficient.

Study Results

The bank employees' workaholic tendencies in Delhi had a big impact on their anxiety levels, degree of well-being, and perception of the workplace. The major objective of the study was to determine if there is any significant difference between the experience of anxiety symptoms, the subjective perception of work environment and experience of psychological distress in two distinct

groups: workaholism and non-workaholism groups. The study further studied the gender difference in the experience of anxiety symptoms, psychological distress, and subjective nature of the workplace environment in workaholic and non-workaholic groups. The findings of the study also established the impacts of demographic factors of the participant including age on the experience of psychological distress, perception of the workplace environment, anxiety symptoms and the workaholism and non-workaholism. The findings have been able to demonstrate how age groups, occupations, mental health, and workaholism affect the nature of relationships. Age category demonstrated no significant variations on the happiness of bank employees and anxiety symptoms. The findings also show that genuine workplace stress have a bigger impact on employees' psychological health than they do on how they perceive their job. The third aim is likewise addressed by the results, which show that there are no significant gender disparities in the general well-being, anxiety symptoms and perceived work environment between workaholics and non-workaholics. Therefore, it can be stated that the study has been able to appropriately address the objective questions and hypothesis.

Conclusion and Recommendations

Based on the study's findings, it is stated that factors such as the participants' workaholic tendencies, age group for anxiety levels, work environment all have no substantial bearing on the wellbeing of Delhi bank employees. The findings of this study can be compared to those of other literary works to draw conclusions about the important variables influencing the mental health and anxiety levels of Delhi bank employees. It can also serve as a foundation for future scientific studies that thoroughly explain the factors that affect the anxiety and wellbeing of Delhi bank employees.

- First, the workaholic state should be taken into consideration since it has a significant impact when talking about the anxiety condition, the psychological well-being of employees, and their specific work environments.
- Delhi was selected for responses. If the sample is drawn from various Indian cities, there will be a wider range of responses. In order for the sample to be more representative, it should be drawn from the entire country of India.
- Only literate people were used to gather the data. In order to make meaningful comparisons, data from both educated and illiterate persons should be collected.
- More research should be done to understand the driving forces behind people's increased workaholism.
- A large portion of the information came from the private sector. To compare them more effectively, data from the public sector may be used.
- Research on the causes of workaholism and its effects across the lifetime is still comparatively scarce. Much research is required on personality, socioenvironmental factors, and learning and reinforcement mechanisms.

Results met the problem or not

The major objective of the study was to determine if there is any significant difference between the experience of anxiety symptoms, the subjective perception of work environment and experience of psychological distress in two distinct groups: workaholism and non-workaholism groups. The study further studied the gender difference in the experience of anxiety symptoms, psychological distress, and subjective nature of the workplace environment in workaholic and non-workaholic groups. The study also established the impacts of demographic factors of the

participant including age and gender on the experience of psychological distress, perception of the workplace environment, anxiety symptoms among the workaholics and non-workaholics. The result has been able to establish there is no relationship between the age groups, state of well-being and workaholism impact the state of gender. In contrast to gender, age category showed a no significant impact on the wellbeing of bank employees. The results also include that actual negative workplace environment like discrimination and workload extent to be significant influencers of the psychological well-being of the employees than one's perceived environment. The result also answers the objective stating that there is a significant gender differences among the workaholics and the non-workaholics on the overall anxiety symptoms, well-being and perceived work environment. Therefore, it can be stated that the study has been able to appropriately address the objective questions and hypothesis.

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Without the outstanding guidance of Dr. Zahoor Ahmed Lone for such exceptional doctoral thesis, this would not have been feasible. His zeal, expertise, and careful attention to detail served as an inspiration and kept me on task with my work.

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LIST OF ABBREVIATIONS

BWAS	Bergen Work Addiction Scale
BAI	Beck Anxiety Inventory
PWB	Psychological Wellbeing
PWE	Perceived Work Environment
AS	Anxiety Symptoms
JDCS	Job Demand Control Support
SAQ	Safety Attitudes Questionnaire
OLBI	Oldenburg Burnout Inventory
HADS	Hospital Anxiety and Depression Scale
WIF	Work interference with family
FIW	Family interference with work
WFC	Work family conflict
UWES	Utrecht Work Engagement Scale
DUWAS	Dutch Work Addiction Scale
ESEM	Exploratory structural equation modelling

DL	Distance learning
MHN	Mental Health Nurses
NGO	Non -governmental organization
IPA	Interpretative phenomenological analysis
SDT	Self-Determination Theory
WorkBAT	Workaholism Battery
WART	Work Addiction Risk Test
PROMIS	Patient-Reported Outcomes Measurement Information System
MoHFW	Ministry of Health & Family Welfare
UFBU	United Forum of Bank Unions
SPSS	Statistical package for the Social Sciences
ANOVA	Analysis of variance

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CHAPTER 1

CHAPTER 1

INTRODUCTION

Work gives a positive value for the people of different cultures and living in different societies. For a few, work is always a passion for many people. There are a few workaholics who totally get involved in the work-related activities which would results in not giving enough time for the family, maintain personal relationships and taking up other responsibilities. On the other hand, workaholics would get engaged in the work would not have the compulsive drive, which is very critical for anything, especially if one wants to get addicted to the work. The highly acclaimed conclusion of Mäkikangas et al. (2017), the experts' commitment to their work is generally favorable. However, when a person's commitment to their work reaches an excessive level, work addiction may undoubtedly cause enormous levels of disruption in many different aspects of their lives. The bulk of the time, highly committed workers—often referred to as "workaholics"—are seen to be unable to disengage from the work they perform. The health and well-being of professionals are significantly harmed by working long hours frequently or overworking, according to Andreassen et al. (2018).

The presence of a work addiction becomes obvious if a person's routine of work starts to resemble excessive overworking. Given that it displays complicated reactions, work addiction is undoubtedly challenging to diagnose. It makes sense that employers want their staff to take initiative and go above and beyond the call of duty. To the subject of when devotion to a job turns into addiction, there are various responses. However, Griffiths et al. (2018) noted that the situation when it turns into a job addiction is frequently the thoughts and concerns that are masked by identifying them as willpower and determination. Atroszko (2019) argues that the widely

acknowledged workaholic aspect of work addiction is also thought to be a legitimate mental health problem.

The inability to quit a behavior is a trait shared by work addictions and other behavioral patterns. Like any chemical addiction, work addiction has the ability to destroy a person. Professionals with a work addiction have a propensity to keep doing the same things while they are addicted. Even when they are aware that their behavior is detrimental to their personal lives, mental health, and physical health, persons who are job addicted typically find it impossible to change.

The banking industry is known for its demanding work environment, which can lead to anxiety and other mental health problems for employees. There is plethora of literature available the shows that bank employees who worked long hours were more likely to experience symptoms of anxiety and depression. The workaholic employees were more likely to report having a poor work-life balance and feeling exhausted. These factors can contribute to psychological distress and make it difficult for employees to cope with stress. Workaholism could be easily contributed to the various number of psychological issues. The work environment on the other hand can play a significant role in employee anxiety. Factors such as high workloads, tight deadlines, and a lack of control over one's work can all contribute to anxiety. In the banking industry, these factors can be especially prevalent. For example, bank employees may be under pressure to meet sales quotas or to close deals quickly. They may also have to deal with difficult customers or complex financial products. Workaholic employees are especially susceptible to anxiety. Workaholics are often driven by a need to achieve and a fear of failure. They may also have difficulty disconnecting from work, even outside of work hours. This constant pressure can lead to anxiety and other mental health problems.

Wellbeing of bank employees in general and wellbeing of workaholics in particular has always been found at Peril. Anxiety could significantly impact psychological wellbeing of, affecting their concentration, decision making and sleep. This myriad of problems can hinder the personal life as well. In present study variables under study are work environment, psychological wellbeing among workaholic and non- workaholic banking employees because workaholism is a major concern especially in banking sector. This study throws light on whether there is any psychological justification to classify these two entities over anxiety and psychological wellbeing.

1.1 BACKGROUND:

Workaholism is a public health issue that could be detrimental to employees' health. As a damaging attitude to work, workaholism has a negative effect on employees all over the world. Labour addiction is defined as "a desire or an uncontrolled need to work continuously," also known as workaholic. This internal desire, also known as a behavioural condition, is an important component in identifying workaholics and fulfils the fundamental criteria for addiction. Particularly in the context of workaholics in the health of employees, according to Balducci et al., (2018), this function has not been thoroughly researched. As per study by Clare et al., (2014), "workaholics do not engage in excessive work due to external reasons such as financial problems, a poor marriage, or interference from their business or supervisor". The employee's extreme interest in work when it is neither necessary nor planned sets workaholic behavior apart from related behaviours like job involvement. According to research, job addiction has both benefits and drawbacks. A greater risk of work-family conflict, poor physical health, and sensitivity to job addiction are all related

negatively. It was shown that work addiction vulnerability is linked to better levels of employment and workplace satisfaction, which is a positive result. As a consequence, the findings show that more study is required to clarify this issue, Pidd et al., (2017). This is particularly true in India, which is one of Asia's most industrialised nations with a growing variety of professions. Work position overburden and conflict are higher demands for workaholics. People who work in high-demand professions seem to become workaholics. However, little study has been done on the effect of health-related outcomes across numerous occupational categories and the propensity to work addiction, and to the best of our knowledge. Work gives a positive value for the people of different cultures and living in different societies. For a few, work is always a passion for many people. There are many work activities that keep people occupied and take away their space and time in the process of proving oneself and this also results in conflicts between various domains in life Gorgievski et al., (2010). There is a huge amount of research that would give the pros and cons of workaholism. This will give the difference between the good and bad workaholism. The best part of being a workaholism is to engage in the work as per Schaufeli et al., (2002). This clearly states that people who are totally involved in the work would stay energetic and get connected to various work activities and see themselves to be able to finish all kinds of tasks in the jobs. To be specific, work engagement will imbibe a positive attitude and put you in the work state of mind that would have a lot of vigour, commitment and grasping ability as per Schaufeli et al., (2002). Vigour has huge amount of energy levels and mental ability to work interestingly and invest efforts despite there are many difficulties to complete the work. The one who is dedicated would get totally involved in doing the work, experience a lot of importance, show enthusiasm, inspire others, and feel proud about themselves for taking up the challenges and completing them successfully. Basically, absorption is all about focusing on the work and getting engrossed in doing

the work. It becomes difficult for the workaholic to get detached from the work. There are a few workaholics who totally get involved in the work-related activities which would result in not giving enough time for the family, maintain personal relationships and taking up other responsibilities. On the other hand, workaholics who get engaged in the work would not have the compulsive drive, which is very critical for anything, especially if one wants to get addicted to the work.

Mudrack and Naughton (2001) stated that many employees especially who are working for a greater number of hours every week is not categorized as workaholics, if they are exhibiting the talent and putting efforts to complete the work that is assigned to them. It is further highlighted that employees who toil and pay a lot of attention to complete the tasks during the working hours would not be considered as workaholics, if at all they are not bothered about the work when they are out of the working hours. On the flip side, there are many studies which are conducted to provide the key necessities that would promote workaholism. The external aspects such as rewards at the workplace like payment (Brett & Stroh, 2003); having enough time to work and enjoy the leisure time; social contagion; demand the best organizational culture, fulfil the demands of the employees (Maume & Bellas, 2001) taking over the higher position in the company. working in the capacity of a key position at the time of economic dip (Kanai & Wakabayashi, 2004); recovery of the economy union policies and regulations of the labour market Alesina et al., (2005) would also make other people to turn as workaholics.

To explain the role of motivation and self-determination in workaholics that sustains the perseverance in these workaholics and their experiences of stress and anxiety, the author outlines the self-determination theory as suggested by TothKirály et al. (2020). The author outlines a

theoretical idea of five-character profiles which are driven, conflicted, self-determined, poorly motivated, and internally motivated. The theory proposed that people with greater degrees of global self-resolve and more independent sources of motivation had reduced burnout and more job satisfaction. According to theory, the focused profile has the highest propensity to develop a work addiction, whereas the self-determined profile has the lowest propensity.

The circumplex model has been used in the study to link the character profiles of employees outlined beforehand with the probability of experiencing psychological distress due to work and the quality of life of the employee. The circumplex model of employee well-being states that there are four major states of occupational subjective wellbeing. They are burnout, work engagement, workaholism and job satisfaction (Snir & Harpaz, 2012). These four concepts of wellbeing represent experience of pleasure and arousal which can be used to understand the multifaceted nature of employee wellbeing. Work engagement is marked by vigour, devotion, and absorption and is defined as a positive, rewarding mental state associated to work. It follows that both activation and enjoyment are traits of work engagement. While workaholism shares the same traits of high stimulation and discontent. The traditional definition of workaholism is a strong inner, compulsive need to work too much. Burnout is the reverse of work engagement, while job satisfaction, the antithesis of workaholism, is defined by deactivation and enjoyment, is characterized as a state of deactivation and discontent, rounding out the four quadrants. While job satisfaction is described as an individual's overall favourable attitude about their job, burnout is a obstinate, work-linked state of ill-being characterized by the aspects of weariness, cynicism, and impaired professional efficacy. Therefore, this model has been used to outline the fact that autonomous sources of inspiration is not positively correlated with the balanced out detrimental impacts of regulated forms of motivation. This model is the most commonly used and empirically

supported model of occupational well-being in terms of activation and pleasure. The circumplex model further outlines the eight different coping styles which can be successfully linked to the experience of life satisfaction and psychological discomfort. The coping styles forming the circumplex can be used to understand the situation controllability. Empirical studies have investigated the readiness of the affective descriptors with work attitudes. The findings of such studies state that this model is effective in determining job attitudes.

The second model used to understand the job requirements and job demands that contribute to workaholism is Karasek's job demands-control model. The four quadrants of the job demand include: active, passive, low strain, and tense/job strain (Turner et al., 2012). The fundamental tenet of the work demands-control model is that control may help reduce psychological and physical distress and stress in the employees. According to this model, if a person is employed to a low strain job, he/she will be able to exercise high job control and experience low job demands. These employees have freedom to decide their own schedule and include routine jobs and have low chances of experiencing work stress and psychological distress. The people with high strain jobs, have very little control on their schedule and have high demanding and complex jobs. These individuals have very high chances of experiencing stress and ill-health. Passive jobs involve repetitive and high production jobs, and the risk of stress is the lowest in these types of jobs. Active jobs are high in demand, have high control and have higher motivation to learn and grow in the jobs but these people do not perceive their jobs as psychologically demanding. This model has been incorporated in this study to determine the type of demand, control and motivation banking posts have on the bank employees so that a hypothesis can be developed for the study in relation to these employee's experience of psychological distress, anxiety symptoms and ill-health. The jobs stress model is simple to understand and interpret and may be used to detect and evaluate

psychological exhaustion or stress caused by the employee's job. The concept of control latitude used in this model can be further used to determine and recommend appropriate interventions specific to the job demands and the impact the demand has on the individual. This is an appropriate model for the study as it helps predict the interrelation between the structuralism of work and health and wellness outcomes in occupational workers.

The study also uses spillover-crossover model to explain workaholism. This model is one of the most significant models which resonates the theme of the study. This model determines who the state of well-ness is transmitted from one domain of life to the other (Bakker & Demerouti, 2013). This process of 'spillover' is known to take place at an intra-individual level. The transference of experience from one domain to the other can be either good or bad. The negative spillover leads to work-family conflict. This refers to the condition in which work related stress and job demand has unfavourable impacts on the family role. The individual might end up compromising one's personal space and leisure time.

The positive spillover occurs when social support, autonomy and feedback received from the workplace facilitates family enrichment. This model has been used in the study to comprehend the effects of workplace stress on employees' personal lives. Therefore, this model can be used to explain the ill-health and lack of work-life balance in workaholics in relation to the Karasek's job demands-control model. The appropriateness of this study lies in the fact that job demands control model is one of the most used models to study the work-life balance associated with workaholism. The above models have been the most appropriate in explaining the link between workaholism and the characteristics of the employees and the experience of symptoms of anxiety and the effects of workaholism on an individual's level of life.

1.2 CONTEXT:

Employers have demonstrated in recent decades that they are ready to develop procedures and efforts to enhance banking employees' feeling of engagement with their jobs in order to improve job performance. Although the techniques may benefit businesses by improving work performance, they may have a detrimental influence on employees' psychological health. This is due to the risk of work addiction; this is the circumstance in which employees decide to put in greater time at work to meet performance expectations and acquire a dependency on this environment under such demanding conditions. This may jeopardise banking employees' mental health and result in severe consequences. Psychosocial variables may aggravate this effect even further. Clark et al., (2014), for instance, looked at the importance of numerous psychological adjustments in job addiction threat and indicates an adverse link amongst age and workaholics, as well as a positive link between overburden environment, work overload, and performance appraisals for increased performance, and work addictive personality consequences. However, Clark et al., (2016) found no evidence of a substantial link between gender and the likelihood of job addiction. Furthermore, they discovered that when job demands are raised, employees with high level management are much more willing to report work addiction risk than employees with different work engagement. The correlations haven't, however, been looked into across a broad range of vocational categories with various levels of job management and job needs. We hypothesize that the perception of work addiction risk would vary depending on the type of workplace, so we use Karasek's model to illustrate how the nature of individuals' employment in

both of job requirements and job authority may contribute to job addiction risk, Magnavita et al., (2015). The term "job demands" refers to any aspects of a job's physiological, psychologically, sociocultural, or organizational demands for immediate physiological, psychologically, intellectual, or emotional exertion, such as time constraints and an excessive workload. Job responsibilities are all such elements of a job's physical, psychological, sociocultural, or organizational requirements for ongoing physical, psychological, perceptual, or emotional effort from co-workers and management. The four diverse work environments (or "quadrants") predicted by the JDCS (Job-Demand-Control-Support) argument each have varying levels of job requirements and regulation are as follows: active, low-strain, tense/job-strain, and passive, Dutheil et al., (2020).

Even when they are knowledgeable of the consequences on their personal life, substance abuse, and physical health, people who are addicted to work are frequently reluctant to alter their behaviours. In a society where, putting forth a lot of effort is valued, it's critical to keep this in mind when assessing work addiction and working extra hours on a regular basis is expected, diagnosing work addiction becomes very difficult (Loscalzo & Giannini, 2018). Furthermore, professionals who are addicted to their jobs often emphasise the importance of their behaviour and the implications it has on their ability to achieve their goals. These experts seem to be committed to their job and professional success. It must be emphasized that ambition and addiction are very distinct concepts. Experts who have a high level of work addiction are more prone to compulsion to work, in order to avoid dealing with other elements of their lives. Such as emotional problems and personal crises Lichtenstein et al., (2019). There are many indicators that a professional is addicted to their work. Working too long hours in office environments or with teams of people when it's not necessary and skipping important sleep time to finish tasks, according to Toth et al.,

(2018), are signs of a professional being addicted to his or her job. Furthermore, obsession with career achievement is a tell-tale indication of job addiction. The development of a significant fear of failing at work, in particular, is a major indicator of a professional's job addiction. Professionals' proclivity for being neurotic about their job-related performance has been linked to a strong addiction to work. As per Urbán et al., (2019), professionals with a job addiction avoid making any kind of personal connections at work. When it comes to work, having a protective attitude toward others is a strong indicator that you're suffering from job addiction. Today's professionals have a proclivity to use their jobs to avoid any sort of relationship, which may lead to job addiction. A large proportion of today's professionals get job hooked merely by working long hours to cope with sorrow, feelings, and guilt. The specialists do not wish to offer them any breathing room in this situation by making sure that they work nonstop because, the dynamics of the numerous current experts are also showing to be rather complex, which is the most crucial factor. (Atroszko & Griffiths, 2017). Financial problems, mortality, and divorce are among the catastrophes that these professionals try to prevent. Aside from that, it is well known that work addiction leads professionals to devote more time to work, and this proclivity to seek out more employment is a clear indication of work addiction. Labour addiction is also shown by a tendency to work for longer periods of time than is required. Work addiction is also shown by missing days off and vacations in order to maintain workplace involvement. Work addiction manifests as in professionals' inability to escape workplace stress, trouble sleeping, situations in which hobbies are favoured above work, and continuous overthinking.

Here's an example of how the scale was utilised in the evaluation: It is conceivable to infer that the Bergen Work Addiction Scale (BWAS) is used, which is more significant, if more consideration is given to the idea of job addiction and methods of assessing it. The University of Bergen was the

first to develop the scale, the whole medical profession subsequently approved of this. This scale is designed to evaluate a number of factors, including how often different aspects of a professional's life are faced. Most of the items are graded on a scale with options such as Never (1), Rarely (2), Sometimes (3), Often (4), and Always (5). Given that it is used to assess job addiction, it is essential to get a comprehensive understanding of the instrument before using it to work addiction assessment. "You think of methods to free up more time to work," for example, may be measured using the tool. "You labour far longer than you planned," says the narrator. "You try to alleviate guilt, worry, powerlessness, and despair," she says. "You have been advised by others to reduce your workload without listening to them," says the narrator. Therefore, it is evident that the scale is crucial in determining whether a person has a work addiction or not.

1.3 WORK ADDICTION CAUSES:

In today's world, job addiction has several causes, and the fact that there are so many complicates the situation. One of the main motivators for professionals to embrace job addiction, Atroszko et al., (2020), is the aim to be viewed as knowledgeable and competent. Professionals' perceptions that their self-worth is connected to their employment play a role in their choice to participate in work addiction. Simultaneously, the need for constant attention, especially from bosses, is definitely a major trigger for professionals to develop work addiction.

Shah et al., (2021) they concentrated their research on the banking industry, which has emerged as one of India's most competitive industries. Numerous studies have linked poor health to sedentary habits and psychological stress. The sedentary work that bank employees do has also been related to high levels of mental stress. 360 employees of the government and 240 employees of private banks in Ahmedabad participated in a cross-sectional survey. A previously created and tested

questionnaire was used to gather data. While ocular issues were slightly more prevalent in government bank employees (50.28 percent and 30.28 percent), musculoskeletal and digestive issues were found to be slightly more frequent in private bank employees (55.42 percent and 32.88 percent), in comparison to government bank personnel (50.28 percent and 30.28 percent). The prevalence of hypertension and diabetes was determined to be 25.67 percent and 13.17 percent, respectively, in the population. Even though 29.17 percent of employees were somewhat happy with their employment and 63.67 percent were completely content, more than half of the staff members (51.17 percent) said they were stressed at work. Consequently, the study discovered that bank employees had a high rate of various health problems. Increased use of specific interventional measures among this vulnerable population is required. According to Ganesh and Deivanai (2014), bank employees have a high rate of hypertension, which may lead to the development of anxious behaviours. There is a need to increase the adoption of specific lifestyle interventions among this vulnerable population, such as reducing salt consumption and encouraging physical activity. Kumar and Sundaram (2014) discovered that most bank employees were stressed to a high or extremely high level, which is alarming. Stress and its consequences are a major health concern among bank employees, according to numerous studies from around the world. According to recent research sixty percent of the bank employees stress level was high or extremely elevated, this is marginally lower than our observations (Kumar & Sundaram, 2014). Differences in results between studies could be due to differences in methodology, assessment tool, regions chosen, and work environment, as well as terminology used. Stress among bank employees is caused by a variety of reasons. However, no relationship was found between stress and demographic factors, job type, smoking, or any kind of alcohol use in this study. When given topics like "handling personal problems" and "things were going your way," however, it was shown that respondents

felt somewhat often and very frequently. Individuals are responsible for 80% of the stress they experience. 20% of stress may be genuine, such as dealing with an incurable disease or pain, natural disasters, family deaths, automobile accidents, rape, libido deprivation, and other problems that no one has direct influence over (Silva & Navarro, 2012). The banking sector has undergone significant reorganisation all around the world, and it has emerged as a pioneer in the organization-wide innovations and the adoption of new technology. Workplace automation, along with various kinds of work organisation, has resulted in changes that have a negative effect on employees' health. Working long hours, dealing with a range of situations, interpersonal connections inside the workplace, and people with or without families, as well as personal problems, all contribute to stress.

It's also worth mentioning that the fear of losing money or losing one's financial security is a significant factor in work addiction. Fear of change, on the other hand, is a major influencing factor in the development of work addiction. Owing to lack of flexibility, some professionals on today's job market dislike their work and personal life have changed. In order to prevent any changes in their personal or professional lives, they would choose to work hard in this situation. Most importantly, the fear of being humiliated at work because of poor performance is a powerful motivator for professionals to work continuously, which may develop to work addiction. According to Kun et al., (2020), the anxiety of being alone and isolation takes significant implications for professionals. To avoid loneliness and the fear of being alone, modern professionals tend to develop a high level of work addiction.

1.4 Risk of Addiction at Workplace:

Before learning about the risk factors, it's critical to identify the professionals susceptible to developing a work addiction. When it comes to the people who are more prone to acquire a job dependency, it's crucial to keep in mind that specialists who have fought addiction in the past are more likely to do so. People are more likely to develop a work addiction if they have previously struggled with addictions to narcotics, alcohol, tobacco, or other substances that are addictive. Furthermore, professionals who struggle to disconnect from work and strive for perfection are at a greater risk of acquiring a job addiction Balducci et al., (2021). Professionals who desire to be called "Workaholics" at work and professionals who have a proclivity to accomplish everything in an all-or-nothing capacity are also more susceptible to occupation addiction. Professionals who come from a family of workaholics are also more prone to acquire an occupation addiction. Having an occupation addiction carries a number of hazards, raising worries that professionals may get hooked to their professions. Professionals who are emotionally invested in their professions are more likely to feel alienated from a system of support, including relatives or acquaintance. Due to this, such occupations may confront considerable mental challenges. Furthermore, occupation addiction is a significant source of apprehension for specialists since it leads to a variety of health problems, including difficulties with the body, obesity, high blood pressure and mental stress, Atroszko et al., (2017). Workplace addiction has a lot of probability to keep people up at night. Job addiction may cause professionals to suffer anxiety and panic attacks while they are not working. If you are unable to connect with your colleagues and supervisor as a result of an addiction to work, you may lose your job. It is crucial to stress that the study will aid in providing a clearer picture of how work addiction affects professionals throughout COVID 19. The analytical research's primary objective was to evaluate the influence of occupational dependency during

COVID 19, when the whole working population and job markets were impacted. The implications of work addiction during COVID 19 are interesting to examine since the labour and employment markets were very unstable; there were massive job losses, massive halts in economic transactions, and individuals had extreme job insecurity and were terrified of losing their jobs. Most significantly, during COVID 19, experts demonstrated a deeper understanding of occupational addiction since they believed that their superior performance might preserve their professional jobs. A study by Mohan and Lone (2021) wherein a total of 110 specialists were also involved. Gender, age, and educational level, as well as status of marriage, duration of the specialists in the firm, and their position in the organisation, were all asked about in the statistical analysis, which was done using Microsoft Forms. Found that the context of work addiction was the most significant element. During COVID-19, The study's researchers considered the idea of work addiction and how it affects professionals. The study includes information on the most popular scale for measuring work addiction as well as a detailed examination of the methods for recognizing work addiction. The study also examines the risk factors and causes of work addiction, which is more significant. The essay goes into great detail to describe the statistical analysis and study outcomes. The outcomes of the research are thoroughly described in the article. Discusses the ramifications of the study's findings as well as its long-term objectives.

1.5 PURPOSE:

Bank employees are part of a unique workgroup that faces different degrees of mental stress at work. Long-term mental stress has been linked to chronic illnesses among bank employees, according to research. Bank employees don't have time to relax, and they have to deal with a wide range of duties, as well as prejudice, favouritism, delegating, and competing priorities. Employees' usage of substances like alcohol and smoking was shown to have a major influence in influencing

their levels of workplace stress Vidal et al., (2017). Only a few global studies have been done to determine how stressed bank personnel are, and there haven't been any in India. (Kumar & Sundaram, 2014). As a result, such a research group was selected as the study's objective. Research of this type would aid in understanding the issue of stress and its related variables, allowing for the implementation of suitable treatments for the welfare of such a vulnerable population. This study's objective is to examine the relationship between job addiction vulnerability and a range of health results in India, considering the likelihood of workaholics in different professional categories. Second, this study employs Karasek's (1979) task-demand-control model to investigate the connection flanked by the risk of occupational addiction and across different occupations with various levels of employment requirements, health-related variables, Andreassen et al., (2017). The career demands-control model is designed to predict negative impacts of job stressors, particularly strain, which is a consideration in this study, since it is an occupational stress model Mauno et al., (2016). The reason for adopting this model is that it optimally considers both the work demands and the degree to which those demands may be controlled in one's employment. The same paradigm has also been applied to job development, which is another explanation. This suggests that the model is intended to predict or illustrate the association between work structuralism and wellness outcomes in occupational workers based on their working requirements, with more demanding jobs having a higher risk of work reliance.

1.6 SIGNIFICANCE AND DEFINITIONS:

In the majority of instances, Mäkikangas et al., (2017), experts' commitment to their job is good. Following the above-mentioned notion, job addiction may also be found to undoubtedly contribute to a massive amount of disruption, specifically in numerous aspects of life. This is most often seen when a person's commitment to their job reaches a breaking point. The bulk of the time,

excessively devoted employees, often referred to as "Workaholics," are seen to be unable to detach themselves from their job. According to Andreassen et al., (2018), regularly putting in lengthy hours of work or the health and wellbeing of professionals are seriously harmed by working too hard. When a person's work habits begin to resemble the patterns of obsessive overtraining, the existence of work obsession becomes obvious. Employees may find "passive" employment (little job control, low job demands) pleasant as long as they achieve the stated objective. A work's passivity may also be dependent on effectively preventing interruptions with consistent job expectations. High job control and minimal work demands characterise "low strain" occupations. This group's members do not have a significant chance of developing mental illness, they usually work in creative fields (e.g., architects) Dutheil et al., (2020). Employees that are classified as "active" have a lot of responsibilities and also have been found to have a lot of influence over their work. Jobs requiring high levels of competence and responsibility, such as CEOs, directors of industries, are characteristics of such engaged employees. These highly trained employees have difficult jobs to do, yet they have a lot of leeway in making decisions to address issues. Finally, individuals in the "job strain" category are susceptible to stress-related illnesses (strong demand and little regulation) health professionals who work in emergency rooms, for example, are often under stress because they are unable to manage the massive demand Trousselard et al., (2018). The COVID-19 pandemic, according to Denning et al., (2021), has put a great deal of pressure on healthcare organizations and employees everywhere. Such expectations might affect how people feel about their jobs, their mental health, and their sense of security. Despite this, no research has been done to examine how psychological consequences are related to safeguarding attitudes. Additionally, very few research have studied the connection amongst individual differences and emotional consequences during COVID-19. To evaluate regulatory framework, medical

practitioners from Singapore, Poland, and the United Kingdom were invited to take part in a cross-sectional study employing a self-administered survey that included the Safety Attitudes Questionnaire (SAQ), Hospital Anxiety and Depression Scale (HADS) and Oldenburg Burnout Inventory (OLBI). The study's findings showed that healthcare employees suffer from a significant amount of burnout, worry, and despair. Testing for SARS-CoV-2 showed a high correlation with safety behavior, sexuality, employment position, relocation, and emotional state. These results underline the necessity of specialized support services for at-risk categories and preventative SARS-CoV-2 testing of caregivers.

1.7 OPERATIONAL DEFINITION:

Social support modifies the effect of occupational strain, either favourably when issues at work can be solved by significant social support, such as for lone case of emergencies doctors, or adversely when social support is lacking. Isostrain describes employees who are under stress at work and have little social support. All occupations, according to the JDCS theory, have distinct work needs and job controls Dutheil et al., (2020). Several large-scale studies involving thousands of employees' classified professions based on profession demands and workplace control. Additionally, it is stated that employees having a lot of power over how they cope with their stress levels engage more in job duties Dutheil et al., (2020). Risk factors for job addiction and individual perspectives on work across various occupational categories have never been examined in a study with a large enough sample size, and there is hardly any research on the issue in the Indian population.

CHAPTER 2

CHAPTER 2

LITERATURE REVIEW:

2.1 DETAILED LITERATURE REVIEW:

2.1.1 INTRODUCTION

The process of researching, reacting to, and evaluating the work done by previous researchers is included in the examination of related literature, as well as evaluating the possible reasons and viewpoints connected to the current research challenge. Additionally, this aims to facilitate the researcher's thorough comprehension and knowledge into the work that has previously been done as well as the main topics that need to be studied further. In research, no two research projects are alike, and factors under inquiry are explored in various combinations to better understand the impact of the cause-and-effect relationship that underpins the phenomenon.

The researcher makes use of the information that has gathered over time as a consequence of ongoing human effort. One of the most crucial aspects in the preparation of any research study is a thorough evaluation of journal publications, books, dissertations, theses, and other information sources on the subjects to be examined.

The research worker in the field of banking, like in other fields, must have up-to-date information on what has been thought and done in the specific area from which he plans to select an issue for study.

The banking sector, like all other industries, is experiencing challenges in different dimensions as a result of the current COVID-19 situation. Many psychological symptoms, such as anxiety, well-being, and work environment, are arising as a result of these challenges. The present

investigation is aimed to study of Anxiety symptoms, Work environment and psychological well-being among workaholic and non-workaholic – Banking employees in Delhi. The folios that follow provide a comprehensive assessment of the literature in this area.

In the past 20 years, workaholism has been a hot issue (Andreassen, 2014). As a result of fast technology advancements, a growing number of employees have the option of working elsewhere, frequently from home. The transforming nature of modern working life, along with the blurring of the lines between work and personal life, are compelling reasons to improve our knowledge of workaholism. Workaholism was first described by Oates (1971), who defined it as a constant and uncontrolled need to labour (Oates 1971). Workaholism as a concept may be regarded both favourably and negatively, according to prior study. Workaholics are regarded as addicts who are unable to regulate their work behaviour on the one hand, and as exceptionally hardworking and devoted employees on the other. Despite the fact that workaholism has been described in a variety of ways through time - as a mindset, a behavior, a habit, or an obsession – Ng et al., (2007) re-defined it to reflect the three fundamental aspects of addiction, specifically, behavior, emotion, and cognition. Several academics now see workaholism as a form of dependence foundation and as obsessed about work, to be influenced by strong and unmanageable work engagement, and to having spent so much thought and spending so much time on work that it interferes with personal connections and free time activities, and to devote so much thought and resources into work that it hinders private interactions, spare-time activities, due to the significant theoretical framework and comparisons to more conventional drug addiction (Andreassen et al. 2014b, p.8). Andreassen et al., (2012) developed the Bergen Work Addiction Scale based on theoretical grounding of Brown's (1993). Griffiths' addiction elements model and behavioral addiction theory, building on prior addiction conceptualizations and measures (2005). As a result, job addiction, like other

addictions, has seven essential components: (1) relevance (2) mood improvement (3) endurance (4) disengagement (5) friction (6) recurrence and (7) problems. According to the diagnostic criteria for addiction established in contemporary psychiatric nomenclature, addiction is a more comprehensive concept that includes all seven of the afore mentioned symptoms. Because withdrawal and tolerance are commonly understood as dependence, The term "addiction" encompasses a wider range of symptoms than the seven listed above (World Health Organization, 2013). As opposed to the majority of conventional workaholism methods, the BWAS, comes with a recommended cut-off (endorsement of at least 4 of 7 items) for classification as a workaholic (Andreassen et al., 2012). Several investigations have shown its psychometric characteristics. The purpose of this research was to evaluate the BWAS in a representative online Indian population sample and to elucidate the psychometric characteristics and inner structure of the various instruments against this background.

Bank employees form a distinct workgroup that is subjected to varying levels of mental stress. According to studies, long-term mental stress has been related among bank personnel, like chronic diseases. Bank employees have little free time and must cope with a broad variety of responsibilities, as well as bias, favouritism, delegation, and conflicting agendas. Employees' use of drugs like alcohol and smoking has been proven to have a big impact on how stressed out they are at work, Vidal et al., (2017). According to previous research, 60% of bank personnel stress levels were elevated or extremely elevated., which is somewhat lower than our findings (Kumar & Sundaram, 2014). According to Patronea et al., (2017), the respondents in their research, who are bank employees with self-reported mild psychiatric illnesses, saw an increase in their complaints. Furthermore, the development of psychiatric illnesses was linked to specific workplace variables such as poor working circumstances, low control situations, and

communication opportunities. The induction of distress is a common denominator across the aforementioned variables. As a result, our research adds to the growing body of evidence that the banking industry is a high-stress workplace (McBride et al., 2015), with an elevated demand and an unreliable control system (Lima et al., 2013), leading to the development of minor psychiatric illnesses.

2.1.2 LITERATURE REVIEW WORK ADDICTION

Various number of studies have shown a significant relationship between workaholism and impaired physical and mental health (Akutsu et al., 2022). Workaholic have been associated with anxiety (Matsudaira et al., 2013), burnout (Galdino et al., 2021), CAD (Balducci et al., 2021), depressive symptoms (Dutheil et al., 2020; Yang et al., 2020), and dysfunctional sleep (Andreassen et al., 2007; Salanova et al., 2016). Including anxiety and depression various studies have reported positive relationship with other psychiatric conditions (e.g., Andreassen et al., 2016; Clark et al., 2016). It is pertinent to mention, workaholics have been characterized likely to report lower life satisfaction and overall well-being when compared to average workers (Bonebright et al., 2000; Shimazu et al., 2015). Workaholism has been positively correlated with work family conflicts (Andreassen et al., 2013a; Chang et al., 2022) and partners' marital dissatisfaction (Robinson et al., 2006). Positive association have been found between Low negative organizational outcome and workaholism have been (Haar and Roche, 2013), job-stress (Sarfaraz et al., 2022) and work-related accidents (Andreassen et al., 2018a). In this juncture the present research will fill the gaps and dwell deep into the available literature to ascertain whether there is any link between anxiety symptoms, work environment and psychological wellbeing among workaholic and non-workaholic banking employees.

Work addiction is tough to spot since it manifests itself in a variety of ways. Employees are expected to take initiative and go above and beyond the call of duty, which is reasonable. When it comes to the issue of when a dedication to a work becomes an addiction, there are many different perspectives. Nevertheless, Griffiths et al., (2018) said that the concealed thoughts and anxieties that are disguised as discipline and devotion is often the scenario when job addiction develops. Occupational addiction, that is known to have a reputation for having a workaholic personality, is viewed as a real psychological health issue as well, according to Atroszko (2019). Work addiction, like other behavioural patterns, is defined by the inability to quit doing something. Methods for detecting a job addiction include: Atroszko et al., (2016), after giving careful attention to the notion of job addiction, determined that it results from an obsessive desire to achieve prestige and success. Furthermore, it has been found that job addiction is utilised as a means of avoiding or escaping emotional stress. According to Brieger et al., (2020), occupational dependence is primarily motivated by job achievement, and it is most visible among professionals who aspire to become perfectionists. Work addiction, like any other drug, has the ability to destroy someone's life. Specialists with a job addiction are more likely to repeat the same behaviours when their addiction is having an effect on them.

Yilmaz et al., (2021) study reveals that workaholism had a detrimental effect on teachers' health. Workaholism has a detrimental impact on organizational performance in addition to behavioral issues like stress and instructor work-family conflicts. The main finding of the study was that stress and work-family conflict have sequential mediation roles in the link between workaholism and wellbeing.

Jayaweera et al., (2021) Extrovert, agreeable, conscientious, neurotic, and openness to experience are the Big Five personality qualities that this study examined in order to determine how they connect to executive absenteeism due to illness in three public traded banks in Sri Lanka. Executives from all managerial levels participated in a survey in a few Sri Lankan state banks using a quantitative research design. The data were analyzed in accordance with the studies to ascertain how each personality characteristic and disease presenteeism develop relationships. Findings demonstrated a relationship between the Big Five personality traits and illness presenteeism amongst executives of three Sri Lankan public banks. It also exhibits qualities like a strong sense of responsibility, workaholism with an internal center of control, and psychological determination.

Balogun and Afolabi (2021) results indicated that work interference with family (WIF) and family interference with work (FIW) are significant good indicators of burnout among banking industry working mothers. Burnout and its correlation to WIF and FIW was also found to be moderated by emotional intelligence and resilience. High emotional intelligence and resiliency among working mothers in particular had fewer positive relationships between WIF and FIW and burnout. This study consequently shows that bank management might enhance working moms' psychological or adaptive capacities to mitigate or prevent the unfavorable effects of work family conflict (WFC) on burnout.

People who are addicted to work are often unwilling to change their habits, even when they are aware of the detrimental effects on their personal lives, mental health, and physical health. When it comes to methods for assessing job addiction, it's essential to note that in a society that values effort is rewarded and putting in additional shifts on a regular basis is generally anticipated, assessing work addiction becomes very tough (Loscalzo & Giannini, 2018). Additionally,

professionals who have a work addiction frequently talk about the importance of such behavior and how it affects their ability to succeed. These professionals seem to be dedicated to their work and to their professional achievement. However, it is essential to note a relationship between the ideas of desire and addiction are unmistakably distinct. Specialists with a high degree of job addiction are more likely to engage in obsessive work in order to avoid dealing with other areas of their lives, such as personal crises and emotional problems Lichtenstein et al., (2019). There are many signs that suggest a professional's job addiction. Toth et al. (2018) note that working long hours in offices or workforces when it is not necessary and skimping on sleep in order to complete tasks at work are indicators of an expert who is dependent on their work. Furthermore, the indication of being preoccupied with job-related achievement is one of the most telling signs of occupational addiction. In particular, the emergence of a severe dread of failure at work is a strong indication of a professional's job addiction. Furthermore, it has been shown that professionals' propensity to be neurotic about their job-related performance suggests a high degree of work addiction. Work addicted professionals, according to Urbán et al., (2019), dissociate themselves from any kind of personal connection at work. The propensity to have a protective attitude toward others regarding work is a huge sign that you're suffering from job addiction. Furthermore, contemporary professionals have a propensity to use work to avoid any kind of connection, leading to job addiction. Furthermore, a significant percentage of contemporary professionals become job addicted simply by working for long periods of time in an effort to deal with sadness, emotions, and guiltiness. The dynamics of the bulk of modern specialists are very complex, and in this situation, the specialists do not want to give them any room to manoeuvre by requiring them to behave like addicts (Atroszko & Griffiths, 2017). These experts make every effort to avoid dealing with crises such as financial difficulties, death, and divorce. In addition, it is known that

professionals with a work addiction free up more time for work, and this predisposition to hunt for more work is a blatant sign of a job addiction. Work addiction is also shown by a tendency to spend more time at work than is necessary. Furthermore, skipping day offs and vacations in order to retain job participation are a major indication of work addiction. Professionals' inability to escape job stress, difficulty sleeping, circumstances in which hobbies are deprioritized due to work, and perpetual overanalyses are all signs of job addiction. The following is an example of how the scale was used in the assessment: With more attention given to the idea of work addiction and the methods for assessing it, it is possible to conclude that the use of the Bergen Work Addiction Scale (BWAS) is more important. The University of Bergen was the first to create the scale, which was subsequently adopted by the whole medical world. The scale is intended to assess a variety of variables, including how often various elements of a professional's life are encountered. The items are mostly assessed using a scale with choices like Never (1), Rarely (2), Sometimes (3), Often (4), and Always (5). (Orosz et al., 2016). Given that it is used to evaluate work addiction, it is critical to get a thorough knowledge of the instrument before using it to the evaluation of work addiction. The instrument can be utilized to measure things like "You think of ways to free up more time to work," "You spend much more time working than originally intended," "You work to relieve feelings of guilt, anxiety, helplessness, and depression," "You have been told by others to cut back on work without listening to them," "You become stressed if you are prohibited from working," "You prioritise work over other things," "You prioritise work over other things," "You prioritise work over other things," "You prioritise work over other things," "On this scale, numerous research have been carried out, and one such study published in the Scandinavian Journal of Psychology found that if a person replies "often" and "always" at least four times in response to the above-mentioned questions, there is a significant chance that the

person has a job addiction. Therefore, it's obvious that the scale has a big role to play in determining whether a person is addicted to work or not. Work Addiction Causes: In today's society, there are a variety of reasons for job addiction, and the fact that there are so many makes the idea more complicated. According to Atroszko et al., (2020), one of the major motivators for professionals to embrace work addiction is the desire to be perceived as smarter and more capable. Furthermore, professionals' perception that their self-worth is linked to their job is a significant factor that affects their decision to engage in work addiction. Simultaneously, the desire for continuous attention, particularly from supervisors, which has the potential to gain them benefits within the organisational environment, is undoubtedly a significant trigger for professionals to develop job addiction.

Further defined by Lichtenstein et al., (2019). A compulsion or an uncontrolled desire to labour continuously is described as a work addiction. Only a few tests exist to detect job addiction, and the health implications have received little attention. The Bergen Workaholic Scale (BWAS), which has been used in Brazil, Hungary, Norway, Italy, Poland, and the United States, assesses seven key components of work addiction. This study's objectives were to verify the BWAS in a Danish population and investigate if stress and a lower quality of life were associated with a high risk of job addiction. With 671 participants, researchers ran an online screening survey between the ages of 16 and 68 using the Danish BWAS. TóthKirály et al., (2020) included the EQ-5D-5L quality of life index and the perceived stress scale (PSS). The mean PSS scores of those with a high risk of job addiction were significantly greater (20.0 points) than those with a low risk of addiction, in addition to having a lower quality of life. Job addiction was linked to both working more hours per week (44.0 vs. 35.6 hours) and having greater professional responsibilities. In a preliminary study, the prevalence of job addiction was calculated to be 6.6%. The factor analysis

demonstrated the high reliability of the BWAS and identified a single component structure. It appears that occupational addiction is connected to health problems like stress and a lower quality of life.

Spagnoli et al., (2018) this study, offered proof of a potential method by which workaholics can affect one of its results, like worry before bed. The findings supported the idea that the association between workaholics and pre sleep anxiety may be mediated by a detrimental influence on the job. In particular, women are less likely than disengaged workaholic women to experience negative effects from their jobs, and this trend would not be important for males. Evidence validated the potential buffering effect that engagement may have on workaholic women and supported expectations.

Huyghebaert et al., (2021) the study's goal was to better comprehend how employees responded to the Dutch Work Addiction Scale from a psychometric perspective and the Utrecht Work Engagement Scale (UWES; Studies 1 and 3). (DUWAS; Studies 2 and 3). This study explores the connections between the functioning of employees and the elements of work engagement and workaholism. To accomplish these goals, 3 studies (N = 304, N = 273, N = 241) were carried out. A bifactor-ESEM (exploratory structural equation modeling) it has been demonstrated that the ratings of job engagement and workaholism are preferable to alternative representations, according to the findings of these three investigations. Employees' ratings of their level of work involvement specifically showed a global employee engagement element alongside distinct vigor, devotion, and integration components. In a similar vein, employee assessments of workaholism indicated a general workaholism element as well as concurrently distinct aspects of excessive and obsessive working. The results illuminate these classifications' validity with respect to criterion by establishing these workaholism and engagement components' direct links with markers of work

fulfillment, work quality, friction between job and family, and sleep issues. Results from the 3 studies specifically showed that the particular vigor aspect, global work engagement, and global workaholism all play critical roles in predicting outcomes.

Loscalzo (2021), the study emphasized the significance of examining the negative effects that distance learning (DL) may have had on employees, particularly those whose jobs require face-to-face contacts, like teaching. This study notably demonstrated the need to reduce workaholism in order to enhance instructors' well-being during DL. In fact, work engagement has been shown to be a contributing cause against the negative effects of DL, though it has a lower predictive value than workaholism. Moreover, considering the results of this investigation, it would be beneficial for school administrators to put training into place to assist teachers in addressing the educational and technical challenges presented by the DL and to prepare them to deliver high-quality DL. Additionally, they ought to give them the psychological assistance they would need to deal with the stress brought on by the changes in their jobs, which had an impact on how they balanced work and life. This study also highlighted the fact that women were more negatively impacted by DL than South Italian teachers were, both in terms of their lives and their jobs. Therefore, it would be fascinating to examine similar demographic variations among various job kinds in more detail. Finally, elementary school teachers and curriculum teachers believe that DL is more effective. Hence, instructors at elementary and secondary schools as well as those who work with special needs students should have priority in the training focused at enhancing DL quality. Instead, since kindergarten teachers claimed that DL had less of a negative influence on their lives, it is mostly teachers who work in elementary and secondary schools who need to be reminded of the importance of establishing a balance between both the time and effort spent on work and family.

Abun D. (2021) Concludes in this study that employees at Divine Word Colleges are thought to have high levels of self-efficacy. Self-efficacy is correlated with task and contextual success in the workplace, but not with unproductive behavior. Only good activities are impacted by self-efficacy; bad behaviors are unaffected. The study goes on to say that performance cannot be influenced just by self-efficacy in the absence of a positive workplace culture. Self-efficacy and job performance can be impacted by the workplace. The improvement of the workplace and the growth of self-efficacy are necessary to address issues with work performance.

It's also worth noting that the prospect of losing money or losing one's financial stability is a major contributor to job addiction. However, resistance to change exerts a powerful influence element in the development of job addiction. Professionals who are employed in the modern labour market include, due to a lack of flexibility, resent having their personal and professional lives changed. In this scenario, they choose to work hard to prevent any alterations to both their personal and professional lives. Most significantly, the fear of experiencing humiliation as a result of poor performance in the workplace is a significant element that motivates professionals to work constantly and leads to work addiction. The dread of loneliness and isolation, according to the respected view of Kun et al., (2020), has profound consequences on professionals. Modern professionals have a proclivity to acquire a high degree of job addiction in order to escape loneliness and the dread of being alone. Workplace Addiction Risk: It's crucial to identify the professionals who are at danger of developing a job addiction before learning about the risk factors. When it comes to the individuals who are more likely to develop a occupational addiction, it's essential to note that specialists who have formerly struggled with addiction are more inclined to become addicted to their jobs. Those who have formerly struggled with alcohol addiction, narcotics, nicotine, or the likelihood of developing an occupational addiction is higher for other

addictive drugs. Furthermore, professionals who have trouble shutting off from work and who try to become perfectionists are most susceptible to becoming addicted to their jobs, Balducci et al., (2021). Furthermore, professionals who want to be referred to as "Workaholics" in the workplace and professionals who have a propensity to do everything in an all-or-nothing capacity are relatively more vulnerable to work addiction. Aside from that, professionals who come from a family of workaholics are more susceptible to become addicted to their jobs. There are many dangers linked with work addiction, which raises concerns about professionals being addicted to their jobs. Professionals who are hooked to their jobs have a high risk of feeling isolated from their support system, whether it is their family or acquaintance. As a consequence, such professions may face significant mental difficulties. Furthermore, job addiction is a major source of worry for professionals since it leads to health issues such as different physiological issues, emotional stress, overweight, and high blood pressure Atroszko et al., (2017). Work addiction has a great deal of potential to keep specialists up at night. Furthermore, job addiction has the potential to place professionals in a situation someplace they would experience anxiety and panic episodes whenever they don't work. As a consequence of being work addicted, you may lose your job if you are unable to connect to your colleagues and supervisor. With careful examination of statistical analysis, it is essential to note that the study conducted here aided in obtaining a better picture of the impacts of job addiction on professionals during COVID 19. The main objective of the statistical analysis was to ascertain how work addiction affected the labour and employment market overall during COVID 19, which had unfavourable consequences on both. It's fascinating to consider the consequences of occupational addiction at the time of COVID 19 since the job markets were very fragile; there were huge job losses, colossal halts in economic transactions, and individuals were terrified of losing their jobs and were extremely job insecure. Most significantly, during COVID

19, professionals showed a higher awareness of being work addicted since they felt that their excellent performance might save their employment in a professional way. In addition, the research enlisted the participation of 110 experts. The statistical analysis was done using Microsoft Forms, and the questions were about Gender, Age, and Educational Level, as well as marital status, tenure of the professionals in the business, and their position in the company. Mohan and Lone (2021) performed research that showed that the context of job addiction was the most important factor. During the COVID-19, the research investigates the notion of job addiction and its consequences on professionals. The research provides a thorough examination of the methods for detecting work addiction as well as information on the scale that is most often used to evaluate work addiction. More significantly, the research examines the origins and risk factors for job addiction. The paper also includes a detailed explanation of the statistical analysis and the research findings. Most significantly, the paper also includes a thorough explanation of the research results. In addition, the paper addresses the research's ramifications as well as the study's future directions. Finally, the study provides a comprehensive evaluation of the research's strengths and weaknesses.

2.1.3 LITERATURE REVIEW WELL-BEING

Study by Maksoud and Saad (2022) found that people who place an excessive amount of emphasis on their jobs in favor of certain areas of their lives are showing signs of a life imbalance, which could have detrimental effects on their social and physical well-being. Employees will benefit when the value of health is emphasized for their well-being. Employee involvement in the company as a whole is greatly influenced by their general health and wellbeing. In general, how we feel about our jobs affects how we feel about our personal life, and vice versa.

When we are struggling at home, it will undoubtedly affect our capacity to contribute effectively at work. Offering a variety of expressive perks to enhance employees' welfare can have both practical and intangible advantages for firms.

The study by Balducci et al., (2022) by showing that workaholism may be a possible forerunner of aggressive behavior at work, this study adds to the body of knowledge. The main conclusion from the findings is that employers and workers have an additional reason to plan and implement programs aimed at preventing and minimizing workaholism in the workforce because it may not only have a negative impact on workaholics' health and well-being but may also encourage the implementation of counterproductive work behavior (CWB) in the form of intimidation, with negative effects on employees and the organization as a whole.

These findings from the study by Feilds et al. (2022) coincide with literature establishing that older age is linked to lower stress, negative affect, and symptoms of depression as well as higher positive affect and enhanced resilience in the face of challenging life situations, which suggests that this trend may also apply to resilience in the face of a protracted real-world separation. Notwithstanding initial concerns surrounding the COVID-19 pandemic's psychological effects on elderly people.

The study by Mohan and Lone (2022) effectively demonstrated how factors including gender, education, marital status, age, and housing affect the psychological well-being of unemployed people in Delhi. According to the study, men in their middle years who are unemployed because to the COVID-19 pandemic in Delhi and who live in leased homes or with relatives and have just completed their secondary education have the highest psychological suffering. In terms of how they typically handle different events in their lives and how they see themselves, this provides

insight into people's personalities. This shows a discrepancy between how people deal with stress when there isn't a pandemic as well as how they deal with challenging circumstances when there is pandemic.

Van et al., (2021) found out that participants tended to have high ethical standards and placed a high importance on the chance to learn and apply their talents. These values, when realized, promote wellbeing; nevertheless, when unfulfilled, they can cause grief and frustration. The degree of organizational responsiveness, self-awareness, a readiness to compromise, and fear of marginalization were the four most significant personal characteristics related with job satisfaction and long-term employment. A manager's facilitative leadership style that gave employees freedom and discretion was crucial in the given context. Socially, participants valued having opponents to spar with but frequently disliked small conversation, which could cause social isolation and solitude.

Van and De Beer (2021) Organizations can personalize their interventions for distinct groups of employees by identifying work-related well-being profiles, maximize the quality of these initiatives. Even though burnout and engagement are at different ends of a spectrum, the profiles discovered in this study reveal that people may have scores that are negative or even positive for all of the indicators of burnout and involvement. The results also demonstrate the significance of these combinations for employee efficient and cognitive outcomes, as these are crucial for productive and healthy work.

Mohan and Lone (2021), emphasized on individuals well-being combined with specialized wellness was found to produce harmony in each area of life. In order to improve their it aids individuals in developing a set of meta-values by fostering a sense of purpose, self-determination,

significance, expertise, going, meaning, and happiness. It is necessary to deal with difficult situations in both one's professional and personal life. An effective workforce reflects better presentation by employees helps management better accomplish goals to create a strong community. Beyond having psychologically healthy and content people, enhancing well-being in the workplace accelerates performance.

Study by Y Li et al., (2020), states there haven't been any research on whether specific kinds of personality variations have an impact on various behavioral processes. The job engagement attitudes between work demands and occupational well-being were examined using a dual-path moderated mediation model in this study. As well as the study examines the influence of work addiction on this indirect path, based on information from 356 Chinese healthcare specialists. Although job intensification was found to be inversely connected with workplace happiness, non-workaholics were more likely to experience this effect. Workaholics were more likely than non-workaholics to indulge in job crafting activity in terms of pursuing resources and formulating toward strengths. Hence, were less likely to experience lower well-being.

Priyadarshini et al., (2020) study finds informational regarding the negative effects social media addiction has on employees' productivity and well-being at work. Most participants indicated a significant increase in internet use in the last three to five years compared to their early days of employment because of workplace social media use. According to the motifs that relates to the study, it is clear that employees who use social media excessively both at home and at work find it difficult to live up to their employers' expectations for efficiency. Dependence to social media platforms is making health problems and lifestyle disorders more common among the employees. The study's subjects claim that social media addiction damages both their interpersonal and professional relationships and exacerbates feelings of insecurity and low self-esteem.

Foster et al., (2019) specific connections between workplace stress, wellbeing, resilience, and practice have been found in the study, supporting the initial steps. More research needs to be done into reducing or eliminating workplace pressures. The research uncovered particular subgroups of MHNs (Mental Health Nurses) where there seems to be a greater need and opportunity for gain. Therefore, not only do frontline MHNs but also managers at all levels can use the outcomes of the research. It is crucial that managers of mental health organizations make sure MHNs experience psychological well-being, feel connected to their workplace, and, crucial to a caring profession, exhibit caring behaviors. It is equally crucial for MHNs to seize opportunities to improve their wellbeing and fortify their resilience both at work and elsewhere.

Sandberg et al., (2016) set out to investigate the work habits of construction site managers as well as the implications for their well-being. We argue that muddle-through put high demands on these managers' capacities and options for coping with and balancing their work environments, based on the work-life stories of 21 site managers that were analyzed using narrative analysis. Several aspects of workaholism were found as driving forces in all of the reports, and they frequently resulted in negative well-being symptoms. The site managers were enthusiastic about their work, but they despised the organizational and bureaucratic barriers that hampered rather than aided their efforts. This led to tiredness and tension, with little energy left over for family and life outside of work.

This study by Malviya (2016) is a modest attempt to investigate a detailed study of the harmful effects of workaholism on employee wellbeing. Thorough analysis of the existing literature on the subject in order to provide a case for weaning individuals away from workaholism. Workaholism has a detrimental effect on staff morale in any organization. Employees tend to work longer hours at work and at home, putting their comfort and well-being at risk. Workaholics suffer from not

only stress and burnout, but also emotional void as a result of a work-life imbalance, which results in a lack of possibilities for socialization and a worn-out social support system.

The goal of Sahar and Waqar's (2014) study was to determine whether workaholism and employees' psychological well-being in the banking and telecom sectors are related. 276 employees from the private and public sectors made up the sample. Workaholism and psychological well-being were found to have a strong positive association, according to the findings. When personnel in banks were compared to those in the telecom sector, workaholism was shown to be higher in the former, with no gender differences.

Salanova et al., (2014) set out to create a paradigm of employee well-being, as well as its psychosocial antecedents and implications. A pool of seven hundred eighty-six full-time personnel from various industries was used to get the results. This survey shows four forms of employee happiness: 9-to-5 or calm, work engaged or excited, workaholic or uptight, and burned-out or weary. The study also contributes to the body of knowledge on work investment by demonstrating strong correlations between several employee well-being categories and heavy and soft work investors.

Employees with workaholism might feel content in the evening and strong and rested when you go to bed., according to Bakker et al., (2013) if they regularly spend time engaging in the "right" non-work activities. Workaholics benefit from sports and exercise as important rehabilitation activities. They discovered that social activities satisfy the innate psychological need for belonging, making them perfect for evening entertainment. Daily social activities after work, however, had no correlation with vigor or recovery, presumably because they serve more psychological needs than vigor or recuperation. One explanation for why they did not discover

like other studies, ignored the substance of the social contact, suggesting a stronger beneficial association between social activities and wellbeing for people with workaholism. Because people can discuss job-related topics with their friends even when they are not at work, it's likely that workaholics lessened the benefits of social activities by using the time spent engaging in social activities to dwell on and discuss their work with friends. It's also likely that people who are dependent on their jobs view social activities as unwanted breaks from their work. As a result, individuals may harbor some resentment toward social activities, which weakens the activities' potentially good benefits.

Shimazu et al., (2011) compared responses of 994 Japanese dual-earner couples, workaholic parents are more likely to face difficulty among the demands of work, family life and psychological health, according to research. Further study also found that workaholic women's husbands are more likely to have family-work conflict, whereas workaholic men's wives are not. These findings add to and expand on prior workaholism research as well as the recently developed spillover-crossover model.

Taris et al., (2008) conducted research on the link amongst workaholism and health. The researcher found that a significant predictor of health and wellbeing was the inability to separate from the cognitive component of the workaholic syndrome. Based on information from 477 Dutch independent employees. Self-employed people who struggled to put their work aside reported higher degrees of weariness and physical problems along with reduced levels of efficacy. The psychological element of the workaholism syndrome's significant importance is highlighted by the fact that, even after accounting for employment demands, it has a considerable impact on the study of the three well-being indicators. Therefore, the effects of high job demands are unaffected by the

psychological effects of workaholism on well-being. A term that is thought to be, high levels of difficulty in separating from work.

2.1.4 LITERATURE REVIEW WORK ENVIRONMENT

The COVID-19 pandemic unquestionably caused remarkable challenges on the mental health and wellbeing of emergency medical personnel, based on the study of Blanchard et al. (2022). As per the results of the study, there is a clear link between poor mental health and a perceived toxic work environment. This showed possible chances for intervention and was particularly evident when the perceived organizational work environment was unfavorable. In the end, as we move toward the future, a culture shift that encourages health care worker well-being is essential.

Results of Costa et al., (2022) revealed that, regardless of job demands, the adoption of dysfunctional coping mechanisms or a reduction in life quality were both associated with individual and workplace factors. If these elements are underappreciated, it could have negative effects on the mental health of healthcare employees, which could lead to work impairment and job discontent. This situation may affect the standard of care given by healthcare professionals and increase the risk of errors and possible harm. More seasoned nurses and doctors were less likely to use socially supported coping mechanisms, stressing the need for organizational interventions in the social dimension to encourage peer sharing and interaction.

Peyton et al., (2021) discovered during their research that supports the EWPA model's validity and applicability. Particularly in helping to better understand how an employee's goals to perform well for their organization relate to their work environment and passion. Additionally, the degree of harmonious or obsessive passion will correlate with the goal to do good work. Notably, a positive

work atmosphere will strongly and positively link with the degrees of harmonized passion among employees. Managers should also be aware that employees who work hard and put up a lot of discretionary effort may not be doing so out of a balanced enthusiasm; rather, they may be experiencing an obsessive passion, which is not long-lasting. Businesses with employees who exhibit high degrees of obsessive passion should exercise care, develop programs, and think about how their cultures could promote greater employee wellbeing.

Firoz et al., (2021) conducted a study wherein 1024 responses received, and it included banking sector employees. The research results demonstrate that employees experience loneliness at work, where they spend the majority of their time. According to the findings, employees who have varied demographic features, such as age, married or unmarried, and how many co-workers you have, may experience loneliness in different ways. However, the phenomena of workplace loneliness are not explained by gender, organizational structure, position, or tenure. The agonizing experience of office loneliness results from feeling alone in the company despite sharing space with so many other colleagues. The current study contributes to the paucity of literature in this field by highlighting the importance of sociodemographic characteristics in explaining loneliness in the Indian workplace. It is crucial to adopt preventative steps in order to stop workplace loneliness in India from becoming a public health problem due to its rapid development.

Deborah et al., (2021) According to the study's findings, organizational culture in universities in Port Harcourt, Nigeria, significantly influences both employee satisfaction and job retention. Job retention depends greatly on employee satisfaction. Employees who receive coaching and mentoring are less anxious and take less time to become proficient in their job responsibilities. As a result, they are happy with their jobs and want to stick with the company. Similar to this, a solid

pay plan that includes salary bonuses and other incentives for employees acts as a serious impetus for achieving employee happiness. Public universities should establish strategies for employee happiness to prevent burnout, which is detrimental to any organization, and instead create a positive corporate culture that encourages job retention. Similar to this, a sound career plan free of politics, ethnicity, or bias is required to create a happy staff in order for universities in Port Harcourt to improve on service delivery to students.

Oluwafemi and Olusola (2021), In a study, financial institution layoff employees' perceptions of their level of depression were examined in relation to their work-life crisis, coping mechanisms, and self-esteem. The study concluded that those impacted by the psychological effects of work-life conflicts should carefully manage their perceived depression. It is advised that the government and non-governmental organizations (NGOs) address the problem brought on by layoffs by increasing employment possibilities and by implementing effective control measures to stop the threat of layoffs across financial institutions. The creation of counseling facilities for laid-off employees who believe themselves to be depressed will also aid in minimizing the emotional effects of depression and work-life crises on laid-off employees. The evidence currently available is insufficient to pinpoint the precise elements of the coping mechanisms that were responsible for each distinct effect, despite the fact that coping mechanisms are effective in reducing the depressive symptoms that come along with work-life crises in people who have been laid off.

In their study project, Shah et al., (2021) examined banking services, which has become one of India's most competitive industries. Sedentary behaviour and mental stress have been linked to poor health in much research. Bank employees have sedentary jobs that are also associated with significant levels of mental stress. Cross-sectional research was performed among 360 government

and 240 private bank employees in Ahmedabad. A pre-designed and pre-tested questionnaire was used to gather data. Gastrointestinal and Musculoskeletal problems were found to be slightly more prevalent in private bank employees (55.42 percent and 32.88 percent) than in government bank employees (50.28 percent and 30.28 percent), ocular problems were slightly more prevalent in government bank employees (50.28 percent and 30.28 percent, respectively). Hypertension and diabetes were found to be prevalent in 25.67 percent and 13.17 percent of the population, respectively. Although 29.17 percent of employees were partly pleased with their jobs and 63.67 percent were completely satisfied, more than half (51.17 percent) of employees had reported to have felt stressed at work. As a result, the research showed that bank employees had a high incidence of different health issues. It is necessary to increase the use of specific interventional measures among this susceptible population.

One of the first studies to look at the actual experiences of European banking professionals with Brexit is Huang's (2021). Despite not casting a ballot in the 2016 EU referendum, these eight participants had to deal with the fallout from Brexit just like the rest of the UK. Find out what interpretations they ascribed to this lived experience and how they made sense of a persistent political unrest. Three main themes—"Making sense of Brexit," "Transformation of Identity," and "Disconnection," along with eleven subthemes—emerged from the data as a result of these participants' efforts to make sense of their Brexit experiences. These themes reflect how these participants felt about the incomprehensibility of Brexit and the uncertainty and lack of clarity it brought with it, as well as their thoughts and mechanisms of disassociation. While some of the study's findings corroborate arguments made in earlier research, others offer fresh perspectives on how to comprehend the Brexit-related lived experiences of this understudied group of people. The results of this study have also been considered for their potential application in counseling

psychology, influencing viewpoints on Brexit mental health by aiding in the conceptualization of these participants' actual lived experiences in the face of an unprecedented event. Based on the results, potential areas for further study have also been investigated. The results of this study, which used an Interpretative Phenomenological Analysis (IPA) approach and was conducted within the context of Counselling Psychology, may contribute to the growing body of research on Brexit.

Govea et al., (2020) In the study, 40 employees of a service company in the city of Guayaquil, Ecuador, participated in a quantitative, non-experimental study to determine the positive association between organizational environment and work satisfaction. Using frequency tables of the actual and anticipated data, the results were processed with a 90% level of confidence and four degrees of freedom. The findings showed that while 32 people were met in terms of change and job satisfaction, 24 people were satisfied with the organizational atmosphere of the company.

Nwachukwu et al., (2019) the workplace has a major impact on how motivated individuals are to carry out their given tasks. In today's competitive organizational environments, the capacity to attract, retain, and motivate high-performance employees is becoming increasingly crucial. The study's findings showed that the productivity is significantly influenced by the working environment. In conclusion, it is the responsibility of the business to create a welcoming workplace that will encourage people to work comfortably and complete their tasks.

Dunstan et al., (2018), found that it is possible to prevent long-term job disability and promote social inclusion through supported employment and work integration. Working actively helps people recover from severe mental illness and maintain healthy levels of mental wellbeing. Even in the context of persistent symptoms and in the absence of complete economic inclusion, work

integration is possible. Mental health was predicted by hope and social inclusion, with social inclusion serving as a partial mediator between the other two categories.

Furthermore, TóthKirály et al., (2020) suggested a better sense of identifying employees' professional motivation qualities whereas taking into consideration self-determination theory's dual global and particular character of work motivation (SDT). To demonstrate that these latent profiles are constructively valid, we examined whether they varied in burnout, job satisfaction, and work addiction using the circumplex model of employee well-being. Driven, conflicted, self-determined, poorly motivated, and internally motivated were found to be five different profiles defined by varying degrees of global and particular types of motivation in a sample of 955 employees. As expected by theory, universal traits associated with higher levels of self-determination and additional independent sources of motivation were connected to decreased burnout rates and work satisfaction. On the basis of these results, it was found that work addiction was highest in the Focused profile and lowest in the Self-Determined profile, indicating that independent sources of inspiration are not always able to counteract the negative impacts of controlled forms of motivation. Asserting that in determining work engagement profiles, both the general levels of self-determination and the particular characteristics of job motivations are important.

Mazzeti et al., (2014), identified early evidence of a favourable relationship between workaholism and an overwork climate, defined as excessive and obsessive work, particularly among employees with high levels of success drive, perfection, conscientiousness, and self-efficacy. Using data from 333 Dutch employees, the researchers found that the interaction impact of overwork atmosphere and individual traits in developing workaholism was substantially substantiated. Achievement drive and perfectionism were found to be strongly linked to workaholism among these personality

qualities. The main impacts of achievement motivation and self-efficacy on workaholism, on the other hand, were not significant, despite the fact that the interplay of these two qualities and the overwork climate greatly facilitated workaholism.

2.1.5 LITERATURE REVIEW ANXIETY

The current study by Lozano et al. (2022) provided a detailed analysis of a thorough survey of symptoms and behaviours related to anxiety, uneasiness, and dread in people with Fragile X Syndrome (FXS), a population with a very high prevalence of anxiety disorders. Both quantitative and qualitative data gathered from caregivers and self-advocates show that people with FXS suffer both the traditional symptoms of anxiety disorders as described by the DSM as well as a number of extra symptoms or reactions that seem to be caused by anxious moods. The evidence presented here demonstrates that even though most patients with FXS are unable to adequately describe their internal body or emotional states to support self-reported evaluation procedures, caregivers may reliably identify behaviours that are relevant for anxiety.

According to a study by Yıldırım et al., (2022), healthcare personnel' perceptions of coronavirus risk cause them to fear the virus, which increases parental anxiety over it. The mental health that has a favourable impact on parental coronavirus anxiety is a key factor in how the observed effects are tempered. The results point to the possibility that human responses to risk in the setting of a pandemic may be explained by how fear and parental anxiety caused by a coronavirus are perceived as risks, as well as by the protective effect that mental health has on these connections.

Serrano et al., (2021) results from a correlation analysis show both beneficial and harmful relationships with the factors evaluated in their study. As a result of their discovery that two variables can predict anxiety and depression, they draw the conclusion that job addiction traits

can., sensations induced by work and excessive work, explain 18.3 percent of depression and 20.3 percent of anxiety. They conclude that work-related feelings, as well as extreme work, predict anxiety and depression, and so the research contributes to a better understanding of work addiction, as well as maintaining a good lifestyle and preventing the absence of days.

Workaholism, according to a study by Yaghoutimoghaddam et al., (2021), can be joyful, but also aggravating and difficult, with both positive and bad consequences. According to the findings, workaholism and its components have a substantial and somewhat strong relationship with anxiety and depression (p0/05). Workaholism has been linked to depression and anxiety in the past (p0/05). Work, according to the study, might cause ailments if employees become addicted to it. Businesses need to be more aware of the reality that working hard at work does not necessarily benefit both employees and employers. As a result, managers must examine how to avoid these potentially detrimental implications to their employees' health.

Buhrmann (2019) concludes working compulsively in the post-modern world, despite a lack of stability and relationships, can be seen as an attempt to cover our uneasiness by insulating ourselves from vulnerability and gaining a sense of identity. Addiction to work only serves to exacerbate these worries by causing greater dislocation. Although the postmodern individual's incompatibility with the demands of a free-market society is frequent, the prestige of labor and it is challenging for people to take time away from their occupations and evaluate their wellbeing because of the commercial factors that keep it in place. Ironically, because massive work commitments are the price of entrance to the top of the capitalist structure, the free market's leaders are the ones who are most dominated by it.

According to Ganesh and Deivanai (2014), the incidence of hypertension is significant among bank employees, which may contribute to the development of anxious behaviours. There is a need to increase the adoption of specific lifestyle interventions, such as decreasing salt consumption and encouraging physical exercise, among this susceptible population. Furthermore, Kumar and Sundaram (2014) discovered that most bank employees reported experiencing significant or extremely high levels of stress., which is concerning. Many studies from various areas of the world have shown that stress and its consequences are a major health concern among bank employees. According to previous research, 60% of bank employees had significant or extremely high stress levels, which is somewhat lower than our findings (Kumar & Sundaram, 2014). Differences in results across research may be due to differences in methodology, assessment tool, regions chosen, and work environment, as well as terminology utilised in the study. There are many factors that contribute to stress among bank employees. Though, this research showed no link between stress and demographic variables, job type, smoking, or any kind of alcohol usage. However, it was shown that respondents felt reasonably often and quite frequently when asked questions like "managing personal issues" and "things were going your way." The individuals are themselves responsible for 80% of stress. An incurable sickness or severe pain may account for 20% of stress, natural catastrophes, family deaths, car accidents, rape, libido deprivation, and other problems over which no person has direct control (Silva & Navarro, 2012). Throughout the globe, the banking industry has experienced extensive reorganisation and has emerged as a leader in the adoption of new technology and organisational advancements. Workplace computerization, along with different types of work organisation, has resulted in developments that have an impact on employees' health. Working for long hours and dealing with various situations, interpersonal

relationships inside the office, and individuals with or without families, as well as personal issues, all contribute to stress.

Yasmin et al., (2021) According to research, the COVID-19 pandemic significantly affects psychological discomfort in Bangladesh's banking industry personnel. The results of the analysis showed that various study variables had increased the levels of stress, anxiety, and depression symptoms among bank employees, who had utilized public transit, smoked during the pandemic, and woken from sleep to find beaten-up youngsters and infected colleagues. The study revealed the significance of being well-informed about the outbreak. Bank personnel can improve psychological conditions to withstand this COVID-19 epidemic by engaging in physical activity and consuming nourishing meals to boost immunity.

Shah (2021) According to the study, both aerobic exercise and leisure activities are equally helpful at lowering stress levels, enhancing sleep quality, enhancing work-related quality of life, and enhancing neck range of motion. While workouts are better at reducing anxiety than recreational activities. Since the activity was being watched online, only type, frequency, and time could be tracked for both groups' intensity. The study's future objectives include the analysis of long-term effects and the application of other psychological outcome metrics.

According to Denning et al., (2021), the COVID-19 epidemic has put enormous strain on healthcare systems and employees all across the globe. Working circumstances, psychological well-being, and the sense of safety may all be affected by such demands. Despite this, no research has been done on the link between safety attitudes and psychological consequences. Furthermore, just a few researchers have looked at the link between personal traits and psychological consequences during COVID-19. The project conducted a cross-sectional study to evaluate the

safety culture, healthcare professionals from Singapore, Poland, and the United Kingdom were invited to take part in a self-administered questionnaire that included the Hospital Anxiety and Depression Scale (HADS), the Oldenburg Burnout Inventory (OLBI), and the Safety Attitudes Questionnaire (SAQ). The results of the research revealed that healthcare professionals face a substantial burden of burnout, anxiety, and despair. SARS-CoV-2 tests, safety attitudes, gender, work position, redeployment, and psychological state all had a significant link. The significance of these findings underlines the need for proactive SARS-CoV-2 testing of healthcare professionals and support services for populations at risk.

2.2 IDENTIFICATION OF GAP IN LITERATURE:

Several efforts have been made to characterise job addiction Griffiths et al., (2018). The words "workaholism" and "work addiction" have been used simultaneously in numerous research. These constructions, however, are not the same. "Workaholism" is a more general word that implies everything linked to excessive engagement in work, and this phrase frequently includes many good elements of overwork (benefits, rewards, and respect). In an addiction perspective, however, the phrase "work addiction" highlights the maladaptive behaviours and negative effects of overwork. Even yet, some early writers used the word "workaholism," emphasising the problem's addiction-related characteristics. For example, Oates (1971) coined the word "workaholism," defining a workaholic as "a person whose desire for work has grown so overwhelming that it causes obvious disruption or interference with his physical health, personal satisfaction, interpersonal connections, and smooth social functioning" (p. 4). Additional practical explanations of job addiction have placed a strong emphasis on the negative effects of excessive labour. Work addiction, according to Griffiths et al., (2018), is marked by "excessive engagement with work demonstrated by disregard in other aspects of life" (p. 71). Individuals defined by work addiction are "those who

spend a significant lot of time in job activities at the cost of family and other outside responsibilities, who constantly think about work when they are not at work,” according to the definition by Rumpf et al., (2018). Bowen et al., (2018) have highlighted conflicts with other aspects of life as a negative effect of job addiction. They highlighted the problem's compulsive tendencies and lack of control in controlling work-related activities. They used the term "work addiction" to describe the addiction-specific patterns of excessive labour. Work addiction, he explained, is “an obsessive-compulsive disease shown by self-imposed expectations, an inability to control work habits, and an overabundance in work to the exclusion of most other life activities.” (Page 7) Sussman (2012) included the loss of control over work as an essential aspect in his definition, as well as the significance of the negative effects of work addiction.

Work addiction was previously classified as an addictive behavior. According to the addiction components model, there are essential elements to job addiction: Salience (the most important activity in a person's life is work, which shapes their feelings, thoughts, and behaviours); (ii) mood modulation (working through difficult circumstances, low mood states, and other challenges is a coping method); and (iii) tolerance (the amount of work necessary has increased) Griffiths and others (2012). The intense and sincere desire to work is the key component of workaholism. A workaholic is someone who "is heavily engaged in work, feels forced or pushed to work due of inner demands, and has a low level of pleasure of work" (p.162). The pleasure of work is also reflected in several other definitions, whereas the negative elements of overwork are narrowly defined. Individuals are considered workaholics by Lichtenstein et al., (2019) if they “enjoy the act of working, are preoccupied with working, and spend lengthy hours and personal time to work” (p.114). Based on Griffiths et al., (2018) conceptual distinction between "workaholism" and "work addiction," Lichtenstein et al., (2019) was observed to interpret the models of "workaholism"

instead of "work addiction," since they do not draw attention to the negative effects of overworking. This is also valid of the description, which merely emphasizes the extensive time and dedication required for work as well as the power and control over the labour of others. The amount of study on behavioural addictions has grown dramatically during the last several decades. While there has been considerable agreement on the conceptual validity of certain behavioural addictions e.g., gaming disorder, which has been increasingly prevalent recently, Rumpf et al., (2018), other kinds of behavioural addictions need further empirical confirmation before being recognised Petry et al., (2018). Despite the fact that "work addiction" is not recognised by the DSM-5 (American Psychiatric Association, 2013) or the ICD-11 (World Health Organization, 2018), it is often mentioned and referenced in the behavioural addiction literature. In 1968, Oates authored the initial scholarly piece on "workaholism," and his widely referenced book (Oates, 1971) laid the groundwork for subsequent work addiction studies. Between 1968 and 2000, the psychology literature intermittently published empirical and theoretical studies on job addiction. However, scientific interest in job addiction has risen dramatically since the turn of the century. Given that people spend an average of 8 hours a day at work, which can lead to a variety of gratifications (e.g., income, health insurance, bonuses, peer recognition, and praises), such reinforcement can occasionally result in overwork. Although job addiction seems to be a good habit at first glance Griffiths et al., (2018), it has a number of negative repercussions for the life and environment of a person. These undesirable (psychological, physical, and social) outcomes emphasise the need for further work addiction study (Quinones & Griffiths, 2015).

2.3 VARIABLES FROM LITERATURE REVIEW:

On a country-by-country basis, reliable data on the prevalence of people addicted to labour are virtually non-existent. Norway and Hungary are the only two nations that have conducted

nationally representative research. Using the Bergen Work Addiction Scale (BWAS), Norwegian research found that about 7.3 percent–8.3 percent of Norwegians were hooked to work (Andreassen & Pallesen, 2016). Using the Job Addiction Risk Test, Demetrovics et al., (2017) discovered that 8.2% of people aged 18 to 64 who work at least 40 hours per week are at risk for developing a job addiction. Sussman (2012) conducted a thorough literature analysis utilising US data and estimated the incidence of job addiction among Americans to be 10%. Some estimates put the figure between 15% and 25% among employed people, but some of these figures seem to be based on excessive and devoted labour rather than true addicted behaviour Atroszko et al., (2017). Other researchers say that job addiction is common among professionals (such as attorneys, doctors, and scientists) Griffiths et al., (2018). Such people may work long hours, put in a lot of effort at work, seldom delegate, and aren't necessarily more effective. Additionally, the relevant metrics have not been clinically established, and given the ad hoc cut-off scores, different screening tools, and study-specific samples, researchers should exercise caution when employing epidemiological data (and also holds true for most behavioural addictions). In contrast to what described as "enthusiastic workaholism," where the behavior is connected with few problems, those who are honestly accustomed to work have seemed to have an addictive drive to seek support and accomplishment, which can impair judgement, poor health, breakdowns, and burnout. Kardefelt et al., (2017) mentioned work addiction in a recent discussion about the increasing worry over pathologizing ordinary activities, which might have given some readers the impression that the concept of job addiction is new or unresearched (Atroszko & Griffiths, 2017). There's also been talk about the dangers of an excess of unproven addiction diseases. For example, Billieux et al., (2015) presented a hypothetical scenario of someone who they believe meets the requirements of the notion of "research addiction" (p. 142), which they created for the sake of discussion.

However, the theoretical case of "research addiction" already fits within the persistently addictive over commitment to study the exclusion of other aspects of life, and if it causes significant harm, it is a serious problem (as the signs of conflict suggest), then the person in question could be considered addicted to work. In the early twentieth century, the first clinical descriptions approaching job addiction emerged. With the landmark writings of Oates (1971), over 50 years ago, the official definition of job addiction was first established in the psychology literature. Over the last 30 years, there has been a significant rise in the number of articles published on the condition (Sussman, 2012). As a result, job addiction is not a newly recognised issue. However, it is a subject that has sparked considerable debate and consternation since its inception, with "workaholism" being viewed as a good phenomenon and pushed as a source of enthusiasm and high involvement. After the recently highlighted postulates for conceptualizing a behavioral addiction, there was decades of misunderstanding before the construct was gradually clarified, based on research in both eastern and western cultures (Kardefelt et al., 2017). First, a person-centred approach to research has been used for a fair amount of time. It is based on many conceptual approaches and investigates the phenomenology of job addiction to determine the cause and progression of the condition (Oates, 1971). Second, psychometric characteristics of assessment tools have been created and tested (Quinones & Griffiths, 2015). Given this, as well as the varied outcomes of work addiction research, it seems prudent to discuss the development of work addiction (including study addiction). Some job addicts' decreased conscientiousness and agreeableness could result from the addiction itself specifically, the toll that work stress is taking on one's capacity to stay organized, and a rise in irritability toward others are possible causes. There hasn't yet been any in-depth research that has followed work addicts for an extended period of time to detect any potential personality changes, except from case studies. Contrary to what

would be implied by a study of the relevant literature, work addiction appears to be less dependent on these personality features, and various personality patterns may be found among individuals addicted to work. There seems to be a lot of confusion over the idea of "addictive personality" and if it actually exists, despite the long-established linkages between personality, personality disorders, and addictions, (Griffiths, 2017).

Quinones and Griffiths (2015) have emphasized time and time again that addictions are always the consequence of complex interactions and interplays between a variety of circumstances, including a person's psychological state (e.g., Characteristics of the mind, including unconsciously held beliefs, actions, perceptions, attitudes, and so on), biological and/or genetic disposition, the type of activity (i.e., structural characteristics), and the surroundings.

According to Griffiths et al. (2012), there are numerous unique structural and environmental elements that may be involved in the initiation, growth, and maintenance of work addiction. The structural characteristics of work include the type of work (e.g., non-manual/manual, non-stimulating/stimulating, reactive/proactive), the number of hours worked per day/week, the flexibility of the work (e.g., how it fits into the worker's daily schedule), the familiarity (e.g., repetitive/novel), and the financial rewards (e.g., rewards that are both immediate and indirect, including a yearly pay, health insurance, a pension, etc.). There are also the job's unique and distinctive benefits, which may provide a psychological "buzz" or "high" for the person. For example, an academic may feel highly rewarded (and get positive reinforcement) when they receive good comments from their students, have an academic article approved for publication, obtain a research grant, or appear in the media about their research skills. Increased work satisfaction is the result of repeated encounters with these benefits. Repeatedly obtaining such benefits, on the other hand, may lead to an individual's persistent pursuit of similar rewards, which

may interfere with many aspects of their lives and become troublesome and/or addictive. Others may find academic work to be physically and/or intellectually draining, with work serving as a means to forget about other stressors and strains in their lives (such as relationships with their spouse and/or family members).

Working with others or by yourself, the dynamics of co-worker relationships, the aesthetics of the work environment (such as lighting, décor, and colour in the workspace), the physical comfort of the work environment, and the organizational working ethos and policies are all factors that influence social facilitation, and cues are all examples of situational characteristics of work. Work addiction is as much a "system addiction" as an individual addiction, according to researchers, since it is promoted by large corporations and is frequently regarded as socially acceptable. In conclusion, work addiction is influenced by organizational (job activity) and situational features, and the working environment is permitted and influenced by more than just inborn human characteristics. Since the switch from academia to a paid work is associated with considerable changes in the majority of the aforementioned situational characteristics, research exploring the relationship between study and job addiction may provide some key insights into this problem. Previous studies suggested that the same addictive mechanism is responsible for both study and employment addictions Atroszko et al., (2015). It should be noted, however, that prior research has shown evidence of a link between individual traits and work culture in the context of job addiction.

2.4 AGE AND GENDER RELATED STUDIES

There has been very limited research on showing any direct link between gender and age over workaholism. (Fandino-Losada et al. 2013; Noh et al. 2019; Theorell et al. 2014; Virtanen et al.

2015). Specific work stressors related to depression may vary across age groups. For instance, older employees face more stressors at work due to limited physical strength, retirement, and limitation of getting along with new technology (Hsu 2018). Furthermore, given age related differences in work motivation (Kanfer and Ackerman 2004), it is thus important to identify age-specific work stressors associated with depression. Harpaz and Snir (2003) reported workaholism when based on the number of hours worked per week is more prominent in men than women. Similar findings are reported by, Burke, Davis and Flett (2008: 31) showed that workaholics are mostly considered to be more in men. However, Doerfler and Kammer (1986) when studied workaholism and gender. It was reported respondents in study across various professions like doctors, advocates, and psychologists 23% were workaholics but main effect of sex and profession was not statistically significant. Burke (1999) reported no statistically significant gender differences on workaholism. But there were differences on work related stress and perfectionism level higher in women than men. Several other self-reported studies on workaholism did not show any gender differences (Aziz, Cunningham 2008; Bakker, Demerouti and Burke 2009). Some studies concluded that there is connection between gender and workaholism but weak one (Burgess et al. 2006; Russo and Waters 2006). On the other hand, Beiler-May et al. (2017) have proven differences on the responses to the test items in tool measuring workaholism between gender.

CHAPTER 3

CHAPTER 3

RESEARCH METHODOLOGY

3.1 INTRODUCTION

The investigator's primary responsibility is to carry out a research design that is suitable for providing a solution to the problem, while unity of research allows one to say that one aspect is more important than another design is the overall scheme of research, and research design is an investigation strategy. In each research study, design provides the researcher with a research road map, defines the project's bounds, and aids in the control of experimental unwanted and error variance of the subject under investigation.

This chapter explains the study's design or strategy and concentrates on the specifics of the research process used to carry out the investigation. As such, it is an essential component of the research study and must be planned and carried out in a systematic manner in order to arrive at reliable conclusions. It contains data on the population, the sample frame, the nature and form of data collection, instruments, data gathering methods, and statistical approaches for data analysis, among other things.

In the social sciences, this approach has become extremely popular for quantitative research. For descriptive, exploratory, or explanatory research, the survey technique may be employed. This technique is best suited for investigations in which the unit of analysis is a single person. Although surveys are also used to study other units of analysis like groups, organizations, or dyads (pairs of organizations), these studies usually use a specific individual from each unit as a “key respondent”

or "proxy," and these surveys may be susceptible to respondent bias if the participant chosen doesn't have enough expertise or has a subjective opinion about that unit. Chief Executive Officers, for example, may not have a thorough understanding of employee views or collaboration in their own organisations, and therefore may be the incorrect informant for research of team dynamics or employee self-esteem (Lepistö & Ihantola, 2018). In comparison to other research techniques, survey research has many intrinsic advantages (Lepistö & Ihantola, 2018). Survey research, on the other hand, has several distinct drawbacks. It is susceptible to a wide range of biases, including non-response bias, sampling bias, response bias, and memory bias. Based on the method used to gather the data, survey research can be divided into two categories: questionnaire surveys (which can be conducted via the mail, online, or in groups) and interview surveys (which could be focus groups, phone call, or individual interviews). Respondents' complete questionnaires in writing, whereas interviews are conducted by an interviewer based on spoken responses from respondents. As previously stated, each kind has its own set of advantages and disadvantages in terms of prices, target population coverage, and researcher freedom in questioning. A quality research project with a suitable experimental plan and precise execution is needed to achieve high-quality results. For this reason, analysing its viability prior to conducting the major study (also referred to as the full study or the main trial on a wide scale) may be extremely helpful.

The quantitative research approach has been used in the study as the dependent variables that are used in the study elicited nominal data that needs statistical analysis and the use of descriptive statistics to enrich the data (Mishra et al., 2019). The quantitative research will help the researcher study the intensity and the level of the dependent variable's influence on the independent variable. This understanding can only be reached when quantitative research methods and statistical analysis are used in measuring the variables and quantifying the extent which the

different independent variables are interconnected to each other. The direction and extend of the significant influences of one variable on the other can be studied using the quantitative methods. This is why the quantitative research method has been selected for this study to understand the extent and direction of the impact of workaholism on the psychological wellbeing of the private sector employees. The quantitative method helped the researcher compare the impacts of workaholism and non-workaholism on the experience of psychological distress in employees. The researcher must have a thorough understanding of the study's goal, technique, and procedures. In addition, the method's appropriateness for data gathering must be evaluated. This chapter covers the essential elements of common misunderstandings and ethical concerns, as well as the best way to communicate the study's findings. The following study strategy was followed in order to meet the objectives and the indicated associated hypotheses.

3.2 NEED AND SCOPE OF THE STUDY:

Workaholism has been an extensively researched topic for empirical research in recent years. The concept has been labelled as an attitude, characteristic, behaviour, compulsion, and/or obsession in many ways. Scholars have drawn similarities between workaholism and drug addiction for decades (Oates, 1971). Despite a lot of academics highlighting the obsessive-compulsive component of this behaviour, this has proven contentious (Andreassen et al., 2014). Workaholism is defined by Andreassen, Hetland, and Pallesen as “being particularly worried about employment, to be driven by strong and uncontrollable work motivation, and to spend so much energy and effort on work that it impairs private relationships, spare-time activities, and/or health,” according to an addiction approach. Although few studies have identified some beneficial elements of workaholism, such as strong work motivation, the current consensus indicates that workaholism

is mainly associated with negative outcomes, such as compulsiveness and rigidity (Andreassen et al., 2014).

The construct's dimensionality has been a point of contention. Workaholism, for example, is characterized by high levels of work motivation, job engagement, and slow growth of work pleasure, according to (Spence & Robbins, 2014). They discovered two kinds of workaholics via factor analysis: enthusiastic workaholics who performed well across all three dimensions, and unenthusiastic workaholics who performed well in terms of job engagement and motivation but poorly in terms of enjoyment at work. A "true" workaholic was classified as the second kind. This multidimensional view, however, has been criticised. Empirically, the work engagement component has repeatedly failed to demonstrate sufficient validity, and some writers have dismissed the work pleasure dimension as unrelated to the concept of workaholism (Andreassen et al., 2014). This indicates that the obsessive need and need to work is at the heart of workaholism. When it comes to workaholism, more modern techniques have reignited interest in the addiction perspective by employing standard criteria for addiction, such as (1) salience (i.e., pathological work obsession), (2) mood modification (i.e., prevent dysphoria), (3) conflict (i.e., work conflicts with needs), and (4) compulsion (i.e., perform so hard that it has a severe impact on one's health, relations, interests, etc. in order to satisfy one's own and others' wants). Tolerance and retraction include what is often referred to as dependence. Thus, the term "addiction" is more general. that encompasses all seven of the aforementioned components. The components are also consistent with diagnostic criteria for addiction used in current diagnostic taxonomies. Even though the terms "workaholism" and "work addiction" have been used interchangeably, most studies have failed to define and quantify the notion using the criteria outlined above. Workaholism has been defined as an attitude, obsession-compulsion, or Type-behaviour in earlier tools,

including the Workaholism Battery (WorkBAT), the Work Addiction Risk Test (WART), and the Dutch Work Addiction Scale (DUWAS).

Several research have shown positive correlations between workaholism and work-family conflicts, as well as between perceived stress-related psychological and physical symptoms and workaholism, in terms of correlates or effects on mental and behavioral health (Andreassen et al., 2014). Workaholism seems to be negatively associated to agreeableness (e.g., being empathetic and kind), positively related to neuroticism (e.g., being anxious and vulnerable), conscientiousness (e.g., being organized and efficient) and openness (e.g., being creative and original) in the Five-Factor Model of personality (Andreassen et al., 2014). Workaholism, on the other hand, was shown to be positively linked to openness in one research. Workaholism seems to be unrelated to gender in other research, although it is linked to age, with younger individuals are more prone to be workaholics.

WorkBAT found a 13% occurrence for workaholism based on a survey of five hundred nineteen university students studying business in Canada. The commonness of workaholism has been assessed using a variety of techniques dependent on the samples polled and the tools employed. Prevalence rates, as determined by the Shorter PROMIS Questionnaire, range from 14% to 18% in study. Depending on the workaholism literature as a whole, estimates of the occurrence of workaholism in the general populace have been made, albeit they may be vague and nonspecific., ranging from 5% to 10%, and even up to 25%. (Andreassen et al., 2014).

Spence and Robbins, 1999 found that workaholism was prevalent in 8% of males and 13% of women in a short survey sample of 219 people (as measured by WorkBAT). Based on an altered version of a questionnaire developed by (Machlowitz et al., 2014), a prevalence rate of 23% was

discovered in a sample of 192 lawyers, medical professionals, and therapists. It should be emphasised, however, that Machlowitz mainly saw workaholism as a good phenomenon. Kanai & Wakabayashi (1996) observed a frequency of 21% among 962 male Japanese employees in another research (as measured by WorkBAT).

However, one of the main drawbacks of all of the aforementioned studies is that none of them used a cross-section of employees from around the country, nor did they consider the possibility that employee views of the workplace or anxiety disorders might be a role in the rise in work-addiction. Furthermore, most of the previously published research relied (at least in part) on assessing characteristics that are unrelated to workaholism (e.g., work pleasure) and utilised tools that were not associated with factors for addiction. In addition, most workaholism strategies employed in this research lacked certain cut-off values for classifying workaholism. Although previous study has shown connections between workaholism and other factors such as personality characteristics, there are still some inconsistencies across studies, necessitating additional inquiry.

Furthermore, anxiety at work, according to Vignoli et al., (2017), may affect organizational effectiveness, relationships with co-workers, job quality, and supervisory relationships. The workplace may cause anxiety by putting pressure on employees to meet deadlines, maintain interpersonal connections, and deal with difficulties or problems that occur throughout the course of work. The notions of "workplace-related anxieties" and "workplace phobia" emerge as novel working-clinical ideas when it comes to the connection between uneasiness and work. Workplace anxiety, in instance, is the most predominant symptom of work-related anxiety; since it is linked to absenteeism, it may have a negative impact on a company's productivity (Lima et al., 2013). Working at a bank is a sedentary profession with high demand and little control, causing considerable discomfort (McBride et al., 2015). This type of workplace setting has been connected

to an increased risk of chronic illness, such as cardiovascular disease, as well as a propensity to the development of risk factors including obesity and alcohol and cigarette use (Kumar et al., 2013). While there are research examining the frequency of specific illnesses among bank employees (Patronea et al., 2017), there is a lack of data on whether such problems existed prior to working in the research teams described in the medical literature (i.e., employees of banks in various countries throughout the world). Future research should use a longitudinal approach and look at a variety of employment contexts. Longitudinal studies may also be used to see how workplace phobic anxiety evolves as a result of different work environment variables or changes. Future research is also needed to examine the most significant job demands, which may lead to an increase in workplace phobic anxiety. Future research might, for example, look at the possibility of traumatic occurrences in the workplace and the types of professions that are more vulnerable (e.g., employees of financial institutions, social services, or hospitals).

3.3 OBJECTIVES:

Few studies have been done globally to gauge how stressed-out bank employees are, and none have been conducted in India (Kumar & Sundaram, 2014). As a consequence, the study's goal was chosen to be a research group like this. This kind of study help further, to comprehend the issue better of anxiety, well-being, and work environment, enabling for the development of appropriate therapies for the welfare of such a sensitive group. This study's goal is to look at the connection between job addiction susceptibility and a broad range of health outcomes in India, taking into consideration the propensity of workaholics in various occupational classes. The objectives are jotted below:

1. To determine whether there is a substantial distinction between workaholic & non-workaholic group over work environment, anxiety symptoms, and psychological well-being.
2. To examine gender differences in the work environment, anxiety symptoms, and psychological well-being among bank employees.
3. To establish the relationship between age group over work environment, anxiety symptoms, and psychological well-being
4. To determine the association between work environment, anxiety symptoms, and psychological well-being among bank employees.
5. To examine the inter-correlations matrix between work environment, anxiety symptoms, and psychological well-being in workaholic and non-workaholic bank employees.

3.4 HYPOTHESIS:

The following are the hypotheses that have been determined for each study:

The preceding hypotheses are formulated in order to accomplish the aforementioned objectives.:

H_{A1a}: Workaholics significantly exhibit negative work environment as compared to non-workaholics.

H_{A1b}, Workaholics significantly exhibit higher anxiety symptoms as compared to non-workaholics.

H_{A1c}, Workaholics significantly exhibit lower psychological well-being as compared to non-workaholics.

H_{A2a}: Male gender has significantly higher positive work environment as compared to female gender.

H_{A2b}, Male gender has significantly lower anxiety symptoms as compared to female gender.

H_{A2bc}, Male gender has significantly higher psychological well-being as compared to female gender.

H_{A3a}: Younger employees have significantly higher positive work environment as compared to older employees.

H_{A3b}, Younger employees significantly have lower anxiety symptoms as compared to older employees.

H_{A3c}, Younger employees have significantly higher psychological well-being as compared to older employees.

H_{A4}: There is a significant relationship between gender and workaholics among bank employees.

H_{A5a}: There is a negative relationship between work environment and anxiety symptoms among bank employees.

H_{A5b}: There is a constructive relation between work environment and psychological well-being among bank employees.

H_{A5c}: There is a undesirable relationship between anxiety symptoms and psychological well-being among bank employees.

H_{A6a}: There is a negative relationship between work environment and anxiety symptoms among workaholic bank employees.

H_{A6b}: There is a constructive relation between work environment and psychological well-being among workaholic bank employees.

H_{A6c}: There is a negative relationship between anxiety symptoms and psychological well-being among workaholic bank employees.

H_{A7a}: There is a negative relationship between work environment and anxiety symptoms among non-workaholic bank employees.

H_{A7b}: There is a positive relation between work environment and psychological well-being among non-workaholic bank employees.

H_{A7c}: There is a negative relationship between anxiety symptoms and psychological well-being among non-workaholic bank employees.

3.6 METHODOLOGY AND RESEARCH DESIGN:

Cross-sectional research is conducted using an internet platform in two banking networks spread throughout India's different regions. The employees of the chosen banks were the only ones who were eligible. The bank manager was told of the study's objective, and official permission for staff participation was obtained as a result. Following that, all employees who agreed to take part completed a self-administered questionnaire.

Cross-sectional study looks at information from a large group of people at one particular period. In this kind of research, participants are chosen based on certain factors of interest. Cross-sectional studies are common in evolutionary psychology, but they are also utilised in a variety of other fields, such as social research and medicine (Spector, 2019). Cross-sectional studies are correlational in design and are classified as qualitative research rather than fundamental or

structural research, which means they cannot be used to identify the origin of a condition. Researchers take notes on the data in a demographic, but they don't play with the parameters (Spector, 2019). This technique is often used to infer potential connections or to collect early data to assist future study and testing. This kind of study can be used to characterise community features, but it cannot be utilised to establish cause-and-effect connections between variables. Cross-sectional studies are used to explain what is occurring right now, as opposed to longitudinal studies, which investigate at a handful of individuals across time (Moraschini et al., 2021). This kind of study is often used to identify the attributes of a population at a certain moment in time. Cross-sectional research, for example, may be performed to see whether exposure to certain risk variables is linked to specific consequences. While this kind of research cannot prove significant relation and causation, it may offer a brief look at possible connections at a given time. Furthermore, although cross-sectional investigations cannot be used to establish causal connections, they may serve as a helpful starting point for future investigation. When investigating a public health problem, such as whether a certain habit is related to a certain disease, researchers may conduct a cross-sectional study to seek for signals that may be used to direct future experimental investigations (Baba et al., 2020). Researchers may be interested in understanding how exercise affects cognitive health as individuals age, for example. They may gather information on how much movement people want and how well they do on cognitive tests from people of all ages. Performing such a study may provide researchers with information regarding the kinds of exercise that are most helpful to cognitive health, as well as stimulate further scientific research on the topic. Given the data, cross-sectional studies may readily be claimed to be a helpful research technique in many fields of health research (Baba et al., 2020). Investigators are better equipped to identify connections that may exist between particular factors and create future studies that

examine these circumstances in more detail by knowing more about what is going on in a given community.

3.7 DATA SOURCE:

Bank employees form a distinct work group that is exposed to varying levels of mental stress on the job. According to studies, long-term mental stress has been related to chronic disease among bank employees. Employees in banks rarely have free time, and they must cope with a variety of responsibilities, as well as bias, favouritism, delegation, and conflicting priorities. Employee drug use, such as drinking and smoking, has been proven to have a significant impact on workplace stress levels (Vidal et al., 2017). Few studies have been done globally to assess the level of stress among bank employees, and none have been conducted in India (Kumar & Sundaram, 2014). Therefore, the target group for this study has been determined. This kind of study aided to comprehend the issue of anxiety, well-being and work environment enabling for the development of appropriate therapies for such a susceptible group. The goal of this research was to verify the selected psychometric instruments in a selected sample banking employees' population and see whether a high risk of work addiction was linked to anxiety, well-being, and a work environment.

According to IFSCcode.com, there are 3672 operating bank branches of major national and international banks in Delhi. Furthermore, according to information from the Indian Economy records (<https://dbie.rbi.org.in/DBIE/dbie.rbi?site=publications#!18>), there are 62065 bank employees in Delhi working in various capacities. With 62065 banking employees, 95% confidence level, a .5 standard deviation, and a 5% margin of error, the sample size is expected to be 382. As a result, a sample size of 400 is determined.

Comprehending to the present situation, with the rise in COVID-19 cases, we selected the participants after visiting the branch manager and taking his approval. The bank employees selected were around a number of 1000 from bank branches located in Delhi. Comprehending to the inclusion criteria. More than 500 respondents were observed to be interested to take part in the survey, however, since our selected target was 400, thereby once we received 200 men and 200 women responses thereafter closed the survey. Owing to the present COVID-19 times the mode of the collection of data, we had collected email addresses and the respective survey link was forwarded. The survey was conducted in the month of December' 2021.

3.8 TARGET POPULATION:

Banking workaholic classifications are seldom founded on strong theoretical or empirical foundations. Workaholics may be classified into three categories, according to Scott et al., (1997): perfectionists, obsessive users, and goal oriented. Robinson (2013) depicted 4 types of workaholics: those who are relentlessly driven to work quickly, fulfil deadlines, and who cannot resist working; the bulimic who insist on doing the job flawlessly or not at all; the meticulous, who obsess over the smallest of details; and the inattentive, who embark on numerous endeavours but soon lose interest and break their promises. Banking workaholics who like their jobs and those who do not are two examples of scientifically supported distinctions. Andreassen (2013) identified two types of workaholics: excited workaholics, who exhibit high levels of work involvement, are internally driven to work, and their work brings them immense happiness and fulfilment; and non-excited workaholics, who exhibit similar levels of work involvement and internal motivation but seem to find little pleasure in working too much. The non-enthusiastic types were initially referred to as "genuine workaholics," but the word "non-enthusiastic" was later added to the typology.

Despite the seeming simplicity of the difference between workaholism kinds, the categorization is helpful, timely, and significant.

Andreassen (2013) highlighted the importance of distinguishing between pleasure from the work itself and satisfaction from performing it in their assessment of this research area. The authors claimed that working satisfies all workaholics because it calms and neutralises unpleasant attitudes, sentiments, and feelings that you might ordinarily experience if you weren't working (i.e., "I feel bad when I take time off work"). One of the criteria on the widely used Workaholism Battery (WorkBAT) is job enjoyment, which identifies enthusiastic workaholics as people who genuinely enjoy the work they perform (e.g., "I do more work than is required of me simply for the pleasure of it"). The phrases "work engagement" and "workaholism," however, are likely to refer to the dual phrases enthusiastic and non-enthusiastic workaholism better than the terms enthusiastic and non-enthusiastic workaholism (Andreassen, 2013). Some academics have lately re-encouraged the use of the Workaholics, work-engaged workaholics, and committed to the organization differ in as a means of classifying these specific work attitudes and behaviours.

Bank employees are part of a unique work group that is subjected to different degrees of mental stress at work. Long-term mental stress has been linked to chronic illness among bank employees. Bank employees don't have time to relax, and they deal with a wide range of duties, as well as prejudice, favouritism, delegating, and competing priorities. Employee drug usage, such as drinking and smoking, was shown to have a major influence in predicting occupational stress levels (Vidal et al., 2017). Few worldwide studies have been performed to evaluate how stressed-out bank staff are, and none have been conducted in India (Kumar & Sundaram, 2014). As a result, this research's target group has been selected. Research of this type aided in better understanding

the issue of anxiety, well-being, and work environment, allowing for the implementation of suitable treatments for the benefit of such a vulnerable population.

Andreassen (2013) defines workaholism as a three-dimensional construct in which genuine workaholics have a high level of work engagement, a high level of job drive, and a low level of work pleasure. This multidimensional paradigm has received a lot of flak. To begin with, some academics have claimed that job pleasure has no bearing on the definition of workaholism. Second, empirical investigations show that the work engagement subscale is ineffective (Andreassen et al., 2012). Furthermore, current research operationalizes workaholism mostly using dimensions that are strongly correlated or that consider the concept to be one-dimensional. As a result, the multidimensional view of workaholism has reportedly have to make way for something more one-dimensional approach that prioritises the drive component as the core of workaholism. Theoretically, workaholism and other destructive behaviours have a lot in common and notions like as excessive love for work and work over-involvement (Andreassen, 2013). It's presently unclear if these conceptions just redefine workaholism in new, contemporary terms or really add something new to the table.

3.9 PARTICIPANTS:

A total of 1071 COVID-19 verified cases (including 49 foreign people) were reported in 27 Indian states and union territories, as per the Ministry of Health & Family Welfare (MoHFW) as of March 30, 2020. There were 99 instances of people who were healed or released, one person who moved, and 29 people who died (Varshney et al., 2020). All confirmed cases are being isolated in hospitals, and contacts are being traced and quarantined at their homes. The first illness was transmitted in India primarily by foreign people visiting the country as holidaymakers from countries where there are infections, and secondly by uncontrolled migration of Indian citizens from overseas owing to

fear of contamination. While there was still a pandemic spread in India, the Indian government took drastic measures to reduce the number of cases in that stage by far, enacting a major lockdown across the country and directing immigrant workers to special containment infrastructure set up by the Indian military from airports and ports immediately for at least 14 days. To spread knowledge about the dangers of illness and possible preventative measures that can be taken to safeguard oneself and others, public health teams were also established. Lockdown and anxiety about the disease's possible effects and spread had a significant impact on people's life (Varshney et al., 2020).

According to sources, the United Forum of Bank Unions (UFBU), nine bank employee unions under one umbrella group have requested that the Union Finance Ministry reduce the compulsory hours of operation for the financial sector, citing the increase in COVID-19 instances. Rather than establishing all branches at multi-centres, the number of branches may be limited so that banking services may be expanded to a few chosen branches (The New Indian Express, 2021). The unions also proposed that the Rs 50 lakh compensation paid to the relatives of dead frontline COVID-19 fighters be extended to bank employees as well. The letter was delivered to the Secretary of the Department of Financial Services. The finance ministry had previously sought priority immunisation for all bank employees, regardless of age, but the request has yet to be fulfilled (The New Indian Express, 2021).

The sample size is calculated using the tools as follows. There are 62065 bank employees working in Delhi. With a confidence level of 95 % and margin of error 5% the sample size needed 382 as shown below using <https://www.calculator.net/sample-size-calculator.htm>

Result

Sample size: **382**

This means 382 or more measurements/surveys are needed to have a confidence level of 95% that the real value is within $\pm 5\%$ of the measured/surveyed value.

Confidence Level: (?)	<input type="text" value="95%"/>	
Margin of Error: (?)	<input type="text" value="5%"/>	
Population Proportion: (?)	<input type="text" value="50%"/>	Use 50% if not sure
Population Size: (?)	<input type="text" value="62065"/>	Leave blank if unlimited population size.
<input type="button" value="Calculate"/>		<input type="button" value="Clear"/>

There are several sample size calculators available to calculate the sample size. All these gave the same result for the sample size which is 382. One more example for the online sample calculator can be assessed at <https://www.raosoft.com/samplesize.html>

What margin of error can you accept? 5% is a common choice	<input type="text" value="5"/> %
What confidence level do you need? Typical choices are 90%, 95%, or 99%	<input type="text" value="95"/> %
What is the population size? If you don't know, use 20000	<input type="text" value="62065"/>
What is the response distribution? Leave this as 50%	<input type="text" value="50"/> %
Your recommended sample size is	382

So, the sample size for the research is rounded to 400 respondents from Delhi (200 males and 200 females). The survey took place during the months of December' 2021. Each question's values

were related to a person's overall score on each questionnaire. Acceptable dependability was defined as an alpha value of more than 0.70. A quantitative sociological survey based on a structured questionnaire was performed among people aged 21–64 who were employed at the time of the survey to evaluate this. The stratified sampling was of the probabilistic stage type. Employees demographic characteristics were all targeted sample layers. A representative sample of 400 individuals from Delhi was used in the research. Data was collected on the chosen employees, resulting in a final participant count of 200 men and 200 women. The research was performed through survey mode, and the data was collected in the month of December'2021. The sample's representation was determined by determining that there is no huge discrepancy between the population proportion and actual numbers for the characteristic-respondent age, that there is no significant disparity between population parameter and sample variability, and that the sample gender representation is comparable. The questionnaire includes insight into the overall level of employment and salary contentment, the most pertinent motivating factors, the key components of workplace flexibility reveal in Delhi-based banking sector, the main aspects of organizational versatility, urgent steps to be undertaken by the organization's management to enhances productivity and job satisfaction, current work spaces, and how working in a virtual environment affects the overall threshold of job and salary satisfaction. According to Indian law, the National Insurance Act, all employers must register employees employed for more than seven days or more of labour each week in the AA-registry. All employees in the sample got a questionnaire on study sent to them through their email. A questionnaire was delivered through their email, together with an information note emphasising that participation was entirely voluntary. When the questionnaire was completed and returned, it was considered that consent to participate had been granted. The information email included a website link that, when visited, allowed responders to complete the

questionnaire online. Those who did not answer within the first month after receiving the questionnaire received a reminder email.

3.10 DATA COLLECTION:

The sample size for the study is 400 Delhi residents (200 males and 200 females). The survey was conducted in the month December'2021. The reliability of each psychometric instrument was assessed using Cronbach's alpha. A thorough case study was conducted. The individual's total score on each questionnaire was matched to the values of each question. An alpha value of greater than 0.70 was regarded as acceptable reliability. The Wald test was employed to assess statistical significance, with a 2 - sided p 0.05 being chosen as the cut off. To assess this, a quantitative sociological survey using a structured questionnaire was conducted among individuals aged 21–64 who were working at the time of the study. The stratified sampling method was used. Employees distribution by gender, age, relationship status, education level, position, work sector and annual income, demographic characteristics, were all sample layers that were targeted. The study relied on a representative sample of 400 people. Data on the selected employees was gathered, yielding a total of 200 male and 200 female participants. The study was conducted through online mode, and the data was gathered in the month of December' 2021. The representation of the sample was determined by determining that the population proportion and actual numbers for the characteristic-respondent age are comparable, that there is no significant disparity between population parameter and sample variability, and that the sample gender representation is comparable. The questionnaire includes information on the overall level of job and annual salary, the most important motivating factors, the key components of workplace flexibility revealed in the Delhi-based banking sector, the main aspects of organisational

versatility, urgent steps to be taken by the organization's management to improve productivity and job satisfaction, current workspaces, and an overview of the organization's future plans.

3.11 RESEARCH INSTRUMENTS

Bergen Work Addiction Scale (BWAS): The Bergen Work Addiction Scale (BWAS) is a seven-item questionnaire designed to evaluate behaviour according to the same standards as other addictions. This scale has seven components that represent the main aspects of addiction (i.e., mood modification, conflict, withdrawal, salience, tolerance, problems, and relapse) C. S. Andreassen, M. D. Griffiths, J. Hetland, and S. Pallesen (2012). The Bergen Work Addiction Scale (BWAS) was developed more recently, and it is based on Brown's behavioural addiction components and Griffiths' (2012) components model of addiction. All questions in the BWAS are evaluated on a 5-point Likert scale ranging from "never" (1) to "always" (5) and find out how often the symptoms have happened in the past year. Workaholism is defined as affirming "often" or "often" on 4 (or more) of the 7 criteria. The aforementioned threshold was established based on earlier conceptualizations of behavioral addiction as well as the illogical methodology utilized in contemporary psychiatric diagnosis systems. The BWAS scale was used by Molino et al (2021) to found out the workaholic among self-employed and employees. The findings indicate that self-employed people have a significantly higher level of job addiction than employees. Mohan and Lone (2021) study wherein 110 professionals participated the scale used to identify workaholics BWAS found that 36 respondents considered as workaholic considering their responses. A pen and pencil cross sectional study by Atroszko et al., (2021) using BWAS suggests that work

addiction is potentially quite common among working women who have been diagnosed with an eating disorder.

The Beck Anxiety Inventory (BAI), developed by Aaron T. Beck and associates, the test consists of 21 multiple-choice questions. (Common somatic and cognitive symptoms of anxiety) self-report inventory for assessing anxiety intensity. Participants On a 4-point scale, from 0 (not at all) to 3 (severely, I could barely stand it), rank each item based on how bothered you are by the specific symptom. Thirteen elements refer to physical or physiological symptoms (such as heart palpitations), five highlight anxiety's distinctly cognitive components (such as fear of the worse), and three have both a physical and cognitive meaning (e.g., terrified). Excellent internal consistency (Cronbach's alpha =.92) and a one-week retest reliability value of .75 were reported by Beck et al. in 1988. The BAI appears to have stronger discriminatory and convergent validity than the most popular self-report anxiety measure, and it is internally consistent and trustworthy. Creamer et al., (2000) concluded in his investigate whether some internal consistency may have been sacrificed in order to achieve the high predictive relevance shown by the BAI. Cag et al., (2021) study using BAI found that that severe anxiety levels in HCW regardless of COVID-19 transmission do not feel protected, they become worried. A study by Yalcin and Tek (2021) discovered that while guilt levels are greater in women, anxiety scores are higher in men. The BAI scale used to measure the anxiety levels. The social structure, the social roles and status accorded to males and females, as well as the physical and mental differences between males and females are all assumed to play a part in this outcome. Furthermore, it may be claimed that while shame and embarrassment are unaffected by sports, anxiety is positively impacted. Rahman and Hayati (2021) tested relaxation techniques to lower the anxiety levels the instrument used is Beck Anxiety Inventory (BAI), the notable deviations between the beginning and end of the activity. Nayak and

Bhatt (2021) the BAI scale used in the male and female UG students differed significantly, based on the results of the investigation. Moderate level of anxiety found in the UG students. And no significant relationship found between emotional intelligence and anxiety among UG students.

Psychological Well-Being: The 42-item Psychological Well-being (PWB) Scale, developed by psychologist Carol D. Ryff, assesses six aspects of happiness and well-being: autonomy, environmental mastery, personal growth, positive relationships with others, purpose in life, and self-acceptance (Ryff et al., 2007; adapted from Ryff, 1989). On a 7-point scale (1 = definitely agree; 2 = slightly agree; 3 = a little agree; 4 = neither agree nor disagree; 5 = a little disagree; 6 = considerably disagree; 7 = strongly disagree), respondents evaluate how strongly they agree or disagree with 42 items. The study conducted by Suleman et al., (2021) using PWB 42 item scale produced proof that there is a strong, positive connection between teachers' psychological well-being and empowering leadership behavior. Teachers' psychological health is predicted by leadership empowering behavior. It demonstrates that when leaders give their employees the freedom to make decisions, those employees will have psychological fulfillment. They will be more inclined to produce high-quality work as a result and will be more motivated to adhere to policies, guidelines, and processes. In order to increase organizational productivity and efficiency, to enhance employees' emotional wellness, it is suggested that leaders implement an empowering behavior style. Study conducted by Febrianti et al., (2021) using PWB 42 item scale the outcome indicated that the relationship between psychological health and altruistic conduct was insignificant, as indicated by the overall significance value (Sig = 0.77 > 0.05). Fenandez and Martin (2021) conducted a study during COVID-19 pandemic in Spain. The PWB 42 item scale was used and found during confinement, men's psychological well-being declined more than women's did, although neither gender's psychological well-being declined with time. A study by

Francis et al., (2021) using PWB 42 item scale discovered that, when gender was not a factor, 51% of respondents reported great psychological well-being, whereas 49% reported low psychological well-being. The link between psychological well-being and domineering and moderate parenting styles was shown to be fairly positive, however the association among psychological well-being and inattentive parenting styles was found to be negative. According to the study's findings, parental practices will have an impact on adolescents' psychological health. As the warmest and most consistent of the four parenting philosophies, authoritative parenting will support teenagers' psychological growth.

Perceived Work Environment (PWE): Perceived Work Environment (PWE) should be thorough and descriptive, according to two key requirements for its development. The current work environment is measured by the perceived work environment. This information reveals how employees see their working environment. The data gathered may be utilised to inform work environment design and organisational growth. The scale's findings show an adequate degree of dependability. Responsibility, professional advancement opportunities, opportunities for promotion, positive feelings about the organisation, the perception of the workplace includes factors like purpose clarity, relationships with co-workers, an effective supervisor, pay, the presence of core values, job happiness, recognition, and the actual work. Mohan and Lone (2021) suggest that workplace happiness is very crucial and productive for employees apart from financial assistance, employees are keen to discover practical means of achieving workplace happiness.

3.12 RELIABILITY AND VALIDITY OF THE RESEARCH INSTRUMENTS:

In the original design of the scale, regarding hours worked, position of leadership, and perceived medical issues, the proposed cut-off for classifying workaholics shown outstanding discriminative

capacity. The proposed cut-off differentiated between those who are workaholics and those who aren't in terms of hours worked and degrees of fatigue among 701 Italian employees (378 females), demonstrating that compared to non-workaholics, workaholics worked much more and felt significantly more worn out. The BWAS score has been shown to be favourably linked to DUWAS ($r = .55-.58$), WART ($r = .50-.84$), and WorkBAT ($r = .35-.65$) scores, but less so to the WorkBAT-Enjoyment subscale ($r = .13$). Molino also discovered evidence for BWAS's factor structure. When examining the connections with other important workaholism dimensions such as job satisfaction ($r = .15$), work-family conflict ($r = .59$), workload ($r = .45$), cognitive demand ($r = .22$), emotional demand ($r = .22$), and emotional dissonance ($r = .34$), construct validity was verified. Additionally, the within-person variability and BWAS reliability were validated using a diary study with 96 participants and a multi-layered research design ($= .79-.87$) over time (Andreassen et al., 2014). The BWAS is a broad shopping addiction tool, rather than focusing on specific employee's behaviours. As a consequence, the BWAS may now be used to assess both online and offline customers, making it more relevant to today's purchasing patterns. Work addiction has become an increasingly researched issue in the BWAS's factor structure, dependability, and threshold scores in a large Hungarian sample, according to Orosz et al., (2016). By giving findings based on a direct continuation of the initial validation of BWAS and involves representative data and the development of appropriate cut-off scores. The lengthier version's validity was excellent, but its dependability was not as good as it might have been. According to the research, one-fifth of The BWAS labelled Hungarians who utilized the internet at least once a week as work addicts. To enable and promote cross-national investigation on job addiction, researchers are encouraged to utilise the initial six dimensions from the Norwegian scale. Muntingh et al., (2011) looked examined the Beck Anxiety Inventory (BAI) as a predictor of anxiety intensity in patients in

primary care with a range of anxiety disorders, depressive disorders, or no illness at all. Patients with agoraphobia only and social phobia solely scored significantly lower than those with agoraphobia and panic disorder together. Patients who had a co-morbid anxiety disorder, depressive illness, or both had significantly higher BAI scores than those who only had an anxiety disorder or a depressive disorder. The mean ratings of depressed and anxious individuals did not vary substantially. The results suggest that primary care patients with a range of anxiety disorders may benefit from using the BAI as a predictor of anxiety severity. However, as the measurement appears to also represent the severity of depression, it is not a good tool for separating anxiety from depression in a primary care population. Ottenbacher, et al., (2007) investigated the validity of a 6-domain psychological well-being measure in elderly patients admitted to an acute care hospital. With ICC values ranging from 0.66 to 0.79, the 6-domain psychological well-being measure, which covered self-acceptance, purpose in life, environmental mastery, personal development, positive relationships with others, and autonomy, showed excellent reliability among older patients. Mohan and Ahmed (2022) investigate the effect of employees' job satisfaction on their perceptions of their work environment. The research will aid in the investigation of the connection between work features and personnel, both of which are related to job satisfaction. With the findings, it is simple to determine the organisational environment and component importance, which will aid in forecasting employee work satisfaction. The analysis will help in understanding and acquiring deep understanding of the perceived working environment, which is being suggested and acknowledged as one of the most important and essential ways to improve employee job satisfaction while also giving them a wealth of opportunities to advance their careers. The findings also aided in the development of knowledge

and awareness of the factors that would lead to increased work satisfaction and a more developed economy.

3.13 PROCEDURE OF DATA COLLECTION

The four psychological tools were administered 400 bank employees to achieve the study's objectives. According to their scores on three independent variables such as anxiety, work environment, and psychological well-being, they were classified as workaholics or non-workaholics. The researcher also gathered some socio-demographic information about the respondents, such as their gender, age, relationship status, educational level, position, work sector and annual income. Before beginning the study, the institute's ethical committee gave its approval. On the day of the questionnaire's completion, bank employees gave their informed consent via an online survey.

Participants' rights to maintain their anonymity must always be honored, thus each possible participant was fully informed about the study's goals, methodology, expected benefits, potential risks, and any potential discomforts. The permission process allowed participants to be assured of their identity and confidentiality while also providing further information about the research technique. According to Baarnhielm and Ekblad (2002), medical ethics should be motivated by the four fundamental moral principles of autonomy, beneficence, justice, and non-maleficence. Transparency (openness and honesty) is attained, according to Robinson (2014), if the study report specifically covers the procedures used for sampling, data collecting, evaluation, and presentation. Efforts to overcome these methodological challenges underscore the extent to which quality criteria interact significantly with ethical principles.

Bank employees were contacted through emails and survey link was shared with the option to participate or opt out of the study after being given the survey link to administer the surveys. The questionnaires were completely anonymous and contained no identifying information.

3.14 STATISTICAL ANALYSIS

The type of the data and the design of the planned work influence the statistical technique that is used for data analysis. The purpose of the study is to assess of anxiety symptoms, work environment and psychological well-being among workaholic and non-workaholic banking employees in Delhi. Statistical tools such as Chi square test, t-test and etc. used for testing several hypotheses of the study. An inferential statistic called a t-test is employed to determine whether the means of two groups that are connected by some relationship differ significantly from one another. It is most frequently used when data sets have unknown variances and are predicted to follow a normal distribution. A t-test is a method for evaluating hypotheses that is used to assess a population-relevant assumption. To evaluate statistical significance, a t-test considers the t-statistic, t-distribution values, and degrees of freedom.

This continued the topic of hypothesis testing, which involves formulating a specific hypothesis about a sample size and calculating the likelihood that the hypothesis is true using sample statistics. For instance, there may be more than two focus groups in some clinical research. In a clinical study, researchers may evaluate a novel medication by contrasting it with a placebo and a standard treatment. In an observational study like the Framingham Heart Study, it would be intriguing to compare the average blood pressure or average cholesterol levels across individuals who are obese, overweight, average weight, underweight.

The two independent samples approach, which is employed when there are precisely two independent comparison groups, is expanded upon in the method for testing a difference in more than two separate means.

For evaluating connections between categorical data, the Chi Square statistic is used. The Chi-Square test's null hypothesis is that there is no association or independence between the explanatory factors in the population. When utilising a crosstabulation, the Chi-Square statistic is most frequently employed to assess Tests of Independence (also known as a bivariate table). In a cross-tabulation, which displays the distributions of two categorical variables simultaneously, the sections of the variables cross in the table's cells. To ascertain if the two variables are related to one another, the Test of Independence compares the observed pattern of cell responses to the pattern that would be expected if the variables were truly independent of one another. The researcher may evaluate if the observed cell counts are substantially different from the anticipated cell counts by computing using a crucial value drawn from the Chi-Square distribution to compare the Chi-Square statistic to. The study also aims to explore the effect of gender, age, relationship status, education level, position, work sector and annual income among banking employees in Delhi.

The study's findings are backed up by relevant graphical representations. The Hypotheses are either accepted or rejected based on the results.

CHAPTER 4

CHAPTER FOUR

4.1. Introduction

The findings of descriptive and inferential statistics are presented in this section. To conduct the analysis, the data were loaded into the SPSS software. The use of descriptive statistics is crucial in giving information about the many study variables. For instance, it gives us the replies required to address the research objectives as well as the frequency distribution of participant demographics. As a result, the study serves as a pillar for the application of inferential statistics. The study measures dependent variables like anxiety symptoms, perception about the workplace environment, and psychological health and wellbeing (Murray, 2013). The data that gathered from the anxiety questionnaire will be nominal data, perceived workplace environment is nominal data and psychological health, and psychological health and wellbeing is an ordinal data (Baglin, 2014). Parametric tests are used to determine if the observed differences between two independent groups are statistically significant or not (Boone & Boone, 2012). T-test has been used in this study to measure the variance between the workaholic and non-workaholic group of participants (Ali & Bhaskar, 2016). Therefore, the use of t-test is appropriate in this context as the study determines if there are any significant differences in the workaholic and non-workaholic groups of employees (Fagerland, 2012).

On the other hand, non-parametric tests are appropriate for analysing ordinal data. Therefore, non-parametric tests like chi-square, which has been used in this study for analysing ordinal data like psychological health and wellbeing is appropriate in all senses (Hoskin, 2012). The results are specifically given in tables and graphs (pie chart, bar graph, histogram, and column graphs). On the other hand, inferential statistics serves as a crucial pillar in addressing the study's goals and questions. This required utilizing several analytical strategies according to the research purpose.

In the present study the statistical technique used for data analysis has been opted in accordance with the level of measurement, research objectives and the hypotheses. During the process of data analysis, following steps have been adopted:

- (1) Since the aim of the research endeavor was to examine the significant differences in work environment, anxiety symptoms, and psychological wellbeing with reference to workaholic's addiction, gender, and age among bank employees of Delhi. Therefore, an independent sample's t-test was used to test the hypothesis.
- (2) The study also aimed to find the relationship between work environment, anxiety symptoms, and psychological wellbeing among bank employees of Delhi. Thus, correlational analysis was carried out where Pearson Product Moment Coefficient of Correlation was used to find out the potential relationships.
- (3) At the next step regression analysis was decided to be used to quantify the causative relationships among the variables of the study if the correlational model showed any significant relationships. Prior to apply the regression analysis, normality of the distribution, independence of observation, homogeneity of variance and linearity will be tested.
- (4) At the next step Pearson's Phi Coefficient was used to examine the relationship between two dichotomous variables such as gender and workaholics among bank employees.

The results of acquired are discussed below.

4.2. Descriptive statistics

In order to better understand participant characteristics, descriptive statistics were analysed in two stages: first, for the demographics; second, for the factors of interest that provide context for the research variables. The associations among independent and dependent variables have been examined at various categories using descriptive statistics. The descriptive statistics is easy to be represented diagrammatically (Witte & Witte, 2017). The study has used the descriptive statistics as it is easy to determine the standard deviation and the clustering of the data producing a pattern that can be interpreted as significant. The descriptive statistics can be used to, therefore, represent the relationship between workaholism and anxiety symptoms of the employees, the relationship between workaholism and experience of psychological distress and the relationship between the perceived workplace environment and psychological distress experienced by the employees. These are shown below:

Table 4.1: Descriptive analysis, skewness, and kurtosis statistics

	Mean	Std. Deviation	Skewness	Kurtosis
GENDER	-	.501	.000	-1.010
AGE	-	.525	.426	-.497
W_NW	-	.310	-1.544	1.494
PWE	143.97	19.319	-.148	-.696
AS	9.38	4.069	.630	-1.058
PWB	170.43	13.109	-.178	-.481
Valid N	400			

It can be observed from the table 4.1 that the mean score of PWE is 143.97, N = 400 with SD of 19.319. For the measure of AS, the mean score observed are 9.38, with SD of 4.069. In addition, the measure of PWB exhibited the mean score of 170.43, with SD of 13.109.

Skewness and kurtosis index are used to identify the normality of the data. The results suggest that the deviation of data from normality was not severe as the values of skewness and kurtosis index between -1 through 0 to +1 on all the three variables of the study i.e., PWE, AS, and PWB. According to (Hair et al., 2010; Bryne, 2010), data is said to be normally distributed if

the values of skewness and kurtosis fall within the ranges of -2 to +2 and -7 to +7, respectively.

4.2.1. Demographic characteristics

4.2.1.1. Age

The frequency bar graph was used to assess the age-related demographic data first. Figure 1 below illustrates this.

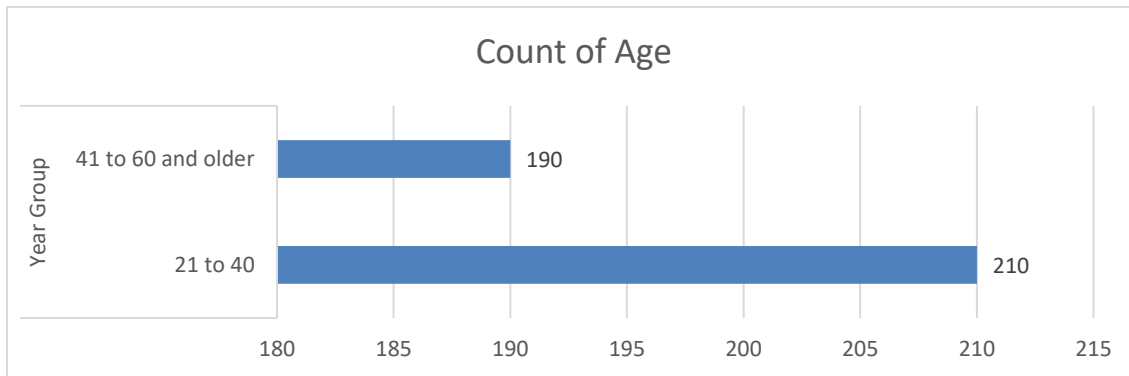


Fig 1. Bar graph for age count

The most respondents were of the age 21 – 40 years (n = 210) referred as younger employees. These were followed by the 41-60 and above years' (n = 190) and referred as older employees. This demonstrates that the majority of the respondents were in the middle of an active work period and were therefore qualified to participate in the study because it required professional expertise.

4.2.1.2. Position

Analyzing frequency of position was the next stage. This was accomplished using a pie chart, as shown in figure 2 below.

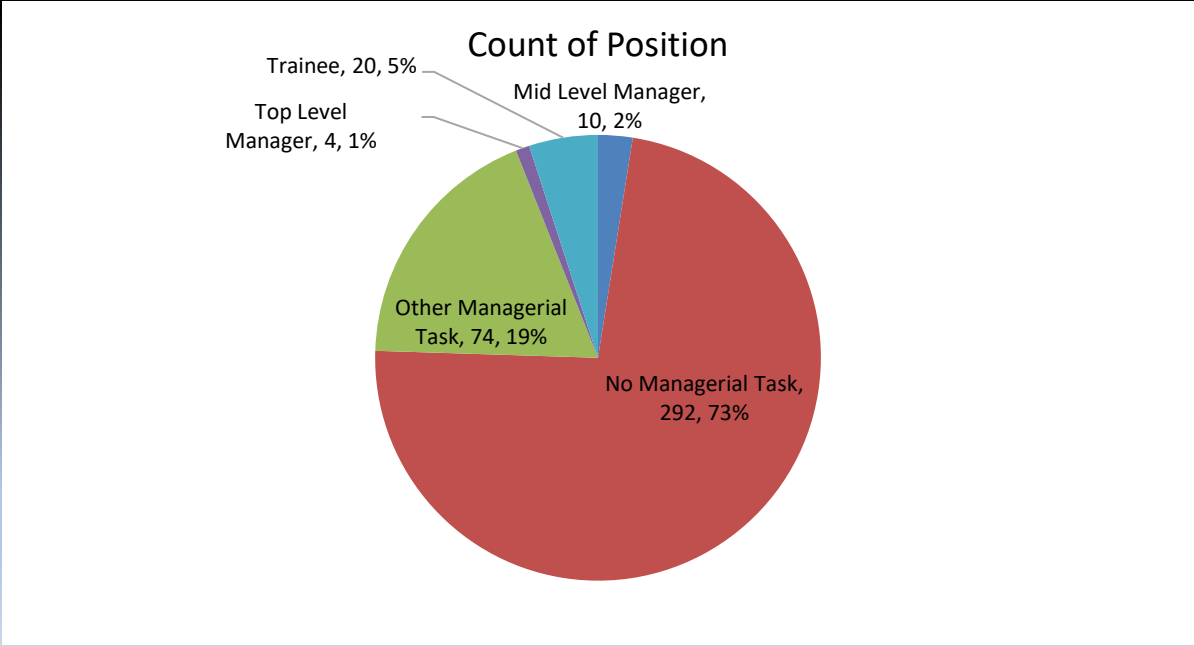


Fig 2. Pie chart for position by participant

The majority of respondents (n = 292, 73.00%) did not hold managerial positions. This group was followed by managers in other capacities (n = 74, 19.00%), trainees (20, 5.00%), mid-level managers (10, 2.00%), and top-level managers (4, 1.00%). This suggests that the majority of respondents were not performing at their best and may have been exposed to varying levels of wellbeing, anxiety, and impression of the workplace, a situation ideal for this study's issue. Managers, for example, occasionally hold back from criticizing the working conditions of the banks; this keeps them from saying what they really think, which has an impact on the study's findings. This is not the case for non-managers.

4.2.1.3. Relationship status

Relationship status has an impact on a person's wellbeing, hence the participant's reporting of this status was done using a pie chart, as seen in figure 3 below.

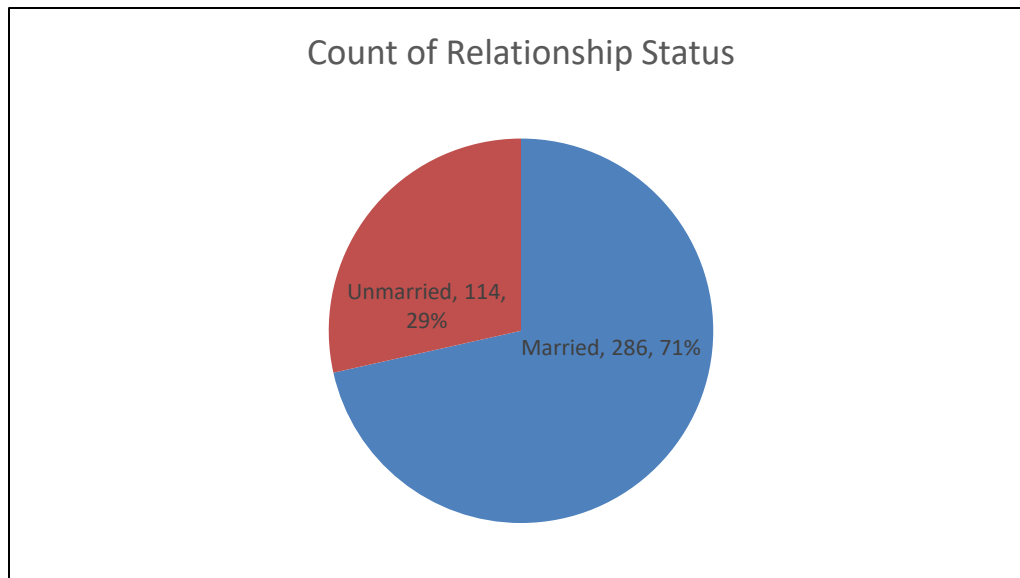


Fig 3. Pie chart for relationship status

Compared to the 114 single participants (29.0%), the majority of individuals (n = 286, 71.00%) were married. This served as a differentiator in identifying the various levels of wellbeing and anxiety.

4.2.1.4. Education level

The knowledge of working conditions and the workaholic condition is fundamentally based on education level. For instance, those who are better educated typically possess the knowledge and abilities needed to accomplish more. Additionally, it is to enable the better educated to complete the questionnaire under minimal supervision. As seen in picture 4 below, this variable was

displayed using a column graph.

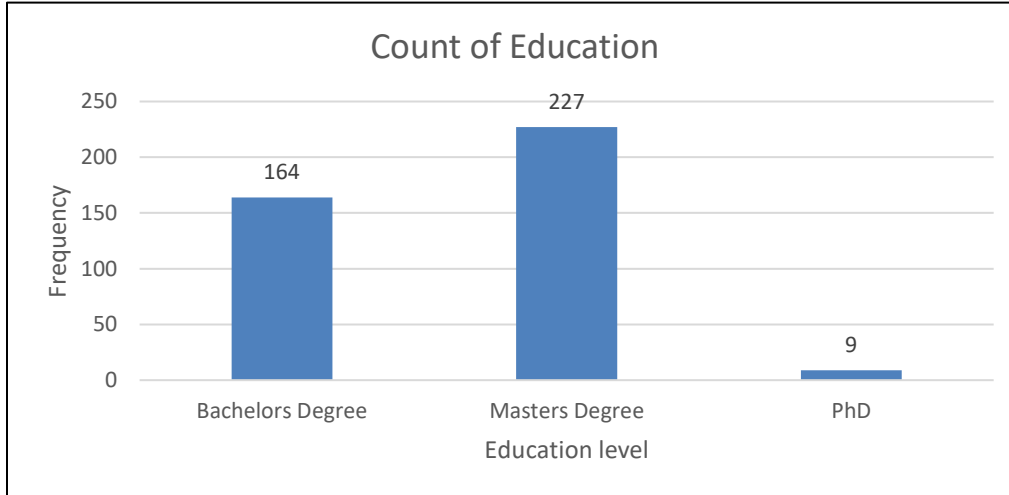


Fig 4. The level of education

According to the aforementioned graph, the majority of respondents ($n = 227$) had master's degrees, followed by bachelor's degrees ($n = 164$), and lastly PhDs ($n = 9$). This cohort had the anticipated outcomes since it was made up of a highly educated working group with in-depth understanding of the study's topics. Additionally, this group must have experienced several workaholic affecting circumstances crucial to our study.

4.2.1.5. Gender

Gender is the final factor in this category. Understanding the fairness of sample selection requires establishing the gender distribution. The table below indicates gender frequency.

Table 2. Gender frequency

Row Labels	Frequency	Percentage
Female	200	50.00%
Male	200	50.00%
Grand Total	400	

Males and females were distributed equally (n = 200, 50.00% each) based on the aforementioned table. This demonstrates that there was no gender-based sample bias, which is a requirement for obtaining the desired study outcomes.

4.2.2. Variables of interest

4.2.2.1. Workaholic status

The distribution frequency of the variable, which was of interest, needed to be shown. To do this, the pie chart below was used.

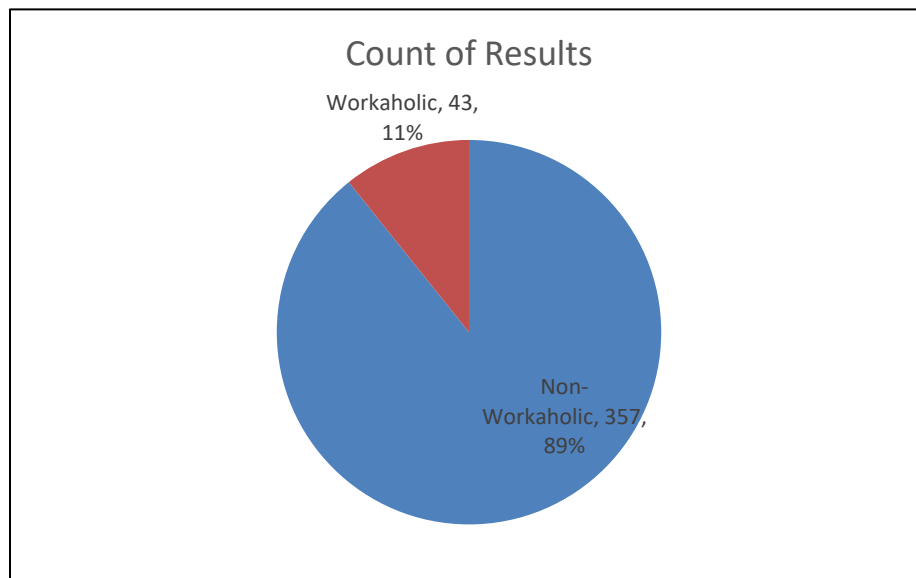


Fig 5. The workaholic state frequency chart

Most people who responded (n = 357, 89.00%) were not workaholics, as opposed to 43 (11.0%) of them. It follows that the majority of respondents did not have a work addiction. This finding is crucial in explaining the respondents' varied feelings, particularly their overall wellbeing in relation to their workplaces.

4.2.2.2. Anxiety levels

Considering that the information was categorical in nature and quantified using a nominal scale, a pie chart was also used to illustrate this. Below is a graph of the outcome.

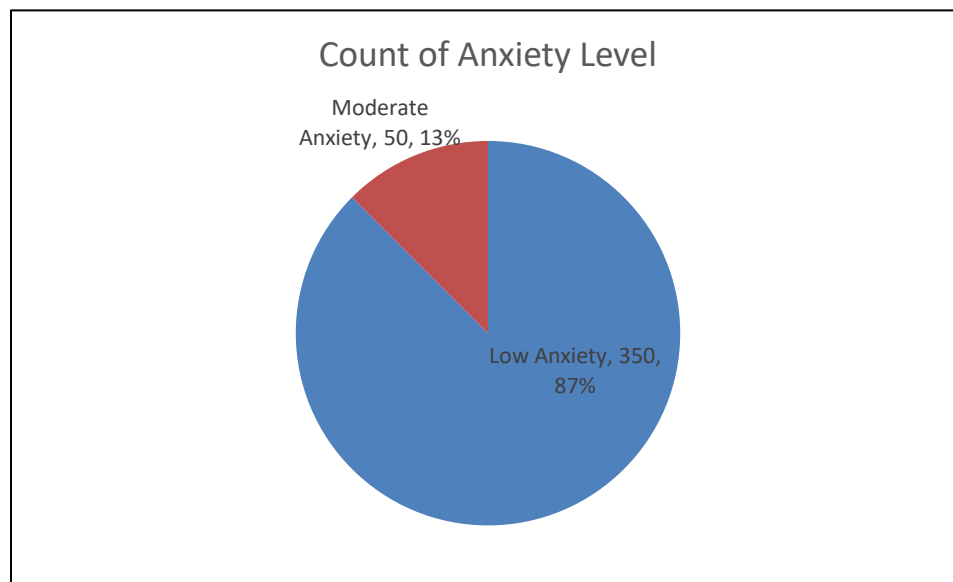


Fig 6. Pie chart for anxiety level

According to the aforementioned graph, the majority of respondents (n = 350; 87.00%) had low anxiety, whereas 50 (13.000%) had moderate anxiety. This is a representation of the various psychological feelings that are essential in explaining the respondents' various levels of workaholism. As this was earlier established in pervious chapters that workaholics are more prone to various psychological conditions (Akutsu et al., 2022)

4.2.2.3. Well-being and perceived work environment

For the purpose of displaying the insight of well-being and work environment scores, summary statistics tests were conducted. In addition to insights, the two variables' distribution was established, which was a crucial consideration in deciding whether to use a parametric or nonparametric test. The values are shown in table 3 down below.

Table 3. Results of the statics tests in brief

Statistics			
		Perceived Work Environment Score	Well-being
N	Valid	400	400
	Missing	0	0
Mean		143.97	9.38
Median		146.00	5.00
Std. Deviation		29.32	8.069
Skewness		-.148	0.630
Std. Error of Skewness		.122	0.122
Minimum		76	0
Maximum		210	29

According to the above-mentioned table, the average score for the well-being was 9.38 (SD = 8.07), while the perceived work environment received an average score of 143.97 (SD = 29.32).

The participants with the lowest and highest well-being ratings also had the lowest and highest perceived work environments scores, which were 76 and 210, respectively, in terms of values. The graph below demonstrates that, with a skewness value of $-.15$, the distribution of perceived work environment was almost normal.

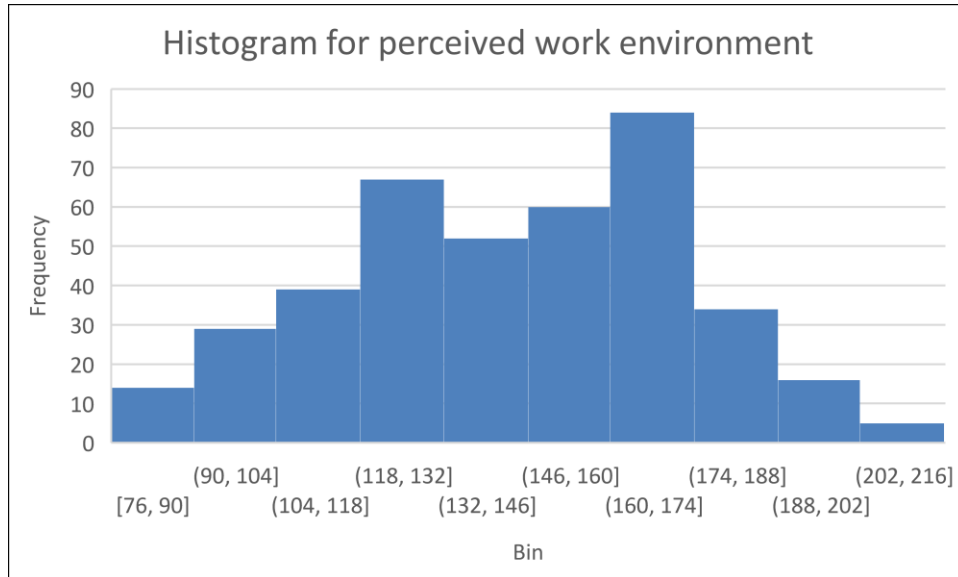


Fig 7. Perceived work environment scores histogram

The graph provides additional evidence that the perceived work environment scores are normal. Contrarily, well-being was more favorably skewed ($.63$), as shown by the histogram below.

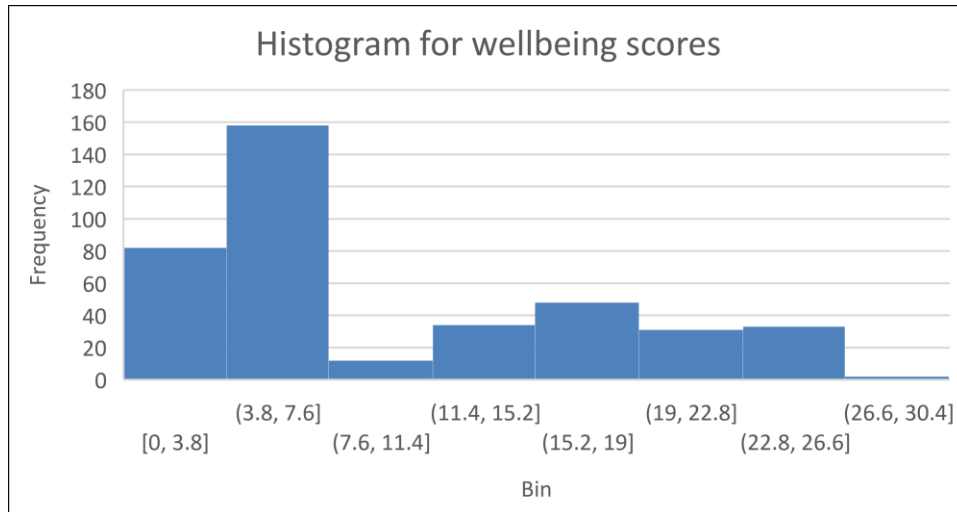


Fig 8 Well-being scores histogram

It was confirmed that some scores were biased to the right, indicating that the majority of participants reported lower levels of well-being. Supports reviews in the previous chapters (Matsudaira et al., 2013)

4.3. Inferential statistics

Inferential statistics of various types were used to test the study hypothesis. Below is a discussion about them.

Reliability

Table 4.1: Shows Cronbach's alpha for Perceived Work Environment, Anxiety Symptoms, Bergen Work Addiction Scale, and Psychological Well-being measures:

	No. of Items	Cronbach's Alpha
PWE Scale	41	.887
AS Scale	21	.822
BWAS	7	.810
PWB Scale	42	.805

The indices of Cronbach's alpha for all the four measures were satisfactory (Table 4.2). The Perceived Work Environment measure showed a high reliability coefficient of .887, Anxiety Symptoms Scale reported .822, Bergen Work Addiction Scale showed .810, and Psychological Well-being scale demonstrated a Cronbach's alpha of .805.

Table 4.2: Prior to test-test, Levene's test of equality of variance was checked between workaholics and non-workaholics:

Variables		Levene's Test for Equality of Variance	
		F	Sig.
PWE	Equal variances assumed	1.548	.214
AS	Equal variances assumed	2.742	.064
PWB	Equal variances assumed	1.063	.303

Levene's test (Levene, 1960) is calculated to test if two or more sample groups have equal variances. The term "homogeneity of variance" refers to sample variances that are the same. ANOVA and the t-test are examples of statistical tests that assume that sample group variances are equal. The Levene's test is used to validate that assumption.

It has been seen in the above results table that the variances are equal across the two sample groups as the *p*-values are larger than the 0.05 level of significance for WE, AS, and PWB measure respectively. It can be concluded that both the sample groups have equal variances on all the three measures between workaholics and non-workaholics.

H_{A1a}: Workaholics significantly exhibit negative work environment as compared to non-workaholics.

H_{A1b}, Workaholics significantly exhibit higher anxiety symptoms as compared to non-workaholics.

H_{A1c}, Workaholics significantly exhibit lower psychological well-being as compared to non-workaholics.

Table 4.3: Comparison analysis using t-test

	Workaholism	N	Mean	SD	t	df	P
PWE	Workaholic	43	139.16	14.858	-1.138	398	.256
	Non-Workaholic	357	144.55	16.790			
AS	Workaholic	43	23.53	1.667	8.340	398	.000**
	Non-Workaholic	357	13.68	3.748			
PWB	Workaholic	43	166.72	12.238	-1.971		
	Non-Workaholic	357	170.88	13.156		398	.049*

The results presented in the Table 4.3 explained the comparative statistics in mean scores of PWE between workaholic and non-workaholic bank employees of Delhi. The findings suggested an insignificant difference in the mean scores of PWE ($t = -1.138$, $df = 398$, $p = .256 > .05$ level of significance) between workaholic and non-workaholic bank employees. Thus, our hypothesis **H_{A1a}** which stated that significantly exhibit negative perceived work environment as compared to non-workaholic bank employees is not supported. The mean score of workaholic bank employees of Delhi on PWE was 139.16 and the mean score of non-workaholic bank employees was 144.55. The standard deviation of the workaholic and non-workaholic bank employees on the measure of

PWE was 14.858 and 16.790 respectively. The standard deviation calculates how far a given score deviates from the mean, which is the most typical value. Small standard deviations denote homogeneous groups or individuals who deviate from the norm infrequently, while big standard deviations denote individuals who deviate frequently from the norm. The mean scores of PWE among workaholic bank employees was ($M = 139.16$) lesser than the mean scores among non-workaholic bank employees ($M = 144.55$). However, this difference was not significant.

In contrast, a significant difference was observed in the mean scores of AS between workaholic and non-workaholic bank employees ($t = 8.340$, $df = 398$, $p = .000 < .01$ level of significance). Therefore, our hypothesis H_{A1b} which stated that workaholics have significantly higher psychological well-being as compared to non-workaholic bank employees is supported. The mean score of workaholic bank employees of Delhi on AS was 23.53 with an SD of 1.667, and that of non-workaholic bank employees was 13.68 with an SD of 3.748. The findings suggested that workaholism negatively determines the PWB among bank employees.

Moreover, the results explained that there is a significant difference in the mean scores of PWB ($t = -1.971$, $df = 398$, $p = .049 < .05$ level of significance) between workaholic and non-workaholic bank employees. Thus, our hypothesis H_{A1c} which stated that workaholics have significantly lower psychological well-being as compared to non-workaholic bank employees is supported. The mean score of workaholic bank employees of Delhi on PWB was 166.72 with an SD of 12.238 and the mean score of non-workaholic bank employees was 170.88 with an SD of 13.156. The results suggested that the mean score of PWB among non-workaholic bank employees is greater than the workaholics. It can be said that PWB of non-workaholic bank employees was better as compared to workaholics. It can be concluded that workaholism plays a significant role in determining the

PWB among bank employees. The results of (Akutsu et al., 2022) are aligned with the present results.

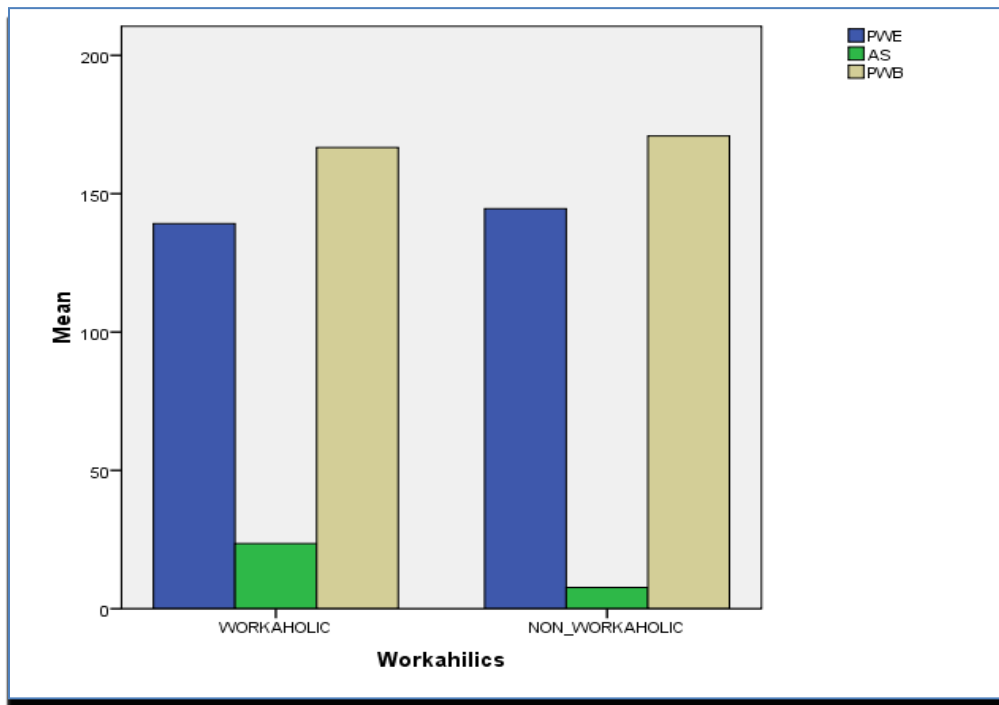


Figure 9: Mean comparisons

H_{A2a}: Male gender has significantly higher positive work environment as compared to female gender.

H_{A2b}, Male gender has significantly lower anxiety symptoms as compared to female gender.

H_{A2bc}, Male gender has significantly higher psychological well-being as compared to female gender.

	Gender	N	Mean	SD	T	<i>df</i>	<i>P</i>
PWE	Male	200	145.39	22.144	.969	398	.333
	Female	200	142.55	23.378			
AS	Male	200	9.64	3.996	.656	398	.512
	Female	200	9.12	3.153			
PWB	Male	200	170.84	13.065	.625	398	.532
	Female	200	170.02	13.173			

Table 4.4: Comparison analysis using t-test

Table 4.4 presented the comparative statistics of PWE, AS, and PWB among male and female bank employees of Delhi. It was found that the mean scores of PWE between male and female bank employees does not differ significantly ($t = .969$, $df = 398$, $p = .333 > .05$ level of significance). Thus, our hypothesis H_{A2a} which stated that male gender has significantly higher positive perceived work environment when compared to female gender is not supported. The mean score of male bank employees of Delhi on PWE was 145.39 with an SD of 22.144 and the mean score of female bank employees was 142.55 with an SD of 23.378. The mean score of PWE among male bank employees was, however, larger than the mean scores among female bank employees but this difference was not significant.

Similarly, an insignificant difference was observed in the mean scores of AS between male and female bank employees ($t = .656$, $df = 398$, $p = .512 > .05$ level of significance). Therefore,

our hypothesis H_{A2b} which stated that male gender has significantly lower AS when compared to female bank employees is not supported by the results of the study. The mean score of male bank employees of Delhi on AS was 9.64 with an SD of 3.996, and that of female bank employees was 9.12 with an SD of 3.153 and the difference was not significant.

Moreover, the findings suggested that there is no significant difference in the mean scores of PWB between male and female bank employees ($t = .625$, $df = 398$, $p = .532 > .05$ level of significance). Thus, our hypothesis H_{A2c} which stated that male gender has significantly higher psychological well-being as compared to female bank employees is not supported by the findings. The mean score of male bank employees of Delhi on PWB was 170.84 with an SD of 13.065 and the mean score of female bank employees was 170.02 with an SD of 13.173. It can be concluded that gender does not play any significant role in determining the PWB among bank employees. The parallel results were reported by Burke (1999).

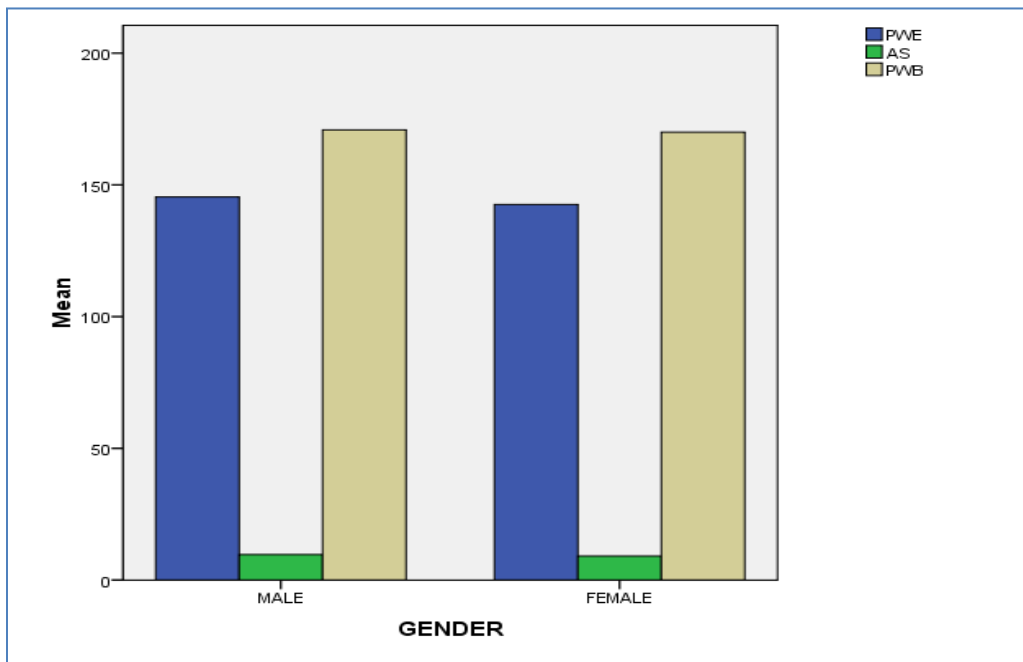


Figure 10: Means comparison.

H_{A3a}: Younger employees have significantly higher positive work environment as compared to older employees.

H_{A3b}, Younger employees significantly have lower anxiety symptoms as compared to older employees.

H_{A3c}, Younger employees have significantly higher psychological well-being as compared to older employees.

	Age	N	Mean	SD	T	df	P
PWE	Younger	210	139.13	20.804	-3.660	398	.000**
	Older	190	149.73	21.893			
AS	Younger	210	10.09	3.275	1.942	398	.053
	Older	190	8.52	3.728			
PWB	Younger	210	170.20	13.157	-.357	398	.721
	Older	190	170.67	13.179			

Table 4.5: Comparison analysis using t-test

The comparative statistics of PWE, AS, and PWB with reference to the age of bank employees of Delhi is presented Table 4.5. It was found that the mean scores of PWE between younger and older bank employees differ significantly ($t = -3.660$, $df = 398$, $p = .000 < .01$ level of significance). Thus, our hypothesis H_{A3a} which stated that younger employees have significantly lower positive perceived work environment as compared to older employees is supported. The mean score of younger bank employees of Delhi on PWE was 139.13 with an SD of 20.804 and the mean score of older bank employees was 149.73 with an SD of 21.893. The mean score of PWE among older bank employees was larger than the mean scores among younger bank employees. It can be concluded that older age bank employees have high PWE as compared to younger age group bank employees of Delhi.

In contrast, an insignificant difference was observed in the mean scores of AS between younger and older age bank employees of Delhi ($t = 1.942$, $df = 398$, $p = .053 > .05$ level of significance). Therefore, our hypothesis H_{A3b} which stated that younger employees have significantly lower AS when compared to older bank employees is not supported by the results. The mean score of younger bank employees on AS was 10.09 with an SD of 3.275, and that of older age bank employees was 8.52 with an SD of 3.179. However, the younger age bank employees exhibited higher levels of AS than that of older employees, but the difference was not significant, and it can be concluded that age is not associated with AS among bank employees.

Moreover, the findings suggested that there is no significant difference in the mean scores of PWB between younger and older age bank employees ($t = -3.57$, $df = 398$, $p = .721 > .05$ level of significance). Therefore, our hypothesis H_{A3c} which stated that younger employees have significantly higher psychological well-being as compared to older age bank employees is not supported. The mean score of younger bank employees of Delhi on PWB was 170.20 with an SD

of 13.157 and the mean score of older bank employees was 170.67 with an SD of 13.179. It can be concluded that age of bank employees does not plays any significant role in determining their PWB.

H_{A4}: There is a significant relationship between gender and workaholics among bank employees.

		W_NW		
		WORKAHOLIC	NON_WORKAHOLIC	Total
GENDER	MALE	21	179	200
	FEMALE	22	178	200
Total		43	357	400

Table 4.6a: Gender*workaholics Cross Tabulation using Phi Coefficient.

		Value	Approx. Sig.
Nominal by Nominal	Phi	-.008	.872
	Cramer's V	.008	.872
N of Valid Cases		400	

Table 4.6b: Correlations between gender and workaholics using Phi Coefficient

The Pearson's Phi Coefficient was employed to examine the relationship between two dichotomous variables such as gender and workaholics. The observations presented in the Table 4.6b demonstrated the relationship between gender and workaholics among bank employees of Delhi. The results suggested an insignificantly correlation between gender and workaholics among bank employees (Phi = $-.008$, $p = .872 > .05$ level of significance). Therefore, the hypothesis H_{A4} stating that there is a significant relationship between gender and workaholics among bank employees is not supported by the findings.

H_{A5a}: There is a negative relationship between work environment and anxiety symptoms among bank employees.

H_{A5b}: There is a positive relation between work environment and psychological well-being among bank employees.

H_{A5c}: There is a negative relationship between anxiety symptoms and psychological well-being among bank employees.

*. Significant at 0.05, **. Significant at 0.01 level.

Variables		PWE	AS	PWB
WPE	Pearson Correlation	-		
	Sig.			
AS	Pearson Correlation	$-.467^*$	-	
	Sig.	$.023$		
PWB	Pearson Correlation	$.280^*$	$-.574^{**}$	-
	Sig.	$.037$	$.002$	

Table 4.7: Inter-correlation matrix (N = 400).

The findings presented in the above table 4.8 showed the inter-correlations matrix between PWE, AS, and PWB among bank employees of Delhi. A moderately significant negative correlation existed between PWE and AS among bank employees ($r = -.467, p = .023 < .05$ level of significance). Therefore, the hypothesis H_{A5a} which states that there is a negative relationship between PWE and AS among bank employees is supported by the findings. Consequently, it can be concluded that the bank employees who had higher levels of PWE, reported lower levels of AS and vice-versa.

The explanations further showed a positive significant however, weak correlation between PWE and PWB in bank employees ($r = .280, p = .037 < .05$ level of significance). So, the hypothesis H_{A5b} which states that there is a positive relation between PWE and PWB is supported. Therefore, the results supported that PWE and PWB of bank employees are either directly or indirectly connected to each other, so the employees who experience a positive perception of work environment, have better PWB. In other words, it can be said if higher the levels of PWE, higher will be the levels of PWB among bank employees and vice-versa.

Besides, the H_{A5c} , which states that there is a positive relation between AS and PWB, was assessed. Pearson r correlation suggested that there is a moderately significant negative relationship between AS and PWB ($r = -.574, N = 400, p = .002 < .01$ level of significance). Therefore, the hypothesis H_{A5c} stating that there is a negative relationship between AS and PWB among bank employees is supported by the findings of this measure. It can be concluded that AS and PWB of bank employees are related in an opposite direction to each other. The employees who reported higher levels of AS, have poorer/lower levels of PWB and vice-versa.

In conclusion, it can be said that H_{A5} was fully supported by the findings. The results of different correlational hypotheses are displayed below by the scatter diagrams in figure numbers 11, 12 and 13 respectively.

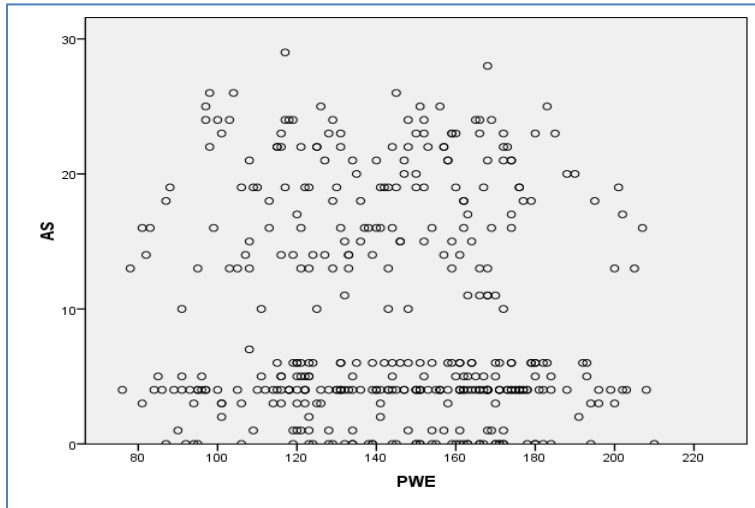


Figure 11: Scatter Diagram on Correlations between PWE and AS

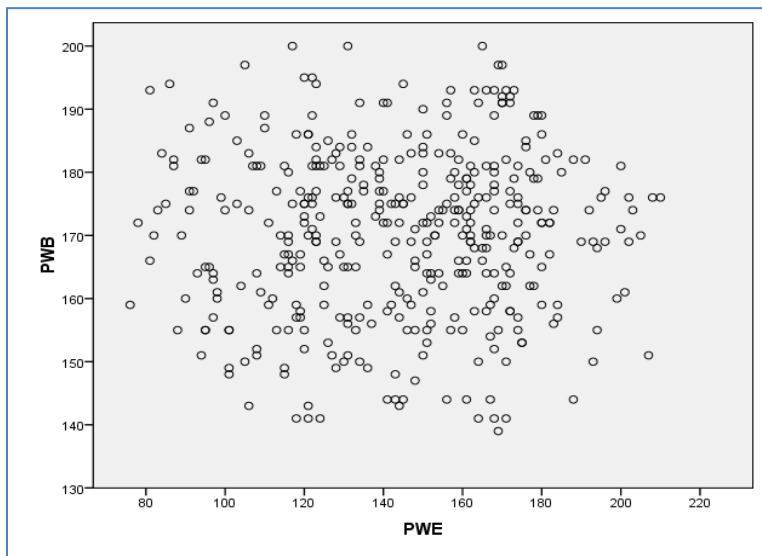


Figure 12: Scatter Diagram on Correlations between PWE and PWB

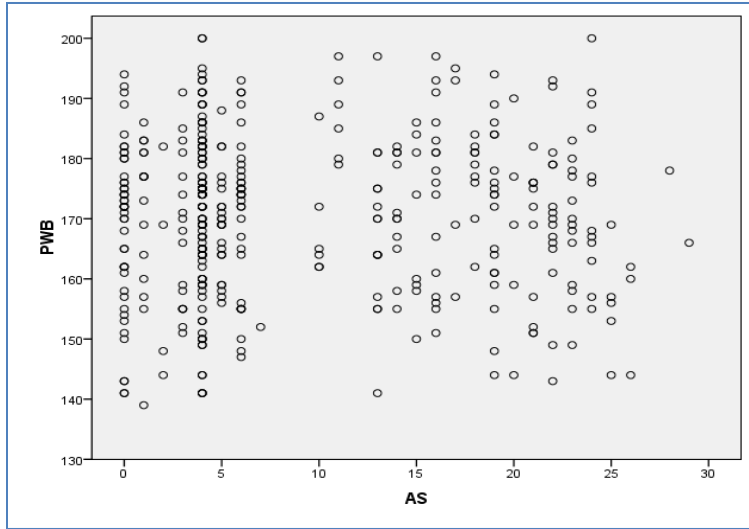


Figure 13: Scatter Diagram on Correlations between AS and PWB.

H_{A6a}: There is a negative relationship between work environment and anxiety symptoms among workaholic bank employees.

H_{A6b}: There is a positive relation between work environment and psychological well-being among workaholic bank employees.

H_{A6c}: There is a negative relationship between anxiety symptoms and psychological well-being among workaholic bank employees.

*. Significant at 0.05 level.

		PWE	AS	PWB
PWE	Pearson Correlation	-		
	Sig.			
AS	Pearson Correlation	-.473*	-	
	Sig.	.041		
PWB	Pearson Correlation	.291*	-.580*	-
	Sig.	.013	.024	

Table 4.8: Correlation matrix among workaholics (N = 43).

Pearson's coefficient of correlation was used to examine the inter-correlations between PWE, AS, and PWB among workaholic bank employees. The results of the correlation-matrix showed that there are significant relationships between PWE, AS, and PWB among bank employees of Delhi, India. The relationship between PWE and AS was significant and moderately negative ($r = -.473$, $N = 43$, $p = .041 < .05$ level of significance). Therefore, the hypothesis H_{A6a} presumed that there is a negative relationship between PWE and AS among workaholic bank employees is retained. The bank employees who exhibited positive PWE, had lower levels of AS and vice-versa.

The study's results showed a very weak but significant positive association between PWB and PWE among bank employees characterized as workaholics ($r = .291$, $p = .013 < .05$ level of

significance). The findings, however, were consistent with Hypothesis H_{A6b}, which postulated a positive relationship between PWE and PWB among bank employees. The results show that bank employees' PWE and PWB are favorably related, either directly or indirectly. Particularly, employees who feel that their workplace is good likely to be in better psychological shape. Conversely, it can be deduced that higher levels of PWE among bank personnel are related to higher levels of PWB, and vice versa.

Additionally, the H_{A6c}, which suggested an unfavorable link between PWB and AS, was looked at. AS and PWB had a marginally significant negative association, according to the analysis utilizing Pearson's correlation coefficient ($r = -.574$, $N = 43$, $p = .002 < .01$ level of significance). As a result, the findings confirm hypothesis H_{A6c}, which states that relationship between AS and PWB among bank employees. The relationship between bank employees' PWB and AS can be extrapolated to be inverse. Employees who reported higher degrees of anxiety symptoms typically display lower levels of PWB, and vice versa.

Therefore, the hypothesis H_{A6} presumed that there is a negative relationship between PWE and AS (H_{A6a}), a positive relation between PWE and PWB (H_{A6b}), and a negative relationship between AS and PWB (H_{A6c}) among workaholic bank employees is fully not supported by the findings of the study.

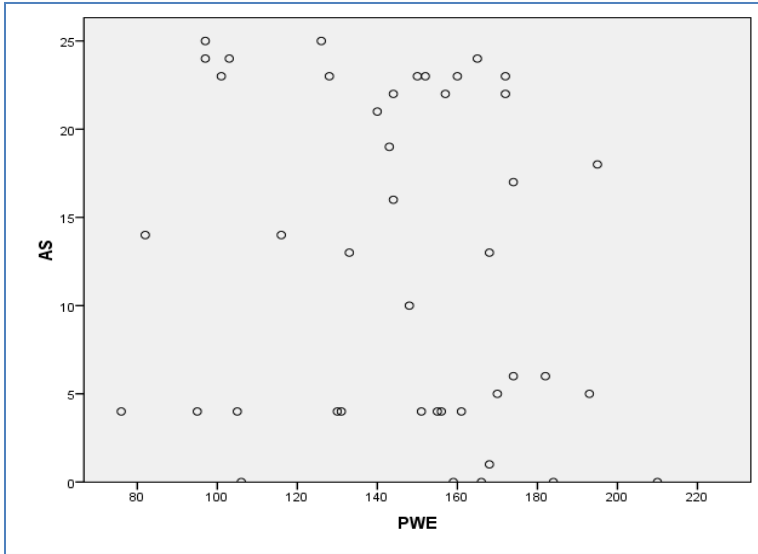


Figure 14: Scatter Diagram on Correlations between PWE and AS

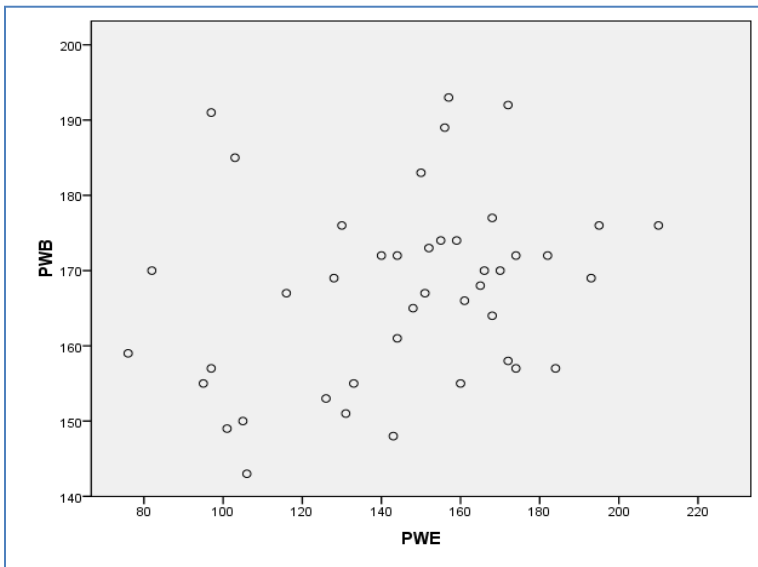


Figure 15: Scatter Diagram on Correlations between PWE and PWB

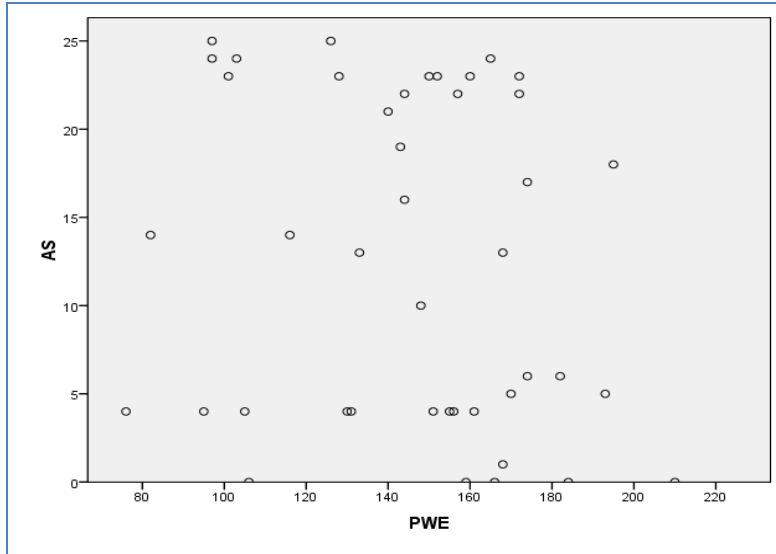


Figure 16: Scatter Diagram on Correlations between AS and PWB

H_{A7a}: There is a negative relationship between work environment and anxiety symptoms among non-workaholic bank employees.

H_{A7b}: There is a positive relation between work environment and psychological well-being among non-workaholic bank employees.

H_{A7c}: There is a negative relationship between anxiety symptoms and psychological well-being among non-workaholic bank employees.

		PWE	AS	PWB
PWE	Pearson Correlation	-		
	Sig. (2-tailed)			
AS	Pearson Correlation	-.450	-	
	Sig. (2-tailed)	.015		
PWB	Pearson Correlation	.276	-.561	-
	Sig. (2-tailed)	.026	.002	

Table 4.9: Correlation matrix among non-workaholics (N = 357)

In order to investigate the relationships between PWE, AS, and PWB among non-workaholic bank employees, Pearson's coefficient of correlation was used. The correlation matrix's findings revealed that among bank employees in Delhi, India, PWE, AS, and PWB have meaningful correlations. PWE and AS had a moderately negative and significant connection ($r = -.450$, $N = 357$, $p = .015 < .05$ level of significance). As a result, the H_{A7a} hypothesis- which postulated a negative link between PWE and AS among non-workaholic bank employees- was retained. When bank personnel showed positive PWE, their AS levels were lower, and the opposite was true.

The study's findings revealed a very slight but statistically significant positive correlation between PWB and PWE among bank employees who were considered non-workaholics ($r = .276$, $p = .026 < .05$ level of significance). However, the results supported Hypothesis H_{A7b} , which

proposed a positive relation between PWE and PWB among non-workaholic bank employees is supported by the findings. The findings demonstrate a positive relationship between PWE and PWB among bank personnel, either directly or indirectly. Employees who feel happy at work are more likely to be in good psychological health. On the other hand, it may be inferred that higher levels of PWB and PWE among bank employees are favorably related to one another.

The H_{A7c} was also examined, which indicated a negative correlation between PWB and AS. The research using Pearson's correlation coefficient revealed a moderately significant negative connection between AS and PWB ($r = -.561$, $N = 357$, $p = .002 < .01$ level of significance). The results supported hypothesis H_{A7c} , which claims that a negative relationship between AS and PWB among nonworkaholic bank employees. It is possible to assume that the PWB and AS of bank personnel are inversely related. Higher levels of anxiety symptoms among the employees are often accompanied by lower levels of PWB, and vice versa.

In conclusion, the hypothesis H_{A7} stating that there is a negative relationship between PWE and AS (H_{A7a}), a positive relation between PWE and PWB (H_{A7b}), and a negative relationship between AS and PWB (H_{A7c}) among nonworkaholic bank employees is fully supported.

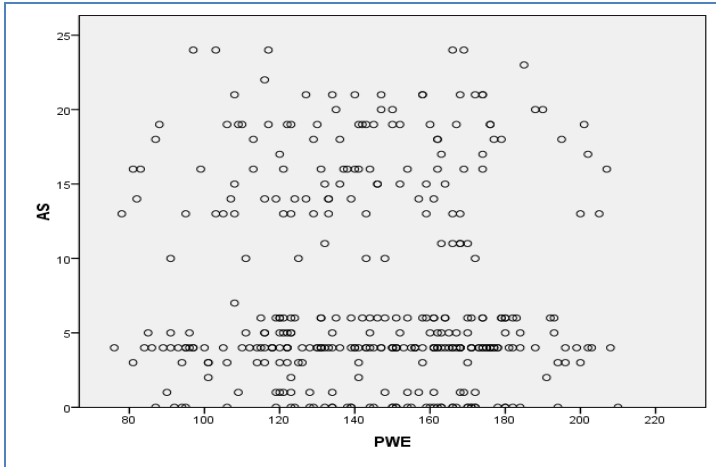


Figure 17: Scatter Diagram on Correlations between PWE and AS

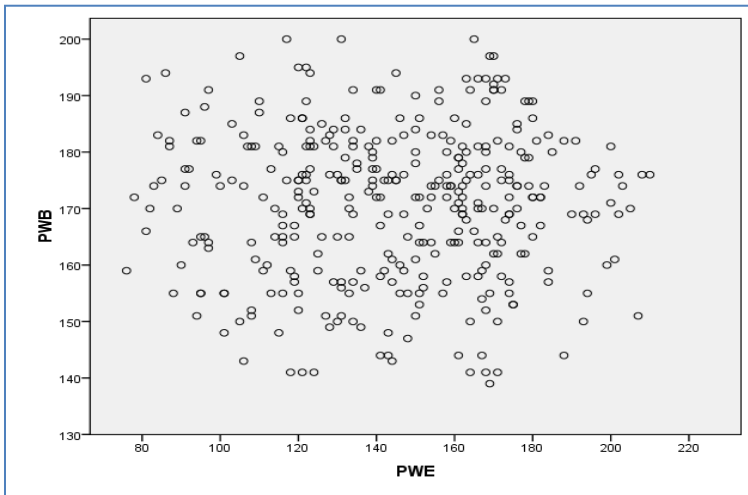


Figure 18: Scatter Diagram on Correlations between PWE and PWB

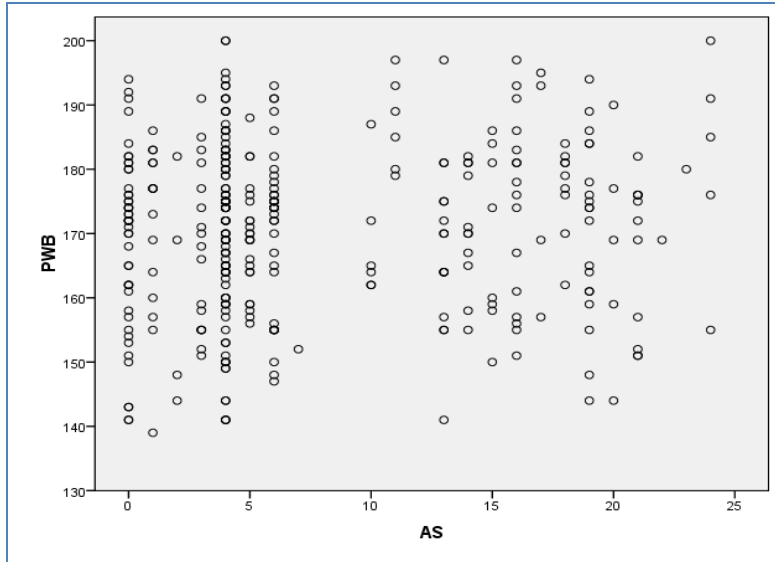


Figure 19: Scatter Diagram on Correlations between AS and PWB

4.3.6.5. Hypothesis conclusion

According to the findings of the study mentioned above, it can be shown that the respondents' anxiety levels are unaffected by the age group they belong to. This is also true for their gender, with the male considerably having the same levels of anxiety as the female when the workaholic and non-workaholic groups are combined. The difference was not significant for the mean score. In terms of well-being, concluded that age of bank employees does not plays any significant role in determining their psychological well-being. It's concluded that gender does not plays any significant role in determining the psychological well-being among bank employees. The mean score of perceived work environment among older bank employees was larger than the mean scores among younger bank employees It can be concluded that older age bank employees have high perceived work environment as compared to younger age group bank employees of Delhi. The mean score of perceived work environment among male bank employees was, however, larger than the mean scores among female bank employees but this difference was not significant.

CHAPTER 5

CHAPTER 5: SUMMARY AND CONCLUSIONS

5.1. Study Summary

The anxiety symptoms, psychological health, and work environment among workaholic and non-workaholic groups of banking employees in Delhi were examined in this study. It involved people who were of working age, various job positions (trainee, mid-level manager, non-manager, top level manager, and other management jobs), both men and women, and states of workaholism and non-workaholism.

The well-being and mental health of employees have elevated to the top of organizational priorities in today's hectic and competitive work environment. The effect of work-related stress, high workload requirements, and the prevalence of workaholism on employees' psychological wellbeing has come under scrutiny. For both researchers and organizations aiming to develop supportive and healthy work environments, it is essential to comprehend the relationship between workaholism, perceived work environment, anxiety symptoms, and psychological well-being.

Workaholism has been linked to adverse effects such increased stress levels, reduced work-life balance, and decreased general well-being (YILMAZ, et al., 2021; Andreassen, et al., 2019). Workaholism is characterized by an uncontrollable need to work excessively and an obsession with work. Workaholism has received a lot of attention because of the potential harm it could do to an employee's mental health and general quality of life.

On the other hand, employees' subjective assessments of their workplace setting, which includes elements like job requirements, autonomy, social support, and the general climate inside

the business, are included in the concept of the perceived work environment. According to studies (Hauff et al., 2022; Capone et al., 2022) a favorable work environment can promote employees' well-being, job satisfaction, and general engagement. On the other hand, a bad work environment marked by excessive demands, a lack of control, and insufficient social support can make employees more stressed out and less happy.

People who work in stressful circumstances frequently experience anxiety symptoms, such as excessive worry, restlessness, and physical signs of anxiety (Lozano, et al., 2022). High levels of anxiety symptoms can have negative effects on an employee's overall effectiveness, as well as their psychological well-being (Mensah et al., 2023). A key component of general well-being is psychological well-being (PWB), which includes people's subjective assessments of their psychological functioning, life satisfaction, and positive affect (Puce, et al., 2023). Higher levels of psychological well-being are linked to stronger resilience, better work outcomes, and overall health, according to studies (Li, & Hasson, 2020).

Despite the rising interest in workaholism, perceived workplace conditions, anxiety symptoms, and psychological well-being, little study has concurrently looked at how these factors interact, especially in the context of bank employees. By examining the relationships between workaholism, perceived work environment, anxiety symptoms, and psychological well-being among workaholic and nonworkaholic bank employees, the current study attempted to close this gap. Organizations can create focused interventions to improve work conditions, establish a healthy work-life balance, and boost employee wellbeing by recognizing these links. The study's results are examined in relation to the stated goals and pertinent literature:

5.2. Discussion

MEANS COMPARISON ANALYSIS

5.2.1 Workaholism and Perceived Work Environment

Objective 1: To establish if there is significant difference between workaholic & non-workaholic group over work environment, anxiety symptoms, and psychological well-being.

Hypothesis H_{A1a}: Workaholics significantly exhibit negative work environment as compared to non-workaholics.

The current study sought to assess and compare the perceived work environment (PWE) between workaholic and non-workaholic bank employees in Delhi. Comparative statistics between these two groups' mean PWE scores were shown in the findings. The findings showed that there was no significant distinction between bank employees who were workaholics and those who weren't in their mean PWE scores. The result implies that these groups' perceptions of their workplaces did not differ statistically significantly. As a result, our hypothesis H_{A1a}, which proposed that workaholic bank employees would exhibit a significantly more negative perception of the work environment compared to non-workaholic bank employees, is not supported.

The mean PWE score in Delhi among workaholic bank employees was 139.16, compared to 144.55 for non-workaholic bank employees. In comparison to workaholic bank employees, non-workaholic bank employees generally felt that their workplace was slightly better. This variation in mean scores, while was not statistically significant. These results imply that bank employees in Delhi, both workaholic and non-workaholic, have similar views of their workplace. This suggests that there may not be a major difference in the factors affecting how these two groups perceive

their workplaces. It is significant to note that although there was a little difference in the mean scores, there was no statistically significant difference between the groups, suggesting that this difference was most likely caused by random fluctuation. The results of our study corroborate those of earlier research, including one by Bayhan and colleagues (Bayhan, et al., 2020), who investigated the connection between workaholism and employee wellbeing among dual-earner employees across industries. The study's findings revealed that workaholism and employee wellbeing had no meaningful link.

The potential ramifications of these discoveries must be considered. The lack of a statistically significant difference in PWE between workaholic and non-workaholic bank employees shows that both groups had similar opinions of the workplace. This refutes the idea that a workaholic employee's workplace environment is worse. It suggests that workaholism among bank employees in Delhi may be caused by various other reasons other than the workplace itself. There are several other reasons for example the peer group pressure and faced by employees.

It is essential to evaluate these findings in light of the limitations of the study. First off, the conclusions of this study cannot be applied to other businesses or places because it was restricted to the Delhi banking industry. Future research should think about including a wider variety of participants to have a better grasp of the connection between workaholism and the workplace.

The study's use of self-report measures to gauge perceptions of the work environment may have been biased by the participants' perspectives and vulnerable to subjective interpretation. The accuracy and validity of the results could be improved by using several data sources or as a supplement to self-report measures.

The article's results demonstrate that there is no discernible difference in how workaholic and non-

workaholic bank employees in Delhi perceive their workplaces. This shows that both groups have similar perceptions of the workplace. To fully comprehend the dynamics at play, future study should keep examining the intricate interactions between workaholism and the numerous elements that affect the workplace.

Workaholism and AS

Objective 1: To establish if there is significant difference between workaholic & non-workaholic group over work environment, anxiety symptoms, and psychological well-being.

Hypothesis H_{A1b}: Workaholics significantly exhibit higher anxiety symptoms as compared to non-workaholics.

The current study investigated and compared anxiety symptoms (AS) in Delhi bank employees who were and weren't workaholics. The findings show a significant difference in these two groups' mean AS scores. This finding supports our hypothesis H_{A1b}, which proposed that workaholics would have significantly higher psychological well-being compared to non-workaholic bank employees.

In Delhi, the mean AS score for workaholic bank employees was 23.53, compared to 13.68 for non-workaholic bank employees. This large difference in mean scores shows that bank employees who are workaholics experienced much more anxiety symptoms than their non-workaholic colleagues.

These results imply that workaholism is a significant factor in determining bank employees' psychological well-being (PWB). The increased levels of anxiety symptoms among workaholics suggest that their excessive drive for work and the corresponding actions and attitudes may have

a negative impact on their mental health and general well-being. It is significant to notice that the non-workaholic bank employees' mean AS score was comparably lower, indicating that their levels of anxiety symptoms were lower.

Workaholism has an adverse effect on employees' psychological wellbeing, as evidenced by the large difference in AS between workaholic and non-workaholic bank employees. Workaholism, which is characterized by an excessive devotion to and concern with work, can raise stress and anxiety levels and have detrimental impacts on one's general well-being.

The implications of these findings for management and organizations are practical. Given the detrimental effects of workaholism on employee wellbeing, companies must put policies and interventions into place that encourage work-life balance, stress management, and positive workplace cultures. This may entail drawing boundaries between work and personal time, promoting leisure pursuits, developing a positive workplace culture, and giving staff members the tools, they need to manage stress at work. The reasons for the findings could be for a variety of factors, including the fact that a workaholic may first conjure up images of a successful person due to the long hours they spend doing and thinking about their jobs. The most enticing feature of workaholism may be this. Unfortunately for workaholics, working more hours may not always translate into greater levels of professional success; rather, it may increase their stress levels (May, 2022). Workaholism has been linked to a number of unfavorable job outcomes. Shimazu and colleagues (2015b) discovered that workaholism was associated with poorer levels of job satisfaction in a longitudinal study of industrial employees. Balducci et al., (2016) observed that workaholics and their observers both reported experiencing higher levels of job-related negative affect, suggesting that this lower job satisfaction may be visible beyond just the employee. According to study Taris et al., (2005), additional effects of workaholism include job stress,

weariness, and strain. Unfortunately, workaholism can have effects on the workplace that go beyond the workaholic themselves. A recent study of nursing staff found that workaholism was significantly correlated with negative work-related incidents, including dozing at work or while driving and injuring or almost injuring oneself, patients, or equipment (Andreassen et al., 2018). This suggests that workaholics may be more likely to make mistakes on the job.

In conclusion, the present study showed a substantial difference in the symptoms of anxiety between bank employees who were workaholics and those who were not. Workaholics reported increased degrees of anxiety symptoms, which is a sign that their mental health has been negatively impacted. These results highlight the necessity of combating workaholism and putting measures in place to enhance employee well-being inside enterprises. In order to provide focused interventions and employee support systems, future research should continue to investigate the underlying mechanisms and variables causing workaholism and its effects on employee mental health.

Workaholism and PWB

Objective 1: To establish if there is significant difference between workaholic & non-workaholic group over work environment, anxiety symptoms, and psychological well-being.

Hypothesis H_{A1c}: Workaholics significantly exhibit lower psychological well-being as compared to non-workaholics.

Moreover, the study aimed to examine and compare Psychological Well-Being (PWB) between workaholic and non-workaholic bank employees in Delhi. Examining and contrasting the psychological well-being (PWB) of workaholic and non-workaholic bank employees in Delhi. The results showed a substantial difference in these two groups' mean PWB scores. As a result, our

hypothesis H_{A1c}—which postulated that workaholics would have significantly lower psychological well-being compared to non-workaholic bank employees, is supported. While non-workaholic bank employees in Delhi had a mean PWB score of 170.88, workaholic bank employees' mean score was 166.72. The fact that the mean scores differed significantly between the two groups of bank employees shows that the non-workaholics had much greater levels of psychological well-being than their workaholic counterparts. The results in this area revealed that workaholics have lower psychological well-being. There might be various reasons behind such association of workaholism and PWB. Some of them are explained considering the literature as follows. The term "workaholic" first appeared in Oates' works in 1971, who describes it as one's "addiction to work, [and] the compulsion or the uncontrollable need to work incessantly" (p. 1). Despite the rise in scholarly interest in the topic, there is currently no commonly recognized conception of the term. Workaholism has been defined differently by different academics over the years. Some (Mosier 1983) focused on the number of hours worked, while others (Oates 1971) defined it as "an addiction involving an uncontrollable need or compulsion to work continuously." Even though the first idea of workaholism is reasonable, Schaufeli et al., (2008) criticize it for ignoring the addictive character of workaholism. According to the study, people can put in long hours without developing a work addiction for several reasons, including financial difficulties, unhappy marriages, or societal pressures. On the other hand, workaholics put in more effort than is necessary due to their compulsive inner drive rather than because of outside variables like those mentioned above (Schaufeli et al., 2008).

Despite the assertions of some academics that workaholism may be a beneficial trait, Schaufeli et al., (2008) contend that emphasizing the positive aspect may muddy the definition of workaholism. The study authors asserted that workaholism should be viewed as a harmful

construct having two dimensions: excessive and obsessive working. According to Schaufeli et al.'s definition of workaholism (2008, p. 204), we measured it in this study along these two aspects and defined it as "a tendency to work compulsively and excessively." Working excessively, according to this conclusion, entails "allocating an exceptional amount of time to work and working more than expected to meet organizational and economic requirements." When someone works obsessively, they are preoccupied with it and think about it constantly, even when they are not working (Schaufeli et al., 2008, p. 204). Workaholism, which entails spending an excessive amount of time at work, is expected to have a negative impact on wellbeing because there is insufficient opportunity to recover and feel good. Workaholism reflects a person's hedonic (pleasant feeling) and eudemonic (satisfaction and purpose) experiences, according to (Ryan and Deci 2001). Therefore, research has repeatedly shown that workaholics experience higher levels of stress and lower levels of psychological health than non-workaholics, regardless of how workaholism is understood and assessed (Brummelhuis & Rothbard 2018; Caesens et al., 2014; Shimazu et al., 2015; Taris et al., 2005).

The results show that workaholism has a significant impact on bank employees' psychological wellbeing. The lower PWB among workaholic bank employees may indicate a negative impact on their general well-being from their long hours and obsession with their jobs. The mean PWB scores of the non-workaholic bank employees, on the other hand, were higher, indicating better psychological wellbeing.

These findings have significant management and organizational ramifications. Employers must be aware of the harm workaholism causes to staff members' wellbeing and take proactive steps to encourage a better work-life balance. This can entail developing a welcoming workplace environment that supports self-care, stress management, and work-life integration.

5.2.2 Gender and PWE, AS, and PWB

Objective 2: To examine gender differences in the work environment, anxiety symptoms, and psychological well-being among bank employees.

Hypothesis H_{A2}: Male gender has significantly higher positive work environment as compared to female gender.

H_{A2b}, Male gender has significantly lower anxiety symptoms as compared to female gender.

H_{A2bc}, Male gender has significantly higher psychological well-being as compared to female gender.

In the current study, male and female Delhi bank employees were compared regarding their perceptions of their work environments, anxiety symptoms, and psychological well-being. The comparison statistics did not show any appreciable variations in the PWE, AS, and PWB mean scores between these two gender groups. Therefore, our H_{A2} hypothesis, which predicted that male employees would have significantly higher positive perceived work environment (H_{A2a}), lower levels of anxiety symptoms (H_{A2b}), and higher psychological well-being (H_{A2c}) compared to female employees, is not entirely supported.

The results show that there are no statistically significant differences between male and female bank employees in the mean PWE, AS, and PWB scores. This implies that both male and female employees have similar views of their workplaces, experience anxiety symptoms, and display psychological wellbeing. The lack of statistically significant differences in these variables

suggests that gender may not be a reliable indicator of how bank employees in Delhi view their workplace, their anxiety symptoms, or their psychological well-being.

These findings cast doubt on the notion that perceptions of the workplace, the manifestation of anxiety symptoms, and general psychological health are naturally different for men and women. While gender-based disparities have been noted in a few areas of employment and mental health, the current study raises the possibility that gender may not be a determining factor in these particular variables in the context of Delhi bank employees. The findings are corroborated by earlier literature. Male and female clinical adults were shown to have similar levels of reported stress, symptoms, and well-being (Gordon et al., 2022; Carmody & Baer, 2008).

It is crucial to interpret these results considering the study's constraints. First, the research was limited to Delhi's banking business, making it difficult to generalize the results to other industries or regions. In order to have a deeper knowledge of the association between gender, work environment, anxiety symptoms, and psychological well-being, future studies should encompass a wider variety of businesses and countries.

The study's findings show that there are no appreciable differences between male and female bank employees in Delhi in terms of how they view their work environment, their anxiety symptoms, or their psychological well-being. This implies that in this situation, gender may not be the only component that determines these characteristics among bank employees. To fully comprehend the mechanisms at work, future research should keep examining the intricate interactions between gender, work-related characteristics, and mental health outcomes. In order to develop a healthy and encouraging workplace culture, firms must also promote inclusive work settings that put the wellbeing of all employees, regardless of gender, first.

5.2.3 Age and PWE, AS, and PWB

Objective 3: To establish the relationship between age group over work environment, anxiety symptoms, and psychological well-being.

Hypothesis H_{A3}: Younger employees have significantly higher positive work environment as compared to older employees.

In the current study, the perceptions of the work environment (PWE) among younger and older bank employees in Delhi were compared. The results showed a substantial difference in these two age groups' mean PWE scores. Thus, our hypothesis H_{A3a} which predicted that younger employees would have significantly lower positive perceived work environment compared to older employees, is supported. It was discovered that the mean PWE score among older bank employees was higher than the mean PWE score among younger bank employees. By comparison to their younger counterparts, older employees appear to have a more positive perception of their workplace, according to this considerable difference. The perception of the work environment is better for older bank employees in Delhi.

These results show that bank employees' perceptions of the workplace may be influenced by their age. Older employees may have gathered more job experience and built better bonds with co-workers, managers, and the company, which helped shape their favorable opinions of the workplace. They might also feel more secure in their jobs and more stable, which could improve their opinion of the workplace.

In summary, the current study discovered a considerable difference in how younger and older bank employees regarded their workplaces. Compared to their younger colleagues, older employees reported a higher level of pleasant perceived work environment. These results imply that the perspective of the workplace among bank employees is influenced by age. There may be a variety of explanations for the correlational study's findings, and a few of these explanations are examined in the context of the supporting literature already in existence. Medical staff coping strategies were correlated with sociodemographic factors including gender and age (Costa et al., 2022). According to Fields et al. (2022) older age was associated with enhanced favorable effects and lower stress, adverse effects, and depressive symptoms.

Objective 3: To establish the relationship between age group over work environment, anxiety symptoms, and psychological well-being.

Hypothesis H_{A3b} and H_{A3c}

H_{A3b}, Younger employees have significantly lower anxiety symptoms as compared to older employees.

H_{A3c}, Younger employees have significantly higher psychological well-being as compared to older employees.

The study also sought to evaluate and contrast the psychological well-being (PWB) and anxiety symptoms (AS) of younger and older bank employees in Delhi. The results showed that there was a negligible difference in the mean AS and PWB scores between these two age groups. As a result, the findings do not support our hypotheses H_{A3b} and H_{A3c}, which proposed that younger employees would have significantly lower anxiety symptoms and higher psychological well-being compared to older bank employees. Age alone may not be a determining factor in anxiety

symptoms and psychological well-being among bank employees in Delhi, as evidenced by the lack of statistically significant variations in the mean AS and PWB scores between younger and older employees. It is significant to highlight that the average levels of anxiety symptoms and psychological well-being were equal among younger and older employees. Numerous research has confirmed the findings, one of which revealed no relationship between age and indicators of worry and social isolation (Fields et al., 2022).

These results cast doubt on the notion that younger employees would show fewer signs of worry and have greater psychological wellbeing than their more senior counterparts. It's likely that factors other than age, such personality traits, life circumstances, and work-related factors, have a bigger impact on anxiety symptoms and psychological health at work. The conclusion is that there were no appreciable changes in anxiety symptoms or psychological well-being between younger and older bank employees in Delhi, according to the current study. These results imply that, in this situation, age may not be the only variable that determines these variables among bank employees. To fully comprehend the mechanisms at work, future research should keep examining the intricate interactions between age, employment-related characteristics, and mental health outcomes. In order to build a welcoming and inclusive workplace for all employees, firms should also place a high priority on fostering employee well-being across all age groups, taking individual characteristics into account, and managing stressors associated to the workplace.

5.2.4 Correlational Studies

Correlation between Gender and Workaholism

Hypothesis H_{A4}: There is a significant relationship between gender and workaholics among bank employees.

The current study sought to investigate the association between gender and workaholism among Delhi bank employees. The findings, as shown in Table 4.7b, suggested that there was no statistically significant link between gender and workaholism among bank employees. As a result, the findings do not support hypothesis H_{A4}, which hypothesized a substantial link between workaholism and gender within bank employees.

The lack of a statistically significant relationship between gender and workaholics shows that gender may not be the only factor influencing whether people develop workaholism among Delhi bank employees. This research calls into question the notion that workaholism tendencies among bank employees are largely influenced by gender. The findings concur with another research like Balducci et al., (2022) study, which looked at the cross-lagged relationship between workaholism and interpersonal consequences to better understand the causes of workplace bullying behavior (i.e., perpetration of bullying). The data on workaholism and gender provided a weak explanation for the connection between the two components.

The study's findings indicate that there is no causal connection between gender and workaholism among Delhi bank employees. These results imply that, in the setting of bank employees, gender may not be the only variable influencing workaholism inclinations. Future studies should continue to examine the complex nature of workaholism and consider additional pertinent aspects that can influence the emergence of this type of behavior. To reduce the hazards connected with workaholism and guarantee the wellbeing of their workforce, organizations should also concentrate on encouraging work-life balance and creating a healthy work environment for all employees, regardless of gender.

5.2.5 Correlation between PWE and AS

Objective 5: To examine the inter-correlations matrix between work environment, anxiety symptoms, and psychological well-being in workaholic and non-workaholic bank employees.

Hypothesis H_{A5}, H_{A6}, and H_{A7}

H_{A5a}: There is a negative relationship between work environment and anxiety symptoms among bank employees.

H_{A6a}: There is a negative relationship between work environment and anxiety symptoms among workaholic bank employees.

H_{A7a}: There is a negative relationship between work environment and anxiety symptoms among non-workaholic bank employees.

The current study sought to investigate the association between bank employees' perceived work environments (PWE) and anxiety symptoms (AS). The findings supported hypothesis H_{A5a}, which stated that there is a negative relationship between PWE and AS among bank employees, by showing a moderately significant negative correlation between PWE and AS. Moreover, the findings supported H_{A6}, and H_{A7}. These outcomes are consistent with past research and theoretical frameworks that emphasize the impact of the workplace on people's wellbeing. Because PWE and AS have a negative connection, it is likely that bank employees who reported higher levels of PWE also reported lower levels of AS, and vice versa. This research suggests that lower levels of anxiety symptoms among employees are related with a more upbeat and supportive work environment. The work environment, characterized by factors such as job control, social support, and

organizational culture, plays a crucial role in shaping employees' psychological well-being and overall mental health.

The discovered negative connection is consistent with the Job Demands-Resources (JD-R) concept, which contends that a productive workplace with sufficient resources and manageable job demands can help employees experience less stress and anxiety. Employees are less likely to exhibit severe symptoms of anxiety when they believe their workplace is encouraging, engaging, and supportive of their well-being. These results highlight how crucial it is for financial firms to establish and maintain a healthy work environment. By encouraging open communication, offering chances for skill development and advancement, supporting work-life balance, and making sure there are enough resources and support mechanisms in place, managers and leaders should give efforts to improve PWE top priority. Such programs can improve bank employees' general wellbeing by reducing the symptoms of anxiety.

The results of the current study add to the body of literature that highlights the importance of the workplace environment in determining employees' mental health outcomes. Similar unfavorable correlations between PWE and different signs of psychological discomfort, such as anxiety symptoms, have been shown in several research. For instance, study by Bakker et al., (2005) discovered a link between a good work environment, characterized by high job resources and low job demands, and reduced levels of employee burnout and anxiety symptoms.

But it's important to be aware of the shortcomings of the current study. The study's cross-sectional methodology made it challenging to identify the origin of AS or deduce its temporal relationships with PWE. A more thorough understanding of the dynamic nature of this link would

come from longitudinal studies that record changes in the work environment and anxiety symptoms over time.

In conclusion, the current study demonstrated that among bank employees, PWE and AS had a marginally significant negative connection. These findings support the hypothesis that a more positive work environment is associated with lower levels of anxiety symptoms. The study underscores the importance of fostering a positive work environment within banking organizations to promote employee well-being and reduce anxiety symptoms. Future research should further investigate the mechanisms through which PWE influences anxiety symptoms and explore interventions aimed at enhancing the work environment to improve employee mental health outcomes.

Correlation between PWE and PWB

H_{A5b}, H_{A6b}, and H_{A7b}

H_{A5b}: There is a positive relation between work environment and psychological well-being among bank employees.

H_{A6b}: There is a positive relation between work environment and psychological well-being among workaholic bank employees.

H_{A6b}: There is a positive relation between work environment and psychological well-being among workaholic bank employees.

The results supported hypothesis H_{A5b}, H_{A6b}, and H_{A7b}, which proposed a positive link between these variables and found a positive, if weak, correlation between PWE and PWB. These

findings imply that psychological well-being levels are greater among bank employees who have a positive view of their workplace.

The association between PWE and PWB is favorable, which is consistent with earlier studies that highlighted the significance of the workplace environment in affecting employees' psychological well-being. Numerous studies have shown the correlation between better levels of well-being and total job satisfaction and a positive work environment, which is defined by elements like autonomy, social support, job satisfaction, and organizational climate (Leka & Jain, 2010; Warr, 2013). A perceived unfavorable work environment and poor mental health are strongly correlated, particularly when organizational assistance is judged insufficient, according to Blanchard et al., (2022).

There may be a few explanations for the limited association between PWE and PWB that has been observed. First, individual variations in coping strategies and resilience may affect how employees view their workplace and its effects on their wellbeing. Some employees may be more adaptable than others, which enables them to retain high levels of wellbeing even in unfavorable working conditions. On the other hand, individuals with lower resilience may be more susceptible to negative work environments and experience reduced levels of well-being. The multidimensional nature of PWB, which includes numerous elements like life satisfaction, positive affect, self-acceptance, autonomy, and personal progress, should also be considered. The link found in this study may not represent the full range of psychological well-being, but rather a particular facet of PWB that is influenced by the workplace. To investigate the specific characteristics that are most strongly connected with PWE in the banking setting, future study may use more thorough assessments of PWB.

In conclusion, this study showed that among bank employees, PWE and PWB had a marginally positive connection. The results imply that higher levels of psychological well-being are linked to a favorable work environment. Future studies should, however, keep looking into the intricate relationships and underlying processes between PWE and PWB. Positive work environments that support employee wellbeing should be prioritized by organizations since they can improve employee job satisfaction and ultimately organizational success.

Correlation between AS and PWB

H_{A5c}, H_{A6c}, H_{A7c}

H_{A5c}: There is a negative relationship between anxiety symptoms and psychological well-being among bank employees.

H_{A6c}: There is a negative relationship between anxiety symptoms and psychological well-being among workaholic bank employees.

H_{A7c}: There is a negative relationship between anxiety symptoms and psychological well-being among non-workaholic bank employees.

The current study further sought to better understand the connection between bank employees' psychological well-being and their anxiety symptoms. The results provided support for hypothesis H_{A5c}, H_{A6c}, and H_{A7c}, which indicated a negative link between these variables. The results showed a moderately significant negative relationship between AS and PWB. This shows that, conversely, bank employees who reported lesser levels of psychological well-being also reported higher levels of anxiety symptoms.

The observed inverse relationship between AS and PWB is consistent with a large body of research demonstrating the harmful impacts of anxiety symptoms on people's general health and quality of life (Craske et al., 2017; Steel et al., 2014). The psychological functioning of people can be greatly impacted by anxiety symptoms, such as excessive concern, fearfulness, and bodily manifestations of anxiety, which can also lower people's feeling of overall wellbeing. According to a study by Moore et al., (2022), psychological well-being was negatively correlated with depression, anxiety, loneliness, attention issues, and physical health problems (PHP).

The inverse association between AS and PWB suggests that psychological well-being tends to decline as anxiety symptoms rise. This result lends credence to the idea that anxiety symptoms can impair a few psychologically healthy traits in people, such as emotional stability, positive affect, self-acceptance, and general life satisfaction (Zarean et al., 2022). Furthermore, it's critical to understand that the AS-PWB interaction is reciprocal. Individuals with low levels of psychological well-being may also be more prone to acquiring anxiety symptoms (Yldrm, et al., 2022). Anxiety symptoms might contribute to lower levels of psychological well-being. This reciprocal association suggests that treatments intended to enhance psychological well-being may also reduce the symptoms of anxiety, and vice versa.

The study's conclusions have applications for businesses and employers. Organizations should put strategies and support systems in place to encourage employees' mental health because they understand the detrimental effects that anxiety symptoms have on employees' well-being and general performance. This may entail making counseling services accessible, putting stress management programs in place, creating a welcoming and inclusive work atmosphere, and supporting initiatives to balance work and family obligations (Harvey et al., 2018; Wang et al., 2014). It's crucial to consider the limitations of this study, though. In the first place, the study relied

on self-report measures for both AS and PWB, which are susceptible to response biases and common method variance. To improve the validity of the results, future studies might include subjective evaluations and self-report measures. Second, the study's cross-sectional design made it difficult to determine the cause of the association between AS and PWB or extrapolate its timing. A deeper knowledge of the link between anxiety symptoms and psychological well-being as well as potential causal pathways would come from longitudinal research that look at the dynamic interaction between the two across time. In conclusion, the current study showed that among bank employees, there was a marginally significant inverse association between anxiety symptoms (AS) and psychological well-being (PWB). The findings support the hypothesis that higher levels of anxiety symptoms are associated with poorer levels of psychological well-being. These findings highlight how crucial it is to address anxiety symptoms at work in order to improve employees' overall wellbeing and organizational results.

5.3 MAJOR FINDINGS OF THE STUDY

The main findings of the present study have been listed under different headings:

Comparison of means between workaholic and nonworkaholic bank employees.

- Results suggest an insignificant difference of mean scores of PWB between workaholic and nonworkaholic bank employees.
- However, significant differences in mean scores of AS and PWB were found between workaholic and nonworkaholic bank employees. Workaholics have higher levels of anxiety symptoms as lower levels of psychological well-being as compared to nonworkaholics.
- Insignificant gender differences were observed in mean scores of PWB, AS, and PWB among workaholic and nonworkaholic bank employees.

- Significant difference was observed in PWE between younger and older bank employees. Older employees were found to have higher levels of PWE.

5.3.1 Correlation Analysis

Findings of correlation between PWE, AS, and PWB

- Significant negative moderate correlations were found between PWE and AS in workaholic and nonworkaholic bank employees.
- Moreover, significant negative however, very weak correlations were found between PWE and AS in workaholic and nonworkaholic bank employees.

On the other side, significant positive moderate correlations were found between PWE and PWB in workaholic and nonworkaholic bank employees.

5.4 IMPLICATIONS

As a result, one's ability to function at work may be impacted (Wright and Cropanzano 2000; Shantz et al., 2016), physiological and psychological health (Diener and Chan 2011), employee wellbeing is a key concern for modern firms. Our findings imply that PWE, AS, and PWB are related to one another. Employees may not experience stress or dissatisfaction when their task exceeds their resources if they believe they operate in a healthy atmosphere. The findings of this investigation explore the connection between workaholic and nonworkaholic bank employees' perceptions of their workplaces, anxiety symptoms, and psychological well-being have significant ramifications for a variety of stakeholders, including businesses, human resources departments, and the employees themselves.

1. Organizational Interventions: The study emphasizes the value of establishing welcoming workplaces that put employees' wellbeing first. To reduce anxiety symptoms and

encourage psychological well-being, businesses should try to improve aspects like job control, social support, and work-life balance. A culture that promotes work-life balance, employee support programs, and stress management initiatives can all lead to a happier, more effective team. Such solutions might ease the strain of participating in activities unrelated to work, hence reducing workload and possibly improving employee welfare (Bayhan et al., 2016). Accordingly, daily employee satisfaction at work extends beyond the workplace and may have an impact on both the welfare of the individual and their partner Rodriguez et al., (2014).

2. **Human Resource Approaches:** Human resource departments are essential in determining the nature of the workplace and the wellbeing of employees. The results imply that HR professionals should consider how workaholism affects employees' opinions of the workplace and their psychological health. This can entail creating guidelines and procedures that encourage a good work-life balance, helping staff members who are workaholics, and providing them with tools for stress and anxiety management.
3. **Employee understanding and Self-Care:** The study places a strong emphasis on the value of individual employee understanding of the links between workaholism, the workplace environment, anxiety symptoms, and psychological health. The general state of one's health can be greatly enhanced by identifying the warning signals of workaholism and taking proactive measures to control stress and anxiety. Employees should be urged to practice self-care, establish boundaries, and ask for help when necessary.
4. **Education and Training:** The findings recommend educational activities and supervisory training programs. Employee education on workaholism, its potential repercussions, and methods for preserving a healthy work-life balance can enable people to make wise

decisions. A more uplifting and welcoming workplace can also result from supervisor training on how to establish supportive work environments, promote work-life balance, and identify and handle anxiety symptoms.

5. **Workaholic Screening and Assistance:** For focused solutions, identifying workaholic employees is essential. Companies should think about creating screening procedures to find people who might be workaholics and offer the proper tools and support. Work-related stress and anxiety symptoms can be avoided and managed by providing workaholics with coaching, counseling, and work-life balance programs that are tailored to their needs. By educating employees about modern gender roles, organizations can play a significant part in preserving gender equality. Organizations may plan training sessions for staff members on the value of diversity and equality. According to Kulik and Rayyan (2003), this training may be particularly crucial for nations with low gender equity.

The study's findings highlight the need of organizations, human resource departments, and employees recognizing and addressing the link between anxiety symptoms, perceived work environment, and psychological well-being. Organizations can encourage greater work-life integration and improve employees' general psychological wellbeing by emphasizing employee well-being, fostering supportive work environments, and putting tailored interventions into place.

5.5 Results Met the Problem

The major objective of the study was to determine if there is any significant difference between the experience of anxiety symptoms, the subjective perception of work environment and experience of psychological well-being in two distinct groups: workaholism and non-workaholism groups. The study further studied the gender difference in the experience of anxiety symptoms,

psychological distress, and subjective nature of the workplace environment in workaholic and non-workaholic groups. The study also established the impacts of demographic factors of the participant including age on the experience of psychological distress, perception of the workplace environment, anxiety symptoms and the workaholism and non-workaholism. The result has been able to establish employees' perceptions of the workplace may be influenced by their age. The study concludes that there were no appreciable changes in anxiety symptoms or psychological well-being between younger and older bank employees in Delhi.

The results also include that actual negative workplace environment like discrimination and workload extent to be significant influencers of the psychological well-being of the employees than one's perceived work environment. The result also answers that there are no significant gender differences among the workaholics and the non-workaholics on the overall well-being, anxiety symptoms and work environment. Therefore, it can be stated that the study has been able to appropriately address the objective questions and hypothesis.

5.6 Study Limitation

Due to some inevitable circumstances researchers encounter during the process, particularly in relation to social science research, research is a continual process and is never totally flawless. Limitations preserve the potential for additional field study. Every study has several weaknesses that provide information for other studies.

It is important to recognize some limitations that may affect the interpretation and generalizability of the findings, even though this study offers insightful information about the

relationship between perceived work environment (PWE), anxiety symptoms (AS), and psychological well-being (PWB) among workaholic and nonworkaholic bank employees.

1. **Sample Characteristics:** The study only included bank employees, which may limit how broadly the findings may be applied to employees in other businesses. Further limiting the generalizability of the results to different cultural and contextual contexts is the study's exclusive inclusion of participants from a particular geographic area. Larger and more varied sample sizes should be considered in future studies to improve the findings' external validity.
2. **Cross-Sectional Design:** A cross-sectional design was used in this study to collect data at a specific moment in time. The analysis of causation or the evaluation of changes in the variables over time are not possible with this approach. An improved knowledge of the dynamic interactions between PWE, anxiety symptoms, and PWB would come from longitudinal or experimental approaches.
3. **Self-Report Measures:** PWE, anxiety symptoms, and PWB were all evaluated in the study using self-report measures. Self-report measures are susceptible to biases in the way that respondents respond, such as social desirability or recollection biases, which can affect how accurate the data is gathered. The validity of the results might be improved by using objective metrics or a variety of data sources.
4. **Definition and Measurement of Workaholism:** The study did not offer a clear definition or method for measuring workaholism. The topic of workaholism is multifaceted and has many different conceptualizations. To gain a deeper knowledge of its impact on the links between PWE, anxiety symptoms, and PWB, future study should consider employing validated measures of workaholism.

5. Relationships Directionality: Although the study found substantial associations between PWE, anxiety symptoms, and PWB, the link directionality could not be clearly defined. It's possible that these variables have reciprocal or bidirectional interactions. Future studies using cutting-edge statistical methods, such as longitudinal analysis or structural equation modeling, can illuminate the temporal dynamics and causal mechanisms behind these connections.
6. Mediating and Moderating Factors: The study did not investigate any possible mediating or moderating factors that might affect the connections between PWE, anxiety symptoms, and PWB. The strength or type of these ties may be influenced by variables including personal coping mechanisms, social support, or workplace policies.
7. Quantitative Approach: The study took a quantitative approach and only used data collected through questionnaires, which were all numerical. Even though this method enables statistical analysis and generalizability, it could exclude crucial qualitative elements and subjective experiences that could lead to a more thorough knowledge of the event. To obtain a richer viewpoint, future studies can profit from using qualitative techniques.
8. Sample Size: Although the study used 400 bank employees as its sample size, it's vital to recognize that larger samples can improve the statistical power and accuracy of the results. A greater sample size might make it possible to identify lower but still significant effect sizes and offer more precise estimates of the relationships being studied.
9. Generalizability: Because the study only included bank employees, it is possible that the findings cannot be applied to other occupational groups or industries. The associations between PWE, anxiety symptoms, and PWB can be influenced by various work

environments, corporate cultures, and job demands. The results' external validity would be improved by conducting a similar study with other samples from different sectors.

Despite these drawbacks, this study offers important insights into the connections between PWE, anxiety symptoms, and PWB in bank personnel, both workaholic and nonworkaholic. It provides a framework for further study and expansion of these links in many settings and groups. Addressing these limitations will contribute to a more nuanced understanding of the factors influencing employee well-being and facilitate the development of targeted interventions to enhance workplace mental health.

5.7 Recommendation

On the basis of the study's findings, the following suggestions are offered.

- First, the workaholic state should be taken into consideration since it has a significant impact when talking about the anxiety condition, the psychological well-being of employees, and their specific work environments.
- Delhi was selected for responses. If the sample is drawn from various Indian cities, there will be a wider range of responses. In order for the sample to be more representative, it should be drawn from the entire country of India.
- Only literate people were used to gather the data. In order to make meaningful comparisons, data from both educated and illiterate persons should be collected.
- More research should be done to understand the driving forces behind people's increased workaholism.
- A large portion of the information came from the private sector. To compare them more effectively, data from the public sector may be used.

- Research on the causes of workaholism and its effects across the lifetime is still comparatively scarce. Much research is required on personality, socioenvironmental factors, and learning and reinforcement mechanisms.

5.8 Conclusion

Finally, this study examined the relationship between PWE, AS, and PWB among workaholic and nonworkaholic bank employees. The results provided various crucial understandings of these interactions.

First, both workaholic and nonworkaholic bank employees showed a substantial negative connection between PWE and anxiety symptoms. This suggests that employees who perceive their workplace as being more positive show fewer signs of anxiety. Employees' anxiety symptoms can be lessened by a friendly and hospitable work environment that is characterized by elements like job control, social support, and work-life balance.

Second, both workaholic and nonworkaholic bank employees showed a substantial positive association between PWE and PWB. This suggests that employees report greater levels of psychological well-being when they experience a more positive work environment. Employees' psychological wellbeing and general job and life satisfaction can be improved by a supportive work environment that encourages employee involvement, autonomy, and social support.

Lastly, both workaholic and nonworkaholic bank employees showed a substantial negative correlation between anxiety symptoms and psychological well-being. This shows that lower levels of psychological well-being are linked to higher levels of anxiety symptoms. Fostering employees' psychological well-being and general quality of life requires addressing anxiety symptoms and offering tools for stress management and mental health support.

The findings of this study demonstrate that the workplace significantly affects employees' psychological health and anxiety symptoms. Organizations should concentrate on developing healthy work environments that value employee wellbeing, offer assistance in managing stress, and promote work-life balance. Because anxiety symptoms have a detrimental effect on psychological health, treatments targeted at easing anxiety and fostering mental health support should be put into practice.

It's critical to remember that the study was restricted to bank employees in a certain region. To generalize these findings, additional research with larger and more varied samples from various industries and places is required. However, this study advances knowledge of the intricate connections between the workplace, anxiety symptoms, and psychological health in both workaholics and nonworkaholics. By addressing these relationships, organizations can create healthier and more supportive work environments that enhance employee well-being and productivity.

5.9 Scope for further research

After addressing the study's limitations, I recommend conducting a follow-up study with a bigger sample size, other potential influences on anxiety and wellbeing among Delhi bank employees, and a fairly well-adjusted workaholic vs non-workaholic category. I recommend using a multiple linear regression in this study to determine the individual and combined effects of variables on the wellbeing of bank employees as well as the magnitude of those effects. I propose a comparison between the suggested study and this study in order to verify the study's findings about the variables influencing the anxiety levels and general well-being of Delhi bank employee. It is obvious that the COVID 19 had a significant part in the contraction of the global labor,

employment, and business markets as well as the rise in unemployment. In light of this circumstance, the study effectively illustrated the increased prevalence of job addiction among professionals. The study also aided in determining the danger of work addiction in those who are already addicted to their jobs. The analysis of how to treat professionals working addicts and the recommendation of likely approaches can be used to resolve the risk of work addiction they are now dealing with, and future research will concentrate on that.

Workaholism is a broad concept that includes many factors. If these factors are thoroughly studied, they can not only help organizations manage their human resources, but they can also help major companies understand the traits of workaholics in India and the various approaches to dealing with them. To further understand the causal connections between the various workaholic and non-workaholic groups, longitudinal data are required.

This research will pave the way for an entirely new idea in India. Due to differences in culture and customs, the causes, effects, etc. of workaholism in this country are extremely different from those of industrialized nations. This would imply that approaches to solving this issue in India would differ significantly from those developed by western nations. This would help the management of human resources and business institutes a significant task of thoroughly exploring and developing the idea from the standpoint of our own nation.

5.10 Study Contribution to the Society

As described by the spillover-crossover model, the negative impact of job demands, and job pressure is transmitted to the personal life of the employee hampering and impairing various functional aspects of the individual's life. As the study establishes a significant relationship between the negative impacts like anxiety symptoms, psychological well-being, and mental health

issues of workaholism and job demands and disrupted interpersonal relationships and personal lives of the employees, therefore, based on these findings appropriate interventions is devised to ensure the health and wellbeing of the employees of various private sectors including banking sector. The findings of this study will be used in spreading awareness about the negative consequences of excessive work addiction in employees. The findings will be used in understanding the mediating role of social support and positive work environment plays in mediating the experience of psychological distress and anxiety symptoms in private sector employees. The findings help the mental health professionals collaboratively work with the management of the private sectors to provide the appropriate mental health support resources to the employees who require it. This study brings evolutionary changes in the mental health resources available with the sector's management. This study further enhances mental health wellbeing of the employees and increase productivity, individual resilience, motivation, and self-determination significantly improving the quality of services provided.

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APPENDIX 1 Instruments

Bergen Work Addiction Scale

Look at each of the following statements and rank yourself on each one according to the following:

1 = Never, 2 = Rarely, 3 = Sometimes, 4 = Often and 5 = Always

1. You think of how you can free up more time to work
2. You spend much more time working than initially intended
3. You work in order to reduce feelings of guilt, anxiety, helplessness and depression
4. You have been told by others to cut down on work without listening to them
5. You become stressed if you are prohibited from working
6. You prioritise work over hobbies, leisure activities, and exercise
7. You work so much it has negatively influenced your health

If you score 4 (Often) or 5 (Always) on four or more of these seven statements it may suggest you are a workaholic.

Psychological Wellbeing (42 items)

Instructions: Circle one response below each statement to indicate how much you agree or disagree.

1. "I am not afraid to voice my opinions, even when they are in opposition to the opinions of most people."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree
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2. "For me, life has been a continuous process of learning, changing, and growth."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree
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3. "In general, I feel I am in charge of the situation in which I live."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree
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4. "People would describe me as a giving person, willing to share my time with others."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree
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5. "I am not interested in activities that will expand my horizons."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree
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6. "I enjoy making plans for the future and working to make them a reality."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree
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7. "Most people see me as loving and affectionate."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree
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8. "In many ways I feel disappointed about my achievements in life."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree
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9. "I live life one day at a time and don't really think about the future."

- | | | | | | | |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
10. "I tend to worry about what other people think of me."^[L]_[SEP]
- | | | | | | | |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
11. "When I look at the story of my life, I am pleased with how things have turned out."
- | | | | | | | |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
12. "I have difficulty arranging my life in a way that is satisfying to me."^[L]_[SEP]
- | | | | | | | |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
13. "My decisions are not usually influenced by what everyone else is doing."
- | | | | | | | |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
14. "I gave up trying to make big improvements or changes in my life a long time ago."
- | | | | | | | |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
15. "The demands of everyday life often get me down."^[L]_[SEP]
- | | | | | | | |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
16. "I have not experienced many warm and trusting relationships with others."
- | | | | | | | |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
17. "I think it is important to have new experiences that challenge how you think about yourself and the world."
- | | | | | | | |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
18. "Maintaining close relationships has been difficult and frustrating for me."^[L]_[SEP]
- | | | | | | | |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|

19. "My attitude about myself is probably not as positive as most people feel about themselves."^[SEP]

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree
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20. "I have a sense of direction and purpose in life."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree
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21. "I judge myself by what I think is important, not by the values of what others think is important."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree
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22. "In general, I feel confident and positive about myself."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree
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23. "I have been able to build a living environment and a lifestyle for myself that is much to my liking."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree
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24. "I tend to be influenced by people with strong opinions."^[SEP]

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree
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25. "I do not enjoy being in new situations that require me to change my old familiar ways of doing things."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree
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26. "I do not fit very well with the people and the community around me."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree
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27. "I know that I can trust my friends, and they know they can trust me."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree
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28. "When I think about it, I haven't really improved much as a person over the years."

- | | | | | | | |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
29. "Some people wander aimlessly through life, but I am not one of them."
- | | | | | | | |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
30. "I often feel lonely because I have few close friends with whom to share my concerns."^[SEP]
- | | | | | | | |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
31. "When I compare myself to friends and acquaintances, it makes me feel good about who I am."
- | | | | | | | |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
32. "I don't have a good sense of what it is I'm trying to accomplish in life."^[SEP]
- | | | | | | | |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
33. "I sometimes feel as if I've done all there is to do in life."
- | | | | | | | |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
34. "I feel like many of the people I know have gotten more out of life than I have."
- | | | | | | | |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
35. "I have confidence in my opinions, even if they are contrary to the general consensus."
- | | | | | | | |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
36. "I am quite good at managing the many responsibilities of my daily life."
- | | | | | | | |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
37. "I have the sense that I have developed a lot as a person over time."
- | | | | | | | |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |
|----------------|----------------|----------------|----------------------------|-------------------|-------------------|-------------------|
38. "I enjoy personal and mutual conversations with family members and friends."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree
39. "My daily activities often seem trivial and unimportant to me." ^[L] _[SEP]						
Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree
40. "I like most parts of my personality."						
Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree
41. "It's difficult for me to voice my own opinions on controversial matters." ^[L] _[SEP]						
Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree
42. "I often feel overwhelmed by my responsibilities." ^[L] _[SEP]						
Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

Beck Anxiety Inventory (BAI)

Below is a list of common symptoms of anxiety. Please carefully read each item in the list. Indicate how much you have been bothered by that symptom during the past month, including today, by circling the number in the corresponding space in the column next to each symptom.

	Not at all	Mildly, but it didn't bother me much	Moderately – it wasn't pleasant at times	Severely – it bothered me a lot
Numbness or tingling	0	1	2	3
Feeling hot	0	1	2	3
Wobbliness in legs	0	1	2	3
Unable to relax	0	1	2	3
Fear of worst happening	0	1	2	3
Dizzy or lightheaded	0	1	2	3
Heart pounding / racing	0	1	2	3
Unsteady	0	1	2	3
Terrified or afraid	0	1	2	3
Nervous	0	1	2	3
Feeling of choking	0	1	2	3
Hands trembling	0	1	2	3
Shaky / unsteady	0	1	2	3
Fear of losing control	0	1	2	3
Difficulty in breathing	0	1	2	3
Fear of dying	0	1	2	3
Scared	0	1	2	3
Indigestion	0	1	2	3
Faint / lightheaded	0	1	2	3
Face flushed	0	1	2	3
Hot / cold sweats	0	1	2	3

Perceived Work Environment (PWE)

1 = Strongly Disagree, 2 = Disagree, 3 = Neither agree nor disagree; 4 = Agree; 5 = Strongly agree

Job satisfaction

- 1 Imagine your ideal job. How well does your current position compare to the ideal job?
- 2 In general, how satisfied are you with your job?
- 3 Consider all the expectations you had when you started your current job. Does your current job meet those expectations?

Recognition

- 4 My contributions are valued by the members of my unit/department
- 5 I am satisfied with the received recognition or praise for doing good work
- 6 In my unit/department, you always get appropriate recognition when you have done something extraordinary

Work itself

- 7 I enjoy my job
- 8 My job is interesting
- 9 My job gives me a sense of accomplishment
- 10 The work I do is very important for my unit/department and the Organization as a whole

Opportunities for promotion

- 11 Opportunities for promotion within the Organization
- 12 I know what is requested from me in order to get promoted within the Organization
- 13 Information about job vacancies within the Organization is readily available

Professional Advancement Opportunities

- 14 My unit/department offers the appropriate training or education that I need to prosper in my job
- 15 I have received the necessary training to do my job well
- 16 I have already had the opportunity at work to learn and grow
- 17 There is someone at work who encourages my development
- 18 My supervisor points out the training or education that I need to grow in my job

Responsibility

- 19 I have control over how I do my work
- 20 My opinion counts at work
- 21 The physical environment allows me to do my job
- 22 I possess necessary resources, tools or equipment to do my job

Good Feelings about Organization

- 23 I feel a strong sense of belonging to the Organization
- 24 I have a strong commitment to the Organization
- 25 I am proud to work for the Organization

Clarity of Mission

- 26 I understand how my work supports the mission of my unit/department and the Organization as a whole and it is at complete service to the citizens
- 27 I know what is expected of me at work
- 28 The goals of my unit/department and the Organization as a whole are clear to me

Relationship with co-workers

- 29 I respect my co-workers and I trust them
- 30 I am consistently treated with respect by my co-workers

- 31 I can count on my co-workers to help me out when needed
- 32 My co-workers and I work as a team
- 33 My unit/department collaborates effectively with other units/departments within the Organization

Effective Supervisor

- 34 My supervisor effectively communicates with the co-workers
- 35 My supervisor is an effective decision-maker for the Organization
- 36 My supervisor is approachable and easy to talk to
- 37 My supervisor gives me constructive feedback on my performance
- 38 My supervisor considers my ideas and remarks
- 39 My supervisor deals effectively with poor performance

Salary

- 40 I am satisfied and fairly paid for what I do
- 41 My salary/pay rate is a significant factor in my decision to stay at the Organization

Presence of Core Values

- 42 Organization fosters values that are clear and understandable to all employees (*e.g.* coming to work on time, code of ethics, *etc.*)
- 43 The fulfillment of my duties and obligations is of great importance for the Organization as

whole

APPENDIX 2

Summary of Journal Articles, books, and conference

Journal article publication

S. No	Title	Outcome	Status	Publisher
1	Paper Title - Reliability and validity of the perceived work environment scale	Paper Publication Scopus	Paper Published	Universidad Tecnica de Manabi
2	Paper Title - Incorporating Psychological Well-Being as A Policy in Multifaceted Corporate Culture	Paper Publication Scopus	Paper Published	Society of Psychology and Education
3	Paper Title - Study on People's Well-Being After Job Loss Owing to Covid-19	Paper Publication Scopus	Paper Published	Society of Psychology and Education
4	Paper Title - Loneliness and Mental Health Amongst Indians Working in Abu Dhabi	Paper Publication	Paper Published	Journal of Critical Review
5	Paper Title -Examinations Anxiety on Performance of School Students	Paper Publication	Paper Published	<i>Likhita Publication</i>
6	Paper Title -Psychological Wellbeing of Employees	Paper Publication	Paper Published	IJ Publication
7	Paper Title -Work Addiction and Its Risk Factors	Paper Publication	Paper Published	IJ Publication

Book publication

S. No	Title	Outcome	Status	Publisher
1	Book Title - Addiction and Wellbeing another perspective of Mental Health	Book Publication ISBN - 978-1636483931	Book Published	Eliva Press

Conference Presentation

S. No	Title	Description	Status	Outcome
1	International Conference: Business Management and Social Innovation	Paper: Psychological wellbeing of employees	Paper Presentation <i>Conference</i>	Presented

2	International Academic Conference: Economics, Business Management and Social Science	Paper: Work Addiction and its Risk Factors	Paper Presentation <i>Conference</i>	Presented
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APPENDIX 3: Journal Articles

Journal Article 1: Reliability and Validity of the Perceived Work Environment Scale

Journal Name: International Journal of Health Sciences

Publisher: Universidad Tecnica de Manabi

DOI Number: <https://doi.org/10.53730/ijhs.v6nS5.9234>

Abstract:

This study aims to look at the reliability and validity of the perceived work environment scale. An organization's 280 employees provided the information. The analysis will assist in understanding and accumulating significant knowledge of the perceived work environment, which is being suggested and acknowledged as being among the most important and essential ways to increase employee job satisfaction while also giving them a wealth of opportunities for professional development. Descriptive statistics, such as mean and standard deviation, were included in the analysis and served as the main trend indicators. In-depth descriptive statistics analysis included the use of percentages and frequencies. Graphical representations were also used to describe the study's conclusions. A t-test was used in the study to investigate inferential statistics. The reliability of the study was also determined using Cronbach alpha on the Likert items that were included in it. Using Confirmatory Factorial Analysis and the General Least Squares method, the validity of the study was examined.

Journal Article 2: Incorporating Psychological Well-Being as A Policy in Multifaceted Corporate Culture

Journal Name: Journal of Positive School Psychology

Publisher: Society of Psychology and Education

Abstract:

The study looks into the challenges and opportunities for corporate cultures to include psychological wellbeing in their regulations. The key concerns are the lack of a uniform definition of psychological wellbeing and mental health disorders. A secondary qualitative methodology was used to conduct the study, which involved analyzing academic journals, official papers, and newspaper stories. It was discovered that businesses have failed to foster a work environment of job autonomy, lack of spending in occupational wellbeing programs, lower employee engagement levels, and inadequate implementation of the Equality Act of 2010, putting employees' psychological wellness at jeopardy. According to the findings, businesses cannot consistently discriminate against their workers, and measures that promote wellness must be implemented through a team effort.

Journal Article 3: Study on People’s Well-Being After Job Loss Owing to Covid-19

Journal Name: Journal of Positive School Psychology

Publisher: Society of Psychology and Education

Abstract:

The world has been severely impacted by the corona virus pandemic. This essentially elaborates on the idea that the corona virus pandemic has significantly impacted people's mental health in addition to their overall quality of life. This study examines the significance of job loss and the human costs associated with it during the gloomy Corona virus pandemic. The study also includes relevant information that has been demographically and thematically divided. Research demonstrates the different groups that have had psychological effects as a result of losing their jobs due to the pandemic. The report also discusses the various measures that people have tried to deal with the stress and agony of losing their jobs during the pandemic and, obviously, to look after their mental health.

Journal Article 4: Loneliness and Mental Health Amongst Indians Working in Abu Dhabi, UAE

Journal Name: Journal of Critical Reviews

Publisher: JCR

DOI: <http://dx.doi.org/10.2139/ssrn.3841377>

Abstract:

There is evidence that people who live distant from their home countries are more likely to experience loneliness and mental health concerns. One of the largest communities of expats living in the UAE is thought to be the Indian population. It has been suggested that expatriates, despite appearing to lead prosperous lives, frequently experience a variety of unfavorable situations, including loneliness, workplace stress, and worries about job security, all of which contribute to the rise in the incidence of mental illnesses like depression, stress, and anxiety. To address this, self-reported items such the General Health Functioning-28 and Social Functioning Questionnaire were used in a quantitative cross-sectional design along with data collecting on demographics, mental health, and social functioning. Based on these results, it was determined that the sample had an equal distribution of individuals who were living alone and those who were not, which may have contributed to the sample's high level of social functioning and low risk of mental health disorders. Additionally, demographic factors like age, education, and occupation levels may also be responsible for the equal distribution of such risk and the high levels of social functioning. Therefore, more research is required to determine how certain demographic characteristics affect the mental health status and social functioning of Indian expats living in the UAE.

Journal Article 5: Examinations Anxiety on Performance of School Students

Journal Name: International Journal of Academic Research

Publisher: Likhita Publication

DOI: <http://dx.doi.org/10.2139/ssrn.3836660>

Abstract:

Through this study, we were able to pinpoint the many types of test anxiety that seniors in secondary school face before exams. This could aid in establishing a link between test anxiety and senior secondary school pupils' academic performance. The impact of test anxiety on academic performance according to age and gender. additionally, the academic success of senior secondary school pupils of both sexes. It's a descriptive survey study, after all. The study makes use of a tool that has already undergone testing to measure the anxiety brought on by exam pressure. Male and female higher secondary school students who are currently enrolled in grades 9, 10, 11, and 12 make up the study's population. The study's sample was selected from five higher secondary schools using a straightforward random selection approach. There should be cautious when discussing this variable because various academic performance measures can be found in the literature. The academic achievement measures utilized in the study are solely applicable in an Indian context.

Journal Article 6: Psychological Wellbeing of Employees

Journal Name: International Journal of Emerging Technologies and Innovative Research,

Publisher: IJ Publication

DOI: <http://dx.doi.org/10.2139/ssrn.3831947>

Abstract:

There is a qualified lack of information on the different ways that Mental Health Conditions (MHC) are practiced over and also implemented over organizations. The protracted management of work-related stress was observed to cause physical and psychological deterioration, including anxiety or depression. As a result, the labor worsens already problematic circumstances while also creating new ones. the positive impact of a healthy workplace on employees' wellness. The study explains the advantages of good health for employees, demonstrating how a healthy workforce naturally joins together, resulting in fewer sick days and intricate and effective workforces.

Journal Article 7: Work Addiction and Its Risk Factors

Journal Name: International Journal of Emerging Technologies and Innovative Research

Publisher: IJ Publication

DOI: <http://dx.doi.org/10.2139/ssrn.3836618>

Abstract:

The backdrop of the job addiction is the main foundation of the study. The study investigates the idea of job addiction and how it affects professionals during COVID 19. The paper provides a thorough analysis of the methods for detecting work addiction and provides information on the scale that is primarily used to measure it. The study also examines the risk factors and causes of work addiction, which is more relevant. The study provides a detailed explanation of the statistical analysis and the findings of the investigation. Most importantly, the report also offers a thorough analysis of the research's conclusions. Additionally, the study addresses the findings' ramifications and potential future directions. The study also provides a thorough evaluation of the research's strengths and weaknesses.

Journal Article 8: Observational Study COVID-19

Journal Name: International Journal of Scientific & Engineering Research

Publisher: IJSER Publishing

<https://www.ijser.org/onlineResearchPaperViewer.aspx?OBSERVATIONAL-STUDY-COVID-19.pdf>

Abstract:

Numerous strategies have been used and put into practice to combat the COVID-19 virus's high and quick spread of disease (Wilder-Smith, et al., 2020). It has also resulted in the usage of a large number of therapeutic drugs whose efficacy has either not yet been fully established or has been established but the results have not yet been clearly identified. The goal of this study was to examine and determine the efficacy of the preventive measures taken by the virus-affected individuals. The observational study on a population of 802 people from a corporation in the United Arab Emirates is the subject of the publication. The research of employing various preventive measures within the first few days of application was one of the key outcomes. The outcomes for each individual who had taken a different preventive intervention were tracked and compared. The paper focuses on tracking the outcomes of using different home remedies to combat the COVID-19 virus. We'll also examine if people with diabetes and high blood pressure are more likely to get the COVID-19 condition (Altena et al., 2020).

APPENDIX 4:

Book 1

Book Title: Addiction and Wellbeing another perspective of Mental health

Publisher: Eliva Press

ISBN Number: 978-1636483931

Abstract:

Mental health is the most neglected, despite significant advancements over the years. By writing this book, the author hopes to shed light on various aspects of mental health, addiction, and wellbeing. The significance of workplace wellness and tips for preventing work addiction. We devote a large chunk of our life to our jobs. Because of this, your company is required to have policies in place to guarantee your safety. Even though it can also occur with work or smartphones, addiction is nearly always associated with substances. There hasn't been much research done in the areas of smartphone addiction and workplace addiction. The preponderance of our time is spent on our smartphones and at work. An attempt by the author to highlight the best strategies to look after your mental health and avoid becoming addicted to your job.

Book 2

Book Title: Psychological Well-being – A Must in Workplace policy

Publisher: Eliva Press

ISBN Number: 978-9994982127

Abstract:

It has long been recognized that the term "employee health" refers to a condition of wellbeing that extends much further than merely the absence of disease. It is believed that merging physical and mental health care will prove beneficial for prevention and health promotion initiatives or applicable legislation. Organizations must promote employee engagement and psychological support in addition to granting employees autonomy over their work and careers in order to minimize workload through workplace wellbeing. A pleasant workplace environment leads to better employee appearance at work, which helps management get better outcomes and build a strong community.

APPENDIX 5: Conference Presentation

Conference 1: International Conference Business Management and Social Innovation

Paper Title: Psychological wellbeing of employees

Abstract:

There is a qualified lack of information on the different ways that Mental Health Conditions (MHC) are practiced over and also implemented over organizations. The protracted management of work-related stress was observed to cause physical and psychological deterioration, including anxiety or depression. As a result, the labor worsens already problematic circumstances while also creating new ones. the positive impact of a healthy workplace on employees' wellness. The study explains the advantages of good health for employees, demonstrating how a healthy workforce naturally joins together, resulting in fewer sick days and intricate and effective workforces.

Certificate Conference 1:

Advanced Research Society for Science and Sociology

WWW.ARSSS.ORG



INTERNATIONAL CONFERENCE ON
Business Management and Social Innovation

Certificate

This is to certify that
Hitesh Mohan

has presented the research paper entitled *“Psychological Wellbeing of Employees”* at the International Conference on Business Management and Social Innovation (ICBMSI) held in Chandigarh, India on 10th August, 2021.

ADVANCED RESEARCH SOCIETY FOR SCIENCE AND SOCIOLOGY



GHAIRMAN
ARSSS



PAPER ID
AR-BMSI-CHDG-100821-300

Conference 2: International Academic Conference Economics, Business Management and Social Science

Paper Title: Work Addiction and its Risk Factors

Abstract:

The backdrop of the job addiction is the main foundation of the study. The study investigates the idea of job addiction and how it affects professionals during COVID 19. The paper provides a thorough analysis of the methods for detecting work addiction and provides information on the scale that is primarily used to measure it. The study also examines the risk factors and causes of work addiction, which is more relevant. The study provides a detailed explanation of the statistical analysis and the findings of the investigation. Most importantly, the report also offers a thorough analysis of the research's conclusions. Additionally, the study addresses the findings' ramifications and potential future directions. The study also provides a thorough evaluation of the research's strengths and weaknesses.



International Academic Conference on
Economics, Business Management & Social Sciences

Certificate

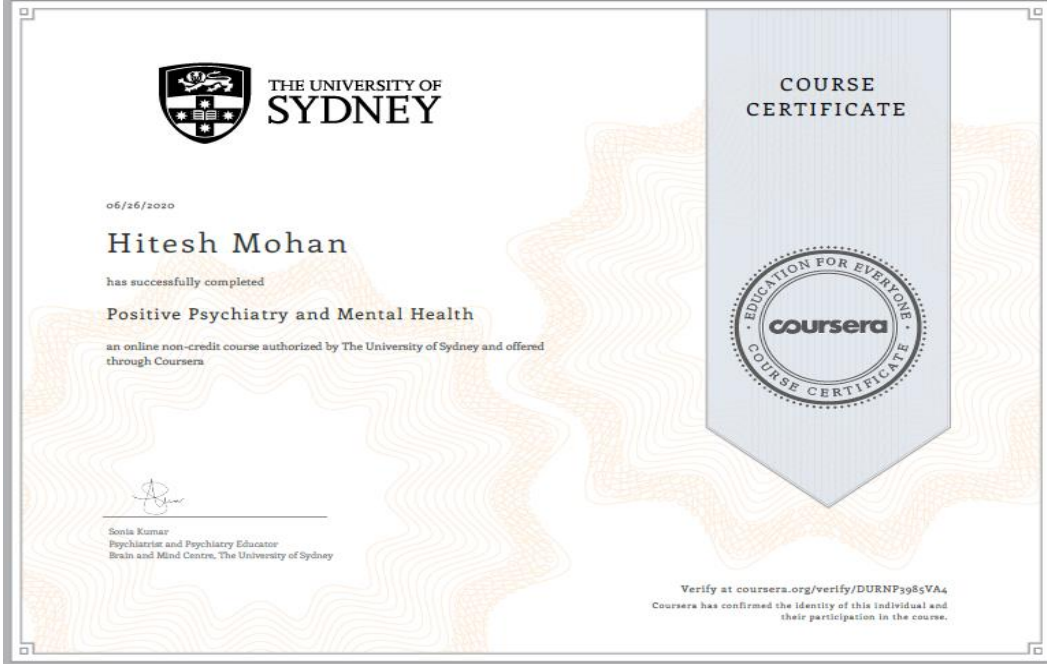
*This is to certify that **Hitesh Mohan** has presented a paper entitled "**Work Addiction and Its Risk Factors**" at the International Academic Conference on Economics, Business Management & Social Sciences (IACEBMSS) held in Amritsar, India on 15th June, 2021.*



Chairman
ScienceGlobe

APPENDIX 6: ADDITIONAL COURSES

Courses in Psychology



Yale

05/14/2020

Hitesh Mohan

has successfully completed

The Science of Well-Being

an online non-credit course authorized by Yale University and offered through Coursera



Lauris Santos
Professor
Psychology

COURSE
CERTIFICATE



Verify at coursera.org/verify/zV7WDTWWT9JK
Coursera has confirmed the identity of this individual and their participation in the course.



JOHNS HOPKINS
UNIVERSITY

04/21/2020

Hitesh Mohan

has successfully completed

Psychological First Aid

an online non-credit course authorized by Johns Hopkins University and offered through Coursera



Associate Professor
Department of International Health
Bloomberg School of Public Health
Johns Hopkins University

COURSE
CERTIFICATE



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MACQUARIE
University
SYDNEY · AUSTRALIA

06/10/2020

Hitesh Mohan

has successfully completed

Build personal resilience

an online non-credit course authorized by Macquarie University and offered through Coursera

A. Sobolwa

Alena Sobolwa, PhD
Adjunct Faculty
Macquarie Business School
Sydney, Australia

COURSE
CERTIFICATE



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UNIVERSITY OF MINNESOTA
Driven to DiscoverSM

05/17/2020

Hitesh Mohan

has successfully completed

Mindfulness in Integrative Healthcare

an online non-credit course authorized by University of Minnesota and offered through Coursera

Louise Delagran

Louise Delagran, MA, MEd
Mindfulness Teacher
Earl E. Bakken Center for Spirituality and Healing

Alex Haley

Alex Haley
Assistant Professor, Mindfulness Program Lead
Earl E. Bakken Center for Spirituality and Healing

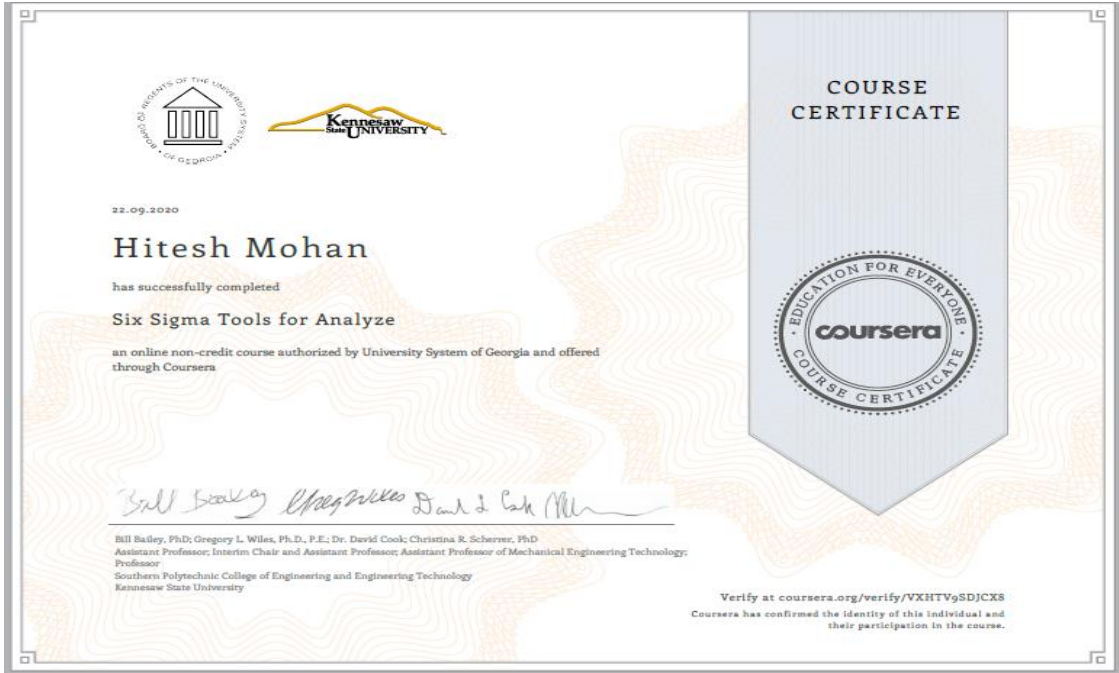
COURSE
CERTIFICATE



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Coursera has confirmed the identity of this individual and their participation in the course.

Additional Courses 2: Organisational







04.10.2020

Hitesh Mohan

has successfully completed

Six Sigma Tools for Improve and Control

an online non-credit course authorized by University System of Georgia and offered through Coursera

Bill Bailey, PhD; Gregory L. Wiles, Ph.D., F.E.; Dr. David Cook; Christina R. Scherrer, PhD
Assistant Professor; Interim Chair and Assistant Professor; Assistant Professor of Mechanical Engineering Technology;
Professor
Southern Polytechnic College of Engineering and Engineering Technology
Kennesaw State University

**COURSE
CERTIFICATE**



Verify at coursera.org/verify/LC8LHX7UzPRX
Coursera has confirmed the identity of this individual and their participation in the course.

Additional Courses – Other



Profile of the Scholar



Hitesh Mohan is a part-time research scholar who is enrolled in Lovely Professional University in Punjab, India, to pursue a PhD in psychology. has worked for more than 27 years throughout 5 countries. He currently works as HR Manager at KAEFER Company WLL, a pioneer in the insulation industry. He worked in a variety of departments during the course of my 27 years at the different companies (HR, Administration, Projects, Service industry & Customer Relations).

His current subject of study is the Work Environment, Psychological Well-Being, and Anxiety Symptoms of Workaholic and Non-Workaholic Banking Employees in Delhi, NCR. He earned a master's degree in psychology from IGNOU in Delhi, a Postgraduate Diploma in Rehabilitation Psychology from Chaudhary Ranbir Singh University (CRSU) in Jind, and a Bachelor of Arts from Delhi University.

Multiple research papers by Hitesh Mohan have been published in reputable national and international journals. Also published a book with Eliva Press and presented research papers at conferences hosted in India. He has held a number of workshops on mental health awareness in various Indian cities.

More details at

<https://www.researchgate.net/profile/Hitesh-Mohan/stats>