INTERNSHIP TRAINING

at

IQVIA CONSULTING AND INFORMATION SERVICES INDIA PRIVATE LIMITED,

NEW DELHI

Social Support and Psychological Well-Being among Office Employees of an MNC in Delhi

by

DR. KHUSHBOO SINGH

Under the Guidance of

DR. VINAY TRIPATHI

Post Graduate Diploma in Hospital and Health Management

2016-18

International Institute of Health Management Research, New Delhi

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A Report

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Acknowledgement

My vision at the time of starting my dissertation is to explore about Public Health research and opportunities in this sector.

I am obliged to thank to Mr. Lokesh Sharma (Senior Principle) for proving me this opportunity to carry out my study as dissertation and for his continuous support and motivation.

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Part-1

Organization Profile

About IQVIA

Global Existence

IQVIA is a global leader in providing research and consulting in healthcare and life sciences sector

IQVIA is the world's leading provider of healthcare survey, consulting & health intelligence services with **over 60 years** of experience. We operate in over **100 countries and serve over 5,000 healthcare customers** across 6 continents. IQVIA accommodate key healthcare organizations and decision makers around the world, spanning government agencies, donor agencies, policymakers, researchers, life science and healthcare companies, consumer health and medical device manufacturers, as well as distributors, providers, payers, and the financial community.

Our global data and analytics **capabilities draw on data from 100,000+ suppliers and on insights from more than 55 billion healthcare transactions** managed annually. We connect knowledge across all aspects of healthcare to help **more than 5,000 healthcare clients globally** to improve patient outcomes and operate more efficiently. The depth of experience available through IQVIA is well-recognized in the industry, as is the commitment to monitor and assess safety, benefit/risk, efficacy, consequenceiveness, quality of care and value.

IQVIA- Global

- Founded in 1954
- **100+** countries and 6 continents | employs **50,000+** people worldwide
- **1200+** healthcare experts | **4500+** industry and customer experts
- **5000+** customers
- **35,000+** projects across advanced analytics, technology implementation & commercial services over past 5 years
- **Hundreds of proprietary methodologies** including patented systems for analytics, data encryption and forecasting
- Headquartered in Danbury, CT, USA

Our Accolades

International Association of Outsourcing Professionals (IAOP) named IMS Health to its **2016 Global Outsourcing 100 List**
IMS Health ranked **#1** for sales and marketing business process outsourcing in life science, 2015, IDC MarketScape
Ranked 2nd **Pharmaceutical & Healthcare Consulting Company**, 2012, Vault's
World's most Admired Companies Fortune Magazine 2008 and 2010
Ranked 2nd **Life Science Technology Vendors** for 2013 & 2014 (IT services) by IDC
World's Most Admired Companies, Fortune, 2008 and 2010
Ranked in "best in class" company in the Business Week 50, 2007
Ranked 5th in top 10 **global research organization** by 2013 Honomichi global top 25 report

Real World Insights

|			
50,000 people in **>100** countries	**4000+** thought leading publications	**>1,100** medical doctors	**14** therapeutic centers of excellence
Global infrastructure in **100+** markets to evaluate treatments	**530M+** anonymous patient records around the world	**Elite 100** list in 2015 for Information Technology Innovation	**~900+** clinical educators

Our highly experienced teams from our global practices bring specialist skills and insights from large international mandates. Our team have worked on over 200 relevant projects globally and helped some of the world's largest organisations to deliver challenging programs and projects in the areas of healthcare and pharmaceuticals. Globally, all **leading private healthcare companies, government stakeholder and donor agencies** credence on insights provided by us for their business decisions. Some of our major clients in comprise

IQVIA has significant experience in advising **Governments, international NGOs, multidimensional funding agencies in the emerging markets in areas ranging from strategic direction to program management, national health surveys, commodity assessment and mapping, program management, procurement and supply chain assessment, in country development, monitoring and evaluation, pharmaceutical market assessment, private sector engagement, medicine access, policy and regulatory review, health data analytics etc.**

Our partnership with leading academia and international organizations supports their work by providing information and data to researchers

Unbiased Information
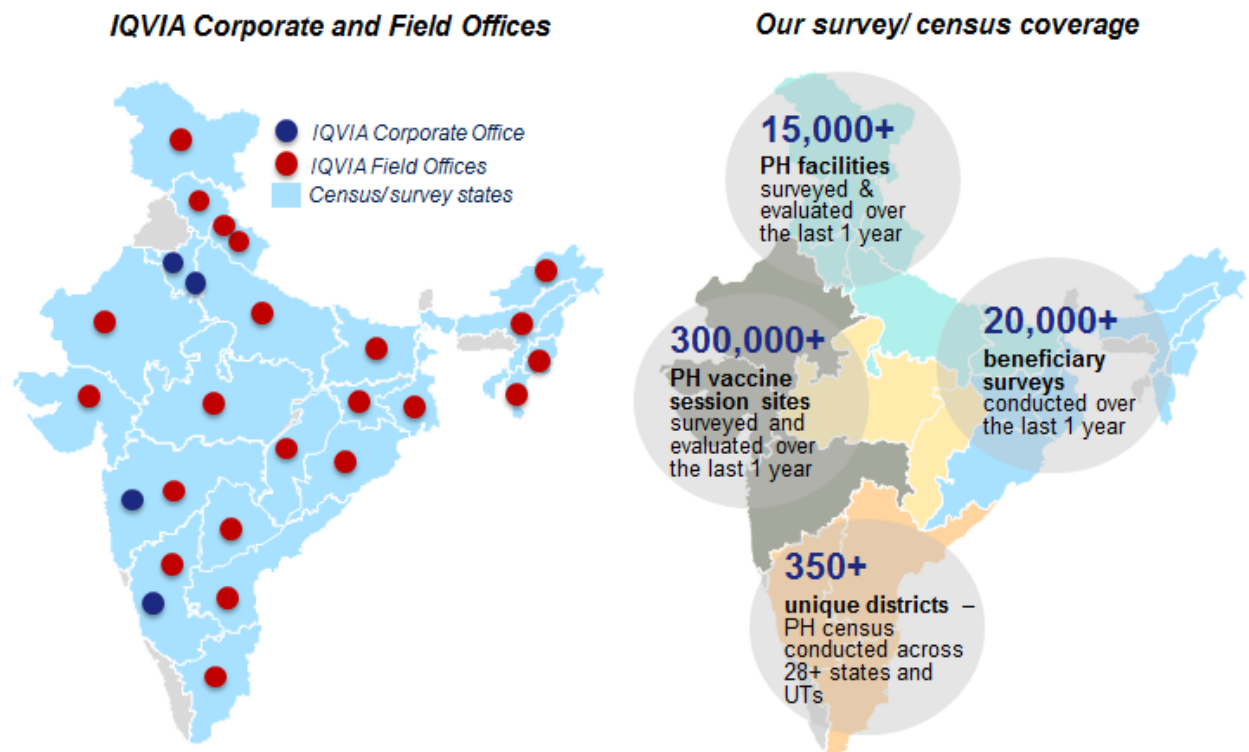
Academic Research

Public Policy Support
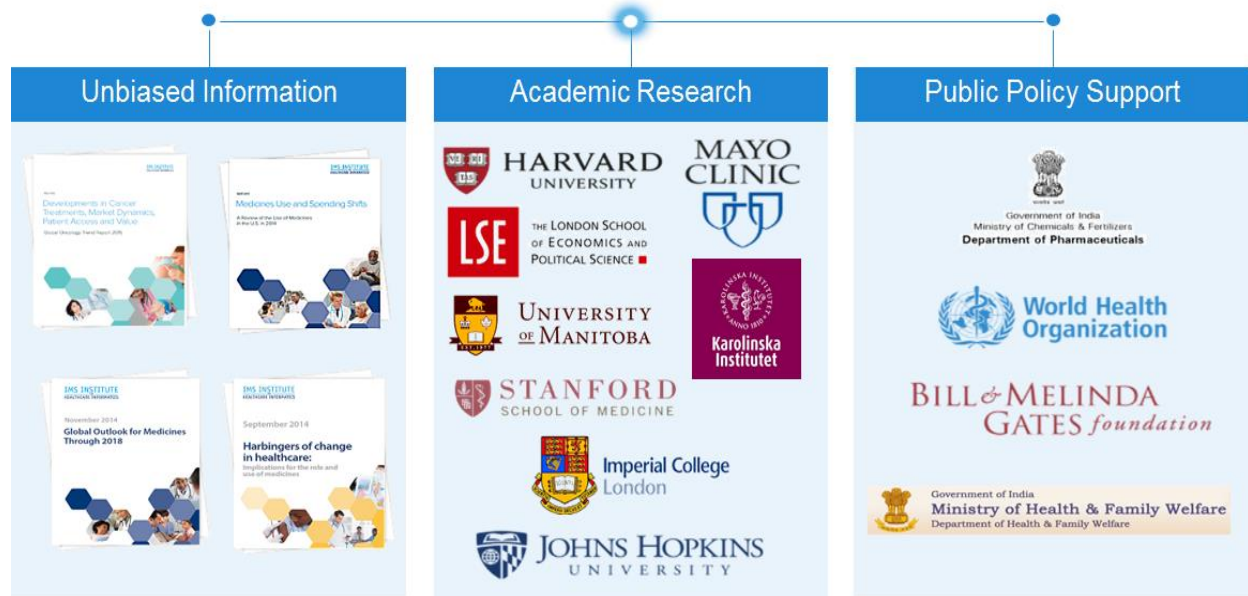
IQVIA India

In India, we have over 13 years of experience and **a strong existence in the healthcare market across data, analytics and consulting services and is the "ONLY" integrated healthcare informatics player in India, with solutions across healthcare sector value chain.** IQVIA India has a deep heritage of providing best-in-class market intelligence to the healthcare industry stakeholders. Our range of services comprises business strategy, market research, performance tracking tools, global market insights, regulatory policy support, operations improvement and allied technology solutions.

We have offices in Gurgaon, Mumbai, Delhi and Bangalore with total employee strength of over 3,000. Our existing data assets and customized large data collection activities are extensively used by our clients in the public, private and non-for-profit sector on regular basis along with our analytics and consulting service providing. Our existing data assets encompasses of detailed information on 3 lac Doctors, 1 lac chemist, 25 thousand hospitals, 22 thousand drugs stockiest. Our team also captures over 8 lac live transcriptions from approx. 5

thousand empaneled doctors and drug sales information from over 5 thousand stockiest monthly. Our field and project teams have experience of working across 50 cities in India with state government, NGOs and international funding agencies.

We have a strong focus on the Government and Public sector (GPS) in India. Our Public Health Government Practice in India works with the key Central Ministries, State Governments and International Donor Agencies across India on significantly large mandates in various areas of Health Policy & Strategic Planning, Health financing, Quality Assurance and Improvement in Health Facilities, Health and Hospital Information Systems by IT solutions, Public Private Partnerships and Monitoring & Evaluation, drug procurement and supply chain system etc.

IQVIA Corporate and Field Offices

● IQVIA Corporate Office
● IQVIA Field Offices
▪ Census/survey states

Our survey/ census coverage

15,000+
PH facilities surveyed & evaluated over the last 1 year

300,000+
PH vaccine session sites surveyed and evaluated over the last 1 year

20,000+
beneficiary surveys conducted over the last 1 year

350+
unique districts – PH census conducted across 28+ states and UTs

We have prior **experience of working on projects funded by government and international donor agencies including The World Bank, UNDP, CHAI, JSI, USAID Deliver, NPPA, DoP, Niti Aayog, PSI, BMGF, DFID, Pharmexcil, Tata Trusts, Micronutrient Initiative etc.** Some of our major clients comprise:

Hospitals	Government	Pharmaceutical
Manipal Hospitals, BSES M G Hospital, BRAHMA KUMARIS, Ivy Hospital, Paramount Health, L.H. Savani Hospital, ARTEMIS HOSPITALS, Apollo Hospitals, P. D. Hinduja Hospital & Medical Research Centre, NHS	FDA, Planning Commission Government of India, Government of India Ministry of Chemicals & Fertilizers Department of Pharmaceuticals, Government of Meghalaya, Unity Government of Nagaland, NPPA Affordable Medicines for All, Hamad Medical Corporation, U.S. ARMY, Government of India Ministry of Health & Family Welfare, CDC	Pfizer, Roche, Abbott, gsk GlaxoSmithKline, Novartis, SANOFI, P&G, Reckitt Benckiser, AstraZeneca, Lilly, TEVA, CardinalHealth, Walgreens, MERCK, AmerisourceBergen

International/Donor Agencies	Technology	Other healthcare stakeholders
Bill & Melinda Gates Foundation, THE WORLD BANK, UNDP, World Health Organization, UNIDO, USAID DELIVER PROJECT, DFID, The Global Fund	Medtronic, HCL, BPL Medical Technologies, SIEMENS medical, Eisai, BD, McKesson	NSDC National Skill Development Corporation, JSI John Snow, Inc., OPPI, CII, HARVARD MEDICAL SCHOOL, TB ALLIANCE, PATH

Our Core Services

Healthcare Policy Review and Design

We have accumulated in-depth knowledge of the India health system and policy trends through the extensive interaction with health system stakeholders, as well as, work in areas of public health.

We have worked extensively in the arena of Healthcare policy and established thought leadership on policy trends by leveraging broad connections with stakeholders from key government divisions and healthcare institutions. We are currently collaborating with Department of Pharmaceuticals, India on Pharmaceutical pricing policy initiatives.

In 2013, the IQVIA India Institute and OPPI (Organisation of Pharmaceutical Producers of India) jointly produced a thought leadership study on "Understanding Healthcare Access in India" as a knowledge initiative in collaboration with government policy makers, industry and academics. This provided an opportunity for multi-sector stakeholders to exchange thinking on key issues in the Health Care Access including affordability and quality of care, and to stimulate discussions on policy options.

Quality Assurance

- IQVIA Public Health provider consulting team has senior professionals from industry who are certified as Principal Assessor for National Accreditation Board for Hospital [NABH] and have achieved the distinction of Certification and Lead Auditor for ISO 9000 Quality Systems.

- **Global experience in evaluating health systems performance and providing policy recommendations:** As a global team covering all major markets, we have extensive experience working on health-related topics and providing solutions to public health organisations and local governments and can share best practices from emerging and developed markets across the globe.

Performance Improvement: for healthcare service providers IQVIA offers a range of expertise which encompasses

- **Supply Chain Management:** IQVIA Public Health assists clients understand their existing material use and purchase patterns, inventory management and vendor management practices. This helps the client assess its annual needs for various day to day material and medicine requirements. Upon identifying the key drivers of inefficiency in a client's overall procurement and supply chain system the IQVIA team assists clients in implementing mechanisms such as rationalization of SKUs (Stock Keeping Units) to optimize inventory levels; Procurement mechanisms such as tendering, bid process management and vendor management.

- **Total Performance Improvement:** IQVIA Public Health helps clients achieve their desired performance through its Total Performance improvement plan which helps clients enhance revenues and optimize costs.

- **Process Optimization:** Inefficient service delivery processes can lead to higher patient waiting times as well as lack of adequate personnel at peak operations which leads to higher operation burdens for the providers as well as lower patient satisfaction. Healthcare providers seeking insights regarding their service delivery processes can undergo business process re-engineering mechanisms to streamline their operations consequenceively. IQVIA helps clients implement mechanisms across facilities planning, operations and maintenance as well as contract management mechanisms such as PPPs etc.

- **Other Services:** IQVIA Public Health's other services comprise improving utilization of facilities such as OT, OPD, Imaging services; Performance benchmarking; Designing & implementing clinical KPIs; Specialty COE design.

Program Management:

IQVIA Public **Health helps clients with long term projects/programs by undertaking end-to-end project management**

- **Program Design**: Clients seeking help in creating a prospective project/program can approach IQVIA Public Health for advisory on mapping the entire project/program landscape and on a phase by phase implementation plan.

- **Program Implementation:** IQVIA Public Health can provide clients with full time support during the implementation of their project/program by deploying a team of experts as the Project/Program Management Unit.

- **Monitoring & Evaluation:** The progress can during a program/ project can deviate from its envisioned path if proper monitoring mechanisms are not in place. IQVIA can help clients with monitoring & evaluation services providing information on bottlenecks and their respective solutions for keeping a project on-track.

  Infrastructure Advisory: Clients *envisioning to establish healthcare infrastructure can receive IQVIA's support across a range of activities which can help them make informed decisions*

- **Gap Assessment Study:** IQVIA Public Health can provide clients with detailed gap assessments for infrastructure requirement when they are considering construction or upgradation of their infrastructure projects.

- **Feasibility Studies & Project Structuring:** The experts at IQVIA Public Health can advise clients on the feasibility of their vision, identifying key hurdles which need to be addressed by structuring a project consequenceively.

- **Bid Process Management & PMC Support:** An consequenceively bid process management approach can help clients identify the right service providers while maintaining transparency and fairness.

    Institutional Strengthening & Capacity Building: IQVIA can help clients develop public institutions' internal capacity by upgrading existing personnel's skill sets. IQVIA's services encompass:

- **Capacity assessment:** Designing "To-Be" roles and conducting a skill gap assessment of the skill set and expertise of existing personnel

- **Organisation Restructuring & Capacity Building:** Preparation of new organisation chart, job descriptions, roles and responsibilities, KPIs and recruitment strategy for additional manpower

- **Implementation Support:** Designing detailed work plan, organisation and facilitation of workshops and training sessions, assisting the management identify HR services vendors Strengthening public institutions through training delivery for existing personnel and creating a monitoring & evaluation mechanism for the training provided to personnel

Dedicated Supply Chain Practice with Specialists in Public Health Supply Chain

IQVIA has one of the largest public health practices with nearly a decade of service devoted to the public sector and an internal structure to support and enhance our services to Governments and multi-lateral funding agencies. IQVIA Health has significant experience in advising Governments across the world in areas ranging from healthcare surveys to technology to transformational insights.

IQVIA Health India team has conducted multiple Public Health supply chain/logistics assessments South Asia and Africa markets **in supply chain related to gap/bottleneck analysis, strategy,**

institutional review, organisational restructuring, manpower assessment, capacity building, review & documentation of policies/ SOPs/ manuals, etc.

Our practice comprises experts providing comprehensive advisory services to both **public and private sector clients and to all levels of government, legislative agencies, municipalities, nodal agencies, redevelopment agencies, NGOs, and public-sector corporations.**

The **key service providing's in are: -**
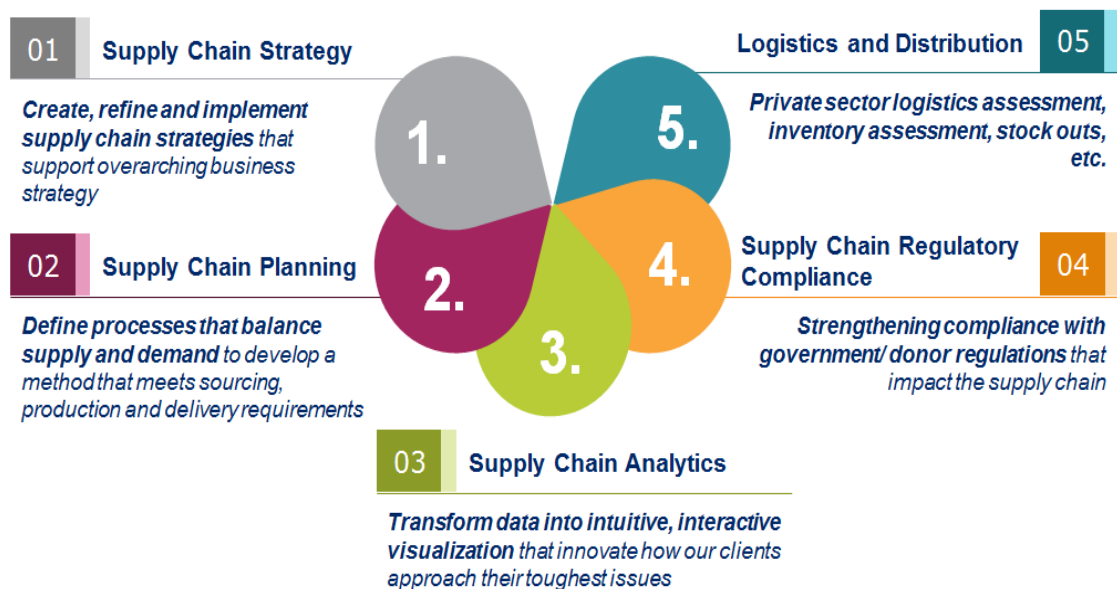
Part-2

Dissertation

Social Support and Psychological Well-Being among Office Employees of an MNC Company in Delhi

Background

The effect of mental health issues in the working environment has genuine results for the person as well as for the efficiency of the endeavor. Employee performance, absenteeism, rates of illness, staff turnover and accidents are all affected by employees' psychological well-being status. 42.5% of corporate workers in India experience the ill effects of depression [WHO]. The rate of depression and anxiety among corporate representatives has expanded by 45-50 percent in the vicinity of 2008 and 2015 (WHO). India represents about 18% of the total populace. It represented 15% of worldwide DALYs inferable from mental, neurological and substance use disorders (31 million 11 DALYs) with depression, representing 37% (11·5 million DALYs) in 2013. The weight of depression, in terms of DALYs, expanded by 67% in the vicinity of 1990 and 2013. Besides, 42.5% corporate workers in India experience the ill effects of depression. The rate of anxiety and depression among corporate representatives has expanded by 45-half in the vicinity of 2008 and 2015.

Social help is a trade of assets between no less than two people apparent by the supplier or the beneficiary to be expected to improve the wellbeing of the beneficiary. It alludes to a social network's arrangement of mental and material assets expected to profit a person's capacity to adapt to pressure. Usually separated regarding three kinds of assets: instrumental, informational, and emotional (e.g., House and Kahn, 1985). Instrumental help includes the arrangement of material guide, for instance, money related help or help with day by day errands. Informational help alludes to the arrangement of applicable data planned to help the individual adapt to current troubles and commonly accepts the type of counsel or direction in managing one's issues. Emotional help includes the declaration of sympathy, mindful, consolation, and trust and gives chances to enthusiastic articulation and venting. Such typologies of help give a premise to deciding if the

viability of various types of help varies by the idea of distressing occasions or by the qualities of people enduring difficulty.

Social Support is a perspective that ought to be explored since it is depicted as both a cradle against life stressors and in addition a specialist advancing wellbeing and health (Dollete, Steese, Phillips, and Matthews, 2004). The degree to which specialists give social help to each other in the work environment can have a critical effect upon individuals' understanding of work (Chiaburu and Harrison, 2008) and social help inside the working environment may impact the mental psychological well-being of an individual (Cooper et al., 2001).

Psychological well-being (PW) is a far reaching, diverse idea. It incorporates distinctive parts of regular experience. As indicated by numerous analysts (Andrews and Withey, 1976; Najman and Levine 1981; Campbell and Converse 1971) psychological well-being is thought to be the composite measure of physical, mental and social prosperity as saw by every person. Ryff (1989) proposed the idea of psychological well-being as a multidimensional build that comprises of six unmistakable features: an) uplifting disposition toward oneself (self-acknowledgment); b) fulfilling associations with others (constructive associations with others); c) freedom and self-assurance (self-sufficiency); d) feeling of dominance and ability (ecological authority); e) feeling of objective directedness throughout everyday life (reason throughout everyday life); f) feeling of individual proceeded with improvement (self-improvement). It is concurred that a model of psychosocial prosperity ought to incorporate and mirror the interconnectedness of the different parts of general prosperity (Linley, et al.,2009). Psychological well-being is characterized as "commitment with existential difficulties of life" (Keyes et. al.,2002). It is the measure of a person's observation about the reason and general control of his or her life, the level of

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accomplishment of one's potential, and the idea of relational connections manufactured. It is a measure of a man's observation about importance throughout everyday life (Frankl, 1963).

Social relations have appeared to cradle the impacts of weight on a man's emotional wellness (Bolger and Eckenrode, 1991). Albeit much research underscores the positive parts of social help at work, the levels are probably going to fluctuate altogether given the degree to which representatives get along isn't steady (Winnubst and Schabracq, 1996). Whenever positive, social relations can advance occupations (May et al., 2004), give work satisfaction (Hodson, 2004), and decidedly impact turnover as representatives who encounter bolster from associates are more averse to leave the association temporarily (Moynihan and Pandey, 2008). Also, steady colleagues who give assistance and elucidation of errands can lessen a person's part uncertainty, part strife and work stack which may eventually expand work fulfillment and authoritative responsibility (Chiaburu and Harrison, 2008). Conversely, negative work environment relations can cause pressure and employment disappointment (Winnubst and Schabracq, 1996). This can have an inconvenient impact upon a worker's passionate prosperity (Labianca and Brass, 2006), to the degree that social relations at work which are ill bred, doubtful and need correspondence are free indicators of restoratively analyzed dejection (Oksanen et al., 2010).

Bakhshi and Sood (2012) showed that the social help is decidedly identified with psychological well-being. Positive social help indicate relationship is the real wellspring of a Method feeling of prosperity (Wink and Dillon, 2003). Social help is an essential relational guide which is efficiently found to be corresponded with psychological well-being especially in any period of stress (Norris and Kaniasty, 1996).

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Rationale of Study

A current report by 1to1Help.net, a professional counselling company on 'The Mental Health Status of Employees in Corporate India,' over 6000 employees in different cities, across organizations willfully finished a depression survey which demonstrates that 80% of the respondents who showed indications of anxiety and 55% with symptoms of depression were going through it over a year prior to looking for any assistance. The activating factor for mental illness were stress due to excessive work. Thus there is need for an investigation to be directed in corporative setting among office representatives as well.

Research Question

1. Does social support affect psychological well-being of office employees of selected MNC?

Objectives

1. To assess the social support among office employees.
2. To assess the psychological well-being among office employees.
3. To explore connection between social support and psychological well-being of office employees.

Methodology

Study Design: - Cross sectional study.

Study Location and population: - This study is conducted in an MNC located in New Delhi. All the employees of the selected MNC.

Inclusion Criteria: - Respondents who are working in the MNC and of age above 18 are included in the study.

Exclusion criteria: - Respondents below 18 and not working in a MNC company are excluded.

Sample Size: - All the 72 employees working in the selected MNC were selected and a liker-scale type questionnaire was administered to them. Out of total respondents, 51 responses were valid. Identity of all the respondents was confidential and is not revealed anywhere neither will be revealed in the future.

Instrument and standard scale: - In the study two variables were assessed; social support and psychological well-being using two standard tools.

Social support in the respondents was evaluated using Interpersonal Support Evaluation List shortened version (ISEL) – 12 items. The social support scale was developed by Cohen S and Hoberman H.M. Psychological well-being was accessed using Ryff's C psychological well-being scales shortened version- 18 items developed by Ryff Carol.

 The social support scale has three different subscales designed to measure three dimensions of perceived social support and the tool is divided into the following:-

Tangible support- 3, 8, 10, 12

Belonging support- 1, 5, 7, 9

Appraisal support- 2, 4, 6, 1

The scoring is carried out by taking the base score 4 and greatest score 16 and 10 is taken as mid-point based on which high score and low score is translated. According to Cohen et al Appraisal support refers to enlightening help or advice in defining and coping with problems. Belonging

support refers to social companionship. Belonging support includes having others with whom to participate in a social activity like a sport or dining out. Tangible support refers to the provision or material aid such as needing loan or helpful physical effort. The tool consist of mixture of positive and negative item content. Questions with negative item were reverse scored. The tool is scored into high scorer and low scorer according to the above dimensions. It is the one of the most widely used tool for measuring the social support among any individuals.

Ryff's scales of psychological well-being were intended to quantify six theoretically inspired builds of psychological well-being and the tool is divided into the following:-

Autonomy- 1, 7, 13

Environmental Mastery- 2, 8, 14

Personal growth- 3, 9, 15

Positive Relations- 4, 10, 16

Purpose in Life- 5, 11, 17

Self-Acceptance- 6, 12, 18

The scoring is finished by taking the base score 3 and greatest score 9 and 6 is taken as mid-point based on which high score and low score is translated. The widely used questionnaire included 42 items (7 per dimension) but shorter version comprises of 18 items (3 per dimension). The tool consist of mixture of positive and negative item content. Questions with negative item were reverse scored. The negative questions are in the bold. For each dimension the scoring is divided into high scorer and low scorer and are discussed in annexures.

Data Analysis: - Statistical Package for Social Science (SPSS) Version 23.0 was used for data analysis, techniques of descriptive statistics is used to measure frequency, crosstabs and between social support and Psychological well-being.

Results and Interpretation: -

Interpretation is done by using SPSS and MS excel. Key findings are discussed in this section.
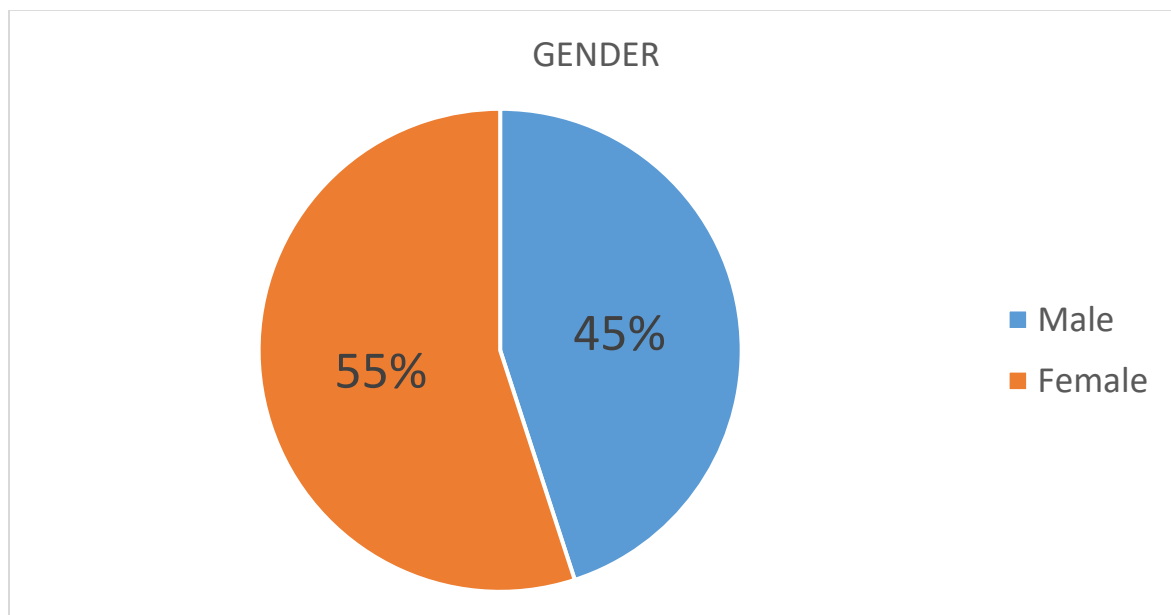
The above figure demonstrates the sexual orientation subtle elements in which 55% were females and 45% were males and greatest individuals were in the age classification of 25-35 which is the most noteworthy years of working.

Social support among office employees

The social support is divided into 3 subscales: - Tangible, Belonging and Appraisal support.

Tangible support

	Frequency	%
Low Social Support	12	23.5
High Social Support	39	76.5
Total	51	100.0

Belonging Support

	Frequency	%
Low Social Support	26	51.0
High Social Support	25	49.0
Total	51	100.0

Appraisal Support

	Frequency	%
Low Social Support	15	29.4
High Social Support	36	70.6
Total	51	100.0
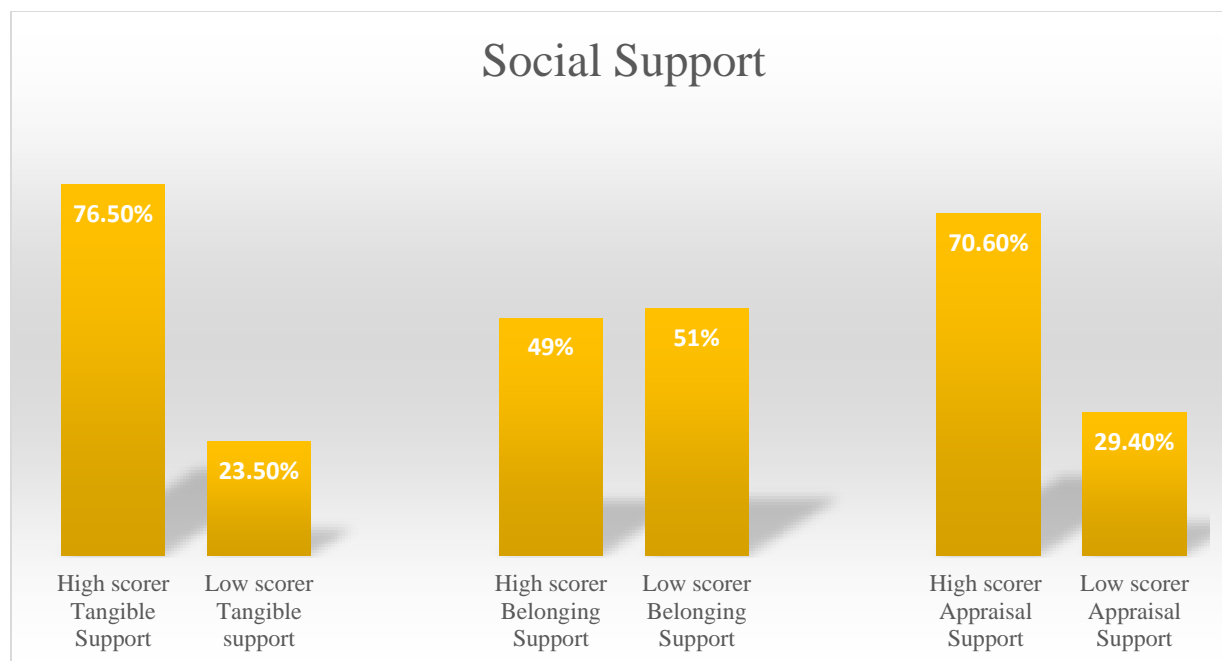
Social Support

The analysis for social support was done in three categories i.e. Tangible, Belonging and Appraisal support. The scoring is carried out by taking the base score 4 and greatest score 16 and 10 is taken as mid-point based on which high score and low score is translated. 76.5% of respondents scored high in tangible support which means these percent of respondents does not need provision or material aid such as a loan whereas 23.5% of respondents scored low which means these respondents need provision or material aids. 51% of respondents scored high in belonging support which means the respondents have social companionship which includes having someone with whom you can go out with in any activity like movies and trips whereas 49% of respondents scored low in belonging support which means they don't have companionship. 70.6% of respondents scored high in appraisal support which means they don't need informed advice in characterizing and adapting to issues whereas 29.4% of respondents scored low in appraisal support which means they need informed advice in characterizing and adapting to issues.

Psychological well-being among office employees

The psychological well-being is divided into 6 subscales and the tool is divided into the following:-

Autonomy- 1, 7, 13

Environmental Mastery- 2, 8, 14

Personal growth- 3, 9, 15

Positive Relations- 4, 10, 16

Purpose in Life- 5, 11, 17

Self-Acceptance- 6, 12, 18

Autonomy

	Frequency	%
Low Scorer	37	72.5
High Scorer	14	27.5
Total	51	100.0

Self-Acceptance

	Frequency	Percent
Low Scorer	22	43.1
High Scorer	29	56.9
Total	51	100.0

Purpose in in life

	Frequency	Percent
Low Scorer	9	17.6
High Scorer	42	82.4
Total	51	100.0

Positive Relation

	Frequency	Percent
Low Scorer	12	23.5
High Scorer	39	76.5
Total	51	100.0

Personal Growth

	Frequency	Percent
Low Scorer	41	80.4
High Scorer	10	19.6
Total	51	100.0

Environmental Mastery

	Frequency	Percent
Low Scorer	32	62.7
High Scorer	19	37.3
Total	51	100.0

Psychological Well-being
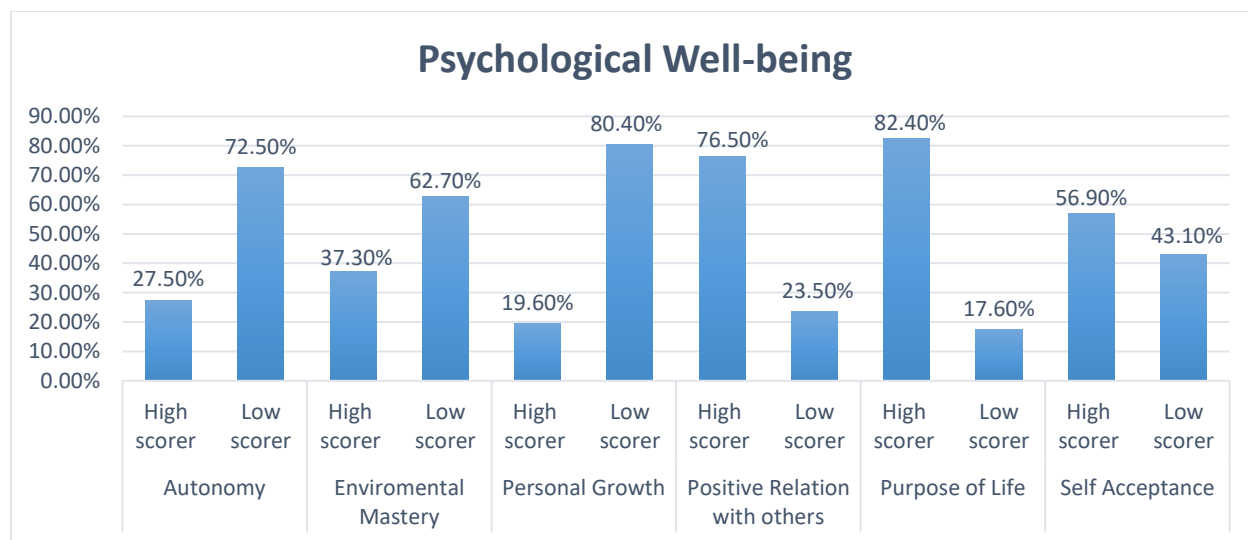
The above table shows 6 measurements of psychological well-being i.e. Autonomy, Environmental Mastery, Personal Growth, Positive Relation with Others, Purpose in Life and Self-Acceptance. The scoring is finished by taking the base score 3 and greatest score 9 and 6 is taken as mid-point based on which high score and low score is translated.

Only 27.5% of respondents scored high in autonomy which means "these respondents are self-deciding and autonomous; ready to oppose social weights to think and act in certain ways; controls conduct from inside; assesses self by individual norms whereas 72.5% of respondents are low scorer in autonomy which means the respondents are worried about the desires and imperative choices; adjusts to social pressures to think and act in light of assessments of others; depends on judgment of others.

37.30% of respondents are high scorer in environmental mastery which implies the respondent has a feeling of dominance and capability in dealing with the surroundings; controls complex exhibit of outer environment; makes compelling utilization of encompassing openings; ready to pick or make settings appropriate to individual needs and qualities. 62.7% of respondents experiences issues overseeing regular undertakings; feels unfit to change or enhance encompassing setting; is

uninformed of encompassing openings; need feeling of control over outer world.19.6% are high scorer means the respondents have feeling of proceeded with advancement; considers self to be developing and extending; is available to new encounters; sees change in self and conduct after some time; trading in ways that reflect more self-information and adequacy and 80.4% of respondents are low scorer which means they have feeling of proceeded with advancement; considers self to be developing and extending; is available to new encounters; sees change in self and conduct after some time; trading in ways that reflect more self-information and adequacy.

76.5% of respondents are high scorer in positive relations with others which means responds have warm fulfilling, putting trustworthy relations; is worried about the welfare of others; fit for sympathy, warmth, intimacy; comprehends give and take of human connections.23.50% of respondents are low scorer which means they have few close, trusting relationships with others; finds it difficult to be warm, open and concerned about others; is isolated and frustrated in interpersonal relationships; not willing to make compromises to sustain important ties with others.

82.40% have scored high in purpose in life which means they have objectives throughout everyday life and ability to know directions; feels there is a significance to present and past life; holds trusts that give life reason; has targets for living whereas 17.6% of respondents scored low which means they does not have sense of meaning in life; has very few of objectives of points, needs feeling of headings; does not see motivation behind past life; has no trusts that give life a significance.

56.9% of respondents have scored higher in self-acceptance dimension which means the respondent has an inspirational attitude towards the self; recognizes and acknowledges various parts of self, including great and terrible characteristics; feels positive about past life and 43.10% of respondents scored low which means the respondent feels dissatisfies with self; is disillusioned

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with what has happens in past life; is troubled about certain individual characteristics; wishes to appear as something else at that point what one is.

Cross Tabulations

Only selected dimensions of psychological well-being has been taken into consideration to see the relationship between social support and psychological well-being.

Environmental Mastery * Belonging Support Cross tabulation

			Belonging Support		
			Low Social Support	High Social Support	Total
Environmental Mastery	Low Scorer	Count	17	15	32
		% of Total	33.3%	29.4%	62.7%
	High Scorer	Count	9	10	19
		% of Total	17.6%	19.6%	37.3%
Total		Count	26	25	51
		% of Total	51.0%	49.0%	100.0%

The results obtained using cross tabulation shows that maximum number of respondents (33.3%) were low scorer in both environmental mastery and belonging social support. It can be interpreted that respondents who are less comfortable with their environment require more belonging support.

Self-Acceptance Test * Appraisal Support Cross tabulation

			Appraisal Support		
			Low Social Support	High Social Support	Total
Self-Acceptance Test	Low Scorer	Count	6	16	22
		% of Total	11.8%	31.4%	43.1%
	High Scorer	Count	9	20	29
		% of Total	17.6%	39.2%	56.9%
Total		Count	15	36	51
		% of Total	29.4%	70.6%	100.0%

The above table depicts that 39.2% of respondents have scored high in self-acceptance do not require appraisal support i.e. they are capable of their self-help and are able to cope with their problems.

Autonomy * Appraisal Support Cross tabulation

| | | | Appraisal Support | | Total |
			Low Social Support	High Social Support	
Autonomy	Low Scorer	Count	12	25	37
		% of Total	23.5%	49.0%	72.5%
	High Scorer	Count	3	11	14
		% of Total	5.9%	21.6%	27.5%
Total		Count	15	36	51
		% of Total	29.4%	70.6%	100.0%

The above table shows that 49% of respondents have scored high in autonomy which means that they do not require informed help or appraisal support in defining and coping with problems.

Personal Growth * Tangible Support Cross tabulation

			Belonging Support		
			Low Social Support	High Social Support	Total
Personal Growth	Low Scorer	Count	21	20	41
		% of Total	41.2%	39.2%	80.4%
	High Scorer	Count	5	5	10
		% of Total	9.8%	9.8%	19.6%
Total		Count	26	25	51
		% of Total	51%	49%	100.0%

41.2% respondents scored low in self-improvement which implies they require social fraternity which incorporates working and taking an interest with others.

Purpose in Life * Tangible Support Cross tabulation

			Tangible Support		
			Low Social Support	High Social Support	Total
Purpose in Life	Low Scorer	Count	2	7	9
		% of Total	3.9%	13.7%	17.6%
	High Scorer	Count	10	32	42
		% of Total	19.6%	62.7%	82.4%
Total		Count	12	39	51
		% of Total	23.5%	76.5%	100.0%

62.7% of individuals scored high in purpose in life and furthermore high in unmistakable help.

This implies individuals with high motivation behind life are in more need of material aid.

Conclusion

The main purpose of the study was to assess the social support and psychological well-being among office employees. The study shows that the employees who have low social support also have low psychological well-being. The review of literature shows that there is a positive relation between psychological well-being and social support. The different determinants of social support have different impact on the determinants of psychological well among employees. The results reveal that the employees have lower level of social support and also have poor psychological well-being. The outcomes demonstrates most respondents' needs guidance, fraternity and material aid as social help. A good number of respondents are worried about imperative choices and accommodates social pressures and depends on judgment of others i.e. autonomy. Additionally maximum number of respondents experience issues in overseeing regular undertakings and unfit to change or enhance surroundings i.e. environmental mastery. Individuals likewise have great positive connection with others have reason in existence with a few points and goals and furthermore has uplifting disposition towards self. Lastly maximum number of respondent feels exhausted an uninterested with life and unfit to grow new states of mind or conduct i.e. personal growth.

Limitation of the study

- Result may not be generalized to other population.

- The sample size was small.

- Selection bias.

SOCIAL SUPPORT AND PSYCHOLOGICAL WELL BEING AMONG OFFICE EMPLOYEES IN DELHI

Age -   Gender-

Instructions: This scale is made up of a list of statements each of which may or may not be true about you. For each statement circle "definitely true" if you are sure it is true about you and "probably true" if you think it is true but are not absolutely certain. Similarly, you should circle "definitely false" if you are sure the statement is false and "probably false" if you think it is false but are not absolutely certain.

1. If I wanted to go on a trip for a day (for example, to the country or mountains), I would have a   hard time finding someone to go with me.

   1. Definitely false   2. Probably false   3. Probably true   4. Definitely true

2. I feel that there is no one I can share my most private worries and fears with.

   1. Definitely false   2. Probably false   3. Probably true   4. Definitely true

3. If I were sick, I could easily find someone to help me with my daily chores.

   1. Definitely false   2. Probably false   3. Probably true   4. Definitely true

4. There is someone I can turn to for advice about handling problems with my family.

  1. Definitely false   2. Probably false   3. Probably true   4. Definitely true

5. If I decide one afternoon that I would like to go to a movie that evening, I could easily find someone to go with me.

  1. Definitely false   2. Probably false   3. Probably true   4. Definitely true

6. When I need suggestions on how to deal with a personal problem, I know someone I can turn to.

  1. Definitely false   2. Probably false   3. Probably true   4. Definitely true

7. I don't often get invited to do things with others.

  1. Definitely false   2. Probably false   3. probably true   4. Definitely true

8. If I had to go out of town for a few weeks, it would be difficult to find someone who would look after my house or apartment (the plants, pets, garden, etc.).

  1. Definitely false   2. Probably false   3. Probably true   4. Definitely true

9. If I wanted to have lunch with someone, I could easily find someone to join me.

  1. Definitely false   2. Probably false   3. Probably true   4. Definitely true

10. If I was stranded 10 miles from home, there is someone I could call who could come and get me.

1. Definitely false   2. Probably false   3. Probably true   4. Definitely true

11. If a family crisis arose, it would be difficult to find someone who could give me good advice about how to handle it.

1. Definitely false   2. Probably false   3. Probably true   4. Definitely true

12. If I needed some help in moving to a new house or apartment, I would have a hard time finding someone to help me.

1. Definitely false   2. Probably false   3. Probably true   4. Definitely true

Psychological well being

1. I tend to be influenced by people with strong opinions.

   a) Always   b) sometimes   c) never

2. In general, I feel I am in charge of the situation in which I live.

   a) Always   b) sometimes   c) never

3. I think it is important to have new experiences that challenge how you think about yourself and the world.

   a) Always   b) sometimes   c) never

4. Maintaining close relationships has been difficult and frustrating for me.

   a) Always   b) sometimes   c) never

5. I live life one day at a time and don't really think about the future.

   a) Always   b) sometimes   c) never

6. When I look at the story of my life, I am pleased with how things have turned out.

   a) Always   b) sometimes   c) never

7. I have confidence in my opinions, even if they are contrary to the general consensus.

   a) Always   b) sometimes   c) never

8. The demands of everyday life often get me down.

   a) Always   b) sometimes   c) never

9. For me, life has been a continuous process of learning, changing and growth.

   a) Always   b) sometimes   c) never

10. People would describe me as a giving person, willing to share my time with others.

   a) Always   b) sometimes   c) never

11. Some people wander aimlessly through life, but I am not one of them.

   a) Always   b) sometimes   c) never

12. I like most aspects of my personality.

   a) Always   b) sometimes   c) never

13. I judge myself by what I think is important, not by the values of what others think is important.

   a) Always   b) sometimes   c) never

14. I am quite good at managing the many responsibilities of my daily life.

   a) Always   b) sometimes   c) never

15. I gave up trying to make a big improvements or changes in my life a long time ago.

   a) Always   b) sometimes   c) never

16. I have not experienced many warm and trusting relationships with others.

   a) Always   b) sometimes   c) never

17. I sometimes feel as if I've done all there is to do in life.

   a) Always   b) sometimes   c) never

18. In many ways, I feel disappointed about my achievements in life

    a) Always   b) sometimes   c) never

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