

1 Title: **Fostering Mental Health at Work: The Butterfly Effect of Management Behaviors**

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6 Authors: Lecours, Alexandra^{1,2,3}, St-Hilaire, France^{1,4}, & Daneau, Patrice^{1,4}

7

8 1. Équipe sur les organisations en santé, École de gestion, Université de Sherbrooke

9 2. Département de réadaptation, Université Laval

10 3. Center for Interdisciplinary Research in Rehabilitation and Social Integration

11 4. Département de management et gestion des ressources humaines, École de gestion,
12 Université de Sherbrooke

13

14 Corresponding author:

15 Alexandra Lecours

16 Département de réadaptation

17 Pavillon Ferdinand-Vandry

18 1050, avenue de la médecine

19 Université Laval

20 Québec (Québec), G1V 0A6

21 418 656-2131 #7422

22 Alexandra.Lecours@fmed.ulaval.ca

23

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27

28

29 **Abstract**

30 With the growing number of work-related mental health problems occurring worldwide, a call for
31 all stakeholders to contribute to improving these problems has emerged. Managers' behaviors
32 may act as a resource to promote the involvement of employees to foster mental health at work
33 through their behaviors. This study aims to identify the behaviors of managers supporting the
34 behaviors of employees fostering mental health at work. Following a qualitative research design,
35 data were collected through interviews ($n = 22$) and analyzed using a template analysis strategy.
36 The results reveal 20 concrete, specific and fairly simple behaviors that managers may adopt to
37 support the involvement of their employees in behaviors fostering mental health at work. For
38 example, consulting employees, providing room for mistakes and organizing social activities are
39 behaviors managers may adopt to support the engagement of employees in behaviors fostering
40 mental health at work. According to social exchange theory, the results of this study propose
41 levers to implement a favorable context in which the behaviors of managers and those of
42 employees interact. Given the potential influence of managers' behaviors on mental health at
43 work, including this new knowledge in manager training would be judicious to foster shared
44 responsibility for mental health at work.

45

46 **Keywords:** organizational behavior, management competencies, social exchange theory, mental
47 health at work

48

49

50 **Introduction**

51 Work-related mental health problems are concerning to several stakeholders, such as
52 governmental authorities, health professionals, employers, managers and employees. This
53 concern led to a worldwide increase in initiatives regarding mental health at work, such as the
54 National Standard of Canada for Mental Health and Safety in the Workplace (Mental Health
55 Commission of Canada, 2013), the Total Worker Health in the USA (CDC, 2019) or the European
56 Union Compass for Action on Mental Health and Wellbeing (European Commission, 2016). To
57 optimize the effects of these initiatives on mental health at work, numerous authors have
58 highlighted the importance of (1) improving prevention activities and (2) promoting the
59 involvement of all stakeholders, including managers and employees (Lowe, 2020; St-Hilaire,
60 Gilbert , & Brun, 2019; St-Hilaire & Gilbert, 2019).

61

62 ***Fostering mental health at work through organizational behavior: The feedback loop***

63 The association between managers' behaviors and their employees' mental health is well
64 established in the scientific literature (e.g., Skakon, Nielsen, Borg, & Guzman, 2010; Tafvelin,
65 Armelius, & Westerberg, 2011; Westerlund et al., 2010, Peltokorpi & Ramaswami, 2019). Two
66 different approaches examine how managers' behaviors influence mental health: leadership
67 theories and management competency models. Of all leadership theories, transformational
68 leadership is the most predictive of employees' mental health (Kelloway & Barling, 2010), and
69 leader-member exchange theory has been associated with stress (Harms, Credé, Tynan, Leon, &
70 Jeung, 2017). It is more recent that management competency models have highlighted the
71 behaviors that managers may adopt to reduce the stress of employees (Lewis, Yarker, Donaldson-
72 Feilder, Flaxman, & Munir, 2010; St-Hilaire, Gilbert, & Lefebvre, 2018). These behavioral-based
73 competency approaches address the call of some scholars to move toward a better understanding

74 of managerial behaviors in terms of concrete and small day-to-day behaviors (Westerlund et al.,
75 2010). A recent study indicated that tangible manifestations of managers' actions are more
76 effective since they are concrete, observable, and measurable (Gilbert, Dagenais-Desmarais, & St-
77 Hilaire, 2017).

78 Authors advocate for a shared responsibility of mental health at work between all stakeholders
79 (Lowe, 2020; Lowe, 2010), and some specifically highlight the important contributions of
80 employees (Nielsen, Randall, Holten, & González, 2010; WHO, 2019). Recently, empirical studies
81 specifically focused on identifying the behaviors employees may adopt to foster mental health at
82 work (Lecours, St-Hilaire, & Daneau, in press; St-Hilaire et al., 2019). Behaviors such as *identifying*
83 *risks* and *exposing limits* (Lecours et al., in press) or *proposing solutions* and *expressing satisfaction*
84 (St-Hilaire et al., 2019) have been identified as ways for employees to foster mental health at work
85 (Lecours et al., in press) or reduce the psychosocial risk factors of managers (St-Hilaire et al.,
86 2019). These recent studies provide a frame of reference in terms of concrete employees'
87 contributions to mental health at work. However, one of the remaining questions is how to solicit
88 this contribution from employees and how to promote their engagement in those behaviors.
89 Previous authors (Paillé & Raineri, 2015; Temminck, Mearns, & Fruhen, 2015) suggested that two
90 types of determinants are of interest and influence the ability of employees to adopt such
91 behaviors: individual and contextual determinants. Besides personal factors (e.g., values),
92 employees' behaviors are strongly related to the context in which they are executed (Somech &
93 Drach-Zahavy, 2004). The behaviors of managers constitute one of the determinants for the
94 behaviors of employees toward safety at work (Hofmann & Morgeson, 1999) and the prevention
95 of work-related health problems (Eisenberger, Stinglhamber, Vandenberghe, Sucharski, &
96 Rhoades, 2002; Rundmo & Hale, 2003; Westaby & Lowe, 2005). Managers who adopt behaviors
97 showing their commitment to and support for workplace health and safety help create a favorable

98 context in which employees feel encouraged to engage themselves in such behaviors (DeJoy,
99 Della, Vandenberg, & Wilson, 2010). However, this interaction effect between the behaviors of
100 managers and the behaviors of employees remains little explored in the research on mental
101 health at work.

102 The interaction between managers' behaviors and those of employees has mainly focused on
103 physical risk elimination (Hofmann & Morgeson, 1999) and prevention of work-related physical
104 health problems (Eisenberger et al., 2002; Rundmo & Hale, 2003; Westaby & Lowe, 2005). In the
105 field of mental health at work, only Van Dierendonck et al. (2004) highlighted a relation between
106 employees' well-being and managers' behaviors: the better an employee's well-being is, the more
107 a manager will offer support. The authors proposed that a feedback loop links managers'
108 behaviors and employees' responses. Although the results of this study are promising, this study
109 does not provide any information about how managers may act to influence employees'
110 behaviors. Overall, the literature concerning the interaction between the behaviors of managers
111 and those of employees toward mental health at work remains limited.

112 Considering that (1) employees may adopt behaviors fostering mental health at work (Lecours,
113 2020; St-Hilaire et al., 2019) and that (2) managers, through their behaviors, may influence the
114 behaviors of employees through an interactional process (Eisenberger et al., 2002; Hofmann &
115 Morgeson, 1999; Rundmo & Hale, 2003; Westaby & Lowe, 2005), we need to obtain a better
116 understanding of management behaviors to establish these favorable behavioral interactions and
117 suitable organizational contexts in which employees may adopt behaviors fostering mental health
118 at work. With this paper, we aim to identify managers' behaviors supporting the behaviors of
119 employees fostering mental health at work. Part of a management competency approach, this
120 study contributes to the knowledge on organizational behavior in relation to mental health. By
121 answering the call for further studies on "concrete managerial behaviors" (Westerlund et al.,

122 2010), this paper provides information on how and which managers' behaviors interact with those
123 of employees, thus contributing to a shared responsibility for mental health at work (Lowe, 2020;
124 Lowe, 2010). This study also answers the call for increasing knowledge on practice-oriented
125 human resource management (Cooke, Dickmann, & Parry, 2020), especially to promote
126 employees' well-being (Guest, 2017).

127

128 **Theoretical background**

129 ***Social exchange theory and the norm of reciprocity***

130 In the organizational behavior literature, social exchange theory (Blau, 1964) is recognized as a
131 dominant theory to study the interactions between social actors and explain the behaviors of
132 protagonists (Chernyak-Hai & Rabenu, 2018; Cropanzano & Mitchell, 2005). The particularity of
133 this theory is its interest in noneconomic interactions, considering social interactions (Cole,
134 Schaninger Jr, & Harris, 2002). Although several studies have raised specificities and nuances over
135 the years, there are two basic principles underlying social exchange theory: (1) an individual acting
136 in a benevolent or positive way toward another individual places the latter in an indebted
137 position; and (2) to fill this feeling of debt, the second individual provides a returned benefit to
138 the first individual (Cropanzano, Anthony, Daniels, & Hall, 2017). In social exchange relationships,
139 individuals are interested in maintaining a balance between their investments and the benefits
140 received. Social exchange implies a desire for reciprocity, which creates a constraint toward an
141 equilibrium between the individuals. This desire for reciprocity serves as a starting mechanism for
142 social interactions. These reciprocity exchanges may concern diverse resources and behaviors,
143 such as security, support, loyalty or citizenship (Cole et al., 2002). Social exchange theory predicts
144 how an initiating action or behavior, which may be positive or negative, toward an individual can
145 engender another action, again positive or negative, from that individual. Furthermore, the

146 authors proposed that these actions can follow one another in a chain of transactions
147 (Cropanzano et al., 2017). These social exchanges take place at different levels in an organization
148 (Cole et al., 2002). For instance, they may occur between two coworkers or between an employee
149 and a manager. The exchanges between employees and managers seem of particular importance
150 because evidence suggests that the chain of transactions implies that the behaviors at one level
151 cascade down to lower levels (Cropanzano et al., 2017). If social exchange relationships are
152 positive and behaviors promote mental health, the behaviors of managers may then influence the
153 engagement of employees in behaviors.

154 On the premise that social exchange theory is based on a universal social norm explaining the
155 mechanisms of moral obligation and reciprocity, Gouldner (1960) proposed the norm of
156 reciprocity. This norm implies two principles: (1) individuals should help those who have
157 previously helped them, and (2) they should not harm those who have previously helped them
158 (Gouldner, 1960). When an individual treats another correctly, the norm of reciprocity requires a
159 return of favorable treatment. Therefore, as both individuals in the relation apply the standard of
160 reciprocity, beneficial consequences for both parties are generated. According to Gouldner
161 (1960), the stability of social systems depends on this norm of reciprocity, which generates a
162 contingent exchange of gratification. The norm of reciprocity helps explain the mechanisms that
163 govern social exchanges between individuals at work. For example, if a manager offers resources
164 (e.g., support or recognition) to an employee that foster her/his mental health, this leads to
165 diverse behaviors adopted by this employee to balance the reciprocity of contributions toward
166 mental health at work.

167

168 ***Perceived organizational support and manager support***

169 The quality of the social exchange between an employee and a manager may be monitored using
170 diverse indicators, including the concept of perceived organizational support (Eisenberger,
171 Huntington, Hutchison, & Sowa, 1986). This concept is defined by the degree to which employees
172 believe that their organization values and cares about their well-being and fulfills their
173 socioemotional needs (Eisenberger et al., 1986). Recognized as a contributing factor to social
174 exchange theory and the norm of reciprocity, perceived organizational support can also be
175 defined as the assurance that employees have that help from the organization will be available
176 when they need it to work effectively and manage stressful situations (Eisenberger et al., 2002).
177 Thus, when an organization signifies to employees that it values their contributions and cares
178 about their well-being, it generates perceived organizational support for which a feeling of
179 obligation arises. Based on the norm of reciprocity, beneficial actions directed at employees by
180 their organization contribute to the establishment of high-quality exchange relationships, creating
181 obligations for employees to reciprocate in beneficial ways (e.g., Eisenberger et al., 1986; Shore
182 & Wayne, 1993). Perceived organizational support can therefore be seen as an extension of the
183 idea of social exchange because the feeling of obligation that it creates plays a role in the
184 maintenance of the social exchange relationship between an employee and their organization
185 (Coyle-Shapiro & Conway, 2004).

186 This perceived support may be toward the whole organization, but it may also be toward its
187 representatives. As first-level managers have the strongest influence on employees because of
188 their regular interaction with them (Hofmann & Morgeson, 1999; Thompson, Hilton, & Witt,
189 1998), the authors propose the concept of perceived manager support. This concept can be
190 defined as employees' perception about the will of the manager to value their contributions and
191 to take care of their well-being (Kottke & Sharafinski, 1988). By adopting positive actions toward
192 employees, managers arouse the moral obligation of employees to provide a return on the good

193 treatment they have received (Stinglhamber & Vandenberghe, 2003). Indeed, employees alleviate
194 their feeling of debt by adopting beneficial attitudes and behaviors (Stinglhamber &
195 Vandenberghe, 2003; Wayne, Shore, Bommer, & Tetrick, 2002). Thus, the more individuals feel
196 supported in their workplace, the greater they tend to be involved in different positive behaviors,
197 including safety-related behaviors (Thompson et al., 1998).

198

199 ***Management competency models to foster mental health at work***

200 In recent decades, the authors have studied how management competencies may influence
201 employees' mental health. Yarker et al. (2007, 2008) and Lewis et al. (2010, 2012) proposed a
202 management competency model to reduce stress among employees. They identified several
203 competencies managers may develop to specifically reduce stress. Examples of these
204 competencies are to *manage conflicts, communicate, be empathic and give feedback*. While
205 promising, the identified competencies have various levels of specificity, making them more or
206 less easy to apply in the daily work of managers. To improve this specificity, St-Hilaire et al. (2018)
207 proposed a taxonomy of 92 specific management practices to reduce employees' psychosocial
208 risk exposure. Grouped into 24 competencies and 8 broad themes, these competencies are
209 concrete and tangible (e.g., *protecting employees' break times, holding team meetings and*
210 *making small talk*). Furthermore, Guest (2017) proposed a human resource management model
211 to enhance employees' well-being in which specific management practices were identified (e.g.,
212 *providing engaging work and ensuring a positive social and physical environment*). These
213 management competency models confirm the impacts managers may have on employees' mental
214 health through their behaviors. However, we still do not know how and which managers'
215 behaviors may support the engagement of employees in behaviors fostering mental health at
216 work.

217 Although recent studies (Lecours et al., in press; St-Hilaire et al., 2019) have focused on the
218 behaviors employees may adopt to foster mental health at work, we still do not know how to
219 encourage the adoption of these specific behaviors. According to social exchange influences,
220 managers have recognized impacts on the behaviors adopted by employees and may be
221 considered a resource to enable them to adopt behaviors fostering mental health at work. The
222 identification of the concrete behaviors that managers may adopt is a promising way to
223 operationalize how the behaviors of managers and the behaviors of employees interact, leading
224 to a shared responsibility for mental health at work. This study aims to answer the following
225 research question: What are the behaviors of managers that support the behaviors of employees
226 fostering mental health at work?

227

228 **Methods**

229 A qualitative descriptive research design (Fortin & Gagnon, 2016) was used to conduct the study.
230 Researchers ($n = 4$), professionals (i.e., occupational therapists, human resource managers and
231 organizational psychologists; $n = 12$) and employees ($n = 6$) were recruited as participants
232 according to the following inclusion criteria: (1) must have professional or research expertise of
233 at least five years related to mental health at work and (2) have been in the labor market for at
234 least five years. All participants ($n = 22$, female = 14 and male = 8, *mean age* = 44.4 ± 10.9 years,
235 and *working experience* = 15.4 ± 9.8 years) were recruited using a purposive sampling method.
236 The diversity of respondents' gender, age and employment sector was ensured. Semistructured
237 interviews were conducted with each participant to collect information about employees'
238 adoption of behaviors fostering mental health at work and about how managers can support
239 employees' engagement in such behaviors. The interview plan contained five sections related to
240 (1) sociodemographic data (e.g., *age* and *gender*), (2) introduction questions (e.g., *tell me about*

241 *your experience related to the fostering of mental health at work*), and (3) the representation of
242 the behaviors of employees (e.g., *What is the role of employees toward mental health at work?*),
243 (4) the characteristics of behaviors employees may adopt based on the critical incident technique¹
244 (Dennis & Flanagan, 1954) (e.g., *Tell me about a situation where an employee has acted to foster*
245 *mental health at work. What were the behaviors of this employee? What were the elements that*
246 *led to the behaviors of this employee? What were the behaviors of the manager that influenced*
247 *the behaviors of the employee?* and (5) closing questions (e.g., *Are there other elements related*
248 *to behaviors fostering mental health at work that should be considered?*). The interview plan was
249 validated by two experts in mental health at work. A pretest was also performed with two
250 participants to ensure the clarity and the sequence of questions. The first author conducted all
251 interviews, and the same plan was used for all the participants. The interviews lasted an average
252 of 42.06 minutes (range: 28.48–57.41 minutes) and were digitally recorded. The interviews were
253 transcribed into text and exported to the QDA Miner 5 qualitative analysis software. Template
254 analysis was used as an analytical strategy. Template analysis is a type of thematic analysis that is
255 compatible with several qualitative research designs (Brooks, McCluskey, Turley, & King, 2015;
256 King, 2012). It was chosen because of its flexibility, which is useful in exploratory studies. Another
257 feature of template analysis is the absence of rules regarding the number of hierarchical themes,
258 subthemes and codes to include (King, 2012). This feature allows highlighting differences in the
259 depth and richness among the various characteristics of an emerging topic (Brooks et al., 2015).
260 Template analysis allows the inclusion of *a priori* codes from the literature and *a posteriori* codes
261 emerging from the empirical data. A three-step template construction was followed to use the

¹The critical incident technique is an interview method that collects information about human behavior on the basis of a lived situation (Dennis & Flanagan, 1954).

262 literature as a starting point in the coding process and to allow codes to be withdrawn, modified
263 or added on the basis of the empirical data.

264 Step 1. An initial template was created from the existing literature related to
265 organizational behaviors and mental health at work. The initial template was developed by the
266 first author. The second author verified the accuracy of the template, and adjustments were
267 made. This initial template contained six behaviors grouped into one large theme.

268 Step 2. The initial template was applied to a subset of seven interviews that were found
269 to be representative of all datasets (King, 2012), which led to many modifications to ensure that
270 the codes represent empirical data, creating an intermediate template. The first and third authors
271 worked on this step. After the authors separately coded the data subset, they conducted a review
272 of the coding results through a peer-debriefing process (Padgett, 2017). During peer debriefing,
273 additional codes were proposed, and inaccuracies in some codes were addressed, which led to a
274 refinement of this intermediate template. Thereafter, the second author verified the codes
275 assigned and template structure to ensure consistency. An iterative process allowed creating
276 successive versions of the template before all three authors were satisfied that it represented the
277 data as fully as possible (Brooks et al., 2015). This intermediate template contained 16 behaviors
278 grouped into six large themes.

279 Step 3. The final template was constructed after the implementation, modification and
280 replication of all interview data ($n = 22$) (King, 2012). This last step was performed by the first
281 author. In addition, this final template was developed iteratively through its application to
282 transcripts interspersed with regular meetings with the research team. This periodic
283 communication among researchers heightened their reflexivity and guarded against the undue
284 influence of the perspective of a person. This final template contained 20 behaviors grouped into
285 five large themes.

286 A random selection of 33% of interviews was also independently coded by the third author to
287 enable the calculation of the interrater reliability to ensure reliability. A Scott's pi score of 0.68
288 (percentage of agreement of 85.3%) was obtained, which is acceptable (Frey, Botan, & Kreps,
289 2000).

290 *Ethics.* The participants freely and voluntarily agreed to take part in the study, and no incentive
291 was offered. This project was approved by the Ethics Committee of Research of the Université de
292 Sherbrooke (project 2017-1518).

293 The results concerning the behaviors employees may adopt to foster mental health at work are
294 presented elsewhere (Lecours et al., in press). This paper focused on the behaviors of managers.

295

296 **Results**

297 This study identified 20 concrete management behaviors supporting the behaviors of employees
298 fostering mental health at work. Those behaviors are grouped into five large themes, which are
299 (1) promoting mental health at work, (2) showing appreciation for the efforts of employees, (3)
300 giving decisional latitude to employees, (4) offering support to employees and (5) fostering
301 dialogue. Table 1 shows the final template² resulting from the data analysis process.

302 Table 1. Final template of the concrete behaviors that managers may adopt to support the
303 behaviors of their employees fostering mental health at work

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1. Promote mental health at work
 - 1.1 Involve employees
 - 1.2 Inform employees
 - 1.3 Consult employees
 - 1.4 Encourage the initiatives of employees
 - 1.5 Be a role model
2. Show appreciation for the efforts of employees
 - 2.1 Thank employees
 - 2.2 Reward the behaviors of employees
3. Give decisional latitude to employees

²For the purpose of writing this article, only the final template is presented. The initial and intermediate versions of the template can be obtained by contacting the first author.

- 315 3.1 Set expectations
- 316 3.2 Give room for mistakes
- 317 3.3 Allow leeway
- 318 3.4 Respect the limits of employees
- 319 4. Offer support to employees
- 320 4.1 Provide means to adopt behaviors
- 321 4.2 Refer employees to resources
- 322 5. Foster dialogue
- 323 5.1 Promote dialogue between employees and
- 324 managers
- 325 5.1.1 Be available
- 326 5.1.2 Be open
- 327 5.1.3 Check on employees
- 328 5.1.4 Listen to the needs of employees
- 329 5.1.5 Raise the awareness of mental
- 330 health at work among employees
- 331 5.2 Promote dialogue between employees
- 332 5.2.1 Provide access to physical places for
- 333 informal exchanges
- 334 5.3 Encourage team cohesion
- 335 5.3.1 Organize social activities
- 336

337 **Promote mental health at work**

338 The participants expressed the idea that managers must be concerned about mental health at
339 work and that behaviors reflecting that preoccupation encourages employees to engage in such
340 behaviors. The first way to show their concern is to *involve employees* in organizational
341 interventions. A participant explained how it is important to promote the participation of
342 employees in various organizational interventions related to mental health at work, such as ‘the
343 identification of risks and the identification of solutions’. [RESEARCHER-07] For him, it is the best
344 way to support the involvement of employees in prevention. Another participant stated that it is
345 important ‘to involve employees [in decision making] that some decisions can be made [in
346 collaboration with them]. People's skills are put to use, and they get into it’. [RESEARCHER-06]

347 A second behavior that managers may adopt to promote mental health is to *inform employees*.

348 The participants explained that for employees to become involved in mental health at work, they

349 must first have trust in their organization. For study participants, one way to build this trust is to
350 inform participants about the different decisions made by managers. The following excerpt
351 illustrates how a manager perceives that the explanations she gives to employees influence them
352 to act for mental health at work, especially by coming to meet with her to express their problems.

353 When an employee asks me something [...], the answer may be “n”, but at least I
354 give an explanation. In my opinion, it is important that the person understands the
355 reason for the refusal. I do not just say ‘because’. After that, the person will talk to
356 another, and the other will talk to another, and they will say to themselves: ‘you
357 can go see [the manager], we have answers with her’. After that, I think it's the trust
358 in the organization that settles in and people dare to talk. [PROFESSIONAL-03]

359 The third means for managers to promote mental health at work is to *consult employees*. In fact,
360 the participants explained that consulting employees is done ‘to recognize their intelligence’
361 [RESEARCHER-07], and this is a determinant to support their involvement in mental health at
362 work. A participant expressed that when managers have a decision to make, it is important ‘to
363 give them [employees] the right to speak, to recognize their right to speak and the importance of
364 their words, that's central [to support their involvement toward mental health at work]’.
365 [RESEARCHER-06]

366 The study results also suggest the importance for managers to *encourage the initiatives of*
367 *employees*. The following excerpt shows how encouragement promotes the active involvement
368 of employees in mental health at work.

369 It is done to set up a structure that will help employees to transform their reality. It
370 is to encourage them to transform. [RESEARCHER-02]

371

372 Finally, managers must *act as role models* toward mental health at work. In fact, many participants
373 stated that managers must ‘give the example’ [RESEARCHER-06] and that ‘managers have to act
374 themselves to foster mental health at work because if there is a gap between what employees
375 would like to do versus what they observe from managers, it creates frustration among
376 employees’. [PROFESSIONAL-13] An employee explained how the attitude of her manager
377 influences her.

378 My immediate manager is a very positive woman, so it makes the spirit, the vibe
379 very positive, and we have no choice to go in that direction. We get contaminated
380 by her attitude. [EMPLOYEE-18]

381

382 **Show appreciation for the efforts of employees**

383 The second theme that emerged from the data analysis concerned the importance of showing
384 appreciation for the efforts of employees. The participants stated that managers must *thank*
385 *employees* not only for the work they do, but also for the efforts and actions they put into mental
386 health at work. An employee participant explained that she appreciates her manager for thanking
387 her and her team for caring about others and for trying to help one another so they can manage
388 their working tasks without having enormous stress.

389 She [the employer] said: ‘thank you’: I appreciate it because it shows to employees
390 that she does not take for granted the efforts we make for our well-being.
391 [EMPLOYEE-18]

392 Another way to show appreciation for employees’ efforts is to *reward employees’ behaviors*
393 toward mental health at work to ‘encourage good moves instead of rebuking the bad ones’.

394 [EMPLOYEE-20] A participant explained how establishing a reward system could be interesting to
395 focus on employees who acted on behalf of mental health at work.

396 Why do we not reward employees who have [behaved respectfully with their
397 colleagues]? We could give an award as we do in hockey. We reward the best
398 goalkeeper or the best player, but we also have an award for the player who has
399 been the most respectful toward his/her colleagues, the gentlest. Why can we not
400 think of doing the same thing in organizations? Do not just reward the performance
401 but reward other components that are more related to behaviors. Not just because
402 he/she has provided excellent customer service [...] but also because he/she has
403 adopted healthy behaviors and positive behaviors toward his/her colleagues.

404 [RESEARCHER-04]

405

406 **Give decisional latitude to employees**

407 The third theme concerns giving decisional latitude to employees. The participants first expressed
408 the idea of *setting expectations* between managers and employees. In fact, for employees to be
409 able to manage their behaviors, they must first understand well what is expected of them. A
410 participant suggested brief weekly meetings to set clear expectations.

411 [...] Sometimes it is the manager who puts pressure, but sometimes also it may be
412 employees themselves [...]. If managers do not specify employees the expectations
413 they have toward them, employees are not able to manage themselves. So, I often
414 encourage employees to plan a 15-minute meeting with their manager once a
415 week. If we just say that everything is fine, so much the better. But we have a time
416 slot that is already set to open the discourse and fix expectations on both sides.
417 That's for sure that the manager plays a major role. [PROFESSIONAL-16]

418

419 Another behavior that managers may adopt is to *give room for mistakes*. A participant expressed
420 that making employees feel comfortable acting on behalf of mental health at work is a
421 prerequisite.

422 From experience, situations like this [where employees are involved in mental
423 health at work] can happen in work environments that give the right to make
424 mistakes, that give the right to live more difficult times, and in workplaces where
425 vulnerability is considered as something correct and not as a weakness.

426 [PROFESSIONAL-13]

427

428 *Allowing leeway* is also considered a behavior that managers should adopt to favor the behaviors
429 of employees toward mental health at work. A participant explained that ‘some flexibility in the
430 work is required to allow employees to take the initiative to adopt these behaviors [that foster
431 mental health]’. [EMPLOYEE-20] Another participant said that leeway allows employees to
432 respect their limits and to behave to foster their mental health while doing their job.

433 I think if people are seen as being able to judge, with some judgment. I see a lot of
434 employees who are settled as if they were the machine. They do not have leeway
435 [to adapt to their own way of doing]. [...] In mental health, it helps when you have
436 leeway because you can manage your limits more easily while doing the job.

437 [PROFESSIONAL-01]

438

439 Finally, the last behavior of this theme concerns the importance for managers to *respect the limits*
440 *of employees*, as illustrated by the following excerpt.

441 If you want your employees to adopt those behaviors that are healthy, you need to
442 give them a work environment in which they will not be afraid to say ‘no’, they will
443 not be afraid to put their limits, they will not be afraid to turn off their phone and
444 not check their email. [RESEARCHER-04]

445

446 **Offer support to employees**

447 Fourth, the results showed that offering support to employees is a way to encourage their
448 involvement in behaviors fostering mental health at work. The first behavior related to this theme
449 is to *provide means to adopt behaviors*. A participant said that ‘for employees to get involved
450 [toward mental health at work], the organization must support them in many ways so that it
451 becomes the normal culture to take actions for mental health, no matter which ones’.
452 [PROFESSIONAL-15] Another participant expressed the idea that the organization has to ensure
453 that ‘employees have the right tools [to engage in behaviors fostering mental health]’.
454 [PROFESSIONAL-13]

455

456 The analysis also suggested that managers should *refer employees to resources* when necessary.
457 This behavior will help them seek help and behave to foster mental health. A manager participant
458 explained, ‘I am listening, and I detect that you may need more help so I guide you to seek
459 additional help, guide you toward the services that could help you’. [PROFESSIONAL-10] Another
460 participant noticed an improvement in the manifestation of this management behavior in recent
461 years as ‘resources are now faster identified and suggested to employees’. [PROFESSIONAL-07]

462

463 **Foster dialogue**

464 The last theme that emerged from the analyses was separated into three subthemes: (1) promote
465 dialogue between employees and managers, (2) promote dialogue between employees and (3)
466 encourage team cohesion. To promote dialogue between employees and managers, the
467 participants raised the importance for managers to *be available for employees*. For a participant,
468 employees must be able to share the difficulties they endure or to propose actions to foster
469 mental health at work.

470 It is difficult to install a relationship of trust in which employees feel free to go to
471 see the manager and talk about problems or solutions they think about if they only
472 see him/her [the manager] twice a year. [RESEARCHER-04]

473 Another management behavior supporting the behaviors of employees toward mental health at
474 work is to *show openness* toward what they live. An employee expressed that the openness of
475 her superior is an added value for her mental health at work: 'I'm lucky to have a boss with whom
476 I get along really well and to whom I can say pretty much anything, but I know it's not everyone's
477 luck. [EMPLOYEE-18]' However, another employee participant explained that talking or acting for
478 mental health at work is hard for him because his workplace is not open to that subject.

479 I'm not in an environment that allows me to do that [talk or act for mental health].
480 Your family may die, your parent may have cancer, they [managers] will have
481 empathy for you for two minutes and after that, it's 'business must go on'. That's
482 what is difficult in the organization. [EMPLOYEE-17]'

483 Managers should also *check on employees* to support them in their contribution to the fostering
484 of mental health at work, as expressed in this excerpt.

485 It's having more frequent meetings to talk to employees, but not just about
486 performance. It's also about asking: 'How are you doing?' [...] Really just asking the

487 question: 'How are you?' And it does not have to be formal, to be on the agenda, it
488 can also be conversations that are informal. [RESEARCHER-04]
489 The participants also talked about the responsibility of managers to *listen to the needs of*
490 *employees*. When employees act to foster mental health, they must feel heard to continue to be
491 involved in such prevention behaviors.

492 I was on the brink of burnout and I raised my hand. I talked to my boss and told
493 him, 'look, I've passed all the tests and I'm on the brink of burnout' and my boss
494 said, 'you're leaving, these are the holidays, spend the summer and go on leave',
495 and that's what I did. Today, I am no longer afraid to name my needs because I have
496 been heard. [PROFESSIONAL-08]

497 It has happened in the past that a project took a lot of energy from everyone. The
498 superior was attentive to this, and she decided to drop this project because it was
499 getting too exhausting for employees. [EMPLOYEE-18]

500 *Raising the awareness of mental health at work among employees* appears to be a relevant
501 behavior that managers may adopt. Talking about mental health seems to be a good means to
502 reach this aim as a manager participant said that she 'encourages her employees to talk about
503 mental health because it is not a sign of weakness. On the contrary, it is good and positive'.
504 [PROFESSIONAL-03] Another participant shared a similar idea.

505 How can they [managers] promote that [employees' behaviors fostering mental
506 health at work]? It's to raise their awareness constantly. You do not stop talking
507 about it [mental health], you talk about it, you talk about it, you talk about it and
508 you do concrete actions about it. [PROFESSIONAL-15]

509

510 For the promotion of dialogue among employees, *providing access to physical places for informal*
511 *exchanges* appears to be important as a participant explained.

512 Unfortunately, we see that [places for informal exchanges] disappear in
513 workplaces. There is no room for informal exchanges between people, no more
514 coffee machine, lockers or cafeteria. When I give training, I ask ‘who of you do not
515 have a room to eat for lunch?’ Three-quarters raise their hands and answer ‘we eat
516 in our office’. There are fewer and fewer places to meet and say to each other ‘How
517 are you?’ You are no longer allowed to smoke near the building, you no longer have
518 the right to have your locker because you waste time, you do not have a coffee
519 machine because it has no added value. I think to reappear [those places] in a goal
520 to say that we want employees to exchange between them and help each other,
521 that would help [to involve employees toward mental health]. [PROFESSIONAL-01]

522 Similarly, a participant expressed that having a physical place is important because ‘it feels good
523 to eat with the girls [colleagues] and chat a bit.’ [EMPLOYEE-20]

524 Finally, the last behavior that managers may adopt to favor the behaviors of employees fostering
525 mental health at work is to encourage team cohesion, especially by *organizing social activities*. A
526 participant explained how these behaviors may help by ‘enhancing relations between employees’.
527 [PROFESSIONAL-18] Another participant exposed an example of such a behavior.

528 What we did recently was mindfulness training. To have tools, to think about
529 preserving one's energies and ways of managing stress in the crazy world we live.
530 We did this during a weekend. On Friday, it was a yoga class and exercises with a
531 kinesiologist, and on Saturday, it was a mindfulness class we had all day. The class
532 had 38 employees out of 43. It was good. The employees loved that. We were in an
533 inn on the edge of a river, so the context made us relax even more. We were not in

534 our workplace. So, this experience has allowed us to talk to each other, to see all
535 the employees, because it is rare that we all see each other apart at Christmas [...]
536 To be together, to be able to talk, to be able to exchange, team cohesion.
537 [PROFESSIONAL-09]
538 Regarding those five large themes and 20 concrete behaviors, our results allowed us to achieve
539 the aim of the study, which was to identify the behaviors of managers favoring the behaviors of
540 employees fostering mental health at work.

541

542 **Discussion**

543 This is the first empirical study allowing the identification of concrete and specific management
544 behaviors supporting the behaviors of employees fostering mental health at work. As an
545 application of social exchange theory in relation to behaviors fostering mental health at work, this
546 study contributes to the advancement of knowledge in human resource management regarding
547 how management competency approaches, organizational behavior constructs and mental health
548 at work interact together. Figure 1 exposes the principal contributions of the manuscript. Rooted
549 in social exchange mechanisms, the behaviors of managers may influence the adoption of
550 behaviors by employees regarding their mental health. As the behaviors of managers may also
551 directly influence employees' mental health, the effects of behaviors may be greater than
552 expected, leading to a butterfly effect.

553

554 *Please insert figure 1 here*

555 Figure 1. Summary of the contributions of the study

556 ***Managers' behaviors: Small actions for great effects***

557 As management competencies are recognized as determinants for employees' adoption of
558 behaviors (Carsten, Uhl-Bien, West, Patera, & McGregor, 2010; Podsakoff, Whiting, Podsakoff, &
559 Blume, 2009), including those regarding health at work (Eisenberger et al., 2002; Lecours &
560 Therriault, 2017; Rundmo & Hale, 2003; Westaby & Lowe, 2005), the results provide levers to
561 translate competencies into concrete behaviors. This contribution answers the call of some
562 authors for highly tangible (Gilbert et al., 2017) and specific (St-Hilaire et al., 2018) manifestations
563 of managerial behaviors to foster mental health at work. As highly tangible behaviors of managers
564 have a direct effect on mental health at work (Gilbert et al., 2017), the results help link
565 management competency models to day-to-day interventions. Knowing how to demonstrate
566 some concepts found in models or theories, such as showing appreciation or giving decisional
567 latitude, may be difficult for managers. The results of this study offer fairly simple behaviors to be
568 adopted in managers' daily work that may have a relevant influence on mental health at work,
569 notably by encouraging the contribution of employees in organizational interventions associated
570 with mental health at work. As the contribution of employees is of importance in the management
571 of mental health at work (Nielsen et al., 2010; WHO, 2019), the results offer a prime
572 understanding of how to implement a favorable context in which managers act as a resource for
573 the involvement of employees in fostering mental health at work. By adopting the identified small
574 day-to-day behaviors, managers now have means to show to employees that mental health at
575 work is important to them, thus enhancing the perceived manager support and inducing a
576 transaction chain of social exchange, thus leading to great effects. As managers may be perceived
577 as representatives of the organization, the cascade of reciprocal behaviors fostering mental health
578 at work can go beyond the dyadic relationship and impact the whole organization. In addition,
579 considering that previous studies have shown that employees' behaviors correlate with both
580 mental and physical health (Bronkhorst, 2015), supporting these behaviors through management

581 behaviors may thus lead to greater positive effects to enhance employees' health. The findings
582 highlight the important role of management behaviors in mental health at work and suggest the
583 need for future research to profoundly understand the complex interactions between the
584 behaviors of managers and the behaviors of employees.

585

586 ***Behaviors of managers: 'Two birds with one stone'***

587 The findings suggest that the behaviors of managers act as two mechanisms affecting mental
588 health at work. If managers' behaviors seem to promote the behaviors of employees fostering
589 mental health at work, then the participants also revealed that managers' behaviors also foster
590 the prime mental health of employees. This finding is in line with the literature as several
591 behaviors we identified are similar in some points to the competencies of managers having been
592 associated with the mental health of employees (Guest, 2017; Lewis et al., 2010; St-Hilaire et al.,
593 2018; Yarker et al., 2007). For instance, recognizing employees and dialoging have been previously
594 found to reduce the psychosocial risk exposure of employees. These competencies are similar in
595 many points to the behaviors of *showing appreciation for the efforts of employees* and of *fostering*
596 *dialogue* in the present study. In doing so, we recognize that the behaviors identified confirm
597 those proposed in previous works. What is innovative and contributes to the advancement of
598 knowledge in our results is the influence of these behaviors on two targets. The results suggest
599 that the behaviors of managers may act to kill two birds with one stone: (1) influencing the
600 contribution of employees to fostering mental health at work and (2) fostering the prime mental
601 health of employees. For example, rewarding employees is a management behavior that has a
602 demonstrated direct effect on employees' mental health (Guest, 2017). However, our results
603 suggest that this behavior may also serve as an initiating behavior to start a social exchange
604 interaction and a sense of reciprocity that will encourage employees' engagement in behaviors

605 fostering mental health. Thus, the behaviors of managers not only influence the prime mental
606 health of employees, but they also encourage employee engagement in such behaviors. The
607 mechanisms of social exchange that explain these cascades of behaviors ensure that a simple
608 initial behavior can have great effects on mental health at work. By contributing both to the
609 mental health of employees and by encouraging them to adopt behaviors fostering it, managers
610 support the implementation of a shared responsibility in mental health at work (Lowe, 2020;
611 WHO, 2019). As this shared responsibility has been explored in physical health and safety,
612 manifestations for mental health remain to be understood. Our study was the first step in the
613 understanding of the interaction between the concrete behaviors of managers and employees
614 toward mental health. As the butterfly effect states ‘the flap of a butterfly’s wings in Brazil [can]
615 set off a tornado in Texas’ (Lorenz, 1972), our results propose that a small modification of the
616 initial conditions of a system can quickly generate a chain of events resulting in very significant
617 effects. Only a little concrete behavior of a manager can have a significant effect as a determinant
618 of mental health and as a lever to the behaviors of others.

619 On a practical level, the identified behaviors could be used by organizations valuing mental health
620 at work to offer training to managers. As adopting those management behaviors may result in a
621 cascade of behaviors fostering mental health, at work, it could also help coaches, trainers and
622 consultants in the development of managers’ competencies.

623

624 **Limits**

625 This study contributes to the advancement of knowledge in human resource management, but
626 some limits must be mentioned. First, the small sample size of this qualitative exploratory
627 research implies that theoretical saturation may not have been reached. Even if some authors
628 have suggested that having 16 to 24 participants is enough to obtain valid results from qualitative

629 studies on specific topics (Hennink, Kaiser, & Marconi, 2016), further studies with more
630 participants, particularly more employees, must be undertaken to provide a deeper
631 understanding of the phenomenon. Similarly, it is also not possible to rule out that other
632 behaviors can be adopted by managers to support workers in their engagement in behaviors
633 fostering mental health. The study may not have permitted us to list all of them. Social desirability
634 bias is another limit that might have been present during data collection. The results are based
635 on the analysis of interview data, and it is possible that participants have amplified or improved
636 management behaviors adopted to support employees' behaviors toward mental health at work.
637 Finally, no final validation of the study results was performed with the participants. A final
638 consultation could have been done as another means to ensure trustworthiness of the study.
639 Despite these limitations, the emerging themes addressed and the rigorous and detailed
640 methodology contribute to the relevance and validity of the results of this study.

641

642 **Conclusion**

643 With the growing number of work-related mental health problems occurring worldwide, focusing
644 on the contribution of all stakeholders is crucial. To promote the involvement of employees
645 through their behaviors fostering mental health at work, managers may act as a resource through
646 their behaviors. This study identified 20 concrete, specific and fairly simple behaviors that
647 managers may adopt to support the involvement of their employees in behaviors fostering mental
648 health at work. The behaviors of managers may have great effects on mental health at work by
649 impacting the prime mental health of employees and by encouraging them to adopt behaviors
650 fostering it. The results of this study propose levers to implement a favorable context in which
651 managers' and employees' behaviors interact to foster mental health at work, thereby
652 contributing to a shared responsibility in mental health at work. Given the effect of the behaviors

653 of managers on mental health at work, including this new knowledge in the training of managers
654 would be appropriate as the topic is a priority for many organizations (Loew & O'Leonard, 2012).
655 This would be an efficient intervention to optimize the butterfly effect of management behaviors
656 for mental health at work.

657

658 **Acknowledgment**

659 The authors wish to acknowledge all the individuals who participated in the study.

660

661 **Disclosure statement**

662 There is no conflict of interest to declare.

663

664 **Data available on request from the authors**

665 The data that support the findings of this study are available from the corresponding author, AL,
666 upon reasonable request.

667

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