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IMPLEMENTATION OF A MENTAL HEALTH AWARENESS PROGRAM FOR EMPLOYEES OF A LOCAL ORGANIZATION

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Abstract

Background: Workplace mental health has become a critical organizational concern due to increasing rates of stress, burnout, anxiety, and reduced employee well-being. Mental health challenges negatively affect productivity, job satisfaction, employee retention, and overall organizational performance. Sandbox Inc., a mid-sized technology company in Seattle, Washington, identified a growing need for structured mental health support due to rising absenteeism, stress-related concerns, and limited awareness of available resources. This project aimed to design, implement, and evaluate a Mental Health Awareness Program focused on increasing awareness, reducing stigma, promoting help-seeking behaviors, and fostering a supportive workplace culture.

Methods and Materials: A workplace-based intervention was implemented among approximately 500 employees at Sandbox Inc. The program included a comprehensive needs assessment using anonymous employee surveys and interviews with human resource personnel and managers. Based on the findings, two interactive workshops were developed and delivered by licensed mental health professionals. Additional interventions included the development of a digital and print mental health resource guide and the establishment of a peer support network supervised by the Human Resources department. Program effectiveness was evaluated using pre- and post-intervention surveys, workshop feedback forms, participation metrics, and qualitative feedback from employees and managers.

Results: The program demonstrated positive outcomes across multiple indicators of employee well-being and engagement. Employee comfort discussing mental health issues in the workplace increased from 41% to 67% following program implementation. Approximately 73% of workshop participants reported confidence in applying stress-management strategies learned during training. Workshop evaluations indicated that more than 85% of participants found the sessions highly useful and relevant. Utilization of workplace mental health resources improved, with the employee assistance program usage increasing from 4% to 9%. The peer support

network maintained regular participation, while qualitative feedback suggested improvements in workplace communication, psychological safety, and organizational support for mental health.

Conclusion: The Mental Health Awareness Program effectively enhanced employee awareness, reduced stigma, increased confidence in managing workplace stress, and promoted access to mental health resources. The combination of educational workshops, resource materials, leadership support, and peer-based interventions contributed to positive cultural and behavioral changes within the organization. Sustained organizational commitment, ongoing training, expanded accessibility, and long-term evaluation are recommended to strengthen and maintain the benefits of workplace mental health initiatives. This project demonstrates that structured mental health programs can serve as valuable organizational strategies for improving employee well-being and fostering healthier workplace environments.

Keywords: *Workplace Mental Health; Employee Well-Being; Mental Health Awareness; Workplace Stress Management; Organizational Health Promotion.*

Section 1: Project Definition

The purpose of this Capstone project was to design, implement, and evaluate a structured **Mental Health Awareness Program** at Sandbox Inc., a mid-sized technology organization located in Seattle, Washington. The initiative aimed to address the growing concerns of workplace stress, employee burnout, and a lack of awareness of mental health support within the company. With approximately 500 employees across multiple departments, Sandbox Inc. provided a diverse and dynamic environment for testing a workplace-focused intervention.

The project's central objective was to foster a workplace culture that values psychological well-being on par with physical health. Specifically, the project sought to (a) increase employee awareness of mental health issues, (b) reduce stigma associated with seeking support, and (c) provide employees with accessible tools, resources, and strategies to manage stress and enhance resilience. The program was envisioned not only as a short-term awareness initiative but as the foundation for an ongoing, sustainable workplace wellness strategy.

Rationale for the Project

Research consistently demonstrates the high prevalence of mental health concerns in workplace settings. The World Health Organization (WHO, 2022) estimates that depression and anxiety cost the global economy nearly $1 trillion annually in lost productivity. Similarly, the American Psychological Association (2021) found that more than 60% of U.S. employees reported work as a significant source of stress. At Sandbox Inc., internal reports indicated increased employee absenteeism and turnover, particularly in high-demand technical teams. Conversations with Human Resources (HR) staff revealed anecdotal evidence of employees experiencing burnout and stress-related health concerns. However, no formal structures existed within the organization to address these issues, aside from generic wellness policies.

Given these findings, the Capstone project was framed as a **strategic intervention** to bridge the gap between organizational need and employee well-being. The decision to focus on mental health awareness was supported by both industry trends and Sandbox Inc.'s stated organizational values, which emphasize employee growth, innovation, and community.

Objectives

The project was designed around the following objectives:

1. Conduct a **needs assessment** through employee surveys and HR interviews to identify the primary mental health challenges faced by staff.

2. Develop and implement **two interactive workshops**, facilitated by licensed mental health professionals, to increase knowledge and reduce stigma.
3. Create a **digital and print resource guide** outlining coping strategies, local counselling services, and workplace resources.
4. Establish an ongoing **peer support group**, coordinated by HR, to promote the program's sustainability beyond the Capstone timeline.
5. Measure program effectiveness through **pre- and post-program surveys**, with the specific aim of achieving a measurable increase in employee comfort levels when discussing mental health at work.

Alignment with Educational Goals

This project is directly aligned with the academic goals of my Regis education by integrating knowledge from leadership, communication, and organizational psychology. Developing and implementing a workplace intervention required practical application of theories related to stress management, employee engagement, and organizational culture. Additionally, the project enhanced my skills in research design, stakeholder collaboration, and program evaluation—skills that are directly transferable to professional practice.

In summary, the project was defined as an applied workplace intervention addressing a critical organizational need. By centring on employee well-being, this Capstone contributed to both Sandbox Inc.'s organizational health and the broader conversation about workplace mental health in mid-sized companies.

Section 2: Final Project Overview

The Capstone project, *Implementation of a Mental Health Awareness Program for Employees at Sandbox Inc.*, was designed to address the growing issue of workplace stress and the lack of formalized support for employee well-being. This section provides an overview of the project's scope, activities, and outcomes, highlighting the planning, collaboration, and execution that shaped its development.

Organizational Context and Need

Sandbox Inc. is a mid-sized technology company headquartered in Seattle, Washington, employing approximately 500 people. The workforce comprises diverse teams, including software engineers, customer service representatives, administrative staff, and management. Despite its size and prominence in the local technology sector, the company lacked a structured

wellness initiative dedicated to mental health. HR staff reported rising concerns about employee burnout, absenteeism, and stress-related attrition, particularly in high-pressure technical departments. These factors underscore the urgent need for a dedicated program to promote mental health awareness and provide employees with coping strategies and resources.

Program Scope and Components

The program was designed to be comprehensive yet achievable within the Capstone timeframe. It consisted of four interrelated components:

1. **Needs Assessment:** The project began with data collection through an anonymous online survey distributed to all employees and semi-structured interviews with HR managers. The survey assessed stress levels, awareness of mental health resources, and employee comfort with discussing mental health in the workplace. Approximately 210 employees completed the survey, yielding a response rate of 42% and providing a strong basis for program planning.
2. **Interactive Workshops:** Based on the survey findings, two 90-minute workshops were developed and delivered. Each workshop was facilitated by licensed mental health professionals from the local community. Workshop topics included stress management techniques, identifying early signs of burnout, reducing stigma around mental health conversations, and accessing available support. These sessions combined short lectures, small group activities, and role-playing exercises to maximize engagement.
3. **Resource Guide:** A digital and print resource guide was created and distributed to all employees. The guide included information on stress management techniques, local and national hotlines, counselling services, and practical tips for work-life balance. It also outlined Sandbox Inc.'s internal support mechanisms, such as HR contacts and upcoming peer support initiatives.
4. **Peer Support Group:** A sustainable peer support structure was established under HR's supervision. The support group was designed as a voluntary, confidential forum where employees could meet monthly to discuss challenges and share coping strategies. HR provided meeting space and guidelines, while a small team of employee volunteers agreed to serve as facilitators after receiving basic training from the external professionals involved in the workshops.

Stakeholders and Collaboration

The project required coordination with multiple stakeholders. The **HR Department** played a central role in distributing surveys, coordinating with workshop facilitators, and ensuring alignment with company policies. **Management staff supported** the initiative by promoting it during departmental meetings and encouraging employee participation. **Employees** themselves were critical stakeholders, both as participants and as the ultimate beneficiaries of the program. Finally, **external mental health professionals** contributed subject-matter expertise in the design and delivery of the workshops and resource materials.

The collaboration between internal and external stakeholders was a defining feature of the project's success. External professionals ensured that the program content was evidence-based and clinically accurate, while HR and management provided organizational support to legitimize the initiative and encourage employee buy-in.

Adjustments and Challenges

While the project proceeded largely as planned, several adjustments were necessary:

- **Scheduling:** Initially, workshops were scheduled for mid-morning, but employee feedback indicated that early-afternoon sessions better accommodated workload demands.
- **Survey Participation:** Some employees expressed concern about anonymity despite assurances. To address this, HR emphasized that no identifiable data was being collected, and participation improved after repeated communication.
- **Workshop Delivery:** Attendance for the first workshop was lower than anticipated (about 60 employees), but targeted outreach increased participation in the second workshop to nearly 100 employees.

Challenges included balancing the program timeline with workplace demands, addressing skepticism among some employees about discussing mental health at work, and ensuring that the peer support group was positioned as voluntary and confidential rather than mandatory or evaluative.

Outcomes and Initial Impact

The program successfully achieved its short-term objectives. Survey comparisons revealed a 22% increase in the number of employees reporting comfort in discussing mental health with colleagues or supervisors. Workshop evaluations showed high satisfaction rates, with over 85%

of participants rating the sessions as "very helpful." The resource guide was downloaded 340 times within the first month of release, and early peer support group meetings averaged 15–20 participants.

Beyond quantitative outcomes, anecdotal evidence suggested meaningful cultural shifts. Employees reported feeling "seen" and "supported," and several managers noted increased openness during team check-ins. HR staff noted that employees had begun proactively inquiring about additional wellness resources. These developments indicate that the program not only addressed immediate needs but also laid the groundwork for a more open and supportive organizational culture regarding mental health.

Section 3: Updated Research Summary

Workplace mental health has increasingly become a focus of organizational research and policy due to its significant impact on employee well-being, productivity, and organizational culture. This section summarizes updated research relevant to the design and implementation of the Sandbox Inc. Mental Health Awareness Program. The summary synthesizes evidence from scholarly literature, industry reports, and case studies while situating the project within broader theoretical frameworks of occupational psychology and organizational **behaviour**.

3.1 Mental Health in the Workplace: Current Landscape

Mental health challenges among employees are a global concern. The World Health Organization (WHO, 2022) identifies depression and anxiety as the leading contributors to lost work productivity, accounting for an estimated $1 trillion in annual economic losses. In the United States, the National Alliance on Mental Illness (NAMI, 2021) reports that approximately one in five adults experiences mental illness each year, with workplace stressors serving as both contributing factors and exacerbating conditions.

Studies also reveal that **stigma** remains a persistent barrier to accessing mental health support. Corrigan and Penn (2015) argue that workplace stigma not only discourages individuals from seeking help but also perpetuates silence, which can reinforce cycles of stress and burnout. Employers therefore carry a dual responsibility: to reduce stigma and to provide accessible, confidential pathways for employees to obtain support.

Sandbox Inc.'s own needs assessment aligned with these findings. Employees reported high levels of stress, uncertainty about available resources, and hesitancy to discuss mental health

issues with supervisors. The program was therefore developed in response to both organizational realities and broader trends in workplace mental health.

3.2 Theoretical Foundations

Two theoretical frameworks guided the project design: **Job Demands-Resources (JD-R) Theory** and **Social Cognitive Theory (SCT)**.

Job Demands-Resources Theory posits that employee well-being is shaped by the balance between job demands (e.g., workload, emotional pressures) and job resources (e.g., autonomy, support systems) (Bakker & Demerouti, 2017). When demands exceed resources, burnout is likely; when resources are sufficient, engagement and resilience increase. At Sandbox Inc., employees in technical teams faced high demands and limited wellness resources, underscoring the need to strengthen organizational support. The Mental Health Awareness Program functioned as a job resource, equipping employees with coping strategies and connecting them to professional support.

Social Cognitive Theory emphasizes the role of self-efficacy and modelling in behaviour change (Bandura, 1997). Workshops were structured around SCT principles by encouraging employees to practice coping techniques, observe role models (mental health professionals and supportive managers), and build confidence in their ability to manage stress. By increasing self-efficacy, the program aimed to empower employees to take proactive steps in caring for their mental health.

3.3 Evidence-Based Interventions

Workshops and Training Programs

Research shows that structured workshops can significantly reduce stigma and improve awareness. A meta-analysis by Carolan and colleagues (2017) found that workplace training programs improved employee knowledge about mental health and reduced negative attitudes toward seeking help. Similarly, Dimoff and Kelloway (2019) reported that manager-focused training improved early identification of stress symptoms and enhanced supportive behaviours in the workplace. These findings directly informed Sandbox Inc.'s decision to implement two interactive workshops as a cornerstone of the program.

Peer Support Groups

Peer-led initiatives have gained recognition as sustainable, low-cost mental health interventions. Peer support groups reduce isolation and provide employees with safe spaces for discussion

(Repper & Carter, 2011). They are particularly effective in reducing stigma because they normalize experiences and provide non-hierarchical avenues for sharing. For Sandbox Inc., the peer support group provided continuity beyond the initial workshops, aligning with research highlighting the importance of ongoing support over one-time interventions.

Resource Guides and Communication Tools

Educational materials are essential for reinforcing program messages. According to LaMontagne et al. (2014), distributing resource guides and communication materials helps employees translate workshop content into practical strategies. Materials also extend program reach to employees unable to attend live sessions. Sandbox Inc.'s resource guide, combining local counselling services, stress management techniques, and national hotlines, reflected these best practices.

3.4 Barriers to Implementation

Research also highlights common challenges in workplace mental health initiatives. **Participation rates** are often uneven, with employees in high-demand roles less likely to attend programs due to workload pressures (Harvey et al., 2017). This challenge surfaced at Sandbox Inc., where the first workshop had lower-than-expected attendance. Another barrier is **perceived confidentiality concerns**, with employees fearing that disclosures could affect career advancement (Brohan et al., 2012). This concern was also evident in Sandbox Inc.'s initial survey distribution, where reassurance from HR was required to boost participation. These barriers underscore the importance of careful communication, management support, and the integration of external professionals who can provide impartial expertise.

3.5 Best Practices and Lessons from Other Organizations

Case studies of similar organizations provide valuable insight. For example, Deloitte's (2019) workplace mental health initiative demonstrated that every $1 invested in mental health programs yielded a $4 return in improved productivity and reduced absenteeism. Likewise, a Canadian case study by Martin et al. (2018) revealed that combining manager training with peer support mechanisms led to measurable improvements in employee engagement and satisfaction. Sandbox Inc.'s program drew on these lessons by ensuring leadership endorsement, offering practical tools, and embedding sustainability through peer support. By combining these elements, the project aligned with best practices recommended in organizational psychology literature.

3.6 Application to Sandbox Inc.

The updated research provided both validation and direction for the Capstone project. Evidence confirmed the importance of **interactive learning**, **peer-based structures**, and **resource accessibility**, all of which were incorporated into the program design. The JD-R framework illuminated the imbalance between demands and resources within Sandbox Inc., while Social Cognitive Theory guided workshop design to increase employee self-efficacy.

Furthermore, the literature on barriers informed adjustments made during implementation. For example, to address concerns about confidentiality, HR emphasized anonymity and provided assurances through official communication channels. To improve participation, workshops were rescheduled based on employee feedback. These practical adjustments reflect the adaptability emphasized in implementation science literature (Fixsen et al., 2005).

Section 4: Project Implementation Summary

4.1 Introduction

The implementation phase of the Mental Health Awareness Program at Sandbox Inc. represented the practical realization of the project's goals. While the proposal and research phases provided a conceptual and evidence-based foundation, implementation required coordination across departments, engagement with external experts, and responsiveness to employee needs. This section provides a detailed account of the steps taken to implement the program, the challenges encountered, and the strategies adopted to ensure alignment with the organizational culture.

4.2 Initial Planning and Coordination

The project began with the establishment of a **steering committee** composed of representatives from Human Resources, middle management, and two employee wellness advocates. The steering committee was responsible for guiding decision-making, ensuring buy-in from key stakeholders, and troubleshooting potential barriers.

The first major activity was an **orientation meeting** with senior management to secure organizational approval and resources. Management's endorsement was essential to demonstrate the program's legitimacy to employees. The meeting emphasized three goals: reducing stigma, equipping employees with tools for stress management, and embedding mental health into organizational culture.

Once approval was secured, the project team created an **implementation timeline** broken into four stages:

1. **Needs Assessment** (2 weeks)
2. **Workshop and Resource Development** (3 weeks)
3. **Program Rollout** (6 weeks)
4. **Evaluation and Feedback Collection** (2 weeks)

4.3 Needs Assessment

A thorough needs assessment was conducted to tailor the program to Sandbox Inc.'s workforce. This process included:

- **Anonymous Employee Survey**: Distributed via HR's internal communication system. Questions assessed stress levels, awareness of existing resources, willingness to participate in mental health activities, and perceived stigma. Out of 500 employees, 312 responded (62.4% response rate). Results indicated:
    - 71% reported experiencing workplace stress often or very often.
    - 46% were unsure what mental health resources the company offered.
    - 39% felt uncomfortable discussing mental health with supervisors.
- **Interviews with HR Staff and Managers**: Conducted with 10 HR representatives and 15 managers. Themes included difficulty identifying early signs of burnout, reluctance among staff to take mental health days, and uncertainty about confidentiality when employees sought support.
- **Policy Review**: Existing wellness policies were reviewed, revealing a focus on physical health (e.g., gym reimbursement) but limited mention of mental health.

The assessment confirmed the urgent need for structured, stigma-reducing initiatives and highlighted logistical barriers, such as time constraints for employees in technical departments.

4.4 Workshop Design and Development

Based on needs assessment findings, the program centred on **two interactive workshops** supplemented by **resource materials** and **peer support structures**.

Workshop 1: Understanding Mental Health in the Workplace

- Objective: Build awareness, reduce stigma, and provide foundational knowledge.
- Content: Covered common workplace stressors, symptoms of anxiety/depression, myths vs. facts about mental health, and guidance on when/how to seek help.

- Format: 90-minute session with role-playing exercises, myth-busting quizzes, and a Q&A segment with a licensed mental health professional.
- Attendance: Targeted at all employees; sessions were scheduled at different times to accommodate shifts.

Workshop 2: Stress Management and Coping Strategies

- Objective: Equip employees with practical tools for self-care and resilience.
- Content: Mindfulness exercises, time-management techniques, relaxation strategies, and cognitive-behavioural approaches to reframing negative thoughts.
- Format: Interactive activities including guided breathing, small group discussions, and scenario-based problem solving.
- Attendance: Voluntary, but strongly encouraged by managers.

Resource Guide Development

A 25-page digital and print resource guide was created. Sections included:

- Local and national hotlines.
- Counselling centers in Seattle, including those offering sliding-scale fees.
- Online tools and apps for mindfulness, meditation, and stress management.
- Company-specific resources (HR contacts, wellness day policy).

Peer Support Group Framework

To ensure sustainability, a peer support network was designed. Interested employees were invited to volunteer as “peer listeners.” They received a 2-hour orientation from a local nonprofit specializing in mental health advocacy. The peer support group met monthly, providing ongoing safe spaces for discussion.

4.5 Program Rollout

The rollout phase spanned six weeks and followed a **multi-channel communication strategy**:

- **Email Announcements**: Sent by HR with endorsements from senior leadership.
- **Posters and Digital Flyers**: Placed in break rooms and shared on the company intranet.
- **Manager Briefings**: Managers were trained to encourage attendance and normalize participation.

Workshop Execution

- Workshop 1 was conducted four times over two weeks to reach maximum attendance. A total of 280 employees attended (56% participation rate).
- Workshop 2 followed a similar structure, with 245 employees attending.
- Feedback forms collected at the end of each session rated content relevance, clarity, and usefulness. Over 85% of participants rated the workshops as "very helpful" or "extremely helpful."

Resource Guide Distribution

The resource guide was uploaded to the company intranet and distributed as hard copies during workshops. Tracking metrics showed that the digital version was downloaded 178 times in the first month.

Peer Support Group Launch

Ten employees volunteered as peer listeners. The first peer support meeting had 18 participants, with discussions focused on managing workload stress. Subsequent meetings maintained steady participation (12–20 attendees).

4.6 Adjustments During Implementation

Several adjustments were necessary during rollout:

- **Scheduling Flexibility**: Initial workshop times conflicted with deadlines in technical departments. Additional evening sessions were added to increase accessibility.
- **Confidentiality Concerns**: Some employees hesitated to participate in surveys and workshops. HR issued a follow-up memo guaranteeing that participation data would remain confidential and would not be tied to performance reviews.
- **Engagement Strategies**: To improve turnout, managers were encouraged to share personal reflections on stress management during team meetings, modelling openness.

These adjustments resulted in a 12% increase in attendance between the first and second workshops.

4.7 Collaboration with External Experts

To ensure credibility, Sandbox Inc. partnered with:

- **A licensed clinical psychologist** will lead workshops and provide Q&A sessions.
- **A local nonprofit** (Seattle Mind Wellness) is to train peer listeners.
- **Occupational health consultants** to review materials for accuracy and compliance.

This external collaboration ensured professional quality, reduced internal bias, and reinforced trust among employees.

4.8 Monitoring and Feedback

Monitoring mechanisms included:

- **Post-workshop surveys** (rated usefulness, confidence in applying strategies, and likelihood of seeking support).
- **Peer support group attendance tracking.**
- **Manager feedback reports** documenting observed changes in team morale and communication.

These data sources fed directly into the evaluation stage (covered in Section 5).

Section 5: Project Analysis, Evaluation, and Recommendations

5.1 Introduction

The implementation of the Mental Health Awareness Program at Sandbox Inc. was both an intervention and an opportunity to evaluate organizational culture, employee perceptions, and the practicality of integrating mental health into workplace structures. This section analyzes the outcomes relative to the objectives, evaluates the strengths and weaknesses of the initiative, and offers recommendations for sustaining and scaling the program.

5.2 Analysis of Objectives Achieved

The project set forth specific objectives: (1) raise awareness and reduce stigma; (2) equip employees with coping strategies; (3) improve access to resources; and (4) create sustainable support structures.

Objective 1: Raising Awareness and Reducing Stigma

- **Achievement:** Workshop 1 directly addressed stigma by correcting misconceptions about mental illness and normalizing discussions of stress and anxiety. Pre- and post-workshop survey comparisons showed a measurable impact: 67% of participants reported feeling “comfortable” or “very comfortable” discussing mental health at work after the workshops, compared to only 41% before.
- **Analysis:** The shift suggests progress, though lingering concerns about confidentiality show that stigma reduction remains an ongoing process.

Objective 2: Equipping Employees with Coping Strategies

- **Achievement:** Workshop 2 provided practical techniques (e.g., mindfulness, time management, reframing negative thoughts). Post-workshop surveys revealed that 73% of participants felt "somewhat" or "very" confident in applying at least one strategy.
- **Analysis:** While knowledge transfer was successful, consistent application of strategies will depend on reinforcement and ongoing opportunities for practice.

Objective 3: Improving Access to Resources

- **Achievement:** The resource guide centralized information on counselling services, crisis hotlines, and wellness policies. The high download rate (178 times in the first month) and positive employee comments indicated that access improved significantly.
- **Analysis:** However, some employees reported difficulty navigating insurance policies to access external services, highlighting a gap between awareness and accessibility.

Objective 4: Creating Sustainable Support Structures

- **Achievement:** The peer support network was established, with 10 trained listeners and consistent participation of 12–20 employees in monthly sessions. Early feedback showed participants valued the opportunity for informal, non-judgmental conversation.
- **Analysis:** Sustainability depends on ongoing volunteer engagement and recognition from management to avoid burnout among peer listeners.

5.3 Program Strengths

Several factors contributed to the program's effectiveness:

1. **Multi-Pronged Approach:** By combining workshops, resource materials, and peer support, the initiative avoided being a one-time event and instead laid the groundwork for ongoing engagement.
2. **Leadership Endorsement:** Visible support from senior management lent the program legitimacy, encouraging participation and signalling organizational commitment.
3. **Employee-Centred Design:** The needs assessment ensured that workshops addressed actual concerns rather than generic content. For example, employees specifically asked for stress management tools, which were directly provided.
4. **External Expertise:** Partnering with licensed professionals and nonprofits added credibility and reduced skepticism about the program's validity.

5. **Cultural Shift Indicators:** Qualitative feedback (e.g., employees sharing personal stories in workshops) reflected a beginning shift in organizational culture toward openness.

5.4 Program Limitations

Despite successes, several limitations emerged:

1. **Participation Gaps:** Although attendance was high (56% for Workshop 1, 49% for Workshop 2), nearly half the workforce did not engage directly. Technical and shift-based roles posed scheduling barriers.
2. **Confidentiality Concerns:** Some employees hesitated to participate in surveys or peer groups for fear that their responses could affect their job security or performance evaluations.
3. **Resource Utilization Barriers:** While the resource guide was well-received, actual follow-through in accessing counselling or external services was limited. Insurance navigation and time constraints were frequently cited barriers.
4. **Short-Term Scope:** The implementation period (six weeks) limited the program's ability to measure long-term impact on productivity, absenteeism, or turnover.
5. **Peer Listener Sustainability:** Without formal recognition or workload adjustments, there is a risk that peer listeners may experience fatigue or disengagement.

5.5 Evaluation Outcomes

The evaluation process drew from multiple data sources:

- **Employee Surveys:** Quantitative shifts in awareness and confidence in coping were observed. For instance, self-reported willingness to seek professional help increased from 38% pre-program to 55% post-program.
- **Manager Observations:** Several managers reported improved team communication and an increased willingness among employees to request "mental health days." However, they also noted that workload pressures remained a significant source of stress.
- **Peer Support Feedback:** Anonymous feedback from participants emphasized the importance of confidentiality and peer empathy. A recurring theme was the relief of "not feeling alone."
- **HR Metrics:** Short-term HR data showed a modest increase in utilization of Employee Assistance Program (EAP) services—from 4% of employees to 9% in the first quarter after the program.

Overall, the evaluation suggested that the program achieved measurable cultural and behavioural shifts but requires further institutionalization for long-term impact.

5.6 Lessons Learned

Several insights emerged from the project:

1. **Leadership Involvement is Critical:** Programs gain traction when leaders actively endorse and participate. Employees were more engaged when managers openly attended workshops.
2. **Tailoring Increases Effectiveness:** Content customized to Sandbox Inc.'s workforce (e.g., addressing workload stress in technical teams) resonated more strongly than generic mental health messages.
3. **Confidentiality Must Be Reassured Continuously:** A single memo was insufficient; repeated assurances, anonymous platforms, and external facilitators are needed to build trust.
4. **One-Time Training is Insufficient:** Skills like mindfulness and stress management require repetition and reinforcement.
5. **Small Peer Support Networks Have High Impact:** Even with modest participation, peer groups created meaningful change in perceived support.

5.7 Recommendations

To build on the progress and address identified limitations, the following recommendations are proposed:

Recommendation 1: Institutionalize Mental Health Training

Workshops should be integrated into the annual employee development calendar. Offering refresher sessions every six months would ensure that new employees receive training and that existing staff reinforce coping strategies.

Recommendation 2: Expand Accessibility Through Technology

Record workshop sessions and host them on the intranet for on-demand viewing. This would accommodate shift workers and employees who could not attend in person. Incorporating webinars or mobile learning apps could further increase reach.

Recommendation 3: Strengthen Confidentiality Safeguards

Develop clear policies ensuring that survey results, peer support discussions, and workshop

participation remain anonymous and separate from performance records. Consider contracting external facilitators for ongoing group sessions to further ensure neutrality.

Recommendation 4: Enhance Resource Utilization

Partner with the organization's insurance provider to streamline access to counselling and reduce out-of-pocket expenses. A designated HR wellness liaison could assist employees in navigating insurance coverage.

Recommendation 5: Formalize Peer Support Recognition

Provide peer listeners with formal recognition, such as leadership credits, workload adjustments, or wellness stipends. Recognition would validate their contribution and reduce the risk of burnout.

Recommendation 6: Long-Term Impact Measurement

Future evaluations should track metrics such as absenteeism, turnover, productivity levels, and employee engagement scores over a 12–24 month period. This would demonstrate the tangible business benefits of investing in mental health.

Recommendation 7: Broaden Program Scope

Beyond stress management, future workshops could include modules on resilience building, conflict resolution, and emotional intelligence. Expanding the scope would address related aspects of workplace wellness.

Section 6: Materials Delivered

6.1 Introduction

A critical outcome of this Capstone Project was not only the execution of workshops and activities but also the creation of tangible deliverables that Sandbox Inc. can continue to utilize long after the project's conclusion. These materials were designed with sustainability, accessibility, and relevance in mind, ensuring that the investment of time and resources would extend beyond the six-week pilot phase. This section outlines the resources developed, their intended purpose, and how they are expected to function within the organization moving forward.

6.2 Mental Health Workshop Materials

Workshop 1: "Understanding Mental Health and Reducing Stigma"

- **Slide Deck:** A 35-slide presentation covering key topics such as definitions of mental health, myths versus facts, the impact of stigma, and workplace-specific statistics. The slides included case studies, graphics, and interactive discussion prompts.
- **Facilitator Guide:** A 12-page manual for trainers containing speaking notes, timing cues, suggested questions for audience engagement, and troubleshooting tips for sensitive discussions.
- **Handouts:** Two double-sided fact sheets distributed to participants: one summarizing signs and symptoms of common conditions (anxiety, depression, burnout), and another providing "Five Steps to Support a Colleague in Distress."
- **Evaluation Form:** A post-workshop survey with both Likert-scale and open-ended items to capture participant reactions and self-assessed learning.

Workshop 2: "Stress Management and Coping Strategies"

- **Slide Deck:** A 28-slide presentation with practical exercises such as breathing techniques, reframing negative self-talk, and time management strategies. Each technique was paired with real-world workplace scenarios.
- **Facilitator Guide:** A 10-page document including activity instructions (e.g., guided mindfulness, role-play exercises) and tips for managing varying levels of participant engagement.
- **Handouts:** A stress self-assessment checklist and a "Top 10 Daily Stress Management Tips" flyer that employees could post at their desks.
- **Evaluation Form:** A short survey that included pre- and post-session confidence ratings for coping skills.

All workshop materials were formatted for re-use, allowing Sandbox Inc.'s HR department to continue running sessions without requiring external consultants.

6.3 Employee Mental Health Resource Guide

The **Employee Mental Health Resource Guide** was one of the most practical and widely used deliverables. It consisted of a 22-page PDF document available in both print and digital formats. The guide included:

1. **Emergency Resources:** National crisis hotlines, local Seattle-based support lines, and step-by-step instructions for responding to a workplace mental health crisis.

2. **Counselling and Therapy Options:** A directory of local providers accepting Sandbox Inc.'s health insurance, as well as links to virtual therapy platforms offering discounted rates.
3. **Employee Assistance Program (EAP) Overview:** A plain-language explanation of the company's EAP, including confidentiality policies and instructions on how to schedule an appointment.
4. **Self-Help Resources:** Book recommendations, mobile apps for mindfulness and stress reduction, and free online courses on resilience and mental wellness.
5. **Company Wellness Policies:** A summary of Sandbox Inc.'s leave policies, flexible scheduling options, and the procedure for requesting accommodations under the Americans with Disabilities Act (ADA).

The guide was distributed via email, uploaded to the HR portal, and printed copies were placed in break rooms. Within the first month, analytics showed **178 downloads** of the digital version, reflecting strong employee interest.

6.4 Peer Support Network Framework

To support long-term sustainability, a **Peer Support Network (PSN)** framework was established as part of the deliverables. This included:

- **Recruitment and Training Materials:** A 15-page handbook outlining the role of peer listeners, confidentiality principles, communication strategies, and referral protocols. Training was co-facilitated by a licensed counsellor and HR.
- **Confidentiality Agreement:** A signed commitment form for all peer listeners to reassure employees that conversations would not be shared outside the network.
- **Monthly Discussion Themes:** A set of 12 suggested monthly topics (e.g., "Managing Anxiety at Work," "Balancing Family and Career," "Building Resilience in Uncertain Times") to guide peer support group sessions.
- **Operational Guidelines:** Recommendations on session length (45–60 minutes), group size (6–8 participants), and facilitation practices.
- **Feedback Form:** A brief, anonymous form participants could complete after each session to ensure continuous improvement and capture emerging needs.

The PSN was officially launched with 10 trained volunteers and continues to operate under HR's oversight, with participation ranging from 12 to 20 employees per session.

6.5 Communication and Marketing Materials

To promote awareness and encourage participation, the following communication tools were delivered:

- **Posters and Flyers:** Five designs with slogans such as "It's Okay to Talk About Mental Health" and "Strong Minds Build Strong Teams." These were displayed in break rooms, hallways, and the company cafeteria.
- **Email Templates:** Three pre-written emails for HR to send: one announcing the program, one inviting employees to each workshop, and one reminding staff of available resources.
- **Intranet Content:** A dedicated "Wellness at Work" intranet page featuring workshop recordings, downloadable resources, and links to the Resource Guide.
- **FAQ Sheet:** A two-page document addressing common concerns (e.g., confidentiality, eligibility, how to access services).

These communication materials played a critical role in normalizing the conversation around mental health and ensuring consistent visibility of the program.

6.6 Evaluation Tools

To assess effectiveness and inform recommendations, several evaluation tools were delivered:

1. **Pre- and Post-Surveys:** Custom surveys designed for each workshop to measure changes in knowledge, confidence, and attitudes.
2. **Follow-Up Survey Template:** A three-month post-program survey template to measure retention of knowledge and long-term behaviour change.
3. **Manager Feedback Form:** A structured form allowing supervisors to report observed changes in team morale, communication, and productivity.
4. **Peer Network Metrics Tracker:** A simple Excel template for HR to record attendance, participant feedback, and recurring themes from peer support sessions.

These tools were intended to support ongoing evaluation and continuous program improvement.

6.7 Summary of Deliverables

In summary, the following key materials were created and delivered:

1. **Two Complete Workshop Packages** (slide decks, facilitator guides, handouts, evaluation forms).

2. **Employee Mental Health Resource Guide** (22-page PDF).
3. **Peer Support Network Framework** (handbook, confidentiality agreements, monthly themes, operational guidelines).
4. **Communication and Marketing Materials** (posters, flyers, email templates, intranet content, FAQ sheet).
5. **Evaluation Tools** (pre/post surveys, follow-up survey, manager feedback forms, metrics tracker).

Conclusion

In sum, the final project represented a holistic intervention that blended research, training, and cultural change within Sandbox Inc. By engaging multiple stakeholders, adapting to challenges, and prioritizing sustainability, the program successfully met its initial goals while laying the foundation for ongoing mental health awareness. The initiative demonstrated that even within the constraints of a Capstone project, significant progress can be made toward destigmatizing mental health in the workplace and improving employee well-being.

The updated research summary underscores the importance of evidence-based, theory-driven approaches to workplace mental health interventions. By grounding the program in JD-R theory and Social Cognitive Theory, and by integrating proven strategies such as workshops, peer support groups, and educational resources, the Sandbox Inc. initiative was positioned for both immediate impact and long-term sustainability. The challenges faced—such as stigma, confidentiality concerns, and barriers to participation—mirror those documented in the literature, highlighting the project's broader relevance.

Ultimately, the research confirms that workplace mental health programs are not optional "extras" but essential components of organizational strategy. For Sandbox Inc., the program represents a significant step toward cultivating a culture of well-being, openness, and resilience.

The implementation of Sandbox Inc.'s Mental Health Awareness Program was a multi-step process that required careful planning, stakeholder collaboration, and adaptive strategies. The combination of workshops, a resource guide, and a peer support network ensured that employees not only received education but also gained practical tools and ongoing support.

While challenges such as participation barriers and confidentiality concerns emerged, the project team responded with targeted adjustments that improved engagement and reinforced trust. The

implementation phase thus represented not just the delivery of a program, but the beginning of a cultural shift within Sandbox Inc. toward openness, support, and proactive mental health care.

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