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WELLBEING AT WORK: EXAMINE THE RELATIONSHIP OF WORKPLACE PERMA PROFILER FACTORS WITH BEHAVIORAL THERAPIST

Abstract: The key factors to the success of an organization are employee's wellbeing as well as understanding human and intellectual resources. Leaning upon the premises of positivist psychology, the present research aimed at studying workplace wellbeing of behavioral therapists in Georgia and exploring wellbeing as a predictor of happiness. The study was carried out in three stages. Stage 1 included pilot study with translating and administrating instruments, while the actual research was conducted as part of stages 2 and 3 in 2020 and 2022, respectively. The findings supported our assumption: Workplace wellbeing significantly predicted perceived happiness, showing that the higher the perception of workplace wellbeing among behavioral therapists, the higher the rates of subjective happiness. After examining potential changes in the mean scores of The Workplace PERMA Profiler scales in 2022 compared to the 2020 study, we want to say that the only scale that did not undergo any statistically significant changes was the positive emotions scale.

Key words: Workplace wellbeing, subjective happiness, behavioral therapist, PERMA profile. *Language*: English

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Introduction

Literature Review and Hypothesis

The number of children and adults with autism spectrum disorder (ASD) has been increasing each year. Children with ASD require permanent therapeutic support. Behavioral therapists and behavior analysts perform interventions based on applied behavior analysis (ABA). ABA is a learning theory-based scientific discipline, which, by studying and changing social factors, is focused on teaching socially important behaviors and reducing the behaviors that impede individual's integration in a society (Baer, Wolf, & Risley, 1986). Today, ABA is one of the scientifically proven methods to diminish ASD symptoms (Cooper et al., 2007).

Positive psychological processes and mechanisms lead to healthy outcomes, such as job satisfaction, psychological wellbeing, security, sense of one's competence, self-efficiency or personal growth. Such state of health and wellbeing should be a goal for an ideal organization (Turner, 2002). Wellbeing is defined as a cognitive and affective assessment of one's life, and involves emotional attitudes and cognitive judgments regarding satisfaction and self-fulfillment (Diener et al., 2010).



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Sonja Lyubomirsky argues that happy people enjoy more success than their less happy peers and this success stems from experiencing positive emotions (Lyubomirsky et al., 2011). Given that the majority of people spends most of their time at work, success at workplace is very important with emphasis made on outcomes that are connected to career, teamwork. Happiness is linked to work independence, job satisfaction, work performance, pro-social behavior, social support, popularity, and income. Additionally, happy people get positive appraisal from their colleagues and bosses and the likelihood of burnout and absenteesism is lower.

Sonja Lyubomirsky shares the idea (Walsh et al., 2018) that positive and negative emotions are adaptive in different contexts (Oishi, Diener, & Lucas, 2007) and it is not imperative for a person to feel only happy.

A happy employee makes more effort at work (George, 1995; Langelaan, Bakker, van Doornen, & Schaufeli, 2006) and the quality of their engagement is higher (Bakker & Demerouti, 2008). In 2008, it was hypothesized that happiness fosters success. In line with this, and leaning upon research, we assume that there should be a strong link between workplace wellbeing and subjective happiness. More specifically, we hypothesize that workplace wellbeing will predict subjective happiness among behavioral therapists.

People spend huge part of their lives at work, which, in turn, plays enormous role in development of their identities. Developing positive work-related identity increases the likelihood of thriving at work. Individual's personality is often determined by their role at work. High levels of positive identity lead to individual's perceptions as to how they feel at work, what is their role at the organization, and whether the work performed by them is their calling (Wrzesniewski, 2003). Work-related positive identity when an employee's strengths are emphasized, when their work is perceived as valuable, when psychosocial functioning is enhanced and positive emotions are experienced during the work process helps employee thrive (Rothbard & Patil, 2012). The outcomes of this thriving or "flourishing" include increased engagement in work-related activities, vitality, enthusiasm toward work-related tasks, steadiness, cultivating values and unconditional selfcommitment (Rothbard & Patil, 2012).

From the positivist psychology perspective, wellbeing is not limited to the absence of negative function, but rather it implies something more. In other words, the absence of negative affect, depression, loneliness or illness does not necessarily entail the presence of positive affect, happiness, trust or social interactions. Different theories propose multidimensional models (e.g., Baltes & Baltes, 1990; Forgeard et al., 2011; Huppert & So, 2013; Friedman & Kern, 2014; Ryff & Keyes, 1995). Julie Butler and Margaret Kern propose that "flourishing" is an optimal dynamic condition of psychosocial functioning originated from successful functioning in numerous psychosocial domains (Kern & Butler, 2016). They suggest that there is no single best model, although different conceptualizations can prove to be useful to obtain an abstract construct of wellbeing and to measure particular domains. Specifically, they focus on the theory proposed by Seligman: Positive emotions, engagement, relationships, meaning, and accomplishment (Seligman, 2011).

1. *Positive emotions.* People can experience both positive and negative emotions at the same time (Watson & Tellegen, 1985). Martin Seligman argues that happiness and life satisfaction, as subjective indices, should be incorporated into the element of positive emotions (Seligman, 2011). Positive emotions at work enhance cognitive functioning and provide social resources which is a prerequisite for "flourishing" in a team and lead to professional satisfaction and creativity (Roberts & Creary, 2012).

2. Engagement is a multidimensional construct (Law et al., 1998; Rich et al., 2010), a psychological condition during which people are focused on the activity that is being performed by them (Forgeard et al., 2011). Similar to positive emotions, engagement is assessed subjectively :""Did time stop for you?" "Were you completely absorbed by the task?" "Did you lose self-consciousness?""(Seligman, 2011). Engagement in work-related activities at an organization includes intense concentration, the state of being absorbed (Schaufeli, Bakker, & Salanova, 2006; Csikszentmihalyi, 1990).

3. *Relationships*. Social interactions are of fundamental importance to human life (Berscheid & Reis, 1998). Social support is related to reduced depression, improved physical health, reduced risk of death, and other positive outcomes (Tay et al., 2012; Taylor, 2011).

4. *Meaning*. There is no uniform interpretation of meaning. It is defined as life's ontological meaning experienced by individual (Crumbauch & Maholick, 1964, p. 201), belonging and serving to what one considers bigger than oneself (Seligman, 2011) or simply an answer to the question: "What is the meaning of my life?" (Baumeister, 1992).

5. Accomplishment. People often strive to achieve a goal even when this goal cannot bring positive emotions (Seligman, 2011). Accomplishing a goal can be seen as obtaining success and mastery in a specific domain at the highest level (Ericsson, 2022).

The present study deals with the relationship between these important variables. This is the first study carried out in Georgia examining workplace wellbeing and happiness among behavioral therapists with findings having practical implications, both for those working in organizational psychology, in general, and for the organizations that serve children and adults with ASD, in particular, as well as for anyone interested in the field.



Method

Participants and Procedure

The study was carried out in two stages at *Puzzle*, the Center for Rehabilitation of Children and Adolescents.

51 respondents participated in Study 1 (2020) with five males only. The mean age was 27 (SD = 6.03) with minimum age of 20 and maximum of 54. 29 of them were single, 22 were married or in a relationship. Out of 17 married respondents, 13 had a child or children (eight were a parent of a single child, four had two children, and one had three children).

By the time of conducting Study 2 (2022), the number of behavioral therapists at *Puzzle* has increased. Therefore, the study participants included 83 therapists with only four male respondents. Their age varied from 21 (minimum) to 56 (maximum). 32 of them were married, 14 were in a relationship and 37 were single. 55 out of 83 participants had a child or children.

During Study 1, part of the behavioral therapists used a pen-and-pencil method to fill out the questionnaire. Participants placed their filled out questionnaires in a box, which was placed in a working space. The questionnaire was filled out independently. The rest of the behavioral therapists filled out the questionnaire online via Google Drive's Google Forms. The time required for filling out the questionnaire was 30-35 minutes on average.

The research started only after obtaining the IRB ethic's approval. Filling out the questionnaire was voluntary. Prior to administering it, all participants read the informed consent. Therapists who participated in a pen-and-pencil method received verbal instructions regarding the goals of the study, rules of filling out the questionnaire and confidentiality of their participation. Those therapists who participated in an online survey received same information through text, in the beginning of the questionnaire. IP addresses have been deleted after completing the questionnaire while no emails or names were recorded. Data safety and privacy protection was ensured.

Instruments

The Workplace PERMA Profiler (Kern, 2014) and Subjective Happiness Scale ([HNS], Lyubomirsky & Lepper, 1999) were translated in Georgian and used in the pilot study with 42 participants who filled out the questionnaires online via Google Forms. No language-related or technical inaccuracies were found. Thus, the instruments were used in the next two stages of the research to test out hypothesis.

The Workplace PERMA Profiler (Kern, 2014). In his 2011 book, *Flourish*, Martin Seligman proposed his theory on wellbeing, which consists of five elements: Positive emotions (P), engagement (E), relationships (R), meaning (M), and accomplishment (A). Based on this theory, Margaret Kern (2014) developed research instrument to assess workplace wellbeing profile. After conducting three studies (N = 7,188), the questionnaire initially included 15 items. Eight items were added later to assess general state, negative emotions, loneliness, and physical health. Eight studies (N = 31,966) were carried out to test the psychometric properties of the measure.

Currently, the questionnaire contains 23 items assessing five domains (positive emotions. relationships, engagement, meaning, and accomplishment). 15 items (P1, P2, P3, E1, E2, E3, R1, R2, R3, M1, M2, M3, A1, A2, A3) measure wellbeing, three items (N1, N2, N3) measure negative emotions, another three items (h1, h2, h3) measure self-reported physical health, and one item measures perceived loneliness. Answers are given on an 11points Likert-type scale with 0 = not at all, never or very bad depending on items, and 10 = very much, always or completely depending on items. The items should be presented in original order. Items regarding health and negative emotions are for gathering additional information. For PERMA profile, it is possible to use 16 items, three domains and one general question; however, the author recommends using it in its complete form.

Subjective Happiness Scale ([HNS], Lyubomirsky & Lepper, 1999) consists of four items measuring subjective happiness in general, as well as how one views oneself against one's own peers. The questionnaire allows for assessing internal consistency. Answers are given on a Likert scale with 1 = never happy at all and 7 = very happy for the first item, 1 = less happy and 7 = more happy for the second item, and 1 = not at all and 7 = great deal for the third and fourth items.

Results

Study 1

According to Study 1 (conducted in 2020), the mean scores for the variables in question were as follows: M = 8.36 (SD = .90) for workplace wellbeing (computed with the scores of positive emotions, engagement, relationships, meaning, and accomplishment [PERMA's $\alpha = .86$]; alternatively, the total score can be computed with the scores of negative experiences, perceived loneliness, and selfreported health state, but the score obtained through this method was almost the same [M = 7.92, SD = .99]; these factors were used for additional statistical analysis which will be reviewed later), and M = 20.29, SD = 4.62 ($\alpha = .74$, maximum score = 28) for perceived happiness. Respondents' data for both variables were normally distributed with satisfactory internal consistency coefficients for both scales.

In line with the proposed hypothesis, regression analysis showed that workplace wellbeing positively predicted perceived happiness, $\beta = .42$, t(49) = 3.28, p



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= .002, although wellbeing was responsible for only 18% of variability in perceived happiness, $R^2 = 18$, F(1, 49) = 10.73, p = .002 (see Table 1).

Table 1. Regression (Outcome variable: Perceived happiness, $R^2 = .18$

	b	SE	β	95% CI
Constant	1.82	5.67		[-9.57; 13.22]
Workplace wellbeing	2.21	.68	.42	[.85; 3.57]

Independent samples t-test was performed to test whether there were any significant differences between respondents with different relationship/family status. T-test showed that the participants who said they were married or in a relationship (N = 22, M = 8.64, SD = .82) scored slightly higher on workplace wellbeing than single respondents (N = 29, M = 8.15, SD = .89), t(49) = 2.03, p = .048, d = .57, 95% CI [.004; .982]. No other intergroup differences were revealed, including no significant differences in regard to having children.

Table 2. Correlations between workplace PERMA profile blocks.

	Р	Ε	R	М	Α	Ν	Н	Lon	Нар
Р		.522**	.713**	.523**	.438**	378**	.501**	498**	.742**
E	.522**		.586**	.662**	$.400^{**}$	-0.205	0.177	466**	.420**
R	.713**	.586**		.603**	.353*	299*	.429**	610**	.653**
М	.523**	.662**	.603**		.536**	426**	0.257	486**	.511**
Α	.438**	$.400^{**}$.353*	.536**		-0.222	0.237	-0.25	.310*
Ν	378**	-0.205	299*	426**	-0.22		284*	.403**	285*
H	.501**	0.177	.429**	0.257	0.237	284*		400**	.342*
Lon	498**	466**	610**	486**	-0.25	.403**	- .400**		- .545**

Note. N = 51, *p < .05, **p < .01 (P = positive emotions, E = engagement, R = relationships, M = meaning, A = accomplishment, N = negative emotions, H = health, Lon = loneliness, Hap = Happiness).

As Table 2 shows, PERMA components were mainly inter-correlated. In most of the cases, there were statistically significant positive correlations, while loneliness and negative emotions correlated negatively with other blocks of the instrument. Correlation of positive emotions with relationships (r(49) = .71, p < .01) and happiness (r(49) = .74, p < .01) were among the strongest positive correlations, while the strongest negative correlation, not

surprisingly, included that between loneliness and relationships (r(49) = -.61, p < .01).

Additionally, a tendency for higher mean scores (out of maximum of 10) was revealed for almost every block, especially for the meaning component (M = 9.1). On the other hand, mean scores for negative emotions and loneliness were fairly low (see Table 3), suggesting that therapists were less likely to experience those feelings.

Table 3. Central tendency measures and s	tandard deviations for workpla	ce PERMA components.

	Р	Е	R	М	Α	Ν	Н	HAP	LON
MEAN	8.1	8	8.1	9.1	8.5	3.9	7.5	8.3	2.5
MEDIAN	8.3	8.3	8.3	9.3	8.7	3.3	8	8	2
MODE	8.3	9	9	9.7	9	3.3	9	8	0
STANDARD DEVIATION	1.3	1.2	1.2	0.9	1	2.1	2.2	1.4	2.5
MINIMUM SCORE	3.7	4.7	4.7	6.3	6	0	1.7	4	0
MAXIMUM SCORE	10	10	10	10	10	8.3	10	10	8



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Study 2

To understand the relationships between different scales of workplace PERMA, Pearson correlation coefficients were computed (See Table 4).

Loneliness significantly (at .01 level) and positively correlated with meaning, general wellbeing (at .05 level) and negative emotions (at .05 level). No other significant correlations were found for loneliness.

No significant correlations were found for the accomplishment scale with the only exception being its link to general wellbeing (r(77) = .518, p < .01).

General wellbeing, in turn, had significant correlations with every scale.

	Positive	Engage	Relations	Meani	Accomplis	General	Negati	Healt	Loneline
	emotion	ment	hips	ng	hment	wellbeing	ve emotio	h	SS
	8						ns		
Positive emotions		.330**	.205	.649**	.146	.757**	.589**	.284**	.078
Engagement	.330**		.423**	.184	.170	.576**	.294**	.257*	.037
Relationships	.205	.423**		.193	.215	.616**	.536**	.359**	.127
Meaning	.649**	.184	.193		.000	.656**	.636**	.277*	.477**
Accomplishme nt	.146	.170	.215	.000		.518**	.109	.178	.050
General wellbeing	.757**	.576**	.616**	.656**	.518**		.712**	.430**	.269*
Negative emotions	.589**	.294**	.536**	.636**	.109	.712**		.398**	.257*
Health	.284**	.257*	.359**	.277*	.178	.430**	.398**		001
Loneliness	.078	.037	.127	.477**	.050	.269*	.257*	001	
** Correlation is	significant a	at .01 level.	1	1	1	<u>I</u>	1	1	
* Correlation is s	ignificant at	.05 level.							

Table 4. Correlations between Workplace PERMA components.

Paired samples t-test was used to examine potential changes in the mean scores of The Workplace PERMA Profiler scales in 2022 as compared to 2020 study (See Table 5).

As shown in Table 5, the only scale that did not undergo any statistically significant changes was the positive emotions scale (Mean difference = .40, t = 1.68, p > .05).

At .05 level, statistically significant reduction emerged for the meaning scale (Mean difference = .33, t = 2.047, p < .05) with the weak effect size of .03.

As for the rest of the scales, the mean scores obtained in 2020 and 2022 were different from each other at .01 level of significance.

Table 5. Mean differences between components of The Workplace PERMA Profiler as obtained in Study 1
(2020) and Study 2 (2022).

	M (2022)	<i>SD</i> (2022)	М (2020)	<i>SD</i> (2020)	Mean Difference	t	sig.
Positive emotions	8.51	1.43	8.11	1.29	.40	1.684	.095
Engagement	6.84	.86	8.03	1.24	-1.19	-6.010	.000
Relationships	7.04	1.11	8.12	1.16	-1.08	-5.314	.000
Meaning	8.75	.94	9.08	0.89	-0.33	-2.047	.043
Accomplishment	6.86	1.44	8.48	1.02	-1.62	-7.553	.000
General wellbeing	7.61	.76	8.36	0.89	75	-4.971	.000
Negative emotions	8.14	1.45	3.88	2.13	4.26	12.596	.000
Health	6.26	1.03	7.49	2.16	-1.23	-3.813	.000
Loneliness	8.29	1.70	2.49	2.52	5.80	14.442	.000



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Reduction in mean scores occurred for the following scales:

- Engagement (Mean difference = -1.19, t = -6.010, p < .01), effect size = .21 (strong);
- Relationships (Mean difference = -1.08, t = -5.314, p < .01), effect size = .18 (strong);
- Accomplishment (Mean difference = -1.62, *t* = -7.553, *p* < .01), effect size = .31 (strong);
- General wellbeing (Mean difference = -.75, *t* = 4.971, *p* < .01), effect size = .16 (strong);
- Health (Mean difference = -1.23, *t* = -3.813, *p* < .01), effect size = .10 (moderate).

Increase in mean scores occurred for the following scales:

- Negative emotions (Mean difference = 4.26, *t* = 12.596, *p* < .01), effect size = .55 (strong);
- Loneliness (Mean difference = 5.80, t = 14.442, p < .01), effect size = .62 (strong).

Effect size shows what percentage of difference can be accounted for by the difference in years. Specifically, the guideline suggests the following interpretations of the effect sizes: .01 = weak effect;

.06 = moderate effect;

.14 = strong effect.

Additionally, t-test was used to examine the changes in happiness mean scores in 2020 as compared to 2022 study. No statistically significant changes emerged between 2020 (M = 4.82, SD = 1.042) and 2022 scores (M = 5.07, SD = 1.156), with mean difference of -.258, t = -1.29, p > .05.

Prior to performing regression analysis, correlation was computed between workplace PERMA and perceived happiness. Strong positive correlation emerged between the two variables, r(77) = .748, p = .000.

Linear regression was used to test the predictive power of workplace wellbeing on perceived happiness (see Tables 6, 7, & 8). As the tables show, regression model was statistically significant, F = 97.549, p =.000.

Table 6. ANOVA.

	ANOVA ^a								
Mo	odel	Sum of Squares	df	Mean Square	F	Sig.			
1	Regression	141.414	1	141.414	97.549	.000 ^b			
	Residual	111.624	77	1.450					
	Total	253.038	78						
a. (Outcome Variable:	Happiness		· · · · · ·					
b.]	Predictors: (Consta	nt), PERMA							

Regression analysis supported the hypothesis, demonstrating that workplace wellbeing (PERMA) emerged as a significant positive predictor of perceived happiness, $\beta = .75$, t = 9.877, p < .001.

Table 7. Beta coef	ficents.
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Coefficients								
	UnstandardizedStandardizedCoefficientsCoefficients							
M	odel	В	Std. Error	Beta	t	Sig.		
1	(Constant)	-6.007	1.365		-4.402	.000		
	PERMA	1.763	.178	.748	9.877	.000		
a.	a. Outcome Variable: Happiness							

Given the findings, regression equation can be produced: Happiness = -6.007+PERMA*1.763 (See Table 8). As the Table 8 shows, PERMA was responsible for explaining 56% of the variability in perceived happiness.



 Table 8. Model summary

Model Summary						
			Adjusted R	Std. Error of the		
Model	R	R Square	Square	Estimate		
1	.748ª	.559	.553	1.204		
a. Predic	a. Predictors: (Constant), PERMA					

Discussion

In the 21st century characterized by constant challenges, the global reassessment of values and needs to ensure improvement of relationships between an employee and an organization never lacks relevance.

The goal of the present research was to study the sense of workplace wellbeing among behavioral therapists employed in Georgia.

Although the research was carried out in a single rehabilitation center and the limited sample size does not allow for generalizations of the findings, it is still possible to make a certain prediction.

The sense of workplace wellbeing of behavioral therapists is an important factor for the development of both, rehabilitation centers and ABA in Georgia as well as for the physical and mental health of an employee in general. Having analyzed the data of 2020 and 2022, it can be argued that the level of workplace wellbeing had been decreased significantly in these two years. In line with our assumption, workplace wellbeing and subjective happiness were positively related; moreover, workplace wellbeing positively predicted subjective happiness. (Lisa C. Walsh1, Julia K. Boehm2, and Sonja Lyubomirsky1, 2018) The results of two studies carried out in 2020 and 2022 clearly suggest that the higher the perception of workplace wellbeing, the higher the level of perceived happiness among behavioral therapists. In turn, as other research shows, perceived happiness at workplace increases the value of the work for an employee, their goals, enhances positive relationships, the sense of belonging to a team, leading, altogether,

to higher level of success. (Lyubomirsky, S., Dickerhoof, R., Boehm, J. K., & Sheldon, K. M., 2011).

It should also be noted that positive significant correlations emerged between the components of workplace wellbeing (The Workplace PERMA Profiler). Particularly striking was the correlation between positive emotions and engagement in 2020 study; interestingly, the mean score of positive emotions was an exception in that, unlike other components, it did not undergo statistically significant changes in 2022.(Boehm & Lyubomirsky, 2008; Connolly & Viswesvarch, 2000)

The present research has several limitations. Firstly, the workplace wellbeing measure was translated in Georgian without being adapted to Georgian context. Secondly, the size of the sample does not allow for generalization of the findings to other organizations or Georgian population in general.

Future research should focus on relatively larger sample of behavioral therapists, assessing workplace wellbeing of other behavioral therapists in other rehabilitation centers in Georgia, which would allow for more accurate and convincing findings and support the growth and development of organizations in the field. As a result of the global pandemic (COVID-19), rehabilitation centers have been facing new challenges. Working styles have been changed with interventions mediated by parents being carried out remotely. Therefore, measuring other factors, not included in the present research, might prove valuable and might even completely change the findings of the correlational analysis performed in our study.

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Impost Fostor	ISI (Dubai, UAE) = 1.582
Impact Factor:	GIF (Australia)	= 0.564
	JIF	= 1.500

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ICV (Poland)

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= 6.630

= 1.940

= 4.260

= 0.350

SIS (USA)

ESJI (KZ)

РИНЦ (Russia) = 3.939

SJIF (Morocco) = **7.184**

= 0.912

= 8.771

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