

Original Research

Received 10 June 2026

Revised 20 July 2026

Accepted 05 Aug 2026

Natural Resources for Human Health 2026, Vol.6(13s):1271–1281

KEYWORDS:

Workplace mental health, social inclusion, Employee engagement, psychological well-being, Work centrality, Conceptual framework.

From Resources to Inclusion: A Conceptual Framework for Workplace Mental Health and Social Inclusion

Jyoti Sharma¹, Bhawna Agarwal²

¹Research Scholar, Jaypee Business School, Jaypee Institute of Information Technology, Noida, Uttar Pradesh, India

²Professor, Jaypee Business School, Jaypee Institute of Information Technology, Noida, Uttar Pradesh, India

ABSTRACT: Workplace mental health and social inclusion are increasingly recognised as interdependent organisational outcomes, yet the mechanisms by which everyday organisational practices translate into genuine inclusion at work remain under-theorised. This conceptual paper proposes an integrative framework termed the Resources, Engagement, Wellbeing, Inclusion (REWI) model that explains how organisational, relational, and dispositional resources combine to shape employees' psychological well-being, sustained workplace mental health, and, in turn, their social inclusion at work. Drawing on Job Demands-Resources theory, Conservation of Resources theory, Self-Determination Theory, and Social Exchange Theory, the paper synthesises workplace constructs- organisational support and work environment, meaningful work and psychological well-being, employee conscientiousness and work discipline, compensation, career growth and safety, work centrality, interpersonal trust and support, ethical leadership and recognition culture, work-life integration, and employee engagement and organisational commitment into a single conceptual cascade, and introduces Workplace Mental Health as an explicit construct that mediates between psychological well-being and social inclusion. The paper further identifies work centrality as a "double-edged" boundary condition, whereby moderate work centrality reinforces well-being while excessive centrality, unaccompanied by work-life integration, is theorised to erode it. Being conceptual in nature, the paper does not report primary data; rather, it draws on and synthesises prior empirical and theoretical literature to justify the proposed relationships. The paper concludes with theoretical, mental health, practical, and social implications, along with directions for future empirical validation.

1. INTRODUCTION

Mental health at workplace has evolved beyond a narrow occupational health concern but also a significant organisational and social issue. Growing attention among employers, policymakers, health institutions acknowledge the impact of workplace conditions shaping employee's psychological well-being. Workplace environment can promote stability, purpose, and supportive connections, but can also lead to persistent stress and disengagement. Research on job demands and resources (JD-R) highlights the close relationship between workplace resources, employee engagement, and well-being (Bakker and Demerouti, 2017). Poor mental health may also reduce employees' ability to participate meaningfully in organisational and social life, including expressing views, maintaining relationships, and developing a sense of belonging. Thus, workplace mental health and social inclusion are closely interconnected.

Workplaces also shape inclusion through the practices and relationships that employees experience on a daily basis. The way supervisors treat employees, how fairly decisions are made, whether opportunities for learning and development are available, and whether employees feel recognised and supported can all influence their experience of work. Organisational justice research, for instance, shows that different forms of perceived fairness are associated with important employee outcomes,

including organisational commitment (Colquitt, 2001). Similarly, psychological safety and interpersonal relationships can influence employees' willingness to participate and function effectively within work groups (Edmondson, 1999). The way employees experience their work can also be shaped by whether they perceive it as meaningful and personally significant (Kahn, 1990; Steger, Dik and Duffy, 2012). These practices are therefore more than routine features of human resource management. Collectively, they draw conditions in which employees develop psychological and relational resources that may either support or undermine their mental health and participation at work.

Despite growing interest, the relevant literature remains relatively fragmented. Studies on organisational support and job resources mostly examined employee engagement, commitment, burnout, and related work outcomes. Psychological perspectives of this study has explored meaningful work, psychological needs, and well-being, while inclusion scholarship has focused on belongingness, uniqueness, and participation within work groups (Deci and Ryan, 2000; Steger, Shore et al., 2011). These streams offer important insights, but they are rarely integrated within a single explanatory framework. In particular, there is limited conceptual understanding of how organisational and relational resources may move through employees' psychological experiences impact workplace mental health and, subsequently, their inclusion in organisational life. There is also less clarity about the circumstances in which these relationships may weaken or produce unintended consequences. This paper seeks to address this conceptual gap.

The paper therefore develops a framework aligning organisational and relational resources with employee engagement and organisational commitment (EEOC), meaningful work and psychological well-being (MWPWB), workplace mental health (WMH), and ultimately social inclusion at work (SIW). The model further considers individual and life-domain circumstances that may alter these relationships, particularly employee conscientiousness, work centrality (WC), and work-life integration (WLI). The framework makes three main contributions in this study.

First, the framework integrates four complementary perspectives- Job Demands Resources (JDR), Conservation of Resources (COR), Self-Determination Theory (SDT) and Social Exchange Theory (SET), to explain how organisational conditions influence psychological and social outcomes (Hobfoll, 1989; Blau, 1964). Second, it positions workplace mental health (WMH) as a core element and treats Social Inclusion at work (SIW) as a distinct downstream outcome, recognising both belongingness and uniqueness (Shore et al., 2011). Third, it presents Work Centrality as potentially beneficial or harmful depending on balance with other life domains, while Work Life Integration may shape engagement and well-being relationships. The paper then develops the framework, discusses its contributions and implications, and identifies limitations and future research directions.

2. REVIEW OF LITERATURE

2.1 Workplace Mental Health and Psychological Well-being

Earlier, research on workplace mental health largely centred on stress, burnout, and work-related strain, with greater attention to preventing psychological difficulties. More recent occupational health research has moved towards a more positive understanding of mental health, considering flourishing, meaningful work, and psychological well-being as important aspects of employees' experiences rather than focusing only on the absence of mental illness. This view also recognises that organisations can contribute to positive mental health by creating meaningful work, supportive relationships, and access to psychological resources. Steger, Dik and Duffy (2012) found that meaningful work is distinct from, but closely related to, psychological well-being, even when job satisfaction is considered. Building on this evidence, the present framework combines Meaningful Work and Psychological Well-being (MWPWB) as an important precursor to Workplace Mental Health (WMH).

2.2 Social Inclusion at Work

Social inclusion at work means that employees feel accepted as genuine members of the organisation while also having the freedom to express who they are as individuals. Shore et al. (2011) explain workplace inclusion in terms of two related experiences: belongingness and uniqueness. In other words, employees need to feel that they are part of the group while also knowing that their individual differences are recognised and valued. Although workplace inclusion has received considerable attention in diversity and organisational research, it has often been studied separately from mental health and psychological well-being. The present framework brings these areas together by viewing Social Inclusion at Work (SIW) as an outcome

influenced by employees' psychological and relational experiences, including their sustained mental health and well-being (Ulfa, 2026).

2.3 Organisational Resources and Employee Engagement

Organisational practices such as fairness, communication, learning and development, ethical leadership, recognition, and employee support can shape how employees perceive and experience their workplace. However, their combined role in promoting mental health and social inclusion has received relatively limited attention. The Job Demands Resources theory suggests that resources such as supervisory support, feedback, autonomy, and opportunities for development can strengthen motivation and employee engagement. Schaufeli and Bakker (2004) also found that access to job resources is linked with higher engagement, stronger commitment, and greater attachment to the organisation. Research on organisational justice further shows that perceptions of fairness are associated with trust and commitment. Taken together, these findings suggest that organisational resources can play an important role in fostering Employee Engagement and Organisational Commitment (EEOC).

2.4 Psychological Needs, Meaningful Work, and Interpersonal Trust

Research also shows how organisational conditions shape employees' psychological and interpersonal experiences. Kahn (1990) identified meaningfulness, psychological safety, and psychological availability as key conditions for employee engagement. Self-Determination Theory further explains that autonomy, competence, and relatedness support well-being and psychological growth (Deci and Ryan, 2000). Similarly, Edmondson (1999) found that psychological safety encourages employees to express ideas, acknowledge mistakes, and engage in learning without fear of negative consequences. Together, these perspectives suggest that supportive leadership, trust, psychological safety, and need satisfaction connect organisational resources with engagement, meaningful work, and well-being. Accordingly, Interpersonal Trust and Support (ITS) is included as an important relational resource.

2.5 Work Centrality, Work–Life Integration, and Boundary Conditions

Although organisational resources and engagement generally support positive outcomes, excessive work involvement may become demanding when recovery and non-work engagement are limited. Conservation of Resources theory suggests that individuals seek to protect valued resources such as time, energy, and relationships, while resource loss can generate greater psychological strain. Rothbard (2001) shows that involvement across work and family roles may produce enrichment or depletion. Work Centrality reflects work's importance to identity, whereas Work Life Integration concerns managing work and non-work responsibilities. Excessive centrality combined with poor integration may reduce well-being. Work–family conflict is similarly linked to strain and lower satisfaction (Allen et al., 2000).

2.6 Reciprocity and Organisational Exchange

Social Exchange Theory (SET) provides another explanation for why employees respond positively to organisational support and investment. Blau (1964) proposed that relationships based on trust and reciprocity develop differently from relationships based solely on economic or contractual exchange.

In the employment context, employees may interpret fair compensation, ethical treatment, recognition, career development, and organisational support as indications that the organisation values their contribution and well-being. In response, they may develop stronger feelings of obligation and attachment toward the organisation. These feelings can be expressed through greater engagement, organisational commitment, and willingness to contribute beyond basic job requirements.

SET therefore supports the central assumption of the present framework that organisational investment is not simply received as a collection of workplace benefits. When employees perceive these investments as genuine and supportive, they may respond through stronger engagement and commitment. These positive experiences can then contribute to the psychological and relational conditions associated with meaningful work, well-being, and inclusion.

2.7 Synthesis and Research Gap

The literature reviewed above provides support for the different components of the proposed framework. JD-R theory explains how organisational resources can encourage employee engagement, while Social Exchange Theory helps explain why employees may reciprocate organisational investment through stronger commitment and involvement. Self-Determination

Theory highlights the role of autonomy, competence, and relatedness in psychological well-being, while research on psychological safety demonstrates the importance of trust and interpersonal security. Conservation of Resources theory and research on work and family roles further explain why high levels of work involvement may become harmful when employees experience insufficient recovery or poor work–life integration. Finally, inclusion research provides the conceptual foundation for understanding Social Inclusion at Work as an important organisational and employee outcome.

Despite these well-established individual research streams, the relationships among these constructs have not been sufficiently integrated into a single framework. In particular, existing organisational models commonly focus on outcomes such as engagement, job satisfaction, organisational commitment, or turnover intention. Comparatively less attention has been given to what happens beyond these outcomes and whether organisational resources and employee experiences can ultimately influence social inclusion through workplace mental health.

The present study seeks to address this gap by bringing together organisational resources, engagement, interpersonal trust, meaningful work, psychological well-being, workplace mental health, and social inclusion within one conceptual framework. It also recognises that the relationship is not necessarily linear or uniformly positive. Factors such as employee conscientiousness, work centrality, and work–life integration may influence whether organisational resources ultimately contribute to well-being or instead become associated with excessive involvement and resource depletion.

OBJECTIVES

- To conceptually examine how organisational-level resources, including organisational support and work environment, compensation, career growth and safety, ethical leadership, and recognition culture, relate to employee engagement and organisational commitment.
- To develop an integrated framework explaining how employee engagement and interpersonal trust contribute to meaningful work and psychological well-being in the workplace.
- To introduce and theoretically justify Workplace Mental Health as an explicit construct that connects psychological well-being with social inclusion.
- To propose and justify Social Inclusion at Work as a distal outcome of sustained workplace mental health.
- To identify and theoretically justify boundary conditions, including employee conscientiousness, work centrality, and work–life integration that may strengthen or weaken the proposed relationship between organisational resources and social inclusion.

3. DEVELOPMENT OF THE CONCEPTUAL FRAMEWORK

The constructs identified in the study, together with the conceptual additions proposed in this paper, are organised into a five-layer framework. The framework explains how organisational conditions and interpersonal resources may influence employees' psychological experiences and, ultimately, their sense of social inclusion in the workplace. The model therefore progresses from relatively distant organisational factors to more immediate psychological outcomes and finally to the broader social outcome.

Table-1 Constructs in REWI model

Construct	Abbreviation	Role in the REWI model	Position
Organisational Support and Work Environment	OSWE	Exogenous organisational resource	Layer 1
Compensation, Career Growth and Safety	CCGS	Exogenous organisational resource	Layer 1
Ethical Leadership and Recognition Culture	ELRC	Exogenous relational resource	Layer 1
Interpersonal Trust and Support	ITS	Exogenous relational resource	Layer 1

Employee Engagement and Organisational Commitment	EEOC	Motivational mediator	Layer 2
Meaningful Work and Psychological Well-being	MWPWB	Proximal psychological outcome	Layer 3
Workplace Mental Health	WMH	Mediating construct (introduced in this paper)	Layer 4
Social Inclusion at Work	SIW	Distal outcome (introduced in this paper)	Layer 5
Employee Conscientiousness and Work Discipline	ECWD	Boundary condition	Cross-cutting
Work Centrality	WC	Boundary condition (double-edged moderator)	Cross-cutting
Work–Life Integration	WLI	Boundary condition (buffer)	Cross-cutting

Source- Author

Layer 1 – Organisational and Relational Resources

The first layer comprises Organisational Support and Work Environment (OSWE), Compensation, Career Growth and Safety (CCGS), Ethical Leadership and Recognition Culture (ELRC), and Interpersonal Trust and Support (ITS). These constructs capture the different forms of support and resources available to employees within the organisation.

Together, these factors establish the organisational conditions within which employees perform their work and develop their attitudes towards the organisation.

Layer 2 – Motivational Mediator

Employee Engagement and Organisational Commitment (EEOC) forms the second layer of the framework. This construct represents the motivational and attitudinal response through which organisational and relational resources may influence employees' psychological experiences. When organisation provides adequate support, fair treatment, opportunities for development, and positive interpersonal relationships, to employees it may create willingness to work and develop core attachment with organisation. This layer is consistent with the principles of the Job Demands–Resources (JD-R) theory and Social Exchange Theory (SET), both of which provide a basis for understanding how workplace conditions can shape employee motivation and reciprocal attitudes.

Layer 3 – Proximal Psychological Outcome

Meaningful Work and Psychological Well-being (MWPWB) constitutes the third layer. It reflects how employees experience their work at a personal and psychological level. Meaningful work involves perceiving one's work as purposeful and worthwhile, whereas psychological well-being reflects positive experiences such as satisfaction, self-worth, vitality, and a healthy psychological state.

The framework proposes that stronger engagement and organisational commitment can contribute to more positive experiences of work. Employees who are emotionally and cognitively invested in their roles may be more likely to perceive their work as meaningful and to experience greater psychological well-being.

Layer 4 – Workplace Mental Health

Workplace Mental Health (WMH) is introduced as a distinct construct within the proposed framework. It refers to an employee's continuing psychological functioning within the work environment, including the ability to maintain a healthy balance between positive functioning and the absence of excessive anxiety, stress, or psychological strain.

Although workplace mental health is closely related to psychological well-being, the two concepts are not treated as interchangeable in this framework. MWPWB focuses primarily on the employee's experience of meaningful and satisfying work, whereas WMH captures the broader and more sustained psychological condition that develops from these experiences. Treating workplace mental health as a separate layer also provides a clearer connection between the proposed model and the wider literature on employee mental health.

The framework therefore proposes that positive experiences of meaningful work and psychological well-being contribute to healthier workplace mental functioning. In turn, this psychological state is expected to influence how employees participate in and relate to the social environment of the organisation.

Layer 5 – Distal Outcome: Social Inclusion at Work

Social Inclusion at Work (SIW) represents the final and most distal outcome of the framework. It refers to the extent to which employees experience a sense of belongingness, have opportunities to express their views points, and are able to participate fully in organisational decisions (Evans and Repper, 2000).

In this framework, social inclusion is viewed as an outcome that develops partly through employees' psychological experiences rather than solely through formal organisational policies. Employees who maintain positive psychological functioning at work may be more confident in participating, communicating with others, expressing their thoughts, and developing a sense of meaning within the organisation (Garg and Rastogi, 2009). Consequently, sustained workplace mental health is proposed as a direct precursor of social inclusion at work.

Boundary Conditions

Three additional constructs are positioned as boundary conditions within the framework. Employee Conscientiousness and Work Discipline (ECWD) is expected to influence the extent to which organisational resources are converted into employee engagement. Employees who demonstrate higher levels of conscientiousness and work discipline may be more likely to make effective use of available organisational resources and respond positively to supportive workplace conditions.

Work Centrality (WC) is proposed as a two-sided moderator of the relationship between employee engagement and psychological well-being. At moderate levels, placing importance on work may strengthen the positive effects of engagement because employees are likely to derive greater purpose and satisfaction from their involvement in their roles. However, when work becomes excessively central to an employee's life, the same orientation may contribute to overinvestment in work and reduce its positive effect on psychological well-being.

Finally, Work–Life Integration (WLI) is proposed as a buffering condition. Effective integration between work and other areas of life may reduce the potential strain associated with excessive work centrality. Thus, WLI may help employees maintain psychological well-being even when they attach considerable importance to their work.

Overall, the proposed REWI framework presents a sequential relationship in which organisational and relational resources influence employee engagement and organisational commitment, which in turn contribute to meaningful work and psychological well-being. These psychological experiences are expected to support healthier workplace mental functioning, which subsequently facilitates social inclusion at work. The boundary conditions further recognise that these relationships may vary according to individual characteristics and the extent to which employees integrate work with the broader aspects of their lives. See figure- 1;

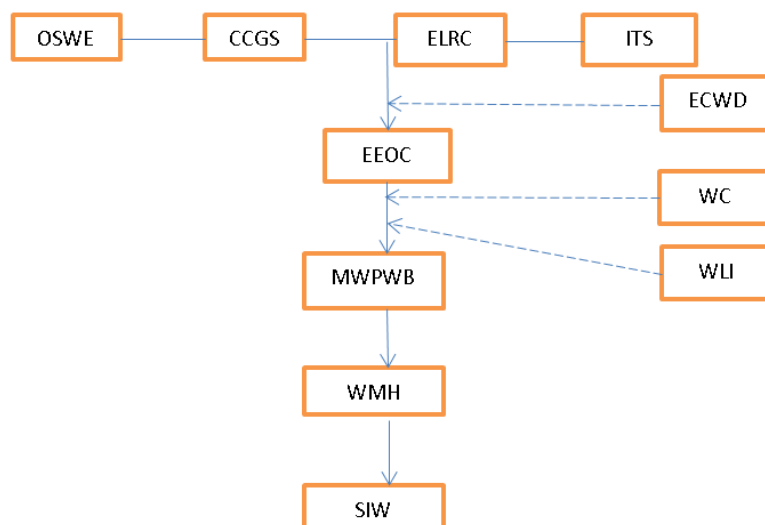


Figure- 1 REWI model

(Source- Author)

The framework allows direct path links layer-1 constructs to meaningful work and psychological wellbeing (MWPWB), from MWPWB to workplace mental health (WMH) and between WMH and social inclusion at work (SIW). These relationships may represent partial rather than complete mediation, as the influence of organisational resources on employees' mental health and sense of inclusion may occur through additional mechanisms that are not fully represented in the proposed sequence.

The Nexus between Workplace Mental Health and Social Inclusion

A key argument of this paper is that workplace mental health and social inclusion should not be treated as two separate outcomes. Instead, the framework views them as connected stages, with Workplace Mental Health (WMH) serving as an important condition for experiencing genuine inclusion at workplace. In the proposed pathway, Meaningful Work and Psychological Well-being (MWPWB) contribute to employees' workplace mental health, which then becomes a direct pathway towards Social Inclusion at Work (SIW). By identifying mental health as a distinct construct rather than treating it as part of general well-being, the framework places greater emphasis on the mental-health dimension of employees' workplace experiences. It suggests that meaningful inclusion depends not only on supportive working conditions or temporary feelings of satisfaction, but also on an employee's ability to maintain a stable and healthy psychological state over time.

This argument is based on the idea that inclusion is experienced personally rather than existing only through organisational policies. Shore et al. (2011), for example, describe inclusion in terms of both belongingness and the recognition of individual uniqueness. Experiencing these dimensions often requires employees to feel sufficiently secure and psychologically able to participate in workplace relationships and activities. Employees facing anxiety, emotional imbalance, or disengagement, makes difficult them to fully participate in organisational work. This draws major issue for employees' mental health and social inclusion. When employees are not psychologically well it reduces their capacity to connect with others. The current framework incorporates two perspectives by positioning workplace mental health as employee psychological well-being and social interaction. This shows that mental health may be central mechanism in developing positive workplace experience and sense of inclusion.

4. DISCUSSION

The REWI model brings together research strands that have largely developed on separate tracks. Studies of organisational support, engagement, meaningful work, and inclusion each offer valuable insight, but they rarely speak to one another. This paper argues that they should. When an employer treats people fairly, pays them properly, and gives them room to grow, this does not just make people "engaged" in an abstract sense it can genuinely improve how people feel day to day, and that, in turn, affects whether they feel able to speak up, join in, and be themselves at work.

A key argument here is that work centrality cuts both ways. Caring about one's job is not automatically healthy or unhealthy it depends on whether a person can also switch off, maintains relationships and interests outside work, and recover. Employees who invest heavily in their work but have little life outside it may be at greater risk of strain, even while appearing highly committed and high-performing. This has real relevance for anyone supporting employee wellbeing: visible commitment is not proof of psychological health.

Finally, the model treats social inclusion as something that grows out of a person's psychological state, not just from formal diversity policies or representation targets. Genuine inclusion feeling like you belong and can be your authentic self depends partly on whether someone has the mental space and confidence to engage with others. This links workplace mental health directly to the lived experience of inclusion, which is the central concern of this journal's readership.

5. IMPLICATIONS

5.1 Theoretical Implications

The REWI model integrates four well-established theoretical perspectives: Job Demands Resources (JD-R), Conservation of Resources (COR), Self-Determination Theory (SDT), and Social Exchange Theory (SET). Together, these theories provide a broader explanation of how organisational conditions may shape employees mental and psychological experiences and their social inclusion. Mostly, inclusion literature considers on diversity, organisational policies, and equality, but this framework adds social inclusion to mental health dimension at workplace. Employees work with more enthusiasm when they feel connected and mentally stability at workplace. This perspective encourages future research on inclusion to give greater attention to mental health as part of the conditions that support meaningful inclusion.

Work centrality and work–life integration add an important dimension by recognising that high employee engagement may not always yield favourable outcomes when work dominates other areas of life. The framework therefore emphasises that the effects of engagement depend on the broader context, particularly employees' ability to manage work demands alongside non-work responsibilities. A further contribution is the difference between Workplace Mental Health and psychological well-being, acknowledging that these related concepts may represent different aspects of employees' experiences. This distinction provides scope for examining their distinct antecedents and outcomes, while exploring Workplace Mental Health as a potential pathway between psychological experiences and social inclusion.

5.2 Mental Health Implications

REWI model offers several mental health implications at workplace;

First, it highlights the relevance of organisational elements such as fairness, compensation, ethical leadership, support, and trust. This suggests that organisation should promote psychological well-being.

The established model also encompasses that high engagement does not necessarily results in positive psychological outcomes. WC and WLI are therefore important in understanding whether sustained involvement in work supports well-being or contributes to strain.

Workplace relationships may provide early signals of psychological difficulties through changes in trust, communication, and willingness to seek support. Organisations should therefore complement traditional indicators such as absenteeism and turnover with relational and behavioural cues.

The framework further recognises that highly conscientious and committed employees may experience psychological pressure while maintaining strong performance. Mental-health initiatives should consequently address workload, recovery, boundaries, and balance across employees rather than focusing only on visible signs of distress.

Finally, the link between workplace mental health and social inclusion suggests that psychological well-being is an important component of an inclusive workplace. Supportive organisational environments can help employees participate more fully, develop meaningful connections, and experience a stronger sense of belonging.

5.3 Practical Implications

For HR professionals and managers, the framework points towards a more coordinated approach to workplace practices. Organisational support, fair compensation, opportunities for development, and ethical leadership are unlikely to operate in

isolation. Employees experience these conditions together, and weaknesses in one area may reduce the benefits created by another. Organisations may therefore gain more from addressing several areas at the same time rather than relying on a single intervention.

Managers should also be cautious when interpreting visible engagement. Working long hours, responding to messages outside normal working time, and showing strong dedication may be viewed positively, but these behaviours do not necessarily mean that an employee is coping well. Particular attention may be needed when high engagement is accompanied by difficulty switching off from work, reduced involvement in activities outside the workplace, or an increasing tendency to define personal identity mainly through the job.

Mental-health and inclusion initiatives could also be designed with greater connection between them. Employee resource groups, for example, may provide opportunities to discuss not only diversity and belonging but also psychological well-being and workplace relationships. Similarly, inclusion programmes could consider the conditions that allow employees to speak openly, participate in discussions, and feel that their contributions are respected, rather than focusing only on representation and formal equality.

5.4 Social Implications

The REWI model places workplace mental health within the pathway through which employees may experience social inclusion (Dote, 2026). Representation and formal inclusion policies remain important, but they may not be enough to create a genuine sense of belonging. Employees also need the psychological capacity to participate in workplace interactions, build relationships, express their views, and feel accepted by others.

This issue may be particularly relevant for employees who face additional demands or pressures outside their immediate work role. Family responsibilities, social circumstances, workplace expectations, and other aspects of employees' lives can influence how they experience organisational resources and demands (Demerouti, Peeters and van, 2012). Creating healthier working environments may therefore contribute not only to individual well-being but also to more equal opportunities for employees to take part in organisational life.

The framework also points to the value of bringing workplace mental-health and inclusion policies into closer conversation (Singh et al., 2025). These areas are often managed separately, even though they can affect the same employee experiences. Improvements in working conditions, access to psychological support, and employee well-being may create conditions that make fuller participation possible. A more integrated approach could therefore help organisations and policymakers address mental health and inclusion as connected workplace concerns.

6. LIMITATIONS AND FUTURE RESEARCH

As a conceptual paper, the REWI model requires empirical testing before its proposed relationships can be confirmed. Future studies could apply structural equation modelling to examine the constructs using established measures, with particular attention to Social Inclusion at Work and Workplace Mental Health, which may need developed and validated measures given their specific conceptualisation here. While cross-sectional studies can offer an initial assessment of these relationships, they cannot establish the temporal sequence the model proposes; longitudinal and diary based research would better test whether organisational resources precede changes in engagement and meaningful work, which then relate to workplace mental health and social inclusion. The model may also operate differently across cultural, occupational, and organisational settings, since work centrality's meaning varies with cultural expectations and occupational norms. Finally, the mental health–inclusion relationship may not hold equally across employee groups, warranting research into which groups need targeted support rather than uniform strategies.

7. CONCLUSION

This paper presents the REWI model, a conceptual framework explaining how organisational and relational resources shape employee engagement, meaningful work and psychological well-being, workplace mental health, and ultimately social inclusion at work, while accounting for conscientiousness, work centrality, and work–life integration as boundary conditions. Its central contribution is positioning Workplace Mental Health between psychological well-being and Social Inclusion at Work, bridging two research streams often studied separately. Integrating JD-R, COR, SDT, and SET, the framework offers both theoretical grounding and practical relevance, encouraging organisations to treat mental health, engagement, and

inclusion as connected priorities. Future research should empirically test these pathways across diverse organisational and cultural settings.

ACKNOWLEDGEMENTS

The authors would like to acknowledge the support and assistance provided by the Department of Jaypee Business School, for their valuable support and guidance during the course of this research.

AUTHOR CONTRIBUTIONS

Jyoti Sharma: Conceptualization, Investigation, Methodology, Formal Analysis, Writing—Original Draft.
Bhawna Agarwal: Supervision, Writing—Review & Editing.

Conflict of Interest

The authors declare that they have no conflict of interest.

ETHICS STATEMENT

Ethical approval was not required for this study as it is a conceptual paper and does not involve human participants, primary data collection, or the use of personal or identifiable information.

DATA AVAILABILITY STATEMENT

Data availability is not applicable to this study, as the paper is conceptual in nature and does not involve the collection or analysis of primary or secondary datasets.

REFERENCES

- [1] Bakker, A.B. and Demerouti, E., 2017. Job demands–resources theory: Taking stock and looking forward. *Journal of occupational health psychology*, 22(3), p.273.
- [2] Schaufeli, W.B. and Bakker, A.B., 2004. Job demands, job resources, and their relationship with burnout and engagement: A multi-sample study. *Journal of Organizational Behavior: The International Journal of Industrial, Occupational and Organizational Psychology and Behavior*, 25(3), pp.293-315.
- [3] Colquitt, J.A., 2001. On the dimensionality of organizational justice: a construct validation of a measure. *Journal of applied psychology*, 86(3), p.386.
- [4] Edmondson, A., 1999. Psychological safety and learning behavior in work teams. *Administrative science quarterly*, 44(2), pp.350-383.
- [5] Kahn, W.A., 1990. Psychological conditions of personal engagement and disengagement at work. *Academy of management journal*, 33(4), pp.692-724.
- [6] Steger, M.F., Dik, B.J. and Duffy, R.D., 2012. Measuring meaningful work: The work and meaning inventory (WAMI). *Journal of career Assessment*, 20(3), pp.322-337.
- [7] Deci, E.L. and Ryan, R.M., 2000. The "what" and "why" of goal pursuits: Human needs and the self-determination of behavior. *Psychological inquiry*, 11(4), pp.227-268.
- [8] Blau, P.M., 1964. Justice in social exchange. *Sociological inquiry*, 34(2), p.193.
- [9] Shore, L.M., Randel, A.E., Chung, B.G., Dean, M.A., Holcombe Ehrhart, K. and Singh, G., 2011. Inclusion and diversity in work groups: A review and model for future research. *Journal of management*, 37(4), pp.1262-1289.
- [10] Hobfoll, S.E., 1989. Conservation of resources: A new attempt at conceptualizing stress. *American psychologist*, 44(3), p.513.
- [11] Rothbard, N.P., 2001. Enriching or depleting? The dynamics of engagement in work and family roles. *Administrative science quarterly*, 46(4), pp.655-684.

- [12] Allen, T.D., Herst, D.E., Bruck, C.S. and Sutton, M., 2000. Consequences associated with work-to-family conflict: a review and agenda for future research. *Journal of occupational health psychology*, 5(2), p.278.
- [13] Evans, J. and Repper, J., 2000. Employment, social inclusion and mental health. *Journal of psychiatric and mental health nursing*, 7(1), pp.15-24.
- [14] Garg, P. and Rastogi, R., 2009. Effect of psychological wellbeing on organizational commitment of employees. *Journal of Organizational Behavior*, 8(2), pp.42-51.
- [15] Dote Pardo, J.S., 2026. Mental health and social inclusion: a systematic review of barriers, interventions and outcomes. *Mental Health and Social Inclusion*, 30(1), pp.4-12.
- [16] Demerouti, E., Peeters, M.C. and van der Heijden, B.I., 2012. Work–family interface from a life and career stage perspective: The role of demands and resources. *International Journal of Psychology*, 47(4), pp.241-258.
- [17] Singh, B., Wongmahesak, K., Sonkla, T. and Chandra, S., 2025. Building a mind-supportive workplace: practical DE&I strategies for prioritizing employee mental health. In *Prioritizing Employee Mental Health and Well-Being for Organizational Success* (pp. 73-90). IGI Global Scientific Publishing.
- [18] Ulfah, M., 2026. Belonging at Work: A Qualitative Meta-Synthesis of Workplace Inclusion, Social Identity, and Employee Well-Being. *Golden Ratio of Mapping Idea and Literature Format*, 6(3), pp.2096-2109.