

Management Practices and Employee Mental Health: Implications for Workplace Counselling in Nigeria

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ABSTRACT

This conceptual paper synthesises theoretical and empirical literature to examine how management practices influence employee mental health and to articulate implications for workplace counselling in Nigeria. Drawing on the Job Demands-Resources (JD-R) Model, Social Exchange Theory (SET), and Transformational Leadership Theory, this paper develops a conceptual framework in which structural management practices, including performance evaluation, workload allocation, communication, and rewards, as well as behavioural practices, particularly leadership styles, shape employee psychological wellbeing through the mediating mechanisms of job demands and resources and perceived organisational support. The synthesis produces five propositions for future empirical testing. The framework positions management practices as potential job resources or job demands that may either enhance wellbeing, engagement, and vitality or contribute to stress, anxiety, depression, and burnout. The paper extends the discussion of employee mental health from individual coping to systemic workplace intervention and highlights the role of workplace counsellors in assessment, intervention, advocacy, and referral. Given Nigeria's high power-distance and collectivist cultural context, the framework underscores the importance of workplace counselling in addressing the psychological consequences of maladaptive management practices and promoting psychologically healthy work environments.

Keywords: management practices; employee mental health; workplace counselling; Job Demands-Resources model; Nigeria

INTRODUCTION

The numbers are stark. Adias, Raimi, and Raimi (2025) estimate that 75% of Nigerian employees experience significant work-related stress, with the highest prevalence in banking, healthcare, and retail. Bakare, Coker, Saibu, and Durojaiye (2025) found over 80% of Lagos academics report significant work stress, while 43.7% of factory workers in Ibadan suffer moderate to severe burnout (Bello & Abdulrazaq, 2024). The crisis is visible in specific tragedies: 82 suicides recorded in Lagos between January and July 2023 (Vanguard, 2023), and the January 2024 suicide of a Globus Bank employee, which colleagues attributed to unrealistic performance targets and unsupportive supervision (Vanguard, 2024a). In Ogun State, workers of Papon Nigeria Limited protested “inhuman policies” and “poor working conditions” (Tribune Online, 2018).

Despite this toll, the dominant response has been reactive, absent employee assistance programmes and generic wellness apps that fail to address root causes (Adias et al., 2025). What if the disease resides in the daily managerial routines and supervisory behaviours that structure work itself? The implications of this crisis extend beyond productivity metrics to the core concerns of guidance and counselling practice. Workplace counsellors are increasingly called upon to address the psychological consequences of maladaptive management practices, consequences that manifest as chronic stress, burnout, anxiety, and depression. Yet counselling interventions that focus solely on individual coping, without attending to the organisational structures that generate distress, risk treating symptoms rather than causes.

This paper responds to this gap by articulating how management practices function as either psychological resources or demands, and by specifying the role of workplace counsellors in assessment, intervention, advocacy, and referral. By bridging

organisational behaviour and counselling psychology, the framework positions workplace counsellors as essential agents in the promotion of psychologically healthy work environments.

Existing research on employee mental health in Nigeria has remained fragmented, focusing narrowly on clinical populations or isolating single variables like leadership style (Adewuya et al., 2018; Nwoko, 2022). Crucially, there is a dearth of studies examining how management practice, conceptualised as a multidimensional construct comprising structural administrative and behavioural leadership practices, influences employee mental health (Okoli, Ogbonna, Enyeobi, & Okafor, 2025). This gap is consequential. Oluwasanmi, Okponung, Sodeinde, and Ibrahim (2025) found that employee mental health scores predict 40–46% of task and adaptive performance variance. Estimates from BusinessDay (2025) suggest that Nigeria loses between ₦350 billion and ₦400 billion annually to stress-related absenteeism and presenteeism.

Nigeria’s cultural context is characterised by high power-distance, where employees are socialised to accept managerial authority without question, and strong collectivist values that prioritise group harmony over individual expression (Amah, 2021; Harun et al., 2021). These cultural values have significant implications for employee mental health. In high power-distance contexts, employees may be reluctant to challenge management practices or disclose psychological distress, fearing victimisation or job loss (Amah, 2021). Stigma surrounding mental health further compounds this reluctance, creating what Adias, Raimi, and Raimi (2025) describe as a “culture of silence” that prevents employees from seeking help or reporting abusive supervision. This cultural context conditions how management practices are perceived and experienced, making Nigeria a distinctive setting

for examining the management practice to mental health pathway.

This conceptual paper synthesises three complementary theories: the Job Demands-Resources (JD-R) Model (Demerouti, Bakker, Nachreiner, & Schaufeli, 2001; Bakker & Demerouti, 2023), Social Exchange Theory (SET; Blau, 1964; Cropanzano & Mitchell, 2005), and Transformational Leadership Theory (Bass & Riggio, 2006). Following the approach to theoretical synthesis recommended by Jaakkola (2020), this paper advances five formal propositions and presents a testable model. The paper contributes by extending the JD-R model to Nigeria, integrating SET's perceptual lens, distinguishing between structural and behavioural dimensions of management practice, and articulating implications for workplace counselling.

METHODS

This study employed a conceptual paper design based on theoretical synthesis. The paper synthesises three complementary theories: the Job Demands-Resources (JD-R) Model (Demerouti, Bakker, Nachreiner, & Schaufeli, 2001; Bakker & Demerouti, 2023), Social Exchange Theory (SET; Blau, 1964; Cropanzano & Mitchell, 2005), and Transformational Leadership Theory (Bass & Riggio, 2006). Following the approach to theoretical synthesis recommended by Jaakkola (2020), the paper advances five formal propositions and presents a testable model.

The theoretical framework rests on three non-redundant theories, each contributing a distinct explanatory layer. The JD-R Model explains the psychological process through which management practices translate into employee mental health outcomes. Structural and behavioural practices function either as job resources, such as supportive supervision, fair evaluation, and adequate autonomy, which trigger motivational processes leading to

engagement and wellbeing, or as job demands, such as excessive workload, ambiguous communication, and inequitable rewards, which trigger health impairment processes leading to burnout and distress (Bakker & Demerouti, 2023).

Social Exchange Theory explains the perceptual mechanism that mediates this relationship. Employees interpret management practices through norms of reciprocity. When practices are perceived as fair, transparent, and supportive, employees develop a sense of perceived organisational support, which enhances psychological wellbeing. Conversely, inequitable or arbitrary practices breach the psychological contract and generate distress (Cropanzano & Mitchell, 2005).

Transformational Leadership Theory specifies the behavioural dimension of management practice. Transformational leaders generate psychological resources, including self-efficacy, meaning, and optimism, that buffer employees against job demands (Arnold, 2017). Democratic leaders foster autonomy and relatedness, whereas authoritarian and laissez-faire leaders suppress these resources, creating ambiguity and distress (Tepper, 2000; Skogstad, Einarsen, Torsheim, Aasland, & Hetland, 2007). Together, the JD-R Model identifies what matters, resources versus demands; SET explains how employees interpret these conditions through reciprocity; and Transformational Leadership Theory specifies which behaviours constitute resources or demands.

The key concepts in this paper were defined to guide the development of the framework. Employee mental health was conceptualised along two distinct dimensions: negative mental health indicators and positive well-being indicators. Negative mental health indicators include stress, anxiety, depression, and burnout, which are characterised by psychological distress, emotional exhaustion, and impaired

functioning. Positive well-being indicators include psychological well-being, work engagement, and vitality, which are characterised by positive affect, life satisfaction, and meaningful engagement with work (Ryff, 1989; Keyes, 2005).

Management practices refer to the behaviours, systems, and procedures managers use to direct and influence employees (Aguinis, Jensen, & Kraus, 2021). This multidimensional construct comprises structural practices and behavioural practices. Structural practices refer to organisation-level policies, including performance evaluation, workload allocation, communication, rewards, work-life balance, and training and development. Behavioural practices refer to individual leadership styles, including transformational, democratic, authoritarian, and laissez-faire leadership. Structural and behavioural practices interact: fair systems delivered by authoritarian leaders may generate distress, while good systems delivered by transformational leaders may amplify wellbeing.

Workplace counselling refers to professional psychological support provided to employees to address work-related distress, enhance coping, and promote wellbeing. It encompasses assessment, intervention, advocacy, and referral functions. These conceptual definitions provide the basis for developing the framework and propositions regarding the relationship between management practices and employee mental health in Nigeria.

RESULTS

The conceptual synthesis produced a framework explaining the relationship between management practices and employee mental health in Nigeria. The framework positions management practices as a multidimensional construct consisting of structural practices and behavioural practices. Structural practices include performance evaluation, workload

allocation, communication systems, reward structures, work-life balance policies, and training and development. Behavioural practices include transformational leadership, democratic leadership, authoritarian leadership, and laissez-faire leadership.

The framework indicates that management practices influence employee mental health through two sequential mechanisms. The first mechanism is employees' experience of job demands and job resources. Supportive management practices may function as job resources that enhance motivation, engagement, and wellbeing, whereas maladaptive management practices may function as job demands that increase psychological distress, burnout, anxiety, and depression. The second mechanism is perceived organisational support. When employees perceive that management practices are fair, transparent, and supportive, they are more likely to perceive the organisation as valuing their contributions and caring about their wellbeing. Conversely, arbitrary, punitive, or inequitable practices may reduce perceived organisational support and contribute to psychological distress.

The resulting framework is a serial mediation model. In this model, management practices influence job demands and resources; job demands and resources shape perceived organisational support; and perceived organisational support influences employee mental health outcomes. Employee mental health is represented by both negative indicators, including stress, anxiety, depression, and burnout, and positive indicators, including wellbeing, engagement, and vitality. The model can be tested empirically using structural equation modelling with bootstrapping procedures for mediation effects.

Five propositions emerged from the conceptual framework. First, fair, transparent, and supportive structural management practices are positively

associated with employee mental health, whereas arbitrary, excessive, or inequitable structural practices are negatively associated with employee mental health. This proposition highlights the role of organisational systems and policies in shaping psychological wellbeing.

Second, transformational and democratic leadership are positively associated with employee mental health, whereas authoritarian and laissez-faire leadership are negatively associated with employee mental health. This proposition shows that leadership style is a central behavioural dimension of management practice and may either support or undermine employee psychological wellbeing.

Third, perceived organisational support mediates the relationship between management practices and employee mental health. Supportive management practices strengthen employees' perception that the organisation values and supports them, whereas punitive or inequitable practices weaken this perception and may increase psychological distress.

Fourth, job demands and job resources serially mediate the relationship between management practices and employee mental health. Management practices first shape whether employees experience their work as demanding or resourceful. These demands and resources then shape perceived organisational support, which subsequently influences employee mental health outcomes.

Fifth, structural and behavioural management practices interact in shaping employee mental health. Well-designed organisational systems are more likely to produce favourable mental health outcomes when implemented by supportive leaders. Conversely, even well-designed systems may generate distress when implemented through authoritarian or punitive leadership. The combined effect of supportive structural practices and supportive behavioural practices is therefore expected to produce stronger

positive associations with employee mental health than either dimension alone.

Overall, the results of the conceptual synthesis indicate that employee mental health in Nigeria is not shaped only by individual coping capacity, but also by the structure and behaviour of management practices. The framework shifts attention from individual-level resilience alone toward systemic workplace conditions and the role of workplace counselling in addressing organisational sources of psychological distress.

DISCUSSION

The conceptual framework developed in this paper offers several theoretical and practical implications for understanding the relationship between management practices and employee mental health in Nigeria. Theoretically, the framework extends the Job Demands-Resources Model by specifying how management practices operate as either resources or demands within the Nigerian workplace context (Demerouti, Bakker, Nachreiner, & Schaufeli, 2001; Bakker & Demerouti, 2023). This extension is important because it moves beyond Western-centric applications of the model and situates employee mental health within the realities of Nigerian organisational culture and management systems.

The framework also integrates the perceptual lens of Social Exchange Theory. This integration explains why identical management practices may produce different outcomes depending on how employees interpret them (Blau, 1964; Cropanzano & Mitchell, 2005). When employees perceive management practices as fair, transparent, and supportive, they are more likely to experience psychological wellbeing. Conversely, when practices are perceived as arbitrary, inequitable, or punitive, they may contribute to psychological distress. By including perceived organisational support as a mediating mechanism, the framework clarifies the psychological

process through which management practices become meaningful to employees (Eisenberger, Huntington, Hutchison, & Sowa, 1986).

Another theoretical contribution is the distinction between structural and behavioural dimensions of management practice. Structural practices include organisational systems such as performance evaluation, workload allocation, communication, rewards, work-life balance policies, and training and development. Behavioural practices refer to leadership styles, including transformational, democratic, authoritarian, and laissez-faire leadership (Bass & Riggio, 2006; Aguinis, Jensen, & Kraus, 2021). This distinction provides a more nuanced conceptualisation than approaches that treat management practice as a single or undifferentiated construct. It also shows that structural and behavioural practices interact in shaping employee mental health.

The framework further positions workplace counselling as an essential intervention mechanism. Rather than viewing counselling only as an individual coping intervention, the framework connects workplace counselling with organisational assessment, advocacy, referral, and systemic change. This bridges organisational behaviour and counselling psychology and highlights the role of workplace counsellors in promoting psychologically healthy work environments.

For organisations and senior management, the framework suggests the need to conduct systematic audits of management practices to identify which practices function as job demands and which function as job resources. Performance evaluation systems should be transparent, constructive, and developmental. Workload allocation should be equitable and realistically calibrated. Communication channels should be open, timely, and respectful. Reward structures should be perceived as fair across distributive, procedural, and interactional dimensions.

For human resource professionals, the framework indicates the importance of integrating mental health into strategic human resource planning. Wellbeing metrics should be incorporated into performance dashboards. Human resource professionals should design fair and transparent reward systems, promote genuine work-life balance policies, and deliver mandatory training programmes that equip managers with skills in psychological safety, stress recognition, and supportive performance feedback.

For workplace counsellors and employee assistance programme coordinators, the framework positions counsellors as both interventionists and advocates. Workplace counsellors should conduct workplace stress assessments to identify organisational sources of psychological distress and individual coping resources. They should provide performance and career counselling that addresses how management practices affect employee motivation, satisfaction, and career progression. Counsellors should also develop coping interventions that equip employees with skills to manage job demands while advocating for structural changes that reduce demands at their source.

In addition, workplace counsellors should advocate for healthy work systems by feeding assessment data back to management and human resource professionals, influencing policy development, and promoting psychosocial safety standards. They should facilitate psychological referral for employees requiring specialised mental health support, ensuring access to professional care while maintaining confidentiality and reducing stigma. This role is particularly important in the Nigerian context, where high power-distance culture and mental health stigma may inhibit disclosure and help-seeking (Amah, 2021; Adias, Raimi, & Raimi, 2025).

For policymakers and regulators, the framework highlights the need to strengthen enforcement of the National Mental Health Act 2021 by developing specific workplace psychosocial safety standards. Organisations, particularly those in high-stress sectors, should be required to adopt formal mental health policies, employee assistance programmes, and psychosocial risk assessments.

Based on the conceptual framework, several recommendations can be drawn. Organisations should establish formal employee assistance programmes with trained workplace counsellors. Managers should receive mandatory training in psychologically supportive leadership and stress recognition. Performance metrics should include employee wellbeing indicators alongside productivity measures.

Workplace counsellors should adopt a systemic orientation by addressing both individual coping and organisational contributors to distress. They should develop culturally sensitive interventions that account for Nigeria's high power-distance context, where stigma and fear may inhibit disclosure. Counsellors should also build referral networks with clinical psychologists and psychiatrists for employees requiring specialist mental health care.

Policymakers should operationalise the National Mental Health Act 2021 through enforceable workplace psychosocial safety standards. Sector-specific guidelines should be developed for banking, manufacturing, healthcare, and education. Public awareness campaigns should also target mental health stigma in workplace settings.

Future researchers should test the propositions empirically using validated instruments, employ multi-sector sampling across Nigeria, and evaluate the effectiveness of workplace counselling interventions in mitigating the psychological consequences of maladaptive management practices.

CONCLUSION

This conceptual paper has advanced a framework positioning management practices, both structural and behavioural, as determinants of employee mental health in Nigeria. By integrating the Job Demands-Resources Model, Social Exchange Theory, and Transformational Leadership Theory, the paper argued that management practices influence employee mental health through a serial mediation pathway. In this framework, management practices shape job demands and resources, which then influence perceived organisational support and, ultimately, employee mental health. Five propositions were developed to provide a testable roadmap for future empirical investigation.

The framework operates within deliberate boundaries. It is theoretical in nature and offers a synthesis of established theories and testable propositions that require empirical validation. The Nigerian context is both the strength and boundary of the paper, as the framework is intentionally situated within Nigeria's high power-distance and collectivist culture. Therefore, its applicability to other contexts requires contextual adaptation. The focus on management practices as the primary determinant of employee mental health is a deliberate response to an underexplored gap and does not dismiss other important factors such as job design or economic pressures. Although the framework simplifies a complex reality, this parsimony provides clarity and direction for empirical investigation.

Future research should test the five propositions empirically using validated instruments, such as the Management Practices Survey, the Global Transformational Leadership Scale, and DASS-21. Researchers should also employ multi-sector sampling across Nigeria, including banking, manufacturing, healthcare, and tertiary education, to establish sector-

specific patterns. In addition, future studies should use structural equation modelling to test the proposed serial mediation model, examine how cultural factors such as power distance, collectivism, and mental health stigma moderate the proposed relationships, and investigate the effectiveness of workplace counselling interventions in mitigating the psychological consequences of maladaptive management practices.

The escalating crisis of workplace mental health in Nigeria demands a fundamental reorientation from building “resilient employees” to designing “resilient management systems,” and from individual coping interventions to systemic workplace counselling frameworks. This paper provides the conceptual foundation for that transformation by offering a framework that bridges organisational behaviour and counselling psychology. It is hoped that researchers, practitioners, counsellors, and policymakers will use this framework to develop evidence-based interventions that address the structural determinants of employee psychological wellbeing in Nigeria.

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