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Employees' Perceived Risk of Discussing COVID-19 Concerns in the Workplace: The Impact of Perceived Organizational Support and Policy Communication on Voicing Health Concerns in Times of Crisis

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Objectives: The coronavirus disease 2019 (COVID-19) pandemic transformed the nature of work across the globe and forced organizations to grapple with the challenge of protecting their workers, while maintaining operations. Part of the challenges associated with the pandemic included instituting new COVID-19 workplace policies (e.g., social distancing, masking) designed to protect employees from spread of the virus. The present study is designed to understand employee perceptions of the risks of discussing their COVID-19 concerns in the workplace and how this is related to perceived organizational support and COVID-19 policy communication.

Methods: Two-hundred and fifty-two individuals working during the COVID-19 pandemic completed an online survey administered via Amazon's Mechanical Turk. Participants' COVID-19 policy communication within their organization, their perceptions of organizational support, and their perceived risk associated with discussing COVID-19 concerns in the workplace were analyzed with Pearson correlations and hierarchical regression models using SPSS 27.

Results: COVID-19 policy communication was negatively correlated to employees' levels of perceived organizational support (r = -.148, p = .018). The regression models indicated that COVID-19 policy communication and perceived organizational support explain a significant amount of employees' perceived risks of discussing COVID-19 concerns in the workplace.

Conclusions: Organizations need to be aware of whether employees feel supported by organizational policies and whether they can reveal their concerns about health-related issues and/or organizational crises in their workplace. The implications of the study findings are discussed in terms of the risks of discussing health concerns in the workplace and the nature of work in times of crisis.

Key Words: Risk, Disclosure, Organizational Support, Policy Communication, Coronavirus Disease 2019

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Introduction

The coronavirus disease 2019 (COVID-19) pandemic changed the nature of business and required organizations to more closely consider employee needs and well-being (Howe, Chauhan, Soderberg, & Buckley, 2020). Governments across the globe instituted policies and mandates designed to protect individuals and help to mitigate the spread of the COVID-19 virus (Wang

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& Mao, 2021). Thus, organizations were often left instituting new policies designed to protect employee well-being (e.g., mask mandates, social distancing, work-from-home arrangements) and/or foster continued operations (Workman, Vandenberg, P., & Crozier, 2021). However, responses to the COVID-19 pandemic varied and were often tumultuous due to the threat that the pandemic posed to business operations and employees' physical health, job security, and everyday life (Howe et al., 2020). Understanding employee perceptions of the challenges associated with raising their concerns about the pandemic in the workplace is an important area for research since employees who do not feel that their organization valued their well-being may have higher intentions to leave their organizations (Riggle, Edmondson, & Hansen, 2009). As such, the present study is designed to understand how U.S. employee perceptions of organizational support and policy communication during the COVID-19 pandemic is related to employees' perceptions of the risk of discussing their COVID-19 concerns in the workplace.

Literature Review

Organizational Support Theory

Organizational support theory (Eisenberger, Huntington, Hutchison, & Sowa, 1986; Rhoades & Eisenberger, 2002) argues that employees hold beliefs about the extent to which their organization values their contributions and cares about their overall wellbeing as members of the organization. The personification of the organization is a key component of organizational support theory (Rhoades & Eisenberger, 2002). That is, organizational members attribute the actions of organizational agents (e.g., managers) to the broader organizational goals instead of to the goals of the individual agents (Levison, 1965). As such, organizational support theory proposes that employees view the actions taken by organizational agents as the actions of the collective organization which in turn employees use when determining whether they feel that the organization is concerned for their well-being and whether they believe the organization values their contributions.

Organizational support theory has important implications regarding employee job satisfaction, organizational commitment, and employee intent to leave (Allen, Shore, & Griffeth, 2003; Riggle et al., 2009). Allen et al. (2003) demonstrate that perceived organizational support is influenced by employee participation in decision making, employee perceptions of fairness of organizational rewards, and growth opportunities and that perceived organizational support is negatively related to employee turnover intentions. In their meta-analysis examining the relationships between perceived organizational support, job satisfaction, and employee intent to leave, Riggle et al. (2009) found "perceived organizational support has a strong, positive effect on organizational commitment and job satisfaction ... and a strong, negative effect on employee intent to leave" (p. 1029). As such, perceived organizational support has important implications on how employees navigate their workplace and their intentions to remain committed to or to leave their organizations.

While organizational support theory is rooted in psychology, organizational communication scholars have demonstrated a relationship between employee perceptions of organizational support and the communicative practices within organizations (Allen, 1992, 1995; Brown & Roloff, 2015; Tremblay & Landreville, 2015). Indeed, the organizational practices that inform employee perceptions of organizational support are communicative in nature. For example, Eisenberger, Stinglhamber, Vandenberghe, Sucharski, and Rhoades (2002) found that employees' perceptions of organizational support are based on the extent to which they see a supervisor's actions as occurring on behalf of the organization in contrast the supervisor's personal goals. As such, organizational support theory addresses how an organization's communicative practices inform employees' socioemotional wellbeing within their organizations and feelings of being valued by their organization (Rhoades & Eisenberger, 2002).

The communication within organizations that informs employee perceptions of organizational support is encompassed by a variety of aspects of organizational life, including supervisor communication (Allen, 1992, 1995; Eisenberger et al., 2002), coworker relationships (Allen, 1992, 1995), role behaviors (Brown & Roloff, 2015), and through organizational practices (Allen et al., 2003; Rhoades & Eiseberger, 2002; Tremblay & Landreville, 2015). The procedures, policies, and norms that organizations adopt and carry out collectively throughout the organization inform whether employees feel that their organization is committed to them and values their contributions. Further, how organizations demonstrate their support to employees through their policies and practices in times of crisis, such as COVID-19, is particularly important in terms of whether employees feel supported by their organizations or stressed (Chen & Eyoun, 2021; Hoak, 2021). Moreover, whether employees are comfortable voicing their concerns related to a crisis may be informed by whether they feel supported by their organization's actions. As such, organizational support is communicated in myriad ways during crises and has important implications on employee-organization relationships.

Policy Communication

The development and implementation of policies within organizations is a communicative activity that has a clear impact on both organizational operations and the everyday lives of employees (Canary, 2010a, 2010b; Canary, May, Rinehart, & Barlow, 2018; Canary, Riforgiate, & Montoya, 2013; D'Enbeau, 2019; Kirby & Krone, 2002; Workman et al., 2021). Indeed, organizational policies guide behaviors within organizations and often provide employees with a framework for collectively understanding how to carry out their work (Canary, 2010a). Policies within organizations focus on a variety of aspects of organizational life, including family leave (e.g., parental leave), sexual harassment, employee health (e.g., sick leave), and everyday operations (e.g., paid time off; "PTO"). Canary (2010b) explains that policies may consist of written texts, practices, and/or procedures followed by organizational members. Osher and Quinn (2003) note that policies are used to "mandate or prohibit behavior; reward, sanction, legitimize and provide inducements for particular behaviors; transfer resources to enable particular types of activities; and define or transfer authority" (p. 52). While policies may be developed by organizations with the expressed purpose of internally guiding organizational activities, organizational policies may also be developed to comply with federal, state, or local public policies (e.g., Americans with Disabilities Act, "ADA" compliance).

The COVID-19 crisis required the creation of new public health measures designed to mitigate that spread of a deadly virus (Wang & Mao, 2021). While organizations were often forced to comply with governmental mandates (e.g., stay-at-home orders, mask mandates), many organizations chose to create internal policies designed to mitigate the spread of COVID-19 among their employees (e.g., work-from-home policies, vaccination mandates) and/or to ensure the continued operations of their organization (Workman et al., 2021). The swift creation of new policies in the workplace designed to protect workers from a deadly and, often, politically contentious virus creates many questions about how employees communicated about COVID-19 policies and how employees perceived that these COVID-19 policies impacted perceived organizational support. As such, the following research question is posed:

• RQ1: What is the relationship between COVID-19 policy communication in the workplace and employees' perceptions of organizational support?

Communication Privacy Management Theory and Risk of Disclosure in the Workplace

Communication privacy management theory (CPM) is a theoretical framework focused on how people manage disclosure of private information in their relationships with others (Petronio, 2002). Private information is defined as any information that is "owned" by an individual that makes that individual feel vulnerable if the information were to be disclosed (Petronio,

2002). As such, when individuals are making decisions about disclosing private information there is an inherent risk associated with the disclosure. While there are a variety of issues in the workplace that may make an individual feel vulnerable, disclosure of health-related information and concerns in the workplace creates particular challenges for employees (e.g., Elkins, 2018; Smith & Brunner, 2017; Westerman, Currie-Mueller, Motto, & Curti, 2017; Westerman, Miller, Reno, & Spates, 2015; Wittenberg-Lyles & Villagran, 2006). Westerman et al. (2015) note, "Employees must make decisions about how to share their health information in ways that allow them to function effectively at work and that are appropriate to their workplace, supervisor, coworkers, and themselves" (p. 379). Further, Smith and Brunner (2017) explain that employees may not want to share their personal concerns or challenges in the workplace out of fear of negative judgment from their colleagues and managers. When individuals are dealing with health-related disclosures it can create an additional layer of vulnerability in the workplace because one's health is in many ways inextricably related to their work (e.g., health insurance coverage in the U.S., livelihood, stress levels) and individuals may fear the reprisals of sharing personal information that could be perceived negatively. As such, there are a variety of risks associated with disclosing one's health-related concerns in the workplace.

The COVID-19 pandemic is a particularly challenging context in terms of health-related disclosures in the workplace. For employees all around the globe, the COVID-19 pandemic posed a significant threat health and well-being. Some individuals with underlying conditions and/or compromised immune systems or family members with underlying conditions and/ or compromised immune systems had the very real challenge of weighing the risks of disclosing their concerns related to the COVID-19 pandemic within their workplace or keeping their concerns concealed from their employers. As such, understanding how different aspects of organizational life, including how organizations communicated about their COVID-19 policies designed to protect employees and whether employees perceived that their organization valued them and their well-being during the pandemic, are likely important predictors of the level of risk employees associated with disclosing their concerns related to the COVID-19 pandemic. Thus, to better understand employees' perceptions of risk of disclosure of COVID-19 concerns in the workplace, the following research question is posed:

• RQ2: How is COVID-19 policy communication in the workplace and employees' perceptions of organizational support associated with employees' perceived risk of sharing their concerns about COVID-19 in the workplace?



Methods

Participants

The sample consisted of two-hundred and fifty-two (n = 252)adults working during the COVID-19 pandemic. Participants included more males (57.1%; n = 144) than females (42.1%; n = 144) 106) and their ages ranged from 21 to 78 years old (M = 37.08; SD = 10.75). Participants classified themselves as white (48.4%; n = 122), Asian (34.9%; n = 88), black (6.0%; n = 15), Hispanic or Latino (5.6%; n = 14), or another ethnicity. The majority of participants worked full-time at the time of their participation in the study (82.9%; n = 209) and were working exclusively from home during the COVID-19 pandemic (32.1%; n = 81) in contrast to other work arrangements (e.g., primarily from home [18.3%; n = 46], mix of home and office [25.8%; n = 65], primarily at office [7.9%; n = 20], exclusively at office or on-site [15.9%; n = 40]). Participants represented various industries, including legal services (11.9%; n = 30), software development (10.7%; n = 27), construction (8.7%; n = 22), and K-12 education (8.3%; n = 21), among other industries.

Procedures

All procedures were approved by author's the Institutional Review Board. Participants were recruited through Amazon's Mechanical Turk (M-Turk) by posting information about the study to the platform. M-Turk is commonly used for conducting online surveys and participants recruited through M-Turk have not demonstrated significant differences in terms of biases or their attention to survey material (Paolacci, Chandler, & Ipeirotis, 2010). Participants read an informed consent document, agreed to participate in the study, and then completed an online questionnaire via M-Turk. Participants were compensated (USD \$1.50) for their participation. To be eligible to participate, individuals had to be at least 18 years of age, a U.S. resident, and employed either full-time or part-time at the time of their participation in the study in March 2021. Participants were asked about their COVID-19 policy communication within their organization, their perceptions of organizational support, their perceived risk associated with discussing COVID-19 concerns in the workplace, questions about the nature of their work, and questions about their demographics. A total of 267 participants completed the survey and after excluding data that was incomplete (n = 15), the remaining 252 participants were included in the present study.

Measures

All data were analyzed using SPSS 27. Mean and standard deviations for all variables are reported in Table 1.

Table 1. Correlations between study variables, respective study variable means, standard deviations, and Cronbach's alpha reliabilities

Variable	1	2	3
1. Policy communication	-		
2. Perceived organizational support	148 [*]	-	
3. Risk of COVID-19 disclosures	.256**	.470**	-
Mean	3.51	3.82	4.35
Standard deviation	.98	1.02	1.76
Cronbach's alpha	.95	.93	.95

Note. n = 252.

COVID-19, coronavirus disease 2019.

p < .05, **p < .01.

Perceived Organizational Support

Perceived organizational support was measured using the Survey of Perceived Organizational Support (SPOS; Eisenberger et al., 1986). The SPOS is a 36-item unidimensional, Likerttype scale (1 = strongly disagree, 7 = strongly agree) designed to measure employees' perceptions of how much their organization values their contribution to the workplace and their wellbeing. Several scale questions were adapted in the present study to include COVID-19 specific examples (e.g., "My organization would understand a long absence due to illness (COVID-19 or otherwise)") so that participants focused on their feelings of organizational support during the pandemic. Prior research has demonstrated the high reliability and unideminsionality of the SPOS (Eisenberger et al., 1986) and the scale had high reliability in the present study (Cronbach's $\alpha = .93$).

Policy Communication

An adapted version of the Policy Communication Index (PCI; Canary et al., 2013) was used to measure communication processes related to policy communication in the workplace. The PCI is a 20-item measure designed to measure policy communication with Likert-type responses choices ranging from 1 ("never") to 5 ("very often"). The adapted PCI used the present study included 10 questions from the PCI that were adapted to understand how employees are discussing COVID-19 policies in their workplace. For example, participants responded to questions about how they discussed COVID-19 policies in meetings (e.g., "In meetings, people talk about our organization's COVID-19 policies (e.g., mask wearing)") and with their coworkers (e.g., "Coworkers and I talk about what is right and wrong about COVID-19 policies"). Prior research has adapted the PCI to examine context-specific policy issues (Canary et al., 2018). A principal component factor analysis was completed for the shortened PCI and the scale was found to have one factor

loading (eigenvalue = 6.7; variance of 67.22%). The PCI has demonstrated acceptable reliabilities to measure policy communication in the past (Meluch, 2020) and the adapted PCI had a high reliability in the present study (Cronbach's $\alpha = .95$).

Perceived Risk of Communication about COVID-19 Concerns in the Workplace

Perceived risk of communication about COVID-19 concerns was measured using a five item, 7-point polar opposite semantic differential scale developed by Kennedy-Lightsey, Martin, Thompson, Himes, and Clingerman (2012). The scale was developed using Petronio's (2002) discussion high-risk disclosures (Kennedy-Lightsey et al., 2012). In the present study, participants were prompted with the statement, "I would consider sharing my concerns about COVID-19 at work to be ..." Response options for participants were high/low risk, severe/not very severe, intense/not very intense, dangerous/not dangerous, and jeopardizing/not jeopardizing. The scale produced a high reliability in the present study (Cronbach's $\alpha = .95$).

Results

Pearson correlations were run to examine the initial relationships between all study variables (Table 1). The first research question asked about the relationship between COVID-19 policy communication and perceived organizational support. The first research question was answered with a Pearson correlation to examine the relationship between organizations' COVID-19 policy communication and employees' levels of perceived organizational support. COVID-19 policy communication was negatively correlated to employees' levels of perceived organizational support (r = -.148, p = .018). However, this correlation is considered small (Cohen, 1988).

Next, research question 2 asked about the associations between COVID-19 policy communication, perceived organizational support, and employees' perceived risk of disclosure of COVID-19 concerns. The second research question was answered with a hierarchical regression to examine the relationships between policy communication, perceived organizational support, and employees' perceived risk of disclosure of COVID-19 concerns. Three models with employees' perceived risk of disclosure of COVID-19 concerns being the dependent variable were constructed. In model 1, participants' gender, age, and ethnicity were entered as control variables. Model 1 explained 10.2% of the variance and was significant (F(3, 248)) = 9.374, p < .001). In model 2, policy communication about COVID-19 was added and explained 12.5% of the variance (Adjusted $R^2 = .111$) and was significant (R^2 change = .023, F[4, [247] = 8.813, p < .001). Finally, in model 3 perceived organizational support was added and explained 36% of the variance (Adjusted $R^2 = .347$) and was significant (R^2 change = .235, F[5, [246] = 27.675, p < .001). Table 2 displays the unstandardized regression coefficients (B) and the standardized regression coefficients (β) for all independent variables.

Discussion

The objective of this study was to understand how U.S. employee perceptions of organizational support and policy communication during the COVID-19 pandemic is related to employees' perceptions of the risk of discussing COVID-19 concerns in the workplace. The first research question asked about the relationship between perceived organizational support and COVID-19 policy communication and revealed a small, negative correlation. This negative correlation indicates that employees who experienced increased COVID-19 policy communication in their workplace felt lower levels of perceived organizational support. One possible explanation for this relationship is that employees who received increased COVID-19 policy communication may have been in situations that necessitated constant discussion of COVID-19 policies while they were still at risk of contracting the virus (e.g., masking in the workplace while customers are unmasked). The increased stress of working during the COVID-19 crisis (Centers for Disease Control and Prevention, 2020) and the policies instituted by some organizations in response to the crisis (e.g., remaining open during high virus transmission, layoffs) may have contributed to employees perceiving that their organizations instituting new COVID-19 practices were doing so without care or concern for employee wellbeing (Howe et al., 2020).

Next, the second research question asked how COVID-19 policy communication and employee perceptions of organiza-

Table 2. Unstandardized and standardized regression coefficients for the variables entered into Model 3

Variable	В	SE B	β	<i>p</i> -value
Gender	096	.177	030	.587
Age	.003	.009	.017	.774
Ethnicity	264	.084	177	.002
Policy communication about COVID-19	.499	.101	.279	<.001
Perceived organizational support	.879	.092	.509	<.001

Note. B, unstandardized regression coefficients; SE, standard error; β , standardized regression coefficients; COVID-19, coronavirus disease 2019.



tional support were associated with employees' perceived risk of discussing their COVID-19 concerns in the workplace. The results revealed that both policy communication and employee perceptions of organizational support significantly predicted employees' perceived risk of discussing their COVID-19 concerns in the workplace. Together policy communication and employee perceptions of organizational support explained 36% of the variance of employees' perceived risk of discussing their COVID-19 concerns in the workplace. Although policy communication about COVID-19 did not explain a substantial amount of the variance, perceived organizational support did account for a considerable amount of the variance and was also positively correlated with employee perceived risk of discussing COVID-19 concerns in the workplace.

Discussing health-related concerns in the workplace requires employees to disclose information related to their health that can make them feel vulnerable (Westerman et al., 2015). COVID-19 created immense stress for many employees who feared the threat of the virus to their physical health. A variety of factors impact individuals' decisions to disclose their private information, including whether individuals believe that they will be supported following their disclosure, the relationship between interactants, and contextual considerations (e.g., appropriateness of the disclosure; Derlega, Winstead, Mathews, & Braitman, 2008; Petronio, 2002). The present study findings reflects prior research applying CPM to workplace disclosures which indicates that risk/benefit disclosure considerations are a motivating factor for revealing or concealing personal information in the workplace (Smith & Brunner, 2017). That is, employees make decisions about whether to disclose personal information, such as their health concerns, in the workplace based on the risk they associate with the ramifications this disclosure (Meluch, 2022). While prior research has indicated that perceived organizational support is usually a predictor of positive organizational appraisals (Allen et al., 2003), having positive views toward one's organization and a low intent to leave does not mean that an employee trusts that they can be fully open with their concerns within their organization. Specifically, the present study results suggest that employees' perceptions of the risk of voicing their concerns about COVID-19 in the workplace may be impacted by how their organizations are handling COVID-19, potentially through their COVID-19 policies, and that even if their organization is supportive they may not feel that they can voice with their concerns around a contentious topic like COVID-19.

The present findings are particularly interesting because they indicate that while employees may feel that their organization is supportive of them, they may still perceive a significant risk in voicing their concerns about COVID-19, which aligns with CPM theory. That is, CPM research indicates that risk of disclosure is often contextual and may be influenced by catalyst factors, such as the COVID-19 pandemic, that impact an employee's perceptions of risk around a given topic and subsequent willingness to discuss that topic in the workplace (Meluch, 2022; Westerman et al., 2015). While prior research indicates the strong positive relationship between perceived organizational support and employee participation (Allen et al., 2003), the COVID-19 pandemic may be a topic that is perceived to be more risky to discuss when compared to everyday organizational operations especially when the employee perceives that their organization is being supportive of them in this time of crisis. Thus, a possible reason for employees who have high perceived organizational support to still perceive high levels of risk of voicing their concerns about COVID-19 is that employees who perceive high organizational support are more satisfied with their organization and, thus, may not want to voice their concerns due to the risk of discussing the COVID-19 crisis in particular. Likewise, employees who perceive low organizational support may feel that there is less of a risk of voicing their concerns in the workplace because they may have lower commitment to their organization and, thus, feel that it is less risky to discuss their concerns.

Implications for Organizational Practices

The findings of the present study have several implications for organizational practices in times of crisis. The COVID-19 crisis is a prime example of employees experiencing increased stress and burnout (Mayer, 2021) and, thus, being in need of increased organizational support (Chen & Eyoun, 2021; Gignac et al., 2021; Hoak, 2021; Howe et al., 2020). The present study's findings indicate that both policy communication and perceived organizational support significantly explain some of employees' perceptions of the risks associated with sharing their concerns about COVID-19. As such, the present findings both support prior findings related to organizational support theory (Riggle et al., 2009) and CPM (Smith & Brunner, 2017) and extend this work by indicating that employees who feel supported by their organization may not be willing to risk the negative consequences of voicing concerns over the intersections between work and personal health. Thus, these findings are useful to organizations since organizations may find that they need to be more purposeful in demonstrating an openness to listening to employee concerns in times of crisis even when their employees perceive high organizational support.

Howe et al. (2020) explain that following the COVID-19 pandemic organizations may find that they need to take steps "to help improve employees' overall morale and well-being ultimately to

help employees to feel better and more productive" (p. 4). These steps may include explaining policies designed to protect employee health and well-being to employees fully, demonstrating commitment to employees' well-being through various organizational practices (e.g., flexible work), creating a culture of openness where employees feel empowered to voice their concerns about how organizational operations may impact their personal health, and encouraging employees to participate in organizational COVID-19 policy decision-making. Organizations may find that providing employees the opportunities to voice their concerns in times of crisis may be beneficial to better understanding how to adjust practices and policies to meet employee needs and ensure continued productivity and performance. Organizations can encourage employees to raise their concerns related to a health-crisis, even if the employees see that crisis as being risky to discuss, by providing opportunities for employees to anonymously share their concerns around crisis-related policies and by providing employees with an open forums (e.g., company townhalls, oneon-one meetings with leadership) where they are encouraged to discuss even controversial opinions related to the crisis.

Study Limitations and Future Directions for Research

Although this study adds to the current literature on workplace disclosures, it has several limitations. First, the study did not include questions to measure how employees engage in policy communication in the adaption of the PCI used. Understanding how employees engage in the creation of policies has important implications for employee attitudes toward them (Canary et al., 2018). Thus, future research should examine the extent to which employees were empowered by their organizations to provide feedback on COVID-19 policies. Next, the present study included a general sample that did not allow for controlling of particular types of work (e.g., essential workers) or industries (e.g., healthcare) closely. Future studies would benefit from examining how different types of workers impacted severely by the pandemic (e.g., healthcare workers) perceived organizational support, COVID-19 policy communication, and their risk of sharing their COVID-19 concerns. Next, only three demographic variables were controlled for in the present analysis (gender, age, ethnicity). Future research may benefit from adding job-related control variables, such as tenure within organization, organization size, industry-type, and job satisfaction level.

Conclusion

COVID-19 appears to have fundamentally changed how people work (Howe et al., 2020). Understanding how employees communicated their concerns about a crisis, whether they felt supported by their organizations, and the amount of policy communication occurring in response to a crisis has important implications not only for future crises, but also for the future of work. As employees demonstrate their frustration with their organizations by choosing not to return to the office or even leaving their organization entirely (Cook, 2021), organizations may find an increased need to be aware of whether employees feel supported by organizational policies and whether employees feel that they can reveal their concerns about health-related issues and/or organizational crises in their workplace.

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