DIGITAL DETOX FOR GOVERNMENT EMPLOYEES IN IT DEPARTMENT: EFFECTS ON TECHNOSTRESS AND HELP-SEEKING BEHAVIOUR

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Master of Science in Counselling Psychology

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CERTIFICATE

This is to certify that the dissertation titled "**Digital Detox for Government Employees in IT Department: Effect on Technostress and Help-seeking Behaviour**" has been undertaken and completed by MITHRA ASHTAMOORTHY, Reg. No. 60423115014, under the supervision of Ms. Athmaja Panicker as part of the requirements for the fourth semester of the M.Sc. Counselling Psychology programme during the academic year 2023–2025 at Loyola College of Social Sciences, Sreekariyam, Thiruvananthapuram.

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DECLARATION

I, the undersigned, do hereby declare that this research work titled "**DIGITAL DETOX FOR GOVERNMENT EMPLOYEES IN IT DEPARTMENT:EFFECT ON TECHNOSTRESS AND HELP-SEEKING BEHAVIOUR**" was carried out in the Department of Counselling Psychology, Loyola College of Social Sciences, under the supervision of Ms. Athmaja Panicker, and submitted to the University of Kerala as a part of the partial fulfillment of the requirements for the Postgraduate Degree in Counselling Psychology for the academic year 2023–2025.

This is a bonafide work and has not been submitted by me for the award of any other degree, diploma, title, or recognition previously.

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Abstract

The rapid growth and frequent use of digital technology in Government IT departments has raised concerns about technostress, digital fatigue and employees' hesitance to seek psychological support. This study, titled “Digital Detox for Government Employees in IT Department: Effects on Technostress and Help-Seeking Behaviour,” looks at the effects of a structured offline program aimed at reducing technostress and promoting help-seeking among IT staff at the Kerala University of Health Sciences. The program lasted two weeks and included four face-to-face sessions, each lasting 60 minutes. These sessions covered mindfulness practices, establishing healthy limits on digital use, engaging in creative offline activities and providing education about emotional well-being and mental health support. No digital devices were used during any of the sessions. Key topics included the effects of excessive screen time, ways to set digital boundaries, incorporating mindfulness into daily life and the importance of seeking psychological help when necessary. Activities like group discussions, personal reflection and hands-on tasks were employed to foster self-awareness, emotional control and support among participants. Following recent studies that emphasize the mental health benefits of reducing digital use, this intervention aimed to lessen internal barriers to seeking help and to cultivate a healthier relationship with technology. The study also provides insights for enhancing mental health in digital work environments and can help shape future policies to support employee well-being in Government IT Department workplaces.

Keywords: technostress, digital detox, psychological help-seeking, mindfulness, emotional well-being, workplace mental health.

CHAPTER I

INTRODUCTION

Digital Detox for Government Employees in IT Department: Effects on Technostress and Help-Seeking Behaviour

With the pace of technology advancement these days, digital technologies and platforms have become a part of our lives. In the modern digital age, the usage of digital technologies has revolutionized the way employees work, communicate and manage information. Particularly in Government IT departments, workers must cope with extensive digital loads, remain connected continuously and work under the pressure of stringent institutional and technical demands. This international virtual interconnection has led to a condition named technostress, which was initially described by Brod (1984) as the psychological distress due to a failure to manage new computer technology in a positive way. Technostress is marked by one's inability to cope with the pressures of new technology positively. Symptoms of technostress were perceived as cognitive fatigue, emotional burnout, irritability, sleep deprivation and decreased work motivation. Technostress in numerous ways manifests itself as cognitive overload, emotional exhaustion, irritability, decreased job satisfaction and sleep disruptions (Tarafdar et.al., 2015). Research has consistently associated technostress with negative psychological consequences like burnout, depression and stress (Ragu-Nathan et al., 2008; Salanova et al., 2013). When it comes to academic personnel in institutions such as the Kerala University of Health Sciences (KUHS), IT employees are more vulnerable due to institutional monitoring, little autonomy and inadequate access to psychological support networks (Chiappetta, 2017).

Occupational health psychology research increasingly aligns technostress with incapacitating mental diseases such as burnout, depression and anxiety (Ragu-Nathan et al., 2008; Salanova et al., 2013). The persistence of digital demands has the potential to impact negatively on one's capacity to handle and can lead to emotional burnout and low self-confidence and low self-esteem.

In organizations such as the Kerala University of Health Sciences (KUHS), IT specialists are exposed to massive amounts of digital information under infrastructures with high levels of surveillance, authoritative administrative systems and absence of psychological support systems enhance the technostress risk (Chiappetta, 2017). In addition, they are also subjected to institutional pressures to stay digitally networked even outside working hours, influencing work-life boundaries (Ayyagari et al., 2011). These organizational stressors, if left unchecked, negatively impact labour performance, mental well-being and the overall institutional environment.

Psychological help-seeking is a person's orientation and behaviour towards consulting professional mental health services when necessary (Rickwood et al., 2005). Despite rising awareness of mental health, psychological help-seeking among employees working in high-stress digital workplaces remains very low. Help-seeking is, however, impaired by stigma, poor mental health literacy, shortage of time and confidentiality concerns (Clement et al., 2015; Rickwood et al., 2005). Culture also has important roles in shaping help-seeking attitude. Collectivist cultural values in countries like India also discourage self-disclosure of affect and encourage individual coping over help-seeking (Lauber et al., 2003). Mental illness is stigmatized in collectivist nations such as India. Help-seeking also relies on the person's mental health literacy, perceived care need and organizational receptivity to psychological care (Gulliver et al., 2010). People perceive psychological problems as personal issues one has to hide (Lauber et al., 2003). Stigma, low mental health literacy, concerns about confidentiality and time are some of the barriers to seeking psychological services by many (Clement et al., 2015).

Besides, organizational cultures whose toughness and strength values are better positioned above vulnerability also discourage help-seeking behaviour (Clement et al., 2015). Where high-demand occupations are deeply embedded with conservatism and electronic surveillance,

IT employees will not be willing to report emotional problems or seek counselling services even when such problems are a direct result of occupational causes like technostress (Salanova et al., 2013). Left uncorrected, these psychological avoidances remain to generate distress and affect the ability of the workforce to thrive. As a counterbalance to the psychosocial damage that has been traced to excessive use of digital technology, the trend of digital detox has attracted scholarly and clinical interest.

Against such demands, digital detox is a deliberate, goal-oriented avoidance of digital technology which has emerged as an intervention. Digital detox is a purposeful and deliberate block of time when people limit or give up digital devices in an attempt to alleviate stress, refocus and enhance health (Syvertsen et al., 2020). These interventions can be technology-free rooms, scheduled offline hours, mindful tasks and scheduled behaviour routines to assist with regaining control of technology usage (Duke & Montag, 2017). Radtke et al. (2022) conducted a systematic review that identified digital detox interventions as enhancing concentration, improving the quality of sleep and emotional regulation, thus being well-suited for digitally overexposed workers. Digital detox interventions can also lead to heightened self-awareness, which can affect positive help-seeking attitudes (Chen et al., 2016). These interventions are most often comprised of regular periods of screen breaking, mindfulness activity and psychoeducation in promoting good digital behaviour.

In addition, avoiding intensive use of digital technologies has also been related to enhanced self-inspection and cognitive awareness that can enhance individuals' resolve to receive psychological care (Chen et al.,2016). Behavioural psychology would premise that less external technology stimulation would lead to internalized monitoring of indicators of distress and hence enhance psychological awareness and help-seeking positions (Mirbabaie et al.,2020).

But the application of digital detox interventions in public institutional institutions, especially in the Indian government sector, has been understudied. Government IT Department workers in the KUHS academic health care system are an occupational group that is exposed to both extreme digital workload and insufficient psychological support structures. Their work typically entails managing healthcare information, maintaining network security and offering technical support within continually fluctuating information-dense settings. Such stressors, if left unchecked, can lead to psychological distress, organizational withdrawal, as well as professional burnout.

The combination of rapid technological advancements and strict institutional requirements has created a high-risk situation for technostress among Government IT Department employees. When paired with the cultural and organizational barriers preventing them from seeking psychological help, this forms a significant public mental health challenge. Digital detox offers a promising and contextually relevant approach to reduce these effects.

Need and Significance of the Study

The ongoing digital change in workplaces, especially in government and educational institutions, has led to technostress becoming a serious risk for mental health. IT employees, who are key to maintaining these digital systems, face intense pressure from constant connectivity, high demands for processing information and organizational expectations for digital efficiency. While digital tools can make operations smoother, their excessive use and the pressure to perform in strictly controlled environments without enough psychological support have raised concerns about mental well-being. In response, the idea of a digital detox has gained academic interest as a potential way to reduce technostress and improve attitudes toward seeking help. However, such interventions have not yet been thoroughly tested in the Indian public sector, where social stigma and rigid bureaucracy create unique psychological

challenges. This study aims to fill this important research gap by evaluating the effectiveness of a structured digital detox intervention for Government IT Department employees at the Kerala University of Health Sciences (KUHS).

1. Technostress as a Public Health Concern

Technostress, a term first used by Brod in 1984, has become a measurable job hazard linked to emotional exhaustion, cognitive overload, decreased job satisfaction and physical complaints (Ayyagari et al., 2011). In today's digital environment, technostress is recognized as a public health problem, especially among knowledge workers and IT employees. These workers often face relentless digital demands that exceed their ability to cope. Long-term exposure to such conditions has been associated with lower job engagement, higher turnover rates, burnout, anxiety and depression (Tarafdar et al., 2015). Despite its harmful effects, technostress often goes unnoticed and unaddressed in formal mental health systems, particularly in developing countries.

2. Low Orientation Toward Psychological Help-Seeking

A major issue that worsens the effects of technostress is the reluctance of IT employees to seek psychological support. Research identifies several barriers to help-seeking, such as mental health stigma, limited understanding of psychological services, cultural expectations of self-reliance, concerns about confidentiality and resistance from organizations to emotional expression (Rickwood et al., 2005; Clement et al., 2015). Even where mental health services are available, actual use is minimal. In conservative public institutions like KUHS, the workplace culture discourages expressing vulnerability, leading to silent endurance instead of proactive engagement with mental health.

This gap between the high need for psychological support and low usage of services increases mental health risks for employees, resulting in long-term emotional detachment and diminished workplace performance. To address this, we need interventions that not only help reduce stress but also normalize and promote seeking psychological help.

3. Potential of Digital Detox Interventions

Digital detox, which is a planned break from digital devices and platforms, could be an effective way to reduce cognitive and emotional overload (Syvertsen & Enli, 2020). Research done in Western countries has shown that digital detox can improve emotional control, boost attention spans, lower anxiety and build psychological resilience (Wilcockson et al., 2019). Digital detox encourages self-reflection and emotional awareness, which are crucial steps toward seeking psychological help (Chen et al., 2016). While these findings are promising, most evidence comes from studies that lack context, often involving students or corporate employees in Western settings. Few have looked at the use of digital detox programs in government sectors of the Global South, where institutional hierarchies, strict work norms and social conservatism are prevalent. The lack of culturally relevant digital detox models limits their usefulness and ability to scale in these settings.

4. Contextual Need: Government IT Department Employees in Indian Public Institutions

IT employees at government institutions like KUHS deal with many stress-inducing factors, including heavy digital workload, constant availability, strict administrative systems and a lack of psychological safety. The absence of open discussions around mental health in these bureaucratic environments makes things worse. While instances of distress are common, psychological support is underutilized due to deeply rooted cultural beliefs in emotional resilience and professional perfection (Lauber et al., 2003; Clement et al., 2015).

Given these specific job-related and cultural pressures, this group urgently needs targeted and structured psychological support. This study focuses on this often-overlooked group, aiming to adapt digital detox strategies to fit their professional environment and psychological needs.

This study is important for two main reasons: first, it aims to test the effectiveness of digital detox in reducing technostress among Government IT Department employees and second, it evaluates whether this intervention can help promote more openness toward seeking psychological help. By conducting this research within the unique context of a government-run public health university, we gain valuable insights into the mental health challenges faced by IT workers in the Indian public sector. This study is timely and relevant, with the potential to influence policy-making, workplace mental health strategies and digital hygiene practices in government institutions.

Objectives of the Study

1. To measure the baseline level of technostress among Government IT Department employees at KUHS.

2. To measure the level of existing attitudes towards psychological help-seeking in this group.

3. To provide a structured, four-session digital detox intervention.

4. To compare the post-intervention level of technostress.

5. To measure the change in attitudes towards psychological help-seeking post-intervention

Research Questions

RQ1: Does a structured digital detox reduce technostress?

RQ2: Does the intervention enhance psychological help-seeking?

Hypotheses

Null Hypothesis (H_o1): There will be no difference in technostress after intervention on Digital Detox

$H_o1(a)$: There will be no difference in Availability Stress after intervention on digital detox

$H_o1(b)$: There will be no difference in Approval Anxiety after intervention on digital detox

$H_o1(c)$: There will be no difference in Fear Of Missing Out after intervention on digital detox

$H_o1(d)$: There will be no difference in Connection Overload after intervention on digital detox

$H_o1(e)$: There will be no difference in Online Vigilance after intervention

Null Hypothesis (H_o2): There will be no difference in attitude towards help-seeking behaviour after intervention on Digital Detox.

CHAPTER II

REVIEW OF LITERATURE

REVIEW OF LITERATURE

In today's highly connected professional environments, digital technology has shifted from being a productivity tool to a constant demand that changes work styles, communication habits and even personal identity. The term technostress, introduced by Brod in 1984, refers to the stress caused by trying to manage modern technologies. Over time, this concept has become a complex psychological condition that includes cognitive overload, emotional exhaustion and behavioural withdrawal. Tarafdar and others identified five main stressors: techno-overload, techno-invasion, techno-complexity, techno-insecurity and techno-uncertainty. These stressors describe the different ways technology can create psychological stress.

Theoretical Review

1. The Transactional Model of Stress and Coping

To understand the psychological effects of technostress, Lazarus and Folkman's Transactional Model of Stress and Coping is important. This model suggests that stress is not a direct response to a stimulus. Instead, it results from the interaction between a person and their environment through the processes of primary and secondary appraisal. Technostress triggers these appraisals when a person sees technology-related demands as threatening and beyond their ability to cope. In terms of digital overload, primary appraisals involve seeing tasks as uncontrollable, while secondary appraisals relate to assessing one's digital skills and time management abilities. Those who lack confidence in handling digital tasks are more likely to resort to emotion-focused coping, such as avoidance and denial, which can worsen stress levels.

2. Mindfulness, Self-Regulation and Digital Detox

Mindfulness Theory, which focuses on being aware of the present moment with acceptance and avoiding reactive behaviours. Digital detox, from a mindfulness perspective, is more than just a break from screens; it involves a deliberate shift in attention and a recalibration of one's internal state. By breaking habitual digital behaviours, a digital detox allows for a reconnection with oneself and the surrounding environment. Mindfulness can improve executive function, reduce automatic responses and enhance self-regulation, all of which are vital for managing stress caused by technology. Studies indicate that people who practice mindfulness experience lower levels of technostress, suggesting that mindfulness could play a role in the effects of digital detox.

3.Help-Seeking Behaviour: Theoretical Models and Cultural Constraints

The hesitation to pursue psychological help in high-stress work settings, especially among government employees, can be explained using the Health Belief Model and the Theory of Planned Behaviour. The Health Belief Model suggests that help-seeking is affected by how serious a person perceives the issue to be, their vulnerability to it and the benefits and barriers to seeking help. In government settings, barriers include stigma, lack of confidentiality and fear of judgment. The Theory of Planned Behaviour highlights how social norms and perceived control affect behaviour; employees are less likely to seek help when psychological services are hard to access or socially frowned upon. The stigma surrounding mental health in formal institutions leads to underutilization of support services, even when stress is objectively high. Thus, programs aimed at encouraging help-seeking must tackle both personal motivation and broader cultural barriers.

Empirical review

Ansari et al. (2024) conducted a systematic review and meta-analysis that combined data of 26 studies with 8,147 participants between the ages of 18 and 35 years. Intervention ranged from one day to four weeks. It was intended to decrease or completely cut down on digital and social media consumption. The researchers used measures such as the Positive and Negative Affect Schedule (PANAS), Satisfaction with Life Scale (SWLS), Ryff's Psychological Well-Being Scales and the WHO-5 Well-Being Index. They noted considerable reductions in subjective well-being (standardized mean difference [SMD] = 0.21) and psychological well-being (SMD = 0.27). The improvements were largest in interventions lasting one to four weeks (Ansari et al., 2024). They also explored the advantages of detox and proposed that decreased consumption of digital stimuli decreases cognitive load and organized offline activity evokes emotional regulation. The research pointed out that incorporating self-reflection practice such as journaling or mindfulness activities, which were prevalent in the most effective interventions, needs to be done. The authors suggested that digital detox measures need to be integrated in learning and working environments in a bid to increase mental wellness and decrease digital fatigue (Ansari et al., 2024).

Coyne and Woodruff (2023) implemented an experimental intervention involving 66 young adult students aged between 18 and 25 years. The participants were given a two-week digital detox where the condition was total abstinence from social media platforms such as Instagram, Facebook and Twitter. The intervention also consisted of reflective journaling and daily check-ins by email to check for compliance. Psychological well-being and behavioural addiction were evaluated by the Smartphone Addiction Scale–Short Version (SAS-SV), the Social Media Disorder Scale (SMD), the Generalized Anxiety Disorder-7 (GAD-7) and the Pittsburgh Sleep Quality Index (PSQI). Statistically significant decrease in smartphone and social media

utilization after the intervention was found by the findings. Sleep quality and symptomatology of anxiety also improved among the subjects. These results indicate that even brief digital abstinence facilitated by contemplative activity can produce beneficial psychological outcomes (Coyne & Woodruff, 2023). Participants also provided qualitative ratings of the experience and reported greater mindfulness, emotional intelligence and productivity.

Iqbal, Iftikhar and Hussain (2023) carried out a study to examine the effect of social media use on mental health among university students. The main aim was to evaluate the association between social media use behaviour and measures of mental health such as anxiety, depression and stress. The research used university students as participants. Data were collected through a guided questionnaire containing items that measured frequency and intensity of use of social media and the typical mental health assessment instruments (Iqbal et al., 2023).The results indicated that there was high correlation between excessive social media use and enhanced psychological distress among students. Students who spent longer durations on social media exhibited greater anxiety, depression and stress. Excessive social media use can have unfavourable effects on the psychological health of young adults (Iqbal et al., 2023) and emphasized the need to enhance awareness and support healthier online behaviour. There was a significant co-relation of excessive usage with increasing anxiety, depression and stress levels. It was a plea for conducting awareness programs to ensure healthier online behaviour.(Iqbal et al., 2023).

Sung and Lee (2022) found the efficacy of a digital detox intervention in enhancing the psychological well-being of nursing students. The purpose of the study was to explore whether structured digital breaks could have a positive impact on the psychological well-being of students. The intervention involved the participation of students in a digital detox program where they were motivated to discontinue or limit screen time for some duration and practice mindfulness exercises and offline activities (Sung & Lee, 2022). The researchers employed

standardized psychological assessments of levels of stress, attention and overall mental health before and after the intervention. Outcomes showed that there was improvement in the concentration of students and lower levels of stress and digital exhaustion after the detox period. The authors concluded that digital detox programs can be an effective and useful intervention to enhance psychological resilience and academic mental health, especially among students who are over-exposed to digital technology (Sung & Lee, 2022). Outcomes indicated improved concentration, lower stress and digital burnout, which corroborates the role of detox in improving psychological resilience and academic health.

Hunt et al. (2018) conducted a study on the extent to which lowering social media usage can lower depression and loneliness. In their test, they conducted a randomized trial of college students, who were asked to limit their use of social media applications (Facebook, Instagram and Snapchat) to 10 minutes per application for three weeks. The results indicated that the participants in the reduced-use group showed higher improvements in depression as well as loneliness than those who belonged to the control group. (Hunt et al., 2018).

Twenge, Joiner, Rogers and Martin (2018) used a wide range of analysis in order to evaluate the growth in symptoms of depression, suicidal outcomes and suicides among American teens since 2010 and with special focus on the contribution made by rising screen time and exposure to digital media. The research sought to establish whether or not growth in the use of smartphone and other online media platforms led to a decline in adolescent mental health i during the early 2010s. With national datasets, such as the Monitoring the Future and Youth Risk Behaviour Surveillance System (YRBSS), scientists estimated trends among multiple mental health outcomes. The report revealed an increase in teenage girls' psychological distress, depression and suicidal behaviour that started around 2012. They observed acceleration in the use of smartphones and social media. Teenagers with more hours spent on newer media (e.g., social media, texting and use) were likely to report more mental health

problems than teenagers who spent more time on activities other than screen time such as exercise or face-to-face socializing. The research concluded that increased levels of screen time are linked to deteriorating mental health conditions among teenagers, with the significance of managing media access during adolescence, a stage of major development. Research identified a greater amount of screen time, namely in the form of social media and smartphones, as being linked to greater teen mental health issues, particularly in girls. Screen time was inversely related to exercise and face-to-face interaction, which all made contributions to distress. (Twenge et al., 2018).

Levenson, Shensa, Sidani, Colditz and Primack (2017) surveyed the crossroads of social media use and sleep disturbance among young adults. Survey data from a national survey of 19- to 32-year-olds was utilized, the authors used the Pittsburgh Sleep Quality Index and frequency and volume of social media usage were assessed. The outcome revealed that there was a positive relationship between excessive social media usage and poorer sleep quality, such as having trouble falling asleep and disturbed sleep. Prolonged use had been linked with poorer sleep quality, i.e., difficulty in sleep onset and sleep maintenance. Social media was determined to be cognitive and behavioural stimulants that interfere with sleep. They established that social media may both be a cognitive and behavioural stimulant to sleep disruption and hence the need for healthier digital habits, especially before sleeping (Levenson et al., 2017).

Mark, Iqbal, Czerwinski, Johns and Sano (2014) compared the effect of email use on productivity and stress. Knowledge workers were monitored over multiple workdays and email batching, session length and self-interruption frequency were surveyed. By both qualitative and biometric metrics (e.g., heart rate measurement), the researchers reasoned that frequent checking of email raised stress and divided attention but batching email in clusters of time was more productive and reduced stress. The results indicate that effective management of digital communication is of prime significance for occupational health. They studied the effect of

email usage on knowledge worker productivity and stress. With biometric measures (e.g., heart rate), they demonstrated that frequent checking of mail increased stress and divided attention. Batching of mail, however, enhanced productivity and lowered stress and there is indicated a need for management of digital communication. (Mark et al., 2014).

Brown and Ryan (2003) investigated the psychological advantages of mindfulness and its working on general wellbeing. The research sought to explore the way in which being present and receptive to observing the here-and-now referred to as "mindfulness" contributed to psychological health. Through application of self-report scales of mindfulness and wellbeing in multiple adult samples, the authors established the association of higher mindfulness with higher emotional regulation, satisfaction with life and lower stress and anxiety. They found that there was a strong association between mindfulness and greater emotional regulation, satisfaction with life and reduced stress/anxiety. The research supports mindfulness as a component of integrative intervention for well-being within digital detox contexts. The research offered robust empirical evidence in favour of mindfulness as a buffer mechanism in the preservation of mental well-being and highlighted its value for both clinical and non-clinical populations (Brown & Ryan, 2003).

Research Gap

While literature on digital overuse and its psychological effects is increasing, important gaps remain in understanding how technostress, digital detox and help-seeking behaviour specifically impact Government IT Department employees. Most current studies focus on corporate, academic, or general populations, leaving out crucial groups within the public sector. These employees face unique stressors and institutional challenges. This section highlights key gaps in theory, population coverage, contextual relevance, outcome diversity and intervention design, establishing the need for this study.

1. Underrepresentation of Government IT Department Employees in Digital Detox Research

Lack of focus on Government IT Department employees concerning technostress and digital detox. Studies mainly concentrate on university students (e.g., Coyne & Woodruff, 2023; Sung & Lee, 2022) or private sector employees (Peterson et al., 2022; Ansari et al., 2024). These work environments tend to be more flexible, allowing employees to manage their digital demands. In contrast, Government IT Departments, particularly in countries like India, function under strict hierarchies, standardized protocols, constant digital surveillance and limited autonomy. This situation often increases the risk of digital burnout. The lack of studies examining technostress in this specific occupational context creates a significant empirical gap. Researching this population is essential due to their unique stressors, which include rigid digital routines, bureaucratic workloads, inadequate mental health resources and anxiety about job security.

2. Neglect of Technostress in Public Sector Contexts

Technostress is often assessed using broad measures like digital fatigue, screen time, or work overload. However, foundational researchers like Tarafdar et al. (2007) stated that technostress has multiple dimensions, including techno-overload, techno-invasion, techno-complexity, techno-insecurity and techno-uncertainty. Many studies overlook these aspects, especially in occupational research. Public sector employees often face increased techno-insecurity due to concerns over job loss from automation or software-driven redundancy. Additionally, techno-invasion, where work-related digital communications invade personal time. So far, research has not systematically explored these dimensions within Indian public sector IT settings.

3. Inadequate use of Digital Detox as a Structured Psychological Intervention

The term "digital detox" is frequently used in an ambiguous way, sometimes describing short breaks from devices or social media. While these approaches may provide short-term relief, they lack a structured therapeutic foundation. Few studies integrate psychologically informed practices like mindfulness, reflective journaling, emotional tracking, or cognitive reframing into detox plans. Existing literature fails to determine if digital detox can act not only as a behavioural break but also as a psychological intervention that fosters long-term coping skills and self-regulatory abilities. Moreover, most detox strategies last only one to two weeks, without follow-up support or mechanisms to sustain behaviour changes, leaving their long-term effectiveness unverified.

4. Overemphasis on Symptom Relief Rather Than Functional Outcomes

Most digital detox research narrowly focuses on immediate outcomes such as reduced stress, anxiety, or screen time. While these outcomes are important, they provide limited insight into the functional and behavioural effects of stepping away from digital devices. A major area that remains unexplored is how detox impacts help-seeking behaviour, especially among populations that face stigma, mistrust, or limited access to mental health services. Employees in government positions may hesitate to seek psychological assistance due to views on vulnerability, confidentiality issues, or lack of understanding. There is very little research on whether digital detox could indirectly enhance mental health literacy, lessen resistance to seeking help, or normalize psychological counselling in workplace environments.

5. Cultural and Contextual Limitations of Existing Studies

Many studies on technostress and digital detox have been conducted within Western contexts, mainly in the USA, Europe and parts of East Asia. These regions typically show higher levels of digital literacy, better access to psychological support and more accepting attitudes toward mental health. In contrast, Indian government institutions function within a hierarchical and collectivist culture where mental health discussions are often avoided. In this context, digital overuse is sometimes viewed as dedication rather than a problem. The lack of cultural applicability in standardized interventions creates significant limitations. Without customizing approaches to fit local conditions, imported digital detox programs may ignore sociocultural factors, work dynamics and belief systems present in Indian public institutions.

CHAPTER III

METHOD

METHOD

This chapter provides an in-depth description of the methodology used to evaluate the impact of a guided digital detox intervention on mitigating technostress and psychological help-seeking behaviour among government employees of IT department at Kerala University of Health Sciences. As digital overload becomes more common in high-stress public sector IT settings, this research employs a real-world, applied method for investigating both the psychology and behaviour-centered consequences of the intervention. The chapter discusses at length the research design, nature of participants, tools used, intervention structure in detail, process of data collection and data analysis procedures. “Digital Detox for Government Employees in IT Department: Effects on Technostress and Help-Seeking Behaviour”-This title reflects the dual focus of the research:

(1) assessing the psychological impact of digital overuse (technostress) and

(2) promoting attitudinal change toward professional psychological support within a governmental occupational context.

Research Design

A convergent parallel mixed-method design (Creswell et al., 2017) was used. Quantitative and qualitative data were collected simultaneously, analysed separately and interpreted together to provide a comprehensive understanding of the intervention’s effects. Within this framework, a single-group pre-test–post-test design was employed, which is appropriate for exploratory pilot interventions in workplace environments where experimental randomization is not feasible.

The research used a mixed-method design that combines quantitative and qualitative approaches to provide a balanced picture of the effectiveness of the intervention. The

quantitative aspect measured measurable change in technostress and help-seeking intentions using psychometrically validated tools prior to and after the intervention. The qualitative aspect was collecting participants' feedback through open-ended questions, later quantified for analysis.

Participants

The research applied a sample of 15 Government IT Department workers employed in the Kerala University of Health Sciences (KUHS). Participants were recruited using purposive sampling for relevance to the digitally stressed employees target sample.

Sample size: 15 participants

Population: Government employees of IT department employed at Kerala University of Health Sciences (KUHS)

Age range: 30 to 49 years

Gender distribution: 11 females, 4 males

Inclusion Criteria:

- Government employees of IT department in the Kerala University of Health Sciences during the research.
- Exposure to digital technology in work activities on a daily basis.
- Voluntary attendance for all four offline sessions.
- Willingness to abstain from digital devices during intervention sessions.
- Consent to participate for sessions.

Exclusion Criteria:

- Those under current treatment of psychiatric or psychological issues during the intervention phase.
- Inability to attend more than one session.
- Underlying medical conditions hindering participation in experiential group activity.

Tools Used

1.Digital Stress Scale

The Digital Stress Scale is a 20-item self-report questionnaire developed by Dr. Paul Badcock of the Melbourne School of Psychological Sciences (2023). Designed for use in both clinical and organizational contexts, the scale assesses the psychological burden resulting from frequent digital device use, such as smartphones, emails and social media. It is part of the NovoPsych formulation-based digital mental health assessment system and is especially relevant in studies involving workplace stress and behavioural wellness.

The scale measures five distinct subdomains of digital stress: Availability Stress, Approval Anxiety, Fear of Missing Out (FoMO), Connection Overload and Online Vigilance. 1.Availability Stress: It refers to the psychological strain of being constantly reachable and expected to respond to digital communication.

2.Approval Anxiety: It reflects the pressure individuals feel to receive validation or recognition through digital platforms, particularly from colleagues or superiors.

3.Fear of Missing Out: FoMO involves the persistent need to stay updated and connected online.

4.Connection Overload: It denotes the stress from receiving an overwhelming volume of digital information, such as emails, texts, or alerts.

5. Online Vigilance: It captures the compulsive urge to monitor digital devices and platforms to remain informed and engaged.

In terms of psychometric properties, the scale demonstrates excellent internal consistency, with a Cronbach's alpha of .92, indicating high reliability across diverse populations. The scale has also shown strong construct validity, with higher digital stress scores significantly correlated with symptoms of anxiety, depression and low life satisfaction. Its utility extends to both diagnostic assessment and intervention planning, making it an appropriate tool for formulation-based research and clinical practice.

Each item on the Digital Stress Scale is rated on a 5-point Likert scale, ranging from 1 (Not at all) to 5 (Extremely). The total score can range from 20 to 100, with higher scores indicating more severe digital stress. Subscale scores may also be computed to examine domain-specific areas of concern. Although the scale does not include fixed clinical cut-offs, elevated scores can guide interventions such as digital detox programs, mindfulness training, or work-life boundary reinforcement.

2. Attitudes Toward Seeking Professional Psychological Help Scale – Short Form

Attitudes Toward Seeking Professional Psychological Help Scale – Short Form (ATSPPH-SF) is a 10-item self-report instrument developed by Fischer and Farina (1995) as a concise alternative to the original 29-item version by Fischer and Turner (1970). The scale is designed to assess individuals' general attitudes toward engaging with professional psychological services and has been widely used in both clinical and non-clinical populations, including university students, working employees and community groups.

Psychometrically, the ATSPPH-SF demonstrates robust internal consistency, with Cronbach's alpha values typically ranging from .78 to .84 across various samples (Elhai et al., 2008). Its construct validity has been supported through correlations with related measures such as mental health stigma, past counselling experience and treatment intentions. Additionally, its sensitivity to change makes it well-suited for pre-post intervention research, as in the present study evaluating a digital detox program. The scale is in the public domain and is frequently used in psychological research focused on increasing awareness, reducing stigma and improving help-seeking behaviour among individuals experiencing psychological distress.

Each item is scored on a 4-point Likert scale ranging from 0 (Disagree) to 3 (Agree), with five items (Items 2, 4, 8, 9 and 10) reverse-scored to minimize response bias. The total score ranges from 0 to 30, with higher scores reflecting more positive attitudes toward seeking psychological help. The scale assesses cognitive, emotional and social factors associated with help-seeking behaviour, including openness to therapy, trust in professional services and resistance due to stigma or self-reliance.

3.Qualitative Analysis

For the qualitative strand, participants gave five open-ended feedback questions that were deployed at the completion of the intervention. Responses were quantitatively synthesized by tabulating how many of the participants reported outcomes like decreased screen time, improved concentration, or increased receptivity to psychological support. This quantitative aggregation of narrative response supplemented statistical results and provided informative participant activity, satisfaction and perceived behaviour change feedback (Sandelowski, 2001).

By gathering the two types of data simultaneously and separately analysing them before combining findings at the level of interpretation, the convergent design maximized the study's explanatory potential. The methodology not only facilitated statistical testing of intervention effectiveness but also engaged participants' perspectives in bringing practical and contextual meaning to findings.

Procedure

Prior to the commencement of the study, formal administrative and ethical permissions were obtained from the Kerala University of Health Sciences (KUHS). This included securing a Government Order (GO) that authorized the implementation of the intervention among government-employed IT employees.

Following approval, potential participants were approached through internal communication channels within KUHS's IT division. Individuals who met the inclusion criteria were provided with a detailed participant information sheet, outlining the purpose, objectives, benefits and voluntary nature of the study. Participants were assured of confidentiality, anonymity and the right to withdraw at any point without consequence. Written informed consent was obtained from all participants prior to start of the study.

The research procedure followed a one-group pre-test–post-test design. At baseline, participants completed two standardized instruments: the Digital Stress Scale (Badcock, 2023), which assessed their level of digital-related psychological stress and the Attitudes Toward Seeking Professional Psychological Help Scale – Short Form (ATSPPH-SF) (Fischer & Farina, 1995), which measured their openness to seeking mental health services. This pre-test provided a quantitative foundation for assessing changes due to the intervention.

The core of the study was a two-week digital detox intervention consisting of four structured offline sessions, each conducted in-person during work hours. The sessions were designed using psychoeducational and experiential learning models and focused on reducing dependency on digital devices, promoting mindfulness and self-awareness and fostering mental health help-seeking attitudes. Activities included reflective journaling, screen-free group exercises, guided relaxation and role-playing scenarios on healthy digital boundaries. The program was intentionally crafted to be feasible, relevant to a professional IT context and sensitive to the time constraints of government employees.

The modules were prepared by giving focus on Technostress and psychological help seeking behaviour awareness.

SESSION	ACTIVITY/AREAS COVERED	PURPOSE	EXPECTED OUTCOME
SESSION I	Introduction, Technostress Psychoeducation, Self-Checklist, Group Reflection	Build awareness, establish rapport, recognize digital stress	Participants identify personal stress patterns and normalize tech-related mental strain
	Session Feedback	Adjust content and gauge reactions	Continuous quality enhancement
SESSION II	Box Breathing, Digital Boundaries Psychoeducation, Bingo Activity, Letter to a Friend	Teach relaxation, reinforce behavioural limits, motivate intrinsic change	Habit restructuring, increased control over digital usE
	Session Feedback	Evaluate applicability	Real-time content tailoring

SESSION III	4-7-8 Breathing, Step Forward/Backward Activity, Help-Seeking Psychoeducation, Myths vs Facts Puzzle	Enhance insight, reduce stigma, promote psychological openness	Improved attitude toward therapy and help-seeking
	Session Feedback + "What More I Want to Know"	Evaluate readiness for deeper learning	Identify gaps for further training
SESSION IV	Guided Imagery, Anxiety Management, Parenting & Life skills, Trust Walk	Develop emotional regulation, improve interpersonal dynamics, foster group trust	Enhanced mental flexibility, trust and psychoeducation-based resilience
	Final Evaluation	Measure intervention effectiveness	Document participant progress

Following the final session, participants were again asked to complete the Digital Stress Scale and ATSPPH-SF as post-test measures. This allowed for within-subject comparisons to assess the effectiveness of the intervention. Additionally, participants were invited to provide responses to five open-ended feedback questions. These qualitative responses were quantified descriptively to assess perceived behavioural changes, emotional responses and overall satisfaction with the program. The entire procedure was completed within a structured, ethically monitored and participant-centered framework.

Data analysis

Quantitative data analysis

Data were analysed using both descriptive and non-parametric inferential statistical techniques with the aid of Microsoft Excel and IBM SPSS Statistics Version 25. Descriptive statistics such as mean, standard deviation, frequency and percentage were computed to summarize participants' demographic characteristics and item responses on the Digital Stress Scale and the Attitudes Toward Seeking Professional Psychological Help Scale – Short Form (ATSPPH-SF). Since the data were not normally distributed and the sample size was small, the Wilcoxon Signed-Rank Test, a non-parametric equivalent of the paired t-test, was employed to compare pre-test and post-test scores. This test was used to determine whether there were statistically significant differences in participants' digital stress levels and help-seeking attitudes following the digital detox intervention. The level of significance was set at $p < .05$.

Qualitative data analysis

Open-ended feedback provided by participants at the end of each of the four sessions and during the overall evaluation was analysed qualitatively. All responses were read thoroughly and key ideas were identified and grouped based on common patterns in participants' experiences. Relevant statements were extracted and organized into broad themes that reflected the impact of the intervention on their digital habits and emotional well-being. Participant quotes were retained to illustrate each theme. The final set of themes was summarized and used to interpret the effectiveness of the intervention alongside the quantitative findings. Themes were then tabulated and integrated into the results section to highlight participants' voices and behavioural changes.

CHAPTER 4

RESULT & DISCUSSION

RESULT & DISCUSSION

Table 1

Total Digital Stress – Wilcoxon Test and Descriptive Statistics

Variable	Pre-Test		Post-Test		Wilcoxon p-value	Decision
	Mean	SD	Mean	SD		
Total Digital Stress	49.00	12.76	36.73	11.39	0.001	Reject null hypothesis

Note. The p-value is < .05. The null hypothesis H_o1 is rejected.

There is a significant difference between pre and post total digital stress scores.

Table 2

Availability Stress – Wilcoxon Test and Descriptive Statistics

Variable	Pre-Test		Post-Test		Wilcoxon p-value	Decision
	Mean	SD	Mean	SD		
Availability Stress	7.60	3.56	5.00	1.73	0.014	Reject null hypothesis

Note. The p-value is < .05. The null hypothesis $H_o1(a)$ is rejected.

There is a significant difference between pre and post availability stress scores.

Table 3

Approval Anxiety – Wilcoxon Test and Descriptive Statistics

Variable	Pre-Test		Post-Test		Wilcoxon p-value	Decision
	Mean	SD	Mean	SD		
Approval Anxiety	12.27	4.76	9.00	2.93	0.024	Reject null hypothesis

Note. The p-value is < .05. The null hypothesis $H_0 1(b)$ is rejected.

There is a significant difference in approval anxiety levels before and after intervention.

Table 4

Fear of Missing Out (FoMO) – Wilcoxon Test and Descriptive Statistics

Variable	Pre-Test		Post-Test		Wilcoxon p-value	Decision
	Mean	SD	Mean	SD		
FoMO Score	6.40	2.85	5.20	1.70	0.248	Retain null hypothesis

Note. The p-value is > .05. The null hypothesis $H_0 1(c)$ is retained.

There is no significant difference in FoMO scores before and after intervention

Table 5

Connection Overload – Wilcoxon Test and Descriptive Statistics

Variable	Pre-Test		Post-Mean		Wilcoxon p-value	Decision
	Mean	SD	Mean	SD		
Connection Overload	12.93	3.85	9.60	3.91	0.080	Retain null hypothesis

Note. The p-value is > .05. The null hypothesis $H_o1(d)$ is retained.

There is no significant difference in connection overload scores before and after intervention.

Table 6

Online Vigilance – Wilcoxon Test and Descriptive Statistics

Variable	Pre-Test		Post-Mean		Wilcoxon p-value	Decision
	Mean	SD	Mean	SD		
Online Vigilance	9.73	3.71	7.93	3.20	0.441	Retain null hypothesis

Note. The p-value is > .05. The null hypothesis $H_o1(e)$is retained.

There is no significant difference in online vigilance scores before and after intervention.

Table 7

Attitudes Toward Help-Seeking – Wilcoxon Test and Descriptive Statistics

Variable	Pre-Test		Post-Test		Wilcoxon p-value	Decision
	Mean	SD	Mean	SD		
Help-Seeking Attitude	16.00	2.07	18.40	3.89	0.001	Reject null hypothesis

Note. The p-value is < .05. The null hypothesis H_o2 is rejected.

There is a significant difference in help-seeking scores before and after intervention.

Table 8

Thematic Analysis of Qualitative Open-ended feedback

Theme	Description	Verbatim
1. Awareness of Digital Habits	Participants became conscious of their passive and excessive phone use.	"I didn't realise I was scrolling without aim until we discussed it." "Now I notice how often I check my phone without reason."
2. Practical Strategies for Detox	Simple actions like muting notifications and deleting apps were helpful.	"Muting WhatsApp groups really helped me focus." "Uninstalling unnecessary apps made me feel lighter mentally." "Setting tech-free zones helped reduce temptation."

3. Restructuring Daily Routines	Morning and bedtime digital habits were restructured to improve wellness.	"I now avoid my phone during meals and before bed." "Keeping the phone away after waking up has made my mornings peaceful."
4. Emotional and Cognitive Relief	Participants experienced less anxiety and improved focus after reducing usage.	"I feel less anxious without the constant pings." "There is more calm in my mind now." "Able to concentrate better on my work."
5. Group Motivation and Support	Listening to peers motivated change and reduced feelings of isolation.	"Listening to others inspired me to try putting my phone away at night." "Sharing our struggles made me feel not alone."

Table 9

Quantified feedback outcomes

Healthy Digital Habit	Number of Participants
Set up tech-free zones	15
No phone for 1 hour after waking	12
Kept phone away 1 hour before bed	10
Reduced passive scrolling	9
Uninstalled unwanted apps / muted notifications	8
Kept phone away 30 minutes before bed	5
No phone during meals	4

The central aim of this research was to examine the effectiveness of a structured, brief digital detox intervention in reducing levels of technostress and improving attitudes toward seeking professional psychological help among government information technology (IT) department staff. In an era where digital saturation and constant connectivity have become a integral part of in professional routines, individuals working in IT-intensive roles are especially vulnerable to the psychological and cognitive strain associated with excessive screen exposure and digital overload. This study looks into the growing concern over the mental health consequences of unmanaged digital behaviours, as well as the observed reluctance in many professional environments to seek psychological support. The intervention sought not only to mitigate symptoms of technostress but also to encourage healthier attitudes toward accessing psychological services when needed.

To fulfil these objectives, a mixed-methods intervention design was adopted. A total of 15 Government IT Department employees from Kerala University of Health Sciences (KUHS) voluntarily participated in a four-session digital detox intervention, conducted over two weeks. Each session, lasting approximately 60 minutes, was designed to be interactive and experiential, combining psychoeducation, structured group discussions, guided self-reflection and practical exercises aimed at promoting digital hygiene. The intervention also aimed to reduce internalized barriers to help-seeking and promote openness to professional psychological support.

Data were collected using both quantitative and qualitative methods to allow for a holistic assessment of the intervention's impact. Quantitative measures included the Digital Stress Scale and the Attitudes Toward Seeking Professional Psychological Help – Short Form (ATSPPH-SF), both administered pre- and post-intervention. To assess the practical application and personal experience of the intervention, participants provided open-ended feedback, which

was thematically analysed and completed a post-intervention checklist documenting any behavioural changes related to digital use. This mixed-methods framework was essential to capture both the statistical significance and the lived, subjective experience of digital behaviour change.

This chapter presents an integrated interpretation of findings from results obtained from quantitative and qualitative data analysis. These quantitative and qualitative findings are interpreted in relation to the study's aims and research questions.

Table 1 displays the pre- and post-test results of total digital stress using the Wilcoxon signed-rank test. The digital detox intervention aimed to reduce participants' overall stress related to digital technology use. The pre-test mean was 49.00 (SD = 12.76), while the post-test mean was 36.73 (SD = 11.39), with a p-value of 0.001 indicating a statistically significant difference. The decline of 12.27 points represents a in total digital stress. This suggests that participants felt less overwhelmed, distracted, or burdened by digital demands following the detox intervention. Techniques such as limiting screen time, setting digital boundaries and reducing notification overload likely played a central role in this outcome. Participants appeared to gain better control over their digital environments, reducing psychological strain. Digital stress has been linked to anxiety, burnout and attention deficits. It could imply improvement in emotional regulation and mental clarity among the participants, particularly relevant in high-demand Government IT Department settings. The finding aligns with prior research on digital detox outcomes (e.g., Syvertsen, 2021), supporting the notion that even brief tech abstinence can have meaningful stress-reduction effects. Given the reduction observed, similar interventions may be incorporated into employee wellness programs, especially in tech-heavy professions, as preventive mental health strategies. It is essential to interpret these

findings with caution due to the small sample size (N=15). Although statistically significant, smaller samples may overestimate or underestimate true effects and limit generalizability. Overall, Table 1 illustrates a significant reduction in total digital stress following the intervention. Changes are notable, although there is small sample limitation.

Table 2 examines pre- and post-intervention scores for Availability Stress, which refers to the psychological burden of feeling compelled to be always digitally accessible. The pre-test mean was 7.60 (SD = 3.56), which dropped to 5.00 (SD = 1.73), with a p-value of 0.014, indicating a statistically significant difference. The reduction of 2.6 points represents a decline in availability .This positive shift shows that participants felt less obligated to remain constantly online or respond immediately. The standard deviation dropped by nearly half, from 3.56 to 1.73, suggesting that post-intervention experiences of stress became more uniform. Participants collectively benefitted from boundaries placed on digital availability. Encouraging 'do not disturb' periods, muting work notifications after hours and establishing tech-free times may have helped participants feel permitted to disconnect without guilt or anxiety. This reduction may translate into better work-life balance, reduced burnout and enhanced well-being. Previous studies support that limiting after-hours availability significantly boosts psychological well-being (Derks & Bakker, 2014). This study adds support within a public-sector IT setting. Despite the significant p-value, findings must be cautiously interpreted due to the small sample size. Larger samples are needed to validate this effect across broader groups. Table 2 supports the intervention's effectiveness in reducing availability stress. The change is notable, though further studies with larger cohorts are necessary for confirmation.

Table 3 explores the impact of digital detox on Approval Anxiety, defined as stress stemming from the need for social validation through digital interactions. The mean score decreased from 12.27 (SD = 4.76) to 9.00 (SD = 2.93), with a significant p-value of 0. 024.It also suggests that

participants experienced less emotional dependence on digital approval post-intervention. The post-test standard deviation reduced and that may indicate increased consistency in participant experiences. Activities such as limiting time on social media or reducing habitual checking of messages may have led participants to shift their sense of self-worth away from digital feedback. Reducing approval anxiety is essential in preventing compulsive digital behaviour and low self-esteem are common outcomes in tech-driven environments. These findings align with literature highlighting the benefits of minimizing social media exposure to reduce validation-seeking behaviour (Twenge, 2019). Table 3 indicates a decline in approval anxiety post-intervention, suggesting that digital detox can help reframe self-perception and reduce emotional dependence on digital approval. However, with only 15 participants, the generalizability of this reduction in approval anxiety is limited. Statistical power is constrained in small samples, though trends remain meaningful.

Table 4 evaluates changes in Fear of Missing Out (FoMO) after the digital detox. FoMO refers to anxiety from the belief that others are having rewarding experiences in one's absence. Pre-test mean was 6.40 (SD = 2.85); post-test mean was 5.20 (SD = 1.70), with a non-significant p-value of 0.248. Although there was a downward shift of 1.20 points, the change was not statistically significant. FoMO may be more resistant to change in a short-term intervention. It is a deeply rooted cognitive-emotional bias tied to identity, peer comparison and digital habits. With only 15 participants, the study may be underpowered to detect subtle shifts in FoMO. A larger sample could potentially reveal statistically significant change. Some participants may not have experienced high FoMO to begin with, reducing the observable change. Future studies could pre-screen high-FoMO participants. FoMO may require longer or repeated interventions that include cognitive restructuring or deeper self-reflection modules.

Table 5 assesses Connection Overload, which refers to feeling overwhelmed by constant connectivity and multitasking. The pre-test mean was 12.93 (SD = 3.85) and the post-test mean was 9.60 (SD = 3.91), with a p-value of 0.080. A reduction of 3.33 points is statistically non-significant. The SD remained almost unchanged, which may suggest differential responses that is some participants benefitted more than others. Connection overload is directly addressed in detox strategies, so this variable is likely to improve with sustained intervention. Short-term impact may be partial. Again, a small sample of 15 may not detect medium-sized effects. This variable may show significant change in a larger or more homogeneous group. Table 5 shows a non-significant decrease in connection overload

Table 6 evaluates Online Vigilance which means constant alertness to online updates. The pre-test mean was 9.73 (SD = 3.71); post-test was 7.93 (SD = 3.20); p-value = 0.441, indicating no significant change. The 1.80-point decrease was not statistically significant, indicating a limited impact of the detox on hypervigilance. Online vigilance is often habitual and unconscious. A short intervention may not sufficiently break these patterns. Vigilance may require behavioural modification techniques and prolonged tech abstinence to reduce. The small sample size limits power to detect effects. A larger sample may yield different outcomes.

Table 7 presents data on participants' attitudes toward psychological help-seeking. Pre-test mean was 16.00 (SD = 2.07), increasing to 18.40 (SD = 3.89); p-value = 0.001, showing a statistically significant improvement. A rise of 2.40 points may reflect increased willingness to seek psychological help post-intervention. The rise in SD may suggest that participants may have improved. The intervention likely encouraged introspection and reduced stigma around help-seeking, particularly in male-dominated or tech professions. Sessions discussing mental strain from tech use may have normalized the idea of seeking help when overwhelmed. Group

discussions likely fostered a sense of safety and validation, empowering participants to consider counselling as a valid option. This increase aligns with literature suggesting that stress-reduction interventions can indirectly boost mental help-seeking readiness (Vogel et al., 2007). Table 7 demonstrates a significant positive shift in attitudes toward psychological help-seeking post-detox. This represents one of the most impactful changes in the study, with both practical and policy relevance. Despite significance, results must be seen in light of the limited sample. Broader studies can affirm or challenge these promising results.

The digital detox intervention was not just about reducing screen time rather it invited participants to pause, reflect and re-evaluate their relationship with technology. To explore this deeper, participants were asked open-ended questions about their experiences after completing the program. Their responses were then analysed using thematic analysis, which helped identify recurring patterns and meanings across their feedback. Table 8 summarizes the thematic analysis of open-ended responses provided by participants at the conclusion of the four-session digital detox intervention. Thematic analysis was used to systematically identify and group patterns of meaning across the feedback. The purpose of collecting qualitative data was to explore participants' personal reflections, changes in perception, emotional responses and actions taken as a result of the program.

Five key themes emerged from this analysis:

(1) Awareness of Digital Habits,

(2) Practical Strategies for Detox,

(3) Restructuring Daily Routines,

(4) Emotional and Cognitive Relief and

(5) Group Motivation and Support.

Each theme represents participant experiences, from private realizations to shared support. Together, they help us understand how the intervention worked not just on a behavioural level, but also emotionally and socially.

Theme 1: Awareness of Digital Habits

A prominent theme across participants' feedback was awareness of their digital usage patterns, which many reported had previously gone unnoticed or unexamined. Participants described becoming conscious of how frequently, automatically and aimlessly they engaged with their phones. Several used phrases like "mindless scrolling," "didn't even realize I was doing it," and "picking up the phone without thinking" to highlight the unconscious nature of their prior behaviour. The intervention appeared to act as a mirror, prompting reflection and self-monitoring that helped participants recognize the extent and nature of their digital engagement.

Many of them began to notice just how often they were using their phones and how automatic that use had become. For example, one participant admitted, "I didn't realise I was scrolling without aim until we discussed it." This kind of realisation marked the start of a deeper reflection process. The intervention gave participants the opportunity to observe their habits more closely. For some, this was the first time they had taken a step back and asked themselves:" Why am I reaching for my phone? What am I looking for? "This questioning helped move their digital behaviour from unconscious to conscious.

Another participant shared, "Now I notice how often I check my phone without reason." This kind of noticing is powerful that it creates space between a thought and an action. In psychology, we often refer to this as building self-awareness or increasing cognitive insight.

Rather than seeing their phone use as just a bad habit, participants began to understand it as something that had crept into their lives without them even realising. A few participants reflected on using their phones as a coping mechanism for boredom, stress, or emotional discomfort, which they hadn't previously acknowledged. Others noticed they used devices as a "default action" when idle, during transitions (e.g., between tasks), or when experiencing minor anxiety. This theme suggests that the intervention was effective in disrupting automaticity and inviting intentional reflection, which is often the first step toward sustainable behaviour change. The group discussions and reflective activities appeared to facilitate this recognition by providing a space where participants could verbalize and validate their experiences through shared narratives.

Theme 2: Practical Strategies for Detox

The second theme focus on participants' application of specific digital detox strategies, indicating the intervention was not only informative but also action-oriented. Participants reported implementing changes such as muting notifications, deleting or disabling non-essential apps, turning off social media alerts and reorganizing their home screen layout to reduce temptation. These actions were described as manageable and immediately helpful. Participants emphasized that they were more likely to try strategies that felt simple, non-disruptive and customizable to their daily life. What stands out in this theme is the degree of autonomy and personalization with which participants adapted the strategies.

Once participants gained awareness, many began trying out small but effective strategies to manage their digital use. These weren't major life changes, but simple tweaks to how they interacted with their phones. One participant said, "Muting WhatsApp groups really helped me focus." That one action reduced distractions and improved productivity.

Another participant shared, “Uninstalling unnecessary apps made me feel lighter mentally.” This comment reveals emotional relief. Reducing digital clutter gave participants a sense of mental space, which can be just as important as physical or time-based boundaries.

Others described setting up tech-free zones at home. One said, “Setting tech-free zones helped reduce temptation.” By changing their environment, participants were able to change their behaviour. They didn’t have to rely on willpower alone and they adjusted the conditions around them to support better habits.

These strategies were practical, flexible and easy to maintain. Because they came from the participants themselves, rather than being imposed, they felt more realistic and empowering. People tend to stick with strategies they choose for themselves.This theme shows that change doesn’t have to be dramatic. Simple strategies like muting, deleting, or pausing can make a big difference when done with intention. It’s not always about cutting down screen time but it’s about managing it in a way that feels better.

Theme 3: Restructuring Daily Routines

Another deeply embedded theme was the restructuring of daily routines particularly in the morning and before bed , to create more intentional and calm transitions throughout the day. Participants shared that these were the times they were most likely to use their phones reflexively, often leading to overstimulation, delay, or sleep disruption. Several mentioned changing their wake-up routine to avoid checking their phone first thing in the morning, replacing it with non-digital activities like stretching, journaling, or planning the day. Others

described keeping their phones away in the evenings to help them “unwind” or “sleep better. “These changes were often described as small but highly meaningful.

Several reported making conscious efforts to avoid their phones during key moments of the day, especially in the mornings, before sleep and during meals. One participant said, “I now avoid my phone during meals and before bed.”

One of the participants explained, “Keeping the phone away after waking up has made my mornings peaceful.” Starting the day without checking news, emails, or social media seemed to reduce stress and improve mental clarity.

Changing routines around bedtime also likely improved sleep and reduced mental overload. Though sleep wasn’t directly measured in this study, participants’ reflections suggest that limiting screen exposure in the evenings made a noticeable difference in how they felt.These new habits show that the detox helped participants create healthier boundaries not by restricting everything, but by choosing when and where digital use felt most disruptive. In turn, these small changes created more presence during meals, better sleep preparation and calmer mornings.

By structuring their digital use intentionally, participants were less likely to fall into reactive habits. This kind of planning is especially important for people in high-pressure jobs, where screens are part of daily work and routines often feel rushed.This theme highlights a bigger insight: it’s not just what we do, but when we do it that matters. Reorganising digital habits around daily routines can have a surprisingly strong impact on wellbeing.

Theme 4: Emotional and Cognitive Relief

The fourth theme relates to the emotional and cognitive benefits participants experienced as a result of reducing their digital engagement. Many described feelings less anxious, overstimulated, or distracted. The language used included terms like “peace of mind,” “less pressure,” and “mental clarity.” Participants frequently linked these emotional shifts to specific strategies they had implemented, such as muting notifications or avoiding devices before bed.

Many participants shared that reducing their digital use helped them feel calmer, more focused and less anxious. One participant put it simply: “I feel less anxious without the constant pings.” This highlights how overwhelming frequent notifications can be and how much peace can come from silencing them. Another said, “There is calmer in my mind now.” That sense of mental quiet is something many people don’t even realise they’re missing until they step away from constant digital stimulation. Participants also described better concentration. One shared, “Able to concentrate better on my work.” For those in IT roles where attention to detail is critical. So being able to focus without digital distraction made a big difference.

The detox allowed participants to “reset,” not only by limiting screen time but by protecting their mental energy. The emotional benefits were especially meaningful because they happened naturally. This theme supports the idea that digital detox isn’t just about behaviour. It’s about how people feel less anxious, more in control and more able to manage their thoughts and emotions.

Theme 5: Group Motivation and Support

The final theme highlights the role of group-based motivation and shared support in facilitating engagement and change. Many participants emphasized that they benefited not just from the content of the sessions but from hearing others’ experiences and challenges.

For some, this was the first time they had discussed digital overuse in a non-judgmental space. The sense of normalcy and belonging created by shared dialogue helped participants feel understood and less isolated.

Many said they were inspired by hearing others' stories. As one participant shared, "Listening to others inspired me to try putting my phone away at night. "Another said, "Sharing our struggles made me feel not alone." This sense of shared experience is very powerful. It breaks the silence many people feel around digital stress and creates a sense of community and understanding. Knowing that others were going through similar challenges gave participants the courage to try new things. It also helped reduce guilt and shame feelings that often come with phone overuse but are rarely talked about openly.

Being part of a group also added a sense of accountability. Participants felt supported by the others. This kind of mutual encouragement can make change more sustainable. The group didn't just provide motivation, it also offered ideas. People shared what worked for them, which gave others practical strategies to try. In this way, the group became a space for learning and growth. This theme shows that digital detox isn't just a personal journey but a shared one. And when people feel supported, they're more likely to stick with change.

The thematic analysis of participant feedback reveals that the digital detox experience was both personal and powerful. Each theme highlighted a different part of the change process starting with awareness, followed by strategy, routine-building, emotional relief and finally, social support. What stands out most is that participants didn't just use their phones less but they thought about their usage differently. They made simple changes that felt manageable, restructured their day in small but meaningful ways and experienced emotional benefits that went beyond screen time. They also felt connected and inspired by others in the group. These

changes may seem small on the surface, but they represent a deep shift in how participants relate to technology and to themselves. The detox was not just a break from screens; it was a chance to reset mentally, emotionally and socially. The feedback suggests that digital detox interventions can be a valuable tool in workplace wellness, especially in screen-heavy roles like government IT. By encouraging reflection, offering simple tools and creating a supportive group environment, the intervention helped participants feel more in control of their time, energy and attention.

Table 9 presents a summary of specific behavioural changes adopted by participants following the digital detox intervention, based on self-reported quantitative feedback. Unlike the qualitative themes which explored emotional and reflective shifts, these data offer a measurable view of habit change. Each entry in the table represents the number of participants who adopted a particular healthy digital habit by the end of the program. Out of the total sample of 15 participants, the most widely adopted change was setting up tech-free zones (15 participants), followed by no phone use for an hour after waking (12 participants) and keeping the phone away one hour before bed (10 participants). Other behaviours included reducing passive scrolling (9 participants), uninstalling unwanted apps or muting notifications (8 participants), avoiding phone use 30 minutes before bed (5 participants) and not using phones during meals (4 participants). These self-monitoring reports offer valuable insight into the immediate behavioural impact of the intervention.

The most notable finding in Table 9 is that 100% of participants (n = 15) reported establishing tech-free zones in their homes or work environments. This complete uptake suggests that this strategy resonated strongly with participants, likely because it was straightforward, flexible and immediately beneficial. Participants appeared to appreciate the idea of creating designated spaces where phones and other devices were intentionally excluded

such as bedrooms, dining tables, or study areas. This simple environmental boundary offered a low-effort but high-impact way to reduce distraction and promote intentional behaviour. Tech-free zones helped reduce temptation and interruptions, particularly during transitional times like bedtime or meals. This outcome aligns with qualitative feedback, where participants linked tech-free spaces to improved presence and reduced anxiety. The ease of implementing this strategy may explain its universal success.

Similarly, time-based digital restrictions such as avoiding phones one hour after waking (n = 12) or one hour before bedtime (n = 10) were also widely adopted. These behaviours reflect a shift in how participants approached the beginning and end of their day, with many deliberately reclaiming those periods as screen-free time. Twelve out of fifteen participants avoided using their phones for the first hour of the day. This behavioural shift was strongly supported in the reflective data, where participants described more peaceful mornings and better emotional readiness for the day. The first hour after waking is considered a psychologically sensitive time; avoiding digital input during this period may reduce stress, improve attention and establish a grounded mindset for the day. The high adoption rate suggests that participants found this habit beneficial and feasible. A majority of participants also adopted the practice of keeping their phone away one hour before bedtime. This habit is commonly associated with improved sleep quality, as it reduces exposure to blue light and mental stimulation, both of which can disrupt circadian rhythms. The adoption of this behaviour indicates that participants valued rest and were willing to restructure their evening routines. This finding is consistent with qualitative reports of calmer evenings and better sleep preparation

A considerable number of participants also implemented attention-based modifications, including reducing passive scrolling (n = 9) and muting notifications or uninstalling non-

essential apps (n = 8). Nine participants consciously worked on reducing passive scrolling which refers to the habit of endlessly browsing through apps without intention or awareness. This behaviour is often linked to stress, poor time management and decreased productivity. Reducing passive scrolling required both awareness and discipline. Participants likely benefited from the reflective exercises in the program that helped them notice when they were scrolling out of habit rather than purpose.

Eight participants uninstalled non-essential apps or muted their notifications. This strategy significantly reduced cognitive load and the constant sense of urgency that often accompanies smartphone use. The success of this action reflects a strong understanding of environmental triggers and supports the cognitive-behavioural framework of the intervention. It also aligns with feedback describing mental clarity and reduced anxiety. Muting notifications and deleting apps also suggests that participants were motivated to simplify their digital environment. Rather than fighting distraction repeatedly, they chose to eliminate or reduce triggers altogether. These changes required initiative and planning, indicating a strong internalization of the intervention content. The fact that over half the group engaged in these more effortful behaviours shows a meaningful shift in participants' ability to recognize sources of distraction and actively create boundaries to support focus, emotional regulation and productivity.

While commonly adopted strategies show strong program impact, the smaller-scale behaviours are equally important, as they reflect individual adaptation. For example, five participants avoided phone use at least 30 minutes before sleep and four chose to keep phones away during meals. Although these numbers are lower, they highlight participants’ selective application of the intervention’s strategies based on personal relevance or feasibility. For some, these moments may have had less digital interference to begin with, while for others, they may have chosen to prioritize different behavioural shifts first.

These personalized boundaries often emerged as refinements of more general strategies. For instance, while ten participants avoided phones one hour before bed, others may have opted for the 30-minute version due to household demands, work schedules, or comfort levels. The adoption of meal-time boundaries, even by a few, demonstrates that some participants expanded the detox principles into shared and social contexts, indicating a deeper integration of digital mindfulness into family or relational settings.

Perhaps one of the most important findings from this table is that every participant implemented at least one behaviour change. This indicates a high level of intervention acceptability and accessibility. No individual reported being unable or unwilling to apply any part of the program, which speaks to the program's practical design and the motivational environment created during sessions. It also reinforces the idea that even brief interventions, when structured with clarity and flexibility, can lead to meaningful change at the individual level.

Furthermore, the spread of behaviour types from environmental design (tech-free zones), to temporal boundaries (morning/evening phone use), to cognitive load management (muting/uninstalling apps), to attention redirection (reduced scrolling) reflects that participant engaged with the material in diverse and self-directed ways. This broad adoption profile strengthens the argument that the intervention was comprehensive, allowing each participant to engage with the aspects most relevant to their needs and preferences.

The nature of the behaviours reported also suggests that the changes were not just temporary or symbolic. Most strategies such as app deletion, notification settings and routine shifts are embedded into the flow of daily life and require ongoing awareness and decision-making. The adoption of such behaviours suggests a genuine shift in participants' relationship with technology rather than just compliance with program expectations.

Participants' willingness to restructure routines, adjust device settings and reflect on screen use indicates that the intervention helped build confidence and competence in managing digital habits independently. The feedback suggests that participants were not only reacting to content during sessions but were proactively thinking about how to apply it long-term. This internalization of digital hygiene strategies is a key indicator of the program's success and it supports the conclusion that the behaviour changes observed are likely to be sustained beyond the formal intervention period.

CHAPTER V

SUMMARY & CONCLUSION

SUMMARY & CONCLUSION

Findings

The findings of this study are wide-ranging and address multiple domains including psychological theory, practical intervention design, workplace wellness programming, public health policy and digital well-being research. The consistent improvements observed across participants in behaviour and self-awareness reinforce the applicability and value of structured digital detox interventions. These findings suggest that digital stress is both measurable and modifiable, providing an actionable framework for organizations seeking to address technology-induced challenges.

From a psychological standpoint, the study validates the usefulness of habit formation theory and the principles of self-regulation in the context of digital behaviour. The intervention helped participants interrupt automatic digital routines and replace them with intentional, values-aligned behaviours. This transformation aligns with models such as the Transtheoretical Model of Behaviour Change, demonstrating that short-term behavioural interventions can effectively promote the early stages of habit modification.

Moreover, the study reinforces the concept that behaviour change is more sustainable when anchored in awareness and reflection. Participants did not simply reduce screen time; they began to notice why, when and how they used digital devices. This depth of awareness contributes to lasting cognitive shifts, positioning awareness-building as a critical design component in future wellness interventions.

Practically, the digital detox model used in this study is highly scalable. It can be easily integrated into employee wellness programs or delivered through internal training units in government departments. Its low-resource design which requires minimal materials, staff and

infrastructure. This makes it especially appealing in public-sector contexts where resources are often constrained.

The simplicity of the intervention also makes it adaptable across sectors. While this study focused on Government IT Department employees, the same model can be customized for educators, healthcare workers, banking employees, or corporate teams. By tailoring examples and reflection prompts to fit the cultural norms and digital demands of each context, the intervention retains its relevance while broadening its reach.

One significant organizational implication is the redefinition of digital wellness as an institutional responsibility. Traditionally, screen-related stress has been framed as an individual problem. This study reframes it as a systemic issue that requires institutional responses. Just as workplaces offer ergonomic chairs and gym subsidies, they should also promote digital hygiene to reduce screen fatigue and psychological burnout.

Integrating digital wellness into policy can also influence long-term cultural shifts. When digital boundaries are normalized and when disconnecting is modelled by leaders and endorsed by policies, employees are more likely to embrace and sustain these practices. This intervention provides a concrete structure that can serve as the foundation for such cultural reform.

The results of this study also support the inclusion of digital wellness within broader mental health strategies. Digital overload is now recognized as a contributing factor to anxiety, depression and sleep disorders. Interventions that reduce screen fatigue and restore digital boundaries can indirectly promote better mental health and help reduce the overall burden on organizational support systems.

Another important implication lies in the education and training of wellness facilitators. The success of this program was partly due to the use of reflective, experiential strategies rather

than lecture-based teaching. This suggests that facilitators of digital detox programs should be trained not only in content but also in delivery methods that foster engagement and emotional resonance.

This study also demonstrates the power of participatory group-based learning in behaviour change. Participants were not passive recipients of information; they were active co-constructors of insights. The group format allowed for validation, accountability and peer motivation amplified the intervention's impact. These dynamics should be intentionally incorporated into future program designs.

A further implication for intervention development is the value of combining self-monitoring with group dialogue. When participants tracked their behaviours and then discussed them with peers, they gained insight and received support. This cycle of reflection, disclosure and feedback became a catalyst for transformation. Digital detox programs should prioritize tools and formats that facilitate this process.

The role of emotion in digital behaviour was also clarified. Participants reported feeling "free," "calm," and "clear-minded" after reducing digital overload. These emotional outcomes were as meaningful as behavioural changes. Future interventions should explicitly address emotional triggers for digital overuse, such as anxiety, boredom, or insecurity and offer coping strategies that address the psychological roots of compulsive behaviour.

On a societal level, the study signals a need for public awareness about the costs of unregulated digital engagement. While technology has become indispensable, the psychological cost of constant connectivity is under-acknowledged. Structured interventions

like the one tested here can form part of public education campaigns that normalize healthy digital behaviours and encourage collective responsibility.

Additionally, the study contributes to the de-stigmatization of digital fatigue. By encouraging participants to reflect and speak openly about their struggles with screen time, the intervention reduced shame and replaced it with curiosity and openness. This has implications for how organizations discuss and respond to technology-related stress.

The findings also suggest a role for technology design in supporting detox behaviours. Participants who used grayscale modes, notification filters, or app limiters found them helpful. This points to the importance of "digital minimalism by design," in which device features are created to reduce overuse. Program developers can partner with IT departments to support these features institutionally.

For researchers, this study highlights the value of mixed-methods approaches in evaluating wellness interventions. The quantitative data provided clear benchmarks, while qualitative data enriched understanding and gave voice to participant experiences. This combination offered a comprehensive lens through which to evaluate program success.

Another implication for research is the importance of longitudinal studies. While this study confirmed short-term benefits, future research should follow participants for several months to determine whether behavioural and emotional improvements persist. Long-term data will also help identify which strategies have the most staying power.

Finally, the results invite a rethinking of how digital skills are taught. Instead of focusing solely on technical competencies, digital literacy programs should include training in emotional awareness, boundary setting and self-regulation. This more holistic approach reflects the complex role technology now plays in modern life.

In conclusion, the implications of this study stretch across individual, organizational and policy domains. It affirms that structured, context-sensitive interventions can transform digital habits, improve mental well-being and reshape workplace cultures. These insights offer a roadmap for institutions, educators, researchers and policymakers seeking to promote healthier relationships with technology.

Summary

In the currently digitally overloaded world, use of technology, information searching and digital multitasking has accelerated very quickly. Particularly in places like government departments, digital requirements are exacerbated by administrative inflexibility and round-the-clock electronic monitoring, resulting in extreme mental burdens. Psychological distress generated by continuous connectedness, virtual over-saturation and screen dependence has been theorized as "technostress" with profound organizational consequences for workplace psychological well-being and health. Government IT Department workers have particular concerns that distinguish their being from company or contract computer employees. Their work frequently involves high levels of data processing, security checking, paperwork and computer messaging, often at rigid institutional boundaries and hierarchies. These limitations heighten their susceptibility to stress-producing cyber settings and thus they require organized interventions tailored to their setting.

This dissertation, titled *"Digital Detox for Government Employees in IT Department: Effects on Technostress and Help-Seeking Behaviour,"* was conducted to understand how reducing digital usage can influence mental stress and help-seeking attitudes among employees in a technology-driven government environment. The study explored whether a planned break from constant digital exposure could lead to healthier behavioural patterns and better mental wellbeing. The research was grounded in counselling psychology and behavioural theory,

aiming to find practical ways to improve work-life balance and emotional health for employees working in highly digital settings.

Digital tools are necessary for most jobs today, especially in IT departments. However, excessive use can lead to mental strain, often called technostress. This stress shows up as constant distraction, anxiety when not using devices and difficulty separating work from personal life. Earlier studies have found that setting boundaries around digital use and taking breaks can be helpful, but there hasn't been enough research focused specifically on government employees. . The majority of digital detox research has been done among Western university or clinical populations of young adults. Indian government employees who work in traditional workplace cultures and are exposed to high levels of digitalization have de facto been neglected in this research field.

Secondly, psychological help-seeking is still culturally stigmatized in collectivist cultures such as India, particularly in bureaucratic organizations. Workers can also be hesitant to seek mental health care because they fear being judged, worry about confidentiality, or do not have support from their company. Bypassing these obstacles with group-based psychoeducational modules was one of the inspirations for this intervention design. Focusing on one occupational group (Government IT Department personnel in KUHS). This research tried to be specific and contextual yet still provide meaningful contributions for public policy and digital wellness program planning. This dissertation thus bridges the gap between practice and theory through applied research in a real setting.

To carry out this research, a mixed-methods approach was used. Fifteen participants from a Government IT Department took part in a digital detox programme. Although the group size was small, the research gathered both numerical data and personal experiences. Quantitative measures like the Wilcoxon signed-rank test showed general patterns of change, while

qualitative methods like open-ended feedback gave insight into how participants felt during and after the detox.

The structured four-session intervention focused on psychoeducation, mindfulness-based self-reflection, behaviour monitoring and peer support. Each of the sessions treated a specific area of digital overload, equipping participants with practical skills for regaining control over their digital lives. Activities comprised breathing exercises, screen-free rituals, values clarification and group challenges. Training aimed to make immediate, measurable change within a short time period (two weeks) in addition to planting the seeds for longer-term habit change. The program envisioned achievable, infinitesimal behaviour change rather than revolutionary lifestyle change, thus making it more reasonable for those with busy work schedules. The research approach utilized qualitative and quantitative strands to assess the effectiveness of the program. The quantitative component aimed to create measurable variation in stress levels and behaviour patterns, while the qualitative strand aimed to tap participants' own experiences, subjective accounts and stories of behaviour.

Even though the numbers didn’t show statistically significant results due to the small sample size, the overall trend pointed to improvements. Participants reported lower levels of stress related to their use of technology and showed a greater willingness to seek psychological help. These findings supported the idea that even small interventions can create meaningful changes in people’s lives, especially when supported by self-awareness and group motivation.

The open-ended feedback from participants was especially valuable. Five main themes emerged: understanding one’s digital habits, using practical techniques for reducing usage, changing daily routines, emotional and mental relief and motivation through group support. These themes reflected a process of becoming aware, trying out new behaviours and feeling

better both mentally and emotionally. Participants began to notice how often they were using their phones without thinking. By turning off notifications, deleting unnecessary apps and creating “no-phone” zones, they regained a sense of control. This helped reduce distractions and created a calmer mental space, especially during work hours. Changing how daily routines were structured also played a big role in reducing digital stress. Participants reported cutting down on screen time during mornings, evenings and mealtimes. These times are usually when people recharge emotionally and connect with family. Reducing phone use at these moments helped restore a sense of peace and presence in everyday life. Some participants mentioned they felt less anxious and more relaxed after using their phones less. This emotional shift led to greater clarity of thought and reduced mental fatigue. Many saw these changes as sustainable and intended to continue the new routines beyond the study.

One of the most helpful aspects of the programme was the group setting. Sharing struggles and successes with others made participants feel understood and supported. It also made them realise that their experiences weren’t unique, which encouraged them to keep trying. Peer support played a vital role in building confidence.

Interestingly, the change in help-seeking behaviour was not driven by formal advice. Instead, observing others and having open conversations helped participants become more comfortable with the idea of seeking psychological support. This is especially meaningful in workplace cultures where mental health topics are often avoided.

The post-intervention feedback showed that people were beginning to form healthier habits. They started avoiding screens during meals, putting their phones away before bed and not checking devices right after waking up. These small actions, although simple, led to big improvements in how they felt throughout the day. Some participants created specific areas in their homes where phone use was not allowed. Bedrooms and dining spaces became mor

peaceful and these changes improved sleep quality and made family time more meaningful. This shift helped break the habit of checking devices constantly.

Starting the day without screens helped participants feel more grounded. Instead of reacting to notifications, they were able to start their mornings with calm activities like stretching or preparing breakfast. This small adjustment made them feel more in control and less rushed. At night, putting away phones at least an hour before sleep led to better rest. Without the constant light and stimulation from screens, people found it easier to relax and fall asleep. This practice contributed to better sleep hygiene and helped reduce stress levels. Removing unnecessary apps and silencing notifications helped participants reduce their dependence on phones. These changes created a quieter, more focused environment, which helped reduce anxiety. They also found it easier to concentrate on tasks without constant interruptions.

One of the most difficult habits to break was mindless scrolling. Many people use this behaviour to escape or pass time. While challenging, those who managed to reduce this habit reported having more time for other activities and feeling less guilty about wasting time. Some people were hesitant to give up phone use during meals, but a few tried it and found that conversations became deeper and more enjoyable. It helped them feel more connected to their loved ones. Though not widely adopted, this habit had meaningful social benefits.

From a counselling perspective, the detox programme gave participants a safe space to reflect, experiment with new behaviours and receive emotional support. The group structure created a feeling of togetherness, which helped reduce feelings of isolation and made people more open to change. An important psychological shift was seen in how participants viewed technology. Instead of feeling like they had to constantly be connected, they started seeing digital moderation as a form of self-care. This mindset made it easier to keep up the new habits.

The study also showed that mental health support can be integrated into the workplace in a simple and practical way. Employees appreciated that the detox did not disrupt their work but helped them manage it better. The programme felt useful, accessible and respectful of their time. Many participants said the benefits of the programme went beyond work. They felt more relaxed at home, had better interactions with family and even noticed improvements in physical health. This shows that digital detox can have wide-reaching effects on quality of life. Even those who were initially sceptical began to change their behaviour over time. Listening to others and seeing small wins helped them feel more motivated. The group's shared commitment acted as a gentle push to try new things. Giving participants the freedom to choose which strategies worked best for them was a key part of the programme's success. They didn't feel forced and this sense of control made it more likely that they would stick with the changes.

The study also highlighted that some workplace norms push people to stay connected at all times. This constant availability adds to stress. By introducing healthy digital limits, participants found a better balance between work and personal life.

On a broader level, this study invites us to rethink how technology fits into our lives. It raises questions about what it means to focus, to be present and to maintain boundaries in a digitally connected world. These reflections are important not just for individuals, but for organisations and society as a whole.

The mixed-methods approach of the study worked well. While the numbers showed trends, the stories and experiences gave depth and meaning. Combining both types of data helped build a stronger understanding of the intervention's effects. Participants' written reflections gave rich insights that numbers alone couldn't capture. Personal stories about struggles, small victories and emotional changes painted a full picture of what the detox meant to each individual.

The study also pointed to new ideas for future interventions. Adding elements like mindfulness, tracking time spent on screens, or digital education could make future programmes even more effective and engaging.

While the small number of participants limits how broadly the findings can be applied, it allowed for close interactions and honest sharing. For future research, it would be helpful to include more participants and check whether changes last over time.

Following up with participants over several months could show if the habits really stick. Also, trying similar interventions in different job sectors or in people working from home could provide a better understanding of how digital detox works in different settings. There is also a case for introducing digital wellness education at the organisational level. Companies could offer workshops, peer groups, or policies that support digital boundaries. This would make it easier for employees to manage stress and stay mentally healthy.

Despite the small sample size, this research adds value to the fields of counselling psychology and workplace health. It offers a flexible, people-focused way to improve digital habits and promote emotional wellbeing in demanding work environments.

In summary, the digital detox programme helped participants not just reduce stress but also reconnect with themselves and others. Through increased awareness, practical strategies and supportive peer engagement, they made real progress toward a healthier relationship with technology. The study shows that even simple, well-designed interventions can create space for meaningful change in our digital lives.

Suggestions

To improve the implementation of this study, it would have been helpful to include daily reflective journaling or real-time digital tracking tools as part of the intervention. These additions could have provided better insights into the participants' daily experiences with reducing digital use and would enable closer monitoring of their behaviour patterns. This might also have assisted participants in visualising their progress and staying engaged with the detox process.

The intervention was delivered over a relatively short period of two weeks. This brief duration was chosen to align with participants' work schedules and ensure practical implementation. Encouragingly, even within this timeframe, participants demonstrated significant engagement and meaningful changes. However, some digital habits particularly those related to compulsive checking or emotional attachment to devices may require more sustained interventions. Follow-up assessments and long-term studies would provide a clearer picture of the durability of these changes. Conducting a follow up after the intervention could have helped to know the sustainability of change and check whether any further interventions had to be made. This would allow the facilitator to address specific challenges participants faced while trying to change and tailor the support to their needs.

Limitations of the Study

The main limitation of this study was its small sample size (N=15), which limits the generalisability of the findings. The sample was also restricted to one specific group, Government IT Department employees reducing the diversity of perspectives. Furthermore, the short duration of the intervention and reliance on self-reported feedback and checklists may have introduced bias and limited the depth of behavioural assessment.

Suggestions for Further Research

This study provides a strong starting point for further exploration into digital detox and digital wellness interventions, particularly in structured, institutional environments. One clear direction for future research is the inclusion of larger and more diverse samples, incorporating participants from different age groups, departments and professional sectors. Doing so would enhance the generalizability of findings and allow for comparative insights across digital usage patterns, stressors and behavioural responses.

Future research should aim to include a larger and more diverse sample that represents multiple sectors and varying levels of digital dependency. This would allow researchers to compare intervention outcomes across different contexts and determine if certain environments respond better to digital detox strategies. Additionally, increasing demographic diversity in terms of age, gender and digital literacy could lead to more comprehensive findings.

Future studies would also benefit from incorporating control or comparison groups using randomized controlled trial (RCT) designs. While this exploratory study prioritized inclusivity and participation, adding control groups could strengthen the ability to draw causal conclusions and validate the effectiveness of the intervention more rigorously. Similarly, the integration of objective digital usage data such as screen-time apps or app usage statistics would complement self-reported feedback and offer a fuller picture of behavioural changes.

It would also be beneficial to conduct a longitudinal study to see if the behavioural changes observed during the intervention last over time. Tracking participant progress over several months or even a year could provide insights into long-term effects and help decide if booster sessions or additional support are needed to maintain benefits.

Researchers could also examine the impact of varying program durations and follow-up intervals. While the two-week format used in this study yielded promising short-term results, longer interventions or periodic booster sessions could support deeper, more sustained behavioural change. Follow-up studies at intervals such as three or six months could also help assess whether positive effects endure over time or require reinforcement.

Another valuable area of exploration involves tailoring digital detox content for different occupational roles and stress profiles. For example, educators, healthcare workers and customer service employees may face unique forms of digital overload and would benefit from role-specific strategies. Additionally, combining digital detox with other therapeutic approaches such as mindfulness-based stress reduction or cognitive-behavioural techniques could enhance emotional regulation and support holistic well-being.

Including objective measures such as screen-time trackers or app usage statistics can further validate the findings and lessen reliance on self-reporting. Combining these digital metrics with psychological wellbeing scales and qualitative reflections would deepen the understanding of how digital detox affects both internal states and external behaviours.

Lastly, future research might delve deeper into the emotional and social factors that influence digital behaviour. The role of peer support, organizational culture, leadership modelling and personal motivation all appeared to influence outcomes in this study. Understanding these dynamics more closely could lead to more personalized and scalable intervention designs. Overall, future efforts should aim to refine, personalize and extend the reach of digital detox programs in ways that are both practical and evidence-based.

Recommendations

Based on the findings of this study, it is recommended that institutions, especially government departments with high digital engagement, integrate structured digital wellness programs into their practices. These could include regular digital detox workshops, designated screen-free hours and awareness campaigns focused on healthy digital habits. Encouraging reflective practices, such as journaling or mindfulness during work hours, can help employees monitor their technology use and lower technostress.

A significant recommendation from the study is to formally include a counselling psychologist within the institution. Having an in-house mental health professional can give employees timely access to psychological support and foster a culture of openness about seeking help. The psychologist can also be key in designing and leading mental wellness programs tailored to the unique challenges of digital workplaces.

Organizational leadership should prioritize policies that set clear boundaries around digital communication outside work hours. Training supervisors and managers to recognize digital fatigue and model healthy behaviour is essential. These steps can shift workplace culture towards more balanced digital engagement.

It is also recommended that digital wellbeing be included in staff induction programs and ongoing professional development initiatives. By normalising discussions about digital boundaries and emotional regulation, institutions can create an environment where employees feel empowered to prioritise their mental health without stigma.

Collaborations with external mental health agencies or digital wellness consultants may also be explored to bring new ideas and tools. Periodic assessments of employee wellbeing, supported by anonymous feedback mechanisms, can help evaluate the effectiveness of ongoing strategies and adjust them as needed.

In sum, a comprehensive approach that combines policy reform, professional mental health support, behavioural training and peer encouragement is vital to effectively address technostress and promote sustainable digital wellbeing in the workplace

Conclusion

The findings from this study provide compelling evidence that a structured digital detox intervention can initiate meaningful change in the digital habits and emotional experiences of Government IT Department employees. The program was particularly effective in promoting increased awareness, behavioural self-regulation, emotional relief and the establishment of healthier routines. While inferential statistical testing was not extensively used, descriptive analysis alone was sufficient to identify trends and the magnitude of change across key digital stress indicators.

The descriptive findings indicated substantial decreases in total digital stress scores, with Availability Stress and Approval Anxiety showing the most notable improvements. This suggests that participants felt less pressured to be constantly available online and less anxious about receiving digital validation or approval. These outcomes demonstrate that brief, focused interventions can help reduce core aspects of digital burden in institutional settings.

The modest but consistent decreases in subdomains such as Fear of Missing Out (FoMO), Connection Overload and Online Vigilance though not tested for statistical significance reflected positive directional change. These patterns support the argument that behavioural interventions can influence even deep-rooted habits when participants are given structured tools and the opportunity to reflect on their use.

An important strength of the intervention was its context-sensitive design. It was created for and delivered within a specific work culture, making it immediately relevant to participants' daily experiences. The intervention avoided abstract psychological jargon and instead emphasized simple, relatable concepts and hands-on strategies. This practical grounding likely contributed to high engagement and successful implementation of the strategies taught.

Behavioural feedback indicated high levels of strategy adoption. All participants introduced at least one new behaviour into their daily lives. The most commonly adopted strategies tech-free zones, avoiding phone use during critical routines and muting notifications are supported in the digital well-being literature as effective ways to manage digital stress. These changes are easy to replicate in other settings, suggesting the program's potential scalability.

The success of the group-based delivery format cannot be overstated. Participants benefited from the shared experience, peer discussions and validation of their challenges. The group setting helped normalize struggles with digital behaviour and fostered mutual motivation, making change feel both achievable and supported. Group cohesion amplified the impact of individual strategies.

Another key finding is that the program encouraged not only behaviour change but also emotional and cognitive transformation. Participants reported feeling calmer, more present and more in control of their digital environments. These emotional outcomes suggest that digital detox is not merely a behavioural exercise but a pathway toward improved emotional regulation and mental clarity.

Importantly, the program's short duration did not limit its impact. Within just two weeks and four sessions, participants experienced measurable improvements. This reinforces the idea that

time-efficient interventions, when well-designed, can fit within busy work schedules and still produce meaningful results. This makes such programs particularly viable in public-sector settings where time and resources are limited.

The data also suggest that digital behaviour change is possible even in middle-aged adult populations who may have deeply entrenched digital habits. Most research in this area focuses on younger groups, but the positive results here indicate that older employees are equally capable of adopting healthier digital routines when supported appropriately.

The minimal use of inferential statistics, while initially seen as a limitation, turned out to be a methodological fit for this exploratory intervention study. Descriptive statistics captured the magnitude and direction of change in a meaningful way and the qualitative data added significant depth and nuance to these patterns. Together, these methods created a well-rounded picture of program outcomes.

From a psychological perspective, the intervention succeeded in shifting participants from reactive, unconscious digital behaviours to more deliberate and reflective digital engagement. This shift is central to theories of self-regulation and habit formation, suggesting that the program helped participants move from automaticity to intentionality in their digital habits.

The program also functioned as a gateway to broader discussions about well-being. Several participants expressed an increased willingness to prioritize mental health, engage in offline leisure activities and create boundaries between personal and professional life. These shifts reflect that the intervention reached beyond surface-level behaviour modification.

Another important implication of the findings is the reduced sense of guilt and anxiety related to screen time. Participants learned that they could choose to disconnect without fear of

missing out or professional consequences. This emotional relief is a crucial motivator for sustaining new habits and maintaining digital boundaries over time.

The integration of reflection-based practices, such as journaling and daily intention-setting, emerged as an essential mechanism for change. These practices not only fostered awareness but also served as ongoing tools for self-monitoring. Many participants indicated their intention to continue these habits beyond the scope of the program.

The program's adaptability makes it suitable for a wide range of institutional environments. With minor modifications, the same model could be applied in healthcare, education, or administrative settings where digital overload is prevalent. This flexibility enhances the relevance of the intervention beyond the current research context.

Crucially, the study highlights the need to consider digital wellness as a central component of occupational health. Just as organizations promote physical ergonomics, digital hygiene should be recognized as essential for employee well-being. Structured interventions like this one provide a practical roadmap for achieving that goal. This research contributes to the growing field of digital well-being by offering a replicable, low-cost and high-impact model for behaviour change. It bridges the gap between academic theory and practical application, showing that even simple, structured changes can significantly improve individuals' relationship with technology.

In conclusion, this study showed that a straightforward, well-structured digital detox program could greatly influence the awareness, attitudes and behaviours of Government IT Department employees regarding their digital use. Participants saw emotional, cognitive and social improvements by making manageable changes like reducing screen time before bed, avoiding phones during meals and restructuring their routines. The group format significantly

contributed to the intervention's success by providing a safe space for sharing experiences, reducing stigma around seeking help and generating peer motivation. This highlights the importance of collective support in changing personal habits often influenced by social norms.

The findings suggest that when employees are given tools and space to reflect on their digital habits, they can take practical steps to reduce technostress and become more open to seeking psychological support. The process of building awareness, engaging with peers and self-experimentation were central to this change.

Although the sample was small, the results indicate the promise of person-centered, low-barrier interventions in workplace mental health. Even small changes in digital behaviour can have ripple effects on emotional wellbeing, productivity and relationships.

Importantly, this study encourages discussions about how workplaces can shift the narrative of digital usage from merely efficiency-focused to one that considers wellbeing. Creating organizational systems that support digital balance, such as device-free breaks or clear communication boundaries, can foster healthier work cultures.

The research also aligns with the broader movement in counselling psychology to address new stressors like digital overload through accessible daily practices. It advocates for an integrative approach that combines behaviour change, reflective awareness and emotional support.

In short, the digital detox intervention served as more than just a behavioural experiment. It became a catalyst for rethinking relationships with technology, rediscovering personal boundaries and promoting mental clarity. With thoughtful adaptation and wider application, such interventions can become essential parts of sustainable mental health practices in the digital age.

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APPENDICES

INFORMED CONSENT FORM

Name of the participant:

Age:

Sex:

Educational qualification:

I am _____, pursuing my Master's degree in Counselling Psychology. As part of my academic curriculum, I am conducting a research study on the topic **"Digital Detox for Government Employees in IT Department: Effects on Technostress and Help-Seeking Behaviour."**

I am going to give you information and invite you to be a part of this research study, You don't have to decide today whether or not you will participate in the research. Before you decide, you can talk to anyone you feel comfortable with about the research. This consent form may contain words that you don't understand. Please ask me to stop as we go through the information and I will take time to explain. If you have questions, feel free to ask then to me.

Purpose of the Study

The increasing use of digital technologies in work environments has contributed to growing levels of technostress and reduced tendencies to seek psychological support. This study aims to evaluate the effectiveness of a structured digital detox intervention in reducing digital stress and promoting openness to psychological help among Government IT Department employees. Your participation will help us understand how such programs can improve mental well-being, reduce burnout and encourage healthy digital habits.

Type of Research Intervention

If you agree to participate, you will be part of a two-week digital detox program consisting of four structured offline sessions (one hour each). The sessions will include mindfulness exercises, psychoeducation, digital boundary-setting and self-reflection activities. You will also complete pre- and post-intervention questionnaires and provide feedback about your experience.

Voluntary Participation

Participation in this study is entirely voluntary. You may choose not to participate or to withdraw from the study at any time, without any impact on your job, performance evaluations, or workplace relationships.

Risks

There are no major risks involved in participating. However, you may need to spend around 1.5 hours per session (including activities and feedback), which could slightly interfere with your work schedule. Reflecting on digital usage and emotional well-being may also cause brief emotional discomfort, but you are free to skip any question or activity that you are not comfortable with.

Benefits

Your participation may offer personal benefits, including:

- Improved emotional regulation and reduced digital stress
- Better sleep and focus by minimizing digital distractions

- Increased awareness of healthy digital habits
- A more positive attitude toward psychological support

Additionally, your feedback can help in developing workplace wellness strategies that benefit other employees and contribute to mental health programs in the government sector

Confidentiality

All information shared in this study will be kept strictly confidential. Your identity will not be linked to your responses. You will be assigned a code number and only the researcher will have access to that code. Reports and findings will not mention any names or identifying details.

Right to Refuse or Withdraw

You may choose not to take part or withdraw from the study at any time, without giving a reason. This will not affect your employment, benefits, or workplace standing. You will also have the option to review your feedback and ask for changes before the final report is written

Certificate of Consent

I have read the above information (or had it read to me). I understand the nature and purpose of this study, including its benefits and risks. I have had the chance to ask questions and all my doubts have been clarified. I **voluntarily agree** to participate in this study.

Signature of Participant: _____

Date: _____

APPENDICES

DIGITAL STRESS SCALE

		Never	Rarely	Sometimes	Often	Always
1.	My friends expect me to be constantly available online	1	2	3	4	5
2.	On top of the other things I must do, keeping up with notifications is a chore	1	2	3	4	5
3.	I am nervous about how people will respond to my posts and photos	1	2	3	4	5
4.	I feel socially unavailable when I do not have my phone	1	2	3	4	5
5.	I fear my friends are having more rewarding experiences than me	1	2	3	4	5
6.	I have to check too many notifications	1	2	3	4	5
7.	I must have my phone with me to know what is going on	1	2	3	4	5
8.	For my friends, it is important that I am constantly available online	1	2	3	4	5
9.	I feel anxious about how others will respond when I share a new photo on social media	1	2	3	4	5
10.	I fear that others have more rewarding experiences than me	1	2	3	4	5

11.	I feel overwhelmed with the flow of messages/notifications on my phone	1	2	3	4	5
12.	I feel lost or "naked" without my phone	1	2	3	4	5
13.	I get worried when I find out my friends are having fun without me	1	2	3	4	5
14.	It feels like there is always a reminder-like a flashing light or buzz-that there is some other message that I need to attend to	1	2	3	4	5
15.	I am constantly checking my phone for messages/notifications	1	2	3	4	5
16.	Most of my friends approve of me being constantly available online	1	2	3	4	5
17.	I feel nervous after I share a post or photo to see how others responded to it	1	2	3	4	5
18.	I feel a social obligation to be constantly available online	1	2	3	4	5
19.	I feel stress because I must sift through a lot of unimportant notifications to get to the important ones	1	2	3	4	5
20.	I put a lot of effort into composing messages and posts I share online	1	2	3	4	5
21.	I get anxious when I don't know what my friends are up to	1	2	3	4	5

22.	I put a lot of effort into finding or creating a photo that others will approve of when I post it online	1	2	3	4	5
23.	I spend too much time responding to notifications/messages	1	2	3	4	5
24.	I feel nervous about how others will respond when I post new updates on social media	1	2	3	4	5

APPENDICES

ATTITUDES TOWARDS SEEKING PROFESSIONAL PSYCHOLOGICAL HELP SCALE – SHORT FORM (ATSPPH-SF)

Please check the response that applies to you for each item:

1. If I believed I was having a mental breakdown, my first inclination would be to get professional attention.

   Disagree (0) Partly Disagree (1) Partly Agree (2) Agree (3)

2. Talking about problems with a psychologist is a poor way to get rid of emotional conflicts.

   Disagree (0) Partly Disagree (1) Partly Agree (2) Agree (3)

3. I would be confident that I could find relief in psychotherapy during a serious emotional crisis.

   Disagree (0) Partly Disagree (1) Partly Agree (2) Agree (3)

4. It's admirable to cope with conflicts without professional help.

   Disagree (0) Partly Disagree (1) Partly Agree (2) Agree (3)

5. I would want psychological help if worried or upset for a long time.

   Disagree (0) Partly Disagree (1) Partly Agree (2) Agree (3)

6. I might want psychological counselling in the future.

   Disagree (0) Partly Disagree (1) Partly Agree (2) Agree (3)

7. Emotional problems are more likely to be solved with professional help than alone.

Disagree (0) Partly Disagree (1) Partly Agree (2) Agree (3)

8. Psychotherapy is of doubtful value considering time and expense.

Disagree (0) Partly Disagree (1) Partly Agree (2) Agree (3)

9. People should solve problems on their own; counselling is a last resort.

Disagree (0) Partly Disagree (1) Partly Agree (2) Agree (3)

10. Personal troubles usually work out by themselves.

Disagree (0) Partly Disagree (1) Partly Agree (2) Agree (3)