Corporate Psychological Responsibility (CPR) and DEI

Johanna Sweet
Roanoke College

Diversity, Equity, and Inclusion (DEI) faces political scrutiny as organizations are asked to eliminate DEI platforms. Organizations should focus DEI initiatives into a more systematic and holistic approach where DEI is embedded into its foundation. This manuscript discusses Corporate Psychological Responsibility (CPR) (Sweet & Wagner, 2023) as a framework that assimilates DEI goals within a broader organizational responsibility. CPR, built from motivational theory, promotes fair treatment but also fosters environments that lead to employee motivation. By utilizing CPR's framework, organizations can minimize systemic inequities by offering a framework for employees to recognize, support, and report DEI concerns.

Keywords: diversity, equity, inclusion, DEI, Corporate Psychological Responsibility (CPR), motivation theory

INTRODUCTION

Corporate Psychological Responsibility (CPR) is the heart of Diversity, Equity, and Inclusion (DEI) initiatives. As we move forward in a time where DEI deconstruction is requested, perhaps we should be looking at how we can mitigate issues by getting to the root problem, creating cultures where all individuals can flourish. DEI issues arise from systems and structures that create perceived and real inequities. To combat these issues, we need a framework that organizations can use to develop a culture of responsibility to its employees and stakeholders.

"Corporate Psychological Responsibility (CPR) is the responsibility of an organization to focus on psychological factors that impact employees to create a competitive advantage for all stakeholders" (Sweet & Wagner, 2023, p. 1). The five pillars of CPR are health and safety, positive relationships, psychological capitals, valued rewards, and fair organizational practices. It includes DEI initiatives in the pillar of fair organizational practices, which is linked throughout the remaining pillars.

CPR offers terminology and a framework that identifies the responsible nature organizations have, and supports initiative from The World Health Organization (WHO), American Psychological Association (APA), and National Institute for Occupational Safety and Health (NIOSH) on creating psychologically healthy workplaces. One step in shifting culture, and thus DEI, is to address that organizations have a psychological responsibility to its employees and stakeholders.

CPR encompasses DEI with fair organizational practices and creates a culture where all individuals are motivated. The framework from CPR is built from motivational theory and provides a win-win between an organization's desire to be successful, and employees desire to work at an institution that is equitable and values their contribution.

This manuscript explores how CPR can be used to support DEI initiatives and to call to attention that organizations have more than a social responsibility, they have a psychological responsibility to their stakeholders. This manuscript is significant as "CPR – Corporate Psychological Responsibility" offers a systematic organizational framework that organizations can implement, and offers common terminology outside of DEI that is more holistic.

LITERATURE REVIEW

Sweet and Wagner (2023) utilized thirteen seminal theories in motivational theory to identify fifty-five concepts that led to five themes or pillars. See Table 1 for a list of factors identified in the literature review that created CPR Pillars. The components of the theories were coded, many overlapped, and thus the five themes or pillars emerged. These five pillars created the foundation for CPR. Motivational theory was utilized as the components in the theories are primarily psychological and benefit the employee, but also lead to motivation which benefits the organization. This is significant as "CPR is the intersection between doing what is right for the employee and maximizing human resources for positive organizational outcomes" (Sweet & Wagner, 2023).

CPR consists of five pillars: health and safety, positive relationships, psychological capitals, valued rewards, and fair organizational practices (Sweet & Wagner, 2003). The model of CPR overlaps each of the pillars, with fair practices and policies being the "glue" at the center of the model. The pillars function within the framework's bounds of fair practices and policies. An organization can implement valued rewards, develop psychological capitals, health and safety, and positive relationships, but if you do not have fair practices and policies there is no equity and thus negates the others. See Figure 1 for the CPR Model and Figure 2 for the CPR Framework.

Definitions of Pillars

"Health and safety" are employees' physiological needs, health, safety, and security (Sweet & Wagner, 2023). It should be noted here that security and health include both psychological and physical. Fair and robust policies and practices (particularly within total rewards, employee relations, and working conditions), when implemented well, provide for employees in each of these domains.

"Positive Relationships" are defined as a sense of belonging, with positive influencers within the employees work community, and trust (Sweet & Wagner, 2023). Trust with not only peers, but with administration, managers, subordinates – 360 degrees. Belongingness should be viewed as similar to perceived "Inclusion" from a DEI perspective. "Employees need to feel a sense of belongingness, have positive influencers surrounding them, trust their colleagues and managers, and feel a sense of relatedness. Inclusion is emphasized here" (Sweet & Wagner, 2023,)

"Psychological Capitals" are employees' hope, confidence, optimism, resilience, and values (Sweet & Wagner, 2023). As Luthans has identified, the psychological capitals of hope, self-efficacy, optimism, and resilience are financial resources and human capital resources that an organization can develop and leverage for organizational success (Luthans et al., 2004).

"Valued Rewards" are the extrinsic and intrinsic rewards one receives and the reward from the job itself. Rewards can have a positive impact psychologically when executed well and fairly, and the reward is considered valuable by the employee. (Sweet & Wagner, 2023).

"Fair Organizational Policies" include the practices and policies of an organization. They are not only espoused, but they are enacted. The process to arrive at a decision, how resources are distributed, and how the decision is communicated is essential (Cropanzano, Rupp, Mohler, & Schminke, 2001). Fairness is a perception, and while organizations may be acting "fair", if they do not communicate well, fairness can be misinterpreted. It is important to note that fairness goes beyond how resources are distributed, to the process and how the decision was communicated.
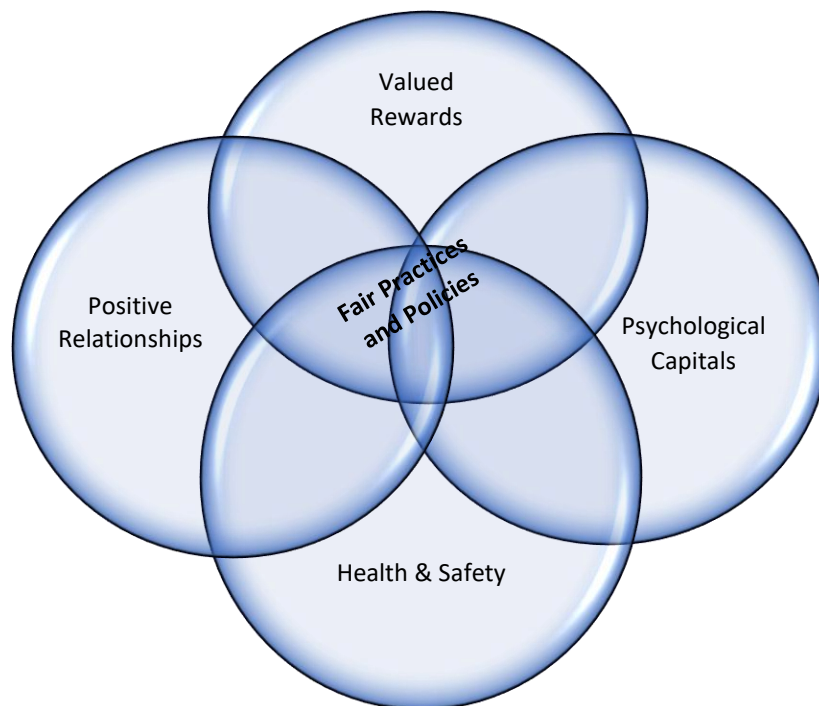
TABLE 1
FIVE PILLARS AND CONSTRUCTS IN COPRORPATE PSYCHOLOGICAL RESPONSIBILITY (CPR)

FIVE PILLARS	INFORMED BY IN THE LITERATURE
HEALTH AND SAFETY • Physiological Needs • Health • Safety • Security	Physiological needs (Maslow; 1943) Existence (Alderfer, 1969) Safety (Maslow, 1943) Security (Herzberg, 1959) Working conditions (Herzberg, 1959) Pay (Herzberg, 1959) Benefits (Herzberg, 1959)
PSYCHOLOGICAL CAPITALS • Hope • Confidence • Optimism • Resilience • Values	Hope (Luthans et al, 2004) Self-efficacy (Chung, 2018; Luthans et al, 2004) Resilience (Luthans et al, 2004) Optimism (Luthans et al, 2004) Expectancy (Vroom, 1964) Competence (Deci & Ryan, 2000) Personal accomplishments (Bandura, 1977) Values (Schwartz, 1992)
POSITIVE RELATIONSHIPS • Sense of Belongingness • Positive Influencers • Trust	Belongingness (Maslow; 1943) Relatedness (Alderfer, 1969; Deci & Ryan, 2000) Affiliation (McClelland, 1965) Verbal persuasion (Bandura, 1977) Interpersonal relationships (Herzberg, 1959) Vicarious experiences (Bandura, 1977) Instrumentality (Vroom, 1964) Interactional Justice (Cropanzana et al., 2007)
VALUED REWARDS • Extrinsic • Intrinsic • The job itself	Valence (Vroom, 1964) Feedback (Hackman & Oldman, 1976; McGregor, 1957) Status (Herzberg et al., 1959) Recognition for achievement (Herzberg et al., 1959) Benefits (Herzberg et al., 1959) Pay (Herzberg et al., 1959) The Job itself (Herzberg et al., 1959) Skill variety (Hackman & Oldman, 1976) Task identity (Hackman & Oldman, 1976) Task significance (Hackman & Oldman, 1976) Meaningful work (Herzberg et al., 1959) Responsibility (McGregor, 1957) Meaning (Chung, 2018) Challenging work (Herzberg et al., 1959) Self-esteem (Maslow, 1943) Feeling of achievement (Herzberg et al., 1959; McClelland) Growth (Alderfer, 1969; Herzberg et al., 1959) Self-actualization (Maslow) Power (McClelland; 1965) Increased responsibility (Herzberg et al., 1959)

	Autonomy (Deci &Ryan, 2000; Hackman & Oldman, 1976; McGregor, 1957) Self-determination (Chung, 2018)
FAIR ORGANIZATIONAL POLICIES & PRACTICES	Policies and Admin Practices (Herzberg et al., 1959) Fairness (Adams, 1963) Distributive justice (Cropanzana et al., 2007) Procedural justice (Cropanzana et al., 2007)

Note: Factors were identified from the literature review and categorized into CPR pillars (Sweet & Wagner, 2023)

FIGURE 1
CPR MODEL

Note: Sweet, J., & Wagner, S. (2023). Corporate Psychological Responsibility: CPR Is Needed. *Journal of Organizational Psychology, 23(3).*

FIGURE 2
CORPROATE PSCYHOLOGICAL RESPONSIBILITY (CPR) FRAMEWORK

Note: Sweet, J., & Wagner, S. (2023). Corporate Psychological Responsibility: CPR Is Needed. Journal of Organizational Psychology, 23(3).

Hierarchy and Pillars Co-Exist

The pillars co-exist as each pillar impacts the other. "The physiological state of an employee, for example stress and exhaustion from working long hours, will impact the psychological capital of the employees, just as psychological capital can combat stress and turnover (Avey & Luthans, 2009)" (Sweet & Wagner, 2023).

There is also a hierarchy to the pillars. The lowest pillar is health and safety, followed by positive relationships, psychological capitals, and ultimately valued rewards. Fair organizational policies and practices are listed below in the framework as they encompass the entire infrastructure and must be present for the other pillars to exist (i.e. benefits, rewards, procedure manuals, recognition, etc.). Health and safety are lowest as Maslow's (1943) Hierarchy of Needs indicates - when an employee's physiological and safety needs are not met, they will be less likely to focus on higher-order needs. Valued rewards are placed highest as rewards will not be valued or trusted to be received if negative relationships exist and employees have low levels of psychological capital.

DEI AND CPR DISCUSSION

CPR supports DEI initiatives. CPR offers a more holistic systematic organizational framework that organizations can use to develop a culture of responsibility to its employees and stakeholders. CPR offers a framework and terminology for organizations to discuss DEI and identify DEI issues for decision-making and reporting.

DEI Within the CPR Framework

CPR not only encompasses DEI with fair organizational practices, positive psychological capitals for all, inclusion with belongingness and trust in positive relationships, and equity in rewards. CPR supports DEI initiatives with fair organizational practices within each pillar and thus impacts the overall organization. It offers a framework to mitigate inequities.

CPR Framework Offers Terminology

CPR provides a more holistic framework for organizations to discuss DEI – not only in regards to fair practices but how those practices impact relationships, employee psychological capitals, and rewards. CPR provides terminology to employees in reporting concerns. CPR provides terminology for organizations and identifies the responsible nature/elements organizations have to employees. With a framework and terminology, employees can be trained to recognize, support, and report issues within the framework. CPR can be part of the employee handbook, discussed during orientation, and used in strategic decision-making and planning (to name only a few as examples).

DEI Deconstruction and CPR

The political landscape calls for eliminating and deconstructing diversity, equity, and inclusion platforms. It is important to ensure that diversity, equity, and inclusion are included into everyday practices, beyond having a DEI platform. CPR offers that platform, engulfing DEI into the framework. CPR could offer a new platform that is more holistic in nature to the responsibility that organizations have to all employees, including DEI.

CPR Responsibility

Like DEI and Corporate Social responsibility, organizations can "claim" to be focusing on CPR for marketing efforts. To mitigate this problem upfront, CPR should be sponsored by human resource management and championed by executives. Human resource management sponsoring CPR ensures that the framework is communicated throughout the organization, thus allowing all employees the ability to recognize, support, and report issues. Executives championing the framework ensures that it is being enacted, not merely espoused.

The framework must be clearly communicated (verbally and with resources) and have executive commitment. Employees should be surveyed on rewards to determine was is deemed valuable and managers should align projects and jobs with employee values. Performance management systems must also support and evaluate CPR goals. Policies and easy methods to report concerns related to CPR must also be communicated and supported with prompt and through responses. Psychological capital development initiatives should also be incorporated into the organization. One such example is the success Luthans's et al. (2006) reported with micro-interventions.

FUTURE RESEARCH AND CONCLUSION

Future research should implement CPR frameworks into organizations and conduct pre-post research on a multitude of variables. These variables could include, but not limited to, financials, productivity, reporting statistics, perception of positive relationships, perception of fairness, and psychological capital levels. Qualitative or mixed-method studies would be beneficial in discussing the effectiveness of implementation and training on CPR with employee's ability to recognize, support, and report DEI concerns.

Organizations are in need of a new platform to discuss DEI with the deconstruction of DEI platforms. CPR offers one platform where fair organizational policies and practices assist in creating an organization where employees feel safe (psychologically and physically), have their psychological capitals developed, have positive relationships, and have valuable rewards. This ultimately leads to a motivated workforce, and thus CPR can essentially be a competitive advantage for organizations who implement well. It is a win for DEI, a win for employees overall, and a win for organizations.

REFERENCES

Adams, J.S. (1963). Toward an understanding of inequity. *Journal of Abnormal and Social Psychology*, *67*(5), 422–436. Retrieved from https://psycnet.apa.org/doi/10.1037/h0040968

Alderfer, C.P. (1969). An empirical test of a new theory of human needs. *Organizational Behaviour and Human Performance*, *4*(2), 142–175. https://doi.org/10.1016/00305073(69)90004-X

American Psychological Association (APA). (2022, July). *Workers appreciate and seek mental health support in the workplace.* Retrieved from https://www.apa.org/pubs/reports/work-well-being/2022-mental-health-support

Avey, J.B., Luthans, F., & Jensen, S.M. (2009). Psychological capital: A positive resource for combating employee stress and turnover. *Human resource management*, *48*(5), 677–693.

Bandura, A. (1977). Self-efficacy: Toward a unifying theory of behavioral change. *Psychological Review*, *84*(2), 191–215.

Burke, R.J. (2019). Creating psychologically healthy workplaces. In *Creating Psychologically Healthy Workplaces* (pp. 2–41). Edward Elgar Publishing.

Burton, J., & World Health Organization. (2010). *WHO healthy workplace framework and model: Background and supporting literature and practices*. World Health Organization.

Chung, Y.W. (2018). Workplace ostracism and workplace behaviors: A moderated mediation model of perceived stress and psychological empowerment. *Anxiety, Stress, & Coping*, *31*(3), 304–317.

Cropanzana, R., Bowen, D.E., & Gilliland, S.W. (2007). The management of organizational justice. *Academy of Management Perspectives*, *21*(4), 34–48.

Deci, E.L., & Ryan, R.M. (2000). The "what" and "why" of goal pursuits: Human needs and the self-determination of behavior. *Psychological Inquiry*, *11*(4), 227–268. https://doi.org/10.1207/S15327965PLI1104_01

Grawitch, M.J., & Ballard, D.W. (Eds.). (2016). Introduction: Building a psychologically healthy workplace. In M.J. Grawitch, & D.W. Ballard (Eds.), *The psychologically healthy workplace: Building a win-win environment for organizations and employees* (pp. 3–11). American Psychological Association. https://doi.org/10.1037/14731-001

Hackman, J.R., & Oldham, G.R. (1976). Motivation through the design of work: Test of a theory. *Organizational Behavior and Human Performance*, *16*(2), 250–279. https://doi.org/10.1016/0030-5073(76)90016-7

Herzberg, F., Mausner, B., & Snydermann B. (1959). *The motivation to work*. New York: Wiley.

Li, Y., Wei, F., Ren, S., & Di, Y. (2015). Locus of control, psychological empowerment and intrinsic motivation relation to performance. *Journal of Managerial Psychology*. Retrieved from http://digitalcommons.unl.edu/managementfacpub/145

Luthans, F., Avey, J.B., Avolio, B.J., Norman, S.M., & Combs, G.M. (2006). Psychological capital development: Toward a micro-intervention. *Journal of Organizational Behavior: The International Journal of Industrial, Occupational and Organizational Psychology and Behavior*, *27*(3), 387–393.

Luthans, F., Luthans, K.W., & Luthans, B.C. (2004). Positive psychological capital: Beyond human and social capital. *Business Horizons*, *47*(1), 45–50.

Maslow, A.H. (1943). A theory of human motivation. *Psychological Review*, *50*(4), 370–395. Retrieved from https://psycnet.apa.org/doi/10.1037/h0054346

McClelland, D.C. (1965). Toward a theory of motive acquisition. *American Psychologist*, *20*(5), 321–333. https://doi.org/10.1037/h0022225.

McGregor, D.M. (1957, November). The human side of enterprise. *Management Review*, pp. 41–49. Retrieved from http://www.psgoodrich.com/pc/docs/ARTICLES/HumanSideOfEnterprise.PDF

NIOSH. (2020). *Total Work Health Program.* Retrieved from https://www.cdc.gov/niosh/twh/default.html

Office of Environment, Health, Safety, and Security. (2022). *Psychologically Healthy Workplace Practices=Good Business.* Retrieved from https://www.energy.gov/ehss/psychologically-healthy-workplace-practices-good-business

OpenAI. (2025, March 4). *ChatGPT.* Retrieved from https://chat.openai.com

Schwartz, S.H. (2012). An overview of the Schwartz theory of basic values. *Online readings in Psychology and Culture*, *2*(1), 2307–0919.

SHRM. (2021, September 10). *Workplace Mental Health and Wellness Initiative Launched.* Retrieved from https://www.shrm.org/about-shrm/news-about-shrm/pages/workplace-mental-health-and-wellness-initiative-launched.aspx

Sweet, J. (2020, February). *Corporate Psychological Responsibility: CPR could save your organization: Introducing Corporate Psychological Responsibility* [Poster presentation]. The Academy of Human Resources Development 2020 International Research Conference in the Americas, Atlanta, GA.

Sweet, J., & Wagner, S. (2023). Corporate Psychological Responsibility: CPR Is Needed. *Journal of Organizational Psychology*, *23*(3).

Vroom, V.H. (1964). *Work and Motivation.* New York: John Wiley and Sons.

World Health Organization (WHO). (2022). *WHO Constitution.* Retrieved from https://www.who.int/about/governance/constitution