

Learning Organization and its Impact on Psycho Social Rehabilitation: A Case Study

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Abstract

This study brings about the effect of learning organizational practices and its impact on rehabilitation endeavours at a psychosocial rehabilitation centre working with the displaced street dwelling psychiatric patients in Kerala state in India. Most of the residents here come from different walks of life. Some are rescued from the trains; others are from the streets and a few of them are displaced mental patients from the neighbouring states. The methodology adopted for this study is a case study approach where the interview with professional staff, management team, and other stakeholders were done to understand the level of learning organizational practices in the organization after one year of learning organizational intervention. As part of the research, in-depth interviews and Focus group discussions were conducted with the beneficiaries and multi-disciplinary team to understand the level of rehabilitation and to understand the attitude of the people directly involved in the rehabilitation process. The result of the case study shows that learning Organizational practices changed the organization from its charity vision to a human right approach coupled with social work intervention resulted in scientific rehabilitation. The consistent effort of the management changed the organization as a learning organization where Peter Senge's five principles of learning Organization such as team learning, personal mastery, mental models, shared vision, and system thinking gave rise to professional approaches in organizational management, rehabilitation, and social work intervention. Out of the 235 abandoned mental patients, 100 of them are truly rehabilitated in one way or another ensuring dignity and self-worth. The findings of the research underline the need to replicate this professional rehabilitation model based on the Learning Organization to other regions of the country. This a good model for various Residential Institutions across the globe to change their traditional way of looking at their services as *Human Waste Management* and converting them into *Human Resource Management*.

Keywords: Learning Organization, Psycho Social Rehabilitation, Psychiatric Patients, Human Resource Management, Stakeholder

1. Introduction

The term learning organization characterizes the collective and continuous efforts of the employees to enhance their capacities to achieve a *shared vision* of an organization (Parajuli, Mahat, & Lingden, 2022). The Concept of Learning organization was first introduced by Peter M. Senge in the year 1990. He was a Senior Lecturer at MIT's Sloan School of Management in the United States. According to him the conceptual

fact behind this model is the primordial prevention of the risks of a rapidly changing business environment. As per his views, Personal Mastery, Mental Models, Shared Vision, Team Learning, and System Thinking are the prime factors in building a learning organization. Savita Yadav and Vinita Agarval (2016) in their conceptual paper on the benefits and Barriers of the learning organization and its five disciplines articulate that "the people working in the learning organizations are fully

awakened, people". They have ideal mental models guiding to achieve personal mastery by keeping mind the shared vision of the organization through system thinking. On the other hand, to reach the heights of success and sustainability in the rapidly changing business environment, organizational management should be flexible and decentralized rather than being unilateral and centralized. Here the management and directing body of the organization has to compromise their authority and power in certain circumstances. According to Handy (1992), the world is uncertain and nothing is definite, where we need organizations that are continuously renewing and revising the practices. In other words, learning organizations always create, capture, transfer, and mobilizes knowledge to adapt to a changing environment. The collective learning in turn leads to transformation. Here the *Learning* will be through experimentation, communication, transferring knowledge, and experience. Over the past decades, many researchers have recommended that building a learning organization is the only source of competitive advantage (De Geus, 1999)

However, when it comes to the effect of learning organizations up on psycho-social rehabilitation centres, it is not only about the development of the organization but also it is the act and art of inculcating more values and support to the so-called mentally ill and deprived population. Rehabilitation can be viewed in two different aspects. One is empowering the people with severe mental illness by giving them training and experience in a particular occupation and

secondly, increasing employment opportunities for the mentally ill population (Crowther et. all. 2001). However, both aspects ultimately aim to help the vulnerable person to regain and maintain the optimum level of functioning and quality of life rather than simply taking medicines and cursing the mental impairment. Therapies and other interventions develop an understanding and insight on the person about the illness and treatment. But vocational rehabilitation activities strengthen the person's ability and skill to go ahead competitive world. Proper training and guidance can make the person master in the area despite the severity of the illness

Lacks of knowledge, huge monetary requirements, absence of skilled staff are always persisting as the challenges in the field of psychosocial rehabilitation. Here in this case study, the researcher aims to portrait the phenomenal impact of the learning organizational practices in a psycho-social rehabilitation center upon developing a sustainable and feasible rehabilitation program. Literature are available on diverse views regarding the design and disciplines of the learning organization. However, this case study is based on the five disciplines that Peter Senge considers as the core of learning organization. According to Senge, a learning organization needs to do away with the notion that only top-level management can and do all the thinking for an entire corporation. Learning organizations want all it employees to focus on their inner resources and potential and build their community based on liberty, humanity and collective will to learn.

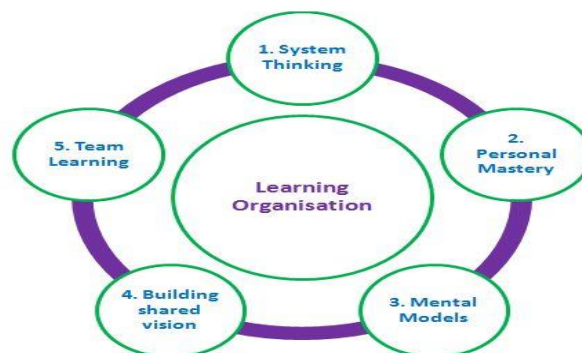


Figure 1: Peter M. Senge's (1990) fifth discipline model of the learning organization.

2. Background Of The Study

The authors selected Psycho-Social rehabilitation center X, a Social and Charitable Society which is a humanitarian entity committed to the care and rehabilitation of neglected and abandoned mentally ill brethren (Male only) in Kerala state in India. Owing to the unconditional and fabulous support of the people around, the Humanitarian endeavors of the entity is transformed as a Community Based Rehabilitation Centre for over 250 mentally ill people, teaching emotional, cognitive, vocational, and social skills, which empower the people diagnosed with mental illness live and work in their communities as independently as possible.

Most of the residents seek admission in the institution are found as hopeless, helpless, and worthless owing to the mental distress and disequilibrium in their mental health. They exhibit all types of behavioral and psychological problems. Most of the residents admitted in the institution are diagnosed with schizophrenia, Mood disorders, Anxiety disorders, and not specified psychosis. Even though the onset of mental illness and the course of illness are different the ultimate problem they face is the diminishing quality of life. The so-called chemical imbalance in the brain makes them schizophrenic and depressive, which in turn devastate their life without proper interventions.

In addition to the pharmacological interventions, residents have been giving different psychological therapies and interventions to manage symptomatic behaviors and retain balanced mental health. However, the results of these interventions were not always logical and productive owing to the unutilized skills and abilities of the mentally ill population. Moreover, as a charitable organization working for the welfare of the mentally ill population it was not always possible to confer them a high-quality standard of living owing to the financial issues, management issues, and professionalism. It is certainly a need to use the available human and financial resources of the organization incorporating continuous learning to accomplish professional rehabilitation and organizational development.

3. Problem Statement

As per the current statistics by the Department of Social Justice, there are 117 psychosocial rehabilitation centers in Kerala. As per the available data, only a few of them practice professional rehabilitation among the service users. A large percentage of human resources is being wasted in most of the rehabilitation centers due to the absence of rehabilitation programs. The literature also reveals that the vast majority of the rehabilitation centers do not have a vision, mission, and proper strategic plan and do not have the organizational structure to imbibe the management principles and Learning Organizational practices. Learning organizational practices in the rehabilitation centers are all most unknown in India. Though this practice has brought tremendous organizational changes in the corporate world, it is a fact that most of the Non-Profit rehabilitation Organizations do not practice learning among its employees and top-level management. Much research has not been focused on the impact of learning organization's significance to assess organizational performance and organizational development in the non-profit sector in India. It has been identified that no single plan, model, or tool can address all challenges or impediments that non-profit organizations encounter, as these organizations, the regions they exist in, and the clients they serve, are unique, and so must be the solutions. (McConnell, 2013)

While reviewing the literature for the cause, it's been found that the challenges behind implementing and executing rehabilitation programs in psychosocial rehabilitation centers are different and difficult, but at the same time easy to tackle with proper organizational practices and interventions through Learning Organizational Practises.

4. Research Questions

1. What is the level of understanding of the Learning Organization among management and staff in a psycho Social Rehabilitation center?

2. How does learning Organization intervention affect the organizational development of a psychosocial rehabilitation center?
3. How does learning organization intervention affect the rehabilitation of a psychosocial rehabilitation center?

5. Aims And Objectives Of The Study

The study aims to understand the level of utilization of learning organizational practices in the Psycho-Social Rehabilitation center. This study makes use of a case study approach to assess the awareness of the management and staff of the organization on Learning Organization and provide intervention within the social context and system-level within which learning occurs in the subject organization. The study also aims to measure the effectiveness of learning organization practices on organizational development and overall rehabilitation activities of the organization after the Learning Organization intervention.

6. Methodology

6.1. Design

The design of the study is a single case research study design. Single-case designs refer to research designs that are applied to experiments in which one entity is observed repeatedly during a certain period of time (Patrick Onghena, 2005). The case study is a popular method of qualitative analysis where the researcher makes in-depth study and observation of a social unit, be that n a person, family, institution, or a community. The reason to select this organization is its diversity in the

residents and the number of residents at this organization.

6.2. Data Collection

Phenomenological in-depth interviewing was conducted with administrative and management representatives of the organization to capture multiple views on the learning organizational practices and its impact on rehabilitation programs and organizational development. Focused group discussions were also conducted with service users (Residents) to capture the effect of rehabilitation programs in their lives.

6.3. Data analysis

Qualitative data analysis was done. To substantiate the impact of rehabilitation in the psycho-social development of the service users Mental Status Examination (MSE) and the Indian Disability Assessment Scale (IDEAS) were used.

7. Discussion

The study can be described in three stages such as *the Pre-intervention stage, Intervention stage, and Post-Intervention stage*. In the pre-intervention stage, the initial assessment of the organization to understand the level of learning organizational practices was done (Mahat & Aithal, 2022). It was in the year 2018 (March – June). Later, in the intervention stage, as a second phase of the study, the organization started to employ learning organizational practices for one year (August 2018 – August 2019). In the third stage, the post-intervention stage of the study, the assessment of the interventions was done. The three phases in detail are given below

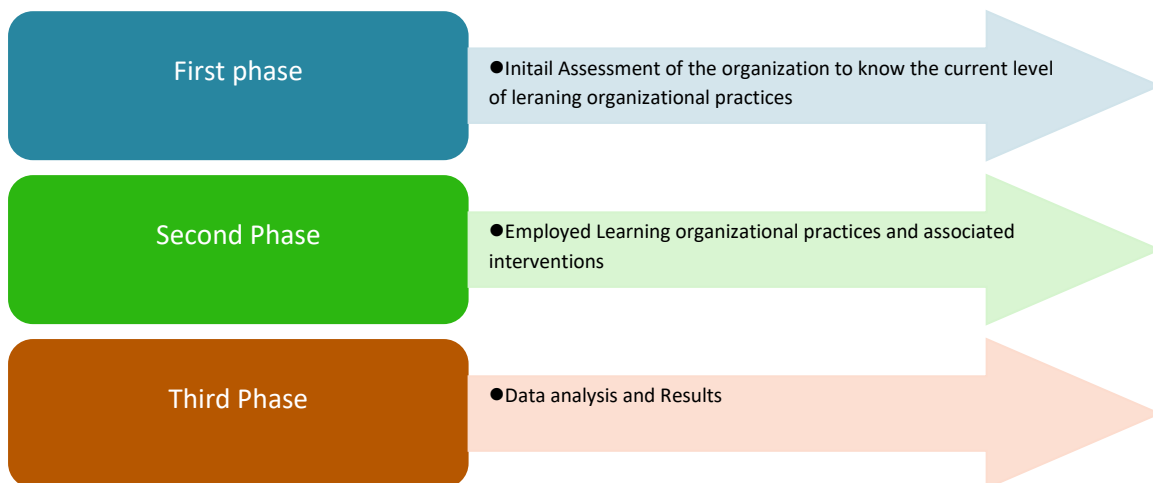


Figure 2: Phases of the study

7.1. Pre- Intervention Stage

The initial assessment was done to know the current level of learning organizational practices in the organization. The assessment was using *both primary and secondary data*. The secondary data analysis was done with the support of the Annual report of the organization, Audit report, Report by the rehabilitation manager, Reports from social workers, One-year assessment report by a multidisciplinary team, and the strategic plan of the year. In the primary data analysis the management, professional staff, and the

supporting staff were assessed by using a semi-structured questionnaire developed based on the 5 disciplines of learning organization proposed by Peter M Senge.

7.2. Intervention Stage

The second phase of the case study was implementing the learning organizational practices in the organization considering the results of the assessment obtained in the pre-intervention stage. How the learning organizational practices are employed and the interventions were given is described below.



Figure 3: Learning organizational practices implemented

7.2.1. Personal Mastery

As the employees started to get more autonomy and motivation, the commitment of the employees to the organization as well as in the collaborative learning process increased. Followed by, they started to display more dedication to their personal goals, as well as the organizational-wide learning objectives. Moreover, a highly motivated and efficient employee evaluated system developed in the organization. Furthermore pragmatic personal vision and knowing the reality

does help them to reach into the vision of Personal Mastery

7.2.2. Mental Models

The higher autonomy and motivation stimulated the staff to go for more innovations and experiments on their shared vision. Through consistent analysis, discussion, and optimistic reflection the employees evaluated themselves consistently to boost up organizational development. The shared goal started to determine what they think and act. Moreover, the staff are motivated to change their own pattern

and working style in accordance with the beliefs and approaches of the organization. Unknowingly, this optimistic approach helps them to create a positive mental model.

7.2.3. Team Learning

To ensure team learning the employees were given more opportunities for cross-training sessions and conferences. Cross teaching also was given for the management and administration. Moreover, the practice of sharing and recalling things helped the employees to acquire more knowledge. Reinforcement techniques also have been used to ensure learning practices. The employees are given a room for improvisation.

7.2.4. Shared Vision

As the learning organizational practices started, the employees together with management identified and widened the vision of the organization. Here actually the process of sharing the actual vision of the management to the employees happened. The acknowledged, shared vision was to convert *human waste management to human resource management*. As a charitable organization, in the beginning, the vision of the organization was to ensure basic human needs to the mentally ill neglected population. But this narrow vision hinders the overall development of the organization and the actual meaning of psychosocial rehabilitation. Here comes the

importance of changing vision and setting a shared goal at this organization. According to Garvin (1993) Systematic Problem Solving, Experimentation, Learning from Past Experiences, learning from others and transferring knowledge are the best way to imbibe learning organizational skills. The intervention stage was very committed to focus on these concepts which ultimately transformed the organization as a learning organization.

7.2.5. System Thinking

The fifth discipline of Senge’s learning organizational model. It is the key element that holds the other four disciplines in the learning organization. To replicate the model in the interventions, the organization trained the employees to see interconnections, patterns, and the structure of underlining problems and everyday actions. Instead of detecting the true cause of the problem trying to address it with irrational and non- systematic thinking would again devastate the problem. Thus the employees are educated and taught to see the interconnections and identifying the variable which causes the problem. Moreover, they developed a framework which has long-term trend and implications to address the issues arise.



Figure 4. Rehabilitation programs in the organization

7.3. Post- Intervention stage

The assessment and analysis were done through Focused Group Discussion and direct interviews. Focused group discussions were with five selected service users (Residents) who underwent the rehabilitation process. In the in-depth interviews, two persons from management have participated. From the administrative session a Social Worker, Case Worker, and counselors were interviewed. Two of the supporting staff were also interviewed to ensure the weight of the data. (Refer Annexure for the Interview Questions)

8. Data Analysis And Results

In the Pre-intervention assessment, the level of learning organizational practices at the organization was found barely anything. The management was the primary decision-makers and the administration was almost centralized. The employees were found to be unmotivated and the effort for team learning and for new experiments was limited. Instead of having a shared vision they were striving together for short term goals. The employees were not given much formal training and the opportunity to attend conferences and workshops. They were not sure about the vision of the organization. Personal learning aligned with the work habits were almost null. Rehabilitation activities were there in the organization but it was not up to the expected level. As per the report from the multidisciplinary team, the psychological interventions of rehabilitation activities were limited. The financial sustainability of the organization was also at risk.

8.1. Effect Of Learning Organisational Practises In Organizational Development

Through learning organizational practices, the organization developed a more *logical strategic plan* for further growth and development. Even more surprisingly the organization could develop a wider and achievable mission and vision. As an observable outcome, there was a surprising hike in the number of volunteers, supporting staff, trainees, and interns over the last one year.

As a charitable organization, the financial status of the organization was not sustainable in the beginning. This was one of the major challenges

against the maximum development of the organization. Gradually as the rehabilitation programs become more sustainable, financial stability improved and fundraising strategies became more proficient. International collaborations for financial support and project implementation increased. The organization has received two big-budget projects (Misean Cara, Ireland, and Cochin Shipyard) in the last year considering the relevance of the work done in terms of the need of the disability sector, Spread and Depth of the organization, Innovations, and sustainability.

During an in-depth interview, the President of the organization commented that **"...we together agreed on some principles and vision, necessary to achieve in the organization and committed ourselves for the cause, there the changes happened..."** Moreover as per him as a part of learning organizational practices, employees are started to given more formal training sessions in every three months facilitating their professional and personal development.

According to the Human Resource Manager of the organization, to ensure Team learning and Personal mastery of the staff, the management became more flexible and decentralized. He stated that **"...we believe in autonomy and freedom at the workplace. Our staff is motivated to learn from their mistakes. We never judge any of them considering the number of mistakes they made, there the learning happen"**

In the pre-intervention stage, it's been found that individual short-term goals and the efforts for the same were all in vain due to the lack of updated knowledge. While talking about the shared vision, a social worker of the organization commented that **"...more than initiatives and innovations our focus was only the successful running of the day to day activities of the organization..."** This limited sustainable development. He again mentioned that from the last year, as they changed the strategy of work through constant practice they started to see the interconnectedness of every activity in the organization and the results became extraordinary.

Caseworker of the organization commented: **"When we change the professional practices, we consider the organization's Vision and Mission. Even, we try to align our individual and personal goals to the objectives of the organization"**. According to him, all this happens to owe to new perceptions, motivation, and practice of the organization throughout the last year.

While discussing Mental Models, the Rehabilitation counselor of the organization said that **"I am quite surprised to see the unbelievable results throughout the last year. We are working for the next level of rehabilitation programs. Constant learning and New and unique approaches originated by sharing ideas with each other could help us in the process of transformation..."**

"...team activities, honest and open discussions are encouraged at our organization as a method of problem-solving..." shared a supporting staff. Moreover he stated that everyone in the institution treated equally in a meeting or a committee despite the position and authority they have in the organization. This is how the organization ensures team learning and interdependence. Moreover, the organization has started everyday evening meetings, Weekly presentations, and formal and informal training programs as an aid to share and acquire knowledge.

While sharing about the way in which individual roles and responsibilities within the organization aligned to the overall organizational vision, the Human Resource Manager Commented that, **"...with constant efforts and practice finally we developed a framework in common, aligned with all the objectives of the organization. This happened when we started to see interrelationships with each department as well as the effort of the individual employees..."**

As per the social worker about the procedure for implementing the change and improvement within the organization he states **"...At the Organization our staff considers issues and problems as a continuous process rather than a hinder to development or an event. Moreover while dealing with action plan different needs and**

concerns of the beneficiaries are also considered..."

One among the supporting staff shared: **"... I am very happy with the management here, They value and respect our ideas. A few months ago, during a staff meeting, I shared an idea to improve the marketing of rabbits and Ducks in the department of Animal Husbandry. We discussed the same and developed a more successful version of that idea and implemented it together. In the last month, the sales of the rabbit were 10 times higher than earlier. Management never judges us based on the education, experience, and past achievements and failures but they listen to us and accept us with all the limitations and drawbacks..."**

Everyone interviewed was equally agreed on the fact that the framework they developed through constant learning, shared vision, commitment, Optimistic approaches, Continuous self-improvement are the core factors of the success.

8.2.Effect Of Learning Organizational Practices In Rehabilitation

As the shared vision acknowledged, employees together with management started to explore more about the rehabilitation activities. They started to experiment with new ideas with higher autonomy. Management and team leaders encouraged them to share their ideas. With collaborative efforts and learning, the organization could able to expand the existing rehabilitation programs and introduce more new rehabilitation activities. Quite a few of them didn't work but it was not a matter for their further experiments. They learned from experience and went ahead with other programs. Finally, the team could able to develop a model package of Rehabilitation.

Despite the financial sustainability the quality of life of the rehabilitated residents also improved through vocational rehabilitation activities. Moreover, through focused group discussion, it came to know that they have improved the level of satisfaction and happiness in their lives. Followed by the rehabilitation programs to assess the Psychological and Social changes in the residents, Mental Status Examinations have been doing in every month and the changes reported in their

general behavior, talk, thought, perception, and cognitive functions were appreciable. Furthermore, the disability assessment was done using the Indian Disability Assessment Scale (IDEAS) and a gradual decline in the severity of the disability reported.

Residents who participated in the focused group discussion reported that they have improved the level of satisfaction and happiness in their lives. Before the interventions, they were not interactive and communicative. The Interpersonal relationship was very poor and most of them were aloof and not communicative. But later as they started to work with groups in particular rehabilitation programs the group cohesion and communication started to be increased. The increased cohesion and dynamics were also observed in the focused group discussions. Another thing shared in the focused group discussion was the satisfaction that they received when they started to get earnings from the vocational programs. Most of the residents were disappointed about the drainage of money of their family members for the treatment and medications. But as they started to get regular earnings the disappointment vanished. Mr. Biju (Pseudo Name- Member of Agriculture vocational rehabilitation Program) a Known case of Schizophrenia says ***"I came here in the year 2000, free of cost Tomy (Pseudo name- President of X) has been taking care of me throughout these years. They give me food, quite good accommodation, and cloths. But now I am extremely happy that i started to get earnings as daily wages for the last 6 months. They opened a bank account for me. More than that recently I could send some money for my mother's operation from my earnings..."***

A few other residents shared that the involvement of their family members in the psychiatric treatment process increased as they started to provide financial support to family members.

Another service user Mr. John (Pseudo Name- Resident of Psychosocial rehabilitation center X for last 20 years) shared during a focused group discussion that ***"...The infrastructure, the food, and other facilities improved for the last few months and now we are happy that our home is***

better... Otherwise, after the grueling works in the fields, we didn't have sufficient food and we used to be in an empty stomach"

Most of the residents improved some aspects of their cognitive functioning. Such as orientation on the date, people and day improved. That was experiential in the discussions as well. Mr. George diagnosed with clinical depression (Pseudo Name, Member in the Carpentry Rehabilitation Program) says ***"I was working as a carpenter for a well-known construction company. But as my illness started I couldn't control my feelings and behaviors. So I was terminated by my employer and I stopped working. Later here in this organization, I got the chance again to work. Now I have my own earnings and I am enjoying my work here..."***

Mr. Anil, diagnosed with Bipolar Mood Disorder (Pseudo Name, Member in the Nursery Rehabilitation Program) saying ***" I attempted suicide for more than 3 times. I was about to die twice. But as I reached here for rehabilitation with counseling and medicines they have offered me a livelihood too. Now I am extremely happy. More than money and savings, I can feel a kind of satisfaction. I am not having any suicidal thoughts. I wake up each day with lots of energy and motivation to work and live..."***

Moreover, in the last year the organization had developed "Mental health Software" with an intention to continuously assess the residents, those who are undergoing the rehabilitation process, through six valid tools – Case History, MSE (Mental Status Examination), BPRS (Brief Psychiatric Rating Scale), IDEAS (Indian Disability Assessment Scale), WHO QOL (Quality of Life) and WHODAS (WHO's Disability Assessment Scale). Through this evaluation process the Psychiatrist social worker, Occupational therapist, psychologist, counselor, and psychiatrist can easily assess the patient's progress so that he/she can update/ modify the rehabilitation plan according to the patients' status.

This innovation and results can be considered as an obvious outcome of the learning organizational practices.

9. Conclusion, Implications, And Recommendations

To encapsulate the findings, learning organizational practices are the definite solutions to sustain in the frequently changing and highly competitive business world. The companies who strive to acquire new learning are most likely to excel in the competitive business environment. The effects of learning organizational practices upon rehabilitation and in the development of the non profit organization are evident from the case study. Unlike individual learning, Learning in an organization is much more complex and it involves direct interactions of organizational culture and social cultures (Lord & Ranft, 2000). Every component of the organization was active and all were involved in planning, decision making and implementation. The understanding and the level of the learning organizational practices at Psycho-Social rehabilitation centre X was barely nil as per the findings from the initial assessment. The opportunities for the updated knowledge and constant learning were minimal as per the employees. The prime focus of the employee was the successful running of the daily activities; they were not much bothered about planning, forecasting and system thinking. But in the second phase of the study, as the learning organizational interventions are given, visible changes could be seen at each level of the organizational structure. At the management level, they became more flexible and acceptable towards the experiments and opinions of the employees. At the administrative level, the professional staff became more goal-oriented and active learners. A more highly efficient strategic plan was developed in the last year and the vision and mission of the organization became wider and achievable. The changes at each level lead in to a comprehensive development of the organization. The new approaches, methods, innovations, knowledge, experiments, practice, and information sharing as a part of the learning organizational interventions made the rehabilitation programs became more liveable and sustainable. As per the audit report in last year, the source of income and fundraising strategies improved. As the residents started to become more engaged in the vocational rehabilitation

programs the symptomatic behaviors reduced and the opportunities for the residents to reintegrate in the society became wider. End of the year the organization developed "Mental Health Software" as a recognizable outcome of the learning organizational practices. The rehabilitation program in the organization became more sustainable and productive. Moreover, the organization could develop a framework in common, aligned with all the objectives of the organization, in Peter Senge's (1990) viewpoint the *system thinking*, were seeing patterns and observing interrelationship between each and every action towards the shared goal appreciated. This developed as a key concept that embraces the rest of the four disciplines (Mental Models, Personal Mastery, Team Learning, Shared vision) together. The absence of any of these five disciplines would hold back the overall development of the organization.

However, the impact cannot be guaranteed as other corporate organizations on account of the limited resources and practicum in charitable organizations and NGOs. Again the approaches of the NGOs and other charitable organizations would be different from each other and the steadiness of the result obtained through the case study cannot affirm.

10. Limitation And Scope For Future Research

This is one of the few studies contributing to the body of knowledge by filling the gap in research on Learning Organizational practices in the Indian rehabilitation sector. The study value primarily lies in the fact that it clearly explains the extent of utilization of learning organizational practices in rehabilitation centers and clearly underlines the fact that the Learning Organization has got a great impact on organizational development and rehabilitation activities in the non-profit rehabilitation centre. First limitation of this study is that it employed a few interviews. Second, this research followed a single case study design operating in a particular geographic area. As such, the findings of the research cannot be generalized to the whole non-profit rehabilitation centre. One of the suggestions for future research is that, include more rehabilitation centres in the

nonprofit sector to understand the Learning Organizational practices and use a mixed methodology to understand the concept in depth.

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