Mental health is not just a psychological issue, but it also affects Business Environment. The basic research question is to see if businesses environment and mental health have any strong relationship. We propose a model that suggests mental health depends on various factors, including mental well-being itself, economic conditions, education, physical health, and, importantly, creating new businesses. This study addresses the intriguing question of whether starting a business is beneficial or detrimental to mental health. It depends on a lot of things, like how someone was feeling before, the state of the economy, their education, and even the fairness of the legal system. Our econometric model using Generalized Method of Moments (GMM) carefully takes all these factors into account to understand the bigger and novel picture of the question put forth, while taking care of the issue of endogeneity that may arise in such type of data sets. We measure our main dependent variable i.e. mental health through emotional well-being and depression, while business creation is assessed by environment, ease, clustering, skills, and worker availability. Furthermore, this groundbreaking study on a panel of Asian countries shows that income levels alone are not enough to predict mental health outcomes. Legal fairness and business-friendly environments play a surprising role in shaping mental wellness. By analyzing physical health, macroeconomic determinants, and environmental factors, the research highlights the complex interplay that affects mental health outcomes. The study's novel variables and large panel data analysis approach offer new insights into the policies and incentives that can optimize mental health outcomes for all citizens.

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Mental health can have a significant impact on business ventures. Chronic stress and anxiety, for example, can cause the release of stress hormones such as cortisol, which can negatively affect immune system function, blood pressure, and cardiovascular health. Depression and anxiety have also been linked to changes in brain structure and function, including reduced gray matter volume and abnormal activity in certain areas of the brain. In some cases, mental health conditions may also lead to unhealthy behaviors, such as substance abuse and poor sleep, which can further impact physical health. Mental health is a silent epidemic affecting millions around the globe. In a typical country, the statistics are sobering—one in five people suffer from depression or anxiety disorders. But with this groundbreaking research, we're breaking the stigma and shining a light on this often-neglected issue. By revealing the true extent of mental health challenges and the human toll they take, this study offers a rallying cry for action and underscores the urgent need for a comprehensive, evidence-based approach to mental wellness (Hossain & Purohit, 2019). In developed countries, mental illness accounts for close to half of disability benefits, whereas in many developing countries like those of Asia, it is still not even considered a significant issue to be addressed at the state level (Layar, 2017). Aslam et al. (2023) also delve into the intricate relationship between religion and happiness, questioning whether these two elements align. Those who suffer from mental health issues are less likely to gain jobs, if they even get it, it is more likely that they are unable to maintain them. Estimates predict that total employment could be substantially higher if people do not face mental health issues, adding revenues to national incomes.

Mental health is a universal issue, yet data analysis has focused primarily on individual-level data sets. But what about mental health outcomes across groups of regions? This pioneering study challenges the status quo and delves into the macro-level approach, examining mental health outcomes in regional data sets. By shining a light on previously unexplored data sets, the research broadens our understanding of mental health challenges and underscores the need for region-specific interventions. With its innovative methodology and fresh approach, this study represents a major breakthrough in mental health research and offers new hope for those affected by mental illness around the world. Given estimates in the prosperity index on average mental health at the country level gives hope that suitable incentives at a macro level can alter the state of mental health in ways that improve the efficiency of health care and thus add significantly to the literature on health economics. Opportunities to study how macroeconomic incentives along with improving physical health may affect national health care policies and their efficiency are relatively rare, though. Much of the existing literature relies on comparisons of fundamentally different groups of individuals at micro-levels—such as patients of limited geographical areas or combines payment effect with the financial protections of health care facilities (Addai et al. 2014; Grzywacz et al. 2004; Lavallee et al. 2021; Thorlindsson & Bjarnason, 1998; Wichers, 2014; Marieke et al. 2015). It is also easy to imagine that physical health status caters to more mental satisfaction and better abilities to cope with risks associated with mental health (Silveira & Allebeck, 2001).
Similarly, countries having different levels of income (gross domestic product per capita) can respond differently with varying efficiency levels in providing mental and physical health care services to the public (Layte, 2012). For example, underdeveloped countries may face resource strain due to low levels of education, technological constraints, and limited health care facilities (Anderson et al., 2008). Moreover, it’s possible they also place less emphasis on devoting revenues to development expenditures amid weak macroeconomic stability as indicated by Kumar et al. (2023). An Empirical Relationship between Entrepreneurial Training and Economic Growth of Pakistan. *Journal of Entrepreneurship and Business Venturing, 3*(1). https://doi.org/10.56536/jebv.v3i1.23. We proxy macroeconomic stability on three elements – differences in national incomes (measured by gross domestic product), employment levels, and inflation volatility (Cecchetti & Krause, 2001; Dornbusch, 1981; Ocampo, 2008). On average, roughly if countries have low per capita incomes and high inflation, they usually are facing the issue of unemployment as well (Crump & Şahin, 2022; Friedman, 1977; Manalo & Garcia-Vigonte, 2022; Mahalik, 2022 & Wolters, 2018). In such circumstances, a favorable environment for business creation along with guaranteeing legal fairness can provide higher employment opportunities, which are material to mental health issues related to financial pressures. On the same grounds, Aslam, Imran, and Chaudhary (2020) delve into the intersection of human resource management, unemployment, and underemployment in Pakistan; which provides a comprehensive analysis of the intricate relationships among these factors, shedding light on the challenges faced by the labor market in Pakistan.

Aziz et al. (2021) contributes a case study exploring the relationship between earnings and job satisfaction among home-based workers in Gujranwala and found unique dynamics of job satisfaction in the context of home-based work. In this paper, we take advantage of an exogenous change in economic incentives created by a “fair legal system” and “environment for business creation”—which may relax the limit on financial constraints linked with the average state of mental health of individuals by reducing stress, depression, confusions, and anxiety levels at basic. How much physical health status contributes to mental health status— is also a part of our investigation, while taking care of health outcomes that respond to macroeconomic stability factors such as incomes, education, and inflation. The research paper seeks to explore the relationship between mental health and the business in Asia. The central problem under consideration is the impact of initiating a business on mental health, taking into account diverse factors including economic conditions, education, and the fairness of the legal system. The primary objective is to develop a comprehensive model that considers these factors, assessing mental health based on emotional well-being and depression, while evaluating business creation in terms of environmental factors, ease, clustering, skills, and the availability of workers.
LITERATURE REVIEW

This mental health issues are the one of main factor in human capital development (Kumar et al., 2023; Zafar, 2021), which is a core element to economic development, both because mental issues carry importance to physical health and because it is so deeply linked with the three main measures of macroeconomic stability of a country i.e. inflation, employment and national incomes (Currie & Goodman, 2020; Zivin & Neidell, 2013; Petersen et al., 2012). Similarly, Aslam (2020) engages in the debate surrounding human capital and economic growth. Their study examines the role of institutions in shaping the complex relationship between human capital development and overall economic growth. Aslam et al. (2021) has also conducted a panel data analysis to unravel the factors influencing inclusive growth by examining the roles of institutions, digital inclusion, and social inclusion. On the same hand, Aslam and Shabbir (2019) explore the role of socio-digital inclusion in fostering inclusive growth, drawing evidence from world-level data, and contributes to the discourse on leveraging digital inclusion for broader societal progress. Similarly, Ghouse et al. (2022) provide a conceptual and empirical analysis of the impact of environment, digital-social inclusion, and institutions on inclusive growth. Farooq et al. (2019) also investigated the triangular nexus between institutional quality, trade liberalization, and agricultural growth in Pakistan within the context of institutional quality and trade policies.

Interestingly, dealing with mental health issues is not independent of economic outcomes in both the developing and developed world (Molarius et al., 2009). Mental health issues account for nearly forty percent of all diseases in rich countries (Organization, 2001). Mental health issues cost a huge chunk of revenue lost in welfare payments and tax money, which could have been used as government expenditures on health and education (Layar, 2017). Similarly, Aslam et al. (2017) investigate bi-directional associations among educational quality, institutions, and social inclusion and adds to the understanding of the complex relationships shaping educational outcomes and social inclusion. Treating mental health issues has the capacity to boost both employment and national output, with gains exceeding the cost of management (Zivin & Neidell, 2013). Whereas, employment opportunities may be granted transparently in the presence of legal fairness, which provides the footing for a conducive environment for business creation (Colvin, 2006). On the same hand, Aslam et al. (2019) also contribute to the understanding of inclusive institutional growth across selected Asian countries. Aslam and Ghouse (2023) also provides region-specific insights into the dynamics of trust within the financial sector, contributing to the understanding of regional variations. Aslam and Ghouse (2023) critically evaluates evolving paradigms and offers insights into strategies that align institutional quality, economic development with environmental sustainability. Aslam and Zulfiqar (2016) present a case study examining the policy framework for inclusive growth in selected Asian countries on the same grounds. Recently, Ghouse et al. (2021) explore the role of Islamic financial sector during the COVID-19 pandemic, focusing on its impact on political and financial events. On the same grounds, Ghouse et al. (2022) and Ghouse et al. (2023) contribute to the discourse on inclusive growth by providing a conceptual and empirical analysis of the impact of the environment, digital-social inclusion, and institutions.
Psychological treatment can also reduce an individual’s physical health expenditures, an estimate showing a decline by as huge as twenty percent (Cawthorpe et al., 2011; Elias & Paradies, 2016; Petersen et al., 2012). Another estimate shows that treating mental health disorders can further boost productivity growth (Layar, 2017). However, despite such contributions to national incomes of dealing with mental health issues, in most developing countries like those of low-income Asian countries, only a minority of individuals with depression or anxiety receive psychological therapy. In this reference, a study by Aslam et al. (2019) employ structural equation modeling (SEM) to analyze work preferences, motivations, and earnings in the informal market and provides a nuanced understanding of factors such as incomes influencing work dynamics in informal economies. Ghouse et al. (2021) explore the mediating effect of intrinsic motivation in organizational environments and its impact on innovative performance and contributes to understanding the internal dynamics influencing innovation within organizational settings. The linkages between economic variables and mental health is depicted in figure 1 below. Based on the discussion above on the literature on said variables and past studies, the following framework is developed for the study (as shown in figure 1).

![Figure 1. Conceptual Linkages](image-url)
People who suffer from mental health issues are also caught in a web of physical health issues and they typically end up using sixty percent more health care facilities than those who are equally ill but do not face mental health issues (Layard, 2017). This additional physical care of people costs nearly one percent more of the national income. Considering the gravity of the issue, providing incentives for evidence-based research and efficient policy implications to cope with a mental health issue should be at the heart of public policymaking at the national level, given the burden of mental health issues are more prevalent in the developing world, facing resource and financial constraints. As common in developing nations as in developed ones, mental health issues reduce employment rates, consumption-led growth, investment, and, national savings and leads to significant productivity loss (Cecchetti & Krause, 2001; Colvin, 2006; Dornbusch, 1981; Fein, 1958; Frank & McGuire, 2000; Golberstein et al., 2016; Zivin & Neidell, 2013; Grzywacz et al., 2004; Gupta et al., 2016; Jahoda, 1988; Knapp & Wong, 2020; McCrone, 2011; Molarus et al., 2009; O’Shea & Kennelly, 2008; Ocampo, 2008; Pal et al., 2022; Razzouk, 2017; Sharac et al., 2010; Tesfaselassie & Wolters, 2018). Investment in these regards can significantly improves life-satisfaction and quality of life (Barnes, et al., 2012; Getanda et al., 2015; Kim & Ko, 2018; Layte, 2012; Li et al., 1998). Aslam et al. (2022) investigate the driver role of financial development on economic complexity. They report the intricate relationship between financial development and the complexity of economies, particularly in the context of Belt and Road Initiative (BRI) participation countries. Another study by Aslam et al. (2023) has further contributed to the broader understanding of the interplay between economic complexity, property rights, justice, and governance. Maqsood et al. (2020) also investigated the impact of employment rate, exchange rate, and FDI investment on worker’s remittances and economic growth and found it a contributing factor. Qamar et al. (2020) has also analyzed real economic growth, much focusing on the role of institutional quality and fiscal policy in the context of Pakistan. Qamar et al. (2021) contributed to the understandings of fiscal spending in Pakistan by exploring both aggregated and disaggregated levels. Raza and Aslam (2020) have also addressed the corruption related institutional challenge in a country with limited access social order i.e. Pakistan from a fiscal policy perspective. They particularly focused on its impact on national savings. Another study at Pakistan level has Investigated regional growth causalities, dependency, and integration among the four provinces of Pakistan. Refer to study by Sadiq et al. (2018).

This section delves into the connections between mental health, business generation and development, while highlighting the pivotal role of institutional framework in shaping these dynamics. The impact of socio-digital inclusion and environmental factors on fostering inclusive growth, which is an improved from of economic growth, is further explored. Importantly, alongside this, influence of legal fairness on both business creation and transparent employment opportunities is discussed in this section. Moreover, regional variations in trust within the financial sectors are discussed too, shedding light on how intrinsic motivation within organizational environments can significantly influence innovative performance or business generation opportunities. Concluding, the section provides in-depth discussion of the influence of mental health issues on economic outcomes, emphasizing that addressing these issues can not only enhance employment rates, but also contribute mostly positively to inclusive growth and sustainable development of the country.
RESEARCH METHODOLOGY

This is a secondary research study, which has a panel data research design with the data. In this section, we make foundations for the rationale of linking the macroeconomic factors and physical health, which may affect mental health. Refer to the arrows leading to mental health in figure 1. Further, the impacts of mental health on economic growth is beyond the scope of this study amid data limitations, but provide a significant scope for future research, as shown by the links in figure 1.

Data and Sample Size

We have used data from the Legatum Prosperity Index by the Legatum Institute, which bids a unique insight into changes in world prosperity (Puente-López et al., 2022). Data is compiled for fifteen selected Asian countries over fourteen years (see Appendix; Table A1 for further details). Critical to the novelty of our work, the mentioned data source provides the most composite and consistent publicly available panel-level data about physical and mental well-being over a large data set of countries.

Data Analysis

To improve the reliability of estimates, panel dynamic macroeconomic modeling (GMM) is used. The lagged effect of mental health is used to capture the presence of any possible determinants of mental health, which improves the efficiency of results. This technique also caters to issues of endogeneity among data sets. For our analysis, we thus follow equation 1 based on conceptual and theoretical linkages developed in figure 1.

\[ \text{Mental Health} = f (\text{lagged mental health, Inflation, GDP, Education, Physical Health, business creation, Legal Fairness}) \ldots (1) \]

Table I below shows the description and elements of above-mentioned determinants of mental health, as presented in equation 1.

<table>
<thead>
<tr>
<th>First Order Codes</th>
<th>Second Order Codes</th>
<th>Indicators of Second Order Codes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health</td>
<td>Mental Health</td>
<td>Emotional wellbeing</td>
</tr>
<tr>
<td></td>
<td>(Dep. Variable)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mental Health</td>
<td>Depressive disorders</td>
</tr>
<tr>
<td></td>
<td>(Measure 1)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mental Health</td>
<td>Suicide</td>
</tr>
<tr>
<td></td>
<td>(Measure 2)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mental Health</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(Measure 3)</td>
<td></td>
</tr>
<tr>
<td>Physical Health</td>
<td>Physical Health</td>
<td>Physical pain</td>
</tr>
<tr>
<td></td>
<td>(Measure 1)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Physical Health</td>
<td>Health problems</td>
</tr>
<tr>
<td></td>
<td>(Measure 2)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Physical Health</td>
<td>Communicable diseases</td>
</tr>
<tr>
<td></td>
<td>(Measure 3)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Physical Health</td>
<td>Non-communicable diseases</td>
</tr>
<tr>
<td></td>
<td>(Measure 4)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Physical Health</td>
<td>Raised blood pressure</td>
</tr>
<tr>
<td></td>
<td>(Measure 5)</td>
<td></td>
</tr>
<tr>
<td>GDP</td>
<td>Macroeconomic</td>
<td>GDP per capita (log)</td>
</tr>
<tr>
<td></td>
<td>Stability</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(Measure 1)</td>
<td></td>
</tr>
<tr>
<td>Inflation</td>
<td>Macroeconomic</td>
<td>Inflation volatility</td>
</tr>
<tr>
<td></td>
<td>Stability</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(Measure 2)</td>
<td></td>
</tr>
<tr>
<td>Education</td>
<td>Macroeconomic Stability (Measure 3)</td>
<td>Secondary school enrolment</td>
</tr>
<tr>
<td>-----------</td>
<td>-----------------------------------</td>
<td>----------------------------</td>
</tr>
<tr>
<td>Legal Fairness</td>
<td>Absence of Legal Discrimination (Measure 1)</td>
<td>Non-discriminatory civil justice</td>
</tr>
<tr>
<td></td>
<td>Absence of Legal Discrimination (Measure 2)</td>
<td>Freedom from hiring and workplace discrimination</td>
</tr>
<tr>
<td></td>
<td>Absence of Legal Discrimination (Measure 3)</td>
<td>LGBT rights</td>
</tr>
<tr>
<td></td>
<td>Absence of Legal Discrimination (Measure 4)</td>
<td>Protection of women's workplace, education and family rights</td>
</tr>
<tr>
<td></td>
<td>Absence of Legal Discrimination (Measure 5)</td>
<td>Freedom of belief and religion</td>
</tr>
<tr>
<td></td>
<td>Absence of Legal Discrimination (Measure 6)</td>
<td>Government religious intimidation and hostility</td>
</tr>
<tr>
<td></td>
<td>Environment for Business Creation (Measure 1)</td>
<td>Private companies are protected and permitted</td>
</tr>
<tr>
<td></td>
<td>Environment for Business Creation (Measure 2)</td>
<td>Ease of starting a business</td>
</tr>
<tr>
<td>Business Creation</td>
<td>Environment for Business Creation (Measure 3)</td>
<td>State of cluster development</td>
</tr>
<tr>
<td></td>
<td>Environment for Business Creation (Measure 4)</td>
<td>Labour skill as a business constraint</td>
</tr>
<tr>
<td></td>
<td>Environment for Business Creation (Measure 5)</td>
<td>Availability of skilled workers</td>
</tr>
</tbody>
</table>

Source: Developed by the Authors, using data from Legatum Institute.

GMM Technique and Mathematical Model

Endogeneity plays an important role in generating biases in the estimators of conventional econometric tools. In such circumstances, the simultaneity problem needs to be solved to obtain usable results. A generalized method of moments (GMM) approach does not specifically require all the information on data distribution. The GMM method is commonly used for treating the issues of endogeneity and heteroscedasticity. Whereas, the dynamic panel estimators (difference and system GMM) estimators specifically takes care of small-sample data; i.e. the number of cross-sections (N) is greater than the period (T). Let’s suppose that we have the following econometric model;

\[ MH = X'\beta + \varepsilon \ldots (1) \]

In the above equation (1), the error terms is not dependent on the instrumental variables \( E(I) = 0 \). The coefficient vector is denoted by \( \beta \), where \( MH \) is the dependent variable, showing mental Health. The column vector of \( k \) independent variables are shown by vector \( X' \), where;

\[ X = (a_1, a_2, \ldots, a_k)' \ldots (2) \]

Also note that \( I \) represents the column vector of \( j \) instrument variables; where;

\[ I = (b_1, b_2, \ldots, b_k)' \ldots (3) \]

X and I may share their elements or variables because the moments of the regressors may be also used as instruments, and importantly \( j \) is greater or equal to \( k \). X, MH, and I are the matrices and a, and b are the variables. \( E = MH - X'\beta \) and the estimated residuals, then

\[ \hat{E}b = (\hat{eb}_1, \hat{eb}_2, \ldots, \hat{eb}_k) \ldots (4) \]
Equation 4 may also be written as;

$$\hat{\beta} = (\hat{\beta}_1, \hat{\beta}_2, ..., \hat{\beta}_k) = Y - X\beta$$ .... (5)

Orthogonality of the instrument to the residuals, $E(e, I) = 0$ is the necessary condition for the instruments to be valid. Theoretically and empirically, it can be written as;

$$E_K(I\epsilon) = \left( \frac{1}{K} \right) + I'\hat{E}$$ .... (6)

**RESULT AND DISCUSSION**

We now test whether business creation, macroeconomic stability indicators and physical health induce individuals to engage in behavior associated with better mental health levels. The results are reported in Table II. The final Model reports the total effects of mental health determinants i.e. without exclusion of any possible significant determinant of mental health, as mentioned in equation (1). In models (1, 2 and, 3), we carry out a sensitivity analysis to further add credibility to the results. Model (1) excludes the environment for business creation, while model (2) we further reduce legal fairness effects and, model (3) excludes physical health, leaving only impacts of macroeconomic effects on mental health. Standard errors are clustered in the brackets below the coefficients.

Across the four models; we do not see significant effects prior to the inclusion of three main variables i.e. environment for business creation, physical health, and legal fairness, indicating that our control states were trending with similar effects in terms of significance and directions of impacts, similarly prior to their introduction. In the last fifteen years, we see positively significant, clear, and systematic evidence of the role of the business creation environment on mental health levels. Model (2) offers more “apples-to-apples” comparisons by measuring how physical health levels are positively and significantly related to observably mental health levels over a sample of fifteen selected Asian countries. Comparing results across models reveals the importance of any changes in determinants over exclusion inclusion criteria set for exploring the effects on mental health.

By excluding all mental health controls in the model (3) we are measuring how education, inflation, Nation income levels affect mental health, without attempting to control for any potential changes in the physical health symptoms. Focusing on column 4 (model 3), we see there are hardly any changes in significance and direction of impacts of macroeconomic stability indicators on mental health levels. It is worth noting that apart from inflation, all other treatment effects are positively associated with mental health in all four models. We can conclude with a high degree of certainty that along with the substantial impact of other variables, legal fairness and the environment for business creation can substantially increase mental health levels. The results are matching with studies of Ashford and Holschuh (2006); Colvin (2006); Ashford and Holschuh (2006); Kondo (2001) and Halpern (2014).
Discussing variable-wise impact on dependent variables, we can come up to following conclusions. The conclusive model (model 1) reveals that various factors such as lagged mental health, GDP, education, physical health, legal fairness, and business creation significantly influence mental health outcomes. Specifically, lagged mental health exhibits a positive and noteworthy impact on current mental health, indicating the lasting influence of past mental health status. While GDP has a positive effect on mental health, its significance is not established, suggesting that economic conditions alone may not be adequate predictors of mental health outcomes. Conversely, inflation shows a non-significant negative impact on mental health, implying that higher inflation rates do not necessarily correlate with deteriorating mental well-being. Education demonstrates a positive and significant effect on mental health, indicating an association between higher education levels and improved mental health. Physical health exhibits a highly significant positive effect, emphasizing the link between better physical health and enhanced mental well-being. Legal fairness contributes positively and significantly to mental health, suggesting that a fair legal system is conducive to improved mental health outcomes. Additionally, business creation shows a positive and significant effect on mental health, implying that initiating a business can positively impact mental well-being. The constant term signifies the baseline mental health level when all other variables are zero.

Table II: Results from Dynamic panel-data estimation, one-step system GMM

<table>
<thead>
<tr>
<th>VARIABLES</th>
<th>Final Model</th>
<th>Model 1</th>
<th>Model 2</th>
<th>Model 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lagged Mental Health</td>
<td>1.028***</td>
<td>1.050***</td>
<td>1.036***</td>
<td>1.036***</td>
</tr>
<tr>
<td>GDP</td>
<td>2.443*</td>
<td>3.488**</td>
<td>1.678*</td>
<td>2.530***</td>
</tr>
<tr>
<td>Inflation</td>
<td>-0.00758</td>
<td>-0.310</td>
<td>-0.371*</td>
<td>-0.521***</td>
</tr>
<tr>
<td>Education</td>
<td>7.925**</td>
<td>13.04***</td>
<td>10.86***</td>
<td>11.27***</td>
</tr>
<tr>
<td>Physical Health</td>
<td>21.24***</td>
<td>21.31***</td>
<td>16.33***</td>
<td></td>
</tr>
<tr>
<td>Legal Fairness</td>
<td>19.13*</td>
<td>19.79*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Business Creation</td>
<td>0.277**</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Constant</td>
<td>-105.6***</td>
<td>-118.7***</td>
<td>-71.08***</td>
<td>-74.22***</td>
</tr>
</tbody>
</table>

Note: Standard errors in parentheses, Standard errors in parentheses *** p<0.01, ** p<0.05, * p<0.1

The magnitudes of legal fairness have grown in the final model in comparison to model (1), which suggests that legal fairness may be significantly positive and conducive to achieving better mental health levels. The size of the coefficients associated with physical health typically increased slightly with the addition of more controls in the final model as compared to model (2), though estimates in
model (1) and final model do not vary much. However, the significance and positive relationship between physical health levels on mental health have remained unchanged in all three models.

It is also easy to imagine that higher income levels cater to more affluent mental health improvements (Burns, 2015; Dashiff et al., 2009; Murali & Oyebode, 2004; Petersen et al., 2012). For example, countries having lower per capita incomes may be under greater resource strain due to their inherent institutional structures, though it’s also possible they placed less emphasis on extracting revenue for health care facilities. On average, based on all models, roughly inflation creates mental pressures to manage more limited resources (Batstra & Frances, 2012a, 2012b; Caplovitz, 1981; Cheng, 1990; Witkin et al., 1994).

Drawing upon theoretical frameworks, this section posits the influence of multiple factors on mental health. These factors include mental and physical well-being, economic conditions, education, and the entrepreneurial environment or business creation. The evaluation of mental health incorporates established theories related to emotional well-being and depression, while the assessment of business creation aligns with theories concerning environmental factors, ease, clustering, skills, and worker availability. Our paper highlight the interconnectedness articulated by various theories between physical health, macroeconomic determinants, environmental factors, and mental health outcomes as mentioned in section two. Notably, our findings emphasize that income levels alone are insufficient predictors of mental health outcomes, aligning with theories that underscore the complex interplay of multiple determinants in shaping mental wellness. Unexpected contributors, such as legal fairness and business-friendly environments, are theoretically supported as crucial elements in shaping mental well-being. Additionally, our acknowledgment of the impact of physical health status on mental health aligns with theories related to macroeconomic stability factors, including incomes, education, and inflation, reinforcing the theoretical foundation of our study.

**CONCLUSION AND POLICY IMPLEMENTATION**

This section elaborates on the study's implications and is followed by the overall conclusion of the study.

**Theoretical Implications**

Mental health can have a significant impact on business environments. This present study of 15 Asian countries reveals that these business generation can play a crucial role in reducing financial stress and improving mental health outcomes. By analyzing the impact of macroeconomic variables like inflation, education, and income levels, as well as physical health, we offer a comprehensive review of the many factors that may affect mental health outcomes. The primary findings of the study are the establishment of a multifaceted relationship between the business creation environment and mental health. Moreover, the study emphasizes the influential role of factors such as mental well-being, economic conditions, education and physical health towards mental health.
Practical Implications

Regarding the practical implications of study, mental health is a critical issue for policymakers around the world, revealing the major factors that can affect mental health outcomes in selected Asian countries. This study highlights the important role of education, income levels, and physical health in preventing mental health issues and reducing welfare costs. Priority in policy-making should be placed on establishing a business-friendly environment and particularly, ensuring legal fairness, while acknowledging their influence on mental health. Furthermore, a comprehensive strategy for mental health concerns should encompass considerations of mental well-being, economic conditions, education, and physical health at very basic levels, rather than at macro-levels. Policymakers should further underscore the importance of enhancing physical health, along with mental health. Lastly, policy makers should put efforts to promote mental well-being, and should concentrate on instituting a fair legal system and nurturing a conducive environment for business creation.

REFERENCES


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