Wellness expectations within a telecommunications organisation

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Mini-dissertation submitted in partial fulfilment of the requirements for the degree *Magister Artium* in Industrial Psychology in the School of Behavioural Sciences at the

Vaal Triangle Campus of the North-West University

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May 2012

REMARKS

- The referencing, as well as the editorial style, as prescribed by the Publication Manual (6th Edition) of the American Psychological Association (APA), were followed in this mini-dissertation. This practice is in line with the policy of the programme in Industrial Psychology of the North-West University (Vaal Triangle Campus) to use the APA style in all scientific documents as from January 1999.
- The mini-dissertation is submitted in the form of a research article.

ACKNOWLEDGEMENTS

First and foremost I would like to thank my Saviour God, Son and Holy Spirit for giving me the strength and wisdom to complete this mini-dissertation.

"The LORD is my strength and my shield; my heart trusts in Him, and I am helped. My heart leaps for joy and I will give thanks to Him in song"

Psalms 28:7

I am truly thankful for every individual that has supported me in completing my mini-dissertation, especially the following individuals:

- My supervisor, Dr Danie du Toit, for keeping me sane, supporting and encouraging me through my mini-dissertation.

- My assistant supervisor, Prof. Marius Stander, for his help in bringing the end result into a reality and guiding me in the right direction.

- The Barros and Sacks families, especially my mom, dad, Lorna and Searle, for always being there for me and encouraging me with sweet words of wisdom and strength.

- My husband Cliff, for bringing laughter and big hugs in times of disappointment, stress, tiredness and doubt.

- My dear sisters, Ana and Mariza for being there for me when I needed them the most and pulling me through this dissertation.

- My sister-in-law Diana, who was the light at the end of the tunnel when I needed it the most.

- My language editor, Dr Diana Viljoen, who was generous enough to help me at the last minute and for doing such a great job.

- My boss Eddie Nunes for supporting me, being patient, for giving me the leniency and the freedom to complete my studies and for his great heart and understanding.

- My work colleagues, who kept encouraging me and for being a sounding board for my frustrations and happiness. A special thanks to Renette Dippenaar, Wim Rankin, Neil Nettman and Dr Wilma Coetzer.

- All individuals not mentioned above that have, unknowingly, contributed to my mini-dissertation in some way or another. I sincerely thank you.

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SUMMARY

TITLE

Wellness expectations within a telecommunications organisation

KEYWORDS

Wellness, employees' expectations, positive psychology.

Wellness is becoming popular as the human factor is realised in terms of empowering employees to perform through wellness initiatives and in the long-term gaining financial success of an organisation. Wellness is bound to be of growing importance in the future, as it is a business prerequisite and has far greater significance for the organisation, employee's managers and society as a whole. The real challenge is implementation of wellness initiatives and to gain employee and management participation.

The main objective of this research was to determine conceptualisation of wellness in the minds of employees, and to identify wellness expectations in a telecommunications organisation. This study was qualitative and explorative in nature with a total of 30 participants. Of the 30 participants, 15 were on a managerial level and 15 were in non-managerial positions. Semi-structured interviews were used to collect data. The data analysis was carried out by using the content analysis method to explore the meaning, events and states experienced by the participants.

The results indicated that participants viewed general health, physical and mental health; work-life balance; perceived organisational support and work environment as the 6 themes that describe wellness, with general health being the core element. Therefore, dividing general health into 4 main areas specifically; physical health, mental health, work-life balance and work health (perceived organisational support and ergonomics). Ranking the main aspects of wellness identified by participants from the highest to the lowest, the most frequently mentioned aspects not getting sufficient attention in this organisation were: ergonomics and perceived organisational support. Recommendations were made for workplace interventions.

CHAPTER 1

INTRODUCTION

This study was aimed at determining how wellness is conceptualised or defined by employees within a telecommunications organisation and to identify their expectations with regard to wellness initiatives. The study was conducted across various departments in the organisation. In this chapter, the problem statement (reason for this research), research objectives (main and specific), paradigm perspective and the research methodology (research design, participants, data collection and data analysis) of the research was discussed. The chapter concludes with an overview of the division of chapters.

1.1   PROBLEM STATEMENT

According to Geiger (2010); Hodge (2010); Marcus (2010); and Ryff and Singer (1998) the greatest asset of any organisation is its human capital, namely, the employees. Healthy employees contribute towards the bottom line of an organisation but are often overlooked, undervalued and simply treated as 'labour'. The authors also believe that human capital or employees will always be the biggest asset of any organisation. If an organisation nurtures, trusts and rewards its employees it should work towards the organisations benefit in the long-run. Geossl (2010) and Lopez and Synder (2003) concurs that employees contribute towards business continuity, hold valuable knowledge and important skillsets. They further believe that employees who feel recognised, valued and part of an organisation will put a great deal of effort into their daily tasks.

Organisations around the world are focusing on developing and improving their working environment in such a way that employees' needs are met by valuing and recognising them (Wheeler, 2011). Even though most organisations have wellness initiatives (or employee assistance programmes) in place, employees and managers are not necessarily aware of what employees' expectations with regard to wellness are. A discrepancy seems to exist between what wellness involves and what employees and managers really want from wellness programmes. Very little research could be found on the expectations of employees regarding wellness programmes in organisations. This study aims to contribute towards a better and richer understanding of the expectations of employees and managers regarding wellness.

Previous studies of employee wellness have produced different definitions of well-being. Research on the construct of wellness in South Africa does not investigate the expectations of employees regarding wellness programmes. Internationally, research on the expectations of employees in terms of wellness was focused on specific elements of wellness rather than approaching wellness from a holistic viewpoint. Lee (2006) investigated the relationship between environmental satisfaction and work outcomes, with a specific focus on how employees perceive characteristics of their physical environment and what they expect of their workplace. This study investigated the usefulness of the 'gap approach' in measuring employees' expectations of their physical environment. This study found that if expectations are not met it leads to dissatisfaction. However, exceeding expectations does not increase satisfaction levels (Lee, 2006).

Van Vuuren, De Jong, and Seydel (2007) explored the expectations of self- and organisational commitment concerning self- and organisational efficacy in the Netherlands. The most important finding was the feedback from the manager and employees. Research done in Columbia, South America, investigated employees' working environment and used 'employee expectation surveys' in an effort to promote employee well-being. The intervention had cut turnover rates in half by allowing employees to voice concerns anonymously (Greer, 2004; Roesti, 2003).

The research mentioned above contributed to the understanding of wellness and indicated that listening to employees will impact on the organisation's bottom line. It did not provide a clear understanding of how employees perceive and define wellness. Even though all the elements of wellness may be present in an organisation, the question then arises as to whether these elements address the critical issues and expectations of employees.

Expectations of wellness fall within the positive psychology paradigm. Crompton (2005) indicates that positive psychology constitutes a lifestyle that leads to a greater sense of wellness and satisfaction. Therefore, it encompasses positive emotions, character traits and enabling institutions which facilitate the attainment of the necessary sense of wellness and satisfaction (Seligman & Steen, 2005).

Wellness and satisfaction forms the cornerstone of all wellness practices in organisations. Over the past decade many of these wellness constructs, such as employee assistance

programs (EAP), work-life balance and engagement, have been measured and applied in South African organisations for application in counselling, individual and organisational development (Breed, 1997; Cilliers, 2001; Cilliers & Coetzee, 2003; Cilliers & Kossuth, 2002; Kossuth, 1998). When looking at the literature one may conclude that these constructs have been used to explain how employees function and develop in different fields, but it has not been used to understand employees' and managers' conceptualisation and expectations of wellness in the workplace.

Analysing employees in order to determine what makes them function and develop from the organisation's view is practiced often. However, asking the employees' expectations and how they define wellness and its contribution to improving their functioning and development is very rare (Kossuth, 1998).

Gaining an understanding of what employees expect from wellness provides the opportunity to derive accurate conclusions from their unique definitions of wellness. In addition, the telecommunications organisation will be able to understand what employees and management want and, as a result, find common ground. From this common ground wellness initiatives that are focused on the needs of employees can be derived. This study may contribute towards finding a way to retain and develop talent in this telecommunications organisation.

A number of research questions emerged from the statement of the problem:
- How do employees conceptualise or define wellness and what are their expectations?
- What is the level of wellness provision in the organisation?
- What impact will increased wellness have on the participant's expectations?
- What are the participant's expectations with regard to their manager's behaviour towards wellness interventions?

1.2   RESEARCH OBJECTIVES

The research objectives were divided into general and specific objectives.

1.2.1 General objective

The general objective was to conceptualise or define wellness from the employee's wellness expectations within a telecommunication organisation.

1.2.2 Specific objectives

- To determine the level of wellness provision within a telecommunication organisation.
- To determine the anticipated impact of increased wellness on the employee's expectations within a telecommunication organisation.
- To determine the behaviour of managers, perceived by the employee's to facilitate wellness within a telecommunications organisation.

1.3 PARADIGM PERSPECTIVE OF THE RESEARCH

A paradigm perspective that includes the intellectual climate and the market of intellectual resources (Lundin, 1996; Mouton & Marais, 1992) directs this research. A paradigm can be described as an authoritative framework which guides and explains the research (Botha, 1996; Struwig & Stead, 2001). Therefore, approaches and methods have been chosen as an endorsement of the paradigm.

1.3.1 Intellectual climate

The intellectual climate "refers to the non-epistemic or meta-theoretical assumptions and beliefs that are accepted as valid within a discipline at a given point in time" (Mouton, 1996). Assumptions regarding human beings adopted in this study include existentialism and cognitive behaviourism. Discipline-specific assumptions and presuppositions include social cognition, social information processing and the interrelatedness of culture, society, politics, economy, history and perceptions (Mouton, 1996).

1.3.2   Discipline

This research falls within the boundaries of the behavioural sciences, more specifically industrial psychology. The term 'industrial psychology' includes both industrial and organisational psychology. It comprises the scientific study and application of psychological theories, methods and strategies to workplace issues (Muchinsky, Kriek, & Schreuder, 2002). Furthermore, it can be defined as the scientific study of human behaviour and the application of knowledge to address problems in a work-related context.

Sub-disciplines of industrial psychology include personnel psychology, organisational psychology, ergonomics, vocational and career counselling, organisational development, consumer behaviour, employment relations and cross-cultural industrial psychology (Muchinsky et al., 2002). In this study, the focus is on personnel and organisational psychology, with specific reference to the expectations of employees and managers in terms of wellness.

Personnel psychology is defined by Plug, Louw, Gouws, and Meyer (1997) as the division of industrial psychology which concentrates on studying the psychological traits of the worker in relation to his job tasks and other workers. Organisational psychology can be seen as the study of human behaviour, attitudes and performance within an organisation; drawing from theory, methods and principles from disciplines such as psychology in order to learn about individual perceptions, values and learning capacities (Gibson, Ivanecevich, & Donnelly, 1991).

1.3.3   Meta-theoretical assumptions

Various paradigms are relevant to this research. Firstly, the literature review is done within the phenomenological philosophy, existential philosophy, cognitive psychology and cognitive behavioural paradigms, and lastly, the empirical study is done within the qualitative research paradigm.

1.3.4   Literature review

The philosophy of phenomenology has its origin in the work of Husserl, Heidegger, Sartre and Merleau-Ponty, who were instrumental in developing phenomenology in an existential and, later, dialectical direction (Kvale, 1996). The root assumption of phenomenology is the understanding of a concept from the participant's point of view (Giorgi, 1997; Leady & Ormrod, 2001; Macann, 2005; Struwig & Stead, 2001).

The assumptions of existential psychology are as follows: human beings are seen as unique individuals with different perceptions and world views. Free will and freedom of choice are emphasised and external determinism is rejected (Lundin, 1996). The aim in existential psychology is "to understand human beings in their total existential reality" (Lundin, 1996). Experiences of existential reality in relation to other people are important. Therefore, the phenomenological methodology underlies existential psychology.

Cognitive psychology is a study of language and its different components because it is seen as a reflection of mental processes (Lundin, 1996). Cognitive behaviourism explains differences in behaviour by referring to the different cognitive processes of people (Lundin, 1996). Both cognitive psychology and cognitive behaviour play an important role in the interpretation of people's perceptions and experiences.

1.3.5   Empirical study

The qualitative research paradigm emphasises the importance of understanding experience through the eyes of the participants (Meyers, 2006). The underlying epistemology in this research is interpretive (Henwood & Pidgeon, 1994; Meyers, 2006). The assumption is that reality is interpreted within constructs such as language, consciousness and shared meanings. The foundation of interpretive research is hermeneutics and phenomenology (Meyers, 2006).

This empirical study is presented within the phenomenological philosophy and method. As mentioned, the root assumption of phenomenology is to understand a concept from the participant's point of view (Giorgi, 1997; Leady & Ormrod, 2001; Struwig & Stead, 2001).

1.3.6 Market of intellectual resources

Mouton (1996) describes the market of intellectual resources as "…the 'stock' of resources that are directly related to the epistemic status of sciences". The two main categories are theoretical resources (nature and dynamics of reality, theories, models, interpretations, typologies and valid empirical statements) and methodological resources (methods, techniques and approaches).

1.3.7 Theoretical beliefs

The following theoretical beliefs are accepted in this study:

1.3.7.1 Methodological beliefs

Methodological beliefs can be defined as beliefs concerning the nature of social sciences research (Mouton & Marais, 1990).

This empirical study is presented within the phenomenological method. The phenomenological method describes the participant's experience or view in a specific context (Ingold, 1996; Kvale, 1996; Lundin, 1996; Smith, Jarman, & Osborn, 1999). This method includes description, investigation of essences and phenomenological reduction. Description refers to the objective description of experience while investigation of essences focuses on the common thread that runs through experiences described. The phenomenological method attempts to place presuppositions, assumptions, common sense and foreknowledge 'in brackets', in order to provide an unbiased and unprejudiced description of the experience. This process of 'bracketing' is called phenomenological reduction (Kvale, 1996).

1.4 RESEARCH METHOD

1.4.1 Literature review

Applicable literature was reviewed to conceptualise or define wellness after the findings have been conducted; analysis of expectations of employees on wellness was also reviewed (Creswell, 2009; de Vos, Strydom, Fouché & Delport, 2011)

1.4.2   Empirical Study

The empirical study consists of a selection of participants, data collection, and data analysis.

1.5   RESEARCH APPROACH

A qualitative study was undertaken. A predetermined number of participants took part in interviews. The interviews were interactive in order to assist participants to articulate their views and expectations (Burns & Grove, 2001). An exploratory approach was followed in order to gain insight into the participants' perceptions with regard to the phenomenon of wellness and their expectations of wellness programmes (Bless & Higson-Smith, 1995). The exploratory approach is applicable when the study is in a new era (de Vos, Strydom, Fouché & Delport, 2005). This study will fall under the phenomenological design as it was aimed at describing the meaning of a phenomenon, topic or concept for various individuals (Creswell, 1998). The phenomenological design brought the meaning or essence of the experience to the fore (Moustakas, 1994). Typically, this type of research involved gathering a large amount of information from a small sample group (Struwig & Stead, 2001).

1.5.1   Participants

A non-probability, sequential, voluntary, purposive sampling method was used in this research, as the method selects individuals for participation based on the expectations of their wellness for the purpose of sharing knowledge (Streubert & Carpenter, 1999). Maximum variation sampling was used as this study utilised a diverse sample of individuals to find the core experience of the participants regarding wellness in organisations (Struwig & Stead, 2001).

The participants were selected from departments across the telecommunications organisation and from various job levels. Of the participants, half were managers and the other half, non-managers.   The aim was to understand views and expectations of wellness from the employees' viewpoint.

1.5.2   Data collection

Permission to gather information in the telecommunications organisation was gained through formal, verbal discussions with the management of the organisation. The purpose of the research and the advantages thereof were explained. The participants were selected with the assistance of management.

The purpose and advantages of the research were explained to the participants. Ethical issues, such as confidentiality and anonymity were addressed. The participants were asked to give their informed consent by signing an applicable document with an option to back out at any time. The confidence of participants was secured through rapport. In depth, semi-structured interviews were conducted on a one-to-one basis. The interviews were recorded with the consent of the participant.

1.5.3   Interviews

All the interviews were conducted on site at the telecommunications organisation. The researcher ensured that the conditions, under which the interviews were conducted, were neutral, and free of any interruption, noise and extreme temperatures. The researcher ensured that the participant felt safe and comfortable, as suggested by de Vos et al. (2011)

All the interviews started with the researcher introducing herself, thanking the interviewee for their voluntary participation and describing the purpose and advantages of the research (Flick, 2002; Gaskell, 2000). The reasons for recording the interview were explained, confidentiality was ensured and the interviewer requested permission to use a recorder during the session.

The researcher used a non-directed approach in the interview, which consisted of open-ended questions. The focus was to gain insight into the participant's understanding and expectations of wellness. The participants were asked one open-ended core question, and four probing questions. The researcher encouraged the participants through open body language, eye contact, nodding and other reinforcements (Flick, 2002; Gaskell, 2000). After each interview the researcher wrote brief field notes on her observations, assumptions, insights and emotions stemming from the interviews.

1.5.4   Data integrity

The concept of validity as quality of craftsmanship is not limited to a postmodern approach, but becomes pivotal with a postmodern dismissal of an objective reality against which knowledge is to be measured. The craftsmanship and credibility of the researcher becomes essential (Kvale, 1996). In an attempt to ensure the integrity of the methodology, the quality criteria for an interview, the interview subjects, the interviewer qualifications, quality of questions and answers, length of questions during the interview, and the probing questions, were reviewed with an experienced interviewer.

The structure of the interview (semi-structured) and the type of questions (open-ended) supported the objectives of the study, that is, to gain insight into the expectations of the participants and their conceptualisation of wellness. The researcher took care not to ask leading questions, which could pollute the participant's own opinion and perspective. The interviewer attempts to remain objective (Barbour, 2008; Marshall & Rossman, 2011). Kvale (1996) stated that an interview is neither objective nor subjective but rather is an inter-subjective interaction between interviewer and interviewee.

To ensure that the data was accurately captured, the interviews were recorded and then transcribed by an experienced transcribe.

Various methods could be used in validating the analyses and interpretive processes in qualitative research (Kvale, 1996). The methods used in this study included: checking for representativeness of sample and for researcher effects, using field notes, triangulation, and ensuring inter-rater reliability (Leady & Ormrod, 2001).

1.5.5   Ethical issues

The primary ethical aspects, as identified by de Vos et al. (2011) and Trochim and Donnelly (2007) were addressed. These include informed consent; avoidance of harm; voluntary participation; confidentiality; debriefing of participants; actions and competence of the researcher; and publication of findings.

Informed consent was ensured by briefing every participant on the purpose and procedure of the interview. The participants were requested to give their informed consent in writing. Issues, such as how the anonymity of a participant was ensured, were discussed. Participants who experienced discomfort with any question would be re-assured by the researcher. Furthermore, the researcher ensured that the interviews were utilised for data collection and did not become therapeutic sessions.

1.6   DATA ANALYSIS

The interviews were analysed, by means of content analysis in order to identify common themes in people's descriptions of their expectations of wellness (Leady & Ormrod, 2001; Struwig & Stead, 2001). The process of content analysis starts with initial coding. Coding categories would be developed once the interviews and transcriptions were completed. Categories were based on participants' views of wellness. After the coding phase, the interviews were analysed by three independent raters, who extracted the themes.

Once the themes were extracted, they were then grouped to arrive at shared themes from the participants' points of view. These shared themes were then grouped into clusters and further analysed for patterns and relationships (Bauer, 2000; Flick, 2002; Kidder & Judd, 1986; Kvale, 1996; Smith, Jarman, & Osborn, 1999).

A literature study was then conducted to compare findings of this study with existing literature.

1.7   DIVISION OF CHAPTERS

The chapters in this mini-dissertation are presented as:

Chapter 1: Introduction, problem statement, research objectives, paradigm perspectives and research methodology.
Chapter 2: Research article.
Chapter 3: Conclusions, limitations and recommendations.

1.8   CHAPTER SUMMARY

Chapter 1 provided the discussion of the problem statement and the objectives of the research. The research methods, data collection, as well as an overview of the chapters too follow, were provided.

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CHAPTER 2

RESEARCH ARTICLE

WELLNESS EXPECTATIONS WITHIN A TELECOMMUNICATION ORGANISATION

Claudia Sofia Sacks

Abstract

The main objectives of this study were to determine the conceptualisation of wellness in the minds of employees and to identify wellness expectations within a telecommunications organisation. This study was qualitative and explorative in nature. The sample consisted of 30 participants, of which 15 were on a managerial level and 15 were in non-managerial positions. Semi-structured interviews were conducted to collect data. The results indicated that participants viewed physical and mental health; work-life balance; perceived organisational support; work environment and ergonomics as the main themes which describe wellness. Participants indicated that their wellness expectations were not met. Ergonomics and perceived organisational support were the main aspects not receiving sufficient attention.

South African organisations are under extreme pressure to perform. Economic and social turbulence, the recent global financial crisis, the advent of technological advancements, shifting consumer demand, increased competition and rapid urbanisation has added strain to organisations (Froman, 2009; Renesch, 2006). As a result, employees also experience pressure to achieve more with fewer resources. This constant pressure to achieve contributes to employees being mentally, physically and emotionally drained (Rothmann, Steyn, & Mostert, 2005). Rising strain causes tension and fatigue amongst employees (Coetzer, 2004).

Macro changes affect the organisations' strategies, structures, culture and the nature of employees' jobs. The individual employee needs more than job specific competencies to achieve success. Employees have to adapt to a world characterised by constant change and uncertainty (Levasseur, 2001). Sundarasaradula, Hasan, Walker, and Tobias (2005) state that if employees are unable to adapt successfully to these changes, an organisation could fail. Amis, Slack, and Hinings, (2004) concurs that organisational survival is dependent on its employee's ability to adapt to these changing expectations. In summary, there seems to be a need for employees to be aware of and understand wellness and the benefits thereof. Greater awareness and more appropriate interventions could create a sense of wellness in an unhealthy organisation.

Wellness initiatives have received more attention as it has been shown that wellness can yield a financial return on investment. In the United States of America, the cost of depressed and unhappy employees was eighty three billion dollars per year (Kumar, McCalland, & Lybeck, 2009). Of that cost, thirty seven billion dollars was the result of absenteeism, fifteen billion the result of presenteeism and six billion was due to direct healthcare expenditures. It is imperative to prove the benefits of wellness to the management of an organisation (Afriforte, 2007).

Wellness is gaining popularity because employees and employers are realising the benefits of implementing wellness in organisations (Kumar et al., 2009). A recent Harvard study showed that every dollar an employer invests in wellness, yields an average of two dollars reduction in absenteeism costs (Fikry & Isaac, 2010). Spaeder (2008) found that if an organisation invests in wellness through correct wellness programmes, a positive return on investment, estimated to be five dollars per one dollar invested on wellness, can be earned. The current trend in enhancing wellness is implementing initiatives that are aimed at helping employees

cope with change and stress. In the long-run, these initiatives hope to contribute towards reducing absenteeism, turnover cost and healthcare costs (Fikry, & Isaac, 2010; Workplace Health Promotions Programs, 2006).

The concept of wellness is also gaining favour amongst South African organisations due to the fact that employers are becoming more conscious of the health of their employees (Lockwood, 2010). A press release from Discovery Vitality (2007), states that wellness programs are set to cut the country's annual absenteeism bill by twelve billion rand and improve productivity. Hulme (2011) agrees that rising healthcare costs are one of the biggest concerns for employers, brokers and medical schemes. Employers of all sizes and across all sectors are looking at ways to maximise productivity and efficiency and to ensure the long-term sustainability of organisations. To increase productivity and efficiency, a work environment where people can flourish is the key to a healthy business and the engagement of its people (Aston, 2010; Chapman, 2007; Hillier, Fewell, Cann, & Shephard, 2005; Jacobson, 1995; Meagher, 2010; Murphy, 1996; Pelletier, 1999).

Wellness

According to Myers, Sweeney, and Witmer (2000) wellness is a holistic approach, which meaningfully integrates the mind, body and spirit, leading to optimal health. Spaeder (2008) concurs that wellness is more than physical wellness as it involves the whole person. Wellness includes both physical and emotional wellness. Els (2005), as well as Sieberhagen, Rothmann, and Pienaar (2008) defines wellness in terms of the wellness of the individual. In their view, wellness refers to the meaning and purpose of each individual's life. They also see wellness as optimal health, having good relationships and being emotionally and mentally stimulated.

The Global Wellness Survey (2010), as well as Sieberhagen, Pienaar, and Els (2011) affirms that the term wellness is badly defined and not consistently understood by researchers. Despite wellness being ill defined and with no consensus amongst researchers as to its definition, it is starting to crystallise that wellness should incorporate physical, mental and emotional wellness. By including these aspects in wellness programs, organisations should be able to create a greater sense of wellness in the workplace (Health stress management, 2011).

From understanding the term wellness a number of wellness models were identified and are briefly discussed:

The *Holistic model of Work Wellness* (Fourie, Rothmann, & van de Vijver, 2008), describes wellness in the workplace. The model includes aspects such as organisational climate; negative (distress) and positive (eustress) stress and personal resources. Most organisations only focus on personal resources, lifestyle and health to promote wellness, without considering the demands and resources of the workplace (Fourie, Rothmann, & van de Vijver, 2008).

The *Integrated Wellness Management approach* (Afriforte, 2007), involves aspects associated with the employee including the family and a social support network. It emphasises that wellness models at work contribute to the social and familial well-being of individuals (Afriforte, 2007).

The *Job Demands-Resources (JD-R) Model* (Demerouti & Bakker, 2011; Tremblay & Messervery, 2011)*,* states that employees have job demands and job resources to cope with these demands. Employees in different organisations and in different fields of work encounter different types of demands and have different resources. If the job demands are perceived as overwhelming and they do not have the resources to cope with these demands, employees' energy will be depleted (Demerouti & Bakker, 2011; Tremblay & Messervery, 2011). This model does not include the demands and resources outside of work that may also affect the employee in either a negative or positive way.

The *Wellness Framework* from Hillier, Fewell, Cann, and Shephard (2005), conceptualised an instrument to assess wellness. The instrument is based on a hierarchical model. Access to food, water, hygiene, health and safety are at the base of the hierarchy with a welcoming environment, effective and productive inter-communication strategy, social networking (support and companionship) at the second level. The organisation's and individual's emotional intelligence are on the third level. Trusting relationships; understanding the organisation and its goals; working patterns; work-life balance; personal accountability and control over working practices are on the fourth level. Lastly, at the top of the hierarchy is successful wellness (Shephard & Cann, 2003).

These models were considered during the research process in terms of supporting or contradicting the findings of this study.

Wellness receives support and recognition from both employer and employee groups. In the workplace there are both tangible and intangible benefits to wellness initiatives, which should have a positive effect on an organisation's bottom line as well as work towards the benefit of the individual employee (Mckinney, Augustine, & Rothwell, 2008; Wojcik, 2011). According to Hillier, et al. (2005), Chapman (2007), and Augustine, et al. (2008), wellness that is effectively designed, implemented and managed can be shown to reduce cost of employee healthcare, reduce absenteeism and increase productivity. They also state that wellness could lead to higher employee morale and, ultimately, increase employee retention. By creating a greater awareness of and focusing on wellness in an organisation, the overworked and de-energised employees may experience a significant morale boost (Bates, 2009). He also states that when employees feel valued and cared for, the organisation attains a sense of cohesion that is vital to its efficient functioning.

Various researchers (Hillier, et al., 2005; Hooper, 2004; Parks & Steelman, 2008; Redelinghuys, 2011) found that employees' expectations and need for wellness initiatives should be considered by employers when addressing wellness in organisations. They stated that employees know what they need to create a healthier work environment. Motivating employees to express their expectations and needs might contribute towards an efficient workplace and a harmonious atmosphere. Addressing and understanding what satisfies employees will assist the employer in gaining the edge in increasing customer satisfaction, retaining employees and recruiting top talent (Meagher, 2010; Pomeroy, 2004).

The purpose of this study is to define wellness through the expectations of the participants in their organisation. By compiling definitions of wellness from these expectations, organisations will be able to know what employees want and need in order to create a working environment that is comfortable enough for them to experience wellness. This study could assist employers in identifying the effectiveness of the organisation's wellness provision. The study may also be able to identify the perceived characteristics managers should have that will facilitate the creation of wellness in an organisation. Lastly, by knowing the expectations of employees', organisations may be able to know how to focus on wellness aspects with the highest leveraging effect.

In summary, despite the increasing awareness and popularity amongst managers of organisations, wellness is not thoroughly understood or appropriately implemented. The purpose of this study is to assist employers and employees to better understand the concept of wellness. Conceptualising their own definitions of wellness could assist employers in addressing the employees' needs, thereby creating a healthier work environment. Through understanding how employees define wellness, organisations should be able to improve wellness in their work environment. This study could assist in ensuring that wellness interventions are suited to meet the employees', as well as the organisations', needs. The study may also benefit the organisation by assisting them to increase productivity and reduce cost. It could also assist in creating a healthy environment for employees by ensuring that their expectations are met.

The general objective of this study is to conceptualise or define wellness through understanding the employee's expectations within a telecommunication organisation. Secondary objectives are as follows:

- To determine the level of wellness provision within a telecommunication organisation.
- To determine the anticipated impact of increased wellness on the employee's expectations within a telecommunication organisation.
- To determine the behaviour of managers, perceived by the employee's to facilitate wellness within a telecommunications organisation.

RESEARCH DESIGN

Research Approach

This study followed a qualitative, exploratory and phenomenological approach. The methodological underpinnings of this study are positivist in nature as the researcher strived to not influence the views of the participants. This is done to ensure an objective perspective (Maree, 2009). Mouton & Marais (1990), and Mouton (2012) state that an exploratory approach is usually used for the exploration of a fairly unknown research area to gather new data and to determine patterns in the data. In this study, the research area is the conceptualisation of wellness and the expectations of employees and managers with regard to

wellness. An exploratory approach was followed in order to gain insight into the participants' perceptions with regard to the phenomenon of wellness and their expectations of wellness initiatives and programmes (Bless & Higson-Smith, 1995; Stebbins, 2001).

This study could be described as phenomenological as it identifies the perceived core of a phenomenon as described by the participants and focuses on the meaning of the lived experience of the participant (Greeff, 2009). Phenomenology is the understanding of a concept from the participant's point of view (Giorgi, 1997; Leady & Ormrod, 2001; Struwig & Stead, 2001).

The qualitative design was chosen because it gives an in-depth insight into employees understanding of wellness. The qualitative design covers an array of interpretive techniques, which seek to describe, decode, translate and uncover the underlying motivations, feelings, values, attitudes and perceptions of participants regarding a phenomenon, in this instance, wellness (Maxwell, 2005; Merriam, 2009; Muchinsky, Kriek, & Schreuder, 2005). Qualitative research provides rich textual descriptions of how people experience the given research issue which is, in the context of this study, wellness (Mack, Woodsong, MacQueen, Guest & Namey, 2005).

Creswell (2009), and de Vos, Strydom, Fouché, and Delport (2011) state that, in an exploratory study, the researcher may enter into the field study without definite expectations of results, such as a formulated hypothesis. Results are then only compared to existing literature after analysis of the data. This approach was followed in this study.

RESEARCH METHOD

Sampling

For the purpose of this study, a random sampling method was used. The sample was taken from a telecommunication organisation. The sample covered a variety of employees from different departments. One half of the participants were managers and the other half non-managers. Sample size was determined by saturation. According to Burns and Grove (2005), a saturation point in qualitative research is usually reached when themes start recurring. In this study, the saturation point was reached at 26 participants.

Table 1 gives an overview of the characteristics of the participants in this study, namely, gender, age, ethnicity, years of service in the organisation and education level.

Table 1

Characteristics of the participants.

Characteristic	Frequency	Percentage
Gender		
Male	11	42.3
Female	15	57.7
Age		
20-29	8	30.8
30-39	14	53.8
40-49	3	11.5
50-59	1	3.8
Ethnicity		
Black	5	19.2
White	14	53.8
Coloured	6	23.1
Asian	1	3.8
Years in Organisation		
0-3 years	17	65.4
4-6 years	5	19.2
7-9 years	2	7.7
10-12 years	2	7.7
Education Level Completed		
12th grade	9	34.6
Diploma or Certificate	5	19.2
Bachelor's or Higher	12	46.2

Of the participants, 42.3% were male and 57.7% were female. The majority of the participants were in the 30-39 year age category (53.8%). The second highest concentration was in the 20-29 year age category (30.8%). Racial distribution of the participants was concentrated in the Caucasian population group (53.8%). Of the participants, 65.4% were relatively new to the organisation and had been employed by this organisation for less than three years. The largest group (46.2%) of the participants were in possession of a Bachelor's degree or higher qualification. One half of the participants were in managerial positions and the other half were in non-managerial positions.

Data collection method

The participants were selected with the assistance of management. The researcher received a scheduled appointment list and worked with the organisation representative to reschedule missed appointments. The participants were interviewed over a 4 month period due to rescheduled appointments.

Semi-structured interviews were conducted in this study. The reason for using semi-structured interviews was that it was a more natural way of interacting with the participants. It also provided a deeper understanding from the participants' viewpoint regarding their conceptualisation and expectations of wellness in the organisation (Muchinsky, Kriek & Schreuder, 2005; Streubert & Carpenter, 1999).

A one-to-one interview schedule was compiled consisting of one open-ended, core question and four probing questions. The questions were formulated with the problem statement and research objectives in mind. The researcher used the questions as a guideline, in order to stimulate and guide the discussions. A funnel approach was used, which is a set of questions directed towards getting information on a single important topic or set of related topics (Kerlinger & Lee, 2000). The researcher took care not to project her own bias or expectations on the participants' views and expectations. Open-ended questions allowed the identification of new topics that were relevant to wellness (Hesser-Biber & Leavy, 2010). Open-ended and probing questions gave the participants' the opportunity to respond in their own words. The open-ended questions also gave the researcher the opportunity to evoke responses that were meaningful and salient, rich and explanatory in nature and enabled her to understand wellness from the participants' perspective (Mack, et al., 2005).

Semi-structured interviews are usually guided by a set of pre-determined questions that guide the interviewer. Participants are encouraged to freely express themselves. The interviewer asked the pre-defined questions, without giving any information regarding wellness, which could influence responses (Hesser-Biber & Leavy, 2010; Kerlinger & Lee, 2000; Trochim & Donnelly, 2007).

Kerlinger and Lee (2000) supports pre-defined open-ended questions as used in this study. Open-ended questions aided in gaining potential depth, flexibility, clearing up

misunderstandings through probing, achieving rapport, determining lack of knowledge, detecting ambiguity and revealing true perceptions, intentions, beliefs and attitudes about wellness.

The following questions guided the interview:

Core Question:

- When you hear the word "wellness", what is the first thing that comes to mind?

The probing questions were:

- Does this organisation provide you with the opportunity to meet your wellness expectations? What could they implement or change to meet your expectations?
- What is this organisation not providing in terms of wellness and what could they do to implement those aspects?
- If all your wellness concerns are properly addressed, what would you do differently?
- What does your manager do to create wellness at your workplace?

Ethical Considerations

Prior to participation, informed consent from the organisation and employees were obtained and an agreement was entered into, which clarified the obligations and responsibilities of both the researcher and participants, as suggested by Kerlinger and Lee (2000). Permission to gather information in the telecommunication organisation was gained through formal, verbal discussions with the management of the organisation. The purpose of the research and the advantages thereof were explained.

The purpose and advantages of the research were explained to participants. Ethical issues such as confidentiality and anonymity were addressed. The participants were asked to give their informed consent by signing a consent form. The participants were put at ease by establishing a rapport before the interviewed commenced.

Recording of data

In depth, semi-structured interviews were conducted on a one-to-one basis. The interviews were recorded with the consent of the participant. The structure of interviews was as follows:

1. Introduction and building of rapport.

2. The letter of consent was discussed, clarifying the nature of the study; reasons for the study; and ethical issues concerning confidentiality and anonymity, as well as the use of tape recordings were revisited. Participants' right to withdraw from the research at any time was repeated.

3. The protection of data was explained to the participants. Data was kept in a locked cupboard in the researcher's home to which only the researcher had access.

4. Semi-structured interviews utilising minimum verbal responses, reflections, summarisation and the use of silence, paraphrasing, and clarification (Burnard, 2005) were conducted. The non-verbal responses to questions were recorded by the interviewer.

5. Interviews were concluded by thanking the participant and clarifying expectations regarding feedback.

6. The researcher wrote very brief notes after every interview.

7. Tape recorded interviews were transcribed and checked three times by the researcher for any missing words or phrases.

Strategies to ensure data integrity

The codes were tested for consistency by utilising inter-coder reliability. Different coders independently allocated codes to the interview transcripts (Schilling, 2006). The inter-coder agreement involves utilising several experts in the field of the study to compare the themes with other researchers' themes (Miles & Huberman, 1994). Three professionals in the field of industrial psychology were provided with the transcriptions of the semi-structured interviews. Having inter-coders involved, confirmed the themes or categories identified by the researcher.

The procedure was explained to the coders in detail. Regular visits and phone calls were made to the coders to ensure that they understood the process. In this study the interviews were transcribed and reviewed several times to identify the thoughts of the participants on wellness in order to enable the researcher to conceptualise the term 'wellness' from their perspectives.

Data Analysis

Data was analysed by using content analysis. Content analysis involves a research method for the subjective interpretation of the content of text data through the systematic classification process of coding and identifying themes or patterns (Shannon & Hsieh, 2005; Zhang & Wildemuth, 2009). As previously mentioned, this study used the phenomenological and exploratory approach to understand wellness from the participants' point of view, as well as their perceptions regarding wellness.

The content analysis was completed by transcribing the interviews. Qualitative content analysis is most often used to analyse interview transcripts in order to reveal or model people's information relating to behaviours and thoughts (Schilling, 2006; Zhang & Wildemuth, 2009).

The transcriptions were then analysed for individual themes. According to de Wever, Schellens, Valcke, and van Keer (2006) as well as, Zhang and Wildemuth (2009), a theme might be expressed in a single word, a phrase, a sentence, or an entire paragraph. A code was assigned to text of any size, as it represented a single theme or issue that is of relevance to the research, which in the case of this study is wellness. The coding scheme was used to develop themes inductively from the raw data of the study. This method is known as the constant comparative method. This method not only enables the researcher to stimulate original insights, it also emphasises differences between themes (Glaser & Strauss, 1967; Zhang & Wildemuth, 2009). The researcher then, with the aid of the coders, explored themes, searched for relationships between categories, uncovered patterns and tested categories against the full range of data as suggested by Zhang and Wildemuth, (2009), and Schilling (2006). The data analysis procedures and processes were monitored and reported as completely and truthfully as possible (Patton, 2002). Interviews were utilised without any alterations.

Once the themed data was collected, recurring themes were identified and indicated by frequency of occurrence. The themes were then tabulated from the highest to the lowest recurring theme. Tabulation is the recording of the number of types of responses into the appropriate categories or themes (Clark & Watson, 1995; Kerlinger & Lee, 2000).

The brief notes (observation notes) made after each interview were also reviewed, however, no additional or new information was gained from the notes. De Vos, Strydom, Fouché and Delport, (2005), state that the use of brief notes is unnecessary if they do not bring any new information into a study. Therefore, the researcher decided not to use the brief notes as they contained no new information that was pertinent to the study.

FINDINGS

The results of the data analyses indicated themes of wellness that were important to the participants. From analysing these themes, the main objective of this study, which was to conceptualise or define wellness, and the secondary objectives, which were to determine the level wellness, expectations and perceived behaviour of managers of the employee' with regards to wellness and wellness initiatives, was met. No clear definition of wellness emerged but a number of different themes emerged which define wellness.

Table 2

The participant's meaning of wellness.

Question 1: *When you hear the word wellness what is the first thing that comes to mind?*			
Rank Order	**Theme**	**Frequency**	**Percentage**
1	General health	26	100
1	Physical health	26	100
3	Mental health	23	88.5
4	Perceived Organisational Support	22	88.5
4	Work-life balance	22	84.6
6	Work environment	20	76.9
7	Ergonomics	15	57.7
	Less cited themes		
8	Financial Health	11	42.3
8	Employee Assistance Programme (EAP)	11	42.3
9	Employee recognition	9	34.6
10	Job satisfaction	8	30.8
11	Nutrition	7	26.9
12	Happiness	6	23.1
13	Emotional Health	5	19.2
13	Stress management	5	19.2
15	Positive thinking	4	15.4
15	Professionalism	4	15.4
15	Intellectual Health	4	15.4
18	Employee development	3	11.5
18	Manager employee relationship	3	11.5
18	Awareness of wellness	3	11.5
18	Organisational culture	3	11.5
18	Energy management	3	11.5
18	Spiritual Health	2	7.7

Table 2 shows the recurring themes in rank order. Most participants viewed wellness as referring to physical health aspects (100%) and the general health (100%) of individuals. Mental health (88.5%) was the third most mentioned aspect. The fourth most mentioned aspect that defined wellness was work-life balance (84.6%), as well as perceived organisational support (POS) (84.6%). The participants' work environment (76.9%) and ergonomics (57.7%) were ranked next. The other less mentioned themes were also listed in rank order.

The following interview excerpts are examples of how participants conceptualise wellness. These excerpts refer to the most mentioned themes, namely, general health, physical health and mental health.

Participant 1: **"***...What you eat, exercise, mind and that sort of thing...constantly having to keep yourself positive...*"

Participant 2: "To my understanding it's about the quality of the state of a human being, health wise, mentally and so forth. How healthy are you..."

Participant 11: "Having your mind and body working in unison... if you have them in conjunction with each other it creates a more productive person at the end of the day".

Theme 1: General Health

General health refers not only to the absence of disease or illness, but also to the state of the individual's mental health and physical health. It incorporates physical, as well as mental health. It includes being aware of the functioning of one's body and having a healthy lifestyle and diet (Beaglehole, Bonita, & Kjellstrom, 2006; Botha & Brand, 2009; Edlin & Golanty, 2010; World Health Organisation, 1948).

Theme 2: Physical Health

Hettler (1976) and the American Physical Therapy Association (APTA) (2009), defines physical health as the absence of physical disease. It entails an understanding of the relationship between sound nutrition and the functioning of the body; being aware of the body's true identity; tension patterns and reactions; and balance and harmony.

Theme 3: Mental Health

Mental health is defined as a state of well-being in which every individual realises their own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to their community (World Health Organisation, 2012).

From both literature and the views of participants in this study, wellness incorporates the physical, mental and general health of an individual. In this study, participants defined general, physical and mental health similarly to how it is defined in literature. Both indicated that an individual should know and monitor the state of their general health by taking cognisance of the state of both their physical and mental health.

Theme 4: Perceived Organisational Support (POS)

POS is one's beliefs regarding the extent to which the organisation values their contributions and cares about their welfare (Eisenberger, Huntington, Hutchison, & Sowa, 1986). Support is not restricted to remuneration, but refers to all aspects of their home and work lives. Eisenberger, Fasolo, and Davis-LaMastro (1990) reported that employees who perceive that their organisation offers them support and cares for their well-being are likely to show low levels of absenteeism and exert greater effort to achieve organisational goals.

The participants' view on perceived organisational support is that it is what the organisation does for its employees to feel valued, cared for and supported in all aspects of their lives. The following interview excerpts illustrate this point of view:

Participant 3: "...an employer taking care of the employee, in all aspects you know...the employees feel umm, valued in the company..."

Participant 17: "...a support structure that provide that ah, psychological umm, financial umm...and then understanding of ah, staff issues, challenges in the current position that they're working in…"

Theme 5: Work-life balance

Work-life balance is typically defined as an employee's perception that multiple domains of personal time, family care, and work are maintained and integrated with minimum role

conflict (Clark, 2000; Ungerson & Yeandle, 2005). Bratton and Gold (2003) define work-life balance as the need to balance work and leisure or family activities. The leisure activities might include such things as the desire to travel, be involved in community activities and the need to care for older relatives or immediate family. Platt (1997) suggests that a happy medium needs to be found between the demands of work and home and argues that there need not be a conflict between work and home life.

The participants view work-life balance as having a comfortable and stable equilibrium between home life and work life. Work and home life should not be in conflict with one another. If they are in conflict, the individual will experience a negative sense of wellbeing. The following interview excerpts illustrate this view of work-life balance of the participants:

Participant 12: "...when I think of wellness I think of a healthy work-life balance at the end of the day...they give you an opportunity to divorce your work from your personal life..."

Participant 22: "Ah definitely a balanced of lifestyle, a balance between home and work life umm finding a correct balance and, and living that balance".

Theme 6: Work environment

The participants mentioned that there seems to be a close relationship between work environment and ergonomics. They did not clearly differentiate between the two concepts. They view the main difference as work environment referring to subtle and intangible aspects while ergonomics refers to the tangible aspects. The intangible aspects, to name a few, would be job satisfaction, happiness and emotional health. Intangible aspects are those aspects that one cannot distinguish with the five senses. Tangible aspects would be aspects which one can distinguish with the five senses such as the design of a chair, table, and desk.

The following interview excerpts from the participants show how they viewed their work environment and ergonomics as aspects that gave them a sense of wellness.

Participant 14: "Looking at the working environment...there must be enough ventilation and enough light.....create the environment where the person actually feels comfortable".

Participant 21: "...wellness would mean a general good working environment, a healthy state working environment, good lighting, good air conditioning, good ventilation, and the softer aspects as well as creches, gym, good canteen facilities and those types of things...conducive working environment".

Dul and Ceylan (2010) studied work environments that are conducive to creativity. They separated work environment into two dimensions: the social–organisational work environment, which refers to employees' social and organisational context (job-design, teamwork, reward system, leadership styles), and the physical work environment, which refers to physical surroundings or the immediate workplace and buildings.

It seems that both literature and the participants define work environment as incorporating both tangible (ergonomics) and intangible elements (work environment). It appears that ergonomics contributes towards the environment either being healthy or unhealthy.

In summary, the participant's connotation about wellness is that the organisation should know their employees general health by being aware of the state of their employees physical and mental health, employee recognition, the environment they work in, work-life balance and, lastly, the culture, energy management and care the organisation gives them. By knowing their general health the organisation can identify whether the employees' wellness needs improvement and how to improve those areas identified.

The additional themes cited in Table 2, namely financial health, employee assistance programmes, job satisfaction, nutrition, happiness, emotional health, stress management, positive thinking, professionalism, intellectual health, employee development, manager employee relationships, awareness of wellness, organisational support and spiritual health appear to fall into each of the top main themes. Many of the added themes could probably be seen as sub-categories of general, physical or mental health, work-life balance, POS, work environment and ergonomics, which will be discussed later in this section. For example, it could be assumed, from the participants' view, that EAP, employee recognition and job satisfaction could fall under POS or work environment, whereas nutrition could fall under physical health.

From Table 2 the participants viewed a number of themes that define wellness. A graphical representation can be extrapolated as follows:
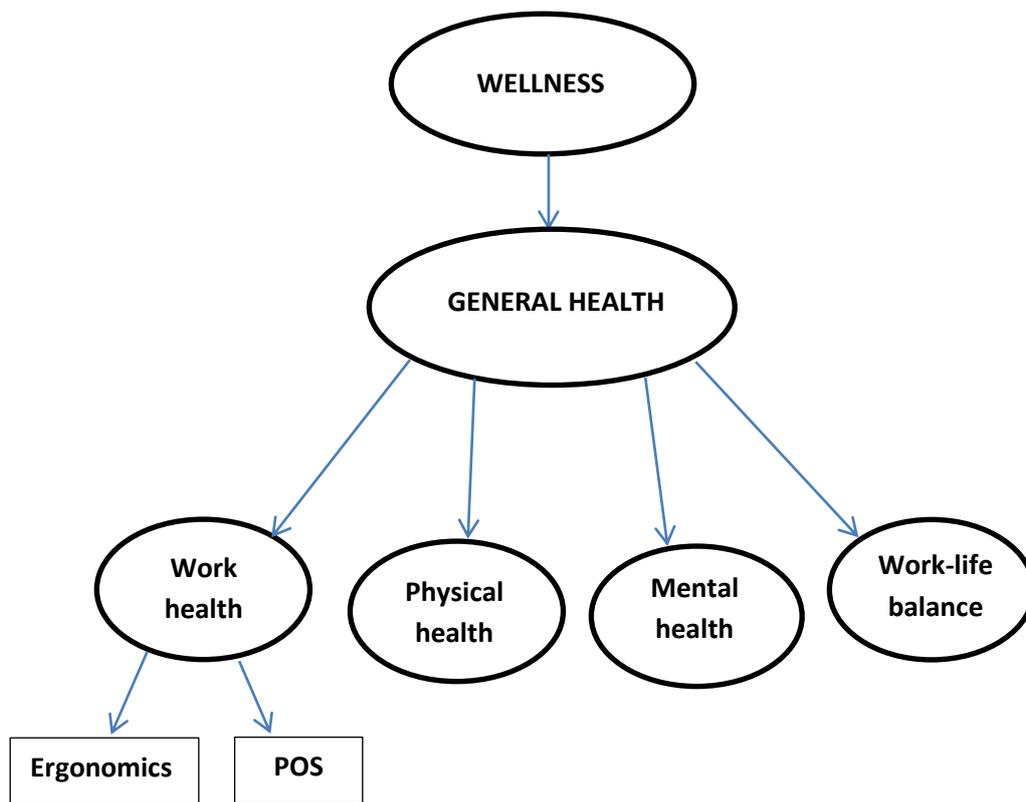
Figure 1: Overview of the participants' unique definition of wellness in this organisation.

In the section above the core question question was discussed and investigated to arrive at a new definition of wellness from the point of view of participants and literature.

Table 3 shows examples of how participants view the provision offered by the organisation in terms of the requirements mentioned in the core question. Twelve participants (46.2%) indicated that the organisation does not provide for their wellness needs, 23.1% believed that the organisation provided for their wellness needs and 30.8% consider some wellness needs to be met.

Table 3

Provision for wellness in the organisation.

Question 2*: Does this organisation provide you with the opportunity to meet your wellness expectations? What could they implement or change to meet those expectations?*

Theme	Number of Participants	Percentage	Examples of the Interview Responses
Meets requirements for wellness	6 participants agreed	23.1%	*"Yes I think that umm they do".* *"Umm, they are, we giving them opportunities to meet those, ah requirements..."*
Partially meets the requirements for wellness	8 participants' agreed	30.8%	*"Ya, I think on paper, there is one I have one in my office comparative to other businesses and umm, industries that I have been in there's varying degrees of wellness offerings..."* *"Up to a certain point, umm, I think the only big no no I'd like preventing us from coping through this budget constraints so I can't take them on teambuilding exercises, umm, I can't give them umm, I can't give them umm, end year functions I can't umm, there's no incentives for innovation for new ideas..."* *"I won't say the company but I will say departments, I've never seen that within the company, I'm here for a few months".*
Does not meet the requirements for wellness	12 Participants' agreed	46.2%	*"Well, I haven't seen anything go round, umm because I would think every month you have a type of wellness, you know...no wellness in place".* *"...we can say no and, umm, I knew that when I started here as well.."* *"...they would have a health day so they got a whole bunch of nurses out here and people that have been in the company for five to ten years and they were like "WOW" everybody came and they did their blood pressure and their cholesterol, tested glucose and so forth and I thought it was nice, it's like someone is starting the initiatives around that. Unfortunately that's like one example I can give you because after that there's nothing else that's happening".* *"No...umm most of the items I have mentioned for e.g. the canteen, eating facilities you know, the basics umm kitchen, good kitchen facilities where the people can make coffee or tea during the day, crèche facilities, gym facilities, the types of things that you find these days are not within the company".*

Table 4 indicates that participants feel as though the organisation is not paying enough attention to the ergonomics and POS.

Table 4

Wellness needs of participants.

Rank order	Theme	Frequency	Percentage
Question 3: *What is this organisation not providing in terms of wellness and what could they do to implement those aspects?*			
	Primary Themes		
1	Ergonomics	21	80.8
2	Perceived Organisational Support	14	53.8
	Secondary Additional Cited Themes		
3	Work-life balance	12	46.2
4	Employee assistance Programmes (EAP)	10	38.5
4	Nutrition	10	38.5
4	Organisational Culture	10	38.5
4	Work Environment	10	38.5
	Other Additional Cited Themes		
8	Financial health	9	34.6
9	Physical health	8	30.8
9	Workshops or Courses	8	30.8
9	Motivation or Encouragement	8	30.8
9	Effective Communication	8	30.8
13	Awareness of wellness	4	15.4
13	General Wellness	4	15.4
13	Mental health	4	15.4
13	Employee Development	4	15.4
17	Health	3	11.5
17	Job Satisfaction	3	11.5
17	Realistic work load	3	11.5
20	Attitude	2	7.7
20	Manager employee relationship	2	7.7
20	Training	2	7.7
20	Leadership development programme	2	7.7
20	Trust	2	7.7
20	Incentive Schemes	2	7.7
20	Organisational culture	2	7.7

The table above is an overview of what the employees of this telecommunications organisation view the organisation is lacking in terms of employee wellness aspects. The most important issue not being addressed is ergonomics (80.8%), followed by POS (53.8%), work-life balance (46.2%), Employee Assistance Programmes (38.5%), nutrition (38.5%), organisational culture (38.5%) and work environment (38.5%).

Ergonomics and POS are seen as the main aspects affecting employees in a negative way. The other themes, namely work-life balance, EAP, nutrition, organisational culture, and work environment may need to be improved, re-implemented or changed after the most pressing concerns, ergonomics and POS, are dealt with. The other themes mentioned seem to be

unimportant to participants relative to ergonomics and POS. Participants believe these two themes in particular are not receiving sufficient attention.

The second part of the question relates to what initiatives the organisation could implement in order to meet the mentioned expectations of ergonomics and POS that are either not met at all or are met inconsistently.

The following interview excerpts provide examples of the different initiatives that the participants believe will improve wellness in the organisation.

Participant 19: "...Show some interest maybe, send out questionnaires to people individually about things like their mental well-being, their physical well- being, where do they feel that they are lacking".

Participant 19a: "...I think, the company needs to invest more time into their employees. I think a lot of people are demotivated".

Participant 16: "It's almost case of not taking cognisance of the pressure. I think it's almost for me a sense of ...I am just a number"

Participant 12: "Their work environments are lacking...areas where potentially you can have a canteen area or a breakaway area those are important things..."

Table 5 shows what participants anticipate the effect would be if the organisation were to implement actions to address POS and Ergonomics.

Table 5

Participants perceived outcomes of wellness.

Question 4*: If all your wellness concerns are properly addressed, what would you do differently?*			
Rank Order	**Theme**	**Frequency**	**Percentage**
1	More productive	14	53.8
2	More positive attitude	10	38.5
2	Being more efficient	10	38.5
4	More motivated	9	34.6
5	Better work-life balance	7	26.9
5	Increased commitment	7	26.9
5	Job satisfaction	7	26.9

Table 5 indicates that, if wellness initiatives are implemented correctly in the workplace and attention is given to the main themes mentioned in Table 4 (ergonomics and perceived organisational support), participants are of the opinion that productivity will increase

(53.8%) as well as the attitude of participants, which is indicated as being more positive (38.5%). Participants believe that they will be more efficient (38.5%) and motivated (34.6%). Work-life balance will be easier to attend to (26.9%), they will be more committed (26.9%) and job satisfaction will increase (26.9%).

Participants said that they would be more productive and have a more positive attitude if the organisation addresses their wellness expectations:

Participant 24: "It will be very, very different because you will feel, you will see a flow of work ...much more productivity is going to be here, you will see that people will have a positive energy..."

Participant 20: "I think, there'd be a lot of people, who would be energised and a lot more willing to do their work".

Participant 16: "I, I think there'll be an attitude change".

Participant 13: "We'd be more efficient..."

Participant 10: "Well, I'll for starters have a whole new attitude basically..."

It is clear that by listening to employees and giving them a sense of support will bring change to the organisation. Wellness is a continuous effort. Once the ergonomics and POS are dealt with, this telecommunications organisation will need to identify the next wellness priorities.

Table 6 shows perceived behaviours that their managers were doing in order to facilitate wellness.

Table 6

Manager's role in wellness.

Question 5: *What does your manager do to create wellness at your workplace?*			
Rank Order	**Theme**	**Frequency**	**Percentage**
1	Provide emotional, moral support, and assistance.	26	100
2	Encourage mutual manager employee relationship	16	61.5
3	Foster communication	14	53.8
4	Coordinate work gatherings	13	50
5	Be open	11	42.3
5	Provide motivation, encouragement or empowerment	11	42.3
7	Give intellectual reading material & experiential learning	8	30.8
8	Create a positive working environment	6	23.0

Table 6 shows that all participants (100%) receive emotional and moral support and assistance from their managers. The next highest ranked theme was relationships (61.5%) and fostering of communication (53.8%), followed by work gatherings (50%); openness and motivation; encouragement and empowerment (42.3%). The participants of this study wanted to be cared for, valued, recognised and communicated with by their superiors. In this organisation it appeared as if the managers were doing ad hoc interventions regarding wellness. There was not an integrated wellness strategy implemented by the organisation.

Discussion

This study set out to conceptualise or define wellness and, as believed, there is no clear or definite definition of wellness. Participants were not sure of what wellness should really entail. However, the participants did mentioned 6 themes, ranked in order of importance, of how they defined wellness, namely, general health, physical health, mental health, work environment, POS and work-life balance. All of these 6 themes combined gave an indication that wellness is a very broad concept. Wellness was seen by participants as the overarching construct with general health as a core element. General health comprised of four main areas, namely physical health, mental health, work health and work-life balance.

The Global Wellness Survey Report (2010), as well as Sieberhagen, Pienaar, and Els (2011), affirms that the term 'wellness' is badly defined and not understood consistently by researchers. Studies done by Goins, Spencer, and Williams (2011) and Hjelm (2010) investigated health. Both studies found that no one really knows how to define health other than it incorporates the bodily function while focusing on lifestyle, exercise and diets, not being mentally sick and, finally, looking to the future with the expectation of living longer by being healthy.

A main finding of this study was that half of the participants stated that the organisation does not provide for their wellness needs as mentioned in the core question. This already indicates wellness is probably not properly provided for in this organisation. Table 3 supports the impression that the participants' perceive the organisation as lacking in providing for the wellness needs of its employees. Therefore, the organisation's provision of wellness is not aligned with that of the participants.

Another finding from the participants' responses is that they feel disempowered. The employees want to be cared for and valued or recognised by their organisations. The participants want to be listened to in order to participate in building an environment in which they can thrive and be productive. From the participants' responses, it is clear that if employees' wellness expectations are met, it should result in the organisation being more profitable. From the participants' responses one can conclude that they feel the organisation is not interested in them as human beings.

The results from this study supports the findings of Weinstein's (2009), Shaw, Delery, Jenkins, and Gupta, (1998), Tsui, Pearce, Porter, and Tripoli, (1997) who state that if employers show concern for their employees it appears to motivate them to work better, smarter and harder. Employees seem to be happier and more productive if their employers care about their wellness. Caring will encourage a higher level of employee motivation and a willingness to invest in their knowledge and skills.

The participants of this study indicated a similar trend. They also believe that if the organisation shows interest by caring and supporting them, they will reciprocate by investing their knowledge and skills to be more productive. Any wellness initiative implemented needs to convey the message to the employees that their organisation cares about their health and wellness. If the organisation is really only concerned about revenue and productivity, wellness initiatives may not have the desired impact (Weinstein, 2009). The results from this study supports Weinstein's (2009) findings that if employers show concern for their employees it appears to motivate them to work more productively. Employees are likely to be happier and more productive if their employers care about their wellness. Therefore, employers should involve the employee's in this organisation in their decision-making regarding wellness policies and procedures.

This study suggests that each organisation needs to have its own organisation-specific conceptualisation of wellness. It is further proposed that the 6 themes, which are: general health, physical health, mental health, work environment, POS and work-life balance, be considered in compiling a definition of wellness. The understanding of wellness of employees will probably be different for each organisation. This understanding of wellness must also be considered when an organisation defines wellness. It can be concluded that the main reason for having an organisation-specific definition of wellness is that wellness is such

a broad concept with no clear definition. A clear, organisation-specific definition could provide focus and direction as a starting point for an organisation's wellness initiatives.

From literature and the participants' responses, it is clear that employees want to be cared for as well as feel valued and recognised by their organisations. The participants wanted to be listened to and wish to participate in building an environment in which they can thrive and be productive. It is clear that if employees' wellness expectations are met, it should result in the organisation being more profitable. Measurable outcomes, such as staff turnover and absenteeism, should decrease notably (Robbins, Judge, Odendaal, & Roodt, 2009).

Conclusion

The organisation has very little wellness initiatives involving the organisation as a whole, although in certain departments wellness initiatives have been implemented. There is no integrated, comprehensive, holistic wellness strategy in place, only ad hoc interventions initiated by managers.

To conclude this study, the model that would be able to adapt to the unique definition of this organisation would be the holistic model of work wellness as it incorporates all the areas of the participants of this organisation. As discussed previously, the main areas of concern are POS, which is a job resource, and work environment which could fall into both job demands and job resources. In this organisation the main areas of concern are leaving the employees in distress, exhausted and mentally distant from their workstations. This negative outcome could lead the organisation to have less organisational commitment and more unhealthy employees which, in turn, leads to absenteeism, presenteeism medical costs and decreased turnover to name a few. Addressing those areas with the help of a wellness committee would aid the organisation in reversing the outcomes mentioned above.

Recommendations

With regards to this specific telecommunications organisation, participants' strongest need was related to physical health aspects, such as a relaxation area and a canteen. Expectations regarding work health were renovating the interior of the old building and improving on the ergonomics. There should be more attention given to the work-life balance of employees, as

the participants seem to over-commit themselves due to unreasonable deadlines and hours of work. There should be more value and recognition given to the employees of this organisation through, for example, employee of the month awards. Employees should be more involved in decision-making. The lack of communication should also be addressed, particularly communication on the organisation's strategic direction.

The results of this study should be compared to organisations in the same industry. This would indicate whether the expectations of employees in this organisation are similar to the expectations of employees in similar organisations. Such a comparison will also indicate whether employees in different organisations do indeed have differing or similar concepts of wellness.

Further research should be done on the comparison or similarities between health and wellness in order to clarify these two concepts. In this study, wellness was the broader aspect whereas general health was seen as a core construct. It is not yet clear whether wellness and general health are identical constructs or not.

No comprehensive wellness model could be found. Further research should aim at building such a model, which would assist organisations in developing an integrated wellness strategy.

This study has its limitations with regard to finding literature and having only one employee and one manager from each department of the organisation as a participant, which limits generalisation of the results. Also, because this research was conducted in only one organisation, generalisations of findings are limited further.

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CHAPTER 3

CONCLUSION, LIMITATIONS AND RECOMMENDATIONS

The purpose of this chapter is to provide an analysis and discussion of the literature and empirical results of the study. Conclusions in terms of the attainment of the research objectives are shown. The limitations and shortcomings of the study will be discussed and recommendations for the organisation and further research will be provided.

3.1 CONCLUSION

Conclusions are drawn in the following section in respect of all specific research objectives that were set in Chapter 1 and the following findings were obtained in this study.
The objectives of the study are discussed and achieved as follows:

Objective 1 & 2: To conceptualise or define wellness and prioritise wellness expectations of employees within a telecommunications organisation.

The main themes that emerged from the expectations of the participants in this study were general health, physical health, mental health, perceived organisational support (POS), work-life balance, work environment and ergonomics. The participants' views showed that general health incorporates both the physical health and mental health of an individual and that there is an association between the three. Participants defined physical health and mental health as one concept, which includes eating healthy, exercising and monitoring the functioning of the body and mind. POS was defined by literature as the organisation valuing, supporting, and caring for their employees (Eisenberger, Huntington, Hutchison, & Sowa, 1986).

Participants in this study also indicated that POS is, in the first place, the provision of support in terms of recognition. POS also refers to providing assistance to employees and the genuine caring organisations should give their employees. The next main theme was work-life balance. The participants and literature viewed the concept as a balance between home life and work life (Bratton & Gold, 2003 & Platt, 1997). One should not be more important than the other. The balance between the two should be created by the support of the organisation and the employees themselves finding the equilibrium between home and work life.

The last main themes to define wellness in this study were work environment and ergonomics. The participants saw these two as interchangeable with no real distinction between them, whereas literature viewed ergonomics as being the physical aspects of a work environment. Both participants and existing literature distinguished between the physical aspects and the 'softer' issues in a work environment (Dul & Ceylan, 2010). From studying the main wellness themes, as indicated in both this study and existing literature, it was possible to cluster the themes into general health incorporating physical health, mental health, work health (POS and ergonomics) and work life balance.

The objective was reached, though no coherent definition could be formalised. Participants viewed general health as consisting of five elements, namely, physical health, mental health, work environment, POS, and work-life balance. It was clear that there is a general consensus on these elements of wellness. It remains difficult to arrive at a clear, concise definition of wellness, the reason being that both participants and existing literature have a very broad definition of wellness. The definition of wellness clearly involves the functioning of the whole person, including their physical health, mental health, work health and work life balance.

The participants believed that they were not given a voice to raise those expectations that can help an organisation succeed in achieving its wellness objectives.

Objective 3: To determine the level of wellness provision within the telecommunications organisation.

The participants in general indicated that wellness was not adequately provided for. Participants acknowledge that there are some wellness initiatives, but these are not consistent or they are only implemented by some departments.

The main expectations (described as themes) that were unfulfilled for the participants in this telecommunications organisation were ergonomics and POS. The ergonomic aspects affecting them included ventilation, lighting and the differing standards between the new and old building. They also mentioned not having a place to break away from their work station, such as a canteen, where they can have a healthy meal.

Apart from not having the ergonomics in place they also felt that the organisation was not valuing or supporting them, or giving them any sense of recognition. This seemed to be affecting the individuals' physical health, mental health and their work-life balance. The physical work environment and support from the organisation were the two main concerns raised by participants.

In summary, this objective was reached. The study identified the provision of wellness in the organisation as well as what the participants viewed as priorities the organisation should focus on, namely ergonomics and POS. It is possible that once these two priorities were addressed, other elements may come to the fore such as work-life balance, employee assistance programs (EAP) or organisational culture just to name a few.

Objective 4: To determine the anticipated impact of increased wellness on employees within a telecommunications organisation.

The study showed that the participants believed that if the ergonomics and POS were addressed, they would be more productive, have a more positive attitude, be more efficient and motivated, find it easier to create a work-life balance, and that their job satisfaction would increase and they would be more committed. As mentioned previously, Shaw, Delery, Jenkins, and Gupta, (1998); Tsui, Pearce, Porter, and Tripoli, (1997); as well as Weinstein, (2009) agree that if the employer shows that they care, value and address the employee's expectations of wellness then they will be more productive and committed towards the organisation. In summary, participants strongly believed that this organisation would benefit if they address the employees' wellness expectations.

Objective 5: To determine the behaviour of managers perceived by the employees to facilitate wellness within a telecommunications organisation.

From literature, it is clear that the role of a manager in wellness is very important, as they are the key to facilitating and creating a healthy working environment and taking care of the wellness needs of employees (Erasmus, Swanepoel, van Wyk, & Schenck, 2003).

The Business Legal Reports (2007), believe that the critical part in starting and running effective wellness initiatives is getting management committed. Most wellness initiatives do not result in a positive return on investment (ROI) without committed support from management. Superficial support is not enough; managers must show support through their actions. The report also mentions that there is a direct relationship between the involvement level of management and the effectiveness of a wellness programme. Ultimately, the more management promotes and participates in workplace wellness, both behind the scenes and in highly visible ways, the more successful the programme is likely to be (Business Legal Reports, 2007).

The participants also felt that their managers play a central role in their wellness. There are certain behaviours that the participants expect of management, namely, that they should provide emotional as well as moral support and assistance; encourage positive relationships; foster communication; coordinate social work gatherings in such a way that they get to know their sub-ordinates; be open; provide motivation, encouragement or empowerment; provide intellectual reading material, experiential learning and, lastly, create a positive working environment.

Grant and Mack (2004) state that when managers are unhealthy, the perception may be that the organisations they are in are not healthy either. As managers set the tone in an organisation, they should set an example and lead their subordinates towards optimal health. This ultimately leads to wellness in the workplace and, in return, they receive optimal support from their sub-ordinates.

The objective to understand what the participants perceived to be the role of their managers and what behaviours they possess or should develop to help facilitate and assist the participants to improve wellness in their current work environment, was achieved.

This study's contribution is to understand wellness from the view point of employees. This study can aid in assisting organisations to include employees' suggestions in creating wellness within an organisation, thereby fostering a relationship between the organisation and the individual. Participants indicated that if they participate in wellness initiatives, and if their wellness expectations are met, it should impact on the organisation's profitability. It may also assist in providing a broad definition of wellness by identifying the main elements of wellness. This should assist an organisation in formulating a unique definition of wellness

that is organisation-specific. This study may help in making wellness initiatives easier to implement and addressing employee concerns.

3.2   LIMITATIONS

There were a number of limitations in this study:

- Difficulty finding literature on specifically expectations of employees on wellness in organisations.
- Regarding the sample, only one employee and manager from each department in the organisation took part, thereby limiting generalisation of the results.
- This study was only done in one organisation. It would have been an added advantage if the study was executed in more than one organisation.

3.3   RECOMMENDATIONS

3.3.1   Recommendations for the organisation:

For management of the organisation to improve the wellness of their employees effectively, it will be necessary to give attention to the main themes of wellness identified by the study, namely physical health, mental health, work health, and work-life balance in the following ways:

- Formulate and communicate wellness policies in the organisation.
- The ergonomic design of both buildings on the premises should be of an equal standard. Management should consider refurnishing and upgrading the old building. The exterior of the old building looks identical to that of the new building however, the interiors are very different. The interior of the old building should be redone, paying attention to obvious aspects, such as paint and carpets, ventilation and light in terms of windows and new furniture, to bring it to the same standard as the new building. Before commencement of the changes, a study should be done on the differences between the two buildings so as to implement the correct changes.
- Unreasonable deadlines and long hours of work expected should be reviewed, to bring about a better work-life balance.

- Top management should involve the employees in the decision-making regarding wellness initiatives and the goals of the organisation in terms of wellness. All employees in the organisation should participate; not only employees from some departments.

- To address POS, which was highlighted as an area of serious concern, they could, for example, utilise suggestion schemes or employee of the month awards. Such actions could result in employees not feeling as if they are treated like a number, not valued, recognised or supported by the organisation.

- The organisation could also consider establishing a wellness committee. Such a committee should comprise of both management and employee representatives. Such a committee should drive wellness initiatives and recommend actions to senior management.

- Wellness programmes and initiatives should be reviewed and improved to address the expectations of the employees. There should be more support and participation from top management regarding improvement of those wellness initiatives.

- The organisation should support the participants by listening to their expectations and implement initiatives in line with these expectations, in order to facilitate a healthier work environment.

3.3.2   Recommendations for further research

The findings of this study offer suggestions for future research, namely:
- There should be further research done on the expectations of individuals regarding wellness.

- Further research should be done to compare this organisation with other organisations in the same industry. This could make it possible to determine if there are similar trends when comparing the expectations of employees and managers, and whether employees in different organisations do indeed have very differing concepts of wellness.

- Further research should be done on the comparison or similarities between health and wellness to clarify the two aspects. In this study, wellness emerged as the umbrella construct with general health as its core element.

- A study following a quantitative approach that utilises robust statistical analysis should be conducted to verify the constructs identified in this study.
- A holistic wellness model should be built. Such a model could help organisations in arriving at their own definition of wellness and then utilising wellness dimensions relevant to the organisation.

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