A study to analyse the organisational wellness present in a Port Elizabeth based pharmaceutical company with the intent of developing and implementing an organisational wellness programme

By

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A dissertation in partial fulfillment towards a Masters Degree in Business Administration in the Faculty of Management at the Port Elizabeth Technikon

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Date of submission: January 2005
DECLARATION

I, Nerine Carmel Sam, hereby declare that:

1. The work in this research paper is my own original work.
2. All sources used or referred to have been appropriately documented and recognised.
3. This research paper has not been previously submitted in full or partial fulfillment of the requirements of an equivalent or higher qualification at another recognised Educational Institution.

Signed: ____________________________

Date: ____________________________
I would like to express my gratitude to the following people for their assistance and support during the compilation of this study:

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- My promoter, Professor Norman Kemp, whose constant advice and guidance made it possible for me to complete this study.
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ABSTRACT

South African employees have found a wide range of stressors prevalent in their working experience. The impact of these stressors on the lives of the employees adversely affects the organisational effectiveness of any organisation. The 21st century business world has become more stressful and risky because of the daily workplace demands, coupled with internal competitive challenges, placed on employees. The effect of this stress on employees is seen in an increase in absenteeism, a loss in employee productivity, increased insurance premiums, reduced workforce efficiency and an increase in training and employment costs. As a result, organisations are compelled to commit their management team to ensuring their employees health and wellness. This can be achieved through the implementation of a structured wellness programme or policy.

This study's intention, forming the main problem, was to determine the wellness programmes that would be required by the pharmaceutical company, Bodene (Pty) Ltd, in order to enhance, maintain and develop its organisational wellness. This resulted in the development of a wellness programme. The approach taken to resolve this problem began with an intensive literature survey to determine the critical wellness factors that literature indicated as necessary for employees to be successful and happy in their work environments and outside of them. This was followed by an empirical study undertaken within the Small Volume Parenteral department of the organisation. The study was undertaken by the administration of a structured employee questionnaire to blue collar workers and a select number of middle managers in order to determine the level of wellness present amongst the employees. In addition, a structured management questionnaire was administered to the Sister-on-site and the Industrial Relations manager in order to determine whether any wellness programmes currently existed within the organisation, the extent to which they had been implemented, the extent to which they are successful within the organisation and the role, if any, that management play in actively promoting employee wellness.
Among the main findings, on the negative side, the study revealed that employees within the department are close-lipped when it comes to revealing information of a personal nature. This has resulted in a difficulty in assessing their sexual and financial wellness, in particular. With regards to management, findings revealed that the employees felt that there is not enough trust between the employee and management. It was also indicated that management is not as open as possible with the employees. In addition, employees indicated that they felt that there was a lack of communication among team members as well as various forms of discrimination existing in the organisation. On the positive side, the study has indicated that a respect for all cultures exists within the organisation. It has also indicated that a minimal amount of conflict is experienced between superiors and subordinates and that the majority of employees feel a sense of belonging within the organisation.

Findings from the literature survey undertaken and the empirical study done within the organisation were integrated and a coherent organisational wellness programme was developed. The organisational wellness programme has been recommended to the management of Bodene (Pty) Ltd. If the programme is considered viable, it will be implemented within the organisation.
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CHAPTER 1
PROBLEM STATEMENT AND SCOPE OF STUDY

1.1 INTRODUCTION

People experience stress in the workplace because of personal and work-related factors like unexpressed feelings, lack of emotional support from management as well as lifestyle problems (Potgieter, 2001a: 207). Potgieter (2001a: 207) maintains that these stressors have a profound prevalence in the working experience of South African employee’s. She goes on to say that managers need to be aware that these stressors have an impact on an organisation’s wellness, and as such organisations should plan and introduce meaningful changes in their respective departments to limit stressors and thereby enhance the organisation’s wellness (Potgieter, 2001a: 207).

According to Werner (2001a: 256-257) the meaningful changes made in departments are aimed at developing the individual employee, and includes programmes like empowerment, interpersonal skill training, career life planning, stress-management learning and physical exercise programmes. O’ Hara (1995: 9) indicates that the first solution to job stress of difficulties of any kind is in the development of wellness. Werner (2001a: 257) emphasises that organisational change towards an “organisational-well” organisation is an integrative approach that requires co-operation of all members of the organisation for it to succeed. The aim of this research will be to determine those critical wellness factors that need to be developed to enhance Bodene (Pty) Ltd’s wellness.

1.2 PROBLEM STATEMENT

This section will, firstly, highlight the main problem around which the entire research study revolves. This will be followed by the division of the main problem into smaller manageable sub-problems. This section, thus, clarifies the goals and direction of the study to be undertaken.
1.2.1 Main Problem

The above introduction leads to the following problem being addressed by the researcher:

What wellness programmes are needed by the pharmaceutical company, Bodene (Pty) Ltd, to enhance, maintain and develop its organisational wellness?

1.2.2 Sub-Problems

In order to develop a research strategy to deal with and solve the main problem, the following sub-problems need to be addressed:

Sub-problem One: What does research reveal as the critical wellness factors needed by people in order to be successful and happy at home and in the workplace?

Sub-problem Two: What organisational wellness programmes exist at Bodene (Pty) Ltd and to what extent have they, if any, been implemented within the organisation?

Sub-problem Three: What is the current level of wellness existent among the employees at Bodene (Pty) Ltd?

Sub-problem Four: To integrate the findings in order to develop a coherent wellness programme.

The implementation of the wellness programme will follow if the organisation considers it to be a viable investment.

1.3 DEFINITIONS OF KEY CONCEPTS

This section will now delineate key concepts that will be encountered in the course of this study in order to resolve the main problem. The concepts, drawn from the essence of the main problem and sub-problems, will include:
1.3.1 Wellness

Hurley and Schlaadt as cited by Edlin, Golanty and Brown (2002: 4) define wellness as "an approach to personal health that emphasises individual responsibility for well being through the practice of health-promoting lifestyle behaviours". Edlin et al (2002: 4) regard wellness as the process of moving towards optimal health. On the other hand, Charlesworth and Nathan (1982: 15) view wellness as techniques that have the ability to enhance health, such that a person lives healthier and is more productive.

According to Bruhn (1988: 73) wellness is defined as a philosophy that views individuals as having some influence on their degree of happiness. He, thus, indicates that wellness is a lifestyle that needs to be learnt, taught or adapted by humans throughout their life (Bruhn, 1988: 73). Edlin et al (2002: 6) maintain that wellness addresses the whole-person encompassing the physical, mental, emotional and spiritual needs of a person and that, in addition, they exist in a relationship with each other. They conclude by saying that every choice made by a person potentially affects his/her wellness and health (Edlin et al, 2002: 6). Edlin et al (2002: 4) indicate that wellness is, also, referred to many times as being physical health. For this reason health, as a key concept, will be delineated.

For the purposes of this study, wellness will be defined as the holistic well being of an individual with his/her physical, emotional, spiritual, social, occupational and mental needs existing in a relationship with each other. From this, it can be concluded that, if one of the dimensions of wellness are lacking the individual cannot be regarded as holistically well and, thus, the person's well being is impacted negatively.
1.3.2 Health

Mark Twain as cited by both Edlin et al (2002: 4) and Bruhn (1988: 71) stated, "The only way to keep your health is to eat what you don’t want... Drink what you don’t like... And do what you would rather not". Edlin et al (2002: 4) make known the idea that health is a sense of optimum well being implying a state of physical, mental, emotional, social and spiritual wellness. They go on to say that this state is obtained by living in harmony with other people, the environment and oneself (Edlin et al, 2002: 4).

The World Health organisation as cited by Edlin et al (2002: 4) and Blaxter (1990: 3) defines health as "a state of complete physical, mental and social well being; not merely an absence of disease or infirmity". Edlin et al (2002: 4), on the other hand, cite Dunn as defining Health as:

"An integrated method of functioning that is orientated toward maximising the potential, of which the individual is capable. It requires that the individual maintain a continuum of balance and purposeful direction with the environment where he/she is functioning."

For the purposes of this study, health will be defined as a state of optimal physical, mental, emotional, social, occupational and spiritual wellness obtained through a balanced relationship between oneself, other people and the environment.

1.3.3 Organisational Wellness

Lowman (1993: 13) defines an organisation as “the social and psychological environments in which most of the world’s work gets accomplished”. According to O’ Hara (1995: 9) “wellness at work is the active art of building resilience to job stress and daily life”. Further, she comments that organisational wellness is an approach to life and not merely just the absence of illnesses.
For the purposes of this study, and drawing from the definition of wellness, organisational wellness will be defined as the holistic well being of an individual, in their place of work, achieved by having their physical, emotional, spiritual, social, occupational and mental needs, in a relationship with each other, satisfied such that employees build resilience to job stress and daily life.

1.3.4 Organisational Wellness Programmes

Grant and Brisbin (1992: ix) indicate that organisational wellness programmes are programmes which, through their effective establishment, will help employer’s reduce cost of health and worker’s compensation benefits utilisation, reduce absenteeism rates, improve worker morale and productivity levels. Beard (2003: 1), a corporate visionary, sets company wellness programmes in place and maintains, “Wellness programmes are not just something nice to have, but an absolute necessity”. According to O’Hara (1995: 15) the basic elements of a wellness programme include:

- Willingness for the journey – involves employee’s taking stock of their present situation and, together with the willingness to face their faults and bad habits, having the courage to assess their physical, emotional and spiritual selves;
- Tend your body – involves understanding that job stress puts “wear and tear on our body and exacerbates genetic tendencies” and, thus, making a commitment to appreciate the blessings of a healthy body;
- Observe your mind – involves learning to let go of obsessive, nagging mental stagnation that prevents employees from missing out on the joy of life;
- Expand your spirit – involves increasing employee’s self esteem and minimising negative and limiting emotions through creative expression and nurturing support systems.

For the purposes of this study, organisational wellness programmes will be defined as necessary programmes implemented in an organisation to
enhance and maintain the relationship between the physical, emotional, spiritual, social, occupational and mental needs of its employees in order to achieve employer benefits. In return employees will see the benefits or rewards of achieving a home and work life balance.

1.4 DELIMITATIONS OF THE RESEARCH

This section will identify precisely what the researcher aims not to do. The limits of the problem will be, as carefully as possible, demarcated for the purposes of the study. The delimitations of the research include:

1.4.1 Geographical Demarcation

The empirical component of the study will be limited to the pharmaceutical organisation, Bodene (Pty) Ltd, situated in the Port Elizabeth area. The motivation for choosing this organisation is based on the high incidence of employees being admitted to Hunter's Craig due to “stress” or “nervous breakdowns”, as well as, the resultant high level of absenteeism being experienced. These are affecting the productivity and competitiveness of the organisation.

1.4.2 Organisational Wellness

The study will be limited to examining the level of organisational wellness that is present among employees within Bodene (Pty) Ltd. This will be achieved by examining the physical, mental, emotional, social, occupational and spiritual dimensions within employees. This, together with the literature study that will be undertaken as well as the assessment of programmes already present, if any, at Bodene (Pty) Ltd will allow the researcher to develop an organisational wellness programme. The intent of the programme will be to enhance, maintain and develop the wellness of employees in the organisation. This, should in turn, improve productivity and competitiveness of the organisation as well as improve employee satisfaction.
1.4.3 Industry

The industry to be studied will be limited to the manufacturing pharmaceutical industry. The motivation for this choice is the continuously increasing pressure put on the industry to conform to the regulations set out by the Medicine Control Council (MCC) as well as the increasing demands of internal and external customers; employees are, thus, subjected to an equal pressure to perform. This pressure is not always compensated for by any organisational support structure and, as such, employees fall victim to various "illness".

1.5 SIGNIFICANCE OF RESEARCH

Freud as cited by Quick, Murphy, Hurrel and Orman (1992: 3) argued that the life of human beings has a two-fold dimension, namely the compulsion to work and the power to love; it is the requirement for normal psychological functioning. Quick et al (1992: 5) make known that neither carries a guarantee of happiness but rather have inherent risks, complications and dilemmas.

The 21st century business world has become more stressful and risky because of daily workplace demands coupled with international competitive challenges (Quick et al, 1992: 5). According to Charlesworth and Nathan (1982: xxiii) "people want to do more with their lives than merely cope with the overwhelming cost of over-mounting stress; seeking new and effective ways of taking control of their lives, preventing disease and enhancing their health".

The commitment of an organisation's management team to employee health and wellness is reflected in the implementation of a wellness programme or policy (Grant and Brisbin, 1992: 17). Grant and Brisbin (1992: xi – xii) indicate that organisations with no organisational wellness programmes in place are subject to lost employee productivity, increased insurance premiums, reduced workforce efficiency, increased temporary employee costs
and increased training and re-employment costs. Bodene (Pty) Ltd has indicated, by means of an information booklet, that the organisation is experiencing high levels of absenteeism. They have indicated that the high level of absenteeism is reflecting the following:

- The company is not being productive and not as competitive as it should be;
- The employee are not all managing their health and may be, possibly, ignoring a more serious illness;
- The employees are not using the facilities or programmes provided by the company that could improve their health;
- The causes of illness, that could possibly be occurring in the workplace, are being ignored;
- Other employees may be affected by the absenteeism of those that are really ill, thus affecting their absenteeism.

This high rate of absenteeism is resulting in excessive costs for the company in terms of high contributions to medical aids and increased temporary employee costs, for example. These costs can be minimised and employer’s business rewarded, with improvement in market position, through a proactive workplace where wellness programmes are in place, with the assistance of wellness professionals (Grant and Brisbin, 1992: xii). Grant and Brisbin (1992: xv) maintain that a “well designed and maintained integrated wellness programme is the mission of the modern physician”.

The result of the significance of this research, together with the lack of wellness evident within Bodene (Pty) Ltd, has prompted the researcher to address this lack of wellness within the organisation. This will be achieved by developing an organisational wellness programme that will provide rewards for Bodene (Pty) Ltd and its employees.
1.6 RESEARCH DESIGN

In this section the broad methodology that will be followed in the study is described.

1.6.1 Research Methodology

The following procedure will be used to solve the main problem and sub-problems:

(a) Literature Survey

The literature survey will identify the research that has been done in the various dimensions of wellness. Through this research, the researcher will extrapolate the critical wellness factors of other organisational-well organisations to Bodene (Pty) Ltd in order to yield an organisational-well workforce, as well.

(b) Empirical study

The empirical study will consist of:

(i) Survey

A survey, descriptive quantitative design, will be conducted among blue-collar workers and middle management. The survey will extend to the Sister-on-site as well as the Human Resource or Industrial Relations manager since they are in constant contact with the employees and responsible for any programmes implemented within the organisation. The survey design is chosen as it offers a better understanding of the present situation at hand in Bodene (Pty) Ltd, thus, allowing the researcher to draw conclusions from the collected data. From these conclusions, the state of affairs over a longer period of time and for the rest of the organisation may be extrapolated, but will
not be accepted as being constant for all times.

(ii) Measuring Instrument

A comprehensive Employee Questionnaire (EQ) will be constructed to determine the level of wellness present in employees at Bodene (Pty) Ltd. A Management Questionnaire (MQ) will also be constructed to determine if any wellness programmes are available and the extent to which they have been implemented within the organisation. The methodology includes the precise construction of both questionnaires and the administration of them at suitable times, such that it maximises the yield responses that can be used and interpreted. It will also maximise the response rate of the questionnaires. Specific criteria will be followed for their construction so that respondents will be clear as to what is asked of them. This will, in turn, aid by increasing the response rate of questionnaires. All questionnaires will be hand delivered. This method is viable as the survey is being undertaken in the workplace of the researcher and all the interviewees.

A semi-structured face-to-face interview will be held, only if needed, with various respondents to consolidate the information received in the questionnaire. In the semi-structured interview, the researcher will follow through with questions in order to get clarification or probe the respondent's reasoning, if the respondent is unsure of what is asked. This type of interview is chosen as it yields the highest response rates in a survey research. It, also, has the advantage of enabling the researcher to establish rapport with respondents and, thus, gaining their co-operation and trust.

(iii) Sample

The pharmaceutical company, Bodene (Pty) Ltd, will be used to gain information about the level of wellness present, if any, among the employees within the company. However, due to the complexity of analysing a large organisation of 400 or more employees, the sample has been reduced to the
Small Volume Parenteral department consisting of about 65 employees. This forms the statistically significant sample of blue-collar workers and middle management that will be used in the survey. The only sister on-site, as well, as the Human Resource or Industrial Relations manager will be used.

(iv) Method of data Analysis

The descriptive statistical methods to be considered include:

- Measures of central tendency will be employed to determine the central point around which the data collected and tabulated revolves.
- Measures of variation and their spread are important to determine, as it aids in the interpretation of data. The probability of making a correct guess about a particular data point within a distribution rises with the tendency of the data clustering about the point of central tendency; the further the data are dispersed from the central point the greater the margin of predictive error becomes.

The actual statistical procedures to be used in the analysis and interpretation of data will be determined, in consultation with a statistician, if needed, at the time that the measuring instruments are constructed.

(c) Development of a coherent wellness programme

The results of the literature survey and the empirical survey will be integrated to develop a coherent wellness programme to enhance, maintain and develop the wellness of employees at Bodene (Pty) Ltd.

1.7 KEY ASSUMPTIONS

The following assumptions are to be noted:

- Findings gathered, through the consultation of literature based on organisations outside of South Africa, will be extrapolated to the
South African context and consequently applied to Bodene (Pty) Ltd. This will be done as little research, available within the library for consultation, has been done in the field of wellness in South African organisations. Thus, the researcher was exposed to a limited amount of information that is South African based.

- It is assumed that there are certain universal wellness dimensions that will ensure the wellness of an individual.
- It is assumed that the various wellness dimensions are independent of the type of organisation and type of person, be it student or employee, and operates in a similar basic way. This will be assumed, as every type of person encountered in various types of organisations is a basic human being that requires these basic wellness dimensions to be considered holistically well.

### 1.8 PROPOSED PROGRAMME OF STUDY

The research has provisionally been planned to include the following chapters:

- **Chapter 1:** Introduction — includes problem and sub-problems, prior research in the area, significance of research, delimitations and key assumptions.
- **Chapter 2:** Literature survey (1) — detailed survey of prior research.
- **Chapter 3:** Literature survey (2) — continuation of the survey.
- **Chapter 4:** Designing the empirical survey — describing how the research will be conducted.
- **Chapter 5:** Results and analysis of the empirical study.
- **Chapter 6:** Integrate the findings from the literature survey and the empirical survey to develop a coherent wellness programme for enhancing, maintaining or developing the wellness of employees at Bodene (Pty) Ltd.
- **Chapter 7:** Recommendations and conclusions.
1.9 SUMMARY

This chapter indicated the main problem and highlighted the sub-problems that would be addressed in order to solve the main problem. The scope of the study was made known taking into account, amongst others, the delineation of concepts, key assumptions made as well as the proposed programme of study.

The next two chapters will address the literature study of all prior research done in the area of wellness. Chapter two will give an introduction to the concept of wellness and address the first dimension of wellness, namely physical wellness.
CHAPTER 2
INTRODUCTION TO WELLNESS AND THE FIRST
DIMENSION OF WELLNESS

2.1 INTRODUCTION

The aim of this and the next chapter will be to conduct a detailed survey of prior research done in the various areas of organisational wellness. The researcher will, then, draw from this survey the wellness dimensions that the research highlights as critical to the wellness of the employees of any organisation. Through this survey, it will be determined what factors affects humans and, thus, their behaviour in the organisation. This understanding will help to predict what would happen were these critical dimensions of wellness not present as well as give leverage to the organisation in being able to influence or control these dimensions so as to have a positive effect on the people in the organisation.

2.2 WELLNESS AND ITS BENEFITS IN IMPLEMENTATION

Chapter one highlights the definitions of wellness as well the definition that will be adopted for the purposes of this study.

Forum for Counselling, Health and Welfare (2004: 1) indicates, in addition, that the success that is achieved in the following dimensions of wellness namely, physical, mental, occupational, emotional, social and spiritual wellness is determined by “choosing behaviours that improve the quality of daily life and eliminates destructive behaviour.” The forum suggests that this can be achieved by taking charge of one’s life and in doing so empowering oneself to make informed choices. Therefore, maintaining control of one’s own life will ultimately lead to happiness in one’s personal life, as well (Forum for Counselling, Health and Welfare, 2004: 1).

According to Plank and Gould (1990: 65) the wellness movement concept is
becoming a force in the health care industry. According to them the industry is acknowledging fitness and exercise as being prime activities and nutritional education, back care and stress management being critical as well (Plank & Gould, 1990: 65). Results of a study conducted by Plank and Gould to measure the attitudes towards wellness and wellness behaviours indicated that respondents who are health conscious were more positively predisposed to taking responsibility for their own health (Plank & Gould, 1990: 75). Thus, they conclude that raising the health awareness of a population can result in a raise in attitude towards behaviours associated with wellness (Plank & Gould, 1990: 80).

Moore (1991: 104) makes known that wellness is a subject that companies are looking at in light of the rise in health costs. Wellness investment in any company has the added benefits of:

- Increased productivity;
- Decreased employee turnover;
- Preventing employee theft;
- Avoiding litigation;
- Preventing any lost business (Stuart, 1993: 44).

Schott and Wendel (1992: 98) agree with Stuart's benefits of wellness investment in companies. Caudron (1992: 34) comments that, in addition to the above-mentioned benefits, City of Glendale in Arizona cut its number of on-the-job accidents in half during a time when the city's workforce was tripled.

To achieve these benefits, wellness investment in an organisation requires that employers consider the following comment made by Schuster (1998: xi): "Do you want your employees to be more productive? Pay more attention to them!". From this comment, by Schuster, organisations can pay more attention to their employees through the application of wellness or employee assistance programmes (EAP) within the workplace. This will result in employees being "well" and, thus, being able to be more productive within organisations. Schott and Wendel (1992: 98) indicate that it takes more than
simply posting a notice on the notice board or having a non-smoking policy to create a healthy and productive workforce. Personnel manager, Michael Troiano, at Sunseed’s Genetics Inc based in California, indicates that many companies treat employees as if they will live forever, but that like machines they, too, need preventative maintenance that can be achieved through continual interest in their employees’ wellness (Rosek, 1990: 60).

According to Potgieter (2001a: 219) wellness programmes fall under the occupational health care programmes for workers with specific focus on the emotional, spiritual and physical wellness of employees. Moore (1991: 10) claims that many companies are basing their wellness programmes on the newer theories of wellness namely, nutrition, education, intervention and exercise. Lawrence (1990: 14) makes known that employers sponsor at least one wellness programme for their employees, with the most prevalent ones being smoking cessation (63 per cent), weight control (48 per cent) and stress management (44 per cent). She indicates that other programmes have included disease prevention, lifestyle and safety (Lawrence, 1990: 14). Potgieter (2001a: 219) mentions that these health promotion programmes are achieved through EAP in a “direct attempt to reduce the negative effects of occupational stress”. Glaros, as cited by Stuart (1993: 43) mentions that these programmes are usually implemented to control substance abuse or mental health costs in organisations. EAP and wellness programmes are regarded as:

- “the yellow pages of personal and work problems;
- the family doctor for mental health;
- a management tool which acts as a neutral outside source that would help managers solve performance problems” (Stuart, 1993: 46-47).

Thus, it is seen that focus on the employees health and wellness through the implementation of wellness programmes or EAP’s has distinct benefits on the employees, themselves, as well as their organisation. The next section will further address this focus on employees.
2.3 EMPLOYEE-CENTEREDNESS

Mead (1984), as cited by Potgieter (2001a: 219) mentions a six-month project that focused on changing the lifestyle of construction workers from sex and drinking as hobbies to a more balanced lifestyle. This, he indicated, resulted in a two million rand improvement on the bottom-line production figures for that construction camp. Various studies (Backburn & Rosen, 1993; Huselid, 1994; Lawler, 1986; Schuster, 1986) as cited by Schuster (1998: 160 - 161) have indicated that a significant relationship does exist between employee-centered practices and improved financial and organisational performance where individuals are transformed into ones that “know more, do more and contribute more”. It can be argued from these studies that no matter how efficient organisation management structures are, if the people are not “well” they will not be able to give all to their organisations.

Schuster (1998: 155) indicates that highly effective organisations “can afford to be more humane”. He adds that motivation, commitment and morale are some of the issues that should be included in all efforts to increase productivity and quality in an organisation, as Japan has done (Schuster, 1998: 23-26). One way this can be achieved is by investing in a company’s social capital that supports commitment, ready access to knowledge and talent as well as coherent organisational behaviour (Cohen & Prusak, 2001: 4). Cohen and Prusak (2001: 4) present the following as definition of social capital:

"Social capital consists of the stock of active connections among people: the trust, mutual understanding and shared values and behaviours that bind the members of human networks and communities and make cooperative action possible."

Thus, as indicated previously, management programmes cannot be successful without wellness programmes in place and, together they achieve good financial and production outcomes. Further, wellness investment is an
asset, not only for the company in which it is implemented, but also for the employees for whom the wellness programmes are designed. Therefore, to ensure that employees feel that they are at the center of this theme of wellness the organisation needs to ensure that wellness becomes part of the corporate culture. By wellness becoming part of the corporate culture it becomes entrenched in the thoughts, words and every action of the organisation.

The various dimensions of wellness will be now be addressed. The discussion will include wellness or EAPs in place in various companies all over the world, as indicated in the literature survey, that aim to satisfy an employees' physical, mental, occupational, emotional, social or spiritual wellness. The purpose of this literature survey, in chapters two and three, will be to highlight what has been successfully done and together with the wellness factors or dimensions already existent at Bodene (Pty) Ltd, finally design suitable wellness programmes for implementation at Bodene (Pty) Ltd.

2.4 PHYSICAL WELLNESS

Physical wellness, the first dimension of wellness, will be addressed at this point.

According to the Forum of Counselling, Health and Welfare (2004: 3) "physical wellness refers to the willingness to take the time and effort to pursue activities which enhance physical health and the avoidance of activities which could be detrimental to your physical well being”. Hoeger and Hoeger (2002: 9 - 10) indicate the benefits of fitness and wellness, among others, as:

- Having a longer life expectancy;
- Physically fit people lead a more positive lifestyle and have a healthier and better quality of life;
- People experience fewer health problems than their inactive counterparts who indulge in negative lifestyle habits;
- Improved functioning of the immune system;
- Raises levels of energy and job productivity.

The Forum of Counseling, Health and Welfare (2004: 3) indicate the following as physical wellness habits:
- "Regular exercise;
- Nutritional responsibility;
- Sufficient relaxation and sleep;
- Self-care;
- Safety awareness;
- Non-abuse of substances of abuse including medication;
- Practice of safe traffic measures;
- Practice of safe and responsible sexual practices".

Moore (1991: 104) indicates that wellness theory suggests that employees involved in physical activities, will ultimately lead to healthier, happier and more productive individuals who are self-motivated and team-directed.

At the Adolph Coors Company in the Golden Colorado exercise programmes, smoking cessation courses and stress management or counselling have become the standard 10-minute coffee break (Caudron, 1990: 55). According to Caudron (1990: 55) these programmes saw Coors health care cost rise not more than six per cent while other companies were fighting increases of more than 18 per cent. This saw Coors offer various programmes such as: aerobics and strength training, cardiovascular exercises, health risk assessments, nutritional counselling, weight loss and orthopedic rehabilitation. Coors gave employees incentives to access these programmes by, for example, offering a refund on the cost of the weight reduction if employees achieved and maintained their weight loss goal during a 12-month period. The incentive goes further with courses being offered on site, cafeteria offering low-calorie low fat food choices, as well as support through nutritional counselling, for example (Caudron, 1990: 56-57).
At Sunseed Genetics Inc. Troiano’s idea was to make employees aware of their health and the costs, both monetary and physical, of neglecting it. Thereafter, he recommended preventative practices that would:

- Reduce Sunseed’s exposure to potential high health care expenses and
- Improve relationships with employees by showing them the interest the company has in them (Rosek, 1990: 61).

According to Rosek (1990: 61) Troiano proposed the following four-point plan to carry out his idea, namely:

- In-house cholesterol check for all employees;
- Blood pressure checks done on-site for less work disruption;
- Invitation of local health providers to give talks on health topics;
- Suggested the company offer employees off-site physical check-ups and exercise programmes at contracted rates through local hospitals and gyms.

Other programmes instituted at Sunseed that promoted physical wellness included: lunchtime seminars on maintaining pain-free backs, on-site hypertension screening, lifestyle evaluation leading to poor health, nutritional talks with screening for nutritional problems as well as diabetes screening (Rosek, 1990: 61). Finally, Rosek (1990: 62) indicates that all of these programmes have had benefits to the company, namely employees taking fewer sick days off, more employees changing their lifestyles and diets, morale being considerably higher and employees more conscious of their and others’ health and safety.

Sony Corporation adopted various wellness features in its medical coverage plans, namely:

- Annual blood screening;
- Annual pap smear;
- Mammograms;
- Physical exams for children up to the age of seven;
• Smoking cessation programmes;
• Customized health risk appraisal (Santora, 1992: 41-42).

According to Santora (1992: 42) Sony further entrenched the concept of wellness amongst its employees by supplying them with a cassette that shares tips and facts on leading a healthy lifestyle. The tape leads the listener through a series of health topics such as exercise, nutrition, cancer prevention, smoking, safety, stress and children’s health (Santora, 1992: 42). Santora (1992: 44) concludes that these initiatives are aimed to “produce a more healthy, productive group of employees in the long run”.

Central States of Health & Life Company is considered a company where the wellness programmes encompass flextime for employees to work out or attend lunchtime seminars, a company where a gym bag is as vital as a briefcase or laptop, a company where the employees will do almost anything for a company T-shirt and a company where employees can pursue personal and career goals in a supportive environment (Schott & Wendel, 1992: 99 -102). Schott and Wendel (1992: 99 -100), further, highlight the programmes present at Central States, namely:

• Company created a smoke-free environment with no smoking allowed on company grounds;
• No alcohol at company-sponsored events with the rationale that alcohol drained a company’s human and financial resources;
• Policies that require employees to buckle up when driving, especially in a company-owned vehicle;
• Food service vendors provide healthy foods daily;
• Launched a Gaining Responsibility for Alcohol and Drug Education (GRADE) where drug and alcohol testing was done to avoid potential problems. Posters and self-help manuals were part of the campaign;
• Employee-taught yoga in the company’s fitness center;
• A walking club where members’ take part in various walks around the country.
At Central States a 10-member committee exists that consists of members from all departments on all levels that makes decisions and recommendations about wellness programmes (Schott & Wendel, 1992: 101). They conclude by indicating that a full time wellness director exists who "overseas the programmes, teaches workers during lunchtimes...available to take blood pressure readings" (Schott & Wendel, 1992: 101 -102).

Hoeger and Hoeger (2002: 13) indicates the following ways to fitness and a better quality of life:

- "Determine whether you are medically fit to participate safely in exercise;"
- "Assess one’s overall level of fitness;"
- "Programmes for personal fitness need to be individualised to each person’s needs;"
- "Learn behaviour modification techniques that will allow one to change unhealthy lifestyle habits;"
- "Develop sound diet and weight-control programmes and"
- "Implement a healthy lifestyle programme that will include prevention of cancer, cardiovascular diseases and stress management programmes, for example".

From this dimension of wellness it is seen that investment in the physical well being of employees will lead to a healthier, happier and more productive workforce.

2.5 SUMMARY

This chapter has highlighted the concept of wellness, as well as, the benefits of its implementation. It addressed the issue of organisations making their employees the center of their programmes, as it is this "centeredness" that allows employees to be transformed into ones that "know more, do more and contribute more". Finally, the first dimension of wellness was discussed indicating all prior research that has been done in this area of wellness.
3.1 INTRODUCTION

This chapter will address the remaining dimensions of wellness that are required, in a balance with each other, to ensure the holistic wellness of an individual. Prior research done in these areas of wellness will be surveyed in this chapter.

3.2 WELLNESS DIMENSIONS

The following are the dimensions of wellness.

3.2.1 Mental Wellness

The Forum of Counselling, Health and Welfare (2004: 4) indicate that mental or intellectual wellness "encourages creative, stimulating mental activities." They, further, indicate that this type of wellness encompasses "the openness to new idea’s as well as the continuous acquisition, further development and creative application of independent and critical thinking skills" (2004: 4).

Intellectual Wellness (2001) indicates that this type of wellness encourages creative and stimulating activities. They go on to further the concept of intellectual or mental wellness through the following information:

- An intellectually well person will use resources to expand knowledge as well as improve skills;
- An intellectually well person is curious about the world;
- An intellectually well person is eager to explore, seek answers and learn (Intellectual Wellness, 2001).
This encouragement of individuals to be creative and involved in stimulating activities is an asset to any organisation. This is because employees who are curious about things and eager to explore, seek answers and learn will inadvertently show eagerness and willingness to learn new things within the organisation.

At the University of Wyoming students are intellectually stimulated constantly: during class hours students can learn about topics ranging from humanities to chemistry while after classes they can increase their wellness by speaking to people of other cultures, listening to international events on the news, reading books and magazines for enjoyment and listening to the radio (Intellectual Wellness, 2001). They indicate that intellectual wellness will allow individuals to develop a natural interest in keeping abreast of current issues and ideas and, thus, give the following tips for increasing one’s intellectual wellness:

- "Study a foreign language;
- Subscribe to an interesting magazine or journal;
- Learn to appreciate art through attending exhibits, plays, musicals and poetry readings;
- Explore intellectually stimulating activities to pass time through games like scrabble, chess or completing crosswords;
- To increase one’s memory and concentration follow guidelines for basic nutrition and exercise regularly to maximize brain function;
- Read for fun" (Intellectual Wellness, 2001).

These, as used by the University of Wyoming students, may have no relation to employees directly but these suggestions do give tips as to how individuals, who are employees, can stimulate themselves mentally. This concludes that mental stimulation is all part of being mentally well and at the end contributing to the holistic wellness of the individual. This holistic wellness, as an individual, makes a holistically well employee.

Belknap (1997: viii) has developed creative ways of moving, balancing, energizing and relaxing. In addition, she holds workshops wherein she
creates a relaxed atmosphere where participants are encouraged to open up to new experiences as well as allowing themselves to expand in unexplored directions (Belknap, 1997: ix).

At the University of Port Elizabeth (UPE) various intellectual resources are made available to students to ensure their intellectual wellness, namely:

- Time management pamphlets – offers guidelines on how to manage time properly as bad habit results in time wastage;
- Study skills workshops – since intellectual wellness encourages the use of independent and critical thinking skills as well as the ability to learn these workshops offer assistance on how to study effectively;
- Student counseling center – where workshops are held on various intellectual wellness aspects (Forum for Counseling, Health and Welfare, 2004: 63 – 65).

This, although aimed at the student population, will be extrapolated to the employee population within any organisation (see Assumptions made – Page 12, Heading 7). Thus, whether the person is a student or employee, as a human being, part of encouraging intellectual wellness within any type of organisation (university or workplace) will require programmes where there are counselors to help choose study paths, workshops that show people how to study since many not be students, as well as, programmes that help people manage their time properly. All of these will, then, be needed to increase an employee’s intellectual wellness within the workplace.

### 3.2.2 Occupational Wellness

The Forum of Counselling, Health and Welfare (2004: 3) makes known that occupational wellness is seen from the satisfaction that one gains from work. This wellness, according to them, is also evident from the ability of the individual to “create a rewarding lifestyle through which personal values can be expressed”. According to the University of Houston Wellness (2004) occupational wellness is being able to enjoy what one is doing in order to earn
a living and contribute to society. This definition, as indicated by the University of Houston Wellness (2004), can be extrapolated to employees as they, too, need to enjoy what they are doing in order to earn a living and contribute to society.

To create this wellness one needs to assess their:
- Ability and skills;
- Values;

The Santa Clara University Wellness Center (2004) indicates that exploration of one's talents and interests in order to find a career path that is interesting, enjoyable and contributes to the larger society is the first step to occupational wellness. In extrapolating this concept to employees within an organisation it can be said that employees need to explore their talents and interests in order to find the career path that, for them too, is rewarding and enjoyable.

The Forum of Counseling, Health and Welfare (2004: 3-4) makes mention that for this type of wellness to exist financial remuneration is not a pre-requisite. The Santa Clara University Wellness Center (2004) supports this fact by saying that this type of wellness results in tremendous personal satisfaction and enrichment in life through one's work. They indicate the following as signs of good occupational wellness, namely:
- Hobbies/interests/activities outside of the work/academic arena;
- Comfort in the direction of future plans;
- Ability to accurately assess strengths and weaknesses;
- Belief that one has the qualities of a valuable and valued employee;
- Doing what one wants to do in life (Santa Clara University Wellness Center, 2004).

Poor occupational health has been associated with stress, depression, anxiety and intellectual problems. Thus, to avoid this it is suggested that
employees take things slowly by handling things one day at a time and not making stress for themselves (Types of Occupational Wellness, 2004).

3.2.3 Emotional Wellness

Emotional wellness encompasses the following elements:

- "An awareness and acceptance of one's feelings;
- The ability to maintain relative control over emotional states;
- To express feelings appropriately;
- To cope effectively with stress;
- Implies the capacity to feel positive and enthusiastic about oneself and life;
- Ability to motivate oneself;
- Ability to persist in the face of frustrations" (Forum of Counselling, Health and Welfare, 2004: 3).

Matlala (1999: 24) as cited by Potgieter (2001a: 219) defines emotional wellness as complete well being and not only the lack of "symptomatic behaviour of employees". Based on the motivation for this study being undertaken, that being the high incidence of employees being admitted to Hunter's Craig for "stress" and "nervous breakdowns", the emotional wellness study will focus, primarily, on stress and its management. Through its management the other elements of emotional wellness, as mentioned above, will be satisfied.

Van der Merwe (2001: 9) defines stress as "a genetically inherent reaction or process to ensure the survival of the human species and that of all other living organisms through a fight-and-flight reaction". According to Van der Merwe (2001: 8) everyone needs a certain amount of stress to help them strive towards growth and fulfillment in life. However, she mentions that there should be a balance between the stress experienced and a regular phase of relaxation for it to have a positive effect on our lives (Van der Merwe, 2001: 8).
Potgieter (2001a: 207) indicates that people experience negative stress because of unexpressed feelings caused through personal and work-related factors. Job stress can, thus, amongst others be caused by:

- **Shift-work** (Solomon, 1993). According to her, shift-workers suffer from problems such as sleep deprivation and higher divorce rates. This adds to the stress in their lives (Solomon, 1993). Solomon (1993) indicates that Barchick, a company that promotes a wellness facility, brought in an assessor to help assess the workplace and teach employees about managing a life of shift work, through covering topics such as:
  - Sleep schedules and nutrition;
  - What to eat before going to bed;
  - How to sleep;
  - The impact of shift-work on the family life.

Thereafter, employees were surveyed to identify what they wanted in their schedules and their schedules were restructured, as a result. The impact on the organisation was that the turnover rate declined, accident rate declined and workers were less tired and stressed (Solomon, 1993).

- **“Workplace Trauma”**, according to psychologists, is more crippling to the employee and employer than any other work-induced stress (Wilson, 1991: 47). According to Wilson (1991: 47 - 48) this type of trauma can be as a result of discrimination within the workplace, a poorly conducted management process or even a wrongful dismissal with absenteeism being the primary result of this type of stress. Wilson (1991: 49) suggests a just corporate policy to reduce the chances of this type of trauma.

- Lack of control, where employees have undefined job responsibilities and not having adequate resources to do their job (Brewer, 1995: 13).

- Lack of recognition or feedback, that is, no method for performance evaluation, no reward incentive or employees feeling that they are taken for granted (Brewer, 1995: 13).

- Uncertainty about their future in the organisation (Brewer, 1995: 13).
• Boredom within their job due to under-utilised skills, lack of priorities and sloppy work (Brewer, 1995: 13).

• Stress at home – interpersonal relationships with family members, balancing career and family obligations and coping with financial problems (Brewer, 1995: 17).

• Lack of physical movement and lack of fresh air in closed environments which use forced air heating and air conditioning (O’Hara, 1995: 93 – 94).

Heyward (1984: 252) cites Selye’s (1956) hypothesis of the three stages of the body’s reaction to stress. The three stages indicated, by Selye, are:

• The alarm reaction stage where the body perceives the stress and the flight-or-fight response is activated;

• The resistance and adaptation stage where the body tries to resist and adapt to the stress;

• Exhaustive stage comes into being if the stress exposed to is too intense resulting in the body losing its ability to adapt to the stressor and thus may lead to illness or even death, in extreme cases.

This unbalanced form of stress, therefore, needs to be controlled (Van der Merwe, 2001: 8).

Since stress cannot be avoided in life, Van der Merwe suggests that people find ways in which to cope with stress by learning how to manage as well as change the way in which they react to certain stressors (Van der Merwe, 2001: 8). Shepherd (1990: 66) adds by saying that people need to “engineer the environment to do little things to take the control back”. He suggests this, as stress that results in worry, hurt feelings and depression are non-communicable diseases that are created by people when they relinquish control of situations (Shepherd, 1990: 66).

Randolphi (1997) suggests that organisations develop a stress management and relaxation center on site, similar to a fitness center, with the purpose of
having a center with qualified staff that can help employees with stress management and relaxation techniques. He makes known that various studies and surveys done on employees in various organisations have shown that employees see stress management programmes as a top priority (Randolphi, 1997). This need for stress management and relaxation techniques are based on various surveys done; the results are made known below:

- A national survey conducted by the Northwestern Life Insurance Company in 1992 showed that seven of ten employees felt that job stress causes frequent health problems and made them less productive;
- Of these, 46 per cent indicated that their jobs were very stressful, 34 per cent thought about quitting their jobs because of workplace stress and 14 per cent did leave their jobs because of workplace stress;
- Metropolitan Life Insurance Company in 1984 estimated that an average of a million employees are absent on any given day due to stress disorders;
- A study by the American Academy of Family Physicians in 1979 found job stress to be the greatest cause of poor health habits;
- A study conducted by the Northwestern Life Insurance Company in 1992 on “stress in the workplace” found that workers who report high stress are three times more likely than those who report low stress to suffer from frequent illnesses (Randolphi, 1997).

According to Shepherd (1990: 64) stress can be managed by employees mastering the five C’s, namely that of the arts of clarity, choice, control, conditioning and confidence. He warns that the first step to mastering these arts is the need to understand the stressors that activate the stress response (Shepherd, 1990: 64). An expansion of these arts are indicated by Shepherd as being:

- Clarity – Knowing where the stressors are coming from, be it personal, professional or from the past or something from the future;
• Choice – knowing that each person has the power to make a choice of lesser stress;
• Control – knowing how much control one has over the feeling, emotions or reactions associated with the stressful situation;
• Conditioning – this being one of the most important of the five C’s involves the conditioning of one’s mind to handle the stressors of life that one has no control over. It is the art of preventative maintenance;
• Confidence – knowing that the confidence needed to handle stress can only be built once the person realizes that only they themselves have control over their stress levels (Shepherd, 1990: 64-69).

Shepherd (1990: 69) concludes by saying that it is only when people learn to accept and use the five C’s will they live longer, happier and healthier.

Van der Merwe (2001: 18 - 31) gives a practical guide to the management of stress, namely:
• “Getting to know yourself and diagnosing negative stress;
• Positive thinking and attitude;
• Wholesome nutrition, correct supplementation and gentle exercise;
• Time management, planning and organisation;
• Time for relaxation;
• Balancing of the right and left brain activities: left brain is responsible for our analytical, rational, logical and sequential thinking abilities while the right brain controls our emotions, intuition, visualization skills and creativity skills;
• Tolerance, flexibility and adaptability: Learning to go with the flow, accepting situations as well as that one cannot change everything;
• Making “enthusiasm” a permanent part of who you are;
• Developing a good sense of humour;
• Wisdom: developing the inner wisdom to stop searching for instant solutions or always wanting to know why things happen;
• Spiritual nourishment and growth;
• Communing with nature: appreciating the small things in nature that we take for granted”.

O’Hara (1995: 94) indicates that exercise is an excellent means of reducing the effects of job stress; it reduces depression, anxiety and alters a person’s mood. Randolphi (1997: 1) presents an excellent overview of the development and implementation of a stress management and relaxation center on-site for the purposes of personal stress management and relaxation training. The following suggestions are made for any center’s development and implementation, based on these suggestions already implemented and successful at the facility of the Ohio University, Ohio:

• A center coordinator should oversee the operations as well as be available for individual consultation;
• Employees should schedule appointments;
• First time visitors are given a comprehensive computerized stress management assessment to allow the coordinator to develop any techniques appropriate for the individual;
• The layout of the facility should be on-site and can be as extensive as providing the plumbing and shower for a Restricted Environmental Stimulation Technique (REST) flotation room or as basic as a cubicle with a lounge chair and some shelving;
• Equipment and supplies may include computer systems, database management, stress assessment software, instruction cassettes, video tapes, books, a flotation (REST) room, reclining lounge chair etcetera;
• A fee may be charged to control the most popular or expensive components of the centers like the REST or massage rooms;
• Programmes may include: health promotion programmes like yoga, meditation and relaxation classes can be offered;
• Other programmes may include self help issues all related to negative stress like depression, substance abuse, divorce, abuse, death, stroke, ulcers, low self esteem, financial distress, eating disorders, suicide prevention, traumatic incidents and assertiveness can be tackled;
• Personnel may include anyone with at least a Certificate in Stress Management Education which will ensure a minimum level of knowledge and experience;
• This programme can be encouraged to employees through recognizing the various needs that may attract people to the center and then designing a marketing programme that addresses these needs and its fulfillment through the center (Randolphi, 1997: 1 - 9).

Randolphi (1997: 9) makes mention that a commitment by the employer to reduce work related stress through the promotion of relaxation techniques will demonstrate their concern for their employees and the stress that employees are faced with daily. Through this empowerment of employees to manage their stress more effectively employers can ensure a healthier and more productive organisation (Randolphi, 1997: 9).

3.2.4 Social Wellness

Forum of Counselling, Health and Welfare (2004: 3) refer to social wellness as the need of people to belong or feel needed as well as having one's own identity. It encompasses interdependence with other people and nature. Thus, according to them, it includes “establishing meaningful relationships and demonstrating an ongoing commitment to the community and the environment” (Forum of Counselling, Health and Welfare, 2004: 3).

Cohen and Prusak (2001: ix - x) share “obvious truths” that support the need for social wellness in organisations, namely:

• Trusted colleagues help each other accomplish work;
• Employees are more likely to give more to an organisation where their co-workers are helpful and honest;
• Employees do better at work when they get to know each other rather than adjusting to changing team members;
• The experience of employees working in isolation for a length of time can be lonely and de-motivating.
They mention, further, that people experience work as a “human social activity that engages the same social needs as the rest of our lives, like the need for connection and cooperation, support and trust, a sense of belonging, fairness and recognition” (Cohen & Prusak, 2001: x).

Donne, as cited by Cohen and Prusak (2001: 1), makes the following comment regarding the need of people for each other: “No man is an island, entire of itself; every man is a piece of the continent, a part of the main”. This comment by Donne leads Cohen and Prusak to attach it to the concept of “social capital” as outlined in their book. A definition of social capital is provided in Chapter two, as defined by Cohen and Prusak. However, this concept as well as its benefits to an organisation, as indicated by Cohen and Prusak, will be explored further in this chapter.

According to them, social capital:

- in organisations is “the trust-based connections between people, and the networks and communities through which they engage in cooperative action” (Cohen & Prusak, 2001: x);
- bridges the gap between people (Cohen & Prusak, 2001: 4);
- elements include high levels of trust, vibrant communities, shared understandings as well as supports collaboration, commitment, ready access to knowledge and a coherent organisational behaviour (Cohen & Prusak, 2001: 4);
- descriptions suggest organisational investments such as giving people space and time to connect, demonstrating trust and communicating aims and beliefs effectively, among others (Cohen & Prusak, 2001: 4);
- return on investments include better knowledge sharing due to the established trust relationships, lower turnover rates reducing hiring and training costs and greater coherence of action due to organisational stability and shared understanding (Cohen & Prusak, 2001: 10).

According to Cohen and Prusak (2001: 28) trust is the key to social capital. They warn that relationships, in the organisation, cannot be fostered if there is
no trust since "trust builds trust" (Cohen & Prusak, 2001: 29). Cohen and Prusak (2001: 45-51) give suggestions how organisations can build the trust necessary for building strong, committed and trustworthy relationships:

- By being trustworthy – management sets the tone, to employees, as to what type of values are valued in the organisation. Thus, by being trustworthy themselves, the organisation will prove to value trust and employees will adopt similar habits.
- Be open and encouraging openness – openness and trust go hand in hand while secrecy builds suspicion. Thus, management needs to be transparent with open promotions and compensation policies, for example, to build trust of employee for the organisation. By allowing individuals to share information, also, helps build trust through openness.
- By trusting – "people tend to be as untrustworthy or devious as you expect them to be". Thus, rather assume them to be capable and conscientious and many will prove organisations right.
- Material incentives – the right kind of material benefits may promote trust.

They conclude this section on trust by saying that once organisations have broken the trust of their employees no amount of enthusiasm can rebuild the trust to the point that it encourages commitment of the employee to the organisation again (Cohen & Prusak, 2001: 51).

According to Petrick and Manning (1990: 83) employees taking pride in what they do, enjoying the people they work with and trusting the people they work for are components of high morale of workplaces. Petrick and Manning (1990: 83) indicate that groups with high morale have a great sense of shared direction as well as a commitment to peak performance. Thus, managers need to improve the morale among workers in the organisation through satisfying the components of a high morale (Petrick & Manning, 1990: 83).
A second important aspect of social wellness in organisations is that of networks and communities that contribute to "learning and knowledge exchange, collaboration, membership, commitment as well as the intrinsic rewards of belonging and being appreciated" (Cohen & Prusak, 2001: 79). Ruth, as cited by Cohen and Prusak (2001: 53) makes this aspect understandable by saying that "you may have the greatest bunch of individual stars in the world, but if they don't play together, the club won't be worth a dime". According to Cohen and Prusak (2001: 61) networks in organisations help develop employees' personalities and identities, making them "members" of the organisation. This "membership" implies connection in the organisation and it is this sense of belonging that prevents valuable employees from being lured by competitors offering a higher salary, amongst others (Cohen & Prusak, 2001: 62). Thus, according to them, fostering membership is vital for the retention of talent within the organisation (Cohen & Prusak, 2001: 62).

Part of becoming a member of the organisation is the process of socialisation. Werner (2001b: 28) defines this process as one through which new employees learn the values, norms and beliefs in order to become an integral part of it. According to Cohen and Prusak (2001: 62-63) this "legitimate peripheral participation" is an essential part of becoming a connected and productive employee within the organisation and reinforces conformity.

Cohen and Prusak (2001: 55) make known that people are "social animals" that come together to form teams or groups in order to provide the satisfaction of sociability. In addition, Potgieter (2001b: 96-97) indicates that teams in organisations empower employees to make decisions related to the team and its effective management produces better performance levels and organisational effectiveness. Organisations, thus, to ensure their teams' effectiveness need to continually invest in training and development opportunities, for example through teambuilding activities, as well as making sure there is support from senior management (Potgieter, 2001b: 101).

Communication is vital to allow the exchange of information between employees (Schultz, 2001: 118). According to Cohen and Prusak (2001: 107)
"conversations bind communities and builds social capital". According to them conversations include:

- **Gossip** – although having a bad connotation to it can also assert relationships and increase the sense of belonging (Cohen & Prusak, 2001: 109-110) and

- **Stories** – since they have the power to build and support social capital. Story telling, through storytelling social occasions, is encouraged as an important tool for communicating explicit and tacit knowledge (Cohen & Prusak, 2001: 114).

In light of the various social wellness resources and techniques, none can be successful without authentic respect for social capital (Cohen & Prusak, 2001: 185). They suggest that authenticity is achieved through persistence since trust, understanding and loyalty take time to develop (Cohen & Prusak, 2001: 185).

### 3.2.5 Spiritual Wellness

This dimension of wellness involves “the ongoing involvement in seeking meaning and purpose in human existence together with the desire to attain inner peace and the development of principles and values that will guide human relationships and decision making” (Forum of Counselling, Health and Welfare, 2004: 4).

According to McBrien (1981: 1) spirituality is regarded as “the way people orientate themselves towards the Divine in order to make a meaning out of their lives as well as a means to provide a perspective to foster meaning, purpose and direction in their life”. Hopkins, Woods, Kelly, Bentley and Murphy (1995: xi) have provided structured exercises that can be applied in spiritual awareness groups in an aim for participants to “discover sources of inner strength, to find hope, to discover wholeness of the body, mind,
emotions and spirit as well as permit an opportunity for an expression of the spiritual aspects of nature". They suggest the use of these spiritual exercises in spiritual awareness groups that will meet typically for one hour weekly sessions with the focus on open discussion of spiritual themes (Hopkins et al, 1995: xi). The various themes, they suggest, are:

- Growing spiritually – this involves the quest to explore one's faith, meaning of life and the need to find peace in adversity;
- Values – this section focuses on the development of values, issues like honesty and responsibility, meaning and purpose of work as well as the value of money in our lives;
- Creativity and wonder – since humans become more critical of themselves as they mature, this section aims to connect creativity and wisdom to spirituality, as well as encourage individuals to value what they have learned and to take chances by trying new activities;
- Relationships – this section offers individuals the opportunity to value good relationships, resolve the pain of broken ones and to consider developing new ones that are intimate and supportive;
- Life review – these exercises allow participants to reflect on their entire lives from birth to death recalling their legacy and considering that which they would want to pass on;
- Ceremonies – this section explores ways in which participants can let go of guilt and experience forgiveness, ways in which they can increase their awareness of prayer as well as how they can express emotions through the use of symbols and rituals (Hopkins et al, 1995: 29 -128).

Holt, Houg and Romano (1999: 160) indicate that due to the epidemic of HIV Aids, spiritual counselling has become increasingly important for the person living with the disease as well as the family, friends and caregivers. This is especially significant in South Africa as the country is suffering with an HIV pandemic. Holt et al (1999: 164 – 168) give recommendations when counselling HIV aids infected employees and those associated with them:
• Develop a sense of purpose and hope in their lives with the ultimate acceptance of death;
• Due to the emotional and physical loss experienced by all involved those that are left behind must be encouraged to recognise that grieving is a way of honouring the person who died;
• Counseling may be required for those that consider euthanasia as a means of ending their lives.

The meaningfulness of life, associated with a spiritually well person is lacking in that of a depressed person (Westgate, 1996: 28 – 29). According to her, as more people are being diagnosed with depression, an interest is growing in approaching the reduction of depression spiritually (Westgate, 1996: 33). Westgate (1996: 33 - 34) argues that this is supported based on a contrast between the wellness of a spiritual person and that of a spiritually void person that describes feelings of “meaninglessness, emptiness, hopelessness as well as alienation that deepens as the depression increases”.

Thus, spiritual wellness represents the “openness to the spiritual dimension that permits the integration of a person’s spirituality with the other dimensions of life in order to maximise the potential for growth and self-actualisation” (Westgate, 1996: 27).

3.3 SUMMARY

This chapter covered the literature survey of prior research done in the remaining dimensions of wellness. It covered the second dimension of wellness, mental wellness, as encompassing the openness to new ideas, as well as, the continuous acquisition, further development and creative application of independent and critical thinking skills. The third dimension of wellness, occupational wellness, mean enjoying what one is doing in order to live and contribute to society.
Emotional wellness, the fourth dimension of wellness, encompasses an awareness and acceptance of one's feelings, the ability to maintain relative control over emotional states, to express feelings appropriately, to cope effectively with stress, having the capacity to feel positive and enthusiastic about oneself and life, ability to motivate oneself, as well as, having the ability to persist in the face of frustrations. The fifth dimension, social wellness, involves establishing meaningful relationships and demonstrating an ongoing commitment to the community and the environment. Lastly, spiritual wellness, the final dimension of wellness covers an individual's ongoing involvement in seeking meaning and purpose in life and the development of principles that will guide human relationships and decision-making.

This chapter has, thus, concluded the literature study of prior research done in the various dimensions of wellness. The next chapter will involve a description of the research methodology undertaken, the structure of the questionnaire will be explained, as well as, the method by which it was employed will be discussed.
CHAPTER 4
DESCRIPTION OF THE RESEARCH
METHOD, STRUCTURE OF THE QUESTIONNAIRE
AND THE
METHOD BY WHICH IT WAS ADMINISTERED

4.1 INTRODUCTION

This chapter explains the research approach that was followed in order to resolve the main and sub-problems. In order to achieve this, a questionnaire was administered to the sample group of employees and management. The Employee Questionnaire (EQ) covered assessing the various aspects of wellness, drawn from the literature, which are indicated as necessary to ensure the holistic wellness of an employee. The Management Questionnaire (MQ) covered assessing the extent to which wellness programmes, if any, were implemented within Bodene (Pty) Ltd, the extent to which, if implemented, were successful within the organisation as well as the role management played in actively promoting employee wellness on site, in particular.

The results of responses received from the empirical survey obtained from both the EQ and MQ will be analysed in the next chapter. This will be done in order to develop a coherent organisational wellness programme. It will be consequently implemented if management considers it viable in it being essential for the wellness of the organisation and its employees.

4.2 RESEARCH DESIGN

Leedy (1997: 3) defines research as the systematic process of collecting and analysing information with the objective of increasing our understanding of the subject with which we are concerned or interested. Leedy (1997: 93) indicates that the design process is the planning of the research such that there is a visualisation of data and the problems associated with the use of the data in
achieving the results of the research project. Thus, he indicates that the design of the research is the key element to the success of the research project (Leedy, 1997: 93). Consequently, chapter one has highlighted the design of this research study.

In order to resolve the main problem the following sub-problems were developed:

Sub-problem One: What does research reveal as the critical wellness factors needed by people in order to be successful and happy at home and in the workplace?

Sub-problem Two: What organisational wellness programmes exist at Bodene (Pty) Ltd and to what extent have they, if any, been implemented within the organisation?

Sub-problem Three: What is the current level of wellness existent among the employees at Bodene (Pty) Ltd?

Sub-problem Four: To integrate the findings in order to develop a coherent wellness programme.

The procedure used to solve the main problem and sub-problems were as follows:

- A comprehensive literature study was undertaken in chapters two and three to resolve sub-problem one.
- In Chapter five, that follows, the empirical study is undertaken and the results analysed in order to resolve sub-problems two and three. An Employment Questionnaire (EQ) and Management Questionnaire (MQ) was constructed and then administered in the Bodene (Pty) Ltd Small Volume Parenteral department and to the Human Resource department, respectively.

4.3 DESIGN AND STRUCTURE OF THE QUESTIONNAIRE

The Employee Questionnaire (EQ) was developed based on wellness criteria gleaned from the literature survey undertaken in chapters two and three. The
questions were, thus, selected to address each of the specific aspects needed within each dimension of wellness to ensure employee wellness. Thus, the questionnaire:

- is based on the assessment of each of the six dimensions of wellness;
- helps one to identify one’s current level of well-being;
- and, consequently, helps employees identify areas of wellness within themselves that require improvements.

This EQ was the instrument used on blue-collar employees and a limited number of middle management to assess the level of current wellness present in the employees of Bodene (Pty) Ltd. It consisted of closed-ended as well as some open-ended questions that attempted to assess the six dimensions of wellness. These included:

- Physical wellness assessed through the aspects of physical fitness and nutrition, medical self care and safety awareness;
- Social wellness assessed through the aspects of environmental protection and conservation awareness and social awareness;
- Emotional wellness assessed through the aspects of sexuality and emotional awareness as well as emotional management;
- Mental wellness assessed through intellectual understanding and interest in the world wide issues;
- Occupational wellness assessed through establishing whether employees are enjoying what they are doing in order to live and contribute to society;
- Spiritual wellness assessed through spiritual values as well as having a meaning and purpose in life.

Respondents were required to complete all sections in order to receive an overall wellness assessment.

McBurney (1994: 194) indicates that the use of closed-ended questions makes it easier for the respondents to code and analyse without the need to articulate in formulating their answers. According to Riley, Wood, Clarke,
Wilkie and Szivas (2000: 82) open-ended questions are more difficult to aggregate and computerise. However, according to them, these questions do not impose restrictions on the answer and responses can be richer and deeper.

Further, a five point Likert type scale was used with scores allocated to responses. According to Allison, O’ Sulivan, Owen, Rice, Rothwell and Saunders (1996: 83) this scale is the most frequently used scale where the respondent chooses a response that best suits their view. The Likert scale, through the 5-point rating, offers a midpoint in the scale between positive and negative responses (Riley, et al, 2000: 121). Scoring in the wellness questionnaire was as follows: 1 = Seldom, 2 = Sometimes, 3 = Unsure, 4 = Often and 5 = Very often. In addition, a colour coding system was used to make analysis easier. The colour coding system used will be explained in the next chapter.

The questionnaire was divided into eight sections, namely:

- Section One: This section covered the biographical data of the respondents;
- Section Two: This section covered the assessment of the Physical Wellness of the respondents;
- Section Three: This section covered the assessment of the Mental Wellness of the respondents;
- Section Four: This section covered the assessment of the Occupational Wellness of the respondents;
- Section Five: This section covered the assessment of the Emotional Wellness of the respondents;
- Section Six: This section covered the assessment of the Social Wellness of the respondents;
- Section Seven: This section covered the assessment of the Spiritual Wellness of the respondents;
- Section Eight: This section covered the assessment of the importance that the respondents placed on the suggestions of various possible
programmes that could become available as part of an employee wellness programme, if considered viable by the company.

The Management Questionnaire (MQ) that was constructed was made up of a number of general questions in order to determine:

- What wellness programmes existed, if any, on site;
- The extent to which they had been implemented;
- The extent to which they have been successful within the organisation;
- The role management played in actively promoting employee wellness on site.

The MQ was the instrument used for the sister-on-site and the Human Resource (HR) or Industrial Relations (IR) manager. The MQ consisted of some closed-ended and open-ended questions in order to obtain the information required.

4.3.1 Sample Size

Wellman and Kruger (2001: 46) define a population as the study object, which may be individuals, groups, organisations, human products, events or the conditions to which they are exposed. According to Leedy (1997: 221) “the larger the sample the better”. However, Gaye (1996) as cited by Leedy (1997: 221) suggests guidelines as to the selection of the size of the sample, in light of the fact that a researcher needs more guidance when having to make practical decisions about a specific research situation. Gaye (1996) indicates this as:

- For populations less than 100: survey their entire population;
- Populations around 500: sample 50 per cent of the population;
- Populations around 1 500: 20 per cent should be sampled;
- Populations beyond 5 000: population size becomes irrelevant and thus, the standard sample size of 400 will be adequate.
For Bodene (Pty) Ltd, the sample size based on a population of 65 within the Small Volume Parenteral department renders that each of the 65 members will be exposed to the questionnaire.

4.3.2 Administration Of The Questionnaire

Due to the close relation of the researcher to the population being assessed, the questionnaire was hand-delivered to each respondent within the Small Volume Parenteral department. The confidentiality of respondents was assured by a confidentiality undertaking as part of the administered questionnaire as well as allowing the inclusion of respondent's names and surnames as being optional. This confidentiality undertaking formed the cover document to the administered questionnaires (see Annexure A). This document:

- Expressed the level of confidentiality that information learnt through the questionnaire will be handled with;
- Explained the aim of the survey being undertaken;
- Explained the purpose of the questionnaire;
- Indicated the importance of respondents completing the questionnaire and returning it for evaluation;
- Expressed consent given to the researcher by the management of Bodene (Pty) Ltd.

The researcher, having to take into consideration those respondents working on the alternate shift, had to carefully control the administration of questionnaires in an attempt not to leave anyone out of the pool of respondents. Thus, the questionnaires were administered and received back over a three-week period from 27 September 2004 to 12 October 2004.

4.3.3 Pilot Study

A pretest of the questionnaires on a small population is necessary to find out whether any deficiencies exist within the questionnaire that may result in the
actual respondents finding difficulty in completing or understanding the questions posed to them (Schnetler, 1994, as cited by Leedy, 1997: 143). Based on this advice, both the EQ and MQ were subjected to a pretesting or pilot study in order to determine any shortcomings within its administration and its content. A group of five randomly selected employees within the Small Volume Parenteral department were selected to participate in the study for the EQ while two unrelated management employees were subjected to the MQ.

The randomly selected employees encountered a few problems, in terms of clarity. These were corrected to be more precise and a pretest done again. No further problems noted, in both questionnaires, with the ultimate response being that the questions were fair, easy to understand with no attack being felt on the organisation or on the respondents. However, many did comment that the type of questions, which needed to be asked to assess the wellness as literature indicates, seemed quite personal. The personal nature of some questions was acknowledged, however, this could not be alleviated, as the questions were necessary to determine the extent of wellness to the fullest degree. The personal nature was the reason that the confidentiality clause was undertaken.

4.3.4 Face-To-Face-Interview

A face-to-face interview was held with various respondents who were not clear with certain issues within the questionnaire. This lack of clarity was not due to lack of clarity within the questionnaire but rather due to a limited literacy level that exists with certain blue-collar workers.

4.4 DATA ANALYSIS METHOD

Due to the limited amount of data that was in question, the researcher analysed the data and did not make use of a statistician. The data was analysed with the aid of a colour coding system. This system is explained in
detail in chapter five.

4.5 PROBLEMS EXPERIENCED

No problems were experienced by the researcher in the administration or in the collection of the questionnaires. The researcher did experience problems, however, with regards to analysing information of a personal nature. It was discovered, during the tabulation of the questionnaire results, that respondents did not answer or simply opted to answer "unsure" to many of the personal questions. Upon probing of respondents, many of them mentioned to the researcher that they felt the questions were too private to answer on the questionnaire. This made analysis of results to the affected sections difficult. Results may have been skewed such that the results looked either more positive or negative than they should have been.

The privacy of the respondents was respected and the researcher did not probe respondents any further.

4.6 SUMMARY

This chapter highlighted the planning and execution of the empirical element of the study. Two questionnaires were administered. The EQ, based on aspects drawn out of the literature study undertaken, was constructed to ascertain the level of wellness existent among the employees within the Small Volume Parenteral department. The MQ was developed based on general questions to ascertain whether wellness programmes are in place within Bodene (Pty) Ltd, the extent to which they are being implemented and successful and the extent to which management is behind this wellness promotion. Both questionnaires were accompanied by a covering document that confirmed the confidentiality of the information learnt as well as the aim and purpose of the survey and questionnaire. The method of administration was hand delivering and the personal retrieval of questionnaires.
The next chapter covers the response rate achieved as well as the analysis and interpretation of the empirical results received.
CHAPTER 5
RESULTS AND ANALYSIS OF
THE EMPIRICAL STUDY

5.1 INTRODUCTION

This chapter entails the analysis of the responses achieved through the administration of the Employee Questionnaire (EQ) and the Management Questionnaire (MQ). The analyses of responses are needed in order to resolve sub-problems two and three. The results will be partly presented in the form of tables and graphs in order to provide an interesting illustration as well as ensure a clear unambiguous understanding of responses achieved.

5.2 EMPLOYEE QUESTIONNAIRE (EQ) RESULTS ANALYSIS

This section will indicate and show the analysis of the results obtained from the questionnaires administered to blue-collar workers and a select number of middle management within the Small Volume Parenteral department of Bodene (Pty) Ltd. A demographic analysis of respondents follows immediately and thereafter there will be an analysis of results for each dimension of wellness.

5.2.1 Demographic Data Analysis

Number of questionnaires administered: 65
Number of questionnaires returned: 50
Percentage response: 77

The respondent’s demographic data with regard to gender is provided in Table 5.1.
Table 5.1: Respondents personal statistics (Gender)

<table>
<thead>
<tr>
<th>GENDER</th>
<th>NUMBER</th>
<th>PERCENTAGE (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female Respondents</td>
<td>36</td>
<td>72</td>
</tr>
<tr>
<td>Males Respondents</td>
<td>14</td>
<td>28</td>
</tr>
</tbody>
</table>

From Table 5.1 it can be seen that the majority (72 per cent) of respondents were female while males constituted only 28 per cent of the total respondents.

The respondent’s demographic data with regard to race is provided in Table 5.2.

Table 5.2: Respondents personal statistics (Race)

<table>
<thead>
<tr>
<th>RACE</th>
<th>NUMBER</th>
<th>PERCENTAGE (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>African Respondents</td>
<td>7</td>
<td>14</td>
</tr>
<tr>
<td>Coloured Respondents</td>
<td>38</td>
<td>76</td>
</tr>
<tr>
<td>Indian Respondents</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>White respondents</td>
<td>3</td>
<td>6</td>
</tr>
</tbody>
</table>

This table shows the race distribution among respondents that saw Coloured’s comprising 76 per cent of respondents, Whites making up six percent, Africans making up 14 per cent while the Indian population comprising a minimum of only four per cent.

The respondent’s demographic data with regard to length of service in the organisation is provided in Table 5.3.

Table 5.3: Respondents personal statistics (Length of service)

<table>
<thead>
<tr>
<th>LENGTH OF SERVICE</th>
<th>NUMBER</th>
<th>PERCENTAGE (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 1 year</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>1 – 5 years</td>
<td>11</td>
<td>22</td>
</tr>
<tr>
<td>6 – 10 years</td>
<td>15</td>
<td>30</td>
</tr>
<tr>
<td>&gt; 10 years</td>
<td>24</td>
<td>48</td>
</tr>
</tbody>
</table>
From Table 5.3 it can be seen that the majority of respondents have served a long term within the organisation. It can be inferred from the length of service that the majority of respondents are above the age of 30 years as the employment age within the organisation is matriculants of 18 years and above. With no respondents being with the company for less than one year it can be said that familiarity exists between employees and management within the organisation.

Respondents failed to answer questions relating to their position and grade within the department. Upon probing of respondents it was made known to the researcher that most of the respondents wanted to keep the questionnaire as anonymous as possible and therefore disclosing of position and grade could divulge their identity.

The following should be borne in mind with regard to the results obtained in the sections that follow, namely:

- The numerical values presented are all expressed in percentages (%);
- The results are colour coded with GREEN meaning ALL IS WELL, ORANGE meaning BORDERLINE and RED meaning CONCERN;
- Results for un-answered questions are indicated in BLUE.
- The Five-point Likert scale used indicates that 1 = Seldom, 2 = Sometimes, 3 = Unsure, 4 = Often and 5 = Very often;
- Likert scale rating 3 is considered to be the midpoint between positive and negative results.

5.2.2 Physical Wellness

This dimension of wellness will be assessed by taking into consideration the factors mentioned in the literature study, which was used to assess the physical wellness of employees, together with the empirical data retrieved from the questionnaires. These are indicated as:
Results obtained from questions related to regular exercise and nutritional responsibility is indicated in Tables 5.4 and 5.5.

**Table 5.4: Regular exercise and nutritional responsibility**
*(Rating: Yes / No)*

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>YES</th>
<th>NO</th>
<th>UN-ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q2: Do you do any type of exercise to try and keep fit and stay healthy?</td>
<td>62</td>
<td>36</td>
<td>2</td>
</tr>
<tr>
<td>Q5: Do you know what the Daily Recommended Allowances are for the various nutrients needed by the body to stay healthy?</td>
<td>60</td>
<td>38</td>
<td>2</td>
</tr>
</tbody>
</table>

**Table 5.5: Regular exercise and nutritional responsibility**
*(Rating: 1 – 5)*

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>SELDOM</th>
<th>SOME-TIMES</th>
<th>UN-SURE</th>
<th>OFTEN</th>
<th>VERY OFTEN</th>
<th>UN-ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q1: How often do you exercise for at least 20 – 30 minutes per day for a minimum of three times a week?</td>
<td>48</td>
<td>20</td>
<td>18</td>
<td>4</td>
<td>8</td>
<td>2</td>
</tr>
<tr>
<td>Q3: How often do you eat takeaways or at fast food restaurants?</td>
<td>12</td>
<td>52</td>
<td>20</td>
<td>12</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Q4: How often do you try to include foods high in fibre, like whole grain bread, cereals, beans and bran, in your daily diet?</td>
<td>8</td>
<td>32</td>
<td>20</td>
<td>16</td>
<td>22</td>
<td>2</td>
</tr>
<tr>
<td>Q6: How often are you trying to lose weight using pills or any other means besides healthy eating?</td>
<td>66</td>
<td>8</td>
<td>12</td>
<td>2</td>
<td>8</td>
<td>4</td>
</tr>
</tbody>
</table>
From the analysis of Tables 5.4 and 5.5 it can be seen that respondents within the department are aware of a nutritional responsibility to remain healthy and the need for some form of exercise in their lifestyle. It can be seen that the number of respondents in the RED zone are minimal with the greatest response in the RED zone being 48 per cent. Since the emphasis of wellness is on “prevention rather than cure”, programmes shall be proposed to the organisation aimed at employees in the RED and BORDERLINE zones. The intention is to increase their awareness of regular exercise and nutritional responsibility. The programmes will also highlight the benefits of regular exercise and nutritional health. It will be essential that a programme exists that will make management understand the need for having a healthy workforce and the necessity in investing in programmes that will keep their employees healthy.

(b) Self-care

Results obtained from questions related to physical self-care are indicated in Tables 5.6 and 5.7.

Table 5.6: Self-care (Rating: 1 – 5)

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>SELDOM</th>
<th>SOME-TIMES</th>
<th>UNSURE</th>
<th>OFTEN</th>
<th>VERY OFTEN</th>
<th>UN-ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q8: How often do you examine your breasts and testes on a monthly basis?</td>
<td>36</td>
<td>20</td>
<td>18</td>
<td>10</td>
<td>10</td>
<td>6</td>
</tr>
<tr>
<td>Q10: How often do you consume alcohol?</td>
<td>48</td>
<td>36</td>
<td>10</td>
<td>4</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Q11: How often do you smoke?</td>
<td>70</td>
<td>4</td>
<td>2</td>
<td>14</td>
<td>10</td>
<td>0</td>
</tr>
<tr>
<td>Q12: How often do you drink at least six to eight glasses of water per day?</td>
<td>12</td>
<td>10</td>
<td>24</td>
<td>22</td>
<td>32</td>
<td>0</td>
</tr>
</tbody>
</table>
Table 5.7: Self-care (Rating: Yes / No)

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>YES</th>
<th>NO</th>
<th>UN ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q7: Do you go for regular medical check ups?</td>
<td>74</td>
<td>26</td>
<td>0</td>
</tr>
<tr>
<td>Q9: Do you know how to do a breast or testicular examination?</td>
<td>74</td>
<td>26</td>
<td>0</td>
</tr>
</tbody>
</table>

The assessment of data compiled in Table 5.6 and Table 5.7 show that the only real area of concern are those respondents in the RED zone that indicated a low frequency of doing self-examinations on their breasts (females) and testes (males). Twenty six per cent of respondents indicated that they are not aware of how to do this self-examination. This indicates that the remaining 30 per cent of respondents that do know how to do the examination does not bother to do it regularly. This is of concern, especially, in light of the increase in incidence of breast cancer and all the media hype surrounding it. A campaign dedicated to "raising the awareness of early detection in order to enhance the chances of survival", as currently run by the Estee Lauder Companies, can be incorporated into a self-care programme aimed at the respondents that fall into the RED zone.

Analysis also shows that the majority of respondents within the department are in the GREEN zone indicating:

- That they are conscious of the necessity of regular medical check ups;
- That they are aware of the need to take care of their body by not destroying it with the abuse of alcohol or smoke inhalation;
- That they drink plenty of water in order to keep their body hydrated and well.

Programmes will focus primarily on the respondents that fall into the RED and BORDERLINE zones. The programmes will focus on raising respondent’s awareness for self-care as well as provide them with ways to take care of their body.
(c) Safety awareness and the practice of safe traffic measures

A table 5.8, based on a scale rating of 1 – 5, indicates the data received from safety awareness and safe traffic practice questions posed to respondents in the questionnaire.

Table 5.8: Safety awareness and practice of safe traffic measures
(Rating: 1 – 5)

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>SELDOM</th>
<th>SOME- TIMES</th>
<th>UN- SURE</th>
<th>OFTEN</th>
<th>VERY OFTEN</th>
<th>UN- ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q13: How often do you drive or are driven with your safety belt on?</td>
<td>26</td>
<td>12</td>
<td>12</td>
<td>6</td>
<td>44</td>
<td>0</td>
</tr>
<tr>
<td>Q15: How often do you exceed the speed limit?</td>
<td>48</td>
<td>14</td>
<td>14</td>
<td>0</td>
<td>4</td>
<td>20</td>
</tr>
<tr>
<td>Q16: Do you use sunscreen or any protective garments when going out into the sun or swimming?</td>
<td>18</td>
<td>16</td>
<td>20</td>
<td>14</td>
<td>32</td>
<td>0</td>
</tr>
</tbody>
</table>

Due to the critical nature and life-threatening consequences of driving without a seatbelt or exceeding the speed limit all ratings were considered as being in the danger zone and, thus, indicated in RED. No BORDERLINE zone exists for Questions 13 and 15. The 20 per cent of respondents that failed to answer Question 15 did as a result of them not possessing a car with their only means of transport being public transport (taxi or buses).

Table 5.9, based on a “Yes / No” rating, indicates the data received from safety awareness and safe traffic practice questions posed to respondents in the questionnaire.
Table 5.9: Safety awareness and practice of safe traffic measures  
(Rating: Yes / No)

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>YES</th>
<th>NO</th>
<th>UN - ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q14: Do you ever drive or are driven with people under the influence of alcohol?</td>
<td>36</td>
<td>62</td>
<td>2</td>
</tr>
<tr>
<td>Q17: Do you know First Aid practices that could save yours or someone else’s life?</td>
<td>74</td>
<td>26</td>
<td>0</td>
</tr>
</tbody>
</table>

Another critical RED zone is the 36 per cent of respondents that admitted to driving under the influence of alcohol or allowing him or herself to be driven by a person under the influence of alcohol.

Other results from Tables 5.8 and 5.9 show that:

- Only 46 per cent of respondents are in the GREEN zone wearing protective garments regularly when going into the sun. A total of 54 per cent of the respondents fall into the RED and BORDERLINE zones;
- Only 26 per cent of respondents fall into the RED zone of not knowing First Aid practices that could save another person’s life while the majority is in the GREEN zone knowing First Aid practices.

From the above analysis it is evident that programmes that bring the life-threatening results of practising unsafe traffic measures to a reality is a necessity within the organisation. In light of the increase in skin cancer incidents and the number of respondents falling into the RED and BORDERLINE zones, in this area, an awareness programme is warranted. First Aid courses should be part of a wellness programme.

(d) Sufficient relaxation and sleep

The results obtained of questions related to the assessment of sufficient relaxation and sleep is shown graphically in Figure 5.1.
The "very often" option has been omitted from Figure 5.1 due to no respondents indicating that they very often have trouble falling asleep such that they do not feel refreshed.

From the results that are shown in Figure 5.1 it can be seen that:

- A total of 50 per cent of respondents are in the GREEN zone indicating that they have no real problems in trying to fall asleep or having to sustain their sleep;
- However, 26 per cent of respondents lie in the RED zone and 22 per cent in the BORDERLINE zone with the potential to become a concern, if left unattended.

Thus half, as indicated, have a relatively sufficient amount of relaxation and sleep. However, an almost equal percentage has insufficient relaxation or sleep time that is desired to feel refreshed. This necessitates addressing through an appropriate programme as sleep deprivation among employees’ results in tired employees that will not only affect the health and safety of the tired employee, but the health and safety of those employees around them as well. This will ultimately affect the organisation’s productivity.
Table 5.10 shows results of answers to questions relating to the respondents practice of safe and responsible sexual practices.

**Table 5.10: Practice of safe and responsible sexual practices**

(Rating: Yes / No)

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>YES</th>
<th>NO</th>
<th>UN-ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q20: Are you aware of the various sexually transmitted diseases and how they are transmitted?</td>
<td>100</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Q21: Do you practice safe sex, if sexually active?</td>
<td>80</td>
<td>8</td>
<td>12</td>
</tr>
</tbody>
</table>

Table 5.10 shows that:

- All the respondents fall in the **GREEN** zone of being aware of the various sexually transmitted diseases and how they are transmitted;
- A total of 80 per cent admit to engaging in safe sex;
- Only eight per cent are in the **RED** zone indicating that they do not engage in safe sexual practices;
- It is noted that 12 per cent of respondents opted not to divulge any information, in this regard. It is, thus, not certain in which zone they fall into. However, for purposes of “prevention rather than cure” it will be assumed that they fall in the **RED** zone.

Although these results indicate that employees are well in this area it is apparent that the sexual open-ness of respondents is almost non-existent. This makes the researcher question the authenticity of responses as it is likely, based on the responses received to sexual-orientated questions, that answers were given that made things look good. Thus, in light of this and despite the minority of respondents in the **RED** zone, a programme will be implemented that will address all sexual issues. This will include addressing responsible sexual activities as well as bringing employees to understand that sex is not a “bad” thing or something taboo. Instead, it should be seen as a “clean” act that is an expression of love between two people in a fulfilling long-
term relationship. This is needed in order to allow respondents to feel more comfortable to speak about sexual matters, in confidence, with trained professionals.

(f) Non-abuse of substances of abuse

The majority of respondents are in the GREEN zone with regards to the abuse of substances of abuse. This was indicated in:

- Question Six, where 74 per cent of respondents indicated that they "seldom" to "sometimes" used pills in an attempt to loose weight;
- Question 10, which showed that 84 per cent of respondents "seldom" to "sometimes" consumed alcohol;
- Question 11 showed 74 per cent of respondents indicating that they "seldom" to "sometimes" smoked.

The balance of respondents in each of the above-mentioned questions is in the minority falling in the RED and BORDERLINE zones. There is, thus, no evidence of abuse among the respondents within the department. However, the majority of respondents rated a substance abuse programme as very important. This could mean that results obtained in this section of the questionnaire may not be a true reflection of abuse among respondents. This indicates, to the researcher, that a problem may exist that is being, possibly, hidden for fear of being victimised or ridiculed. In line with this thinking, programmes will be proposed that will aim to respond to those respondents falling in the RED and BORDERLINE zones as well as any other interested employee.

5.2.3 Mental Wellness

According to the literature study undertaken various aspects have been mentioned that assesses or determines whether a person can be regarded as mentally well, not only in the workplace but also in the overall. These aspects will be considered, in conjunction with the empirical data compiled.
(a) Uses resources to expand knowledge and improve skills

This aspect will be handled more fully in the Occupational Wellness assessment (Section 5.2.4).

(b) Curiosity about the world

Table 5.11 presents the results obtained to questions relating to the respondents curiosity about the world.

Table 5.11: Curious about the world (Rating 1 – 5)

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>SELDOM</th>
<th>SOME-TIMES</th>
<th>UN-SURE</th>
<th>OFTEN</th>
<th>VERY OFTEN</th>
<th>UN-ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q1: How often do you read a magazine, novel or newspaper?</td>
<td>6</td>
<td>22</td>
<td>16</td>
<td>8</td>
<td>48</td>
<td>0</td>
</tr>
<tr>
<td>Q2: How often do you listen to the news in order to remain up-to-date with events occurring around us?</td>
<td>0</td>
<td>8</td>
<td>26</td>
<td>20</td>
<td>46</td>
<td>0</td>
</tr>
</tbody>
</table>

Table 5.11 indicates that a majority of respondents fall into the GREEN zone, with:

- Fifty-six per cent indicating that they read a magazine, newspaper or novel “often” to “very often”;
- Sixty-six per cent try to remain up-to-date with world events by listening to the news “often” to “very often”.

This shows that, within the department, respondents do show curiosity and interest in world events and wanting to keep abreast of current issues and ideas. This, further, shows that respondents are intellectually stimulated wanting to expand their intellectual knowledge beyond the environment in which they work and live. Programmes may not be necessary, in this regard, however it will be addressed in conjunction with other mental wellness programmes.
Results to questions assessing the respondents' involvement in stimulating activities for recreational purposes are presented in Table 5.12.

Table 5.12: Stimulating activities for fun (Rating: Yes / No)

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>YES</th>
<th>NO</th>
<th>UN-ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q4: Have you ever attended a play, musical or art showing?</td>
<td>78</td>
<td>20</td>
<td>2</td>
</tr>
<tr>
<td>Q5: Do you play any of the following games like chess, scrabble or complete crosswords for fun?</td>
<td>52</td>
<td>46</td>
<td>2</td>
</tr>
</tbody>
</table>

From this presentation of results in Table 5.12 it can be seen that a majority of respondents are involved in some type of stimulating activity to pass time and, thus, fall in the GREEN zone. Although 46 per cent fall into the RED zone, not playing one of the stimulating games indicated, the questionnaire results have shown that they are involved in other activities that do stimulate their mind or allow them to be creative.

Other data received from the questionnaire administered, is that 86 per cent of the respondents are in the GREEN zone being fluent in two languages, with a minimum of two per cent falling into the RED zone knowing only one and another 12 per cent in the GREEN zone being fluent in three languages. The fluency in more than one language, according to literature, plays a role in determining whether a person is mentally well or not. Thus, at this stage, the researcher can deduce that the respondents within the department are relatively well, mentally, as no major percentages in the RED or BORDERLINE zone have been seen that indicate otherwise.

5.2.4 Occupational Wellness

As discussed in Chapter three various signs exist that indicate that a person has good or poor occupational health. These will now be addressed

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individually, in relation with the empirical data retrieved.

(a) Hobbies and interests outside of the work arena

From Question one of the questionnaire it was seen, from the response data compiled, that 90 per cent of the respondents are in the GREEN zone in that they do have hobbies or fields of interest outside that of the work environment. These included interests such as reading, cooking, baking, watching television, partaking in sports events, singing, fishing, cycling, listening to music and photography. These interests varied among respondents and indicate that a wealth of abilities exists among respondents within the department.

(b) Comfort in the direction of future plans

Table 5.13 provides the results of the respondents’ responses to questions regarding the direction of their future career plans, if any.

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>YES</th>
<th>NO</th>
<th>UN-ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q2: Do you have any future career goals or plans?</td>
<td>78</td>
<td>14</td>
<td>8</td>
</tr>
<tr>
<td>Q15: Do you take advantage of every opportunity to learn a new skill within the workplace?</td>
<td>62</td>
<td>36</td>
<td>2</td>
</tr>
<tr>
<td>Q16: Are you aware of any type of learning opportunities available to you?</td>
<td>82</td>
<td>14</td>
<td>4</td>
</tr>
</tbody>
</table>

In terms of career goal planning, it can be seen from Table 5.13 that there is sufficient career goal planning among respondents. However, it is evident that although 82 per cent of respondents are in the GREEN zone of being aware of the opportunities available to them to develop themselves within the work environment, only 62 per cent are actually taking advantage of this opportunity that is presented to them. In addition to the obvious RED zones indicated in Table 5.13, the respondents that do not take advantage of the
opportunities presented to them, despite being aware of the learning opportunities available to them, also becomes candidates for concern falling into the RED zone. The respondents that are not interested in learning within the workplace are disinterested, possibly amongst others, due to:

- Many having no ambition to go anywhere else within the department or organisation as they have become too comfortable within their present job;
- A reluctance to study for fear of failing;
- A Learning disability, or
- Simple lack-luster.

As will be later seen, upon analysing the level of importance that respondents rated the proposed programmes, a majority indicated a training and development programme on the site as very important. Based on this, the highlighting of a training and development programme within the workplace will inspire all employees to see the need for career planning and training and development. This will enable employees to enjoy what they are currently doing and planning to do in the future so as to contribute to society. This employee development will help the company adopt a succession-planning programme. Through this programme the talents and abilities of employees are brought to light, can be retained and grown within the organisation rather than being lost to a competitive organisation offering more lucrative rewards.

(c) Ability to accurately assess strengths and weaknesses

According to respondent's responses 88 per cent are in the GREEN zone indicating that they are able to assess their strengths and weaknesses. Six per cent fall into the RED zone indicating that they are unable to assess this critical requirement necessary to excel in the work environment or to be able to competently plan a future career. Again, as previously mentioned, wellness is about “prevention rather than cure” and it will, therefore, be the researcher's aim to incorporate this assessment ability within a training and development programme that addresses career planning, as well.
(d) Doing what employees want to do in life

An analysis of responses to Question 13 of this dimension of wellness has indicated that 74 per cent of respondents are in the GREEN zone in that they have indicated they do have desires of things they want to do or want to achieve in life. These ranged from completing their studies, to being a reliable employee, to being a good mother, a good wife, to having his or her own business, to making people happy, to helping the underprivileged, to owning their own home, to becoming a medical doctor and to be an asset to the organisation. The researcher, being part of the department within which this survey was undertaken, was taken aback by the responses received. These desires were as selfless as wanting to help the poor and underprivileged to as ambitious as wanting to achieve a medical degree. However, it was discovered that of the 75 per cent of respondents that indicated a desire in life, 80 per cent of them has not had their desires come to fulfillment yet. This results in these respondents falling into the RED zone.

According to British scientists having a Purpose In Life (PIL) is a pre-requisite for people’s happiness as it gives meaning to their lives (Unknown, 2004: 153). From this, it can be deduced that having a PIL alone will give some meaning to the respondents. A programme must exist that will allow employees the opportunity to express their desire’s, with appropriate professionals. These professionals will be able to offer them advice as to how they can go about achieving their desire in life. This is needed so that these desire’s may not seem to respondents like only “a dream that is out of their leage" to achieve but rather that it can become a reality, if directed in the right direction.

(e) Lack of stress associated with work environment and the enjoyment in doing that which one needs to do in order to live and contribute to society

Table 5.14 below indicates the responses obtained from respondents regarding the enjoyment of their jobs.
Table 5.14: Job enjoyment (Rating: 1 – 5)

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>SELDOM</th>
<th>SOME-TIMES</th>
<th>UN-SURE</th>
<th>OFTEN</th>
<th>VERY OFTEN</th>
<th>UN-ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q3: How often do you enjoy the work that you do?</td>
<td>4</td>
<td>8</td>
<td>24</td>
<td>16</td>
<td>42</td>
<td>6</td>
</tr>
<tr>
<td>Q6: How often are you challenged by the work you are doing?</td>
<td>4</td>
<td>14</td>
<td>26</td>
<td>24</td>
<td>26</td>
<td>6</td>
</tr>
<tr>
<td>Q7: How often do you look forward to doing the job that you do?</td>
<td>6</td>
<td>10</td>
<td>24</td>
<td>20</td>
<td>40</td>
<td>0</td>
</tr>
<tr>
<td>Q10: How often do you feel there is a balance between the time spent at work and the quality time spent at home with family and friends?</td>
<td>20</td>
<td>14</td>
<td>26</td>
<td>12</td>
<td>14</td>
<td>14</td>
</tr>
</tbody>
</table>

In terms of the enjoyment employees feel in their job the majority of respondents fall into the GREEN zone enjoying the work they do. Question 10, the exception, shows a majority of respondents being in the RED and BORDERLINE zones. This indicate, therefore, that although respondents enjoy the work they do, as well as feel challenged by this work, there is the majority that feel that there is little to no balance between their work and home life. This necessitates the implementation of a programme that will balance employees’ work and home life. In the programme an in-depth analysis will be done on participating employees to identify the reasons for an imbalance and, through the help of professionals, programmes will be individualised. This will be done to address the needs and circumstances of each employee in order to balance his or her home and work life.

Table 5.15 presents the results obtained from questions relating to the assessment of stress present and felt by the respondents in their work environment.
Table 5.15: Lack of stress in work environment (Rating: Yes / No)

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>YES</th>
<th>NO</th>
<th>UN-ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q4: If you feel that you do not enjoy or are not totally satisfied with your job, do you feel that stress, depression, anxiety, learning problems or any other problems have resulted in this feeling?</td>
<td>44</td>
<td>42</td>
<td>14</td>
</tr>
<tr>
<td>Q8: Do you feel stressed in the job that you do?</td>
<td>52</td>
<td>44</td>
<td>4</td>
</tr>
<tr>
<td>Q11: Do you feel that you are a valued employee?</td>
<td>90</td>
<td>2</td>
<td>8</td>
</tr>
</tbody>
</table>

In terms of the stress felt by respondents within the work environment, as indicated in Table 5.15 above, more than half of the respondents falls into the RED zone feeling stressed in the job they do. Respondents have indicated that this stress and anxiety is part of the reason for them not enjoying their job fully. Responses to Question five of this dimension of wellness has shown that there is a lack of communication among team members, a lack of openness in the organisation, supervisors show favouritisms among team members, management do not acknowledge employees needs and various forms of racism still exist. This, respondents indicated as reasons for the stress and anxiety felt by the employees within the organisation. Stress may, also, be increased due to an imbalance of work and home life. As noted in Table 5.14, this is evident in the majority of respondents and they, therefore, fall into the RED zone. Fourteen per cent of respondents failed to give any input to Question four, possibly, indicating that although they are not fully satisfied with their job, they were too scared to indicate the reasons for this dissatisfaction for fear of being victimised.

It should, however, be noted that 90 per cent of respondents are in the GREEN zone in that they feel that they are valued as a critical part of a manufacturing team. Thus, although, it is clear that the employees do enjoy the work they do as well as feel valued within the organisation, a fair level of stress, depression and anxiety do exist among employees to warrant poor occupational health. It will be an asset to the organisation to include a programme that will help employees balance their home and work life as well as show them how to reduce the stress felt within the organisation caused by
factors that can easily be managed.

5.2.4 Emotional Wellness

From the literature study undertaken in Chapter three various elements were drawn out as encompassing emotional wellness, namely:

- An awareness and acceptance on his/her feelings;
- Ability to maintain control over emotional states;
- Being able to express feelings appropriately;
- Being able to feel positive and enthusiastic about themselves and life;
- Being able to motivate oneself;
- Being able to persist in the face of frustrations.

All of these elements are dependent on the person being able to cope effectively with stress. Addressing this dimension of wellness and its elements, mentioned above, will be covered in two steps.

The first step will be the assessment of the stressors that the respondents are being faced with.

(a) Shift work

Table 5.16 presents the results obtained from the questions pertaining to the shift work that the respondents are exposed to and its effects on themselves and their families.

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>YES</th>
<th>NO</th>
<th>UN- ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q10: Do you work shifts?</td>
<td>42</td>
<td>56</td>
<td>2</td>
</tr>
<tr>
<td>Q11: Are you and your family coping with the effects of working shifts?</td>
<td>29</td>
<td>71</td>
<td>0</td>
</tr>
</tbody>
</table>

From Table 5.16 it can be seen that only 42 per cent of respondents work shifts. This is not a concern, but does become one if it is not being managed
properly. Of the respondents working shifts, only 29 per cent fall into the **GREEN** zone being able to manage their shift life effectively. A concern is that 71 per cent of respondents admit to not coping with shift work and, thus, fall into the **RED** zone.

(b) Work-induced stress

The results for the assessment of work-induced stress are indicated in Table 5.17 where questions were rated on a “Yes / No” basis.

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>YES</th>
<th>NO</th>
<th>UN-ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q13: Do you have any sick leave still available to you?</td>
<td>72</td>
<td>24</td>
<td>4</td>
</tr>
<tr>
<td>Q14: Do you feel there is a discrimination of any kind in your work environment?</td>
<td>42</td>
<td>46</td>
<td>12</td>
</tr>
<tr>
<td>Q16: Do you know how to manage the stress, if any, that you experience in either the workplace or at home?</td>
<td>84</td>
<td>12</td>
<td>4</td>
</tr>
<tr>
<td>Q17: Are you excited or enthusiastic about doing new and different things?</td>
<td>94</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>Q39: Is there respect for the different cultures within the workplace?</td>
<td>70</td>
<td>22</td>
<td>8</td>
</tr>
</tbody>
</table>

Table 5.17 shows that the majority of respondents fall into the **GREEN** zone indicating low work-induced stressors. Discrimination within the work environment, however, seems to be a sensitive issue with an almost equal percentage of respondents falling into the **RED** and **GREEN** zones. A further 12 per cent of respondents, opted not to answer this question. This could possibly indicate a fear of inadvertently opening themselves up to discrimination.

The results for the assessment of work-induced stress are indicated in Table 5.18 where respondents rated questions on the scale of 1 – 5. The choice of rating depended on that which best described the respondents’ situation.
A minority of respondents, according to Table 5.18, falls into the RED zone. A majority of respondents falls into the GREEN zone indicating a low frequency of arguments between superiors and subordinates. This indicates a healthy environment. According to literature, a certain amount of positive stress is required to help employees strive towards growth and fulfillment in life. However, it is mentioned that negative stress occurs through unexpressed feelings. A total of 26 per cent of respondents were either "unsure" or did not answer the question. This indicates that only a minority of respondents showed a tendency towards not wanting to express him or herself or not knowing how to express him or herself. This indicates, therefore, that only a minority of respondents shows a tendency towards having negative stress due to unexpressed feelings.

The average absenteeism, of the 74 per cent of respondents that answered this question, was calculated as 7.73 days over a six-month period. The longest absenteeism being a continuous 30 days over a six-month period due to the respondent being stabbed and being in recovery. Twenty six per cent of respondents opted not to answer this question. These respondents indicated that they did not know the quantity days they had been sick for the last six-month period. This has a negative connotation, as it could mean that there were “too many sick days to remember”. According to literature absenteeism is the primary result of work-induced trauma. Bodene (Pty) Ltd has indicated a six per cent absence (eight days or more over a six-month period) as the level at which counselling between the company and the employee will commence. From this, on average, the respondents within the Small Volume
Parenteral department fall under this level. However, it is considered **BORDERLINE**.

Programmes that will make employees aware that stress can be good and have a positive effect on our lives, if it is in a balance with a regular phase of relaxation. Through a work-induced stress management programme absenteeism and stress management will be addressed in order to lower the rate. The programmes implemented will be aimed, primarily, at those respondents who fall into the **RED** and **BORDERLINE** zones.

(c) **Sexual relationship stress**

Tables 5.19 and 5.20 presents the results obtained from questions, based on a “yes / No” and 1-5 rating respectively, relating to the stress felt in the sexual relationships of the respondents.

**Table 5.19: Sexual relationship stress (Rating 1 – 5)**

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>SELDOM</th>
<th>SOME-TIMES</th>
<th>UN-SURE</th>
<th>OFTEN</th>
<th>VERY OFTEN</th>
<th>UN-ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q26: How often do you give love to others without expecting love in return?</td>
<td>4</td>
<td>6</td>
<td>18</td>
<td>24</td>
<td>44</td>
<td>4</td>
</tr>
<tr>
<td>Q27: How often are you and your partner comfortable with the level of sexual involvement in the relationship?</td>
<td>5</td>
<td>5</td>
<td>14</td>
<td>16</td>
<td>30</td>
<td>30</td>
</tr>
<tr>
<td>Q28: How often are you tolerant of other sexual relationships around you?</td>
<td>20</td>
<td>8</td>
<td>10</td>
<td>6</td>
<td>14</td>
<td>42</td>
</tr>
<tr>
<td>Q29: How often do you feel positive about yourself as a sexual person?</td>
<td>4</td>
<td>2</td>
<td>14</td>
<td>14</td>
<td>42</td>
<td>24</td>
</tr>
</tbody>
</table>
Table 5.20: Sexual relationship stress (Rating Yes / No)

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>YES</th>
<th>NO</th>
<th>UN- ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q25: Do you have positive relationships with women and men?</td>
<td>82</td>
<td>8</td>
<td>10</td>
</tr>
<tr>
<td>Q30: Do you have a sexual relationship, if any, that is</td>
<td>62</td>
<td>12</td>
<td>26</td>
</tr>
<tr>
<td>healthy for you and your partner?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Of concern is the high percentage of respondents that did not answer these sexual relationship stress assessment questions. The level of openness among respondents, as mentioned in Section 2.2.5, is low. The number of respondents that opted for the safer “unsure” rating confirms this.

Of those respondents that did respond, in both Tables 5.19 and 5.20, it is seen that the majority of the respondents fall into the GREEN zone indicating sexual wellness. Question 28, however, shows that a greater percentage of respondents fall into the RED zone, in not being tolerant of other sexual relationships around him or her. However, the percentage of respondents that fall into the RED zone is a minority overall. These results cannot be considered completely true, even though they may be for certain aspects. This has been deduced due to the fact that respondents have resisted answering this section of the questionnaire fully. Probing of respondents during the collections of questionnaires brought to light that respondents felt that these questions were too personal. Thus, it is possible that the ratings could have been indicated in a positive light or simply not answered in the attempt of not wanting to “let the company in” to their private affairs.

This privacy will be respected and thus, for purposes of this study, wellness programmes will be proposed that will deal with any sexual matters that employees may need to address with professionals. This is a necessity as it is of concern that respondents cannot express themselves with regards to sexual matters as well as the fact that it is evident that they are not tolerant of other sexual relations around them. These unexpressed feelings and intolerance may lead to an imbalance in the amount of stress experienced by employees and, thus, result in negative stress effects on their personal life.
and with ultimate consequences on their work environment.

(d) Financial stress

Results indicating the financial stress felt by respondents are presented in Table 5.21.

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>YES</th>
<th>NO</th>
<th>UN-ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q31: Are you up to date with all your monthly repayments?</td>
<td>66</td>
<td>28</td>
<td>6</td>
</tr>
<tr>
<td>Q32: Have you ever taken out a loan to repay another loan?</td>
<td>18</td>
<td>74</td>
<td>8</td>
</tr>
<tr>
<td>Q33: Do you struggle to stay out of debt?</td>
<td>28</td>
<td>68</td>
<td>4</td>
</tr>
<tr>
<td>Q34: Do you have any type of savings plan?</td>
<td>58</td>
<td>32</td>
<td>10</td>
</tr>
</tbody>
</table>

From this table the majority of employees are in the GREEN zone. It can be deduced that the majority of respondents lack stress attributed to the mishandling of finances. It was brought to light however, upon probing of respondents, that financial issues, too, is a sensitive issue for respondents to divulge information openly. Thus, as with the sexually — related questions, these results may have been indicated in a positive light when in fact they may not actually be. However, since wellness is aimed at "prevention rather than cure" a programme will be proposed that will target those respondents in the RED and UN-ANSWERED zones as well as any other interested employees. This will be proposed as the employee importance-rated wellness programmes, in Section 6.2.1, showed that 95 per cent of respondents indicated a financial programme as very important.

(e) Stress due to eating disorders, suicide or drug abuse

Table 5.22 presents the results obtained from questions assessing the stress that respondent’s experience due to either themselves or their family members suffering from an eating disorder, from suicidal attempts or from drug abuse.
Table 5.22: Stress due to eating disorders, suicide or drug abuse
(Rating: Yes / No)

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>YES</th>
<th>NO</th>
<th>UN- ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q8: In the past year have you experienced any traumatic events, like a divorce, death of a spouse, child or parent, loss of your own or family members’ job?</td>
<td>46</td>
<td>52</td>
<td>2</td>
</tr>
<tr>
<td>Q9: Are you coping with this traumatic event?</td>
<td>39</td>
<td>61</td>
<td>0</td>
</tr>
<tr>
<td>Q18: Have you or a family member suffered from any type of eating disorder such as Anorexia, Bulimia or Overeating?</td>
<td>4</td>
<td>96</td>
<td>0</td>
</tr>
<tr>
<td>Q19: If yes, has the disorder been treated?</td>
<td>50</td>
<td>50</td>
<td>0</td>
</tr>
<tr>
<td>Q20: Do you know how to identify whether you or someone else is showing the signs of the disorder?</td>
<td>66</td>
<td>30</td>
<td>4</td>
</tr>
<tr>
<td>Q21: Have you or a family member been a victim of any type of drug abuse?</td>
<td>18</td>
<td>78</td>
<td>4</td>
</tr>
<tr>
<td>Q22: Do you know how to prevent drug abuse in yourself or others?</td>
<td>70</td>
<td>22</td>
<td>8</td>
</tr>
<tr>
<td>Q23: Have you or anyone close to you tried to commit suicide?</td>
<td>20</td>
<td>76</td>
<td>4</td>
</tr>
<tr>
<td>Q24: Do you know the signs of a person wanting to commit suicide?</td>
<td>44</td>
<td>52</td>
<td>4</td>
</tr>
</tbody>
</table>

The results above show many points of concern where the respondents fall into the RED, namely:

- Of the 46 per cent of respondents that indicated that they have experienced a traumatic event in the past year, 61 per cent admits to not coping with it;
- Of the four per cent of respondents that indicate that they or a family member have suffered from an eating disorder, half of them has made known that the disorder has not been treated;
- The 52 per cent of respondents that have indicated that they do not know the signs of a person wanting to commit suicide.

Apart from these obvious RED zones where the majority of respondents lay, a minority of respondents also fall into other RED zones. Due to the fact that all the above-mentioned stresses caused by eating disorders, drug abuse or suicide attempts can lead to death it will be considered as areas of concern.

Obvious GREEN zones are the high percentage of respondents that have had
no one suffer from an eating disorder, drug abuse or suicide attempt. Wellness is primarily aimed at "prevention rather than cure" and, therefore, despite the wellness as indicated by those in the GREEN zones, programmes will be proposed to help all employees:

- Identify signs of eating disorders, drug abuse or suicide in themselves or others;
- Know where to get help if they suspect it in themselves or someone else;
- Learn how to prevent eating disorders, drug abuse and suicides from occurring.

(f) Stress experienced at home

Table 5.23 indicates the results obtained from the questions assessing the stress experienced by the respondents in their homes.

Table 5.23: Stress at home (Rating: 1 – 5)

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>SELDOM</th>
<th>SOME-TIMES</th>
<th>UNSURE</th>
<th>OFTEN</th>
<th>VERY OFTEN</th>
<th>UN-ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q2: How often are you stressed at home?</td>
<td>14</td>
<td>52</td>
<td>22</td>
<td>4</td>
<td>6</td>
<td>2</td>
</tr>
<tr>
<td>Q35: How often is there conflict experienced in the home?</td>
<td>12</td>
<td>54</td>
<td>16</td>
<td>8</td>
<td>4</td>
<td>6</td>
</tr>
</tbody>
</table>

Figure 5.2 below shows a graphic presentation of the respondents' responses to whether they felt that they spent enough quality time at homes with their families.
Results from Table 5.23 shows that the majority of respondents fall into the GREEN zone of not experiencing significant levels of stress at home. Figure 5.2, also, shows that the majority of respondents fall into the GREEN zone indicating that they spend enough quality time with their family each week. The combination of results concludes that an inverse relationship is observed between the amount of quality time spent at home and the level of stress experienced by the respondents. Thus, as the amount of quality time that respondents spend at home with their families increase the lower the level of stress experienced by them.

Only a minority of respondents falls into the BORDERLINE, RED and UNANSWERED zones. This, if respondents in the department are being honest, indicates that the level of stress in their homes are limited and does not add to any significant amount of stress that the respondents may experience.

The various stressors that employees can be faced with, in the organisation and at home, have been addressed in the points above. The next step will be to determine whether employees are able to handle the stress that they are faced with.
Table 5.24, that follows, presents the results to questions that assess the ability of the respondents to handle stress effectively. It is based on a “Yes/No” rating.

**Table 5.24: Assessment of being able to handle stress (Rating: Yes / No)**

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>YES</th>
<th>NO</th>
<th>UN- ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q1: Do you feel you can handle stress effectively?</td>
<td>80</td>
<td>16</td>
<td>4</td>
</tr>
<tr>
<td>Q3: When stressed, do you find yourself drinking or smoking more or using medication inappropriately?</td>
<td>18</td>
<td>80</td>
<td>2</td>
</tr>
<tr>
<td>Q7: Is there someone at least that you feel you can confide in if you have a problem or feel stressed?</td>
<td>96</td>
<td>4</td>
<td>0</td>
</tr>
</tbody>
</table>

Table 5.24 shows that a majority of respondents fall into the GREEN zone being able to handle the stresses that they encounter effectively. Positive points in times of stressful situations is that:

- Eighty per cent of respondents indicate that they do not turn to drugs in those times and
- Ninety six per cent of respondents indicate that they have someone to confide in when they are stressed.

Results to questions that assessed the ability of the respondents to handle stress effectively based on a scale rating of 1 – 5 is presented in Table 5.25.

**Table 5.25: Assessment of being able to handle stress (Rating: 1 - 5)**

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>SELDOM</th>
<th>SOME-TIMES</th>
<th>UNSURE</th>
<th>OFTEN</th>
<th>VERY OFTEN</th>
<th>UN-ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q5: How often do you withdraw from people when feeling stressed?</td>
<td>18</td>
<td>28</td>
<td>16</td>
<td>18</td>
<td>16</td>
<td>4</td>
</tr>
<tr>
<td>Q6: In the last month how often have you felt down, depressed or hopeless?</td>
<td>24</td>
<td>30</td>
<td>16</td>
<td>16</td>
<td>12</td>
<td>2</td>
</tr>
</tbody>
</table>
Table 5.25 show that more of the respondents fall into the GREEN zone compared to any other individual zone. However, the total percentage of respondents (54 per cent) from the combination of those in the BORDERLINE, RED and UN-ANSWERED zones for Question five indicate an area of concern as it is greater than the total percentage in the GREEN zone (46 per cent). The total of respondents from the combination of percentages in the BORDERLINE, RED and UN-ANSWERED zones, for Question six, is less than the total percentage in the GREEN zone. This indicates that the majority of respondents have not felt stress in the last month. The combination of results from Tables 5.24 and 5.25 indicate that, although, the majority of respondents can handle stress, the areas of concern will be those respondents that fall into the BORDERLINE, RED and UN-ANSWERED zones. To address these respondents, a programme will be proposed to help employees, especially in these zones. This will help respondents identify stressful situations and show them ways how to handle the stress associated with these situations, effectively.

5.2.6 Social Wellness

According to the National Wellness Institute (1992:6) wellness, in this regard, is judged based on one’s ability to interact harmoniously with people and the earth.

As mentioned in literature, part of being harmonious with people involve the need for connection and co-operation, support and trust, sense of belonging as well as fairness and recognition. Empirical data, as presented in Table 5.26 according to a scale rating of 1 – 5, has been compiled from the survey done to assess social wellness in this regard.
Table 5.26: Harmonious interaction with people (Rating: 1 – 5)

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>SELDOM</th>
<th>SOME-TIMES</th>
<th>UNSURE</th>
<th>OFTEN</th>
<th>VERY OFTEN</th>
<th>UN-ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q5: How often is trust highlighted as essential between manager and employee?</td>
<td>8</td>
<td>12</td>
<td>24</td>
<td>12</td>
<td>32</td>
<td>12</td>
</tr>
<tr>
<td>Q6: How often do you feel that the organisation tries to be as open with you as possible?</td>
<td>26</td>
<td>22</td>
<td>26</td>
<td>10</td>
<td>10</td>
<td>6</td>
</tr>
<tr>
<td>Q7: How often do you feel that you are trusted as an employee?</td>
<td>14</td>
<td>12</td>
<td>22</td>
<td>16</td>
<td>28</td>
<td>8</td>
</tr>
<tr>
<td>Q8: How often do you take pride in the job you do?</td>
<td>6</td>
<td>6</td>
<td>16</td>
<td>20</td>
<td>48</td>
<td>4</td>
</tr>
<tr>
<td>Q10: How often do you feel that you, as an employee, have the same idea of what the values and beliefs of the organisation are as your co-worker or of management?</td>
<td>2</td>
<td>14</td>
<td>34</td>
<td>20</td>
<td>20</td>
<td>10</td>
</tr>
<tr>
<td>Q11: How often do you feel that you “belong” as a valued family member within the organisation?</td>
<td>2</td>
<td>20</td>
<td>10</td>
<td>44</td>
<td>6</td>
<td>18</td>
</tr>
<tr>
<td>Q13: How often do you feel happy in the group that you belong?</td>
<td>2</td>
<td>24</td>
<td>4</td>
<td>56</td>
<td>14</td>
<td>0</td>
</tr>
<tr>
<td>Q15: How often do you feel there are sufficient team building activities to make sure that your team functions effectively?</td>
<td>20</td>
<td>12</td>
<td>12</td>
<td>16</td>
<td>24</td>
<td>16</td>
</tr>
<tr>
<td>Q16: How often do you feel that communication within your team is sufficient and effective?</td>
<td>12</td>
<td>12</td>
<td>16</td>
<td>12</td>
<td>34</td>
<td>12</td>
</tr>
<tr>
<td>Q20: How often do you try to help others in need?</td>
<td>0</td>
<td>14</td>
<td>20</td>
<td>26</td>
<td>38</td>
<td>2</td>
</tr>
</tbody>
</table>

Table 5.27 presents the results obtained from the assessment of the respondents’ harmonious interaction with people based on a “Yes / No” rating.
Table 5.27: Harmonious interaction with people (Rating: Yes / No)

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>YES</th>
<th>NO</th>
<th>UN-ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q12: Do you belong to a group of friends?</td>
<td>66</td>
<td>32</td>
<td>2</td>
</tr>
<tr>
<td>Q14: Do you belong to a group or team within your organisation?</td>
<td>68</td>
<td>28</td>
<td>4</td>
</tr>
</tbody>
</table>

In terms of the respondents harmonious interaction with people, whether it be their fellow employees or the management of the organisation, it is seen that:

- With regard to trust: Only 44 per cent of respondents fall in the GREEN zone feeling that trust is highlighted as essential between employee and manager. Only 44 per cent feel that they are trusted as employees and only 20 per cent feel that the organisation tries to be open with them;

- With regard to the sense of belonging within the organisation and being recognised as a valued member of the workforce: 50 per cent of respondents fall into the GREEN zone feeling a sense of belonging within the organisation, 66 per cent belonged to a group of friends and 68 per cent belonged to a team or group within the organisation. This feeling of belonging increases their sense of being recognized as a valued member within the organisation;

- With regard to connection, support and cooperation: The GREEN zone comprises the 40 per cent of respondents that indicate that sufficient teambuilding activities exist to help member’s function efficiently as a team. Forty six per cent feels that communication, within departmental teams, is sufficient and effective to support efficiency and cooperation. Further, 70 per cent of respondents feel happy and connected with the other members within their team with 64 per cent indicating that they help others in need, if required.

Although the percentage of respondents that fall into the GREEN zone are not overwhelming it is seen that the percentage of respondents that fall into the RED zone are a minority in the analysis of the individual questions. However, the highest percentage of respondents in the RED zone are the 48 per cent that do not agree that the organisation tries to be open with them as possible.
and the 32 per cent that feel there is not enough team-building exercises that will allow their team to function more effectively. This analysis highlights, therefore, two distinct areas of concern, namely:

- The low level of openness in the organisation, as well as
- The marginal level of teambuilding activities within the department.

This necessitates a programme that will increase the level of openness that management has with its employees as well as a programme to highlight the need for teambuilding within teams.

This area of wellness concerns the harmonious interaction with people. This, together with the realisation that an organisation is only as good as the people within it, it will be considered as a critical area to be incorporated within a programme that will aim to improve social wellness for those respondents that fall in the RED and BORDERLINE zones.

In terms of the ability to interact harmoniously with the earth Table 5.28 indicates the empirical data has been obtained.

**Table 5.28: Harmonious interaction with the earth (Rating: 1 – 5)**

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>SELDOM</th>
<th>SOME-TIMES</th>
<th>UN-SURE</th>
<th>OFTEN</th>
<th>VERY OFTEN</th>
<th>UN-ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q1: How often do you consciously try to protect the environment, in any way, from being destroyed?</td>
<td>8</td>
<td>16</td>
<td>24</td>
<td>14</td>
<td>30</td>
<td>8</td>
</tr>
<tr>
<td>Q2: How often do you litter?</td>
<td>36</td>
<td>30</td>
<td>10</td>
<td>10</td>
<td>8</td>
<td>6</td>
</tr>
<tr>
<td>Q3: How often do you try to conserve water?</td>
<td>6</td>
<td>16</td>
<td>16</td>
<td>26</td>
<td>30</td>
<td>6</td>
</tr>
<tr>
<td>Q4: How often do you turn lights and electrical appliances off when not in use, in order to conserve energy?</td>
<td>6</td>
<td>18</td>
<td>8</td>
<td>12</td>
<td>54</td>
<td>2</td>
</tr>
</tbody>
</table>
Analysis of Table 5.28 shows that more respondents fall into the GREEN zone than any other individual zone indicating that they interact with the earth harmoniously. It is seen that 44 per cent of the respondents falls in the GREEN zone that indicates that they consciously try to protect the environment. The rest of the respondents fall into the RED or BORDERLINE zones, in this regard. A programme will be proposed to address the conscious protection of the environment from being destroyed.

5.2.7 Spiritual Wellness

This final dimension of wellness involves the following aspects in order to guide human relationships and decision-making:

- The seeking of meaning and purpose in human existence, through which the next two aspects below are satisfied;
- The desire for inner peace;
- The development of principles and values.

These aspects, collectively, was attempted to be assessed through the questions posed to respondents in the administered questionnaire. The following is the empirical data obtained, as given in Table 5.29.

Table 5.29: Spiritual Wellness (Rating: 1 – 5)

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>SELDOM</th>
<th>SOME-TIMES</th>
<th>UN-SURE</th>
<th>OFTEN</th>
<th>VERY OFTEN</th>
<th>UN-ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q1: How often do you feel that your life is meaningful?</td>
<td>6</td>
<td>6</td>
<td>26</td>
<td>10</td>
<td>46</td>
<td>6</td>
</tr>
<tr>
<td>Q2: How often do you pray or meditate?</td>
<td>4</td>
<td>12</td>
<td>18</td>
<td>20</td>
<td>46</td>
<td>0</td>
</tr>
<tr>
<td>Q3: How often are you satisfied with your level of spirituality?</td>
<td>4</td>
<td>10</td>
<td>28</td>
<td>12</td>
<td>40</td>
<td>6</td>
</tr>
<tr>
<td>Q4: How often do you respect others beliefs?</td>
<td>2</td>
<td>0</td>
<td>12</td>
<td>22</td>
<td>64</td>
<td>0</td>
</tr>
<tr>
<td>Q5: How often do you find yourself only turning to prayer or meditation in times of problems?</td>
<td>26</td>
<td>14</td>
<td>10</td>
<td>14</td>
<td>14</td>
<td>22</td>
</tr>
</tbody>
</table>
Table 5.29: Spiritual Wellness (Rating: 1 – 5) Cont’d

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>SELDOM</th>
<th>SOME-TIMES</th>
<th>UN-SURE</th>
<th>OFTEN</th>
<th>VERY OFTEN</th>
<th>UN-ANSWERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q6: How often do you reflect on your life, past and present?</td>
<td>4</td>
<td>10</td>
<td>16</td>
<td>18</td>
<td>44</td>
<td>8</td>
</tr>
</tbody>
</table>

From Table 5.29 presented it can be seen that most of the respondents fall into the **GREEN** zone than any other individual zone and, thus, require little intervention to increase their spirituality. A positive point, in light of the diverse cultures that employees are faced within South Africa, is that 86 per cent of respondents in the **GREEN** zone indicate that they have respect and tolerance for other employees' beliefs around them.

A point of concern, however, is the 28 per cent of respondents in the **RED** zone that indicate that they only turn to prayer in times of despair. Further concern is that this was the question that was most unanswered among respondents in this dimension of wellness. It can be noticed, as well, that the percentage of respondents falling into the **BORDERLINE** zone actually exceeded the percentage of respondents that fell into the **RED** zone, in most cases. These **BORDERLINE** zone respondents are of concern as they may be spiritually dead. In an attempt to reawaken their spirituality and push them into the **GREEN** zone, it will be suggested that a programme be proposed to handle any spirituality issues that respondents may need to face.

### 5.3 MANAGEMENT QUESTIONNAIRE (MQ) RESULTS ANALYSIS

This section will indicate and show the analysis of the results obtained from the questionnaires administered to the Sister-on-site and the Industrial Relations manager. A demographic analysis follows immediately which will be followed by an analysis of results obtained.
5.3.1 Demographic Data Analysis

Number of questionnaires administered: 2
Number of questionnaires returned: 2
Percentage response: 100

Table 5.30 presents the gender demographics of the respondents to which the Management Questionnaire was administered.

Table 5.30: Management’s personal statistics (Gender)

<table>
<thead>
<tr>
<th>GENDER</th>
<th>NUMBER</th>
<th>PERCENTAGE (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female Respondents</td>
<td>1</td>
<td>50</td>
</tr>
<tr>
<td>Males Respondents</td>
<td>1</td>
<td>50</td>
</tr>
</tbody>
</table>

From this it can be seen that the Management Questionnaire (MQ) was answered by a female (Sister-on-site) and a male (Industrial Relations manager). Thus, an equal gender distribution was achieved.

Table 5.31, in turn, presents the race demographics of the respondents.

Table 5.31: Management’s personal statistics (Race)

<table>
<thead>
<tr>
<th>RACE</th>
<th>NUMBER</th>
<th>PERCENTAGE (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coloured Respondents</td>
<td>1</td>
<td>50</td>
</tr>
<tr>
<td>White respondents</td>
<td>1</td>
<td>50</td>
</tr>
</tbody>
</table>

Since only two respondents were asked to partake in the survey it was not possible to have a representative from each race group. However, respondents included one Coloured and one White.

Table 5.32 presents an indication of the length of service of both respondents.
Table 5.32: Management’s personal statistics (Length of service)

<table>
<thead>
<tr>
<th>LENGTH OF SERVICE</th>
<th>NUMBER</th>
<th>PERCENTAGE (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 – 5 years</td>
<td>1</td>
<td>50</td>
</tr>
<tr>
<td>6 – 10 years</td>
<td>1</td>
<td>50</td>
</tr>
</tbody>
</table>

Again, due to only two employees partaking in the MQ, the results obtained showed the Sister-in-charge having a length of service between 1 – 5 years while the Industrial Relations (IR) manager indicated a length of service of between 6 – 10 years. This concludes that they have a relatively long history with the organisation and the employees.

5.3.2 Analysis Of Results Obtained

(a) Industrial Relations (IR) Manager

According to the IR Manager, in response to the Management Questionnaire (MQ) (See Annexure C and D), there are no wellness programmes being implemented on-site. The results revealed that:

- A psychologist –on-site was attempted at, who would meet employees, during lunch hours, to discuss various issues relating to their psychological well-being. However, the sessions petered out after about a year through disinterest and low attendance;
- A financial workshop was arranged on-site, through Old Mutual, to help interested employees learn how to budget and control their finances. This workshop lasted for only three months and was supported by only 30 employees;
- An AIDS workshop was implemented where six employees were trained as AIDS peer counsellors. However, the counsellors had a limited attendance and, thus, were discontinued after a limited period of time.

(b) Sister-on-site

According to the Sister-on-site (Occupational Health Nurse Practitioner - OHNP), in response the MQ (See Annexure C and D), there are no wellness
programmes currently being implemented within the organisation. However, she indicated that the organisation has health awareness programmes being run on an annual basis. These programmes are run on site to coincide with the National Health Awareness observances as well as the individual need per employee. According to the OHNP the programmes target all employees with their varying needs and requirements.

Table 5.33 presents the health awareness programmes currently run within the organisation on an annual basis.

<table>
<thead>
<tr>
<th>MONTH</th>
<th>HEALTH EDUCATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>JAN</td>
<td>Hearing conservation – Efficacy Assessment</td>
</tr>
<tr>
<td>FEB</td>
<td>Condom week: STD Awareness 9th – 13th</td>
</tr>
<tr>
<td></td>
<td>Occupational – Injuries, Stress and Noise</td>
</tr>
<tr>
<td>MAR</td>
<td>Environmental Risk: Water and Sanitation</td>
</tr>
<tr>
<td></td>
<td>Tuberculosis Awareness 24th</td>
</tr>
<tr>
<td>APR</td>
<td>Occupational – Injuries, Stress and Noise</td>
</tr>
<tr>
<td>MAY</td>
<td>Domestic Violence</td>
</tr>
<tr>
<td></td>
<td>Substance Abuse: 31st – World No Tobacco Day</td>
</tr>
<tr>
<td>JUNE</td>
<td>Diet and Lifestyle Awareness – Nutrition and exercise</td>
</tr>
<tr>
<td></td>
<td>Workshop with Psychologist-on-site</td>
</tr>
<tr>
<td>JULY</td>
<td>Mental Illness Awareness Month – 12th</td>
</tr>
<tr>
<td></td>
<td>World Population Day</td>
</tr>
<tr>
<td></td>
<td>Workshop with Psychologist-on-site</td>
</tr>
<tr>
<td>AUG</td>
<td>Sight Awareness (Braille Week) – vision screening 2nd – 13th</td>
</tr>
<tr>
<td></td>
<td>Oral Week</td>
</tr>
<tr>
<td></td>
<td>Workshop with Psychologist-on-site</td>
</tr>
<tr>
<td>SEP</td>
<td>National Pharmacy Week- Prescription drug abuse</td>
</tr>
<tr>
<td></td>
<td>Workshop with Psychologist-on-site</td>
</tr>
<tr>
<td>OCT</td>
<td>Cancer Awareness – &quot;Cuppa for Cancer&quot;</td>
</tr>
<tr>
<td></td>
<td>Workshop with Psychologist-on-site</td>
</tr>
<tr>
<td>NOV</td>
<td>Hypertension/ Cardiac/ Diabetic Awareness – Blood Pressure, Cholesterol and glucose tests</td>
</tr>
<tr>
<td></td>
<td>Workshop with Psychologist-on-site</td>
</tr>
<tr>
<td>DEC</td>
<td>Aids Awareness – 1st</td>
</tr>
</tbody>
</table>

Source: Bodene (Pty) Ltd Occupational Health Year Planner 2004
In addition to the annual programmes being run, in conjunction with the National Health Awareness observances, medical surveillances are done on a monthly basis on the different departments within the organisation. These medical surveillances per department consists of:

- Periodic medical examinations, including audiometric testing;
- Periodic lung function tests for personnel working in critical areas.

The OHNP, also, indicated that First Aid Training sessions are held on-site on the second and third Thursday of each month.

A comment made by both the OHNP and the IR manager is that employees regularly make requests for certain programmes, through the shop steward representatives. However, when the programmes are implemented the employees show little interest. The result is that money and time is wasted in the implementation of programmes that employees fail to support.

From the above section, addressed by the MQ, it can be seen that:

- Not all the dimensions of wellness are being addressed by the programmes run on an annual basis within the organisation. However, the programmes that are run cover mainly the physical wellness dimension of employees;
- No mention was made of the management’s role in promoting wellness among employees or entrenching it as a culture that needs to exist for a healthy productive work force.

Thus, the organisational wellness programme that will be developed, by the researcher, will retain some of the programmes already being implemented but to, in addition, include other programmes that will cover all the dimensions of wellness needed for employees to be holistically well. Part of the programme, to be developed, will be the development of a presentation to management that define the wellness concept, its dimensions and its benefits to the organisation.
The programmes, to be proposed, will be decided upon by the combination of employee importance-rated programmes, suggested by employees, as well as the programmes seen as necessary from the analysis of the empirical study and the literature survey.

5.4 SUMMARY

This chapter covered the analysis of results obtained from the empirical study. The empirical study consisted of an employee questionnaire and a management questionnaire. The employee questionnaire was used to survey the blue-collar workers and a limited number of middle management within the Small Volume Parenteral department of Bodene (Pty) Ltd. The aim of the employee questionnaire was to assess the level of wellness present among the employees. A second survey was done, involving the Sister-on-site (OHNP) and the IR manager, with the use of a management questionnaire. The aim of the questionnaire was to identify if any wellness programmes were being implemented within Bodene (Pty) Ltd, to what extent they were being implemented and if management was behind the wellness implementation.

The next chapter will involve the integration of the findings from the literature and empirical study to develop a coherent wellness programme that will maintain, improve and develop the wellness of employees within the organisation.
6.1 INTRODUCTION

This chapter will satisfy sub-problem four of developing a coherent wellness programme by the integration of the literature study undertaken and the empirical data received from the Employee Questionnaire (EQ) and the Management Questionnaire (MQ) administered. The recommendation, a combination of employee-recommended programmes as well as literature survey and empirical study recommended programmes, will be put forward to the management of Bodene (Pty) Ltd and the viability of it discussed. It will be implemented if the organisation renders the implementation of this programme viable for the employees within the organisation as well as for the organisation, itself. It should be remembered that wellness is all about “prevention rather than cure” as well as about “bringing into awareness”. Thus, the programmes that will be recommended will not only be recommended because a problem exists, but rather because there is potential for a borderline case to become a problem.

6.2 WELLNESS PROGRAMME RECOMMENDED

This section will deal with the final recommendation for a wellness programme. This recommendation will be based on employee-importance rated recommendations, as indicated by respondents in the Employee Questionnaire, and recommendations based on the analysis of the various dimensions of wellness.
6.2.1 Employee Importance-Rated Recommendations

As part of the constructed Employee Questionnaire (EQ), (see Annexure B – Section eight), employees were asked to indicate, by means of a tick, the importance they placed on various suggested programmes which they would like see introduced as part of a Wellness Programme within the organisation. This was incorporated into the questionnaire in order to allow the employees to be in control of the programmes that they would want to be part of. In addition, it gives them the sense of ownership and the sense of being part of the planning of a programme that will be an asset to the organisation and to them, as employees. Table 6.1 presents the results obtained from the 50 employees that responded (all figures are expressed in terms of percentages).

Table 6.1: Employee ratings of possible wellness programmes (%)

<table>
<thead>
<tr>
<th>RECOMMENDED PROGRAMMES</th>
<th>VERY IMPORTANT</th>
<th>IMPORTANT</th>
<th>MAYBE</th>
<th>NOT IMPORTANT</th>
<th>NO INTEREST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stress</td>
<td>80</td>
<td>16</td>
<td>0</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>HIV/AIDS</td>
<td>96</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Relationships at work/home</td>
<td>30</td>
<td>66</td>
<td>4</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Legal issues</td>
<td>18</td>
<td>70</td>
<td>8</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>Children and parent issues</td>
<td>10</td>
<td>76</td>
<td>14</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Suicide/ death</td>
<td>73</td>
<td>13</td>
<td>8</td>
<td>6</td>
<td>0</td>
</tr>
<tr>
<td>Violence/ trauma</td>
<td>58</td>
<td>24</td>
<td>14</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Physical fitness awareness</td>
<td>18</td>
<td>64</td>
<td>18</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Retrenchment/ Retirement</td>
<td>7</td>
<td>61</td>
<td>20</td>
<td>12</td>
<td>0</td>
</tr>
<tr>
<td>Financial issues</td>
<td>95</td>
<td>3</td>
<td>2</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Spiritual issues</td>
<td>10</td>
<td>82</td>
<td>6</td>
<td>2</td>
<td>0</td>
</tr>
</tbody>
</table>
Table 6.1: Employee ratings of possible wellness programmes (%)

<table>
<thead>
<tr>
<th>RECOMMENDED PROGRAMMES</th>
<th>VERY IMPORTANT</th>
<th>IMPORTANT</th>
<th>MAYBE</th>
<th>NOT IMPORTANT</th>
<th>NO INTEREST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol and drug abuse</td>
<td>85</td>
<td>5</td>
<td>4</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>Sexual harassment/ issues</td>
<td>15</td>
<td>69</td>
<td>10</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>Environmental Awareness</td>
<td>18</td>
<td>62</td>
<td>18</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Training and development</td>
<td>98</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

From the above table it can be seen that:

- The majority of respondents rated, based on their importance or need, the programmes as “important” and “very important”. The table shows the top five programmes regarded as “very important” in RED and the top five programmes regarded as “important” in OLIVE GREEN.
- Only a minority of respondents rated specific programmes as “not important”. The top five programmes having the highest percentage are indicated in ORANGE.
- Again, only a minority of respondents rated programmes as of “no interest” to them. These programmes are highlighted in BLUE.
- The top five programmes, with the highest percentage, being rated as a “maybe” is indicated in VIOLET.

Thus, the importance that respondents placed on various suggested programmes could be seen. These outcomes will be used, in conjunction, with the programmes recommended based on the empirical and literature survey. By incorporating or considering those programmes that respondents placed as most important prevents the employees from feeling that management has forced them into programmes that are of no interest to them and, thus, they have no excuse why programmes are poorly attended.
6.2.2 Recommended Programmes Based On The Various Dimensions Of Wellness From The Empirical Survey Undertaken

From the analysis of the empirical survey, undertaken by means of the Employee Questionnaire among blue-collar workers and a limited number of middle management within the Small Volume Parenteral department of Bodene (Pty) Ltd, the following were the programmes necessitated by the outcome of results.

(a) Physical wellness:

- Programmes to increase employee awareness as well as highlight the benefits of regular exercise and nutritional health;
- An information session/workshop aimed at management to help them understand the need for having a healthy workforce and the necessity in investing in programmes that will keep their employees healthy;
- Programmes to increase employee’s awareness to take care of their body by themselves as well as demonstrate to them how this is done;
- A programme that will address the need for sufficient sleep and relaxation. Sleep deprivation may be linked to another condition, like stress. The cause of sleep deprivation will need to be investigated in individual employees by trained professionals and appropriate treatment recommended;
- A programme needs to be implemented that will address all sexual issues;
- A substance abuse programme may be needed;
- First Aid courses should be part of a possible wellness programme.

(b) Mental wellness:

The survey showed, according to the elements needed to determine mental wellness that the majority of respondents fell into the GREEN zone. From the
empirical study, alone, on this dimension of wellness it does not seem that any programme is necessary.

(c) Occupational wellness:

- A programme must exist that will allow employees the opportunity to express their desire's with trained people who can offer them advice as to how they can go about achieving these desire in life;
- A programme that will help balance employees work and home life;
- A programme that will teach employees how to reduce and manage the stress felt within the organisation.

(d) Emotional wellness:

- A Training and development programme within the workplace;
- A programme that will help shift-workers deal with the effects of shifts as well as show them and their family members ways to cope with the effects of shift work;
- A programme that will help employees identify and manage any work-induced stresses;
- A programmes that will encompass the handling of discrimination and diversity in the workplace;
- A programme that will help employees identify and manage the stresses experienced at home;
- A programme that deals with the stresses associated with sexual tension and problems;
- A financial programme to help employees learn how to manage his or her money effectively;
- A programme that will help all employees identify signs of eating disorders, drug abuse or suicide in themselves or others, know where to get help if they suspect it in themselves or someone else and learn how to prevent eating disorders, drug abuse and suicides from occurring.
(e) Social wellness:

- A programme that will address the conscious protection of the environment from being destroyed;
- A programme that will help management and employees to foster a more open relationship in order to build trust;
- Programmes that will highlight the need for more team-building exercises among teams within the organisation;
- Programmes that will instill “fun” into the workplace.

(f) Spiritual wellness:

- A programme that will address any spiritual issues of employees.

The empirical study has been based on the critical success factors drawn from the literature survey undertaken in Chapters two and three. Thus, the programmes recommended, based on the empirical survey, incorporate and is a reflection of successful programmes, highlighted in the literature survey, of organisational-well companies around the world.

6.3 FINAL RECOMMENDED ORGANISATIONAL WELLNESS PROGRAMME

This final programme is based on the literature study, as well as, the empirical survey undertaken, which will include the importance – rated programmes of employees. This is presented in Table 6.2.
Table 6.2: Final recommended organisational wellness programme

<table>
<thead>
<tr>
<th>WELLNESS DIMENSION</th>
<th>PROGRAMME</th>
</tr>
</thead>
<tbody>
<tr>
<td>PHYSICAL</td>
<td></td>
</tr>
</tbody>
</table>
| Exercise           | ➢ An information programme that highlights the benefits of regular exercise  
|                    | ➢ On-site health risk assessments: Cholesterol checks, Blood pressure checks, Blood glucose monitoring etcetera  
|                    | ➢ Possibly try to offer employees membership to the gym at special rates, through the company or the employee's medical aid  
|                    | ➢ A programme that will teach employees, esp. with hectic schedules, how to incorporate exercise into their day, without going to the gym  
|                    | ➢ The development of methods that will include exercise into an employees workday with the minimum of disturbances, example through stretching, deep breathing or correct posture  
|                    | ➢ The development, if the budget allows, a Company Fitness Center where various employee- or professionally-taught programmes can take place |
| Nutrition          | ➢ An information programme that highlights the benefits of nutritional responsibility  
|                    | ➢ A programme that highlights to employees the effects stress has on nutritional health and how to prevent the vicious cycle of eating unhealthily due to stress  
|                    | ➢ The maintenance of a yearly personal health assessment of all employees  
|                    | ➢ The screening of employees for nutritional problems  
|                    | ➢ The company should continue running yearly health awareness programmes in conjunction with National Health Awareness  
|                    | ➢ Assess the nutritional content of food currently offered in the cafeteria and adjust, if necessary, to offering healthy nutritional alternatives  
|                    | ➢ A programme that will teach employees how to watch sensibly what they eat outside the workplace  
|                    | ➢ The development of alternative "mood foods" and activities that can prevent the cravings for unhealthy food  
|                    | ➢ Nutritional counseling support by a contracted dietician  
|                    | ➢ Health talks given by various health providers |
Table 6.2: Final recommended organisational wellness programme (Cont’d)

<table>
<thead>
<tr>
<th>WELLNESS DIMENSION</th>
<th>PROGRAMME</th>
</tr>
</thead>
<tbody>
<tr>
<td>PHYSICAL (Cont’d)</td>
<td></td>
</tr>
<tr>
<td>Self-care</td>
<td>➢ A programme that will increase the employees awareness of the need for self-care ➢ A programme that teaches employees how to take care of their bodies and bring them to the awareness of the reality of breast cancer (women) and teste cancer (men). Thus, the programme will, primarily, aim to show them how to do self-examinations.</td>
</tr>
<tr>
<td>Sufficient sleep and relaxation</td>
<td>➢ A programme that highlights the need for the body to have sufficient relaxation and rest ➢ The assessment of individual employees that indicate a lack of sufficient sleep and relaxation, for underlying conditions ➢ The development of appropriate methods, together with trained personnel, to help employees achieve the amount of sleep and relaxation that is required for them to feel refreshed ➢ A programme that addresses sexual matters as part of safe and responsible sexual practices ➢ A programme that addresses substances abuse, in any form ➢ First aid courses should continue on-site. However, more employees need to be motivated to see the life-saving potential of them knowing how to apply first aid practices to themselves or others ➢ A programme that brings employees to the awareness of safe traffic practices</td>
</tr>
<tr>
<td>Others...</td>
<td>➢ A programme that brings employees to the awareness of skin cancer and the need for protection when going out into the sun ➢ HIV aids workshops with trained care-givers, independent of Bodene (Pty) Ltd ➢ An alcohol and drug abuse programme with trained professionals ➢ Development of a cassette/compact disc that provides tips and facts on how to lead a healthy lifestyle</td>
</tr>
<tr>
<td>WELLNESS DIMENSION</td>
<td>PROGRAMME</td>
</tr>
<tr>
<td>--------------------</td>
<td>-----------</td>
</tr>
<tr>
<td><strong>MENTAL</strong></td>
<td></td>
</tr>
</tbody>
</table>
| Involvement in stimulating activities; Use of resources | ➢ A programme that brings employees to the awareness of the need for being involved in creative stimulating activities and the need to be continuously stimulated, intellectually  
➢ A programme that teaches employees how to use resources available to them to expand their working knowledge and improve their skills  
➢ The formation of a book club on-site that encourages the reading up and learning of work- and un-related material  
➢ The company needs to invest in subscribing to journals that will be an asset to the company and the employees who learn from them |
| Others...          | ➢ Organise special rates, through the company, for employees to attend exhibits and plays at the opera house  
➢ Have a television, on-site, that gives employees coverage of world events during lunch hours and at specially arranged times  
➢ Arrange various workshops that will teach employees about time management skills and study skills |
| **OCCUPATIONAL**  |           |
| Future career planning | ➢ A programme that will help employees to realise the need to use opportunities presented to them to further any career ambitions  
➢ The assessment of individual employees that are not taking advantage of opportunities to determine the underlying reason for it and then helping them to address it in an appropriate programme  
➢ Having various training and development programmes on-site that will include all other attributes necessary to succeed in the working environment |
| Job enjoyment and lack of stress in work environment | ➢ An information session that indicates to employees the need for job enjoyment and the benefits on their home and work life |
Table 6.2: Final recommended organisational wellness programme (Cont’d)

<table>
<thead>
<tr>
<th>WELLNESS DIMENSION</th>
<th>PROGRAMME</th>
</tr>
</thead>
</table>
| OCCUPATIONAL (Cont’d)               | ➢ The assessment of individual employees that indicate an imbalance in home-work life for underlying reasons  
➢ A programme that teach employees how to balance home-work life  
➢ Individualised programmes that will help employees address the reasons for home-work life imbalance  
➢ A programme that help employees identify job stressors they encounter and show them ways in which they can overcome or handle the stress associated with the stressors encountered |
| Job enjoyment and lack of stress in work environment (Cont’d) |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| EMOTIONAL                           | ➢ A programme that will help employees who work shifts and their families adjust to the effects of shift work  
➢ The assessment of individual shift workers in order to develop programmes that will suit each employee’s home-work life situation                                                                                                                                                                                                                                                                                                                                                                                                 |
| Shift-work                          | ➢ An information session that will teach employees about stress, what causes it, the need for a balance of good and bad stress and why too much negative stress is not good  
➢ Programme that will highlight to employees the various work-induced stressors that may prevail within the work place, teach them how to identify them as well as how to overcome them  
➢ Programme that highlights absenteeism, its reasons for occurring, why it is bad for the company and the consequences it can have on employees and the company because of the abuse of the system  
➢ Trained personnel that can help employees with relaxation and stress management techniques                                                                                                                                                                                                                                                                                                                      |
| Work-induced stress                 | ➢ Programme that will allow employees to discuss, if they want, with trained personnel any sexual matters of concern to them  
➢ Information session that highlights to employees the need to be able to express themselves sexually and not feel “dirty” by it as well as the need to be tolerant of other sexual relationships around them                                                                                                                                                                                                                                                                                                                                 |
| Sexual relationship stress          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
Table 6.2: Final recommended organisational wellness programme (Cont’d)

<table>
<thead>
<tr>
<th>WELLNESS DIMENSION</th>
<th>PROGRAMME</th>
</tr>
</thead>
</table>
| **EMOTIONAL (Cont’d)** | ➢ A financial programme that will teach employees how to manage their money and how to budget  
➢ A programme that will teach employees how to identify the signs of eating disorders, drug abuse or suicide, know where to get help if it suspected and how to prevent it from occurring  
➢ A programme that helps employees identify stressful situations and teach them how to handle them effectively  
➢ A programme that addresses any legal issues |
| **SOCIAL** | ➢ A programme aimed at management to help them see the need to be as transparent and open with their employees as possible in order to increase the trust between management and employee  
➢ The development of teambuilding programmes and partaking of the various teams in theses programmes  
➢ The development of ways to make work “FUN”  
➢ The development of ways to maintain relationships in the work place  
➢ The development of ways to integrate family and work life  
➢ Develop a socialisation process that all new employees need to go through |
| Harmonious interaction with people | ➢ A programme that highlights to employees the need to consciously protect the environment in which employees work and live |
| Harmonious interaction with the environment | ➢ Programme that will address any spiritual issues or areas of concern that employees may have |

The organisational wellness programme will:

- Begin with the buy-in of management for the need of the programme in the company. The buy-in will involve indicating to management the
benefits, to the company, of having holistically-well employees. It will be suggested, if management succumbs to the idea, that the "holistically-well employee" approach be entrenched into the culture of the organisation;

- In the weeks leading to the programme launch numerous information sessions will be held that will highlight to employees and management what the wellness culture is all about and how it will benefit everyone involved. A list of proposed programmes will be displayed for all to get of an idea of the programmes that will be offered, if considered viable by the organisation;
- Upon its launch, various questionnaires for each dimension of wellness will be drawn up and administered to employees in order to assess them;
- Based on this, suggestions will be made to employees as to the programmes that are recommended for them. This individual programme must be adhered to but employees will be able to partake in other programmes of interest to them as well.
- The organisation may consider the employment of a wellness director to oversee the co-ordination of the wellness programme.

All programmes will have incentives attached to them in order to motivate employees to complete programmes, as the completion of programmes will be of benefit to the employee as well as the organisation. This use of incentives for motivation has been suggested in the literature study undertaken. Chenowenth, D. H (1998: 59) mentions the following as some of the ways to reward employees who complete programmes successfully:

- Enter the employee into a lucky draw;
- Print the employees name in the company newsletter or place their names on the company bulletin board;
- Designate a "wall of fame" to highlight the employees who have completed a programme;
- Offer employees with the greatest improvement the "most valuable participant" parking space or prize;
• Give away programme-specific T-shirts;
• Ask management to send a congratulatory letter to employees who have completed a programme.

6.4 SUMMARY

This chapter has, through the integration of the information gathered in the literature study and the empirical survey, highlighted a programme that can be implemented at Bodene (Pty) Ltd, if the organisation considers the programme viable.

The programme will develop, maintain and improve the wellness amongst employees within the organisation. Prior to its implementation within the organisation there will need to be a buy-in of management to the need for wellness in the organisation as well as a change in the culture to a "holistically-well employee" approach.

The next chapter will conclude the study with recommendations being made and the drawing of conclusions.
CHAPTER 7
RECOMMENDATIONS AND CONCLUSIONS

7.1 INTRODUCTION

This chapter will indicate the recommendations made to the company, Bodene (Pty) Ltd, in terms of the implementation of the proposed wellness programme drawn from the empirical study done on employees within the Small Volume Parenteral (SVP) department and the literature survey on prior research done in the area of wellness. This chapter and the study will, then, draw to a close with the drawing of conclusions.

7.2 RECOMMENDATIONS

The final proposed wellness programme (Table 6.2) was developed from the integration of the critical success factors drawn from the literature study undertaken as well as from the conclusions drawn from the empirical survey undertaken within the SVP department. The following are the recommendations suggested to the company:

- That the proposed wellness programme (Table 6.2) be implemented within the organisation in order to resolve the main problem of the study;
- That management play an active role in promoting wellness within the workplace;
- That the "holistically-well employee" approach be integrated into the culture of the organisation;
- That the employees are encouraged, through the wellness programme, to take responsibility for their own wellness in the workplace and outside of it;
- That programmes be implemented on-site, as much as possible, so that there are no excuses why programmes cannot be attended;
• That the family of employees form part of some of the relevant wellness programmes;
• That the programme be implemented, initially, within the Small Volume Parenteral department, in which the empirical survey was done. If it proves to be successful, in terms of buy-in by employees and management, good attendance, as well as, positive results and feedback from those partaking in the programmes, it will then be expanded to the rest of the organisation for implementation;
• That in time a wellness director is employed to oversee the co-ordination of the programmes.

7.3 CONCLUSIONS

Conclusions will be presented in this section. It will begin with the conclusions drawn from the literature survey undertaken and will, thereafter, end with the conclusions drawn from the empirical study undertaken.

7.3.1 Literature Survey

The following conclusions were reached based on the literature survey undertaken:
• Wellness addresses the whole-person wellness encompassing the physical, mental, emotional and spiritual needs of a person and that, in addition, they exist in a relationship with each other;
• A person’s wellness is negatively affected if one or more of the dimensions of wellness is lacking or not in equilibrium with the others;
• Organisational wellness is an approach to life not merely just the absence of illnesses;
• Organisational wellness programmes are programmes that, through their effective establishment, will help employers reduce cost of health and worker’s compensation benefits utilisation, reduce absenteeism rates, improve worker morale and productivity levels.
Physical wellness refers to the willingness to take the time and effort to pursue activities that will enhance physical health and the avoidance of activities which could be detrimental to one's physical well being.

Mental wellness indicates the openness to new ideas as well as the continuous acquisition, further development and creative application of independent and critical thinking skills.

Occupational wellness refers to being able to enjoy what one is doing in order to earn a living and contribute to society.

Social wellness refers to the need of people to belong, feel needed as well as have one's own identity. It encompasses interdependence with other people and nature.

Spiritual wellness refers to the ongoing involvement in seeking meaning and purpose in human existence together with the desire to attain inner peace. It also involves the development of principles and values that will guide human relationships and decision making.

7.3.2 Empirical Study

The following conclusions have been drawn from the empirical study undertaken:

(a) Physical Wellness:

- The majority of respondents are aware of their nutritional responsibility to remain healthy. Forty eight per cent have indicated that they do not exercise regularly for 20 – 30 minutes a day for at least a minimum of three times a week, however the respondents indicate that they do incorporate some form of exercise in their lifestyle.

- Fifty six per cent of respondents have indicated a low frequency of doing regular breast (female) and testes (male) self-examinations with 26 per cent indicating that they are not aware of how to do the self-examination.

- The respondents are aware of the need for regular medical check ups.

- A low indication of substance abuse is noted within the department.
• The majority of respondents practice safe traffic measures, however programmes will still be designed for the minority who have indicated that they do not practice safe traffic measures. This is as a result of the life-threatening effects of practicing unsafe traffic measures.
• The majority of respondents know how to administer first aid to someone in need.
• Only 46 per cent of respondents have shown that they do wear protective garments when going into the sun.
• The half of the respondents show no evidence of experiencing any type of sleep disorder, however an almost equal percentage show that they do experience sleep problems at some time or the other.
• All of the respondents show that they are aware of the various sexually transmitted diseases as well as the route by which they are spread.
• The majority of respondents do practice safe sexual practices while only eight per cent admit to practicing unsafe sexual measures.

(b) Mental Wellness:
• The majority of respondents remain abreast of world events through the reading of magazines, newspapers or listening to the news.
• The majority of respondents have indicated that they are involved in some form of stimulating activity, at one time or the other, to pass time.

(c) Occupational Wellness:
• The majority of respondents have indicated that they have many hobbies and interest outside their work environment. These hobbies and interest have shown that a wealth of talents exists among respondents within the department.
• Although 82 per cent of respondents are aware of the various study opportunities available to them within the organisation only 62 per cent of the respondents are actually taking advantage of these opportunities.
• The majority of respondents have indicated that they are aware of how to assess their strengths and weaknesses.
• It was discovered that of the 75 per cent of respondents that have indicated what their desires in life are, 80 per cent have not yet had these desires fulfilled.
• Only just more than a half of the respondents (58 per cent) enjoy the work they do.
• Half of the respondents indicated that they feel challenged by their work.
• A majority, however, has indicated that there is little or no balance between their home and work life.
• Fifty two per cent of the respondents have indicated that they are stressed in their job and have indicated this as the reason why they do not enjoy their job fully.
• A lack of communication among team members, lack of open-ness between employee and superiors, supervisors who show favouritisms, management that do not acknowledge employees needs and some forms of racism are noted as reasons for the stress and anxiety felt by employees within the organisation.
• The majority of respondents acknowledged that they do feel valued as a critical part of a manufacturing team.

(d) Emotional Wellness:
• Less than half of the respondents have indicated that they work shifts and, the majority of them, have made it known that they and their families are not coping with the effects of the shift work.
• The majority of respondents have indicated there is respect for the different cultures within the workplace.
• The results obtained from Table 5.17 have shown that the respondents are exposed to a low degree of work-induced stress.
• Discrimination seems to be acknowledged as existing by 46 per cent of respondents, an almost equal percentage (42 per cent) feel there is none while 12 per cent failed to answer this question. Thus, no definite conclusion can be drawn from this result in terms of whether discrimination is rife or not within the department. However, if it is
existent, possible reasons for any type of discrimination could be due to the "throwing together" of different races and age groups within the organisation.

- The majority of respondents have indicated that a minimal amount of conflict between superiors and subordinates exists.
- Respondents within the department show a borderline (7.73 days over a six-month period) absenteeism rate. The organisation, Bodene (Pty) Ltd, accepts only a six per cent (eight days or more over a six-month period) absenteeism rate before action is implemented.
- It was noted that the Emotional Wellness section of the questionnaire was the most unanswered by respondents. This close-ness of respondents, with regards to revealing sexual information that is regarded by respondents as private, has resulted in no clear conclusions being drawn. Thus, absenteeism is borderline.
- The majority of respondents have indicated that they are financially stress-free. The majority of respondents, however, have indicated that a financial programme within the wellness programme would be beneficial. The researcher has concluded that financial stress, in some form, do exist among respondents.
- Nearly half of the respondents (46 per cent) have indicated that they have experienced a traumatic event in the last year and 61 per cent of these respondents have admitted that they have not yet coped with the event.
- Half of the respondents that have indicated that they or a family member have suffered from some type of disorder has admitted that the disorder has not yet been treated.
- Just more than half of respondents (52 per cent) have indicated that they are not aware of how to identify a person wanting to commit suicide.
- However, a greater majority of respondents have indicated that they or a family have not suffered from any type of disorder, drug abuse or suicide attempt.
- The majority of respondents have indicated that they experience low levels of stress at home.
- The majority of respondents have shown that they can handle stress effectively.

(e) Social Wellness:
- Trust is indicated to be lacking between employee and manager.
- The majority of respondents have indicated that they feel a “belonging” either to the organisation, a group of friends or a team within the organisation.
- The majority of respondents have indicated that they are happy with the people with whom they interact and feel a connection with them.
- The majority of respondents feel that there is an insufficient amount of team-building activities within the organisation.
- The majority of respondents have shown to interact harmoniously with the environment, however only 44 per cent have indicated that they consciously try to protect the environment.

(f) Spiritual Wellness:
- The majority of respondents have shown that they are spiritually in tune and require very little intervention to increase their spirituality.
- The majority of respondents have indicated that they have respect and tolerance for other employees belief systems.
- A minority of employees has indicated that they only turn to prayer in times of need.

7.4 SUMMARY

This chapter has concluded the study undertaken with the making of recommendations to the organisation, Bodene (Pty) Ltd, and the drawing of conclusions.
The purpose of this study was to solve the main problem: What wellness programmes are needed by the pharmaceutical company, Bodene (Pty) Ltd, to enhance, maintain and develop its organisational wellness?

This was, firstly, achieved by sub-dividing the main problem into sub-problems:

Sub-problem One: What does research reveal as the critical wellness factors needed by people in order to be successful and happy at home and in the workplace?

This was addressed in Chapters two and three.

Sub-problem Two: What organisational wellness programmes exist at Bodene (Pty) Ltd and to what extent have they, if any, been implemented within the organisation?

Sub-problem Three: What is the current level of wellness existent among the employees at Bodene (Pty) Ltd?

These two sub-problems were addressed in Chapter five.

Sub-problem Four: Integrate the findings to develop a coherent wellness programme

This was addressed in Chapter six.

The main problem has been resolved with the development of a wellness programme, developed from an integration of the critical success factors drawn from the literature study undertaken as well as from the conclusions drawn from the empirical survey undertaken within the Small Volume Parenteral department within the organisation. This has highlighted the wellness programmes that are needed by Bodene (Pty) Ltd to enhance, maintain and develop its organisational wellness.

Finally, the implementation of the proposed wellness programme will be subject to it being considered viable by the organisation.
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ANNEXURE A – EMPLOYEE QUESTIONNAIRE COVER LETTER
Welcome to the Nerine Sam Wellness Audit
(Conducted as part of an MBA thesis)

Confidentially Undertaking

In the following pages, you will find questions relating to the various dimensions of wellness. These dimensions of wellness are being assessed in the employees employed by Bodene (Pty) Ltd in order to establish wellness trends, and using this information, recommend to management as to the viability of establishing a wellness programme.

The combination of all responses from the various dimensions will allow me to make a meaningful and incisive assessment. I would strongly encourage you to answer all questions. However, you are under no obligation to answer any or the entire questionnaire. Please note that the questionnaire will take about 15 to 20 minutes to complete.

Management, at the company, has given me permission to undertake the audit subject the following conditions, which I have accepted, namely:

1. This is NOT the company's survey, but rather a survey undertaken in my personal capacity.
2. I will treat all information gained through the survey with the strictest of confidence. Further, I undertake not to disclose any personal details without your written consent.

I hope that I will get your full support and, together, we will make the difference at the company.

King Regards
Nerine Sam
ANNEXURE B – EMPLOYEE QUESTIONNAIRE
SECTION ONE

Personal Information (Biographical information)

1. Full name (Optional) ________________________________
2. Surname (Optional) ________________________________
3. Sex   (tick)
   Male
   Female
4. Date of birth __________________
5. Race (tick)
   African
   White
   Coloured
   Indian/Asian
   Other (indicate)
6. Length of service at the company (Please tick)
   < 1 year
   2 – 5 years
   6 – 10 years
   > 10 years
7. What is the position that you hold?
   ________________________________
8. What is your grade within the organisation? _________________

Thank you
Please proceed to the next section
SECTION TWO

Physical wellness

1. How often do you exercise for at least 20 – 30 minutes per day for a minimum of three times a week? _________
2. Do you do any type of exercise to try and keep fit and stay healthy?  
   **Yes / No**
3. How often do you eat takeaways or at fast food restaurants? _________
4. How often do you try to include foods high in fibre, like whole grain bread, cereals, beans and bran, in your daily diet? _________
5. Do you know what the Daily Recommended Allowances are for the various nutrients needed by the body to stay healthy?  **Yes / No**
6. How often are you trying to lose weight using pills or any other means besides healthy eating? _________
7. Do you go for regular medical check ups?  **Yes / No**
8. How often do you examine your breasts and testes on a monthly basis? __________
9. Do you know how to do a breast or testicular examination?  **Yes / No**
10. How often do you consume alcohol? _________
11. How often do you smoke? _________
12. How often do you drink at least six to eight glasses of water per day? _____
13. How often do you drive or are driven with your safety belt on? _____
14. Do you ever drive or are driven with people under the influence of alcohol? Yes / No
15. How often do you exceed the speed limit? _____
16. Do you use sunscreen or any protective garments when going out into the sun or swimming? _____
17. Do you know First Aid practices that could save yours or someone else’s life? Yes / No
18. How often do you find that you cannot fall asleep or stay asleep for the required time that is desired to feel refreshed? _____
19. How often do you consider alternatives to taking medication when you are ill? _____
20. Are you aware of the various sexually transmitted diseases and how they are transmitted? Yes / No
21. Do you practice safe sex, if sexually active? Yes / No

SECTION THREE

Mental Wellness

1. How often do you read a magazine, novel or newspaper? _____
2. How often do you listen to the news in order to remain up-to-date with events occurring around us? _____
3. How many languages are you fluent in? One / two / three / more than three
4. Have you ever attended a play, musical or art showing etc…? Yes / No
5. Do you play any of the following games like chess, scrabble or complete crosswords for fun? Yes / No
6. If yes, which one? ____________________________________________

7. If no, is there anything that you do that you feel stimulates your mind or encourages you to be creative?
   ____________________________________________________________

8. Expanding one’s knowledge involves some form of studying which requires having the ability to study and listen effectively. Do you feel you have the study and listening skills needed to allow you to succeed?  Yes / No

SECTION FOUR

Occupational Wellness

1. What are your hobbies or fields of interest?
   ____________________________________________________________

2. Do you have any future career goals or plans?  Yes / No

3. How often do you enjoy the work that you do?  _____

4. If you feel that you do not enjoy or are not totally satisfied with your job, do you feel that stress, depression, anxiety, learning problems or any other problems have resulted in this feeling?  Yes / No

5. If yes, please indicate what has resulted in this feeling
   ____________________________________________________________

6. How often are you challenged by the work you are doing?  _____

7. How often do you look forward to doing the job that you do?  _____

8. Do you feel stressed in the job that you do?  Yes / No

9. If yes, how often do you feel the stress?  _____

10. How often do you feel there is a balance between the time spent at work and the quality time spent at home with family and friends?

11. Do you feel that you are a valued employee?  Yes / No
12. If no, why? _____________________________________________________________

__________________________________________

13. What is your deepest desire to do in life? ________________________________

__________________________________________

14. Are you able to identify your strengths and weaknesses?  Yes / No

15. Do you take advantage of every opportunity to learn a new skill within the workplace?  Yes / No

16. Are you aware of any type of learning opportunities available to you?  Yes / No

SECTION FIVE

Emotional Wellness

1. Do you feel you can handle stress effectively?  Yes / No

2. How often are you stressed at home?  ______

3. When stressed, do you find yourself drinking or smoking more or using medication inappropriately?  Yes / No

4. Does your work life ever interfere with your home life or vice-versa?  Yes / No

5. How often do you withdraw from people when feeling stressed?  ______

6. In the last month how often have you felt down, depressed or hopeless?  ______

7. Is there someone at least that you feel you can confide in if you have a problem or feel stressed?  Yes / No

8. In the past year have you experienced any traumatic events, like a divorce, death of a spouse, child or parent, loss of your own or family members’ job?  Yes / No

9. Are you coping with this traumatic event?  Yes / No

10. Do you work shifts?  Yes / No
11. Are you and your family coping with the effects of working shifts?  
   Yes / No
12. How many days have you been off sick for the past six months?  
   ________
13. Do you have any sick leave still available to you? Yes / No
14. Do you feel there is a discrimination of any kind in your work environment? Yes / No
15. If yes, please explain the discrimination:  
   __________________________
   __________________________
   __________________________
16. Do you know how to manage the stress, if any, that you experience in either the workplace or at home? Yes / No
17. Are you excited or enthusiastic about doing new and different things? Yes / No
18. Have you or a family member suffered from any type of eating disorder such as Anorexia, Bulimia or Overeating? Yes / No
19. If yes, has the disorder been treated? Yes / No
20. Do you know how to identify whether you or someone else is showing the signs of the disorder? Yes / No
21. Have you or a family member been a victim of any type of drug abuse? Yes / No
22. Do you know how to prevent drug abuse in yourself or others? Yes / No
23. Have you or anyone close to you tried to commit suicide? Yes / No
24. Do you know the signs of a person wanting to commit suicide? Yes / No
25. Do you have positive relationships with women and men? Yes / No
26. How often do you give love to others without expecting love in return? ________
27. How often are you and your partner comfortable with the level of sexual involvement in the relationship? ________
28. How often are you tolerant of other sexual relationships around you? 
   
29. How often do you feel positive about yourself as a sexual person? 
   
30. Do you have a sexual relationship, if any, that is healthy for you and your partner?  Yes / No
   
31. Are you up to date with all your monthly repayments?  Yes / No
32. Have you ever taken out a loan to repay another loan?  Yes / No
33. Do you struggle to stay out of debt?  Yes / No
34. Do you have any type of savings plan?  Yes / No
35. How often is there conflict experienced in the home?  ______
36. How often is there conflict experienced in the work place?  ______
37. Do you feel that you spend enough quality time at home with your family each week?  Yes / No
38. How often do you argue with you superior or co-workers?  ______
39. Is there respect for the different cultures within the work place?  Yes / No

______________________________

SECTION SIX

Social Wellness

1. How often do you consciously try to protect the environment, in any way, from being destroyed?  ______
2. How often do you litter?  ______
3. How often do you try to conserve water?  ______
4. How often do you turn lights and electrical appliances off when not in use, in order to conserve energy?  ______
5. How often is trust highlighted as essential between manager and employee?  ______
6. How often do you feel that the organisation tries to be as open with you as possible? _____
7. How often do you feel that you are trusted as an employee? _____
8. How often do you take pride in the job you do? _____
9. How often do you enjoy the people with whom you work? _____
10. How often do you feel that you, as an employee, have the same idea of what the values and beliefs of the organisation are as your co-worker or of management? _____
11. How often do you feel that you “belong” as a valued family member within the organisation? _____
12. Do you belong to a group of friends? Yes / No
13. How often do you feel happy in your group? _____
14. Do you belong to a group or team within your organisation? Yes / No
15. How often do you feel there are sufficient team building activities to make sure that your team functions effectively? _____
16. How often do you feel that communication within your team is sufficient and effective? _____
17. Is storytelling present in your organisation? Yes / No
18. How often do you feel that people gossip to hurt or breakdown the teams or groups to which you belong? _____
19. How often do you partake in community events? _____
20. How often do you try to help others in need? _____

SECTION SEVEN

Spiritual Wellness

1. How often do you feel that your life is meaningful? ______
2. How often do you pray or meditate? ______
3. How often are you satisfied with your level of spirituality? ______
4. How often do you respect others beliefs? ______
5. How often do you find yourself only turning to prayer or meditation in times of problems? ______
6. How often do you reflect on your life, past and present? ______

SECTION EIGHT

Below is a list of possible employee assistance programmes that may become available to you, if a wellness programme considered viable. Kindly rate their importance in terms of what you would like see introduced as part of a Wellness Programme. Please mark with a tick.
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I would like to thank you for your effort in completing this questionnaire. I hope, firstly, that through the completion of this questionnaire your eyes have been opened to the various aspects that impacts or determines how “well” you are. Secondly, I hope that through the assessment of the wellness of the employees at the company I will be able to make recommendations to the company, with the consequent implementation of a Wellness Programme that will benefit not only you, as an employee, but your family as a result of you being happier and “well”.

Thank you
35 Calendula Drive
Malabar
Port Elizabeth
6020

8 Gibaud Road
Korsten
Port Elizabeth
6000

25 October 2004

To whom it may concern
Re: The Nerine Sam Wellness audit in completion of an MBA thesis

I am currently undertaking a wellness audit, as part of my MBA thesis, within
the organisation with the aim of developing an organisational wellness
programme. In order to achieve this aim:

- I have completed an employee questionnaire within the Small Volume
  Parenteral department to assess the current level of wellness present
  amongst employees
- I have constructed this management questionnaire, to be administered
  to the sister-on-site and the IR/HR manager, with the intent of
  establishing:
  i. What wellness programmes exist, if any, on site
  ii. The extent to which they have been implemented
  iii. The extent to which they are successful within the organisation
  iv. The role management plays in actively promoting employee
     wellness on site
Your completion of this questionnaire will be critical in establishing the above-mentioned aims so that, together with the empirical data obtained in the employee Questionnaires, a coherent organisational wellness programme can be developed. This programme will attempt to balance the work-home life balance of employees and, thereby, have positive impact on the organisation in terms of lowered absenteeism and increased productivity, to name a few.

Please note that the responses to the questionnaire will be treated with the utmost confidentiality.

Thanking you for your patience and support
Nerine Sam
ANNEXURE D – MANAGEMENT QUESTIONNAIRE
SECTION ONE

Personal Information (Biographical information)

1. Full name __________________________
2. Surname ____________________________
3. Sex (tick)
   Male
   Female

4. Race (tick)
   African
   White
   Coloured
   Indian/Asian
   Other (indicate)

5. Length of service at the company (Please tick)
   < 1 year
   2 – 5 years
   6 – 10 years
   > 10 years

6. What is the position that you hold within the organisation?
   ____________________________

7. How long have you held the position? ____________

Thank you
Please proceed to the next section
SECTION TWO

1. Are there any wellness programmes that are currently being implemented running in the organisation?  
   Yes / No

   If NO: Please ONLY answer Question 2
   If YES: Please complete the questionnaire from Question 3 onwards

2. Can you indicate the reasons why none has been implemented at this stage?

   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

3. Name the wellness programmes being implemented or running and indicate the aim and the target audience of each of the programmes:

   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

4. For each of the programmes listed above indicate the extent to which they are being implanted within the organisation:

   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
5. Are these programmes successful in achieving the aim that it was intended for?  
   Yes / No

6. If No, indicate which programmes have not been successful and why?
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

7. Are there any shortcomings within the programmes or its implementation within the organisation?  Yes / No

8. If yes, please indicate what these are:
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

9. How active is the management within the organisation in promoting the wellness programmes within the organisation?
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

10. If they are not active, why do you think it is not been actively promoted, in light of the benefits it has on the organisation?
    ________________________________________________________________
    ________________________________________________________________
    ________________________________________________________________

11. Do you think that the holistic wellness of the employee can be embedded within the culture of the organisation?  Yes / No

12. If no, why not? Can it be entrenched within the culture? Will the employees be open to this change in thinking? Will they be open to having programmes where their private lives may be exposed?
    ________________________________________________________________
    ________________________________________________________________
    ________________________________________________________________
    ________________________________________________________________
13. Are there any comments you would like to add to complete this questionnaire?

Thank you for your time and effort

Yours Faithfully

Nerine Sam