

**AN INTEGRATED FRAMEWORK FOR ENHANCED STAFF
WELL-BEING AT SOUTH AFRICAN PUBLIC HIGHER EDUCATION
INSTITUTIONS**

by

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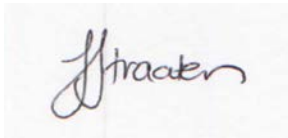
June 2019

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Declaration

I hereby declare that this thesis titled "*An integrated framework for enhanced staff well-being at South African public higher education institutions*" is my own, independent work, which I hereby submit for the degree Philosophiae Doctor in Higher Education Studies at the University of the Free State. This work is submitted for the first time at this university towards a PhD degree, and has never been submitted to any other university for purposes of obtaining a degree. I hereby cede copyright of this product in favour of the University of the Free State.

A handwritten signature in dark ink, appearing to read 'J. Maat', is written on a light-colored, slightly textured background.

1 July 2019

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List of abbreviations

Abbreviation	Full description of abbreviation
AI	Appreciative Inquiry
APA	American Psychological Association
CIPD	Chartered Institute of Personnel and Development
DoE	Department of Education
DPSA	Department of Public Service and Administration
EAP	Employee Assistance Programme
EAPASA	Environmental Assessment Practitioners Association of South Africa
EHS	Environmental Health and Safety
HE	Higher education
HEI	Higher education institution
HEIs	Higher education institutions
HPU	Health Promoting University
HPUs	Health Promoting Universities
HR	Human Resources
HSE	Health and Safety Executive
ITL	Intention to leave
IWB	Intellectual Well-being
JD-R Model	Job Demands-Resources Model
MHF	Mental Health Foundation
NHS	National Health Service
NICE	National Institute for Health and Care Excellence
OB	Organisational Behaviour
OECD	Organisation for Economic Co-operation and Development
OHS	Occupational Health & Safety
OT	Organisational Theory
OWB	Objective Well-being
POB	Positive Organisational Behaviour
PP	Positive Psychology
PSHP	Punter Southall Health and Protection
PWB	Physical Well-being
PwC	PricewaterhouseCoopers
REBA	Reward and Employee Benefits Association
RSA	Republic of South Africa
TR	Therapeutic Recreation
SA	South African
SABPP	South African Board for People Practices
SWB	Subjective Well-being
UCL	University College of London
UCLan	University of Central Lancashire
UWL	University of West London
VP	Validation Panel
VPM	Validation Panel Member
WAW	Well-being at work
WHA	World Health Assembly
WB	Well-being
WHO	World Health Organization
YMCA	Young Men's Christian Association

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This study entailed an inquiry into the well-being programmes applied by South African public higher education institutions. The existence and focus of these programmes were explored, as well as whether these programmes are offered in an integrated manner, as opposed to a fragmented manner. The aim was to identify the strengths and possible gaps related to South African public higher education institutions' well-being programmes.

The rationale for this study was a lack of the existence of an integrated employee well-being framework for South African public higher education institutions to guide their employee well-being programmes. South African public higher education institutions cannot afford to neglect their employees' well-being, or to address it in a fragmented manner, as such negligence has severe implications for employees' performance, as well as the financial sustainability of these institutions. The lack of integrated employee well-being programmes offered at these institutions was confirmed during both a pilot study and the empirical research conducted. This implied the need for a well-being framework, which could guide universities in approaching employee well-being in a more effective and integrated manner, geared to their enhanced well-being.

This rationale ensued in the formulation of the primary research question and six secondary research questions, which guided the study. The primary research question was: *How can employees of SA public HEIs' well-being be enhanced by means of an integrated well-being framework, aimed at addressing their well-being holistically?*

An extensive literature review was conducted to address the purpose and objectives of the study. Furthermore, a document analysis was performed. A qualitative research approach was followed. The empirical study involved a survey conducted amongst eleven South African public higher education institutions.

Seven components related to employees' well-being (with several sub-components each), which are regarded as important for the enhancement of their well-being, emerged from the literature and during the empirical research. These relate to defining the concept of well-being; the nine dimensions of well-being (i.e. physical, emotional, psychological, social, financial, spiritual, environmental, intellectual and occupational well-being); and the importance of SA public HEIs having policies and procedures, strategies and programmes in place to guide and enhance their employees' well-being. Another aspect addressed was the importance of establishing an institutional culture and values that create an enabling environment for employees to flourish; as well as having a clear understanding of the different role players in employee well-being, and more specifically, the role of South African public higher education institutions in this regard.

These mentioned components of well-being were utilised to design an integrated employee well-being framework for these institutions, aimed at enhancing their employees' well-being. This was accomplished by integrating relevant well-being theories and the research findings, that is, the results of the pilot study, literature review, document analysis and the empirical study. The proposed well-being framework was validated by a panel of experts in the disciplines of industrial and educational psychology, higher education, organisational development and employee well-being, by means of a semi-structured, open-ended questionnaire. First, a pilot validation was performed, followed by a validation by a panel of experts. The inputs of experts gained from both rounds of the validation were analysed and, where applicable and confirmed by the literature, incorporated into a final employee well-being framework for South African public higher education institutions.

This integrated employee well-being framework will assist South African public higher education institutions in addressing their employees' well-being holistically and in an integrated manner. Thus, the framework will benefit South African public higher education institutions and their employees, as it might positively impact employees' well-being, and consequently, the financial sustainability of these institutions and the outputs produced by their employees. Nuanced guidelines for the implementation of the framework were designed as part of the integrated employee well-being framework.

Keywords: Well-being; employee well-being; higher education, South African public higher education institutions; dimensions of well-being; well-being programmes; well-being models; integrated employee well-being; integrated employee well-being framework; holistic well-being; enhanced well-being; physical well-being; emotional well-being; psychological well-being; social well-being; spiritual well-being; financial well-being; environmental well-being; intellectual well-being; occupational well-being; enabling environment; flourishing; flourishing at work; well-being at work.

1.1 INTRODUCTION, BACKGROUND AND RATIONALE FOR THE STUDY

There is evidence that the well-being of employees of South African higher education institutions could be improved at several levels (Bezuidenhout & Cilliers 2010; Rothmann & Jordaan 2006; Van Straaten, Du Plessis & Van Tonder 2016). Although there has been a noteworthy increase in research on various elements related to employees' well-being, including their well-being at work, over the past decades (Barkhuizen, Hoole & Rothmann 2004; Buys & Rothmann 2010; Kahn & Juster 2002; Redelinghuys, Rothmann & Botha 2019a; Rothmann & Cilliers 2007; Russel & McGinnity 2018; Schaufeli & Bakker 2004; Sonnentag & Fritz 2007; World Health Organization 2012b), the problem is that these studies have not investigated the employee well-being programmes and practices applied by public higher education institutions (HEIs) within South Africa, and their effectiveness in addressing employees' well-being in a holistic and integrated manner. Limited research on well-being programmes applied by HEIs, including SA public HEIs, could be found. The absence of research on an integrated employee well-being framework towards the improvement of the well-being of employees of South African public HEIs is the gap in the current research that I wished to address by means of this study.

Given the above, the following questions arose: Does an integrated employee well-being framework for SA public HEIs exist, and if it does, is it aimed at enhancing the well-being of employees holistically and in an integrated manner? Is it supported by applicable policies and procedures? Furthermore, how is the effectiveness of employee well-being programmes of SA public HEIs measured?

Therefore, the rationale for this study was to explore, or investigate, best practice in terms of integrated employee well-being programmes applied all over the world, including at SA public HEIs. Furthermore, I wished to identify any possible gaps in terms of the well-being programmes applied by SA public HEIs, measured against

best practice in terms of integrated well-being programmes that I came across during my literature review, in order to come up with an integrated employee well-being framework that would assist SA public HEIs to address their employees' well-being holistically.

Over the past five decades there has been intensive efforts to empirically investigate subjective well-being as a factor that determines people's overall happiness and satisfaction with life (Durayappah 2011:681-682). It is clear that well-being entails much more than happiness (Keyes 2002; Seligman 2011), and that it can include psychological, emotional and social aspects of someone's welfare (Keyes 2002:1007). Seligman identified positive emotions, engagement; relationships; meaning and purpose; and accomplishment as important dimensions for one's well-being (Seligman 2011:24). These aspects of well-being include social, emotional and psychological elements of well-being, as advocated by Keyes (2002:1007). Thus, there is a link between Keyes' view of well-being and Seligman's PERMA Model of Well-being (Seligman 2011:14-24). The concept of well-being will be explored more extensively in Chapter 2 of this research report (see 2.2).

In 2014 I conducted research at the SA public HEI where I had been employed for more than 20 years at the time, to determine the factors that would assist in creating an enabling environment for support services employees to flourish (Van Straaten 2014). The research findings, amongst others, proved that an appreciative work environment can contribute significantly to employees' well-being. The research findings were shared with the management of the institution in an attempt to enhance the well-being of support-services employees. It, however, also made me think critically about the current well-being programmes applied by the institution, and the effectiveness thereof; and how our institution's well-being programme compared with that of other SA public HEIs. As a result, I decided to conduct a literature review on the subject (see Chapters 2 and 3 of this thesis). The literature review I conducted confirmed that limited research had been conducted pertaining to the employee well-being programmes of SA public HEIs. Hence, the rationale for this study was to make a research contribution aimed at SA public HEIs towards the improvement of their employees' well-being.

This study explored the concepts of *well-being* and *workplace well-being*, and the nature and characteristics of integrated employee well-being approaches, as well as theoretical perspectives on employee well-being. The existence of employee well-being programmes applied by SA public HEIs was investigated, as well as the dimensions/building blocks of well-being they contained, and how they were utilised to address employees' well-being. By means of the integrated, validated well-being framework designed for SA public HEIs, based on the outcome of this study, some strengths to be built upon were identified, and improvement practices were proposed after shortcomings were identified in the well-being programmes applied by some South African public HEIs.

The research was conducted within the framework of Positive Psychology Theory (Seligman 2011), Well-being Theory (Keyes 2002, Seligman 2011) and Flourishing Theory (Keyes 2002, 2010; Seligman 2011). In the next section, the research questions set are discussed.

1.2 RESEARCH QUESTIONS

This study was directed by the primary research question set, namely:

How can employees of SA public HEIs' well-being be enhanced by means of an integrated well-being framework, aimed at addressing their well-being holistically?

The following secondary research questions emanated from the primary research question:

- *What is well-being, and how have the concept of and theories on well-being developed over the past few decades?*
- *What are the current global perspectives on workplace well-being and integrated well-being programmes?*
- *How is employee well-being addressed at SA public HEIs?*
- *What are the current strengths and weaknesses of employee well-being programmes of SA public HEIs?*

- *How effective and integrated are the well-being programmes applied by SA public HEIs as compared to best practice world-wide, including integrated well-being programmes?*
- *How could an integrated employee well-being framework enhance and inform employee well-being practices at SA public HEIs?*

1.3 PURPOSE OF THE STUDY

The purpose of this study was the design of an integrated employee well-being framework for SA public HEIs that could be used to address their employees' well-being in a holistic and integrated manner, leading to their enhanced well-being.

To achieve this purpose, the research objectives below were set:

- 1.1 to explore, investigate and analyse the concept of well-being, and how it has developed over the past few decades;
- 1.2 to explore, through a comprehensive literature review and document analysis, the current global perspectives on well-being and integrated well-being programmes;
- 1.3 to send a semi-structured, mainly open-ended questionnaire to participating SA public HEIs to determine, amongst others, the following:
 - 1.3.1 How SA public HEIs address their employees' well-being;
 - 1.3.2 what the current strengths and weaknesses of employee well-being programmes of SA public HEIs are;
 - 1.3.3 how effective and integrated the employee well-being programmes of SA public HEIs are as compared to best practice world-wide, including integrated well-being programmes; and
 - 1.3.4 flowing from the research results obtained, to develop a validated, integrated well-being framework for SA public HEIs to inform and enhance their employee well-being practices.

The findings of the literature review and document analysis performed, and the findings flowing from the data gathered by means of the semi-structured, mainly open-ended questionnaire completed by SA public HEIs, were used to develop an integrated employee well-being framework for SA public HEIs (see Annexure T).

1.4 DEMARCATION OF THE STUDY

This research was conducted within the Higher Education Studies field (see 1.4.1), and focused on identifying the existence and components of employee well-being programmes at SA public HEIs. The disciplinary and geographical boundaries that were applied in this study are explained in sections 1.4.1 and 1.4.2 below.

1.4.1 Disciplinary demarcation

In terms of the South African Higher Education Act (Act No. 101 of 1997), tertiary education is classified as higher education, whilst education of a formal nature beyond secondary school level is classified as higher education (RSA: 1997:9).

Until recently, research conducted within Higher Education Studies, and analysis concerning higher education, have been limited (Altbach 1997:4; Meek, Teichler & Kearney 2009). This is indeed surprising, as HEIs have been identified as the foundation of the “global knowledge society” (Meek, Teichler & Kearney 2009:13). Therefore, this study with the intent to make a contribution towards the improvement of the well-being of employees of these institutions, contributed to research conducted within higher education studies - specifically within the research category identified by Tight (2012) as organisational (institutional) management. In higher education, the human resources function is an institutional management function, focusing, amongst others, on importing change and diversity theories, leadership, efficiency and management issues (Tight 2012:9).

More specifically, this research covered two of the four knowledge spheres within higher education (Teichler 2005), namely person-related and organisation and governance-related aspects of higher education. Teichler (1996) regards education and psychology as the key disciplines that address the domain of person-related

aspects such as motivation and communication. Political science, economics, law, business and public administration, on the other hand, are the major disciplines involved in addressing governance- and organisation-related aspects of higher education (Teicher 1996). Furthermore, according to Bitzer and Wilkinson (2009), the field of Higher Education Studies can be defined as multi- or interdisciplinary. Hence, the study was conducted across the disciplines of higher education, educational psychology, industrial psychology and public and business administration.

1.4.2 Geographical demarcation

The study was conducted amongst South African public HEIs. The sample of participants consisted of all officers dealing with employee wellness at these institutions. Of the twenty-six SA public HEIs, eleven participated in this study aimed at determining whether SA public HEIs have effective employee well-being programmes; what the strengths and weaknesses of such well-being programmes are; how integrated those well-being programmes were (i.e. addressing the various dimensions related to employee well-being in an integrated manner); for how long they had been implemented; and how the effectiveness of these programmes was measured.

More details on the selection of participants will be provided in Chapter 4 (see 4.4.2).

1.5 KEY CONCEPTS CLARIFIED

In order to avoid any ambiguities, the key concepts applicable to this study are discussed and clarified below.

1.5.1 Well-being

From the literature review conducted, it became clear that employee well-being is not easily defined, and that there is no unified definition of the concept of well-being (Forgeard, Jayawikreme, Kern & Seligman 2011:81). The World Health Organization (2001) regards **well-being** as providing people with resources and skills to

meaningfully contribute to society; and as a state during which individuals realise their potential; are able to cope with life's stresses, work fruitfully and productively; and make a meaningful contribution to their communities (Whiskers 2011:5).

The Oxford South African Concise Dictionary (2013:1351) defines well-being as “the state of being comfortable, healthy and happy”, whilst *The Better Health Channel* (2018:Online) describes well-being as a concept much wider than disease absence, and as a combination of emotional, social, physical and mental health factors that impact on a person. The Better Health Channel (2018:Online) states that well-being is linked to both life satisfaction and happiness, and that it describes how we feel about ourselves, and life in general.

This is in agreement with my own definition of well-being, namely that well-being is a multi-faceted concept fostering those factors that enable people and societies to flourish. It is all about functioning optimally in life; living a well-balanced life; flourishing at physical, emotional, psychological, social, spiritual, financial, environmental, intellectual and occupational level. Well-being thus entails human thriving, and not only surviving.

The concept of well-being, and how it has scientifically developed since the 1940s is discussed extensively in Chapter 2 (see 2.2; 2.2.1 - 2.2.5).

1.5.2 Integrated employee well-being programmes

A variety of terminology is used to describe employers' well-being efforts, including the terms “interventions”, “programmes”, “models”, “strategies”, “frameworks”, and more. For the scope of this research, the term **programmes** is used as an umbrella term for all of these, as I specifically looked into the employee well-being programmes offered by SA public HEIs. A “programme” can be described as “a planned series of events; a set of related measures or activities with a long-term aim” (Oxford South African Concise Dictionary 2013:941).

The term “**integrated**” has the meaning of being “combined to form a whole” (Oxford South African Concise Dictionary 2013:606). **Integrated employee well-being programmes**, therefore, may be defined as various types of well-being interventions, activities or attempts where all the important dimensions of employees’ well-being as identified from the literature (i.e. their emotional, physical, social, psychological, financial, environmental, spiritual, intellectual and occupational well-being) are combined into a holistic approach to employees well-being, as opposed to a fragmented approach (see 2.4.1 to 2.4.9).

1.5.3 Framework

According to the Oxford South African Concise Dictionary (2013:461), a **framework** is “an essential supporting or underlying structure”. Hence, a framework provides functionalities, or the solution to a particular problem area. For purposes of this study, the validated, integrated employee well-being framework that was developed for SA public HEIs is a structure underlying the concept of “well-being”, with the aim of contributing to the enhanced well-being of employees of SA public HEIs, by providing guidelines, or functionalities, regarding the factors influencing their well-being, as well as the different dimensions of their well-being. The integrated well-being framework emphasises the importance of following an integrated approach towards employee well-being. It is, however, not a fixed or rigid structure, but a flexible structure, with the aim of guiding SA public HEIs towards addressing their employees’ well-being more effectively.

1.5.4 Public higher education institutions (HEIs)

Any public institution is an institution that is backed through public funds and controlled by the government of that country. The South African Higher Education Act stipulates that

“higher education institution means any institution that provides higher education on a fulltime, part-time or distance basis, and which is (a) merged, established or deemed to be established as a public higher education institution under this Act; (b) declared as a public higher

education institution under this Act; or (c) registered or provisionally registered as a private higher education institution” (RSA 1997:6).

With reference to participants in this study, all 26 SA public HEIs were invited, and eleven eventually voluntarily participated in the study.

In the next section, the paradigmatic perspectives and theoretical framework for conducting this study is explained briefly. This is discussed extensively in Chapters 2 and 4 of this report (see 2.3; 4.3; 4.3.1; 4.3.1.1 - 4.3.1.4; 4.3.2).

1.5.5 Staff/employees

The terms “staff” and “employees” are often used interchangeably in the literature, to refer to people employed by organisations. When the title of my research was registered in 2016, I used the term “staff” in my title, and it was approved as such by the University of the Free State’s Committee for Title Registration. However, since then, I have to an increasing extent found in the literature that the term “employees” is favoured over “staff”. Linguistically, it is also preferred above the term “staff”. Hence, in my thesis I have used the term “employees”, except in direct quotations from other sources, where the word “staff” was used.

1.6. PARADIGMATIC PERSPECTIVES

The research context and the nature of my study conducted amongst SA public HEIs, as well as the data that were collected, allowed for me to follow a qualitative research approach within the research paradigm of interpretivism, and more specifically, the **constructivist** research paradigm (see 1.6.1 and 1.6.2 below). My research paradigm perspectives are discussed in detail in Chapter 4 (see 4.3.1).

1.6.1 Epistemological paradigm

Epistemologies are different worldviews that shape the methodology applied by a researcher to his/her particular study (Hesse-Biber & Leave 2011:37; Creswell & Creswell 2018). The epistemological paradigm provides the framework within which knowledge is acquired and communicated (Maree 2016:67). Researchers work within a particular research paradigm to provide a specific method for studying phenomena that are relevant to their field of study (*cf.* Du Plooy-Cilliers, Bezuidenhout and Davis 2014:19). Hence, our behaviour and attitude toward the research we conduct are a result of the paradigm within which we choose to conduct research (Hesse-Biber and Leavy 2011:37). Thus, although there are different paradigmatic perspectives, the researcher always searches for knowledge by using empirical data that are gathered systematically (McMillan & Schumacher 2010:6), but interprets his/her reality through a certain perspective (Creswell & Creswell 2018).

Interpretivism, according to Mertens (2010), includes constructivist, post-positivist, transformative and pragmatic research paradigms. This research was conducted within the research paradigm of **constructivism** (*cf.* Mertens 2010; Creswell & Creswell 2018). From the constructivist point of view adopted for purposes of this research, a single objective reality does not exist, but reality is regarded as being socially constructed by the research participants (Creswell & Creswell 2018; Mertens 2010:226). Research is based on the philosophical concepts of epistemology, axiology and ontology, which influence the methodology chosen by the researcher when conducting research (O’Gorman & Macintosh 2014). These concepts are explained in detail in Chapter 4 (see 4.3.1.1 - 4.3.1.3).

My ontology is linked to the concept that people experience reality differently, and I therefore allowed the concepts of importance related to the well-being programmes of SA public HEIs to materialise as they were formulated by the research participants (*cf.* Mertens 2010:18). Since data can be traced back to its origin, I gathered the interpretations of participants pertaining to their institutions’ employee well-being programmes, and explicitly revealed their interpretations in the description of the research findings, which emerged as the investigation proceeded (*cf.* Denzin & Lincoln

2011:13). I was thus an active participant in the research process, together with the research participants.

Epistemology describes the researcher and participants' relationship, and how knowledge is acquired, communicated and formed (Mertens 2014:10). Constructivism recognises that the research process is interactional; that the researcher and research participants need to work closely together; and that the researcher should accurately document the participants' experiences (Ponterotto, Mathew & Roughley 2013:49). The epistemology between myself as researcher, and what is being researched in this study, is the fact that I have been an employee of a South African public HEI for more than 23 years, and therefore I am subjectively involved in this study. Since I have extensive experience in the field of higher education, and have conducted research related to the employees of SA public HEIs' well-being for more than seven years, I have valuable insights into the context of this study, and so do the research participants, who have been purposefully selected based on their knowledge of their institutions' employee well-being programmes. The participants, likewise, also are employees of SA public HEIs, hence we share the same HE background.

1.6.2 Methodological paradigm

McMillan and Schumacher (2006:315) argue that interpretive, qualitative research entails an understanding of social phenomena, as well as an analysis of the perceptions, actions and thoughts of the research participants. Researchers with a constructivist perspective, choose to conduct research using qualitative research methods, as these methods enable them to perform an in-depth investigation into the subject matter, and to better comprehend the participants' views pertaining to the context of the research (*cf.* Mertens 2010). Another benefit of qualitative research is that it is more flexible than quantitative research, and it allows the researcher to narrow his/her focus to a single element, and to gain an understanding of how the research participants experience their world (Fouché & De Vos 2011:91).

The methodology applied was used to conduct an inquiry into the well-being programmes utilised by SA public HEIs. A qualitative methodological approach was followed, which complemented the constructivist approach followed, as it allowed an in-depth investigation into the subject matter, studying the research phenomena within their specific contexts (cf. Baxter & Jack 2008:544) - in this case gaining an understanding of the well-being programmes applied by SA public HEIs, and how these compare to best practice in terms of well-being programmes worldwide. **Qualitative survey research** (with limited quantitative enhancement) was conducted by using a semi-structured, open-ended questionnaire for purposes of the pilot study (see Annexure E), and a semi-structured questionnaire with mainly open-ended questions for the empirical study following the pilot study (see Annexure J) (cf. Mertens 2010; Creswell 2014). This questionnaire was distributed to SA public HEIs to determine, amongst others, the types of employee well-being programmes they offered, the integration and effectiveness thereof, and how such well-being programmes could possibly be improved.

1.6.3 Theoretical framework

To determine the existence of an integrated employee well-being programme for SA public HEIs, a broad literature review was conducted. No research on such a well-being programme for SA public HEIs could be found, whilst limited research pertaining to integrated employee well-being programmes applied by some HEIs overseas was found. However, it became clear from the literature review conducted that employee well-being in organisations across the globe constitutes a real problem, and that this problematic state of affairs is linked to various employment issues. These issues include absenteeism (Keyes 2002; Luybomirsky, King & Diener 2005); job satisfaction (Buys & Rothmann 2010; Rothmann & Jordaan 2006; Westover, Westover & Westover 2010); retention/employee turnover/intention-to-leave (ITL) (Opie & Henn 2013; Robyn & Du Preez 2013; Theron, Barkhuizen & Du Plessis 2014, Redelinghuys *et al.* 2019b); performance (Bakker & Demerouti 2007; Redelinghuys *et al.* 2019a); trust (Bothma & Roodt 2012); leadership issues (Fry & Slocum 2008, Kelloway, Sivanathan, Francis & Barling 2004; Jensen & Luthans 2006); burnout (Bezuidenhout & Cilliers 2010; Rothmann & Jordaan 2006); and employees' engagement in their work

(Bothma & Roodt 2012; Opie & Henn 2013), to mention but a few. Hence, this study attempted to find out which dimensions of well-being SA public HEIs' existing employee well-being programmes are addressing, and which elements need to be improved to establish optimal employee well-being.

For purposes of gaining an understanding of the theories directing employee well-being world-wide, the literature review included an extensive study on various well-being theories. The main well-being theories that were developed since the 1940s are the following:

Table 1.1 Main well-being theories developed since the 1940s (adapted from Soane, Shantz, Alfes, Truss, Rees & Gatenby 2013:441-456)

Well-being theories	Founder(s)	Year
Self-actualisation Theory	Maslow	1943
Job Satisfaction Theory	Herzberg, Mausner, Peterson & Capwell	1957
Hope Theory	Snyder, Higgins & Stucky	1983
Subjective Well-being Theory	Diener	1984
Appreciative Inquiry Theory	Cooperrider & Srivastva	1987
Flow theory	Csikszentmihalyi	1990
Broaden-and-Build Theory	Fredrickson	1998
Positive Psychology Theory	Seligman & Csikszentmihalyi	2000
	Seligman	2011
Need Theory	Diener & Lucas	2000
Self-determination Theory	Ryan & Deci	2000
Authentic Happiness Theory	Seligman	2002
Well-being/flourishing theories	Keyes	2002
	Fredrickson & Losada	2005
	Seligman, Steen, Park & Peterson Seligman	2005

Although multiple theories on well-being exist, only a few were chosen as main theories underpinning this research, as illustrated in Figure 1.1 below:

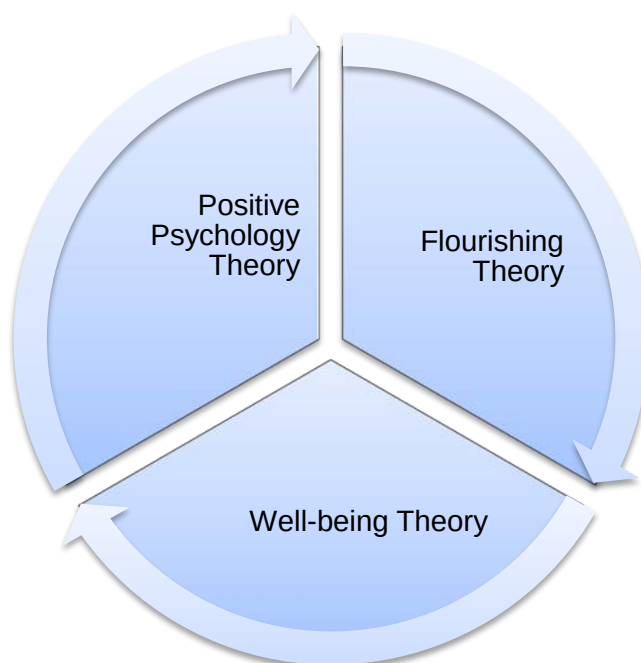


Figure 1.1 Theories underpinning this study (Seligman & Csikszentmihalyi 2000; Seligman 2011; Fredrickson & Losada 2005; Keyes 2002; Seligman, Steen, Park & Peterson 2005; Seligman 2002, 2011)

Elements of some of the other theories (e.g. Flow Theory, Appreciative Inquiry Theory, Organisational Behaviour Theory) also were applied in my study, and these are discussed and identified clearly in Chapter 2 (see 2.3.9, Table 2.3). However, Positive Psychology Theory, Well-being Theory and Flourishing Theory were chosen as the main foundation theories for this study, as they underpin the positive psychology approach that has emerged since 1998 (*cf.* Seligman 1998). These theories focus on the concept of “flourishing”, that is, having positive emotions; living an engaged life; having meaningful relationships; living a meaningful and purpose-driven life; and accomplishing one’s goals in life (Seligman 2011:114). Furthermore, they reinforce the most important dimensions, or building blocks of well-being, and therefore were used as basis for comparing the well-being programmes applied by SA public HEIs to best practice world-wide. The theories applied in my study, and the rationale for applying these, are explained extensively in Chapter 2 of this report (see 2.3.1-2.3.8.3).

However, based on the literature review, the document analysis conducted, and on various well-being theories studied, I developed my own **integrated synthesis of well-being theory** (see 2.3.9), which emphasises the fact that optimal human flourishing requires living a well-balanced life, and identifies nine dimensions or building blocks of well-being, namely physical, emotional, psychological (mental), social, financial, spiritual, environmental, intellectual and occupational well-being (see 2.4.1-2.4.9). According to Seligman (2011:17), these dimensions should be measured and defined independently, and should be pursued for their own sake. My integrated synthesis of well-being theory further emphasises that optimal human flourishing is about thriving and not surviving; about living a meaningful life, and living for a higher purpose; it enquires positive emotions, setting goals and accomplishing such. It also emphasises that our well-being is affected by various factors, and at various levels (e.g. by individuals, groups and structures), and that positive relationships and positive engagements with others are vital for our well-being, whilst organisational structures, values and culture affect the behaviour and well-being of individuals and groups (see 2.3.9).

1.7 RESEARCH DESIGN AND METHODOLOGY

This section entails a brief discussion of the research methodology that was applied in this study. It is discussed more extensively in Chapter 4. *Research methodology* is informed by the function of the research, or the researcher's intent, and it is the collective term used to describe the way in which the researcher goes about to collect and analyse data (*cf.* McMillan and Schumacher 2010:13). Charmaz (2006) points out that qualitative research approaches are predominant in a constructivist paradigm. Denzin and Lincoln (2011:13) make it explicit that, in qualitative research, data analysis terminology such as dependability, credibility, confirmability and transferability are used instead of the positivist criteria related to reliability, objectivity and validity. Thus, the qualitative researcher formulates constructions that are informed by the research (Mertens 2010:20).

The proposed, validated employee well-being framework for SA public HEIs that was designed as an outcome of this study, resulted from an integration of the literature review and document analysis conducted, well-being theories, as well as the research findings.

1.7.1 Research design

The research design enables the researcher to come up with a plan of generating or collecting the data, for purposes of answering the research questions (McMillan & Schumacher 2010:20). It indicates clearly how the study will be conducted. Maree (2013), and McMillan and Schumacher (2010:20) contend that an empirical research design is the plan or structure used by the researcher to decide on the research site, the participants, and for purposes of gathering the data. Thus, the research design should be appropriate to answer the research questions effectively, and to conduct valid, reliable and trustworthy research.

For purposes of this study, an empirical research design was chosen to collect, process and analyse the data by means of a **multiple case-study** (cf. Du Plooy-Cilliers *et al.* 2014; Maree 2013; Mertens 2010; Stake 2005; Yin 2012). Qualitative researchers often make use of case studies as a method of inquiry to study activities and real-world issues in-depth and in a systematic manner, and within their natural settings, for purposes of bringing about new knowledge (Yin 2009:237).

The multiple case-study design used for purposes of this study enabled me to collect various forms of data using different research strategies, approaches and methods (cf. Stake 1995; Yin 2012) – in this case data from eleven SA public HEIs on their employee well-being programmes. The research (pilot study, empirical study and validation process) was conducted online, and participants could complete the questionnaires distributed via e-mail for the pilot study, the empirical research and the validation of the integrated employee well-being framework online on their own computers/devices, in the comfort of their homes or offices.

1.7.2 Population and selection of participants

To investigate the existence, extent of integration and effectiveness of employee well-being programmes applied by SA public HEIs from their viewpoint, the population that was chosen to be consulted was all the employees/HR practitioners responsible for employee well-being at SA public HEIs. Purposeful, convenience selection of these employees of SA public HEIs was done for purposes of both the pilot study and the empirical research conducted, as they are responsible for implementing employee well-being programmes at their institutions (*cf.* Du Plooy-Cilliers *et al.* 2014; Maree 2016; McMillan & Schumacher 2010). Thus, in purposive selection of participants, the researcher specifies the target population first, and then identifies the participants to be invited to participate in the research (*cf.* Vogt, Gardner & Haeffele 2012:141).

The population for the baseline pilot study included four participating SA public HEIs (see 5.3). During the empirical research, a second self-constructed, mainly open-ended questionnaire was compiled. For purposes of obtaining a good participation rate, a comprehensive selection of all SA public HEIs was applied. Eleven of the SA public HEIs participated in the empirical study. They were also asked to attach documents pertaining to their well-being programmes for evaluation/analysis. Most of these participants were rich in information as a result of their experience in the fields of organisational and employee well-being, and hence they could make a meaningful contribution to this study based on their experience and understanding of the research topic (*cf.* Vogt *et al.* 2012; Creswell & Creswell 2018). Participation in the study was voluntary. Written, informed consent from SA public HEIs and their ethics committees, as well as all participants was obtained, and both participants and their institutions remained anonymous in all reports on the research.

The validation of the integrated employee well-being framework that was designed for use by SA public HEIs was established through collecting the perspectives of experts in the field of employee well-being, Industrial and Educational Psychology. They were selected based on the following criteria, and subsequently identified through snowball sampling:

- they had to be experts in the fields of industrial psychology, educational psychology, organisational development, employee wellness/health/well-being and/or higher education;
- as the framework would be developed for use by SA public HEIs, they had to be familiar with the SA public HEI environment, or employed by an SA public HEI; and
- diversity in terms of race and gender was considered.

A pilot validation survey was first conducted with three psychologists employed by SA public HEIs. Valuable inputs were received from them, and applied to the framework that I developed. A second validation process was then followed. Twelve experts in the fields of industrial and educational psychology, organisational and employee well-being were invited, of which six participated in the research. A self-constructed survey questionnaire with mainly open-ended questions pertaining to the integrated well-being framework was used to this effect. At first three experts were purposively selected, based on their particular expertise in employee well-being as portrayed in the literature, after which snowball sampling of experts was applied based on recommendations provided by the experts that were initially identified. In addition, I strived towards maximum variation of the selected experts pertaining to experience, gender, ethnicity, research focus and/or institutional affiliation (as applicable) (see 6.3.2).

1.7.3 Data collection methods

Qualitative researchers make use of various methods of data collection during their research to enhance the quality of their research (Leedy and Ormrod 2005:148; Yin 2012). The following data collection methods were used for purposes of conducting the empirical research:

1.7.3.1 Phase 1: Baseline pilot study

A semi-structured, self-constructed, open-ended questionnaire was designed for purposes of the baseline pilot study conducted during 2016, at the commencement of

my study (see Annexure E). Since no literature could be found on an integrated well-being framework for SA public HEIs guiding their well-being efforts, I decided to conduct a pilot study amongst four SA public HEIs. An open-ended questionnaire was sent to participating institutions' managers/HR practitioners responsible for employee well-being by means of electronic mail (e-mail), amongst others, to determine whether they had integrated well-being programmes in place, and what the perceived strengths and weaknesses were of these programmes. The pilot study confirmed my assumption that an integrated approach towards employee well-being amongst SA public HEIs was lacking, and that no integrated well-being framework for SA public HEIs existed. I wished to address this gap by means of the design of an integrated employee well-being framework for SA public HEIs to contribute to their employees' enhanced well-being. Therefore, I decided to conduct phase 2 of the research (see 1.7.3.2 below).

1.7.3.2 Phase 2: Semi-structured questionnaire

Flowing from the extended literature review conducted, and the results obtained from the baseline pilot study, a second semi-structured questionnaire was constructed (see Annexure J). After compilation, the questionnaire was scrutinised by six well-being experts, whose details were obtained by means of snowball sampling. Inputs from the well-being experts were considered, and the questionnaire was adapted accordingly, and sent to participating SA public HEIs' managers or HR practitioners responsible for employee well-being, by means of e-mail. The questionnaire was aimed at addressing and informing the research questions set. Hence, qualitative survey research was conducted for purposes of collecting data during the empirical research. The questionnaire contained mainly open-ended questions, allowing the research participants to respond to the questions in their own words, thus providing rich information.

Amongst others, the aim of the survey was to gain information on the approach to employee well-being applied by SA public HEIs; the types of well-being programmes, and their components as utilised by these institutions. Furthermore, the strengths and weaknesses of the programmes were investigated, as well as how long the well-being

programmes had been offered at the respective institutions; how their effectiveness was measured; whether the programmes were supported by institutional well-being policies, and, by comparing the outcome of the empirical research to best practice in terms of employee well-being programmes applied worldwide, to develop an integrated employee well-being framework suitable for use by SA public HEIs.

Two of the eleven participating SA public HEIs' participants preferred to answer the questionnaire telephonically. I voice-recorded the entire discussion, and transcribed the answers provided by the participants per question. I then repeated the answer to the participants, for purposes of member checking, to confirm whether I had captured it correctly. On completion of the questionnaire by the two respondents via telephone, I listened to the voice-recordings again, made notes on them, and checked the correctness of the transcribed answers against the recordings. I then e-mailed the transcribed responses to the two participating SA public HEIs, for purposes of a second round of member checking. Both institutions indicated that the responses were captured correctly, and nothing was added or subtracted from the typed responses. I dealt with the data obtained in exactly the same manner as with the data obtained from the SA public HEIs which participants completed their questionnaires online. This entire process is discussed in detail in Chapter 4 (see 4.4.3.4.7).

1.7.3.3 Phase 3: Validation of integrated well-being framework through survey questionnaire

An integrated interpretation of the findings obtained from the extensive literature review resulted in the construction of an integrated employee well-being framework for SA public HEIs (see Annexure T). As indicated in section 1.7.2, after developing the framework, it was validated first in a pilot validation survey by three experts, and thereafter by a second validation panel consisting of six well-being experts within the SA public higher education domain, who were identified by means of snowballing, to obtain their views on its feasibility. I strived towards maximum variation of the selected experts pertaining to gender, ethnicity, experience, research focus and/or institutional affiliation (as applicable).

All the components of the designed integrated well-being framework for SA public HEIs were accommodated in a self-constructed survey questionnaire, and e-mailed to these well-being experts (see Annexures N and Q). Based on the inputs from the well-being experts, the necessary adaptations were made to the proposed integrated employee well-being framework, in order to arrive at a final, integrated employee well-being framework proposed for SA public HEIs (see Annexure T). This process is discussed in detail in sections 6.5.1.2 and 6.5.2.1.

1.7.4 Data analysis and interpretation

When analysing the data that were collected, the researcher interprets the data in such a manner that insights beyond the documentation process are produced, for purposes of answering the research questions (Creswell 2014). For this reason, the researcher has to deal with the data in a meaningful manner (Willig 2014:136-149). I analysed and interpreted the qualitative data obtained for purposes of this study by means of **inductive thematic analysis**, which allowed me the necessary flexibility to produce and present the research findings (Patton 2015). I used the guidelines provided by Braun and Clarke (2006), Saldanã (2009), Anderson (2009), and Du Plooy-Cilliers et al. (2014).

I specifically applied Anderson's method, which comprises four steps: assessment of the collected data; organising the data into manageable portions; exploring and analysing themes and patterns that emerge, and coding the data accordingly; and formulating meaningful conclusions (Anderson 2009:213). This process is discussed extensively in Chapter 4 (see 4.5.1 to 4.5.4). As I worked with qualitative data, this method of data analysis assisted me to determine and compare the different themes and aspects of well-being addressed by the respective SA public HEIs in their well-being programmes.

The research findings were reported by comparing the findings in table form, and through detailed, thick descriptions (Markula & Silk 2011:205; Creswell & Creswell 2018). Triangulation and validation of the feedback were applied (see 6.5). The limited quantitative data obtained were expressed in terms of frequencies, interpreted in terms

of basic statistical measures, and reported by means of tables and/or graphical representations.

1.7.5 Trustworthiness

The data that are gathered during the research process should be a true reflection of the phenomenon that was studied, and others should come to the same conclusions as the researcher when being presented with the research data (Du Plooy-Cilliers *et al.* 2014:259). In qualitative research, a variety of terminology makes reference to the establishment of believable results. I adhered to and applied the criteria of authenticity, credibility, confirmability, dependability and transferability set for qualitative research to strengthen the integrity of my study (*cf.* Guba & Lincoln 2005; Creswell 2014). I applied various strategies to comply with these criteria, including the provision of thick and detailed descriptions of the research conducted, keeping a reflective researcher journal and performing credible, auditable research, and member checking (*cf.* Creswell 2014; Merriam 2009). These strategies were implemented for purposes of establishing the trustworthiness of the research and belief in the research findings. Cohen, Manion and Morrison (2011:179) emphasise that it is not possible to completely eliminate possible threats to the trustworthiness of research, but that strategies can be implemented to mitigate threats, and to establish reliable, valid data. These strategies are discussed extensively in Chapter 4, and are briefly referred to below.

Mertens (2010:388) argues that **credibility** relates to the fact that there should be correspondence between the manner in which participants perceive social constructs, and the way researchers present their own viewpoint. I established credibility by means of “*prolonged engagement in the field*”, the “*triangulation of data sources, methods and investigators*” (Creswell 2009:192; Markula & Silk 2011:205), and by describing the findings of the research accurately. Furthermore, research participants remained anonymous and unidentified.

Dependability was established by keeping all information gathered during the study safely throughout the research process. All methods used were documented, and the

data was reported substantially, whilst a detailed description of the research findings and conclusions were provided to further enhance the dependability of the study. Peer reviews, triangulation, and the audit trail that I left pertaining to how the findings related to the research were arrived at, also contributed to the dependability of my study.

Confirmability entails the extent to which the researcher remains neutral throughout the research process (Guba & Lincoln 1994). The research findings should be based on the responses of participants, and not by the researcher's own agenda (Guba & Lincoln 1994). Confirmability thus refers to the strategies implemented by the qualitative researcher to ensure that researcher bias and prejudices are limited and objectivity is preserved to such an extent that the same conclusions will be reached by others who look at the data (Du Plooy-Cilliers *et al.* 2014:259; Maree 2016:125). Thus, the research findings should reflect the participants' experiences (Marshall & Rosmann 2014). I established confirmability by exposing any biases in the study. Furthermore, an audit trail was left, so that other researchers can confirm the identified themes. A research journal also was kept for purposes of monitoring and reducing any biases in the study (*cf.* Merriam & Tisdell 2016).

Merriam (2009) argues that **transferability** refers to the applicability of the research findings in other contexts related to the field of study. The reader of the research findings determines the degree of transferability or generalisability between the context of the study and the context in which it is applied (Mertens 2010). Thus, the researcher should provide thick descriptions and sufficient data in the study to enable the reader to make a sound judgement (Merriam 2009:225; Mertens 2010). As proposed by Markula and Silk (2011), participants in this study were informed about the aim and context of the study. Furthermore, I provided a thorough description of the study itself; the research setting; who the participants were; and how they had been selected (with maximum variation pertaining to race, age, gender, number of years' service at the institution and post level in mind). The research findings were reported by means of thorough descriptions, to enable the reader to relate the findings of the research to similar situations pertaining to employee well-being if the need should arise, although transferability was not the main aim of the study (*cf.* McMillan and Schumacher 2010:335).

Authenticity is the extent to which a study fairly describes phenomena without bias, and from a particular viewpoint, whilst ensuring that the research participants' authentic ideas and perspectives are accurately portrayed (Mertens 2014). For purposes of enhancing the authenticity and validity of the research findings, the data collected were, among others, reported verbatim (by means of direct quotations). Every effort was made to consider and understand the multiple perspectives provided by participants pertaining to integrated employee well-being programmes that address employees' well-being holistically within SA public HEIs, and to avoid bias in the interpretation of the data by applying disciplined subjectivity and reflexivity (*cf.* McMillan & Schumacher 2006:13; 2010).

1.8 STATUS, OBJECTIVITY AND ROLE OF THE RESEARCHER

As an employee of a South African public higher education institution for more than 23 years, and still being employed in this capacity; and having conducted research in the field of employee well-being at a South African public HEI, I wished to make a positive contribution to the field of employee well-being within SA public HEIs, as well as the field of organisational well-being. I value my employer, and the fact that I have had the opportunity to serve this institution for more than 23 years. Furthermore, I have been conducting research in the field of employee well-being within SA public HEIs for the past seven years. I believe that my experience in the SA higher education sector, coupled with my research in the mentioned fields, provided valuable knowledge and insight related to the context of this study.

I remained open and honest in my reporting of the results emanating from this research. Although I collected and analysed data from fellow employees at SA public HEIs, I consistently strived to remain independent and objective throughout the study. Although human subjectivity is unavoidable in qualitative research, I carefully applied discipline and reflexive strategies and principles as proposed by McMillan and Schumacher (2010:332-333), to avoid bias and to enhance the trustworthiness of the data collected. Amongst others, I discussed my understanding and interpretation of the research result with colleagues and respected researchers in the field of employee

well-being, to test whether my interpretations were accurate. Furthermore, all data were regarded as confidential, and collected and analysed with the confidentiality thereof in mind.

My main role as researcher was to establish a trust relationship with the research participants, and to collaborate with them in order to gain a deeper understanding of the research phenomenon (*cf.* Maree 2016, in Steyn 2018:26). Furthermore, as researcher I prepared for and administered the questionnaire telephonically with two of the participants, and analysed the data that were collected (*cf.* Maree 2016:44, in Steyn 2018:26). During the data analysis process, I took care to engage with the data in a manner that it consistent with theory, and to provide insight beyond the documentation process, as proposed by Willig (2013). As indicated in 1.7.4, various sources were consulted on the effective analysis of data. This allowed for triangulation and the confirmation of the identified central themes (*cf.* Braun & Clarke 2006; Saldanã 2009). I also constantly engaged with my promoter and co-promoter on all aspects of the study.

1.9 ETHICAL CONSIDERATIONS

Credible research does not only entail the selection of participants and following appropriate research strategies. It also means that the researcher should adhere to research ethics (McMillan and Schumacher 2010:338). Ethics can be described as the researcher's moral compass that determines his/her attitude and behaviour. Since the researcher's actions have an effect on all the stakeholders involved in the study, these attitudes and behaviour are important. The following steps were taken to contribute to the ethics of this study:

- Ethical clearance was obtained from the Ethics Committee of the Faculty of Education of the University of the Free State (ethics number UFS-HSD2016/1176) (see Annexure A) to conduct this study.
- Permission was obtained from all the participating universities and their ethics committees. However, since participating universities remain anonymous, the

permission letters are not attached, but only the letter inviting them (see Annexures C & H), and the consent form (see Annexures D & I).

- The purpose of my research was made clear to each participant by means of the letter that I attached to the e-mail sent to them (see Annexures C & H). Participants were also informed how the collected data would be applied, the feedback processes, as well as anonymity and protection of their identities, as well as the identities of their institutions (*cf.* McMillan & Schumacher 2010:339; Wassenaar in Terre Blanche, Durrheim & Painter 2006:72).
- Participants were notified that they could decide whether they wanted to participate in the study (i.e. their participation was voluntary), and that they could withdraw from the study at any time, should they wish to do so. Participants also provided written, informed consent.
- All data were dealt with as confidential. Pseudonyms and random codes were used to protect the data, and the data was kept safe in a locked cabinet. Data obtained online were protected by means of password protection. No unauthorised persons were allowed access to the data. Furthermore, all institutions and participants were kept unidentifiable in reporting the data (*cf.* Leedy & Ormrod 2013:102-103).
- No physical or emotional harm was inflicted on any of the participants, and the dignity of participants was respected (*cf.* Terre Blanche *et al.* 2006:67).

The ethical considerations applied are discussed in detail in Chapter 4 (see 4.7).

1.10 CHAPTER LAYOUT

This chapter (Chapter 1) was devoted to a brief introduction to the study. The first secondary research question will be addressed in Chapter 2, by looking into the concept of and theories on well-being, and how the concept of well-being has developed over the past few decades, from hedonism (happiness) to holistic well-being. The theoretical framework for the study will be provided, and the dimensions/building blocks of well-being will be discussed.

Chapter 3 addresses the second secondary research question by investigating current global perspectives on employee well-being and integrated well-being programmes applied worldwide. The components of the best and most effective integrated employee well-being programmes applied globally are identified and discussed, as well as some possible gaps in these programmes.

The research design and methodology that were applied in the study is discussed in Chapter 4. Chapter 5 answers the third, fourth and fifth secondary research questions, and entails a discussion of the research findings, which are integrated with the literature, and combined with my interpretations of what it means to address well-being in a holistic and integrated manner. It provides information on how employee well-being is currently addressed at SA public HEIs, and what the strengths and weaknesses of their employee well-being programmes are.

Chapter 6 addresses the sixth secondary research question. It explains the design and evaluation/validation of the integrated well-being framework for SA public HEIs, and how it could enhance and further inform well-being practices at SA public HEIs. Chapter 7 concludes the report by answering the research questions set. The strengths and contributions of the study are emphasised, whilst implications are offered and recommendations are made towards the application of an integrated employee well-being framework for SA public HEIs, aimed at establishing a flourishing employee component, and towards future research and improved practices. The integrated employee well-being framework designed as an outcome of this study, is presented. The value of the study is emphasised, and some limitations are mentioned.

1.11 VALUE AND SIGNIFICANCE OF THE STUDY

This study makes a valuable research contribution by providing critical comments on, and exploring the existence and effectiveness of employee well-being programmes applied at SA public HEIs. Furthermore, the integrated employee well-being framework designed specifically for SA public HEIs as an outcome of this study is the first of its kind for SA public HEIs, and is aimed at making a valuable contribution to the improvement of their employees' holistic well-being, which would in turn impact

positively on these institutions. Hence, this research could benefit both SA public HEIs and their employees.

Furthermore, the study makes a research contribution in the fields of Higher Education Studies and Educational, Industrial and Organisational Psychology. It may also lead to further research in higher education to improve overall employee well-being.

1.12 CONCLUSION

As mentioned in the introduction to this chapter, employees world-wide are now relying on their work to contribute to a meaningful life (Burger, Crous & Roodt 2012; Seligman 2011; Van Straaten 2014; Van Straaten, Du Plessis & Van Tonder 2016). Employees' morale, performance and levels of engagement in their work also affect their levels of job satisfaction (Buys & Rothmann 2010; Johnsrud, Heck & Rosser 2000). At the same time, organisations expect of their employees to perform optimally, and to be committed to their work (Bakker & Schaufeli 2008). It is therefore critical that organisations do all in their power to contribute positively to the well-being of their employees.

The study was undertaken against the contextual background of employee well-being within SA public HEIs. As indicated at the onset of this chapter, although there has been a significant increase in research on well-being over the past decades (see 1.1), limited research has been done on the well-being of HEI employees, and on employee well-being approaches and programmes applied by SA public HEIs. This study therefore was aimed at making a research contribution to the enhancement of the well-being of employees of SA public HEIs through the integrated employee well-being framework that was developed to this effect. Key themes that were addressed in this chapter are illustrated in Figure 1.2 below.

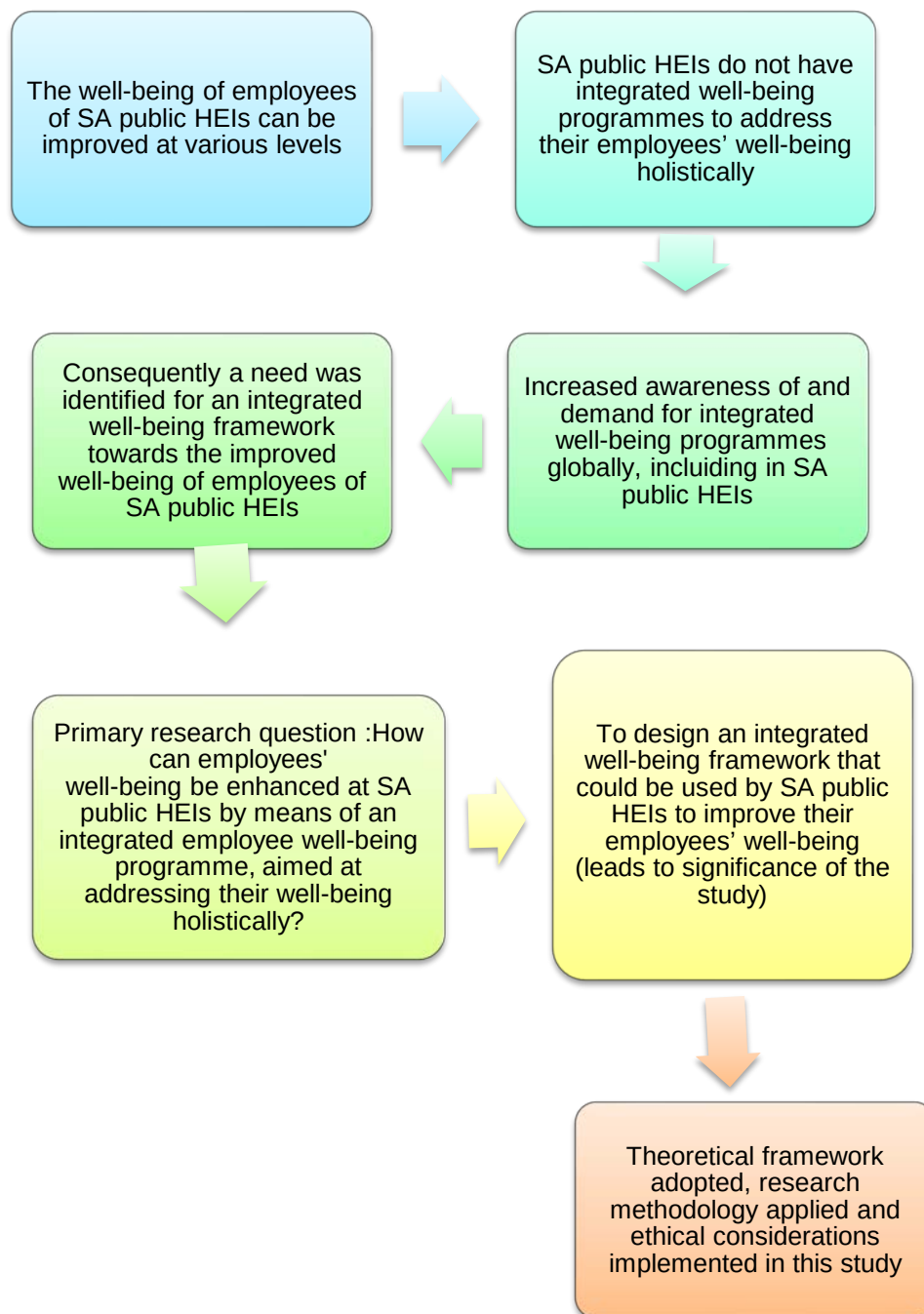


Figure 1.2 Key themes highlighted in Chapter 1

The next chapter contains a discussion of the literature review and perspectives on the concepts of well-being, as well as the different theories on employee and organisational well-being.

2.1 INTRODUCTION AND BACKGROUND

There is sufficient evidence that well-being is a complex concept, that it is multifaceted, and that there are various factors impacting on a person's well-being (Dunn & Dougherty 2008; Fredrickson & Losada 2005; Maslow 1943; Prilleltensky, Dietz, Prilleltensky, Myers, Rubenstein, Jin & McMahon 2015; Seligman 2011; Seligman & Csikszentmihalyi 2000; WHO 2012a, Wissing 2013). However, although research specifically related to employees' well-being has grown significantly in recent decades, Ryff and Keyes (1995:719-720) point out that "the absence of theory-based formulations of well-being" is worrying. Furthermore, definitions of employees' well-being are, according to Forgeard *et al.* (2011:81), "blurred and overly broad".

The aim of Chapter 2 is thus to come up with a theory-based definition of well-being; to contextualise well-being; discuss the different well-being theories that exist; and to identify the building blocks (dimensions) of well-being. A synthesis is provided of the theories and dimensions related to well-being that I harvested from the literature review, for purposes of designing a contextual framework for employee well-being within SA public HEIs (see Annexure T). Thus, Chapter 2 addresses the first secondary research question, as illustrated in Figure 2.1 below:

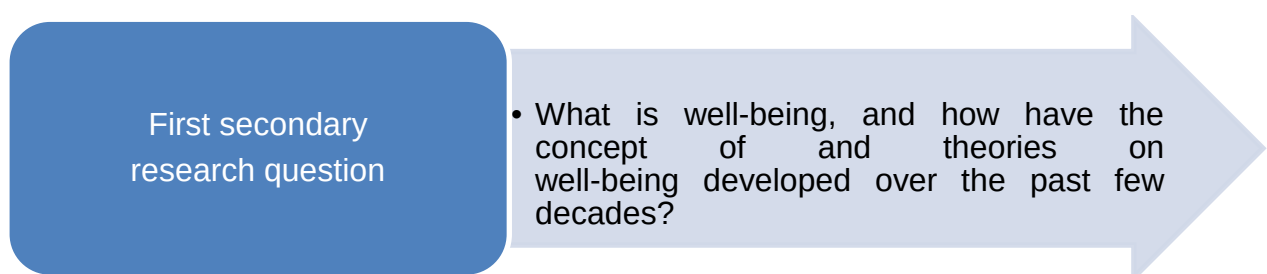


Figure 2.1 First secondary research question addressed in this chapter

Empirical research within the field of employee well-being has led to the establishment of a range of components and measures of, and theories on employee well-being (Durayappah 2011). However, the problem is that no unifying concept of well-being or theory or integrated model (framework) aimed at establishing holistic well-being has been developed – especially not within the SA public HEI system. More recently, many researchers have focused on empirically investigating subjective well-being (SWB) as an all-encompassing term for evaluating the levels of life satisfaction, happiness, engagement and quality of life of people (Lopez & Snyder 2009). SWB thus has been extensively researched as an important aspect of optimal well-being - from its origin (Seidlitz & Diener 1993; Oishi, Diener, Choi, Kim-Prieto & Choi 2007), its forecasting effect (Gilbert 2006) to cross-cultural differences (Scollon, Diener, Oishi & Biswas-Diener 2005). However, with very few universal well-being theories in existence, there are many discrepancies in the different theoretical approaches to employee well-being. Amongst others, the aim of this chapter is to reflect critically on the different well-being theories, and to identify and combine the applicable components that could form a theoretical basis for developing an integrated well-being framework for SA public HEIs.

Before providing an overview of the literature findings on the various theories on and components and benefits of employee well-being, it is important to define the concept of well-being, and to discuss the scientific development of the concept.

2.2 WHAT IS WELL-BEING

In the early years of developing a concept of well-being, the focus has been on physical, social and emotional well-being (*cf.* Maslow 1943; Seidlitz & Diener 1993). Since early perspectives of the concept of well-being, and the development of the concept of well-being up to date, it is clear that there has been a move away from the effect of negative emotions on people's well-being, to the effect of positive emotions on their well-being (*cf.* Dunn & Dougherty 2008; Fredrickson & Losada 2005; Maslow 1943; Seligman 2011; Seligman & Csikszentmihalyi 2000; WHO 2012b). The development of the concept of well-being is discussed extensively in sections 2.2.1 to 2.2.5 below.

2.2.1 Early perspectives on well-being

In 1943, Maslow formulated his self-actualisation theory, focusing on a hierarchy of human needs to establish well-being, namely (i) physiological needs; (ii) need for safety; (iii) need for love, affection and belonging; (iv) the need for esteem, and (v) the need for self-actualisation. These needs focus on the elements of physical, emotional and social well-being. Maslow (1943) presented these needs in the form of a pyramid, where the upper point represents the need for self-actualisation – the need to reach one’s potential or fulfil one’s purpose in life. His theory of self-actualisation is discussed in more detail in 2.2.1.

However, Maslow’s self-actualisation theory does not provide any tools for measuring overall well-being, neither does it point to the necessity that there should be an integration between the different layers of well-being to be addressed. It thus is clear that, before the 1990s, psychologists focused their research on mental illness and its negative psychological consequences (Seligman 1998). According to Fredrickson (2003:330), Martin Seligman, who was affiliated to the American Psychological Association at the time, attempted to measure people’s overall well-being, and the concept of positive psychology was established (Seligman 1998).

2.2.2 Defining well-being

The concept of well-being was clarified in Chapter 1 (see 1.5.1). Thus, only a brief reference to the concept is provided here. Well-being is defined in the Oxford Dictionary as “the state of being comfortable, healthy or happy” (Oxford South African Concise Dictionary 2013:1351) - a more limited view not specifically reflecting the context of the workplace. The New Economics Foundation describes well-being as a *“dynamic state, in which the individual is able to develop their potential, work productively and creatively, build strong and positive relations with others, and contribute to their community”* (New Economics Foundation 2008, in OECD 2013:26).

It is clear that more recent concepts of well-being has broadened the concept to be about much more than happiness. It is a multi-faceted concept fostering those factors that enable both people and the societies they form part of, to flourish (see 1.5.1). As indicated in section 2.2 above, it is evident that there has been a move away from studying negative consequences of people's well-being, to studying the effects of positive emotions on people's well-being (Fredrickson & Losada 2005).

The benefits of studying positive rather than negative psychological consequences are pointed out in the next section.

2.2.3 Well-being and a focus on studying positive psychological consequences

Since Seligman (1998) has attempted to measure people's overall well-being, researchers have continually turned their focus to studying positive psychological consequences (Dunn & Dougherty 2008; Fredrickson & Losada 2005; Seligman 2011), and have come to realise the importance of gaining an understanding of and promoting those factors that enable people and their societies to flourish – that is, to be optimistic; full of hope; to be content and satisfied; and to be one with, engaged and happy in the moment – also known as “flow” (Seligman & Csikszentmihalyi 2000:5). However, research focused on disease and negative psychological consequences still outweighs research focused on health and well-being promotion (Redelinghuys *et al.* 2019a). Thus, more research should be done related to positive organisational and employee behaviour and well-being.

The WHO defines “health” as “*a state of complete physical, mental and social well-being and not merely the absence of disease*” (WHO 2006:1). This view is aligned with the concept of positive psychology, which no longer focuses on mental illness and negative psychological consequences, but on human flourishing (Dunn & Dougherty 2008; Fredrickson & Losada 2005). Thus, the aim of positive psychology and organisations such as the WHO is to better understand and embrace the factors that empower human beings to flourish. This links with my own understanding of well-being as a complex phenomenon that has to be addressed holistically for a person to flourish.

2.2.4 Optimal human flourishing

Seligman (2011) broadened the concept of well-being even more to refer to a state of human flourishing. He wrote a book titled *Flourish*, in which he presents a model of well-being, with the following elements to be present to experience optimal well-being: “positive emotions, engagement, relationships, meaningful life and accomplishment” (Seligman 2011:16). The concept and importance of flourishing in the workplace is also emphasised in the literature (Keyes 2002; Rothmann, in Wissing 2013). Recently, the concept of holistic well-being or human flourishing was broadened even further to include concepts of spiritual, financial, intellectual, environmental and occupational well-being (Bonnet 2009; Gallup n.d.; Kennedy & Kanthamani 1995; Main 2010; Taylor, Jenkins & Sacker 2009) (see 2.4.5; 2.4.7-2.4.9). I agree that all these components are necessary to establish holistic well-being.

2.2.5 Scientific development of the concept of well-being

To summarise the scientific development of the concept of well-being, Table 2.1 below provides evidence of how this has occurred, although not in chronological order. It summarises the key examples of contemporary constructs of well-being in well-being science and positive psychology. These well-being concepts underpin the measurement of emerging health and well-being outcomes in health and human sciences (Oades & Mossman 2017:8-9).

Table 2.1 Scientific development of the concept of “well-being” as identified from the literature (adapted from Oades and Mossman 2017:8-9)

Well-being concept	Summary of concept/definition
Hedonism	Well-being = happiness. Well-being is defined in terms of pleasure experienced (Ryan & Deci 2001:141).
Happiness	Happiness is the outcome of a balance between positive and negative affect. To experience happiness, pleasant experiences should exceed negative experiences (Keyes, Shmotkin & Ryff 2002:1008). Seligman defined happiness as the experience of positive emotions, meaning and engagement (Seligman 2002), and that happiness could be achieved by pursuing these facets. Hence, individuals low in one

	aspect of happiness could still be happy if they pursued the other facets of happiness (Seligman 2002).
Eudaimonia	The so-called “great life” (Durayappah 2011). Defines well-being in terms of behaviour that leads to fulfilment in life (Gale, Booth, Möttus, Kuh & Deary 2013:687).
Psychological (mental) well-being	Ryff and Keyes (1995:720) defined psychological well-being in terms of (i) self-acceptance; (ii) personal growth; (iii) autonomy; (iv) mastery; (v) life purpose, and (vi) positivity. People seek to accept themselves, and to be accepted by, and have positive relations with others. To address their own needs and desires, they seek to master their own environment. They seek to find meaning and purpose in life, whilst utilising their talents and capabilities to grow personally (Keyes 2002:1008; Oades & Mosmann 2017:8). Keyes (2002:207) defined mental health as “symptoms of positive feelings and positive functioning in life”.
Subjective well-being	SWB entails experiencing a high degree of satisfaction with life (Deci & Ryan 2008:1). The concept is often used interchangeably with “happiness”. Deci and Ryan (2008:1) state that maximising your well-being results in maximising happiness levels (Deci & Ryan 2008:1).
Social well-being	Keyes (1998) developed a social well-being model, which consisted of the elements of social integration, coherence, contribution, acceptance and actualisation. These elements of social well-being indicate the extent to which an individual overcomes social challenges, and is able to function optimally within society (Gallagher, Lopez & Preacher 2009:1027; Oades & Mossman 2017:9).
Flourishing	Flourishing entails experiencing optimal levels of well-being (Keyes 2002:210). To <i>flourish</i> in life, individuals must have high levels of positive functioning and emotional well-being (Keyes 2002:210).
Life satisfaction	Life satisfaction mirrors an individual's perceived distance from his/her aspirations (Keyes <i>et al.</i> 2002:1007-1008). Satisfaction with life thus involves a judgement of a person's quality of life (Keyes <i>et al.</i> 2002:1007-1008; Oades & Mossman 2017:8-9).
Well-being	Well-being entails optimal functioning and psychological experience (Deci & Ryan 2008:1; Dunn & Dougherty 2008). Ryff and Keyes (1995) distinguished between psychological well-being and subjective well-being. Psychological well-being is an umbrella term for our emotional, social and mental well-being. Seligman developed a well-being model (referred to as “PERMA”), stating that well-being consists of positive emotions, engagement, relationships, meaningful life and accomplishment (Seligman 2011:16).
Positive well-being	Components of optimal mental functioning are emotional stability, engagement, competence, meaning, positive emotions, optimism, vitality, positive relationships and self-esteem. Positive feelings, as well as positive functioning, are emphasised (Huppert & So 2013:849).

It is clear from the above discussion and from Table 2.1 that the concept of well-being has moved away from the original focus on hedonic well-being (i.e. that well-being equals happiness), as described by Ryan and Deci (2001), to a much broader concept, encompassing eudemonia (*cf.* Durayappah 2011), and flourishing at different levels (*cf.* Keyes *et al.* 2002; Forgeard, Jayawickreme, Kern & Seligman 2011; Huppert & So 2013; Seligman 2011).

There is thus no doubt that well-being moves beyond the concept of happiness (*cf.* Keyes 2002); that it entails both positive feelings and positive functioning at various levels (*cf.* Huppert & So 2013:849); high experiences of subjective and psychological well-being (*cf.* Keyes *et al.* 2002:1007); and that it consists of several building blocks, or dimensions which are all interlinked (Huppert & So 2013; Keyes 2002; Seligman 2011). These dimensions of well-being are motivated and discussed in detail in sections 2.4.1 to 2.4.9.

Figure 2.2 below illustrates how the focus of subjective well-being has shifted over the past three decades, from hedonism (pleasurable life) to well-being (the good life) to eudemonia (the great life):

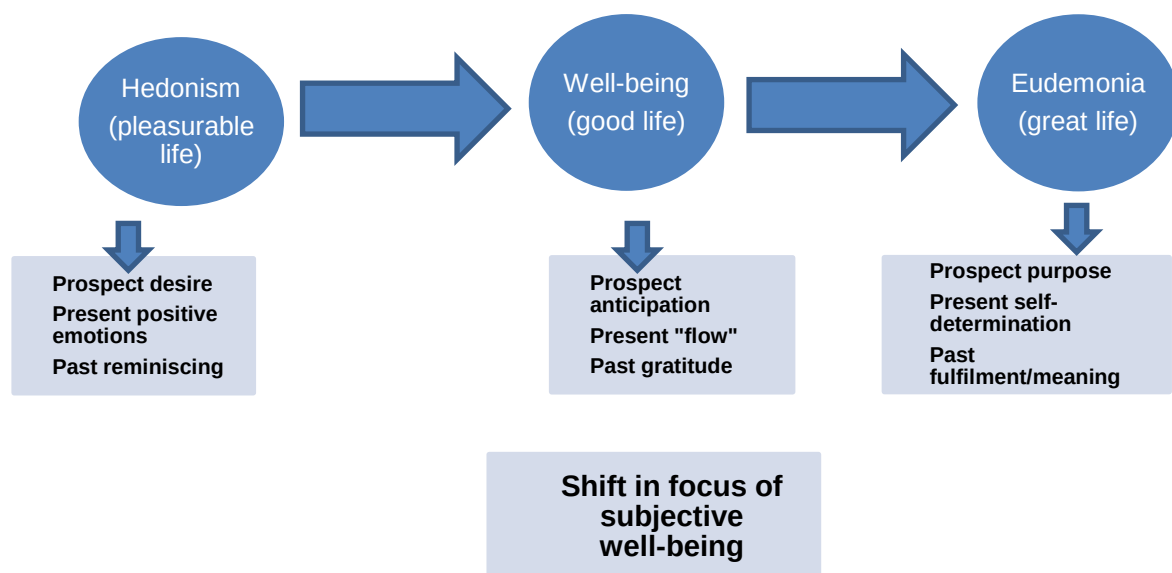


Figure 2.2 Shift from hedonism/hedonia (pleasurable life) to eudemonia (the great life) (adapted from Durayappah 2011)

Flowing from the literature review conducted on the scientific development of the concept of well-being, and from my own research conducted at a South African HEI in 2014 on selected elements of employee well-being, and the power of appreciation in enhancing employees' well-being (Van Straaten 2014), I agree with the view that well-being is broader than the concept of happiness, and that it entails human flourishing at various levels. I have developed my own definition of well-being flowing from my research on the concept of well-being over the past seven years. As stated in Chapter 1 (see 1.5.1), I define the concept of well-being as follows:

“Well-being is a multi-dimensional concept fostering those factors that enable people and societies to flourish. It is all about functioning optimally in life; living a well-balanced life; flourishing at physical, emotional, psychological, social, spiritual, financial, environmental, intellectual and occupational levels. It entails human thriving, and not only surviving”.

Thus, my own definition links with the concept of **holistic well-being** consisting of **several dimensions that are interlinked**, as identified in positive psychology domains. Now that the concept of well-being has been defined, placed in context and discussed, the theories relating to well-being and positive psychology are explored below.

2.3 THEORIES RELATING TO WELL-BEING AND POSITIVE PSYCHOLOGY

As mentioned in the introduction to this chapter, there is a variety of well-established theories relating to well-being and key areas of positive psychology that support the “what”, “why” and “how” of well-being. Table 2.2. illustrates the development of the most important well-being and positive psychology theories.

Table 2.2 Key well-being and positive psychology theories (adapted from Oades and Mossman 2017:10)

Name of theory	Formulator of theory/main researcher
Self-actualisation theory	Maslow (1943)
Psychological well-being theory	Ryff & Keyes (1995)
Self-determination theory	Ryan & Deci (2002)
Flow theory	Csikszentmihalyi (1990); Seligman & Csikszentmihalyi (2000)
Hope theory	Snyder (2002)
Broaden-and-build theory	Fredrickson (2003) Fredrickson & Losada (2005)
Strength theories - Appreciative Inquiry theory - Positive psychology theory - Organisational behaviour theory	Seligman, Steen, Park & Peterson (2005); Linley (2008) Hammond (1998); Cooperrider & Whitney (2005); Whitney & Trosten-Bloom (2003) Seligman & Csikszentmihalyi (2000); Fredrickson (2003); Fredrickson & Losada (2005) Kinicki & Kreitner (2007); Luthans & Youssef (2007); Bakker & Schaufeli (2008)
Well-being theory - Authentic happiness theory - Flourishing theory - Well-being theory (PERMA)	Seligman (2011) Seligman (2002) Keyes (2002); Fredrickson & Losada (2005) Seligman (2011)

Each of the above-mentioned theories are discussed below.

2.3.1 Self-actualisation theory

Maslow's self-actualisation theory can be regarded as the "foundation phase" for positive psychology, but it is not broad enough to encompass all the building blocks of well-being, and to lead to a state of holistic well-being (Oades & Mossman 2017:10).

As mentioned briefly in section 2.1.1, Maslow (1954) believed that people were not simply controlled by forces or instinctual impulses (Snyder, Lopez & Pedrotti 2011). He focused on human potential, and believed that human beings strive to reach their full potential in life, and that this formed the foundation for their happiness (Snyder *et al.* 2011). In his theory of self-actualisation, Maslow (1943) presented a hierarchy of needs, namely physiological needs; the need for safety; the need for love, affection and belonging; the need for esteem and the need for self-actualisation (see Figure 2.3 below); where the top end represents the need to fulfil one's potential or destiny (also known as self-actualisation) on earth:

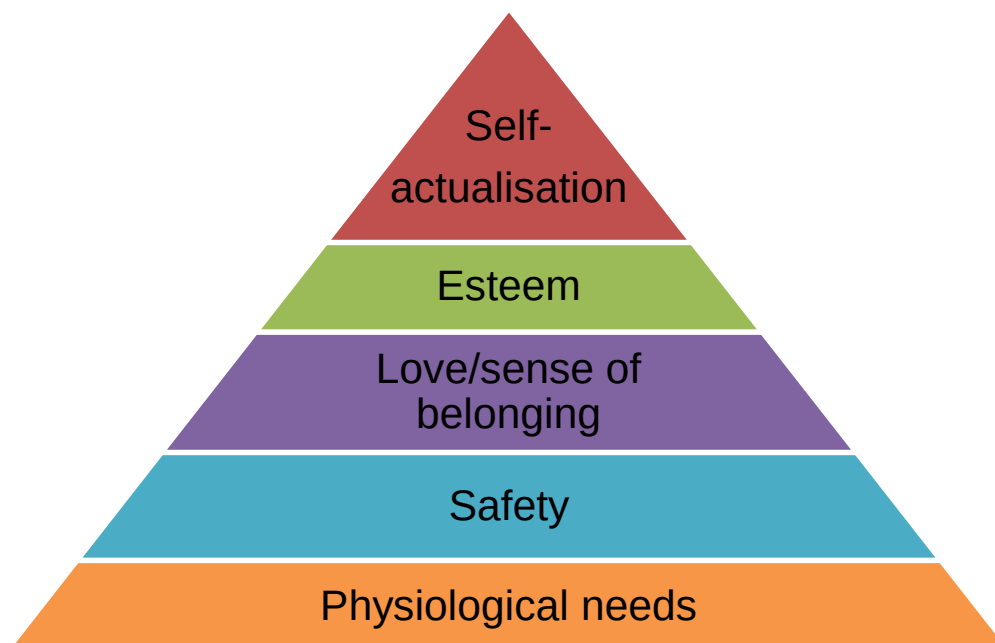


Figure 2.3 Hierarchy of human needs (adapted from Maslow 1943)

Maslow (1954) points out that each of the needs in his hierarchy is individually required. Hence, all these needs should independently contribute to subjective well-being. Fulfilling one's physiological needs and need for safety, for example, does

not mean one's need for love and experiencing a sense of belonging is reduced. It might further imply that our subjective well-being is enhanced when our needs at various levels are fulfilled, as this creates an effect of synergy (Diener & Tay 2012:354-365).

Although the origin of the term *positive psychology* can be traced back to Abraham Maslow, it was many years before positive psychology as an academic field originated. According to Csikszentmihalyi and Nakamura (2011), this entailed steering psychology back towards what makes life worth living. The founders of positive psychology came to the realisation that traditional psychology was focused on human suffering, and not on human flourishing. Although this approach had succeeded in alleviating many forms of human suffering, it did not explain what human flourishing entails (Snyder *et al.* 2011).

2.3.2 Broaden-and-build theory

Fredrickson (1998) developed the broaden-and-build theory, which assisted in discovering the positive effects of positive experiences and emotions on the lives of people (Fredrickson 2001a:218). While negative emotions have a narrowing effect on thought-action trends, positive emotions broaden our momentary mind set (Fredrickson 2003:330). Furthermore, positive emotions build enduring personal resources such as social connections, coping with stressful situations, and a person's knowledge of his/her environment (Fredrickson & Losada 2005:679).

Positive emotions bring about a change in thinking and behaviour that prepare a person for difficult times to come (Fredrickson 2003:332). This happens as a result of the "*broadening of an individual's momentary mind set*" (Fredrickson 2003:332), which, in turn, builds our personal resources in a lasting manner. According to Fredrickson (2003:332), the benefits of positive emotions include that they result in people being open to information, being more creative and flexible, and being integrative in their thinking. This is closely related to the principles of the Appreciative Inquiry (AI) theory, and the belief that positive conversations and the synergy created by means of such conversations can transform an entire organisation (Cooperrider *et*

al. 2008:101). The broaden-and-build theory of Fredrickson (2003) also shows strong similarities with Seligman's element of positive emotions, as described in his well-being theory (see 2.2.8.3).

Although broaden-and-build theory focuses on the positive effect of having positive emotions on one's well-being, this one component of establishing well-being (= positive emotions) is not regarded as sufficient for establishing holistic well-being. Thus, broaden-and-build theory is found lacking in guiding holistic well-being, as it does not point to any of the other important building blocks of well-being. However, the concept of the importance of having positive emotions for one's well-being, is recognised, and will also feature in my own well-being theory.

2.3.3 “Flow” theory

Csikszentmihalyi (1990) developed the so-called “flow” theory, and wrote a couple of books on the concept. He describes *flow* as the state of concentration and engagement that can be achieved when completing a task that requires concentration, and which challenges your skills. Csikszentmihalyi (1990) formulated his flow theory after having interviewed a number of experts, including chefs, artists, tradesmen and composers. He found that, despite being from different cultures and working in different fields, many of them explained a similar concept of being absorbed in their work, which they enjoyed doing, to such an extent that time became irrelevant, and that it felt like only a few minutes had passed, whilst in fact they had been engaged in the activity for hours. He emphasises that, in order to establish flow, the motivation for the activity must come from within, and the person must gain personal satisfaction by performing the task, whilst being self-motivated to complete it (Csikszentmihalyi 2014).

According to Csikszentmihalyi and Nakamura (2011:195), establishing a state of “flow” has various benefits for a person's happiness, as the person gains great satisfaction from performing the task. Furthermore, the benefits extend beyond the moment, as, whilst in flow, a person is often producing work of a high quality which, in turn, may lead to greater extrinsic rewards (Csikszentmihalyi & Nakamura

2011:195). Finally, as a result of the challenging nature of the task that establishes flow, the individuals are likely to develop their skills of mastering a task, which strongly correlates with the concept of personal development (Csikszentmihalyi 2014:136-142). Seligman (2002, 2011) supports this view and indicates that by engaging in meaningful activity and becoming totally absorbed in an activity, stress is alleviated and one's mood is lifted.

Although I acknowledge the importance of being absorbed in an activity, as well as the benefits thereof for reducing stress and elevating one's mood, flow theory is found lacking in terms of guiding holistic well-being. Furthermore, it does not recognise the fact that well-being is interwoven with aspects related to our well-being at various levels (Seligman 2011; see 2.4.1 to 2.4.9).

2.3.4 Hope theory

Snyder, Higgins and Stucky (1983) initially formulated the hope theory in the mid-1980s. These authors looked into the motivational literature of the 1960s and 1970s, and combined this with cognitive theory and research on thought processes. They viewed cognitions as providing the underlying basis of hope, and consequently regarded hope primarily as a way of thinking, whilst feelings played a secondary role (Snyder 2002:249). Thus, Snyder placed thinking, and not emotions, at the core of hope (Snyder 2002:249).

At the basis of Snyder's hope theory is the understanding that we should take time to set present-focused and future-oriented goals. Furthermore, we should increase our mindfulness about important decisions regarding our goals (Snyder 2000). Our goals therefore should extend further than we have been before. These goals should describe our vision in clear language, with specific priorities, measures and timelines. We must also increase our positivity and willpower, that is, the desire to take action and believe that we can accomplish our set goals (Snyder 2000).

Hope theory entails that we should plan for foreseeable barriers, take action to avoid anything that blocks us from achieving our goals, and consider various pathways of achieving our goals (Weller 2015:Online). Scioli, Ricci, Nuygen and Scioli (2011) broadened Snyder's hope theory into an integrated hope theory, according to which hope is a network of emotions built from social, psychological and biological resources.

In my view, the principles of hope theory can be practised in any organisation. Employees should be encouraged to increase their mindfulness about setting goals. They should be enabled to master their work, and to develop healthy relations at work, amongst others by spending time with "high hope people" (Weller 2015:Online), as this will encourage them to set their own goals, and to gain the willpower and take action to accomplish their set goals. Hope theory therefore succeeds in emphasising the importance of goal setting and mindfulness about setting goals, as well as the fact that it is built from biological (physical), psychological and social resources. These aspects will be emphasised in the formulation of my own well-being theory, as they are important means of encouraging employees to reach their destiny in life. However, the theory fails to address well-being holistically in terms of all the identified building blocks of well-being.

2.3.5 Psychological well-being theory

Psychological well-being theory was formulated by Ryff in 1989. In 1995, this theory was broadened by Ryff and Keyes. The model of psychological well-being differs from previously formulated psychological well-being models in that well-being is regarded as multi-dimensional - thus a broader concept than the former focus of well-being as equal to happiness and having positive emotions. Ryff and Keyes (1995:720) emphasise that a good life should be balanced and whole, and broadly focused to include personal growth, self-acceptance, positive relations with others, autonomy, purpose in life and environmental mastery (Ryff & Keyes 1995:720). Hinchcliffe and Woodward (2004) confirm that psychological well-being functions to establish human flourishing.

Although psychological well-being theory addresses a wide range of aspects related to well-being, as mentioned above, it does not address physical (see 2.4.1), emotional (see 2.4.2), financial (see 2.4.5) and spiritual (see 2.4.6) dimensions of well-being. However, psychological well-being theory does provide a framework that can be used to analyse and organise one's life, and to live a better life. Ryff's psychological well-being theory shows strong resemblance with well-being theory, especially with regard to the components of positive relations, engagement, meaningful life and accomplishment (Seligman 2011:16)(see 2.3.7), which will be acknowledged in my own synthesis of what integrated well-being theory should entail (see 2.3.9).

2.3.6 Self-determination theory

Deci and Ryan developed the self-determination theory (SDT) in the mid-1980s (Deci & Ryan 1985). The theory was developed around the assumption that all people have a desire for self-development; it also recognises the importance of self-regulation and having positive integrations with others (Ryan & Deci 2002:5). It is a wide-ranging theory that explains motivation, personality and the concept of well-being (Noren n.d.). The theory proposes that in order to live a fulfilling life, one must fulfil certain distinct psychological needs that provide a firm basis for becoming motivated, and experiencing well-being (Ryan & Deci 2002:5). The self-determination theory shows a link with Maslow's self-actualisation theory (Maslow 1943) in terms of the emphasis on social integration and self-awareness.

Self-determination theory emphasises that various factors affect human behaviour and motivation (Van Lange, Kruglanski & Higgins 2012:432), and that this may either lead to growth and integration, or it may disrupt and fragment processes (Ryan & Deci 2002:5).

The strengths related to the self-determination theory are its focus on self-awareness, self-development and social integration, and the acknowledgement that human well-being is affected by various factors. However, the theory fails to acknowledge that human well-being should be addressed in an integrated manner.

2.3.7 Strength theories

Strength theories emphasise that one cannot build on weaknesses. In order to achieve optimal results in terms of human flourishing, one has to use all the available strengths related to optimal human functioning. According to Drucker (1967:11), these strengths create the opportunities for us to flourish in life. In sections 2.3.7.1 to 2.3.7.3, some of the strength theories related to human flourishing are discussed.

2.3.7.1 *Appreciative inquiry theory*

Feeling valued or appreciated is an important component of a person's well-being (Hammond 1998). In Organisational Development (OD) a recent positive-orientated organisational theory has emerged, known as Appreciative Inquiry (AI). AI focuses directly on searching for the strengths of organisations and employees (Cooperrider & Whitney 2005:2). It involves *"the art and practice of asking questions that strengthen a system's capacity to apprehend, anticipate, and heighten positive potential"* (Cooperrider & Whitney 2005:5). Appreciative Inquiry regards all organisations as having a positive core, and that their positive core can contribute to the release of positive energy and positive improvement (change) (Whitney & Stavros 2008:3). The desired change is brought about by identifying past examples of success and optimal performance, or having hope for the future (Whitney & Trosten-Bloom 2010; Stratton-Berkesell 2015).

Furthermore, AI involves the identification of the key elements that account for an organisation, individual or group's past successes, and, based on these successes which may be perpetuated in the future, a vision of the future is crafted (Cooperrider & Whitney, 2005:5). Similar to Positive Organisational Theory, AI is based on the belief that organisations and their employees should build on their strengths, rather than focusing on efforts to overcome their weaknesses (Stratton-Berkesell 2015).

More recent studies (Ludema, Whitney, Mohr & Griffith 2003; Van Straaten *et al.* 2016; Watkins 2010; Whitney & Trosten-Bloom 2010) support this viewpoint that the well-being of workers is affected negatively when the workers do not feel 'part of', valued

or appreciated. Hence, organisations should do more to ensure that their organisations' and employees' strengths are explored, and that employees are valued and appreciated.

Although not regarded as a comprehensive and an over-arching well-being theory, the value of AI theory lies in it supporting positive potential and the power of appreciation. AI also acknowledges the power of building on existing strengths within organisations to bring about positive change – thus regarding such strengths as opportunities. In my synthesis of integrated well-being theory, these aspects also featured (see 2.3.9). The positive aspects of AI, therefore, are linked to the principles of positive psychology theory (Seligman 1998) and well-being theory (Seligman 2011), and also with broaden-and-build theory (Fredrickson 1998), psychological well-being theory (Ryff 1989), and hope theory (Snyder 2002).

2.3.7.2 *Positive psychology theory*

In 1998, Martin Seligman began to explore moving away from psychology's focus on what is wrong with and lacking in people, to an approach that embodied the positive features of the human condition, enabling individuals to lead a flourishing life (Seligman & Csikszentmihalyi 2000; Fredrickson 2003). Up until then, psychologists believed that human beings were intrinsically weak and flawed (Cameron, Dutton & Quinn 2003), and thus they focused their research on mental illness and its negative psychological consequences.

Seligman (1998:2) identified two neglected missions of psychology. The first entailed the building of human strength and making people more productive. The second entailed the nurturing of genius, and the generation of high human potential (Seligman 1998). This shift in focus led to the establishment of the field of positive psychology (Seligman & Csikszentmihalyi 2000). Other researchers also began to study the benefits of positive psychological consequences (Fredrickson & Losada 2005; Gable & Haidt 2005; Snyder, Lopez & Pedrotti 2011). Positive psychology therefore moved away from the exclusive focus on mental illness and the related negative psychological consequences to gaining an understanding of and fostering those factors that enable

societies and their people to **flourish** (Huppert & So 2013; Seligman & Csikszentmihalyi 2000:5; Snyder & Lopez 2002).

Seligman (2002) emphasises that the goal of positive psychology is to become aware of, and to cultivate conditions, factors and processes that may enable individuals to function optimally in life, and to flourish (Donaldson, Csikszentmihalyi & Nakamura 2011; Gable & Haidt 2005; Oades and Mossman 2017; Seligman 2011). Positive psychology, therefore, may be regarded as a preventative science. It shifts the focus from traditional psychology to an emphasis on human strength, resilience and virtue (Miremadi-Baldino 2017; Seligman & Csikszentmihalyi 2000). It functions as an encompassing term for positive concepts such as human strengths (which may offer protection against mental illness) (Seligman & Csikszentmihalyi 2000); virtues; excellence; flourishing; thriving; resilience (the ability to *bounce back*) (Miremadi-Baldino 2017), and optimal functioning (Isen 1990; Fredrickson 2001; Keyes 2002, Fredrickson & Losada 2005; Seligman *et al.* 2005, Seligman 2011).

Mindful of some criticism of positive psychology, such as Cowen and Kilmer's (2002) observation that some concepts and perspectives in the social sciences have lost credibility and relevance, as, according to these authors, people tend to accept too quickly an appealing concept, without such a concept being defined and properly investigated; it is evident that Positive Psychology has been validated through sound research over many decades (Cameron 2016; Keyes 2002; Miremadi-Baldino 2017; Rabah 2015; Seligman *et al.* 2005; Seligman 2011). Positive psychology is a solid, valid, research-based, well-informed theory. Solid empirical research proves the significance and positive impact of positive phenomena (Cameron 2016; Keyes 2002; Seligman *et al.* 2005; Seligman 2011). Currently, there are more than 300 000 positive psychology practitioners worldwide. The sixth World Conference on Positive Psychology takes place this year (2019), and it is evident that this concept is growing fast. Empirical evidence is building that positive psychology significantly affects individuals at physiological, social, cognitive and emotional levels (Cameron 2016:28). Furthermore, it positively affects organisational performance (Bakker & Schaufeli 2008; Luthans & Youssef 2007; Rabah 2015).

Both positive psychology and clinical psychology focus on increasing a person's positive traits, resulting in a more satisfied, happier life (Desmond 2018:Online). These two genres of psychology also share some of the methodology such as learned optimism, positive psychotherapy (combining positive behavioural approaches with psychotherapy) (Miremadi-Baldino 2017) and flow (being super-focused on an activity) (Csikszentmihalyi 2014) - which assist psychologists (positive or clinical) to achieve their goals in terms of helping their patients (Desmond 2018:Online).

Therefore, as a preventative science, positive psychology theory's strong focus on the positive human strengths and optimal functioning links with my own notion of well-being. Furthermore, the fact that positive psychology significantly affects individuals at physiological, social, cognitive and emotional levels is evidence of the fact that well-being is multi-faceted and interlinked. Furthermore, positive psychology theory acknowledges that a person's well-being also affects an organisation's performance.

2.3.7.3 Organisational (behaviour) theory

Organisational theory (OT) describes the behaviour of organisations and groups of organisations (Robbins, Odendaal & Roodt 2007). Organisational behaviour (OB) focuses on investigating *“the impact that individuals, groups, and structures have on behaviour within organisations for the purpose of applying such knowledge towards improving an organisation's effectiveness”* (Robbins, Odendaal & Roodt 2007:7). Furthermore, organisational behaviour is an interdisciplinary study field, and it investigates how organisational structure affects the behaviour of individuals, groups and structures within the organisation (Cross & Carbery 2016:1; Levin 2008). It attempts to understand how organisations, groups and individuals behave within organisational settings, as this assists in understanding and managing them more effectively (Kinicki & Kreitner 2007:5).

Cook & Hunsaker (2001:13-14) emphasise that OB is based on the viewpoint that organisations are open systems, and that their environments impact on them, whilst they, in turn, also impact on their environments. It includes concepts such as leadership, team building, decision making, job satisfaction and motivation (Cook &

Hunsaker 2001). OB is therefore an interdisciplinary study field that includes communication, sociology, management and psychology (Boundless Management n.d.:Online).

Organisational behaviour is closely linked to the notion of Seligman and Csikszentmihalyi (2000) that humanistic psychology tends to overemphasise individual well-being, whilst not paying sufficient attention to collective well-being. They emphasise that people's well-being does not only depend on their own successes, but also on the well-being of those around them. Therefore, fulfilling the need of others might impact on a person's own well-being (Christakis & Fowler 2009; Diener & Tay 2012; Seligman & Csikszentmihalyi 2000; Seligman 2011).

When positive psychology is applied to organisations, the emphasis is on positive organisational scholarship and behaviour (Cameron *et al.* 2003:3). Positive organisational scholarship involves the processes, attributes and outcomes of organisations and their employees that enable them to function optimally (Cameron *et al.* 2003:3). It is about

“the enablers (e.g. processes, capabilities, structures, methods), the motivations (e.g. unselfish, altruistic, contribution without regard to self), and the outcomes or effects (e.g. vitality, meaningfulness, exhilaration, high quality relationships) associated with positive phenomena”
(Cameron *et al.* 2003:3).

Positive organisational scholarship looks into the psychological capacities and strengths of individuals that can be further developed and measured in an attempt to improve organisational effectiveness, performance and well-being (Luthans & Youssef 2007; Bakker & Schaufeli 2008; Rabah 2015). Positive organisational scholarship therefore makes positive statements, processes and relationships prominent in organisational studies (Cameron *et al.* 2003:4-5).

The strengths of organisational behaviour theory lies in the fact that it recognises that groups, structures and individuals impact on the behaviour within organisations, whilst organisational structures also impact on the behaviour of individuals, and their

well-being (Bakker & Schaufeli 2008; Redelinguys *et al.* 2019a). As such, I have addressed the different role-players in employees' well-being in the integrated well-being framework that was designed for purposes of this study (see 7.2.4.1; Annexure T).

2.3.8 Well-being theories

Well-being theories include the authentic happiness theory, the flourishing theory and the well-being theory. These theories are discussed in 2.3.8.1 to 2.3.8.3 below.

2.3.8.1 Authentic happiness theory

Seligman's initial research focused on human happiness as an important element of people's well-being (Seligman 2002). He categorised human happiness into three categories, describing life as pleasant (pleasures of life), good (living an engaged life), and meaningful (having a sense of belonging; serving a purpose bigger than yourself, e.g. religion; your family) (Seligman 2002:29; Seligman 2011:14-24). His authentic happiness theory states that true happiness entails positive emotions (what we feel; pleasure; comfort), engagement, and meaning (Seligman 2002:250-254).

Although not regarded as a comprehensive and over-arching well-being theory, the value of the authentic happiness theory lies in the fact that it emphasises the importance of positive emotions and living a meaningful life.

2.3.8.2 Flourishing theory

Fredrickson and Losada (2005) define "flourishing" as living "*within an optimal range of human functioning, one that connotes goodness, generativity, growth and resilience*" (Fredrickson & Losada 2005:678). This definition builds on the research of Keyes (2002) and Seligman (2002), who emphasise that mental health should be measured by the presence of positive mental attributes, and not the absence of mental illness (Keyes 2002; Seligman 2002). The concept of flourishing involves functioning optimally at different levels, and living a happy, fulfilled life, as opposed to pathology and feeling empty and hollow (Fredrickson & Losada 2005:678). Flourishing people

are satisfied and happy; they live purpose-filled lives and accept themselves as they are; they have a sense of autonomy, and aim to grow personally; and they take responsibility for their own lives (Keyes 2002:207-222).

Flourishing theory thus functioned as an important baseline theory for this study aimed at identifying the current strengths of employee well-being programmes offered at SA public HEIs; possible gaps in such interventions; and how employee well-being programmes applied at SA public HEIs could be improved.

2.3.8.3 *Well-being theory*

In 2011, Seligman broadened his concept of what positive psychology entails to move beyond happiness to experiencing holistic well-being (Seligman 2011). His original authentic happiness theory was broadened into what he refers to as a Well-being Theory (Seligman 2011). This links with my own definition of well-being, emphasising that it should have a holistic focus on the various identified dimensions of well-being (see 2.1.1; 2.4.1-2.4.9).

Seligman (2011) came up with the concept that happiness alone does not constitute well-being. In his book titled “*Flourish: A Visionary New Understanding of Happiness and Well-Being*” (Seligman 2011), he identified five measurable building blocks of well-being, namely positive emotions, engagement, relationships, meaning and purpose, and accomplishment (Seligman 2011:16). His well-being theory clearly states that each of the elements of his PERMA model must contribute to well-being, and must be pursued and measured independently (Seligman 2011:17). Well-being is therefore not measured in terms of happiness and life satisfaction, but by having positive emotions; living an engaged life; having positive relationships; living a meaningful life; and accomplishing your goals in life (Seligman 2011:16).

In positive psychology, the focus is not only to increase the extent to which a person is flourishing in his/her own life, but also the extent to which other human beings are flourishing (Seligman 2011:20-24). Through engagement in meaningful activity and becoming absorbed in an activity, stress is alleviated, a persons' mood is lifted, and a

healthy *flow* is created, which can be described as being immersed in and experiencing joy in the present moment (Huppert & Johnson 2010; Seligman 2011:11). All of these elements are regarded as strengths of the well-being theory.

2.3.9 Synthesis of well-being theories

The value of the preceding well-being and positive psychology theories for this study can be attributed to the effectiveness of these theories when applied within the contexts of employee and organisational well-being. It is clear that theories on well-being and positive psychology include “emotions, attentional states, cognition, motivation, goal striving and relationships” (Oades and Mossman 2017:8), in an attempt to improve people’s well-being, including well-being at work. For instance, the Organisational Behaviour Theory (with its focus on the behaviour of organisations and groups of organisations, and the impact of structures, groups and individuals on organisational behaviour; and with the aim of improving the effectiveness of organisations), is also very relevant to this study aimed at improving employees of South African public HEIs’ well-being, and by doing so, also improving these organisations’ well-being.

Appreciative inquiry theory, with its strength-based focus and emphasis on the power of appreciation to bring about positive change in the organisation (see 2.3.7.1), adds value to this study in the sense that appreciation is one of the elements of well-being that will be advocated in my integrated well-being framework for SA public HEIs. Another factor of AI to be emphasised in this framework is the fact that SA public HEIs should build on their strengths in terms of their employee well-being efforts, in order to address possible weaknesses in their employee well-being programmes.

However, none of the well-being theories discussed under 2.3.1 to 2.3.8 above are regarded as a comprehensive, integrated well-being theory, with an emphasis on addressing all the dimensions of employees’ well-being in an integrated manner. Hence, based on my literature review, document analysis and these well-being theories, I provide my own synthesis of integrated well-being theory. It consists of some elements taken from these well-being theories, and it addresses all the

dimensions of well-being identified from the literature (discussed in detail in sections 2.4.1 to 2.4.9) in an integrated manner, as illustrated in Table 2.3 below:

Table 2.3 Elements derived from well-being theories in pursuit of my own synthesis of integrated well-being theory

Well-being theory	Elements derived from well-being theories to formulate my own synthesis of integrated well-being theory
Broaden-and-build theory	Experiencing positive emotions
Flow theory	Being absorbed in an activity = reduces stress and elevates mood
Hope theory	Mindful goal-setting
Psychological well-being theory	Positive emotions; purpose in life (meaningful life)
Self-determination theory	Self-development; social integration; human well-being is affected by various factors
Appreciative inquiry theory	Power of appreciation; heightens positive potential; power of building on existing strengths to bring about positive change
Positive psychology theory	Focus on positive; human strengths & optimal human functioning (acknowledges well-being at social, cognitive & emotional levels, i.e. that well-being is multi-faceted)
Organisational behaviour theory	Individuals, groups & structures impact on behaviour within organisations; organisational structure affects behaviour of individuals
Authentic happiness theory	Positive emotions; meaningful life
Flourishing theory	Optimal human functioning at various levels; living a purpose-filled life
Well-being theory	Positive emotions, engagement, relationships, meaningful life & accomplishment; increased flourishing of self and others; flow

Hence, my formulation of **integrated well-being theory** entails that optimal human flourishing requires living a well-balanced life, and addressing one's well-being at physical, emotional, social, psychological, financial, spiritual, environmental, intellectual and occupational level, and in an integrated manner. These dimensions of

well-being are discussed in detail in sections 2.4.1 to 2.4.9 below, whilst the motivation for the inclusion of each of these dimensions into my integrated employee well-being framework for SA public HEIs is discussed in detail in Chapter 6 (see 6.3.2.1 - 6.3.2.9). Each of these dimensions of well-being should be pursued, measured and defined independently (Seligman 2011:17)(see 2.3.8.3).

My synthesis and formulation of integrated well-being theory thus emphasises that optimal human flourishing (see 2.2.4; 2.3.8.2) entails thriving and not only surviving - in one's personal life, but also relationally and collectively (Prilleltensky *et al.* 2015). It is all about living a meaningful life by finding one's purpose in life (see 2.3.7.2), living for a higher purpose (see 2.4.5), and engaging in positive emotions, positive conversations, setting goals and accomplishing such (self-development; self-actualisation) (see 2.3.1; 2.3.2; 2.3.6; 2.3.8.1 - 2.3.8.3).

Furthermore, my synthesis of well-being theories and integrated well-being theory emphasises that one's well-being is affected by various factors, and at various levels, and that positive relationships and meaningful interactions with others are vital for one's well-being (see 2.3.8.1; 2.3.8.2; 2.3.8.3). The integrated well-being theory further acknowledges that structures, groups and individuals impact on behaviour within the workplace (see 2.3.7.2; 2.3.7.3), and that organisational structure, values and culture affect the behaviour and well-being of individuals and groups (see 3.2.). It acknowledges the power of appreciation (see 2.3.7.1); of being positive (see 2.3.7.1; 2.3.7.2); and the importance of being happy and fulfilled both in one's personal life, and at the workplace (see 2.5). My novel application of a qualitative methodology, guided by these well-being and positive psychology theories, and the formulation of my own synthesis of integrated well-being theory, contribute to the body of research and information on employee and organisational well-being.

In the next section, the most important building blocks (dimensions) of well-being that emerged from the literature review and document analysis conducted, are discussed.

2.4 DIMENSIONS/BUILDING BLOCKS OF WELL-BEING

From the comprehensive literature review conducted, and the different definitions and contextualisation of well-being that were provided, it is evident that the well-being of human beings depends on various factors, dimensions or building blocks, that have to address well-being at all levels of human existence, namely at the level of spirit, soul and body (Jing 2016); hence, the whole person needs to be nurtured for optimal performance, personal fulfilment and optimal well-being (Jing 2016:1). When one or more of these well-being dimensions are not addressed, an imbalance occurs, affecting a person's overall well-being (Norris 2010:Online).

By embracing these dimensions of well-being, we place ourselves in a better position to overcome the challenges that life offers. However, when one or more of these well-being dimensions are not addressed, the other dimensions have to balance out the compromised dimension(s) (Norris 2010:Online). These building blocks of well-being are illustrated in Figure 2.4 below:

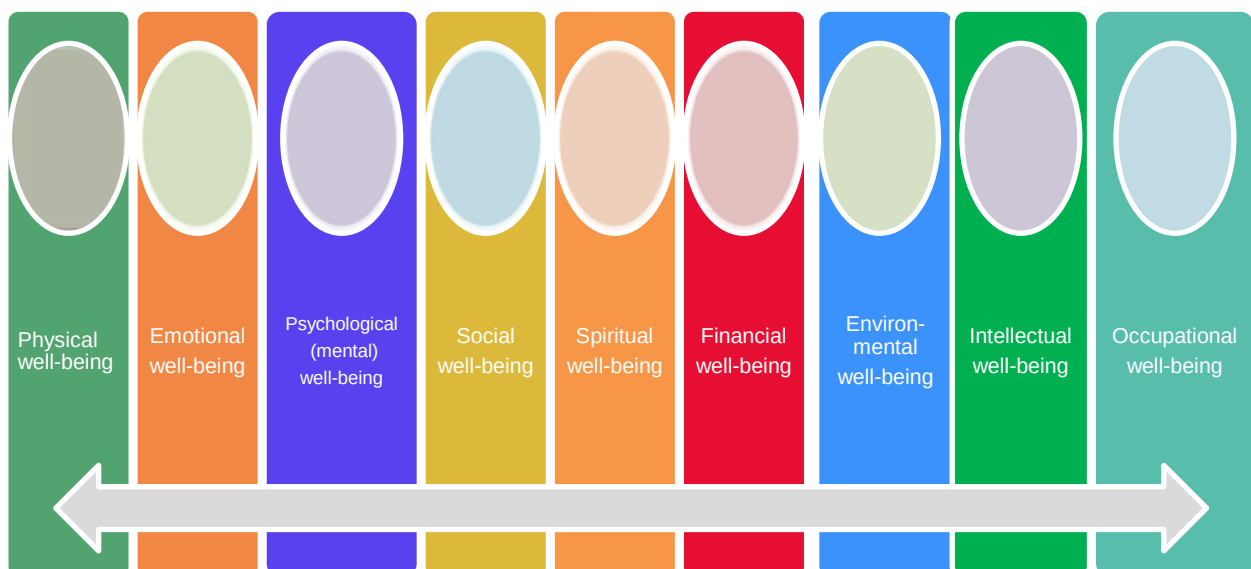


Figure 2.4 Building blocks (dimensions) of human well-being (adapted from Bonnet 2009; Burton 2010; Deci & Ryan 2008; Huppert & So 2013; Keyes 1998 & 2002; Keyes, Shmotkin & Ryff 2002; Main 2010; Nelson 2009; Ryff & Keyes (1995); Seligman 2011; Snyder & Lopez 2002; Sternberg 2009; Vitt 2009)

These dimensions of well-being, in some way or another, are related to the concept of *flourishing* (see 2.2.4). Furthermore, to establish holistic well-being, each of these building blocks for well-being should be pursued for their own sake, but they are also interwoven and interlinked, meaning that the absence of, or a decline in one's well-being in terms of any of these building blocks, could also influence one's well-being in another area (Seligman 2011)(see 2.3.8.3). These dimensions of well-being are discussed in sections 2.4.1 to 2.4.9 below.

2.4.1 Physical well-being

Physical well-being involves maintaining a healthy body through proper nutrition, exercise, getting sufficient sleep and developing good, healthy habits (Anderson & Shivakumar 2013). Exercise is vital for the management and prevention of chronic diseases (Anderson & Shivakumar 2013). Evidence exists that good physical health also impacts positively on one's emotional and mental well-being (Burton 2010; Ja Jeoung, Hong & Lee 2013). For example, exercise does not only strengthen our heart, lungs and muscles, but it releases endorphins in our bodies. Endorphins are powerful chemicals that energise us and lift our moods (Craft & Perna 2004). Mental, physical and emotional health thus impact on one another, and for this reason, mind-body integration is becoming more important in psychology (Craft & Perna 2004; MHF 2016).

Exercise as an intervention has shown tremendous promise in alleviating symptoms of depression (Anderson & Shivakumar 2013). Other factors influencing a person's physical well-being include, but are not limited to, diet and hydration; rest; fresh air; play (fun and games); meditation; refraining from smoking and drinking too much alcohol; and exposure to sunlight (Selhub 2015; WHF 2017; WHO 2012a). Eating healthy food fuels both the brain and the body. It has an effect on our memory, and also our longevity and health in years to come (Selhub 2015).

The WHO (2010a) recommends that adults should exercise between 75 and 150 minutes per week. In 2015, less than 66 % of men and approximately 54 % of women in the United Kingdom met these levels of physical activity (WHF 2017). Hence, people should be educated about the benefits of physical exercise for their well-being, so that more people can benefit from this. Regular exercise can reduce stress and have a significantly positive impact on anxiety and depression levels. It also helps one to sleep better, boosts your mood, and improves your memory (Anderson & Shivakumar 2013; Burton 2010).

Furthermore, regular physical activity assists one in maintaining a healthy body weight, and it helps to control high blood pressure and diabetes (Albright, Franz, Hornsby, Kriska & Marrero 2010). Hence, regular exercise or physical activity is important to stabilise glucose levels in the blood, and to improve insulin sensitivity (Albright *et al.* 2017). According to some studies (Anderson & Shivakumar 2013; Smits, Berry, Rosenfield, Powers, Behar & Otto 2008), regular exercise is an effective method of reducing anxiety and depression levels.

A brisk walk of only a few minutes can increase our energy levels, have a positive effect on our mood (Craft & Perna 2004), and increase our mental alertness (Burton 2010). In a study on the influence of exercise on depression and psychological well-being amongst students at a SA HEI, Tshikovhele (2015) asked students to rate their mood after having performed physical activity. Participants reported that they were less depressed, calmer, and felt more content after having performed physical activity. Their psychological well-being also increased after exercise (Tshikovhele 2015).

The importance of getting sufficient sleep is also emphasised in the literature as an important factor contributing to one's physical health. Six to eight hours of deep sleep is recommended per night, and it also combats major depressive disorder and mood disorders (Plante, Cook & Goldstein 2017).

Furthermore, it is important for optimal well-being to relax on a regular basis, and to live mindfully (Huppert & Johnson 2010). The English saying, “*all work and no play make Johnny a dull boy*”, holds truth, as engaging in relaxing, fun events has a profound effect on one’s emotional, social and physical well-being (*cf.* Huppert & Johnson 2010). Adults, therefore, should still play, which can be defined as having fun and participating in activities you enjoy (Oxford South African Concise Dictionary 2010:903).

Research by Anderson and Shivakumar (2013) reveals that physical activity impacts, amongst others, on the cognitive decline, mood, self-esteem and stress levels of older people; as well as on their levels of depression and anxiety. Physical activity thus is beneficial to our well-being at every level, and for years to come (MHF 2019).

2.4.2 Emotional well-being

The Mental Health Foundation (MHF 2016:5) defines emotional well-being as a positive sense of well-being that assists a person to meet the demands of everyday life, and to function effectively within society. Its definition further states that individuals who experience optimal levels of mental health are able to “*recover effectively from illness, change or misfortune*” (MHF 2016:7). This also links with the principle of “positive emotions” in Seligman’s PERMA well-being model (Seligman 2011:16). Hence, emotional well-being entails being in touch with and understanding the value of your emotions; being comfortable with your own feelings and thoughts; and to utilise your emotions to advance in life in a positive sense (Burton 2010:15; Seligman 2011).

However, being emotionally healthy does not imply that negative emotions are never experienced, or that we should pretend to have positive emotions when we do not feel positive (Helliwell, Layard & Sachs 2018). Emotional health is linked to our emotional awareness. An emotionally healthy person understands that other people and circumstances cannot consistently be blamed for the emotions we are experiencing. He/she has learned to accept him-/herself, and takes responsibility for his/her own life (Burton 2010).

Various factors may impact on our emotional well-being. For instance, illness, bereavement, a lack of finances and abuse - to name but a few - can affect our emotions and consequently our well-being (Barker, Martin & Zournazi 2008; Burton 2010). Positive psychology emphasises the importance of identifying one's strengths, and building on those strengths, rather than focusing on problems or weaknesses (Csikszentmihalyi 2014; Keyes 2002; Seligman 2011). The ability to master one's emotions brings joy and a feeling of fulfilment. It enables a person to cope better with stress and life's circumstances, and enables one to focus one's energy on important personal priorities (Barker *et al.* 2008; Heap 2012:Online; Jacobs & Winslow 2004). An emotionally balanced person is able to take positive action, and to make those changes that are required to help one to grow and to live an authentic, fulfilled life (Fredrickson 2003; Seligman 2011). As human beings, we need to connect with our emotions, as it will guide us into "*empowered alignment with purpose*" (Burton 2010:15).

The saying "prevention is better than cure" also applies to our emotional well-being. We should therefore participate in activities that we enjoy; take responsibility for our lives and relationships, as promoted by Seligman (2011), and also teach our children from an early age to do so. This will lay a foundation for them to learn the skills needed to handle emotional problems, and will increase their mental and emotional health by building emotional resilience (Lee, Cheung & Kwong 2012).

Resilience enables us to cope with the challenges of life, and to formulate meaning from life (Huppert, Baylis & Keverne 2004). For example, intrapersonal sources of resilience have assisted children with HIV/AIDS living in an institution to "*establish meaningfulness and comprehensibility in their lives on a continuum of engagement or disengagement*" (Mohangi, Ebersöhn & Eloff 2011:397). The WHO (2010a) emphasises that an emotionally healthy person understands that change is inevitable, and that one must adapt to change; master the skills of coping with stress and solve problems; have a positive self-concept; love yourself and others, and take care of others; master the skill of being a good listener; and be able to act independently. However, it does not mean that an emotionally healthy person does not experience any problems, as problems are an inevitable part of life. However, an emotionally healthy person has mastered the skill of adjusting to and solving problems. They help

not only themselves, but others, too, to get satisfaction out of life (see 2.4.5). This focus beyond the self is also aligned with the principle of “meaningful life” in Seligman’s well-being model (Seligman 2011:16).

The question can be asked: How does one contribute to, or build upon, your emotional well-being? The WHO (2010a) states that a good starting point is to evaluate your daily response or reactions to life, as this is a good indication of your emotional health. The MHF (2016) emphasises that we should learn to become good listeners, and be aware of the state of our own well-being at psychological, emotional and physical and social level. We should observe our own actions and reactions, and trace the causes or roots deep within us to find the reason(s) for our underlying unhappiness. It is no use to address the symptoms only – the root has to be found and dealt with. Ask yourself: Why do I feel like this, and behave in this manner? This demands an intense awareness of your thoughts, feelings and reactions (MHF 2016). According to Huppert *et al.* (2004), resilience helps us to cope with difficult life circumstances and traumatic events. In lay terms, it can be defined as the ability to bounce back. As individuals, we must learn how to deal with strong emotions, how to take action to deal with problems in our lives, and how to emerge from these experiences stronger than before they occurred (MHF 2016).

Lastly, I wish to reiterate my own view of the importance of emotional well-being as a necessary building block for our holistic well-being. It is important that we nurture ourselves, and spend time with family, friends and loved ones. To this effect, my view of emotional well-being links with Seligman’s focus on the importance of healthy “relationships” for our well-being, as demonstrated in his PERMA well-being model (Seligman 2011:11-24).

2.4.3 Psychological/mental well-being

Mental health is defined by the WHO (2001:1) as

“a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stress of life, can work productively and fruitfully, and is able to make a contribution to his or her community”.

Mental health can therefore be regarded as the basis for well-being and for an individual to function effectively within a community (WHO 2004:10). According to research conducted by REBA/PSHP (2018:38), common mental health conditions that impact our well-being include anxiety, depression and stress.

Ryff (1989) and Ryff and Keyes (1995) some decades ago already identified different dimensions of psychological well-being, namely acceptance of the self; having purpose in life; establishing positive relations with others; autonomy; personal growth; and environmental mastery (Ryff & Keyes 1995:720). Psychological well-being thus is an umbrella term for our emotional, social and mental well-being, and links with the well-being concepts of positive emotions; relationships; meaningful life, engagement and accomplishment, as advocated by Seligman (2011:16) (see 2.3.7.2; 2.3.8.3). Hinchcliffe and Woodward (2004) point out that psychological well-being functions for purposes of human flourishing. Keyes (2013:3) also points out that mental and physical health are now regarded as important forms of human capital. Various studies have shown a link between physical and mental illness, and the financial burden these illnesses place on society. Hence, health is now regarded by nations worldwide as a source of wealth (Keyes 2013:3).

Similar to the concept of well-being, there is no universal definition for mental well-being (Selhub 2007:4). However, it includes factors such as being able to function well individually or in relationships; cope with the challenges of life; feel good about ourselves; have control over and freedom in our lives; feel connected to our community and surroundings; having a sense of purpose; and feeling valued (*cf.* Cooperrider, Whitney & Stavros 2008; Diener & Biswas-Diener 2008; MHF 2016; Seligman 2011). According to Crough, Scarffe and Davies (2009:2), improved mental well-being within the higher education sector will have an impact on the recruitment and retention of students and employees, performance, institutional reputation, and on community relations. Selhub (2007:4) states that the body and mind should not be regarded as separately functioning units, but as one functioning entity. Whilst the mind and emotions influence the body, the body also influences the mind and emotions.

The WHO (2004:10) states that mental health depends on various interacting biological, social and psychological factors. Thus, the workplace, where people work together and interact daily, can also influence employees' mental health. Currently, mental health problems is a huge cause of absence due to illness in many organisations worldwide (MHF 2016:13; Baumann & Muijen, in WHO 2010b:2). Thus, employers would reap the benefits of investing in the prevention of mental health problems of their employees.

According to the MHF (2016:13), people suffering from mental illnesses such as anxiety, depression, schizophrenia and bipolar disease require multidisciplinary, long-term intervention strategies. Furthermore, it is important to understand that positive psychology deals with positive emotions, behaviours and attitudes, whilst clinical psychology deals with “*a person's mental health status, psychological trauma, and overall mental well-being*” (MHF 2016:1). These psychologies (positive psychology and clinical psychology), however, are connected in their attempt to improve overall mental well-being, mental disorders and stress management (MHF 2016:1).

Behavioural, social and mental health problems may also interact and affect a person's overall well-being and behaviour (WHO 2004:10). For instance, substance abuse is often more prevalent in conditions of high unemployment or low income (WHO 2004:10). Furthermore, no person is immune to grief, loss or failure. It is therefore impossible to be happy all the time. The benefits of physical exercise for leading a mentally healthier life, however, must not be underestimated (MHF 2019.)(see 2.4.1).

Self-confidence is also vital for improved mental well-being. Low self-confidence means that you might be comparing yourself negatively to others all the time, and that you criticise yourself (MHF 2019.). It is important to develop a healthy self-image by starting to value yourself; talking to someone; concentrating on the positive things about yourself; and engaging in fun activities (Carruthers & Hood 2007; MHF 2019.; Seligman 2011)(see 3.4.4). These things will help you to feel better and more positive about yourself. Effective public well-being and health interventions can also assist to enhance mental health (WHO 2004:10).

In my opinion, employers should do more to remove the stigma that is associated with mental ill-health. They should be more transparent in reporting on mental health-related matters, and as part of their health and well-being strategies, they should introduce dedicated mental health strategies within their organisations (REBA/Punter Southall Health & Protection 2018:5, 60-61).

The Stevenson/Farmer review advocates a framework for a set of actions that could be implemented by organisations to address mental well-being (Stevenson & Farmer 2017). These authors recommend that organisations should create mental health awareness, and encourage open conversations regarding mental well-being amongst employees; implement a mental health plan and offer support to employees with mental illnesses; do more to ensure that employees have a healthy work-life balance; provide sufficient opportunities for their development and growth; effectively manage their employees, and provide training to line managers and supervisors in this regard; and regularly monitor their employees' well-being, including their mental health (REBA/PSHP 2018:61; Stevenson & Farmer 2017:6).

Mental well-being is thus regarded as a vital dimension of holistic well-being.

2.4.4 Social well-being

Social well-being involves the ability to effectively and efficiently perform social roles, (including engaging in relations, interacting and communicating with others), and to operate successfully in a community (Babapour-Kheirridin, Toosi & Hekmati 2009, in Javadi-Pashaki & Darvishpour 2018:7). As indicated in section 2.2.3, the WHO regards health as a condition of holistic welfare involving mental, physical and social aspects of well-being (WHO 2006:1). Individuals who experience positive levels of social well-being cope better with challenges related to their social roles (*cf.* Fathi, Ajamnejad & Khakrangin 2013; Van den Berg, George, Du Plessis, Botha, Basson, De Villiers & Makola, in Wissing 2013).

Keyes' model of mental well-being views mental health as having three components, namely psychological, subjective and social well-being (Keyes 2002). Subjective well-being involves emotional aspects of well-being, whilst social and psychological well-being entails the ability to function optimally in life (Mohsen 2015). It is clear from the above that social well-being is widely recognised as one of the dimensions of well-being.

Having social ties improves both our cognitive and psychological well-being (Thoits 1992). Furthermore, people base assumptions around their own well-being on how they relate to others and their environment (Diener & Eunkook 2000). Thus, our quality of life is not only dependent on our levels of happiness and the amount of pleasure we experience, but also on how we believe others perceive us (Diener & Eunkook 2000). Keyes developed a model for social well-being consisting of the elements of social integration, coherence, acceptance, contribution and actualisation (Keyes 1998:121). Together, these elements provide an indication of whether an individual is able to overcome social challenges, and to function optimally in his/her social world (Keyes 1998:122). Lower social well-being levels were found to be the strongest predictors of negative mental health (Van Lente, Barry, Molcho, Morgan, Watson & Harrington 2012:3, in Javadi-Pashaki & Darvishpour 2018:2).

It is important for us to be in regular contact with other people, such as friends or family who believe in us, support us and care for us. As we spend most of our time at work, it is important to also surround us with such people at work. As a result of the many challenges of life, and the social aspects of human life, attention needs to be given to our social well-being. Thus, in my view, we should nurture our social well-being, as it is a vital dimension of our well-being.

2.4.5 Spiritual well-being

In the 1990s, spiritual well-being was described as having meaning and a clear purpose in life, and as having a relationship with and believing in an exalted power (*cf.* Hawks, Hull, Thalman and Richins 1995:371). The concept of meaningful life as an important factor in our well-being is emphasised by Seligman (2011:16). Thus, spiritual

well-being entails that we have to reach beyond the physical realm of our experiences and existence, and that we have to embrace transcended beliefs, meaning and purpose (Ingersoll 2003:291).

Kearney and Mount (2000:357) argue that spiritual issues lie at the centre of the crisis of terminal illness. According to them, spirituality entails the manner in which people gain an understanding of their lives in relation to its ultimate value and meaning (Kearney & Mount 2000:357). Spirituality may include cultural, philosophical and religious beliefs (*cf.* Scioli & Biller 2010). People endeavour to make sense of the world they live in. Thus, they search for the deeper meaning of their lives, and may utilise religion to obtain answers to these questions (McClain, Rosenfeld & Breitbart 2003). In recent years, literature related to spirituality and religion has increased extensively (Fry & Slocum 2008; Ironson, Kremer & Lucette 2016; Pargament 2013; Walsh 2009). Researchers have widely studied the effect of spiritual connectedness as a coping strategy in various contexts (Mohangi *et al.* 2011; Pargament 2013; Snyder & Lopez 2002), as well as the effect of religion, spirituality and spiritual leadership on psychological adaptation, mental health and well-being at work (Fry & Slocum 2008; Fulmer 2004). Spiritual connectedness was found to have a significant positive relation with a decrease in mental health indicators such as anxiety and depression, and an increase in tolerance levels, self-esteem and self-control (*cf.* Bergin 1991). A study conducted amongst children with HIV/AIDS living in an institution revealed that these children turned to intrapersonal resilience to “*establish meaningfulness and comprehensibility in their lives on a continuum of engagement or disengagement*” (Mohangi *et al.* 2011:397). Furthermore, these children engaged through socially responsible conduct and spiritual connectedness, whilst they disengaged through denial and detachment (Mohangi *et al.* 2011:397). It is thus evident that spiritual connectedness can serve as an important coping strategy within various contexts.

A study conducted in the 1990s amongst 223 university students confirmed that there is an important relationship between spiritual well-being and mental health (*cf.* Jafari, Dehshiri, Eskandari, Najafi & Heshmati 1990). Their study is proof to the fact that spiritual well-being positively affects mental health, and that it decreases mental disorders and factors influencing mental health (Jafari *et al.* 1990:1477). Furthermore,

empirical studies of various groups of people who have dealt with major life stressors (e.g. divorce, natural disasters and serious mental illness) show that spirituality and religion can assist people in coping with such circumstances (*cf.* Hill & Pargament 2003; Fehring, Miller & Shaw 1997; Kearney & Mount 2000; McClain *et al.* 2003; Pargament 1999; Pargament 2013; Snyder & Lopez 2002).

Spirituality has also been related to improved happiness, and lower rates of mortality and depression (*cf.* Holder, Coleman & Wallace 2008; Strawbridge, Cohen & Shema 1997; Fehring *et al.* 1997). Furthermore, spirituality remains constant in cases of life stressors and traumatic events such as war, bereavement and sickness, and people might turn to meditation and prayer during such times (*cf.* Snyder & Lopez 2002).

In times of crises, people draw on many spiritual and religious resources, which will help them to adjust better (Pargament 2013). These positive religious coping methods include support from a religious institution or person such as a pastoral counsellor, spiritual support, forgiveness, and reframing a stressful situation into a more benevolent meaning system (APA 2013:Online; Pargament 2013). Faith can be described as a strong belief about the truth, which is evoked by a sense of awe and a connection with a higher power which is regarded as a divine, holy, or as a transcendent force (*cf.* Nelson 1994). According to Walsh (2009), spiritual beliefs influence a person's outlook on the meaning of difficult experiences they have encountered (Walsh 2009). Kennedy and Kanthamani (1995) argue that religious commitment can influence an individual's experience of his/her life as meaningful.

Spirituality, in terms of positive psychology, is linked with positive attributes such as

“better physical and psychological well-being, lower anxiety, less depression, self-actualization, positive relationships with parents, higher rates of positive personality traits and acceptance” (Nelson 2009:359).

McClain *et al.* (2003) conducted a study on terminally-ill patients, and the effect of spiritual well-being on their end-of-life despair. Their study provided evidence that spiritual well-being offered some barrier against end-of-life despair in these patients

(McClain 2003:1603). They state that more research should be conducted to determine the type of spiritually based interventions that is needed to provide such patients with peace and a sense of meaning (McClain *et al.* 2003:1603). These researchers further emphasise that doctors and mental-health professionals are, to an increasing extent, recognising the importance of spirituality for psychological well-being (McClain *et al.* 2003:1603-1607). Furthermore, their research revealed that spiritual well-being acts as a buffer against depression, demoralisation, despair/hopelessness, anxiety and suicide; brings peace, hope, purpose and meaning in life; forces a person to deal with previously ignored issues; and helps people adjust to, or cope with illness and/or terminal illness (McClain *et al.* 2003:1603-1607).

Spiritual coping mechanisms include meditation, spiritual purification and spiritual reframing, and the establishment of boundaries in an attempt to preserve the sacred (Snyder & Lopez 2002). Today, psychospiritual intervention is applied by both positive and clinical psychologists, who realise the potential of spirituality to increase well-being (Snyder & Lopez 2002). Overall, spirituality is a lifelong process that includes the search for, conservation and redefining of what people regard as sacred, in an extremely individualised manner (Wikipedia 2014:Online). More research on the effects of spirituality on people's well-being is therefore required. However, what is evident from existing research, is that spirituality, or spiritual connectedness, amongst others, can assist individuals to cope with life, and can act as a buffer against mental disorders, depression, hopelessness, anxiety and even suicide (Holder *et al.* 2008; Kennedy & Kanthamani 1995; McClain *et al.* 2003; Snyder & Lopez 2002).

Spirituality in the workplace is a dynamic and growing field (Case & Gosling 2010). According to Adams and Csiernik (2002:35-40), spirituality in the workplace can assist employees to overcome challenges related to the workplace, such as stress, overload and change. For purposes of this study, and from my own life experience in terms of spirituality, I am convinced by the evidence found in the above-mentioned wide range of literature that it is important to address and increase the spiritual well-being of employees of SA public HEIs, as it is a vital requirement for establishing a flourishing employee component.

2.4.6 Financial well-being

Whilst well-being traditionally involved a focus on the improvement of our mental, physical and emotional state, it has not always been understood how dependent these facets of well-being are on financial well-being (De Chavez, Backett-Milburn, Parry & Platt 2005). Money is an important source of empowerment. It has the potential to maximise both our emotional and physical health in that it reduces our financial stress levels (*cf.* Main 2010; Gallup n.d.; Taylor *et al.* 2009).

Hence, for both individuals and societies to flourish, an inclusive well-being strategy would acknowledge money as an important factor towards improved well-being. Well-being programmes should not only provide individuals with easily understandable financial information, but also should teach them how to gain insights in and an understanding of their financial habits (both good and bad), as well as their attitude towards money (Taylor *et al.* 2009; Vitt 2009). This would ensure that people are equipped better to manage their money effectively and wisely, and by doing so, achieve financial wellness that would take them beyond retirement age (Taylor *et al.* 2009; Vitt 2009).

Financial stress impacts negatively on our physical and emotional health, which in turn leads to increased healthcare costs, reduced productivity, and even more financial stress – thus creating a vicious cycle (*cf.* Main 2010; PwC 2014). Thus, the ability, or inability to work with finances can profoundly affect the overall well-being of a person (REBA/PSHP 2018:36). Being anxious about finances results in a decline in mental, physical and social well-being, which, in return, has a negative effect on attendance and performance at work (REBA/PSHP 2018:36). If an employee is in debt, or experiencing financial difficulty, he/she might find it difficult to focus on his/her work, might miss targets, or be more prone to making mistakes (REBA/PSHP 2018:36).

SA public HEIs thus should incorporate aspects related to employees' financial well-being such as proper budget management; improving their financial capability, debt advice/counselling, advice on savings/investments; and retirement planning in their employee well-being programmes.

2.4.7 Environmental well-being

It is evident from the literature that our personal environment impacts on our well-being (Huelat 2007; Sternberg 2009). Our personal environment includes our physical environment (e.g. the street we live in, building we work in); our social environment (the space we share with others, e.g. a home or office space); and the natural environment (e.g. the space we inhabit, water we drink, and air that we breathe) (Hyder 1998; Sternberg 2009). It is therefore important for our environmental well-being to surround ourselves with a healthy environment where we work and live, to take care of our environment, and to conserve our natural resources (Huelat 2007). We gain personal fulfilment from our surroundings if they are pleasing and healthy (Norris 2010:Online).

Studies (Edwards & Torcellini 2002; Marcus & Barnes 1999; Selhub & Logan 2012; Sternberg 2009) prove that a healthy and pleasing work environment (such as plants in the office, or a treasured photograph on the wall) not only improves our mood, but positively affects our immune system and physical health. Furthermore, noise levels can have a negative impact on employees' behaviour and performance (Clark & Sörqvist 2012:292-296). Amongst others, research reveals that rooms with bright natural and artificial light can improve depression and anxiety (Edwards & Torcellini 2002; Küller & Küller 2001). Our personal environment also impacts on our behaviour and motivation to act (Sternberg 2009). For example, a messy office space may invite us to carry out our duties in a careless manner, whereas a neat working environment will inspire us to deliver our best.

Our direct environment also facilitates or discourages interactions with colleagues, family and others (Sternberg 2009). An office space with comfortable chairs, for example, will encourage people to sit down and interact, whilst a harsh, uninviting office space might create the impression that others are not welcome. Our environment also impacts on our stress levels, and can cause or reduce stress (Selhub 2007; Selhub & Logan 2012; Sternberg 2009). This, in turn, impacts on our emotional and physical health, including our longevity (Selhub 2007).

In relation to this study, and as proposed by Huelat (2007) and Sternberg (2009) in their studies on how the workplace impacts on employees, it is vital that SA public

HEIs create health-promoting working spaces, as this will have a direct impact on their overall well-being.

2.4.8 Intellectual well-being

Intellectual well-being involves our ability to actively participate in scholastic, cultural, creative and community activities, as well as in creative and mentally-stimulating activities. We should be able to engage and interact with the world we are living in, and to connect with others at an intellectual level (Norris 2010:Online).

It is important to gain and maintain intellectual well-being, as it allows us to live successful and stimulating lives (Norris 2010:Online). Intellectual well-being is just as important as our physical health, and it involves keeping our minds informed, engaged and flexible (Melnyk & Neale 2018:24).

Stress and depression can hinder the growth of new neurons in our brains, whilst physical and mental exercise support the growth thereof (Barry 2011:Online; Hicklin 2016:Online; Melnyk & Neale 2018:25). Thus, a combination of relaxing mindfulness and intellectual growth can positively impact on the health of our brains, and can also prevent mental decline that comes as a result of age (Leaf 2011; 2018). Intellectual wellness also improves the brain's physical structure (Leaf 2011; Melnyk & Neale 2018:25). This includes the abilities of processing information, continuous learning, problem solving and creativity. Thus, intellectual well-being describes our capacity to connect with others on a rational or intellectual level (Norris 2010:Online). Our intellectual well-being is improved through creativity, curiosity and lifelong learning (Melnyk & Neale 2018:25).

Amongst others, we can improve our intellectual well-being through continued learning and reading widely on various subject fields; practising mindfulness by focusing on the present moment; stepping out of our normal routine; improving our studying and learning skills by learning new things about how our brain processes information; learning a foreign language; engaging in leisure activities such as playing games; playing a musical instrument; writing down our thoughts in a journal; and doing

crossword or sudoku puzzles (Barry 2011:Online; Hicklin 2016:Online). This links with Csikszentmihalyi's concept of creating *flow*, or becoming engaged in an activity that totally absorbs us (Csikszentmihalyi 2014). Studies show that, whilst stress and depression can hinder the growth of new neurons in our brains, both physical and mental exercise support the growth thereof (Melnik & Neale 2018). Existing neurons form new connections when we offer new challenges to our brain (*cf.* Barry 2011:Online; Hicklin 2016:Online; Melnik & Neale 2018:25). According to Leaf (2018), we can boost the health of our brains through intellectual growth and relaxing mindfulness.

Intellectual well-being is therefore regarded as a vital component for optimal human flourishing.

2.4.9 Occupational well-being

Warr (1994) studied well-being in the context of the workplace. He described well-being as a job-specific element, which helps us to better understand certain work characteristics that impact on employees' well-being (*cf.* Warr 1987; 1994). He distinguishes between different dimensions of workplace well-being: affective well-being, aspiration, competence, autonomy, and integrated functioning (a secondary dimension that reflects on the person as a whole, and includes the other mentioned dimensions (Warr 1994:84-97). As indicated in section 2.2.4, it is vital to address employees' - including employees of SA public HEIs' - well-being holistically, as optimal well-being can only be established when all the dimensions of a person's well-being are attended to, as discussed under 2.4.1 to 2.4.8 above, and below.

Affective well-being consists of factors relating to affective experience such as boredom versus enthusiasm, anxiety versus comfort, tiredness versus vigour, depression versus pleasure, and anger versus placidity (Daniels 2000, in Van Horn, Taris, Schaufeli & Schreurs 2004:365). Many instruments for measuring occupational well-being, such as fatigue, tension at work, organisational commitment and job satisfaction are related mainly to affective well-being (Daniels 2000, in Van Horn *et al.* 2004:365).

Research in the area of happiness has exploded over the past 20 years, creating a wealth of empirical knowledge about what makes people happy. One of the widely accepted findings is that work contributes substantially to our well-being and happiness (Rodríguez-Muñoz & Sanz-Vergel 2013:95) (see 2.5; 3.3). The rise of positive psychology also brought about an increased interest in the positive organisational life factors, such as engagement, job satisfaction, well-being and positive experiences at work. Occupational well-being therefore involves using our skills, gifts and talents to enrich our lives, gain purpose, and be happy (Ramos 2017:1). We use our gifts, skills and talents to perform rewarding, meaningful work (Chobdee 2014). When we enjoy our work, and we are also more engaged (Rodríguez-Muñoz & Sanz-Vergel 2013:95-97; Torrente, Salanova & Llorens 2013). Finally, when we enjoy our work, we have a greater sense of meaning and purpose (see 2.3.8.3). This concept of meaningful work shows resemblance with Seligman's emphasis of meaningful life (including meaningful work) as a vital component of human flourishing (see 2.3.8.3). The development of occupational satisfaction is linked to our attitudes about our work (Mansveld 2017:Online). When we are satisfied in our work environment, a positive attitude is displayed, and we experience satisfaction from performing our work, and we are also more engaged in our work – including at team level (Rodríguez-Muñoz & Sanz-Vergel 2013:95-97; Torrente *et al.* 2013). As such, occupational well-being is regarded as a vital dimension of holistic well-being.

People who enjoy their work experience their lives as purposeful, and having meaning (cf. Torrente *et al.* 2013). Thus, occupational well-being entails the successful integration of a commitment to one's occupation in a rewarding and satisfying lifestyle (Mansveld 2017:Online). Hence, it is important to explore various career options, and to choose a career that suits one's personality type, as well as one's interests and talents (see 3.2.21). Furthermore, one should remain open to change and to learn new skills (Mansveld 2017:Online).

Occupational well-being also entails achieving a balance between work and leisure time, addressing stress factors at work, and building healthy relations with co-workers (McCubbin, McCubbin, Zhang & Kehl 2012)(see 3.2.2; 3.2.15 - 3.2.16). It is closely

linked to our search for our purpose in life (our calling). The occupational dimension of wellness involves gaining personal satisfaction and enrichment in our lives through work. Our career choices, levels of job satisfaction, career ambitions and performance at work are all important components of our occupational well-being (McCubbin *et al.* 2012).

Occupational well-being also implies feeling safe at the workplace, and experiencing a climate conducive to work. One way to improve our occupational well-being is to find something that we like about our careers, and to turn our attention to that. By focusing on small positive things, we combat stress. It is my view that employers that are serious about improving their employees' well-being, should create an environment where employees can have a balance between work and leisure; where they enjoy doing their work; have supportive relations with colleagues; have manageable workloads; and perform well in doing their work.

2.4.10 Synthesis of dimensions of well-being

From the literature review and the research conducted, it is clear that the dimensions or building blocks of well-being are physical, emotional, psychological, social, spiritual, financial, environmental, intellectual and occupational well-being (see 2.4.1 - 2.4.9), and that all of these dimensions impact on a person's well-being. None of these studies individually pointed out the importance of the inclusion of all of these dimensions of well-being towards establishing holistic well-being. Their identification was the result of an extensive literature review and document analysis conducted, and harvesting these dimensions from a variety of different studies conducted on the topic of the dimensions of well-being and holistic well-being. Hence, their identification as vital building blocks of establishing holistic well-being, and their inclusion in my integrated employee well-being framework for SA public HEIs make an important contribution in the field of holistic well-being or human flourishing.

Furthermore, it is clear that fragmented approaches to employee well-being (including employee well-being programmes that are not offered in an integrated manner, and

which do not include all the dimensions of well-being), will deliver fragmented results. The overall effectiveness of workplace and individual well-being are limited when boundaries are placed around the different dimensions or aspects of well-being, creating 'silos' (Hymel, Loeppke, Baase, Burton, Hartenbaum, Hudson, McLellan, Mueller, Roberts, Yarborough, Konicki & Larson 2012:695). However, when organisations address their employees' well-being in a holistic and integrated manner, synergy is created in terms of the improvement of both employees' and their organisations' well-being. Hence, when developing a framework for addressing employees' well-being, both work-related factors and non-occupational factors should be considered. Therefore, in designing my integrated employee well-being framework for SA public HEIs, I shall pay close attention to all of these factors.

The chapter is concluded by the synthesis and figure below.

2.5 SYNTHESIS

The aim of this chapter was to answer the first secondary research question, namely: *What is well-being, and how has the concept of and theories on well-being developed over the past few decades?* To answer this question, the concept of well-being, and what it entails, were investigated. The theories underpinning well-being and positive psychology were studied, and a synthesis of these, including my own notion of integrated well-being theory, was provided.

It was determined that well-being is multi-faceted, and nine important dimensions of well-being were identified from the literature (see 2.4.1 - 2.4.9), which were built into my integrated employee well-being framework for SA public HEIs (see Annexure T; 6.3.2.1 - 6.3.2.9). Furthermore, it was determined that, since well-being is interwoven and multi-dimensional, an integrated approach to employees' well-being is required (see 2.4). This was emphasised and applied in the integrated employee framework for SA public HEIs that I developed (see 7.2.4.1; Annexure T).

It was distinguished that, recently, the focus has shifted from studying the effect of negative emotions on people's well-being, to studying the positive effects that positive

emotions bring about pertaining to people's well-being. Hence, positive psychology theory, well-being theory and flourishing theory are the foundation theories for this study (see 1.6.3; 2.3.7.2; 2.3.8.2 - 2.3.8.3), and I applied the principles of these theories in my integrated employee well-being framework for SA public HEIs (see 2.3.9; 7.2.4.1).

Figure 2.5 below demonstrates the interrelated themes that were addressed in this chapter, as well as their relation to one another.

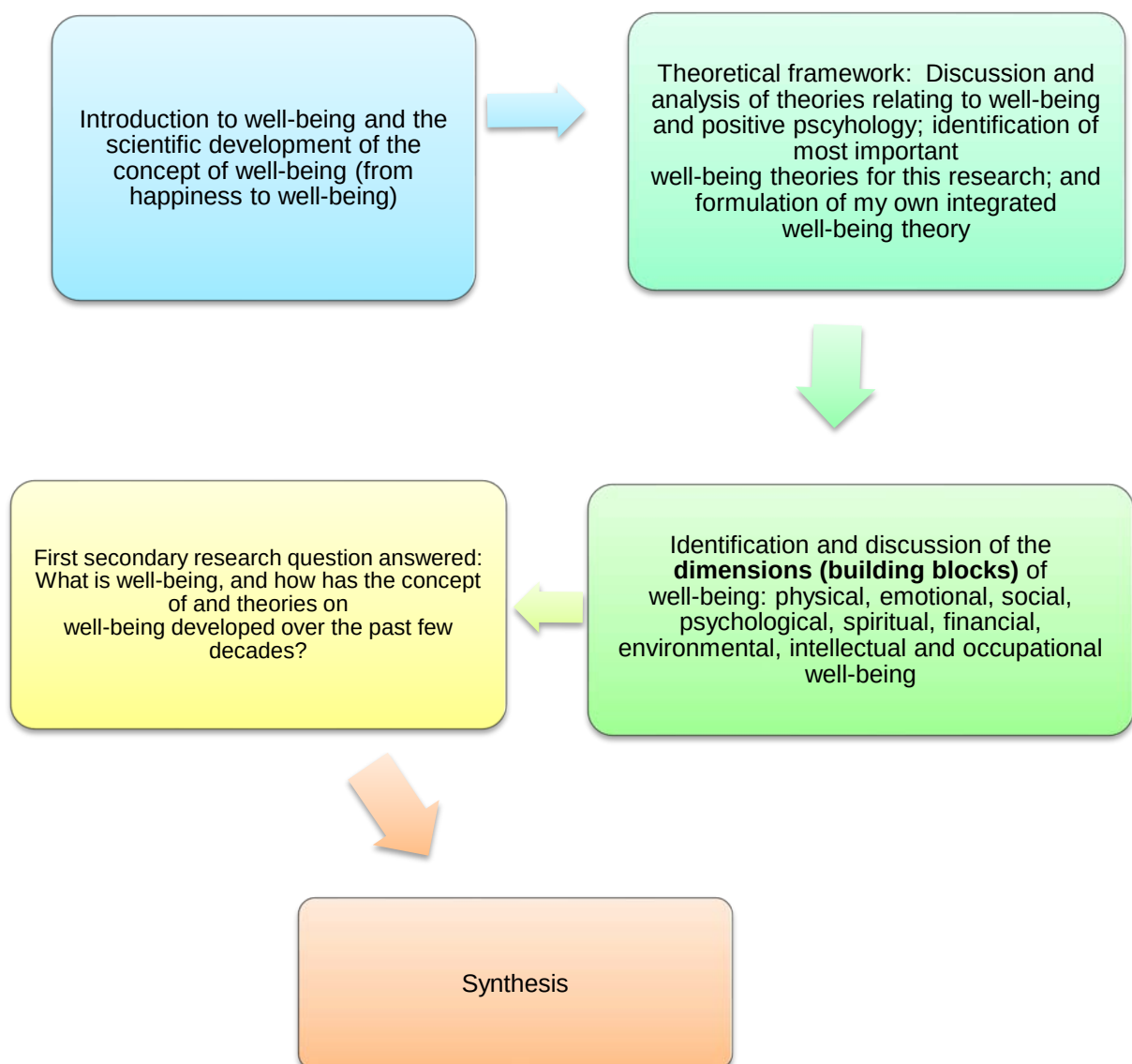


Figure 2.5: Synthesis of themes addressed in Chapter 2

The next chapter provides an overview, discussion and analysis of the global perspectives on well-being and integrated employee well-being programmes.

GLOBAL PERSPECTIVES ON WORKPLACE WELL-BEING AND INTEGRATED WELL-BEING PROGRAMMES

3.1 INTRODUCTION

In Chapter 2 the concept of well-being was contextualised and discussed. A detailed description was given of the literature perspectives and theories on employee well-being, as well as the building blocks of human well-being.

In this chapter, the second secondary research question is answered namely:

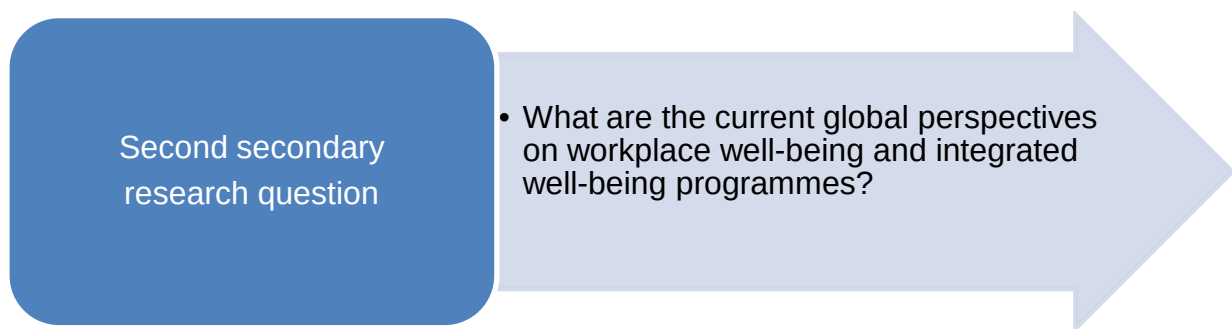


Figure 3.1 Second secondary research question, addressed in this chapter

Thus, the literature perspectives on the extent, range and nature of research evidence on workplace well-being, and an overview of the best practice globally in terms of integrated well-being programmes offered by various organisations, including higher education institutions, are discussed in this chapter. Towards this purpose, an extensive literature review was conducted applying the following criteria: (i) a detailed description of the type of well-being programme(s) should be included in the study; (ii) the publication date should be between 1998 and 2018, that is, the last 20 years (inclusive); and (iii) a systematic review and evaluation of the available evidence should be available. To retrieve sufficient data and information for purposes of conducting a conceptual analysis, several online databases (including, but not limited to Sabinet, SAGE journals, EBSCOhost, Emerald, JSTOR, Proquest Dissertations

and Theses, SA ePublications, Taylor and Francis, and Google Scholar etc.) were used to search for existing literature. In these databases, several keywords were used to search for information. The search entailed a process of identification of relevant sources using the following sets of keywords:

- (i) well-being/wellbeing;
- (ii) workplace well-being programmes/models/frameworks/interventions/ guidelines/ strategies/actions/efforts;
- (iii) building blocks/components/facets/dimensions of workplace well-being programmes/models/frameworks/interventions/guidelines/strategies/actions/ efforts; and
- (iv) integrated well-being programmes/models/frameworks/interventions/ guidelines/strategies/actions/efforts.

Documents discussing workplace well-being programmes aimed at improving employees' well-being at various levels were studied and selected according to abstract and title. Classification occurred according to the well-being programme type, the building blocks of well-being, and their integration, and the perceived effectiveness of each well-being programme. This comprehensive literature review ensured that a wide variety of well-being programmes designed and applied worldwide during the period 1998 to 2018 could be studied in detail with the aim of answering the second secondary research question (see Figure 3.1).

Figure 3.2 below illustrates the central themes that will be addressed in Chapter 3.

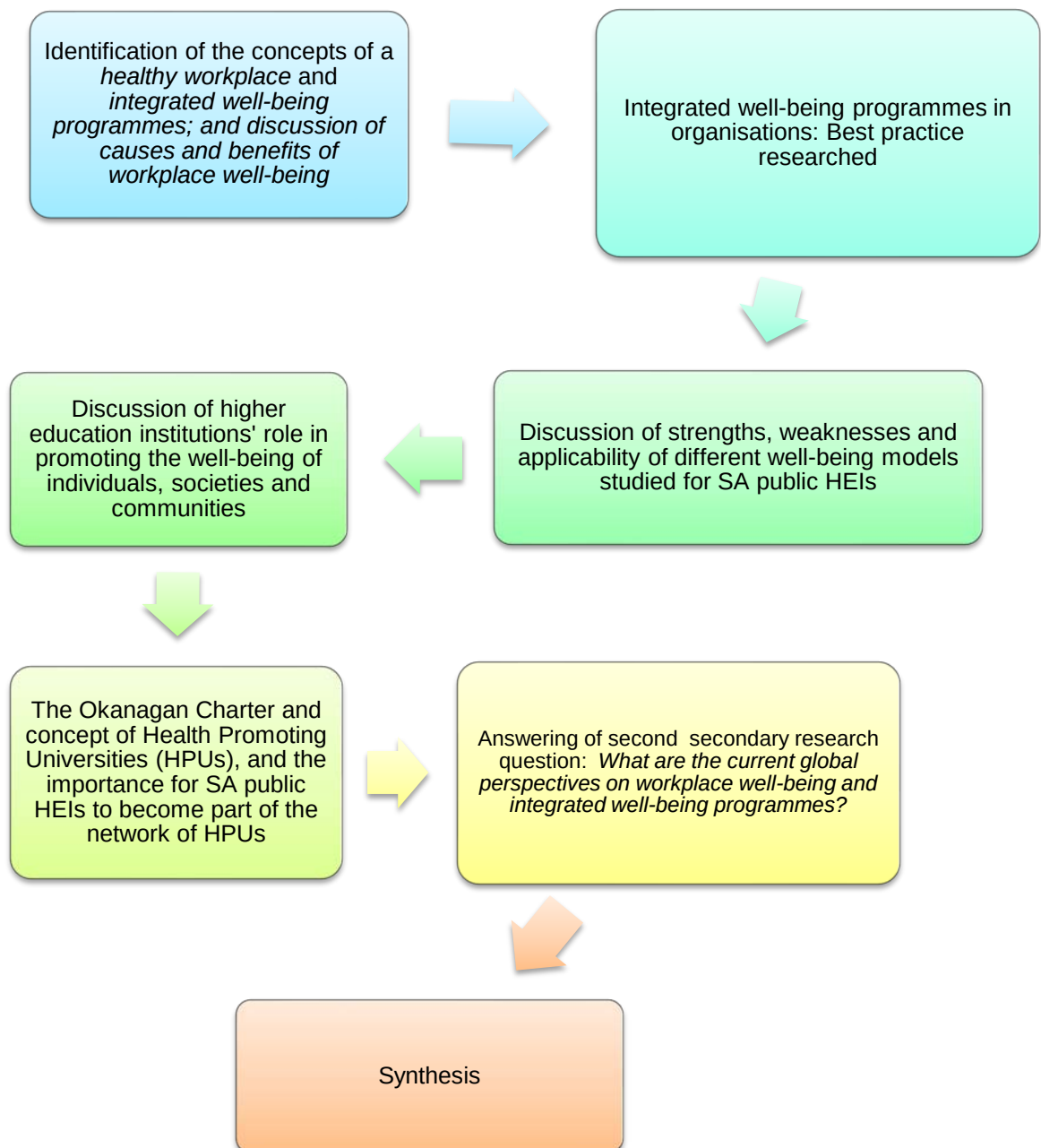


Figure 3.2 Central themes addressed in Chapter 3

Now that the objective of this chapter is clear, the concepts of a *healthy workplace* and *integrated employee well-being programmes* are defined.

3.1.1 Defining a healthy workplace

The phrase “*healthy workplace*” as a topic seemingly is quite significant, as it creates approximately two million results when searched on the internet (Burton 2010). Clearly, it is a popular and relevant topic in today’s society. Furthermore, the initial focus of a healthy workplace now includes factors beyond physical health such as psychosocial and lifestyle factors, and it is also linked to society and the communities we form a part of (Burton 2010:15; Seligman 2011) (see 3.3).

A healthy workplace is a place where people are able to flourish (Redelinguys *et al.* 2019b), and where they can work together towards the accomplishment of a common vision for the well-being of workers and their communities (Burton 2010:15). It ensures that employees work in “*physical, psychological, social and organisational conditions that protect and promote health and safety*” (Burton 2010:15), and empowers employees and managers to take control of and improve their own health; and to become “*more energetic, positive and contented*” (Burton 2010:15). The World Health Organization performed a global literature review on healthy workplaces, including practices and policies aimed at improving employees’ health. Based on their findings, they formulated a concept of a healthy workplace:

“A healthy workplace is one in which workers and managers collaborate to use a continual improvement process to protect and promote the health, safety and well-being of all workers and the sustainability of the workplace by considering the following, based on identified needs: health and safety concerns in the physical work environment; health, safety and well-being concerns in the psychosocial work environment including organization of work and workplace culture; personal health resources in the workplace; and ways of participating in the community to improve the health of workers, their families and other members of the community” (Burton 2010:6).

This definition makes it clear that the concept of occupational health has been extended beyond the physical workplace to include personal health practices and psychosocial factors.

Organisational culture is another determining factor that influences employees' well-being (Findler, Wind & Barak 2007; Lok & Crawford 2004). Workplace flourishing and a person's ability to perform at work are influenced by, amongst others, person-environment fit, and non-alignment in this regard might impact on a person's intention to leave (ITL) the organisation (Redelinghuys *et al.* 2019b).

Goetzel and Ozminkowski (2006) emphasise that workplace health programmes should be based on the principles of behaviour theory. If that is the case, and they are *“implemented effectively ensuing evidence-based principles, and measured accurately, they are most likely to improve workers' health and performance. These results can contribute to the organisation's competitiveness and potentially enhance the organisation's standing in the community. However, we need to learn more about the mechanisms and processes that facilitate behaviour change among workers, as well as those that are ineffective”* (Goetzel & Ozminkowski 2006:310).

Hence, in my search for integrated well-being programmes applied worldwide, I also studied the causes of employees' well-being; whether well-being programmes are indeed grounded in behaviour theory; and whether their effectiveness is measured accurately and regularly.

From the early 1970s researchers began to realise the influence of organisational values on employees' well-being. Rokeach (1973) defined organisational values as a belief that certain behaviour is preferred above an opposite or contrary type of behaviour. As such, organisational values drive organisational development and growth. More recent studies indicate that successful organisations live up to their values, and that organisational values should also underpin an organisation's vision (Brink 2011; Ely & Thomas 2001; Shain & Kramer 2004).

A vast number of scholarly articles and publications emphasise the concept of diversity - also known as inclusiveness (including ethnicity, gender and disability, amongst others) - as a way of improving employees' well-being (Findler *et al.* 2007; Sang, Joy, Kinge & Sayce 2012; WHO 2010a). What most articles and publications have in

common, is that a healthy workplace should provide an accessible, accepting and open environment where people with different skills, abilities and demographics, and from different backgrounds can work together in harmony (Burton 2010:15).

When employees' well-being is undermined, it impacts negatively on various organisational performance factors, including, but not limited to:

- reduced organisational commitment, performance and productivity (Field & Buitendach 2011; Geldenhuys, Laba & Venter 2014; Jackson, Rothmann & Van de Vijver 2006; Keyes 2002; Westover *et al.* 2010) (see 2.4.9; 3.2.23);
- absenteeism (Jing 2016; Lyubomirsky, King & Diener 2005) and/or presenteeism (i.e. being present at work, but not being productive) (Jing 2016) (see 3.2.2; 3.2.4; 3.2.14);
- increased sickness, including, amongst others, hypertension, diabetes and cardiovascular conditions (Rajgopal 2010) (see 2.4.1);
- low morale (Bezuidenhout & Cilliers 2010; Opie & Henn 2013) (see 3.3);
- poor customer service (Bevan 2010) (see 3.2.8);
- burnout (Jackson *et al.* 2006; Schaufeli 2003) (see 3.2.12; 3.2.15);
- increased employee turnover (Bothma & Roodt 2012; Mendes & Stander 2011; Opie and Henn 2013; Redelinghuys *et al.* 2019b) (see 3.2.15);
- reduced job satisfaction (Buys & Rothmann 2010; Kinicki & Kreitner 2007) (see 2.3.7.3; 3.2.3);
- conflict with both subordinates and supervisors (WHO 2010a) (see 3.2.11; 3.2.22); and
- grievance and disciplinary incidents (Young and Chapman 2017) (see 3.3).

Organisations therefore should do more to improve the well-being of their employees. The benefits of optimal well-being at work are discussed in detail in this chapter (see 3.3). However, it is important to emphasise that well-being initiatives alone will not create a workplace where well-being is truly embedded in the organisation's operations. Such initiatives should be underpinned by an organisational culture, leadership and management approach that are aligned with support employee

well-being (Carleton University Workplace Mental Health and Well-Being Strategy 2015 - 2018:10; CIPD 2016) (see 3.2.23).

3.2 CAUSES OF AND FACTORS INFLUENCING WELL-BEING AT WORK

The factors influencing the well-being of employees are vast. When conducting the literature review for this study, I had e-mail, telephonic and personal discussions with various specialists in the fields of employee well-being, higher education, industrial and educational psychology to assist me in identifying the relevant concepts, theories and factors influencing the well-being of employees and even organisations, and the main authors who have researched employee well-being (Crous 2016 & 2018, *pers. comm.*; Van der Walt 2018, *pers. comm.*; Makola 2018, *pers. comm.*; Kitching 2019 *pers. comm.*). The guidance provided by these experts was very helpful and assisted me in conducting a holistic literature review on employee and organisational well-being, existing well-being models and theories, the factors that influence employees' well-being at work (WAW); and in the development of an integrated employee well-being framework for SA public HEIs as an outcome of this study.

The factors influencing well-being at work often are interlinked with one another. This confirms my view of the necessity of addressing all of the dimensions of a person's well-being in an integrated manner, as they are interlinked (see 2.2; 2.4.1 - 2.4.9). For instance, an element such as job security is often influenced by factors such as restructuring (Probst 2003), insufficient resources (Demerouti & Bakker 2011), and a lack of trust in one's leader (Bothma & Roodt 2012). This is evidence to the fact that organisations, including SA HEIs, should apply an integrated approach to employees' well-being if they want to make a positive contribution to their employees' well-being. A piecemeal approach to employees' and organisational well-being will deliver fragmented results, whilst a holistic, integrated approach will create an effect of synergy in terms of improving organisational and employee well-being - far beyond the efforts that have been applied and the resources made available by the organisation for this purpose.

The causes of well-being at work are so vast that an entire thesis can be written on each of these. However, that was not the primary aim of this research. What is, however, important in my opinion, is that organisations need to understand the value of their employees. Furthermore, they need to protect, value and improve the well-being and health of their employees, as these factors are critical to optimising the results and strategic outcomes of organisations. This is also confirmed by the Mental Health Foundation (MHF 2016:2). It requires an integrated approach, and a constant commitment across the entire organisation (MHF 2016:2). Within SA public HEIs, this entails a commitment from Council (as the governing bodies of SA public HEIs), managers at all levels, and each employee.

Shain and Kramer (2004:643-648) are of the view that health and productivity in the workplace are affected by (i) employees and what they bring with them to the workplace (e.g. their values, beliefs, culture, personal resources and attitudes), and (ii) the workplace itself (e.g. the organisation, and how it impacts on the work culture and institutional climate). This alludes to the fact that both employees and the organisations they work for should take responsibility for their well-being. As such, personal resources and health practices impact on employees' health, their productivity, and the organisation; whilst the organisation, in turn, impacts on the productivity and health of employees (Shain & Kramer 2004:643). A more recent study by Opie and Henn (2013) asserts that social factors such as family conflict and a lack of sufficient support, amongst others, may influence the engagement levels of employees, as well as an organisation's employee turnover levels (Opie & Henn 2013; Tammelin 2018).

Various factors impacting on employees' well-being in the workplace were discovered during the literature review conducted, which further point to the inter-relatedness of these factors, and why an integrated approach to employee well-being is required. Some of the factors discovered that impact on employees' well-being will now be discussed. The list is by no means complete, as there are so many factors impacting on employees' well-being. However, the factors discussed below were recurring in various articles, books, papers and more that I consulted when conducting this research.

3.2.1 Work environment

A supportive, positive work environment is vital for employees' well-being (Rothmann & Jordaan 2006; Van Straaten *et al.* 2016). Employee well-being, however, also is in the best interest of organisations and their communities (Judge, Thoresen, Bono & Patton 2001). The workplace is where an individual spends most of his/her life (between a quarter to a third thereof), and hence it affects the well-being of both the individual and his/her community (Harter, Schmidt & Keyes 2002:3).

A study by Choi (2007) revealed that an innovative organisational climate, combined with a clear organisational vision, can predict organisational citizenship behaviour. Furthermore, research conducted by Raziq and Maulabakhsh (2015) revealed that, in order to increase employees' efficiency, effectiveness, productivity and commitment, organisations must value their employees, and satisfy their needs by providing good working conditions. This was also confirmed by my own research conducted in 2014 amongst support services employees of a SA public HEI (Van Straaten 2014), and a research article published in an accredited journal on the topic of the power of appreciation to improve support services employees of SA public HEIs' well-being (Van Straaten *et al.* 2016). It thus is evident that a supportive, positive work environment contributes positively to the well-being of organisations, their employees and communities.

For individuals to flourish, the work environment should reflect a healthy balance between the organisation's, and the individual's environmental characteristics (Redelinghuys *et al.* 2019b). Since well-being is multidimensional, organisations should do more to address their employees well-being at all levels (Redelinghuys *et al.* 2019) (see 2.4.1 - 2.4.9).

3.2.2 Stress

The Health and Safety Executive (HSE) defines workplace stress as the “*adverse reaction people have to excessive pressures or other types of demand placed on them at work*” (HSE 2018:Online, in Young & Chapman 2010:Online). Stress occurs when employees are unable to cope with work demands or the work environment, such as high workloads and a lack of resources (Bakker & Demerouti 2007; Rothmann & Jordaan 2006). Stress is caused when people are unable to cope with change (Schneiderman, Ironson & Siegel 2005); when they have few opportunities for promotion, training or personal development (Rothmann & Jordaan 2010); when there is a lack of acknowledgement or appreciation from colleagues, peers or supervisors (Cooperrider, Whitney & Stavros 2008, Gates 2012; Reed 2007; Watkins 2010; Whitney & Trosten-Bloom 2010); and a lack of respect (Bickford 2005). Workplace bullying (Hershcovis, Reich & Niven 2015); ineffective supervisors/management (McGilton, McGillis-Hall, Wodchis & Petroz 2007); little or no involvement in decisions (Steger 2009; Van Straaten 2014); and when employees have a fear of losing their jobs (Buys & Rothmann 2010; Schaufeli & Bakker 2004; Stander & Rothmann 2010; WHO 2012b) are other causes of stress, to name but a few. Furthermore, occupational stress is linked to physical and psychological ill health (Jackson *et al.* 2006).

Employers should therefore invest in human capital, and to do everything in its power to reduce the stress levels of employees. The employer will benefit from such investments in their employees' well-being, as employees that are looked after well remain productive, focused and energised, and, despite setbacks experienced, they develop the ability to increase their resilience (Huppert *et al.* 2004:307-340). The cost for organisations with employees suffering from work-related stress is high, and stress negatively influences employees' productivity, increases absenteeism and employees' turnover, to name but a few. Hence, organisations need to invest in reducing the stress levels of their employees.

3.2.3 Job satisfaction

Work remains an important part of adults' daily lives – also for purposes of assessing their overall well-being (Judge & Watanabe 1993). Furthermore, job satisfaction has been linked to life satisfaction levels experienced (Ryan & Deci 2001). According to Reis, Sheldon and Gable (2000:419), work can, amongst others, provide a sense of autonomy and meaningfulness, social support and perceived competence, and these factors, in turn, can contribute to a person's well-being beyond the workplace; or they may cause burnout and stress that may affect employees beyond the workplace (Reis *et al.* 2000:419; Ryan & Deci 2001).

Judge and Ilies (2004) point out that, amongst others, job satisfaction can either have a positive or negative effect on our well-being. Other factors such as unemployment, or working in a depreciating work environment, can also negatively impact on our well-being in the long term (Lucas, Clark, Georgellis & Diener 2004). Thus, although work is a means of financial provision and accumulating wealth, these factors only have a modest effect on our well-being (Biswas-Diener, Vitterso & Diener 2005), whilst job satisfaction is of utmost importance for experiencing well-being and life satisfaction (Luthans, Youssef, Sweetman & Harms 2013; Rothmann & Jordaan 2006).

3.2.4 Resources

From the literature review conducted, sufficient resources (including financial, physical and human resources) featured as one of the main factors influencing employee well-being. Demerouti and Bakker (2011) conducted a study on the use of the Job Demands-Resources Model (JD-R Model) to predict how, amongst others, high job demands and insufficient resources have a detrimental effect on employees' well-being. Other researchers (Rothmann & Jordaan 2006; Jackson, Rothmann & Van de Vijver 2006) investigated the influence on high job demands and a lack of sufficient resources at levels of engagement, job satisfaction, levels of absenteeism and retention, and found that these are negatively affected by high job demands and insufficient resources. Demerouti and Bakker (2011) found that high job demands and insufficient resources led to an increase in the occurrence of upper respiratory tract

infections, early retirement and work-place bullying. Their study provides evidence that the JD-R Model can be used as a means of predicting performance at work, as well as well-being related to the aforementioned factors (see 3.4.3).

Rothmann and Jordaan (2006), in their study on work engagement, job resources and job demands of academic employees in South African higher education institutions, used the Utrecht Work Engagement Scale (UWES) and the Job Demands-Resources Scale (JDRS) to measure the impact of job resources and job demands on employees' levels of engagement in their work. Their study confirms that sufficient job resources, such as organisational support, opportunities for growth and advancement result in higher work engagement levels (Rothmann & Jordaan 2006:94).

3.2.5 Job security

Researchers (Buys & Rothmann 2010; Jackson *et al.* 2006; Schaufeli & Bakker 2004) found job security to be an important element in the determination of employees' well-being. Processes such as organisational restructuring may negatively impact on job security, as employees often fear that they will lose their jobs (Probst 2003). Job security also may be influenced by factors such as having trust in one's leader (Bothma & Roodt 2012; Mendes & Stander 2011).

Where job demands (e.g. amount of work and timeframe available to do the work) are high and job resources (such as sufficient employees) are low, it could impact negatively on employees' retention, as such employees, as a result of fear of losing their job as they are unable to keep up the pace at work, might begin to look for another job (Demerouti & Bakker 2011). Furthermore, employees feel more secure in their positions when they have a positive relationship with their supervisor and colleagues, and when they work in a supportive environment (Van Straaten *et al.* 2016). This feeling of security is further enhanced when employees feel that they are recognised for their quality of work, valued and appreciated (Rothmann & Jordaan 2006; Van Straaten *et al.* 2016).

3.2.6 Remuneration

In the literature review conducted, remuneration also featured as an element that influences employees' well-being. However, elements such as being valued and appreciated (Cooperrider & Whitney 2005) (see 2.3.7.1) and meaningful work (Jones & Griep 2018; Steger, Pickering, Shin & Dik 2010) (see 2.3.8.3) are regarded as equally important factors impacting on employees' well-being combined with factors such as security and remuneration. A study by Kerlin and Dunlap (1993) confirms that the retention of academics is linked to whether they can make a decent living.

Furthermore, a study on academics' intention to quit was conducted by Robyn and Du Preez (2013) in the SA higher education context. Academics born between the year 1977 to 1994 (also known as Generation Y) were included in the study. The results revealed that remuneration - amongst other things such as employee engagement, job satisfaction, reward, leadership and recognition - was significantly related to these academics' intention to leave their organisations.

Theron, Barkhuizen and Du Plessis (2014) investigated the factors impacting on academic's intention to leave, or stay within South African public HEIs. They confirmed that dissatisfaction with compensation and performance management practices are important factors influencing the turnover and retention of academic employees.

3.2.7 Engagement

The level of employees' engagement in their work is often determined by other factors such as empowerment, role clarity and leader behaviour (Mendes and Stander 2011:31). These authors studied the impact of the behaviour of leaders on employees' levels of work engagement and retention. Their research revealed that role clarity, empowering behaviour of leaders and psychological empowerment predict employees' level of work engagement. In return, work engagement might also predict employees' intention (or not) to leave an organisation (Mendes & Stander 2011:31). Thus, organisations wishing to retain talented employees should identify those factors that positively impact on the organisation and the retention of talent. Organisations

therefore should not only focus on employees' performance, but also on improving their overall health and well-being.

Ensuing from their study on academic employees' work engagement, job demands and job resources in South African HEIs, Rothmann and Jordaan (2006) confirm that work engagement is directly influenced by job resources such as organisational support, growth opportunities and advancement. Their study further revealed that job insecurity had a negative impact on employees' dedication to their work and organisation. Thus, their study proves that academics are more dedicated when they have sufficient organisational support – irrespective of their job demands (Rothmann & Jordaan 2006:94).

There is thus a direct link between organisational support and the level of engagement of employees. Hence, these researchers recommend that more research should be done to study the impact of positive elements of human behaviour in the workplace, as *“too much attention has been paid to unhealthy and dysfunctional aspects”* (Rothmann & Jordaan 2006:95). This links with the principles of Appreciative Inquiry and Positive Psychology, which emphasise a focus on organisational strengths and positivity.

In their study on work engagement, burnout and a sense of coherence in female academics in South African higher education institutions, Bezuidenhout and Cilliers (2010) emphasised the importance of SA HEIs striving to find ways of contributing positively towards employees' work engagement levels, and avoiding burnout. Their study alluded to the need for university leadership to recognise the high occurrence of burnout among female academics in SA HEIs, and proposed that they should put strategies in place to address this challenge to lead to better work engagement (Bezuidenhout & Cilliers 2010). It thus is clear that an integrated approach to employees' well-being is required at SA HEIs, as many factors determining employees' well-being are interlinked with one another (e.g. job satisfaction and engagement; job security and retention).

3.2.8 Trust and organisational commitment

The level of employee commitment to an organisation is influenced by various interrelated factors. Studies conducted within the higher education landscape by Connell, Ferres and Travaglione (2003) and Dirks and Ferrin (2002) reveal that desirable performance outcomes of employees are directly linked to the level of trust in their leaders or direct supervisors. When a leader or supervisor is trusted, it results in desirable performance outcomes such as better employee retention, increased commitment, organisational partnership behaviour, and higher job satisfaction levels (see 3.1.1; 3.2.3).

In one of only a few studies conducted in South Africa on the well-being of support services employees in SA HEIs, Field and Buitendach (2011) investigated the work engagement, organisational commitment and happiness levels of support services employees at these institutions. Their research reveals that work engagement can predict employees' levels of organisational commitment (Field & Buitendach 2011:9). Furthermore, meaningfulness of work has been proved to impact on organisational commitment. Geldenhuys, Łaba and Venter (2014) studied the relationship between work engagement, meaningful work, and organisational commitment. Their study confirms a positive relationship between meaningful work, engagement and organisational commitment levels, and indicated that meaningful work and engagement levels predict employees' commitment to their organisations (Geldenhuys *et al.* 2014).

In a study conducted by Steger, Dik and Duffy (2012) it was found that work is a significant avenue for experiencing life as meaningful, and benefitting some greater purpose. Furthermore, meaningful work contributes to organisational commitment, the way in which employees treat customers, their levels of job satisfaction, the number of days absent from work, and employees' levels of life satisfaction (Field & Buitendach 2011; Geldenhuys *et al.* 2014; Steger *et al.* 2012).

The attitude and commitment of senior leadership towards their employees' well-being have a tremendous impact on their well-being (Wood and Nelson 2017:Online). When senior leadership values its employees, and is committed to improving their health and well-being, it is sensed by employees, and affects their productivity and performance levels, as well as their commitment towards the organisation (MHF 2016:2)(see 3.3). I agree that both trust and organisational commitment, on the side of employees towards the employer, and commitment of senior leadership towards their employees' well-being, are crucial factors towards the enhancement of employees' well-being (see 3.2.16; 3.2.20; 3.3).

3.2.9 Morale and positive emotions

From my own life and challenges that I have experienced thus far, I found that a positive approach and attitude to life fuels hope, which, in turn, produces patience and the desire to make a positive contribution to my own life and the lives of others. My life approach links to Seligman's view of a meaningful life (i.e. serving something bigger than yourself) as an important factor in determining authentic well-being (Seligman 2002:250-254) (see 2.3.8.3). This desire to make a positive contribution to my own life and the lives of my colleagues, and the fact that I am also an employee of a South African public HEI, has inspired me to conduct this research on how an integrated employee well-being framework can bring about positive change in terms of SA HEIs' employees' well-being.

A study by Ngambi (2011) revealed that leadership competencies, such as communication, trust and team building impact directly on the morale of employees. Hence, he recommends that surveys on employees' morale should be conducted prior to organisations attempting to develop strategies that relate to the morale, retention and performance of employees (Ngambi 2011:762). Johnsrud (1996) pointed out that academics stayed with an institution where the morale was high, as they were more likely to experience positive emotions.

Another study, conducted by Johnsrud, Heck and Rosser (2000), revealed that although academic employees were dedicated to their work, their morale and intention to leave the higher education institution were influenced by their discontent with the institution that they served. Hence, morale is an important determining factor in employees' well-being, but also their retention and performance (*cf.* Johnsrud *et al.* 2000; Van Straaten *et al.* 2016).

3.2.10 Feeling valued and appreciated

Feeling valued or appreciated is a very important aspect of employee well-being (see 2.3.7.1). In research conducted at a South African public HEI amongst support services employees (Van Straaten 2014), it became evident that the HEI could enhance its support services employees' well-being by acknowledging and valuing their contributions. Studies by Cooperrider, Whitney and Stavros (2008), Hammond (1998) and Watkins (2010) confirm that employees' well-being is negatively affected when employees do not feel 'part of', valued or appreciated.

It is clear that employees benefit from an appreciative work environment, and show greater commitment towards the organisation when they are recognised and appreciated (Stratton-Berkesell 2015) (see 2.3.7.1). A survey conducted by Salary.com revealed that 34.2 % of employees who felt that they did not receive sufficient appreciation or recognition for their work, resigned (*cf.* Janas 2009:67-70). Thus, organisations need to invest in valuing and appreciating their employees. In my view, this does not have to cost any money. An institutional culture of appreciation only needs to be established.

3.2.11 Mental well-being/psychological protection

The concept of mental well-being was discussed extensively in section 2.4.3, hence, only a brief discussion is provided here. Scientific evidence reveal that employees' mental well-being is affected negatively by factors such as overwork and regularly working overtime; conflict, ambiguity and interrole conflict; poor leadership; perceived job control; and harassment and bullying in the workplace (Kelloway & Day 2005:313-

316). Furthermore, the research of Kelloway and Day (2005) indicates that other aspects of work, such as positive interpersonal relationships and employee involvement may positively impact on employees' mental and overall well-being.

The Mental Health Foundation reports that the guidelines of the National Institute for Health and Care Excellence on workplace health emphasise the significant role of employment in promoting employees' mental well-being, building their self-esteem, their identity formation, and providing opportunities for them to interact socially (MHF 2016:9; NICE 2015).

3.2.12 Equality

A report from the Commissie Gelijke Behandeling (2010) confirms that equal treatment in the workplace is a fundamental right of employees. It is disappointing that this is not always applied in the workplace. For South Africans, the right of every citizen to equality is expressed in the Constitution of the Republic of South Africa, Act 108 of 1996 (RSA 1996). The SA Constitution stipulates that the Republic of South Africa is a democratic, sovereign state founded on the achievement of equality, the values of human dignity, and the promotion of freedom and human rights (RSA 1996:1243). Equal treatment of citizens, including in the workplace, therefore is both a human and constitutional right of our country's citizens. Furthermore, the Constitution of the Republic of South Africa (1996:22-23) states in Section 24 that everyone has the right to a harm-free and safe environment that does not impact negatively on their health or well-being.

Bullying often occurs in the workplace. This compromises the right of employees to be treated equally. Workplace bullying can be a predictor of counter aggressive bullying, coping and well-being (Lee & Brotheridge 2007:52-77). Their study confirmed that verbal abuse, work being undermined, and belittlement were related to burnout, reciprocal forms of bullying, verbal abuse and symptoms of ill health amongst those being bullied (Lee & Brotheridge 2007:52). Their research suggests that potential mechanisms for discouraging aggressive and bullying behaviours are to promote the

fair treatment of employees, empowerment, balanced workloads and co-worker support (Lee and Brotheridge 2007:52).

From my research conducted in 2014 on aspects impacting on the well-being of support services employees of an SA public HEI, it was confirmed that the well-being of the HEI's support services employees is negatively affected when they are not treated equally to academic employees (Van Straaten 2014). Hence, equal treatment has a direct effect on employees' well-being.

3.2.13 Opportunities for promotion and personal development

Research shows that when employers fail to offer sufficient opportunities for promotion and personal development of their employees, it has, amongst others, an effect on their levels of motivation, personal confidence, engagement and retention (Robyn & Du Preez 2013, Theron *et al.* 2014). Employees are more likely to stay with an organisation when sufficient opportunities for their promotion exist in the organisation (Robyn and Du Preez 2013; Theron *et al.* 2014). Thus, employees' retention is directly influenced by factors such as sufficient opportunity for promotion (Robyn & Du Preez 2013). Employees also tend to be more engaged in their work when they have sufficient organisational support and development opportunities (Rothmann & Rothmann 2010:1-12).

Every human being wants to have a sense of accomplishment. This was pointed out by Maslow (1943) in his hierarchy of human needs, and confirmed by Seligman in his PERMA well-being model (Seligman 2011:16). Seligman states that, apart from relationships, positive emotions, engagement, and a meaningful life, employees need to experience a sense of accomplishment in the workplace if they truly want to flourish (Seligman 2011:16). Thus, when the employers provide opportunities for employees to undergo personal development, they feel a sense of accomplishment on completion of such training events, and that increases their levels of well-being and overall job satisfaction (Rothmann & Rothmann 2010).

Furthermore, sufficient opportunities to be promoted in the workplace also make employees feel they are regarded as having the ability to add value to the company, whilst they, in return, are benefitting financially and otherwise from being promoted (Van Straaten *et al.* 2016).

Employers who are serious about their employees' well-being therefore should ensure that there are sufficient opportunities for their personal development and for promotion.

3.2.14 Job design

Although workplace policies regulate employees' well-being (Johns 2010), factors such as the job design itself (e.g. manual labour or public-facing roles), management issues (such as perceptions of effort-reward balance), and the work environment all may influence employees' productivity, health and levels of absenteeism (Black 2008; Parker, Turner & Griffin 2003).

Hafner, Van Stolk, Saunders, Krapels & Baruch (2015) argue that there is a direct relation between job design, family-friendly work practices, organisational change and employee health and well-being. Job design includes elements such as the job role itself, job demands and control over one's work (Hafner *et al.* 2015; Parker *et al.* 2003). Evidence suggests that interventions to improve psychosocial conditions such as increasing employees' autonomy and control over their work, flexible working hours and employees' engagement also are beneficial for employees' health (UCL Institute of Health Equity 2014:4).

Employees who are satisfied with their jobs are more productive and less often absent from work than employees who are unhappy with their current jobs (Hafner *et al.* 2015; UCL Institute of Health Equity 2014). Hence, it is my view that organisations should attempt to involve employees in the design of their job profiles; discuss job demands that may be detrimental to employees' well-being, and find ways to mitigate those; allow employees more control over their own work, and provide the necessary support to employees to improve their overall well-being.

3.2.15 Work-life balance

Burton (2010:30) points out that there are four types of work-family conflict that impact on employees' well-being, and as a result also impact negatively on their employers and society as a whole. These are strain caused by caregivers, role overload, work-family interference, and family-work interference, which could result in higher stress levels; employees being more likely to develop depression; burnout; higher absenteeism rates; employees being more likely to miss work due to childcare; less commitment towards the organisation; higher employee turnover; and increased use of mental health services, to name but a few (Burton 2010:30; Duxbury & Higgins 2009).

Thus, it is evident that a work-family imbalance, or work-family conflict have vast effects on employees, employers, and society at large, as, amongst others, it ensues in burnout, stress, depression, poor physical health, absenteeism, higher employee turnover, lower life satisfaction levels, increased use of mental health services, more physician and hospital visits, and more money spent on prescription medication (Duxbury & Higgins 2009; Jacobs & Winslow 2004; Tammelin 2018). I therefore am convinced that employers who are serious about their employees' well-being should ensure that there is a balance between employees' work and their personal lives, as described above.

3.2.16 Interpersonal relationships at work

Human beings have a distinctive psychological need for autonomy, competence, and openness in relationships (Ryan & Deci 2000:68). If this need is satisfied, it increases levels of self-motivation, but if not met, it results in decreased motivation and well-being (Ryan & Deci 2000:68). Five relational dimensions in the workplace, namely interpersonal facilitation, influence, leadership, relational creativity, and being part of a team can cause greater performance and work satisfaction (*cf.* Butler and Waldroop 2004). The ability to express one's personal characteristics and have open relationships not only influences one's subjective well-being, but it also may have a positive effect on employees' productivity levels (Shier & Graham 2011). Furthermore,

George and Jones (1997) state that spontaneity in interpersonal relationships assists in the establishment of spontaneity and well-being at organisational level. Ferris, Perrewé, Anthony and Gilmore (2000) point out that respect, trust, sincerity, openness, confidence and extroversion will reduce stress in the workplace, and improve team relations.

I therefore agree that positive interpersonal relationships are required to establish both individual and organisational well-being, and that SA public HEIs should monitor interpersonal relationships at work as part of their employee well-being efforts.

3.2.17 Monitoring and evaluation

Employers should regularly monitor and evaluate the effect of new policies, activities, organisational change or recommendations on employee health and well-being, and identify and address any identified gaps (NICE 2015:Online). Furthermore, there has to be an integration of theory, research, practice and policy in terms of employee well-being approaches (Burton 2010:41-46). Managers should continuously review their performance in terms of promoting workplace health and well-being, and acknowledge any gaps in their competencies (NICE 2015:Online).

In my opinion, and relevant to the SA public HEI context, reliable, validated tools should be identified to constantly monitor the impact of SA public HEIs' well-being interventions, and line managers should play an active role in monitoring such impact. This is also confirmed by research of NICE (2015:Online) and the WHO (2010a) on the importance of monitoring and evaluation to identify and address gaps in terms of employees' health and well-being. Prilleltensky *et al.* (2015) developed a so-called *I COPPE Scale* that is useful for assessing multidimensional well-being. SA public HEIs could explore the use of the *I COPPE Scale* to assess their well-being efforts.

Thus, monitoring and evaluating the effectiveness of employee well-being programmes offered by SA public HEIs were included as a component in my integrated employee well-being framework (see 7.2.4.1; Annexure T).

3.2.18 Fairness and justice

Lawson, Noblet and Rodwell (2009:1) studied the relationship between organisational justice and health. Their research confirms that perceptions of fairness may make significant contributions to employee well-being, and that organisational justice has a profound effect on employees' job satisfaction levels. Hence, Lawson *et al.* (2009) propose that, in addition to traditional job stressors, organisations' health promotion strategies should also address organisational justice. In their book titled *Advances in Organisational Justice*, Greenberg and Cropanzano (2001:3) point out that fairness in the workplace entails not disadvantaging, imposing harm or injury on an employee.

Employers should prioritise the addressing of any unfair treatment of employees. Line managers should know how to refer employees that feel they are being treated unfairly. Furthermore, there should be no discrimination based on the age of employees. Older employees should have the same opportunities as younger employees, and their experience and institutional memory (if they have worked in the organisation or their particular field for a long time) should be valued (NICE 2015).

Unfairness in the workplace will lower levels of employees' job satisfaction, and ultimately affect their well-being and work outputs negatively (Greenberg and Cropanzano 2001). Hence, in my view employers should do everything in their power to ensure that fairness and justice are applied at the workplace. This will not only benefit the employees, but also the organisation in the long run, as employees' well-being could improve, and thus also factors such as absenteeism and high employee turnover rates.

3.2.19 Policies, strategies and programmes guiding employee well-being

There is sufficient evidence that workplace policies strongly influence the well-being of employees (Johns 2010). The World Health Association's Global Plan of Action on Workers' Health (WHA 2007) makes it clear that policies should be developed and implemented at national and organisational levels to support employee and well-being. The purpose of any policy guiding the well-being of employees is to provide

a framework within which the organisation can facilitate and implement working practices and services that positively impacts on employees' health and well-being. Furthermore, well-being policies should minimise the detrimental effect of work-related stress on employees and their work, and ensure that employees are appropriately supported in the workplace (*cf.* UWL 2018).

Thus, companies, including universities, have a responsibility to ensure the safety, health and well-being of their employees. They should establish a positive health and well-being culture that includes an awareness and understanding of effective processes and positive behaviour by employees at all levels (*cf.* UWL 2018)(see 3.2.23). Furthermore, they should involve all role-players/stakeholders (e.g. human resources departments, all employees, unions, etc.) in the process of developing policies, strategies and programmes related to employees' well-being (*cf.* WHO 2010a), to gain their valuable inputs, and to create better buy-in from these role-players in their employee well-being efforts.

The rights of South African citizens are captured at national level in the South African Constitution (RSA 1996) – amongst others their right to health care services (RSA 1996:1255). The South African Occupational Health and Safety Act (Act 85 of 1993) provides for the health and safety of persons at work (RSA 1993:8). South African public higher education institutions are guided by the principles related to their employees' health and well-being as contained in both the South African Constitution (RSA 1996) and the Occupational Health and Safety (OHS) Act (Act 66 of 1995) (RSA 1995), and as such they have a statutory duty to ensure the health, safety and welfare of all their employees. The South African OHS Act also places a general duty on employees of SA public HEIs to co-operate with their employers to ensure that they comply with the principles of the OHS Act. Thus, SA public HEIs have a responsibility to support and promote policies and practices that uphold their statutory duty pertaining to the health and well-being of their employees.

An Employee Health and Wellness Strategic Framework for the Public Service (RSA 2012) was developed in South Africa, to provide focused initiatives and interventions, and innovative solutions to employee health and well-being. It spells out employer and

employees' health rights and responsibilities, for implementation in a co-ordinate and synergistic manner (RSA 2012:2). Furthermore, it provides an integrated employee well-being approach, and recognises the importance of individual wellness, health and safety, and its link to productivity and organisational well-being in the public service (RSA 2012:2). Employers are beginning to recognise the value of building resilient and healthy workforces that are equipped for change. Hence, in order to build robust, healthy workforces, they are turning to well-being strategies (WHO 2010a). It is, however, important that organisations update and amend their well-being strategies on a regular basis to ensure a healthy, sustained balance between environmental and individual features (Redelinghuys *et al.* 2019b)(see 2.4; 2.4.7; 2.4.9; 3.1.1).

No such a unified, integrated employee well-being framework for SA public HEIs could be found during a literature review and document analysis conducted. Hence, as an outcome of this study, such an integrated employee well-being framework was developed for SA public HEIs, aimed at contributing to the improvement of their employees' well-being (see 7.2.4.1; Annexure T).

3.2.20 Role and leadership style of line managers

In recent years, leadership has been emphasised as an important factor in managing employees and organisations at large (Brennan 2014). Furthermore, the concept of human resource management has gradually replaced the traditional concept of personnel administration (Iqbal, Anwar & Haider 2015:146). New leadership styles are therefore integrated into the effective management of employees, also to increase their performance (Iqbal *et al.* 2015:146).

Good leadership drives the success of organisations (REBA/PSHP 2018:3). Leadership is therefore an important management tool. If used correctly, it will, amongst others, contribute to positive relations with employees, improve the organisational culture, and lead to increased employee performance (Dobre 2013). Different leadership styles are used by line managers. These styles are geared to fit with employees' roles, the amount of direction they require, and for empowerment and decision-making purposes (Iqbal *et al.*; Brennan 2014). Leadership styles of line

managers thus affect employees' effectiveness, their performance, engagement, and their motivation (Oliver 2012:2-6).

Different leadership styles include autocratic, democratic, and participative leadership styles (Lewin, Lippitt & White 1939; St. Thomas University 2014:Online). In a study conducted amongst hospitality workers (Iqbal *et al.* 2015) it was found that an autocratic leadership style applied by line managers was useful in the short term, but it had a detrimental effect on employees' performance in the long term. Furthermore, a democratic leadership style was found to positively impact on employees' levels of motivation and their performance, in both the short and long term. Finally, a participative leadership style displayed by line managers had a positive effect on employees, and rendered positive results in terms of employees' performance (Iqbal *et al.* 2015). Line managers therefore have an important role to play in terms of motivating and managing employees (Dobre 2013; Oliver 2012).

Some sources also distinguish between transformational and transactional leadership styles (Bassi & McMurrer 2007:115-123; Kara, Uysal, Sirgy & Lee 2013:9; Piccolo & Colquitt 2006:327-340). Transactional leaders maintain the normal flow of operations in the workplace. They use both incentives and disciplinary action to motivate employees to perform. They thus are more operationally and less strategically focused, and also may influence their subordinates to focus more operationally (Ingram 2019: Online). Transformational leaders, on the other hand, go beyond managing day-to-day activities, and focus on taking the company, department, or team to the next level of performance and success (Ingram 2019: Online: Piccolo & Calquitt 2006:327). They are team builders; can easily motivate employees at different levels within the organisation to give their best; they set goals and offer incentives to encourage subordinates to perform optimally; and they provide opportunities for personal and professional growth for employees (Boundless Management n.d.: Online).

It is clear from the above that line managers have an important function and role within organisations, beyond their management level, and that their management style could affect the well-being of employees at different levels of the organisation.

3.2.21 Person-job fit

Person-job fit has been identified as a key factor impacting on employees' well-being (Brandstätter, Job & Schulze 2016:1-11; Hoffman & Woehr 2006; Redelinguys *et al.* 2019b). Various researchers have studied the effects that a person-job misfit has on, amongst others, employees' motivation, performance levels and their intention to leave (Brandstätter *et al.* 2016; June & Mahmood 2011; Lin, Yu & Yi 2014; Redelinguys *et al.* 2019b). Outcomes of the study conducted by Brandstätter *et al.* (2016) indicated that motivational incongruence resulted in high levels of job burnout, and it predicted increased physical symptoms. This emphasises the importance of well-being interventions to prevent or remedy a lack of needs-supply fit, and to reduce the risk of employees' undermined well-being (Brandstätter *et al.* 2016:1).

Another study by Lin *et al.* (2014:1537-1548) confirmed that employees' positive mood had a positive effect on their job performance and overall sense of well-being. Person-job fit and well-being were significantly positively correlated. Furthermore, both well-being and person-job fit had positive effects on employees' job performance (Lin *et al.* 2014:1537). In addition, person-job fit may have directly affected the participants' quality of job performance, and indirectly through their levels of well-being (Lin *et al.* 2014:1548).

From the above, it is evident that person-job fit indeed is a key prerequisite for employees to flourish in the workplace. Hence, I am convinced that employers should do everything in their power to ensure that person-job fit is addressed when they appoint employees, that is, already at recruitment level.

3.2.22 Conflict management

Conflict research and theory have largely overlooked the possible correlation between individual health, well-being, conflict in the workplace, and job satisfaction (De Dreu, Van Dierendonck & Dijkstra 2004:6). When managed poorly, conflict in the workplace will impact negatively on individual health and well-being in the long term (De Dreu *et al.* 2004:6). In a study conducted amongst 291 white-collar employees, those

employees who experienced high levels of task conflict and high levels of relationship conflict reported poorer well-being (Sonnentag 2013:166-183). On the other hand, psychological detachment from work had a mitigating effect on the negative relation between conflict in relationships and well-being (Sonnentag 2013:176).

In two studies conducted in Switzerland, conflict was related to impaired psychological and physical well-being, particularly for people suffering from symptoms of chronic depression (Meier, Semmer & Gross 2014:166-183). The findings of these two studies suggest that conflict may cause symptoms of depression, which make people even more vulnerable to conflict – creating a vicious cycle (Meier *et al.* 2014:177-178). Employers should therefore equip their employees with conflict management and conflict resolution skills, in order to resolve problems in the workplace efficiently and effectively (Kimbrough, Sheremeta & Shields 2013). The flow of activities in the workplace then may continue without extended disruptions due to unresolved conflict, whilst the well-being of employees also is positively affected (Meier *et al.* 2014:183).

3.2.23 Personal values and ethics versus organisational values, ethics and culture

Values are “principles or standards of behaviour; one’s judgement of what is important in life” (English Oxford Living Dictionaries 2019: Online). Values therefore guide our behaviour. A moral is concerned with the principles of right and wrong behaviour (English Oxford Living Dictionaries 2019: Online). We use these deep-rooted values to choose between right and wrong ways of working, and to make important decisions and choices (Knafo, Roccass & Sagiv 2011).

Ethics is defined by morals, values, character and integrity (Ely & Thomas 2001). Both personal and organisational values and ethics are important in the workplace. They promote personal and interpersonal behaviours; uphold fundamental responsibilities and accountabilities; and contribute to the continuous improvement and enhancement of excellence and professionalism in the workplace (Domagalski 2014:Online). Unethical behaviour should be eliminated, as it threatens the reputation of

organisations, and also negatively impacts on employees' well-being (Sing & Twalo 2015:515).

Organisational values, therefore, should be the basis for the behaviour of its members. However, if members of an organisation do not share and have not internalised the organisation's values, the organisation, or the individual, or both, become dysfunctional (Biggio & Cortese 2013; Syers & Smollan 2009). Each company should clearly articulate its core values and ethical stances in the Code of Conduct for employees (Syers & Smollan 2009:435). Furthermore, values and ethics always should be a standing item on the agenda of management meetings for organisations to identify and mitigate areas of ethical risk (Domagalski 2014:Online).

Employees' personal values have been found to shape their choices and behaviours in work settings (Arieli *et al.* 2018). Values also affect their levels of organisational commitment and work engagement (Biggio & Cortese 2013). Organisations therefore should do more to ensure that they appoint employees whose personal values and ethics are similar to those of the organisation (Hoffman & Woehr 2006).

Finally, a positive, inclusive and functional institutional culture and climate is required for employees to feel part of the organisation, to be committed to the organisation, and to go the extra mile for the organisation (Cooperrider Whitney & Stavros 2008; Findler *et al.* 2008) (see 3.3; 3.5). Hence, organisations should establish a workplace culture supportive of employees' well-being.

3.2.24 Synthesis of factors impacting on employees' well-being

Organisations need to realise that investing in the health and well-being of their employees is of vital importance for both the organisation and its employees. It holds both immediate and long-term benefits for the organisation, which will outweigh the cost of the investment. Therefore, workplaces need to establish policies, practices and programmes that support employees' health and well-being (see 3.2.19). They also need to regularly monitor the effectiveness of, and align their well-being programmes with best practice worldwide (see 3.2.17). Well-being programmes should be based on employees' needs, as well as the organisational context (see 3.2.17). Furthermore,

organisations need to create a workplace culture conducive to employee health and well-being, and appoint leaders who are committed to employees' health and well-being, and who lead by example (see 3.2.23).

For organisations to be successful, it is vital that they understand the factors that impact on employees' health and well-being, and that they do everything in their power to adopt a proactive approach to improved employee health and well-being – one where employees are valued and appreciated. Furthermore, they need to mitigate risks related to employees' health and well-being timeously, and they need to align their own culture, values, priorities, vision and mission with best practice globally (i.e. practices that have been tried and tested, and that provide maximum efficiency and effectiveness) in terms of employee health and well-being. By doing so, a healthy, vibrant, dynamic workforce will be established, to the benefit of all.

In the next section, the benefits of well-being at work are discussed.

3.3 BENEFITS OF WELL-BEING AT WORK

There now is evidence that work health promotion decreases sickness absence, and increases employees' productivity and mental well-being (Kuoppala, Lamminpää & Husman 2008). For this reason, health promotion at work should target both physical and psychosocial work environments. Furthermore, a focus on employee health and well-being can bring about a strong and sustained workforce (NICE 2015:Online). According to the MHF (2016:4), society depends on a healthy workforce. Spector and Fox (2002:269-292) point out that the positive effects of well-being at work have been less researched than the negative effects related to employees' well-being on organisations, such as stress-related illnesses and their absence from work. However, various perspectives increasingly emphasise aspects of employee well-being such as the role of emotion at work (Spector & Fox 2002; Zapf & Holtz 2006), and the benefits that human flourishing hold for organisations (Hinchcliffe & Woodward 2004; Keyes 2002). Another aspect of employee well-being includes the importance of creating 'flow' - also known as mindfulness - described by Sadlo (2011) as living more consciously. Furthermore, the presence of organisational resources

such as supporting and motivating employees, is vital, as it contributes to their self-worth, and their experience of their work as meaningful (Huppert & Johnson 2010; NICE 2015:Online; Rumsby 2007:Online; Salanova, Bakker & Llorens 2006).

Certain jobs may undermine employee health and well-being, and even increase employees' chances of contracting heart disease and depression, amongst others (De Vogli, Ferrie, Chandola, Kivimäki & Marmot, 2007:513-541; Rumsby 2007). In a European Social Survey on well-being conducted in 2015, the features of flourishing employees were identified as emotional stability; competence; engagement; optimism; meaning; positive emotions; resilience; positive relationships; vitality; and self-esteem (Russel & McGinnity 2018:Online).

Scholars (Diener 2013; Seligman 2011; Peterson, Luthans, Avolio, Walumbwa & Zhang 2011) agree that happy people hold various benefits for the companies they work for. They work harder and perform better than unhappy people; are self-efficient; healthier; friendlier; more cooperative; more productive; more innovative and creative; less likely to be absent from work and to leave the company; willing to go the extra mile; and loyal towards the organisation (Becchetti, Castriota & Giachin 2010; Diener 2013; George & Zhou 2007; Peterson *et al.* 2011; Erdogan, Bauer, Truxillo & Mansfield 2012). Furthermore, research proves that positive psychological well-being increases one's lifespan (Chida & Steptoe 2008; Diener & Chan 2011).

However, when employees' well-being is undermined, many key organisational performance factors are negatively impacted: employees' may be less productive (not fully functional) (also known as "*presenteeism*") (Jing 2016); make more mistakes; experience conflict with colleagues, subordinates and managers; there may be an increase in grievance and disciplinary incidents; absenteeism may increase and health decrease (i.e. depression, heart disease, cancer, burnout, and mental illnesses may occur more frequently); their morale might be low; poor customer service may be rendered; and employees may resign easier, causing an increase in employee turnover and a loss of expertise and institutional memory (Bezuidenhout & Cilliers 2010; Bothma & Roodt 2012; Mendes & Stander 2011; Seligman, Steen, Park & Peterson 2005; Vazi, Ruiter, Van den Borne, Dumont & Reddy 2013). Hence,

employees may be showing up for work, but will not function at an optimal level. They will not be energetic and focused on their work, but will rather function at a diminished capacity when they experience, amongst others, “high levels of stress, lack of physical activity, poor nutrition, emotional distress, or inadequate sleep” (Jing 2016:1).

Well-being at work also is closely linked to well-being and health, in general. When well-being is negatively affected, people become ill, both physically and mentally (Young & Chapman 2017). Sadly, the workplace culture sometimes encourages unhealthy competition amongst managers and employees. In such cases, stress often is tolerated and accepted as normal (Vazi *et al.* 2013). Such employees might even take pride in the way they can handle stress. In such cases, stress is regarded as a motivating factor. However, it is important to distinguish between healthy motivation and unhealthy stress. Furthermore, it is not easy to quantitatively measure some benefits related to the improvement of employees' well-being and health, such as their increased loyalty towards the organisation; increased productivity; feeling satisfied and safe; and the positive impact these factors have on the reputation of the organisation (NICE 2015:Online).

Investing in the training of line managers also holds various benefits, although it may take some time to reap these benefits, which could include: an improvement in the attitudes of line managers and their subordinates (which, in turn, can improve their levels of job satisfaction); increased productivity; and lower levels of absenteeism, presenteeism, and employee turnover rates (NICE 2015:Online; Young & Chapman 2018:1-8).

Employers should therefore understand their responsibility towards improving the well-being of their employees, as well as the risks involved when they do not take care of their employees' well-being. Employers should begin to realise the value and importance of employee well-being – both for employees and their organisations. Employee well-being is essential for improving both organisational effectiveness and the quality of lives of individuals, communities and societies (Burton 2010; Young & Chapman 2018).

In the next section, the concept of, and best practice related to integrated employee well-being programmes are explored.

3.4 INTEGRATED EMPLOYEE WELL-BEING PROGRAMMES

As indicated in Chapter 1 (see 1.5.2), the term “integrated” means to be co-ordinated, well-balanced and offered in a cohesive manner, whilst a programme can be described as “*a planned series of events; a set of related measures or activities with a long-term aim*” (Oxford South African Concise Dictionary 2013:941). Thus, **integrated employee well-being programmes** are planned events or activities that are combined into a holistic approach to employees’ well-being (i.e. addressing their physical, emotional, psychological, social, financial, spiritual, environmental, intellectual and occupational well-being in a co-ordinated and cohesive manner).

The most successful well-being programme for any organisation would be one that creates an **enabling environment** for all employees. An enabling environment can be defined as an environment that stimulates, or enables, employees to flourish at all levels of their existence (see 2.2.3 - 2.2.4). Therefore, in this chapter best practice in terms of integrated employee well-being programmes applied globally - including at higher education institutions - will be investigated, to determine what they entail; whether these programmes address all the dimensions/buildings blocks of well-being identified from the literature study (physical, emotional, psychological, social, spiritual, financial, environmental, intellectual and occupational well-being) (see 2.4.1 - 2.4.9); and whether this is done in an integrated manner. The purpose is further to identify the possible strengths and weaknesses of these integrated well-being programmes, and to evaluate them in terms of these aspects, as well as their applicability to SA public HEIs. The final purpose is to identify the dimensions and key elements to be included in my design of an integrated employee well-being programme for South African public higher education institutions (HEIs), which could assist them in enhancing their employees’ well-being. The employee well-being programmes used by SA public HEIs will be discussed in detail in Chapter 5 of this research report when I discuss the research results.

Despite the development of various employee well-being programmes globally over the past two to three decades, there has been limited research on discovering the most effective employee well-being programmes in the workplace. However, there is agreement that such programmes need to target both individuals and their organisations (Carmichael, Fenton, Roncancio, Sing & Sadhra 2014; Cotton & Hart 2003).

Any successful, integrated employee well-being programme has to take into account the unique characteristics and culture of the organisation, the work environment and work practices, the workforce itself, as well as institutional policies (Fento *et al.* 2014:33). Secondly, a holistic approach to employee well-being, with clearly defined evaluation methods and outcomes in terms of “*employees’ participation, compliance and sustainability of outputs*” is required (Fento *et al.* 2014:33).

Proper and Van Mechelen (2008) point out that most programmes implemented in the workplace adopt a disease prevention approach. Primary prevention entails the implementation of well-being programmes aimed at improving the health status of an entire population, without considering individual health risks. Secondary and tertiary prevention programmes involve a focus on individual health risks, and aim to diminish or converse the negative consequences of diseases within the workplace. Secondary disease prevention programmes also are aimed at reducing the time it takes an employee to return to work after an illness (Proper & Van Mechelen 2008).

It is clear from the literature, however, that a preventative approach to minimising employees’ health risks only is not enough to establish a truly flourishing employee component, as people’s well-being is multi-faceted, and entails much more than improving their physical well-being by merely minimising their health risks (Seligman 2011; Van Straaten *et al.* 2016) (see 2.4.7.2; 2.4; 2.5).

Worldwide there are numerous role-players in people’s well-being and health. These include governments, the World Health Organization, health institutes, business and industry, the private sector, universities, schools, and society at large, to name but a few (see 3.4.19). It is clear from the literature review conducted that there should be

closer collaboration between these role-players, to ensure adherence to applicable health and well-being policies, and to enhance the well-being of people worldwide (WHO 2010a)(see 3.4.19).

As indicated in the introduction to this chapter, I studied best practice in terms of employee well-being programmes applied in organisations worldwide during the literature review, and I also performed an analysis of multiple global and local institutional well-being documents, policies, strategies, models, frameworks, initiatives and programmes, to better understand how they address their employees' well-being holistically, and in an integrated manner and, by doing so, improving the well-being of their employees (see 4.4.3.4.4 - 4.4.3.4.5). Furthermore, I also identified some possible gaps in these programmes, which will be discussed in sections 3.4.1.1 to 3.4.1.14 below.

Table 3.1 below provides a summary of the integrated well-being programmes that I studied and analysed for purposes of this research.

Table 3.1 Integrated employee well-being programmes studied and analysed

Organisation/HEI	Main author/year developed
Effort-recovery Model	Meijman & Mulder (1998)
Present, Past and Prospect (Future) (3-P) Model of Subjective Well-being	Durayappah (2011)
Job Demands-Resources Model	Bakker & Demerouti (2007)
Leisure and Well-being Model	Carruthers & Hood (2007); Newman, Tay and Diener (2014)
The World Health Organisation (WHO)'s Healthy Workplace Framework and Model	Burton (2010) WHO (2010)
National Institute for Health and Care Excellence (NICE) Guidelines on Workplace Health	NICE (2015)
PERMA Model of Well-being	Seligman (2011)
University of Minnesota's Well-being Model	Kreitzer (2012)
University of Birmingham and a company by the name of Health Exchange's workplace well-being programme	Carmichael, Fenton, Roncancio, Sing & Sadhra (2014)
Circumplex Model of Well-being	Sverke (2015)
University of Brighton's well-being programme	Marshall & Morris (2011)
Diamond Model of Integrated Health & Well-being	Jing (2016)
Nomura's (Britain's healthiest company 2017) Health and Well-being Framework	Hudson (2017)

As already indicated, it is not possible to include all the well-being programmes offered by all organisations worldwide in this discussion, as they are too many, and it also was not the purpose. The aim merely was to look into some integrated well-being programmes applied by organisations globally, and to determine their true integration and applicability (in part, or in totality), within the South African context. Thus, those well-being programmes included in Table 3.1 above that I came across in the literature review, will be discussed, as they include at least some of the identified building blocks of well-being (see 2.4.1 to 2.4.9), and they were developed and used over the past 20 years (between 1998 and 2018), which was a prerequisite for inclusion in this study. Furthermore, these well-being programmes were chosen as, to some extent, they are integrated. These well-being initiatives therefore will be discussed and critically evaluated in terms of their perceived strengths, weaknesses, and their applicability to SA public HEIs. This discussion is aimed at offering an analysis of the current evidence base relating to workplace well-being programmes.

The world-renowned building blocks of effective well-being programmes identified in Chapter 2 (see 2.4.1 - 2.4.9) are aimed at addressing employees well-being at nine different levels, namely at (i) physical; (ii) emotional; (iii) social; (iv) mental/psychological; (v) financial; (vi) spiritual, (vii) environmental, (viii) intellectual and (ix) occupational levels (Bonnet 2009; Burton 2010; Deci & Ryan 2008; Huppert & So 2013; Keyes 1998 & 2002; Keyes, Shmotkin & Ryff 2002; Main 2010; Nelson 2009; Ryff & Keyes (1995); Seligman 2011; Snyder & Lopez 2002; Sternberg 2009; Vitt 2009). No research on integrated well-being programmes applied by SA public HEIs could be found. As a result, and for purposes of making a research contribution in terms of the improvement of the well-being of employees of SA public HEIs, best practice found in terms of nationally and internationally applied employee well-being programmes will be investigated.

The outcome of this investigation will be used as a guideline to determine the current strengths and weaknesses of employee well-being programmes applied by SA HEIs during my empirical investigation amongst SA public HEIs; to inform the integrated employee well-being framework for SA public HEIs to be developed; and to contribute to the improvement of employees of SA public HEIs' well-being.

3.4.1 World Health Organization's Healthy Workplace Model

The WHO can be regarded as the custodian of the improvement of people's health and well-being worldwide. It defines a healthy workplace as one in which employees and managers work together as a team to continually improve processes to protect and promote the health, safety and well-being of employees, and the sustainability of the workplace (WHO 2010a:6). This is established by considering the health and safety concerns in the physical and psychosocial work environment (including the organisation of work and workplace culture); personal health resources in the workplace; and ways of participating in the community to improve the health of employees, their families and the broader community (WHO 2010a:82).

Based on this definition, the WHO designed a Healthy Workplace Model aimed primarily at the **prevention of injuries or illnesses in the workplace**. However, secondary and tertiary prevention also may be included by means of occupational health services when such services are not available in the community (WHO 2010a:82-84). In addition, the aim of the WHO Healthy Workplace Model is to create a workplace environment that prevents re-injury or reoccurrence of an illness when an employee returns to work after he/she has had an injury or illness, whether work-related or not. Finally, it aims to create a workplace that is supportive, inclusive and accommodating of older employees, as well as those with chronic diseases or disabilities (WHO 2010a:11-12). The WHO Healthy Workplace Model is illustrated in Figure 3.3 below.

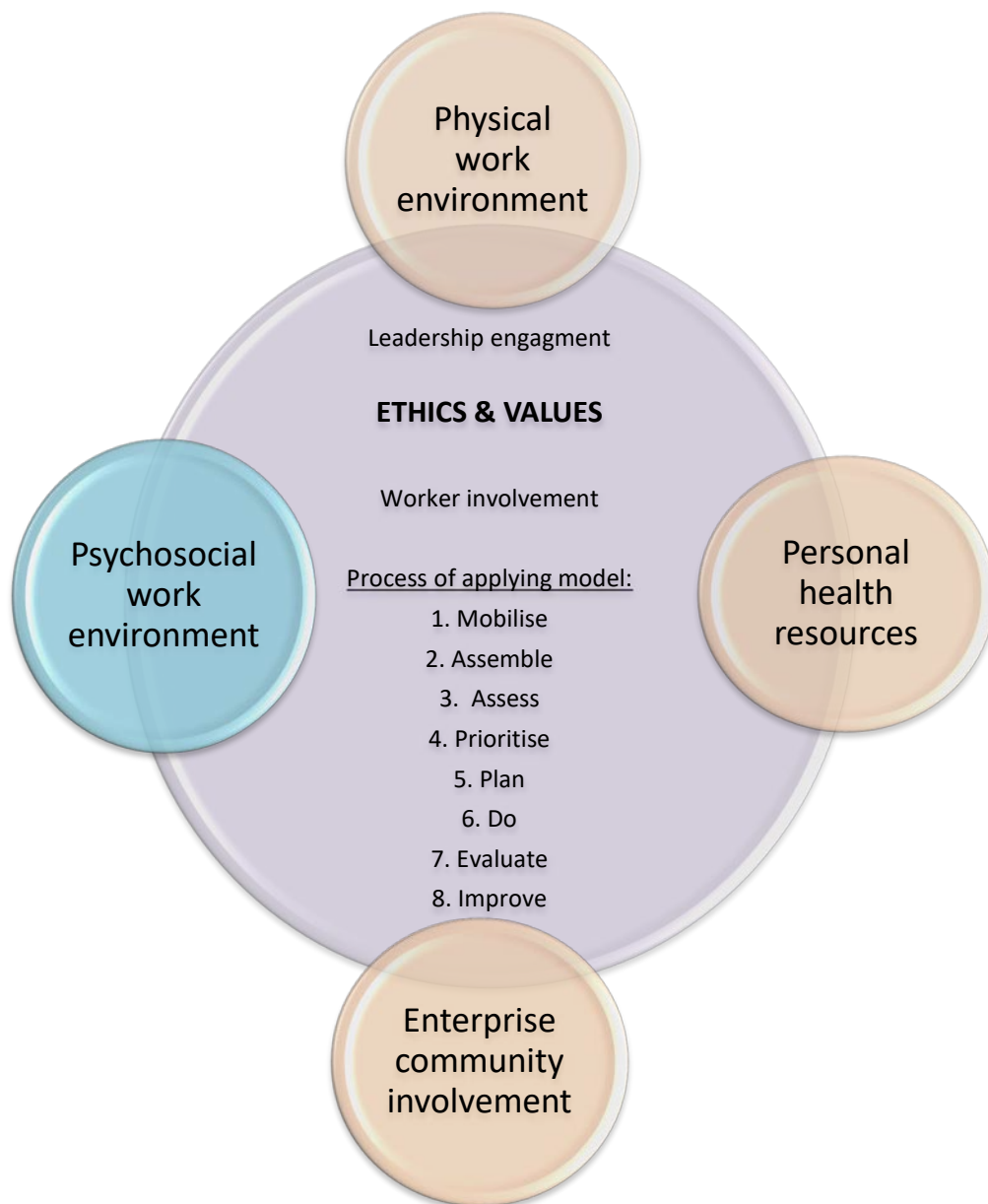


Figure 3.3 WHO Healthy Workplace Model (Adapted from WHO 2010a:98)

From this model, it is evident that the ethics and values of an organisation form the core of a healthy workplace, and that it is influenced by both leadership engagement and worker involvement. Furthermore, the physical and psychosocial work environment, personal health resources and the community all interact to establish a healthy workplace (WHO 2010a:13) (see Figure 3.3 above). The WHO Healthy Workplace Model encourages organisations to facilitate employee well-being efforts through eight identified steps, namely (i) holding regular meetings to discuss employee

well-being programmes offered; (iii) assessing the components to form part of such well-being programmes; (iv) prioritising the well-being efforts to be applied; (v) carefully planning these events and efforts; (vi) doing what the organisation has established to do with regard to its employee well-being efforts; (vii) evaluating all well-being programmes and efforts, and (viii) improving these efforts where necessary (WHO 2010a:13-14) (see Figure 3.3 above).

The WHO (2010:99) emphasises that the safety, health and well-being of workers globally should be prioritised and promoted, whilst the World Health Association stresses the importance of developing and implementing policies at national and organisational levels to support worker health (WHA 2007:11). Furthermore access to basic occupational health services should be improved; effective, evidence-based practices towards the improvement of employees' health should be clearly communicated; and employees' health should be considered within the broader context of economic development, trade and commerce, and education (WHA 2007:11).

The value of the WHO's Healthy Workplace Model (WHO 2010a) lies in its umbrella-approach to workplace well-being, and the acknowledgement that various factors impact on a healthy workplace (see Figure 3.3). However, the WHO's overarching approach to establish a healthy workplace merely serves as a guiding tool for what a workplace can do to improve the health and well-being of its employees. The WHO Healthy Workplace Model also does not elaborate on the inclusion of each of the building blocks of well-being in well-being programmes, as identified from the literature review, namely physical, emotional, social, mental/psychological, spiritual, financial, environmental well-being, intellectual and occupational well-being (see 2.4.1 to 2.4.9). It is, however, valuable in terms of identifying the factors that impact on a healthy workplace.

The WHO (2007:14) defines a health system as any organisation, people or actions with the primary goal of promoting, restoring or maintaining health. Furthermore, the WHO (2007:14) defines health system goals as the targets defined for improving health and health equity in a responsive, financially sound and resource-efficient way.

Apart from its Healthy Workplace Model, the WHO provides a valuable health system framework for purposes of evaluating the extent to which organisations' goals in terms of their **health programmes** are attained, with the following dimensions: information, service delivery; healthy workforce; medical products, services and technology; leadership and financing (WHO 2007:14). Hence, it comprehensively addresses the element of evaluating physical well-being efforts.

The WHO also emphasises the need for increased access to effective, quality health programmes, and that organisations should ensure that multiple and dynamic relationships exist within the health framework (WHO 2007:12-20). To improve the outcomes of any health programme, all six of the building blocks should be addressed in terms of four indicators: access, coverage, quality and safety (WHO 2007:21). Thus, the effective evaluation of health programmes, according to the WHO (2007:22), is based on evaluating the dynamic relationships and equilibrium among these indicators and reviewing the theoretical frameworks for developing and implementing best practices in health programmes.

3.4.1.1 *Strengths, weaknesses and applicability of WHO Healthy Workplace Model for SA public HEIs*

The WHO (2010) acknowledges that its Healthy Workplace Model cannot do the work on behalf of the workplace. In other words, employees, their representatives and the employer should work together to find ways of optimising employees' health and well-being (WHO 2010a:98). Hence, I used the WHO Healthy Workplace Model merely as an overarching, guiding tool for the identification of some of the factors impacting on a healthy workforce (i.e. on employees' physical well-being), to ensure that the designed well-being programme for SA public HEIs is not found lacking in terms of any of the identified core aspects of the model. However, the unique role, vision, mission and core values of public HEIs within the South African context required a different emphasis. This shall be discussed in detail in Chapter 5 of this report.

The strengths and the dimensions of well-being contained in the WHO Healthy Workplace Model that are applicable to SA public HEIs include that the WHO Model is a successful, overarching framework for factors impacting on a healthy workforce. The Model acknowledges that employees and workplaces need to collaborate to optimise employees' health. It places the ethics and values of the workplace at the core of its well-being model, and acknowledges the interplay between personal health, the community, and the physical and psychosocial work environment (Burton 2010:13) (see 3.4.1). Furthermore, its emphasis on the importance of workplace policies to facilitate employees' well-being, regular assessments of their well-being models to be performed by employers, and the review of theoretical frameworks guiding the development and implementing of best practices in health programmes, are regarded as valuable (Burton 2010:13-17).

Possible weaknesses in terms of the WHO Healthy Workplace Model are its strong focus on employee health (i.e. physical well-being), and not on integrated, holistic employee well-being (see 2.2.4). The WHO Model is also found lacking in addressing some of the building blocks of well-being identified from the literature, e.g. spiritual well-being, financial well-being and emotional well-being (see 2.4.2; 2.4.5; 2.4.6).

In the next section, the National Institute for Health and Care Excellence's Guidelines on Workplace Health are discussed in detail.

3.4.2 National Institute for Health and Care Excellence's Framework for Workplace Well-being

The National Institute for Health and Care Excellence (NICE) is a United Kingdom organisation that provides those who rely on it for their care with a range of advice on effective, good value healthcare (NICE 2015:1). The organisation has gained a reputation for its rigour, independence and objectivity (NICE 2015:1). The institute provides advice and guidance on how to improve **health and social care**, and makes recommendations on, amongst others, health improvement, the prevention and management of certain health conditions, to the provision of social care to adults and

children, and broader services and programmes to improve the **health of communities** (NICE 2015:2).

Figure 3.4 below illustrates the framework that the National Institute for Health and Core Excellence (NICE 2015) developed pertaining to factors that influence workplace well-being.



Figure 3.4 NICE Framework for Workplace Well-being (NICE 2015:Online)

Each of the factors contained in the NICE framework illustrated in Figure 3.4 above were discussed in different sections of Chapters 2 and 3 as factors impacting on employees' well-being, or causes of well-being, for example organisational commitment (see 3.2.8); work environment (see 2.4.7; 3.2.1); employees' mental well-being (see 2.4.3; 3.2.1); fairness and justice (see 3.2.18); participation and trust (see 3.2.8); role and commitment of line managers/senior leadership (see 3.2.20);

leadership style of line managers (see 3.2.20); training/personal development (see 3.2.13); job design (see 3.2.14); and monitoring and evaluation (see 3.2.17). Hence, they are not discussed here again. The NICE well-being framework therefore has a broader approach to employees' well-being than the WHO Model (WHO 2010), and it addresses physical, mental, social and environmental aspects of employees' well-being through its dimensions of the physical work environment, employees' mental well-being and elements related to their social well-being and the work environment.

3.4.2.1 Strengths, weaknesses and applicability of NICE's well-being framework for SA public HEIs

The National Institute for Health and Care Excellence's Framework for Workplace Well-being is found to be effective in terms of addressing the different dimensions of **workplace well-being**, but is found lacking in terms of addressing employees' **individual well-being**. An integrated, whole-person approach addressing employees' individual and workplace well-being is required. The NICE Framework also fails to elaborate on how employees' emotional, financial and spiritual well-being should be addressed (see 2.4.2; 2.4.5; 2.4.6).

Furthermore, the NICE framework is valuable in terms of providing a framework for workplace well-being, and in identifying the factors that impact on workplace well-being (which were discussed in detail in sections 3.2.1 to 3.2.19 of this Chapter). However, the NICE well-being framework (2015) fails to indicate how employee well-being can be addressed at all levels, and in an integrated manner.

In the next section the Job Demands-Resources Model and Job Demands-Resources Theory are discussed.

3.4.3 Job Demands-Resources Model and Job Demands-Resources Theory

Over the past five decades, the causes of job stress, and what motivates people, have been widely researched (Bakker & Demerouti 2014:7). The Job Demands-Resources (JD-R) Model was initially developed by Bakker and Demerouti to predict job burnout (Demerouti, Bakker, Nachreiner & Schaufeli 2001:1). The JD-R Model proved that if job demands are consistently high, it leads to exhaustion, and eventually health problems amongst workers (Bakker & Demerouti 2014). These factors have a negative influence on employees' effective functioning (Demerouti *et al.* 2001:499).

In terms of the Job Demands-Resources Model, job demands refer to the organisational, physical and social aspects of the job that should be sustained at physical, as well as mental level (Jackson, Rothmann & Van de Vijver 2006:265). Job resources refer to the social, psychological, physical and organisational aspects of the job that play an important role in the reduction of job demands, accomplishing work goals, and bringing about personal growth and development (Demerouti *et al.* 2001:499-512).

Bakker and Demerouti define job design as a set of opportunities and limitations that form part of the structure of assigned job tasks and responsibilities, and these factors affect how an employee experiences and completes work (Bakker & Demerouti 2001:500; Bakker & Demerouti 2014:1). Scholars researching job design therefore attempted to identify the job characteristics that cause work satisfaction (Bakker & Demerouti 2014:1).

More recently, the term “job design” has been broadened to include aspects of how work is organised, experienced, structured and endorsed (Grant, Fried & Juillerat 2010:2) (also see 3.2.14). The Job Demands-Resources (JD-R) Theory - which was inspired by job design and job stress theories – therefore entails an extension of the Job Demands-Resources Model (Bakker & Demerouti 2014:2; Bakker 2017a:Online).

The **JD-R Theory** demonstrates that multiple work demands, in the absence of sufficient resources, cause emotional tension (Bakker & Demerouti 2014:1). It may also lead to exhaustion, burnout, physical and psychological illnesses (including cancer, allergies, heart disease, migraines, back problems, depression, etc.), and turnover intention (Jackson *et al.* 2006:265-266). JD-R Theory therefore assists us to better understand and explain employee well-being, and to make predictions about its relation to job performance (Bakker & Demerouti 2014:1).

Since earlier job design theories often have ignored the role of job stressors or demands, whilst job stress models have, to a great extent, ignored the motivating potential of job resources; JD-R theory combines these two research facets. It explains the unique and multiple effects of job demands and resources on both job stress and motivation (Bakker & Demerouti 2014).

Furthermore, the JD-R theory proposes reversed causal effects. Whilst burned-out employees may create more job demands for themselves over time, engaged workers mobilise their own job resources to remain engaged in their work (Bakker 2017b:Online; Bakker & Demerouti 2014). Figure 3.5 below presents a diagrammatic explanation of the Job Demands-Resources Model:

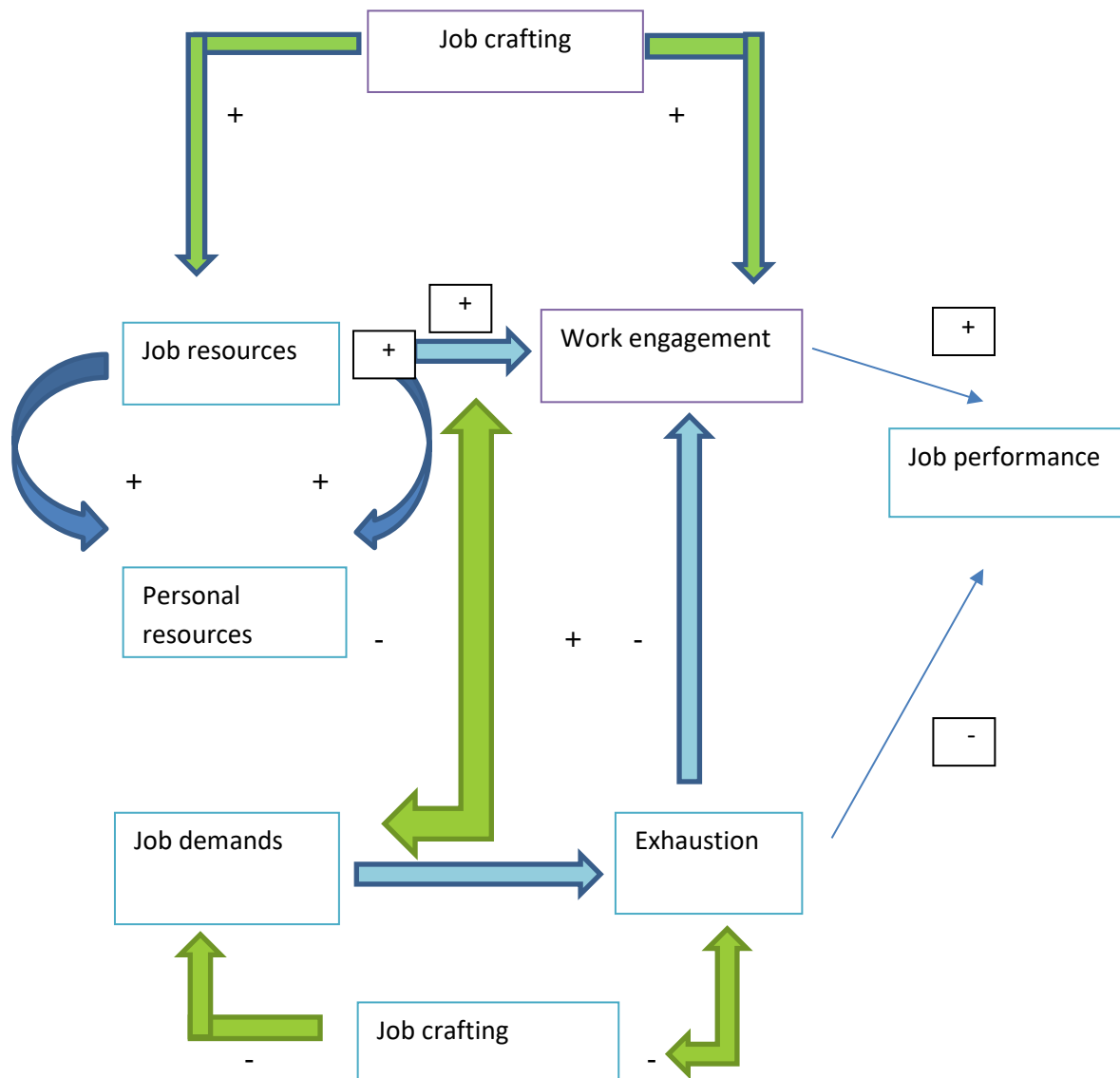


Figure 3.5 Job Demands-Resources Model (adapted from Bakker & Demerouti 2007).

Research indicates that the JD-R Model has been used, amongst others, to predict organisational commitment (Jackson *et al.* 2006); work enjoyment (Bakker, Van Veldhoven & Xanthopoulou 2010); work engagement (Bakker 2017b:Online; Bakker, Hakanen, Demerouti & Xanthopoulou, 2007; Hakanen, Bakker & Schaufeli 2006, OIM 2017:Online); burnout (Bakker & Demerouti 2007; Demerouti & Bakker 2011; Jackson *et al.* 2006); and connectedness (Lewig, Xanthopoulou, Bakker, Dollard & Metzger, 2007).

The JD-R Model also has been used to predict the consequences of these experiences, such as job performance (Bakker, Demerouti & Verbeke 2004) and absenteeism (Bakker, Demerouti, De Boer & Schaufeli 2003; Clausen, Nielsen, Gomes, Carneior & Borg 2012).

Since its establishment by Bakker and Demerouti (2006), the JD-R Model has matured into a theory that provides an understanding and explanation of employee well-being, and that also can assist in predicting employees' job performance, levels of engagement at work, and their well-being (Bakker & Demerouti 2014:4; Jackson *et al.* 2006:266). In terms of JD-R Theory, **job demands** were broadened to not only include the organisational, social and physical aspects of the job, but also psychological aspects of the job (e.g. time and work pressure, heavy workload, problems with computers, emotional demands, stressful working environment, role ambiguity, changes in tasks, etc.) (Bakker & Demerouti 2014:1). When huge effort is required to meet such demands from which the employee does not recover adequately, it may have negative effects on the employee (Bakker & Demerouti 2014; Meijman & Mulder 1998).

As indicated above, **job resources** are the physical, social, organisational and psychological aspects of the job that play an important role in reducing job demands, stimulating personal growth, learning and development (e.g. social support, strong work relationships, coaching and mentoring, supportive colleagues, feedback on performance, and time control), and meeting work demands (Bakker 2011, Bakker & Demerouti 2007, Bakker & Demerouti 2014). Thus, employees are more likely to experience greater levels of stress if job demands are high and resources are low (Bakker & Demerouti 2007). Job demands and job resources therefore involve both a process of diminishing health, versus a motivational process, which processes function independently (Bakker 2017a:Online). This entails that employees' effectivity is undermined in the absence of sufficient job resources, whilst sufficient job resources result in more engaged, motivated employees (Bakker 2017a: Online).

Every occupation may have its own causes of employee well-being, as well as some risk factors that are associated with job-related stress (Bakker & Demerouti 2007, Van Straaten 2014; Van Straaten *et al.* 2016). Thus, two simultaneous processes occur: High job demands drain employees' energy levels and exhaust their physical and mental resources, whilst sufficient job resources increase employees' engagement, organisational commitment and performance (Bakker & Demerouti 2007, Jackson *et al.* 2006:266; OIM 2017:1). For this reason, the JD-R Theory is able to predict organisational outcomes such as employees' turnover intentions and absenteeism levels (Bakker & Demerouti 2014:1).

More recently, personal resources were included in the JD-R Model and theory (Bakker & Demerouti 2014:2). Personal resources can be defined as the ability to control and impact on our environment; resiliency; and having positive self-evaluations, which are all interlinked (Bakker & Demerouti 2014:2). Higher personal resources within an individual result in higher levels of intrinsic motivation to pursue goals and perform, and in positive self-regard (Bakker & Demerouti 2014; Luthans & Youssef 2007). This concept of positive self-evaluations is linked with the concept of positivity within the Positive Psychology Theory (Seligman 1998) and Well-being Theory (Seligman 2011) (see 2.3.7.2; 2.3.8.3).

JD-R studies have consistently showed that employees perform best in resourceful, challenging environments (Bakker & Demerouti 2014:4). Hence, organisations, including SA public HEIs, should ensure that employees' jobs offer sufficient challenges and job resources (Bakker & Demerouti 2014:4). However, employees should also learn how to mobilise their own resources and should behave proactively in the form of job crafting (how employees change their environment so that they can make it more engaging and less exhausting) (Bakker 2017b: Online).

Furthermore, organisations should invest in their employees by offering them sufficient job training and capitalising on their strengths. This will enable them to cope better with work demands (Bakker & Demerouti 2014:8).

Possible JD-R programmes thus include (i) training; (ii) job crafting, (ii) job redesign and (iv) strength-based programmes – elements that employees need to look into in order to increase organisational effectiveness through increased employee well-being (Bakker 2017b:Online; Rabah 2015). Employers also need to identify and promote the job positives that act as a buffer between employees and their job demands. These include mentoring and coaching, training and development, regular feedback, and increased autonomy, to name but a few (Bakker 2017b:Online).

3.4.3.1 *Strengths, weaknesses and applicability of the JD-R Model for SA public HEIs*

It is extremely important for SA public HEIs to balance job demands with the resources supplied to perform the work. The JD-R Model can assist in predicting some of the negative effects related to employees' well-being, and emphasises positive self-regard and intrinsic motivation. Furthermore, it can be used by SA public HEIs as a tool for making predictions about employee well-being and job performance, engagement, burnout, absenteeism, turnover intentions, and more.

However, the JD-R Model does not focus on addressing employees' well-being with a whole-person approach (i.e. addressing all the building blocks of their well-being, namely physical, emotional, social, psychological, financial, spiritual, environmental, intellectual and occupational well-being), and in an integrated matter (see 2.4.1 to 2.4.9). It does specifically address physical, emotional, social, psychological, environmental and occupational aspects of the job, but it does not have a strong focus on aspects such as individuals' spiritual and financial well-being (see 2.4.5; 2.4.6), and their well-being beyond the workplace, and how this could be integrated with employees' work-place well-being (see 3.2).

In the next section, the Leisure and Well-being Model is discussed.

3.4.4 Leisure and Well-being Model

In earlier years, the primary focus of health and human services was on a reduction of deficits, or the elimination of problems experienced by people (Carruthers & Hood 2007:276). However, over time it has become clear that the elimination of deficits or problems alone does not necessarily result in healthy people, and that the strengths of individuals need to be utilised for them to thrive and experience optimal well-being (Seligman & Csikszentmihalyi 2000:12). This focus on ability, instead of disability, is also supported by Carruthers and Hood (2007), and the World Health Organization (WHO 2001).

The concept of creating a meaningful life was born despite limitations and challenges experienced. This led to the introduction of the Leisure and Well-being Model of Carruthers and Hood (2007). The Leisure and Well-being Model provides theoretical and empirical support for adopting well-being as the desired outcome of service (Carruthers & Hood 2007:276). Leisure can be described as the time when a person is not working or occupied, or simply as free time to do something you enjoy doing (English Oxford Living Dictionaries 2019: Online). Figure 3.6 below presents an illustration of the Leisure and Well-being Model:

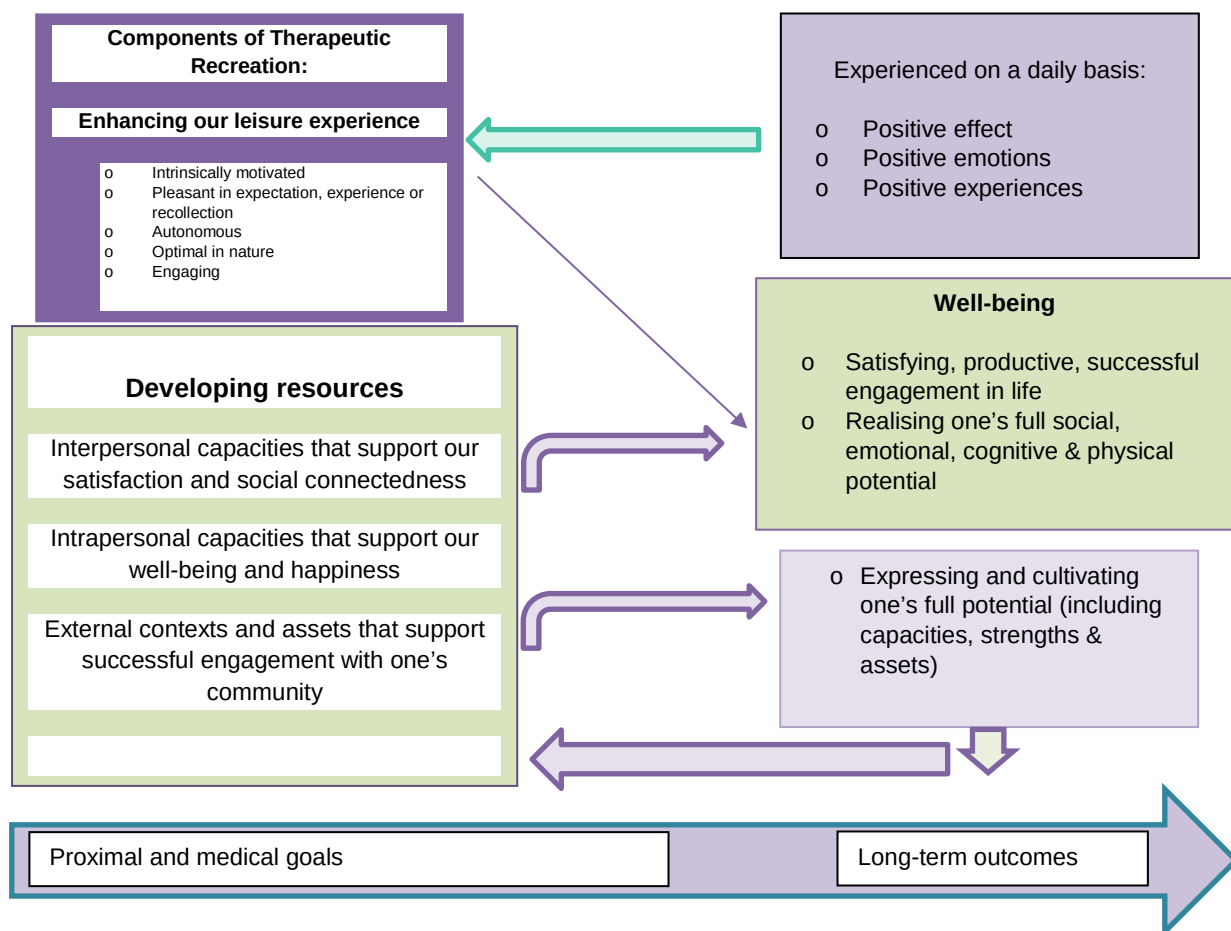


Figure 3.6 Dimensions of well-being guiding therapeutic recreation practice/leisure (adapted from Leisure and Well-being Model of Carruthers & Hood 2007:279)

In terms of the Leisure and Well-being Model, well-being can be described as a state of successful, satisfying and productive engagement with one's life. It entails a realisation of one's full potential at various levels (see Figure 3.6 above). The Model emphasises the importance of developing various resources (including psychological resources), which would assist one to perform optimally at work, but also to switch off from work after work, and to make time for the things you enjoy doing, which in turn would enhance your well-being. Leisure is therefore savoured. It should be authentic and practised mindfully, and in turn, it will produce positive effect, emotion and experiences, which will also extend to the workplace (Carruthers & Hood 2007:280).

Leisure, therefore, is regarded as a tool of cultivating and expressing one's full potential, and by doing so, establishing well-being (Carruthers & Hood 2007:281) (see Figure 3.6 above).

Therapeutic Recreation (TR) plays an important role in supporting people to live a meaningful life, despite the challenges and limitations that life presents (Carruthers & Hood 2007:277). The focus on leisure experiences links directly, both empirically and theoretically, with well-being - especially the concepts of positive emotions and developing one's full potential. Hence, the Leisure and Well-being Model shows a resemblance with Seligman's PERMA Well-being Model, which also emphasises the requirement of positive emotions and accomplishment for a person's well-being (Carruthers & Hood 2007:276). As such, the Leisure and Well-being Model embraces the unique context and experience of leisure (also referred to as therapeutic recreation) as a means to achieve one's goals and potential (Carruthers & Hood 2007:276-277).

Researchers (Anderson & Heyne 2012; Passmore 2003) illustrate how leisure experiences can support the development of a sense of overall competency, as well as the development of specific competencies. Newman, Tay and Diener (2014:555-578) identified leisure as an important component for overall well-being, and they developed a conceptual model that establishes a clear link between leisure and subjective well-being. To explain the effects of leisure on SWB, they conducted a quantitative summary of theories from a number of research articles linking leisure and SWB. Based on their research findings, Newman *et al.* (2014) proposed five important psychological mechanisms that are triggered by leisure, and that promote leisure SWB: detachment-recovery, autonomy, mastery, meaning, and affiliation (Newman *et al.* 2014:565-570). These psychological mechanisms promote leisure SWB, which in turn enhances global SWB (Newman *et al.* 2014:571). However, it is evident that more research should be conducted to understand the interplay between leisure and SWB.

3.4.4.1 *Strengths, weaknesses and applicability of Leisure and Well-being Model for SA public HEIs*

It is critical for employers, including SA public HEIs, to explore ways of incorporating leisure as a means of enhancing employees' lives in a meaningful manner (see 2.4.8; 2.4.9). Organisations should do more to include fun and leisure events in their employee well-being programmes, as employees need to learn how to relax, also when performing their work (see 3.2.2).

Whilst it is extremely important for SA public HEIs to realise the importance of leisure for their employees' well-being, and although leisure and therapeutic recreation are regarded as important components of employee well-being, and this also relates to employees' physical, social and environmental well-being (see 2.4.1; 2.4.4; 2.4.7), the Leisure and Well-being Model does not address some important dimensions of employee well-being, for example financial, spiritual, intellectual and occupational well-being (see 2.4.5 - 2.4.6; 2.4.8; 2.4.9). Hence, it is not regarded as an effective, holistic, integrated model for application by SA public HEIs, although SA HEIs should incorporate the element of leisure in their well-being programmes.

The Leisure and Well-being Mode has a strong focus on individual well-being, but also emphasises the importance of establishing social connectedness and social networks, as well as community engagement (see 2.4.4). It therefore succeeds in emphasising the interconnectedness of different role-players in one's well-being.

In the next section, Seligman's Well-being Model (PERMA) is discussed in detail.

3.4.5 PERMA Well-being Model

In an attempt to measure people's overall well-being, the concept of positive psychology was developed by Martin Seligman in 1998. At the time, Seligman was the President of the American Psychological Association (Fredrickson 2003:330). Seligman presented the view that positive psychology is all about human well-being, and that it involves more than happiness (Seligman 2011:13) (see 2.3.8.3).

The goal of Positive Psychology is to build a positive spiral of emotion and action in people that energises and empowers them for the opportunities and challenges that life presents, and which increases their positive emotions, beliefs and capacities (Fredrickson 2001; Peterson & Seligman 2003). Since the concepts of the positive psychology theory and well-being theory were discussed extensively in Chapter 2 (see 2.3.7.2; 2.3.8.3), I shall only briefly touch on the main focus of the PERMA Well-being Model in this section.

In his PERMA Model of Well-being Seligman (2011) identified the following measurable building blocks of well-being, namely **P**ositive emotions, **E**ngagement, **R**elationships, **M**eaning and purpose, and **A**ccomplishment (Seligman 2011:16)(see 2.2.8.3), as illustrated below:



Figure 3.7 Seligman's PERMA well-being model (Adapted from Seligman 2011:16)

Seligman's Well-being Model entails that each of the elements of his PERMA Model must contribute to well-being; should be pursued for its own sake; and should be defined as well as measured independently from the other elements (Seligman 2011:17). Thus, his well-being theory measures human well-being in terms of having positive emotions; living an engaged life; meaningful relationships; living a meaningful, purpose-driven life; and accomplishing the goals a person sets for him-/herself in life (Seligman 2011:24) (see 2.2.8.3).

It is clear from research (Snyder, Lopez & Pedrotii 2011; Csikszentmihalyi 2000, Cooperrider & Whitney 2005) that, over the past two to three decades, there has been a move away from negative emotions and their effect on people's well-being, to the positive effects of positive emotions on people's well-being – the so-called Positive Psychology (see 2.3.7.2).

Since its birth in 1998, Positive Psychology has grown tremendously, and it influences therapeutic practices globally (Seligman *et al.* 2005:5) (see 2.3.7.3; 2.3.8.3). Positive psychology is becoming more important in our society, where there is much emphasis on enabling both people and societies to flourish (Huppert & So 2013; Seligman & Csikszentmihalyi 2000). As a result, employers – including SA public HEIs - should turn their focus on establishing environments and enablers for their employees to flourish; that is, where employees can be fulfilled, content, satisfied, full of hope and optimistic about the future, and where they are able to '*flow*' – that is, to become one with and engaged in the moment (Seligman & Csikszentmihalyi 2000:5) – so much so that their work becomes a joy, and not a burden (see 2.3.3).

3.4.5.1 Strengths, weaknesses and applicability of PERMA Model of Well-being for SA public HEIs

The PERMA Model of Well-being is regarded as an effective umbrella approach towards employee well-being. Its positive, strength-based approach to human well-being is highly relevant within SA public HEIs, as it emphasises the concept of human flourishing at various levels (see 2.2.4). The principles of the PERMA Model of Well-being therefore can be used as a basis for SA public HEIs to identify their strengths in terms of their well-being efforts, and how to build on those strengths. This also links with the principles of the Appreciative Inquiry Theory (see 2.3.7.1), and my synthesis of integrated well-being theory (see 2.3.9).

The PERMA Model addresses most of the building blocks of well-being, namely emotional, psychological, social, spiritual, intellectual, environmental and occupational well-being, but does not specifically address the aspects of employees' physical and financial well-being (see 2.4.1; 2.4.6). Furthermore, it emphasises the fact that each

element of the PERMA Model should be pursued individually (see 2.3.8.3), whilst an integrated approach to well-being requires a focus on each dimension of well-being individually, but also collectively and in an integrated manner (see 3.1.2). The principles of the PERMA Model thus may be applied within SA public HEIs, but should be extended to include the elements of physical and financial well-being, and to include an integrated approach to employee well-being.

In the next section, the Diamond Model of Integrated Health and Well-being is discussed.

3.4.6 Diamond Model of Integrated Health and Well-being

The Diamond Model of Integrated Health and Well-being was designed by a company called Synergy At Work in 2017 (Synergy at Work 2018:Online). The model presents a structural and conceptual framework for the design and implementation of a strategic employee health initiative. It is aimed at assisting organisations to establish a work environment where employee well-being forms is at the core of the company's culture.

The Diamond Model of Integrated Health and Well-being identifies ten facets of health, which can be optimised at both individual and organisational levels. The model emphasises that an integrated approach to employee health is required, and that it should include *“strategies and resources that provide information, programs, and support in the workplace environment to encourage the practice of healthy habits both at work and at home”* (Synergy At Work 2018:3). Below is a diagrammatic presentation of the Diamond Model of Integrated Health and Well-being, with its ten dimensions of well-being illustrated:

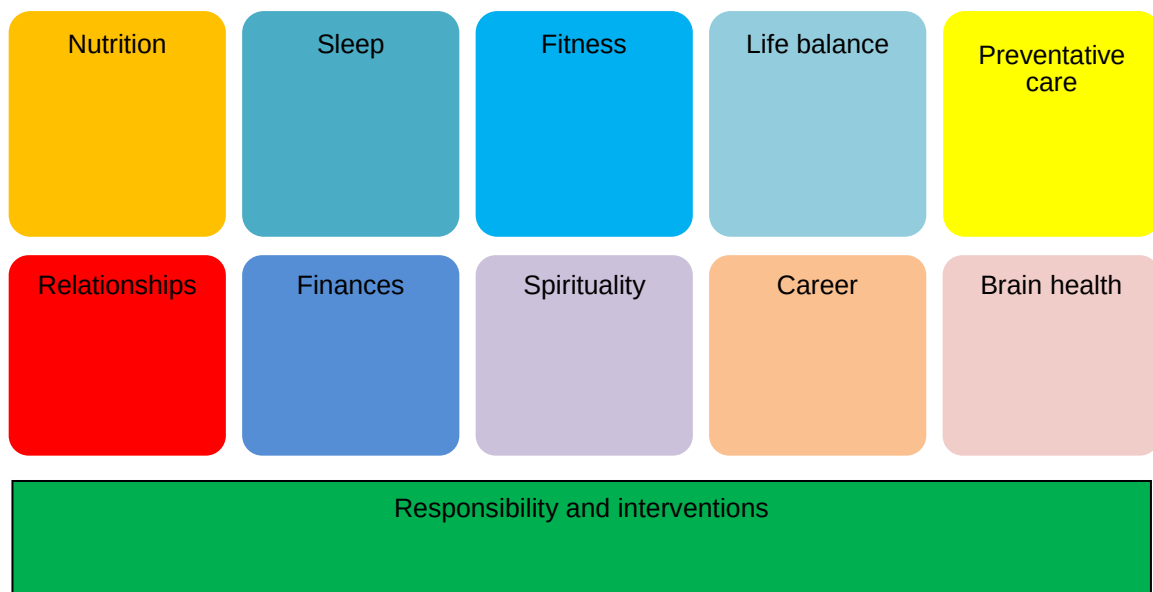


Figure 3.8 The Diamond Model of Integrated Health and Well-being (adapted from Jing 2016: Online)

In terms of the Diamond Model of Integrated Health and Well-being, the elements of employee health and well-being are identified as nutrition, sleep, fitness, life balance, preventive care, relationships, finances, spirituality, career and brain health (Jing 2016:Online). The model thus emphasises aspects related to employees' physical, social, financial, spiritual, intellectual and occupational well-being (see 2.4.1; 2.4.4; 2.4.5; 2.4.6; 2.4.8; 2.4.9). Furthermore, it does emphasise that there should be integration among these dimensions of well-being, in order to effectively address employees' well-being (Synergy At Work 2018: Online).

Finally, the Diamond Model of Integrated Health and Well-being is built on the notion that whilst employers should provide resources and strategies aimed at the improvement of employees' well-being, employees also should take responsibility and be accountable for their own well-being by actively participating and utilising the programmes and resources made available to them by their employer (Synergy at Work 2018:4) (see 2.3.8.3; 2.4.2; 3.2.24; 2.5).

3.4.6.1 *Strengths, weaknesses and applicability of the Diamond Model of Integrated Health and Well-being for SA public HEIs*

The company (Synergy At Work) that designed the Diamond Model of Integrated Health and Well-being assists employers in designing and implementing customised health initiatives, but it is often a costly exercise for employers. Due to the fact that SA public HEIs have limited financial resources available in these times of demands for free higher education and reduced subsidy from Government, they should rather improve their own employee well-being efforts. All SA public HEIs have dedicated HR and wellness offices, and these should be optimised to address employee well-being effectively.

Furthermore, the Diamond Model of Integrated Health and Well-being does not address the dimensions of emotional, psychological and environmental well-being, which are regarded as important dimensions of employees' well-being (see 2.4.2; 2.4.3; 2.4.7). The model therefore does not provide a holistic approach to employee well-being, and therefore is not viable for implementation by SA public HEIs, especially in these difficult times of limited financial resources available for SA public HEIs.

In the next section, the Effort-Recovery Model is discussed.

3.4.7 Effort-recovery Model

Earlier research on occupational health and well-being has been dominated by studies with a focus on the negative side of well-being, including stress and burnout at work (Schaufeli & Bakker 2004) (see 2.3.8.3). The strain process has received much more attention than the positive side of it, namely how employees may keep themselves well-functioning and healthy (Pennoen 2011). Researchers came to realise the benefits of studying positive psychological consequences (Fredrickson & Losada 2005; Dunn & Dougherty 2008).

However, there is no doubt that the work environment has become much more challenging over the past few decades. Knowledge has increased, and information is freely available. These factors contribute to making the work life more demanding and competitive (Pennonen 2011). Härmä (2006) points out that technological advances have made it possible to work almost anywhere and anytime (Pennonen 2011; Tammelin 2018). As a result, today's work environment often is without boundaries in terms of fixed procedures, a single workplace, office hours, and limited responsibility, to name but a few (Allvin, Aronsson, Hagstrom, Johansson & Lundberg 2011; Jacobs & Winslow 2004; Pennonen 2011). Working overtime and performing work-related duties at home have become the norm and affect the overall health and well-being of employees (Lehto & Sutela 2008; Pennonen 2011; Tammelin 2018).

Geurts and Sonnentag (2006) point out the importance of the process of recovery that needs to occur, and which allows employees to both retain and replenish their resources. For this reason, the time an employee devotes to leisure time after work - when recovery mainly occurs - becomes significant (Geurts & Sonnentag 2006) (see 3.4.4). Recovery from work stress is vital, as strain reactions will accumulate, followed by health problems in the long term, if recovery does not take place sufficiently (Meijman & Mulder 1998; Pennonen 2011).

In 1998, Meijman and Mulder developed the Effort-recovery Model, with the aim of presenting a framework for maximising recovery processes. The various definitions of recovery provided by researchers such as Demerouti, Bakker, Geurts and Taris (2009), and Geurts and Sonnentag (2006) have in common that recovery is regarded as the process that takes place when the demands that are imposed on an individual which causes stress, are no longer present (Meijman & Mulder 1998:5). In their model, Meijman and Mulder point out that, during the recovery process, an individual's functioning returns to its pre-stressor level, and strain (stress) is consequently reduced (Meijman & Mulder 1998:12). This causes the individual to feel capable and ready to continue with his or her current work demands, or to meet new demands (Meijman & Mulder 1998; Sonnentag & Geurts 2009; Sonnentag & Zijlstra 2006).

The Effort-recovery Model thus shows similarities with the Leisure and Well-being Model (see 3.4.4). Apart from recovery experiences, work characteristics and off-the-job activities are vital antecedents for maintaining the need for recovery over time. Hence, employees should search for situations and opportunities where they can optimise their recovery experiences and consequently maximise their recovery processes (Pennonen 2011).

Below is a diagrammatic presentation of the Effort-recovery Model of Well-being:

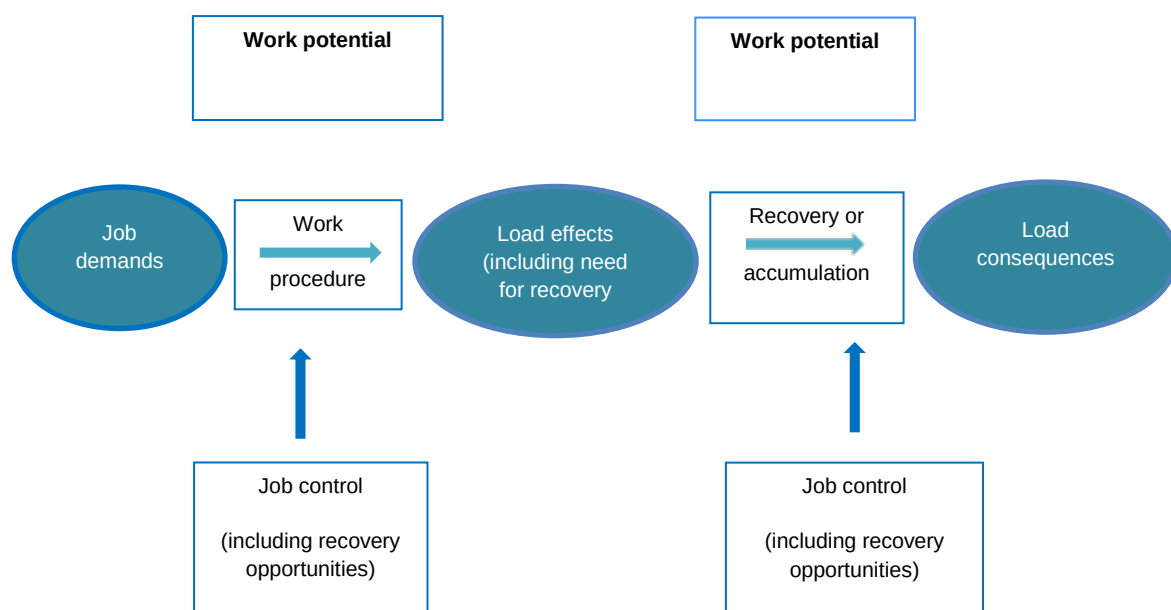


Figure 3.9 Effort-recovery Model of Well-being (adapted from Meijman & Mulder 1998:124)

3.4.7.1 Strengths, weaknesses and applicability of the Effort-recovery Model applicable for SA public HEIs

Although the importance of recovery from work is recognised as vital, and supported by researchers such as Csikszentmihalyi and Seligman in their concept of “flow” (2002), the Effort-recovery Model fails to present an integrated, holistic approach to employee well-being. It does address dimensions of employees’ physical, emotional, psychological, environmental and occupational well-being, but fails to specifically address their financial, spiritual and intellectual well-being. Hence, the Effort-recovery

Model is not regarded as an effective, integrated model of well-being for application by SA public HEIs.

In the next section, the Present, Past and Prospect Model of Subjective Well-being is discussed.

3.4.8 Present, Past and Prospect (Future) (3-P) Model of Subjective Well-being

Empirical research on subjective well-being has resulted in a range of theories, components and measures for subjective well-being (see 2.3.1-2.3.9; 2.4.1-2.4.9). The Present, Past and Prospect (Future) 3-P Model of Subjective Well-being (SWB) (Durayappah 2011) presents the components of subjective well-being under the temporal states of the present, future and past (Durayappah 2011:680). The Present involves aspects such as optimism, anticipation and purpose; the Prospect (Future) includes aspects related to flow (Csikszentmihalyi 1990), positive emotions (Keyes 2002; Seligman 2011) and self-determination (Ryan & Deci 2000); whilst the Past includes aspects related to meaning and reminiscing gratitude (Durayappah 2011:681). The 3-P Model illustrates that each of these states (present, prospect and past) are related to the other states, and it emphasises that each state is important for purposes of evaluating subjective well-being.

Furthermore, the 3-P Model illustrates that subjective well-being is affected by cognitive biases, which in turn affects evaluations of the temporal states and meta-biases; and, which in turn, affects global evaluations of life satisfaction (Durayappah 2011:681). An individual's happiness, emotions, mood, cognitive biases and time perspective will therefore have an influence on his/her subjective well-being (Diener, Suh, Lucas & Smith 1999). For this reason, well-being programmes should address an individual's temporal preferences to counteract certain biases (Durayappah 2011:681). Figure 3.10 below provides a graphic presentation of the 3-P Model of Subjective Well-being.

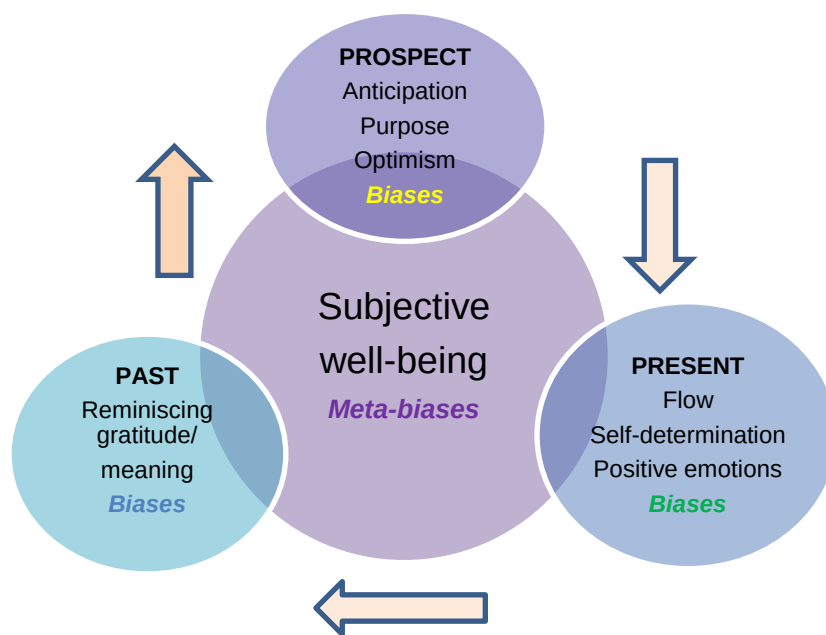


Figure 3.10 3P-Model of Subjective Well-being (adapted from Kim-Prieto, Diener, Tamir, Scollon & Diener 2005)

Recently, Kim-Prieto, Diener, Tamir, Scollon & Diener (2005) incorporated temporal components into a framework for subjective well-being. According to their framework, subjective well-being (SWB) is regarded as an outcome of one's experience of an event, one's reactions to the event, how you recall that event, how these factors influence one's global judgement of your life, and ultimately, your level of life satisfaction (Kim-Prieto *et al.* 2005:266).

3.4.8.1 Strengths, weaknesses and applicability of the Present, Past and Prospect Model (3-P Model) of Subjective Well-being for SA public HEIs

The 3-P Model of Subjective Well-being adds value to the domain of psychology and the factors affecting one's subjective well-being and can be used as a guide to direct further SWB research. According to Durayappah (2011:681), a subjective well-being model should be inclusive and account for other theories and research on SWB. Thus, the 3-P Model of Subjective Well-being illustrates the importance of the influence of

biases, as well as the present, past and prospect (future) on one's subjective well-being. It also points to the fact that each state (present, past or future) is connected to the other states, and therefore succeeds in projecting the dimensions of subjective well-being as being interlinked with one another (see 2.2.5).

However, the 3-P Model of Subjective Well-being fails to address specific factors that impact on employees' well-being such as income (financial well-being) (Diener *et al.* 1999), health (physical well-being), social, spiritual, intellectual and occupational factors. Hence, it is not regarded as a suitable model for application as an integrated well-being programme addressing all the building blocks of well-being of employees of SA public HEIs (see 2.4.1 - 2.4.9).

The section below contains a discussion of the Circumplex Model of Occupational Well-being.

3.4.9 Circumplex Model of Occupational Well-being

The Circumplex Model of Occupational Well-being was developed by Russel in 1980 to determine levels of subjective well-being, by classifying different emotional states based on arousal and pleasantness (Warr 1994). Recently, it has also been applied in the occupational health psychology context (Jones & Griep 2018). Researchers such as Bakker and Oerlemans (2011) applied the model to the workplace. They argue that four different states of occupational well-being (burnout, workaholism, work engagement and job satisfaction) can be placed in the two-dimensional space of activation and valence (pleasure) (Jones & Griep 2018; Mäkikangas, Rantanen, Bakker, Kinnunen, Pulkkinen & Kokko 2015).

Occupational well-being has been classified in a similar manner to subjective well-being, by classifying different emotional states based on arousal and pleasantness (Russell 1980; Warr 1994). In the work context, the Circumplex Model of Occupational Well-being has been applied through an integration of work-related well-being indicators such as burnout, workaholism, work engagement and job satisfaction (Bakker & Oerlemans 2011). These four concepts of occupational

well-being represent different states of arousal and pleasantness that, in turn, can describe the multifaceted nature of employee well-being (Bakker & Oerlemans 2011)(see 2.3.4). For instance, work engagement is characterised by pleasure and activation, whilst workaholism involves a compulsive drive to work extremely hard, and is characterised by high activation and displeasure (Mäkikangas *et al.* 2015). Job satisfaction, on the other hand, is characterised by pleasure (positive feelings about work) and activation, whilst burnout is characterised by displeasure and de-activation (Bakker & Oerlemans 2011; Jones & Griep 2018). Thus, the main focus of the Circumplex Model of Occupational Well-being is on improving employee engagement and job satisfaction. Figure 3.11 below provides a schematic presentation of the Circumplex Model of Well-being.

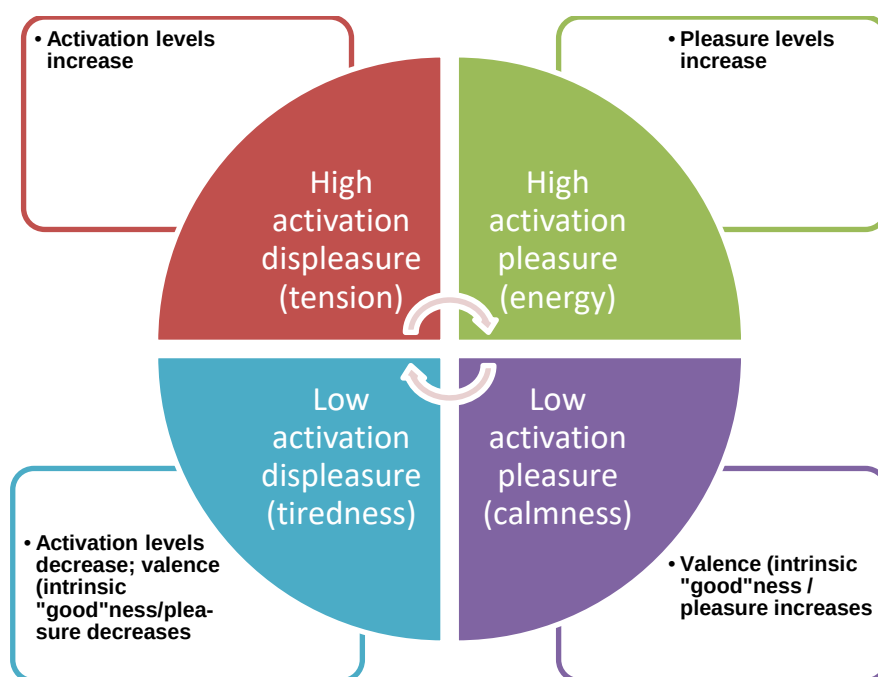


Figure 3.11 The Circumplex Model of Well-being (adapted from Russel 1980 & Warr 1994)

3.4.9.1 *Strengths, weaknesses and applicability of the Circumplex Model of Occupational Well-being for SA public HEIs*

Although it is very important to have satisfied, engaged employees, as opposed to workaholics and burned-out employees, the Circumplex Model of Occupational Well-being does not encompass all the building blocks of well-being as identified from the literature (see 2.4.1 - 2.4.9). Its focus on pleasure versus displeasure addresses aspects such as physical, emotional, social, environmental and occupational well-being, but not the psychological, spiritual, financial and intellectual dimensions of well-being. Thus, it fails to address well-being holistically and in an integrated manner.

The section below entails a discussion of the Britain's Healthiest Company for 2017, and its approach to employee well-being.

3.4.10 Nomura's Health and Well-being Framework

Each year, Britain launches a competition for an award for the healthiest company. This award goes to the company that is regarded as valuing the health and well-being of its employees best. In this competition, the health of both the workplace and the workforce is evaluated comprehensively. Lifestyle, environmental, behaviour and clinical risk factors across the employee population are considered, as well as the company's policies, practices and facilities that might have a direct influence on employees' health and well-being. Those companies performing best in the contest for the awards have a 24 % lower cost of lost productivity (associated with absenteeism and presenteeism) (Hudson 2017:2).

Nomura, an asset management company, was the winner of this award in 2017. Nomura's Health and Well-being Framework promotes an integrated approach to employees' physical well-being. Their well-being framework also addresses employees' social, financial and environmental well-being (Hudson 2017:4). Nomura's Health and Well-being Framework since 2010 can be presented as follows schematically:

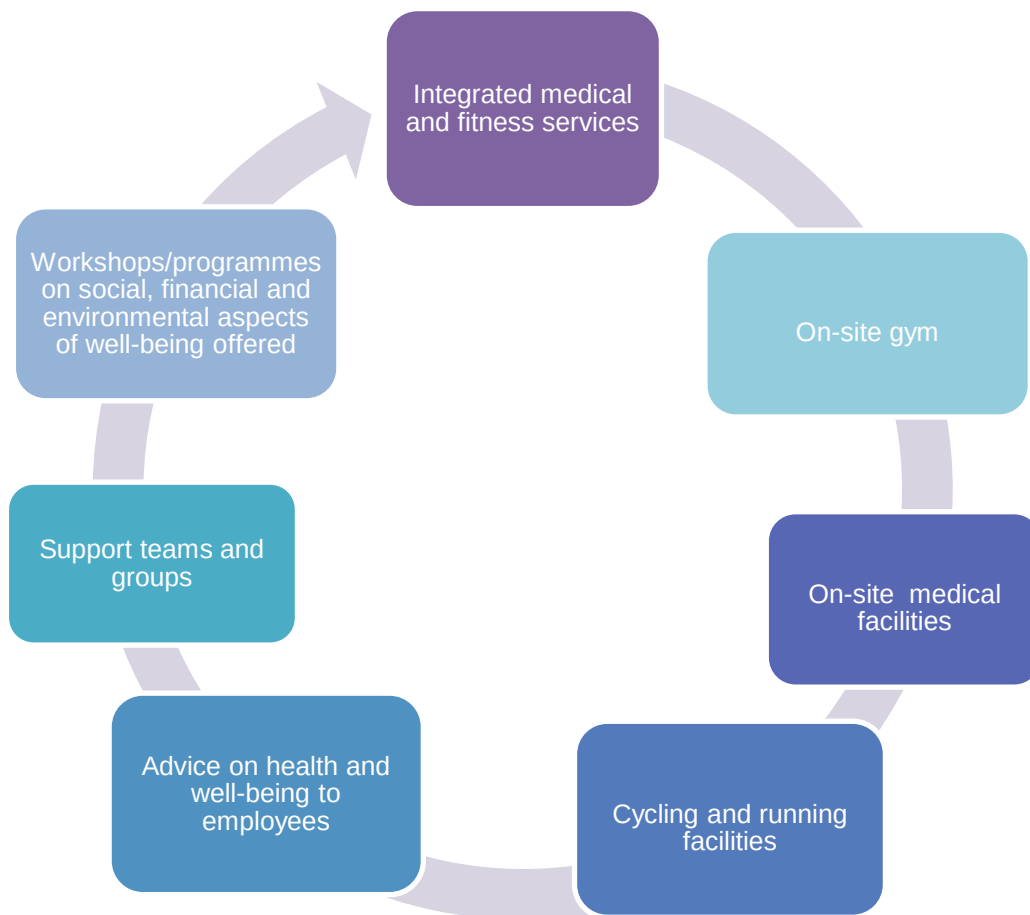


Figure 3.12 Nomura’s Health and Well-being Framework (adapted from Nomura 2017: Online)

Nomura offers integrated medical and fitness services such as an on-site gym; on-site medical facilities; cycling and running facilities; and advice on health and well-being to their employees (such as advice on anti-ageing, back care, blood sugar, digestive health, healthy eating, a healthy heart, hydration, immunity, muscles and joints, and portion control) (Hudson 2017:8). It is evident from this list that the company has gone the extra mile to improve especially the physical well-being of its employees in an integrated manner. Workshops and programmes related to employees’ social, financial and environmental well-being are offered too.

3.4.10.1 *Strengths, weaknesses and applicability of Nomura's Health and Well-being Framework for SA public HEIs*

Although Nomura's efforts to improve the health of its employees are noteworthy, their Health and Well-being Framework is found lacking in terms of promoting employees' emotional, psychological and spiritual well-being (see 2.4.2 - 2.4.4). Hence, their model is not regarded as suitable for application by SA public HEIs, as it does not offer a holistic, integrated approach to employees' well-being (see 2.4.10).

Since this study is aimed at addressing the well-being of employees of SA public HEIs, I have searched for best practice globally in terms of employee well-being models applied within higher education institutions. No information on generic or individualised well-being models applied by SA public HEIs could be found in the literature. However, some related to overseas HEIs were found, and are discussed in sections 3.4.11 to 3.4.13 below.

3.4.11 University of Minnesota's Well-being Model

The University of Minnesota defines well-being as "a state of balance or alignment in body, mind, and spirit", during which we feel connected to our purpose, other people, and society, and we are energised, resilient and full of peace – in other words, we are flourishing (Bakken 2018:Online).

The University of Minnesota's Well-being Model was designed in 2012 by Mary Jo Kreitzer, the Director of the Center for Spirituality and Healing at the University of Minnesota (Kreitzer 2012). It can be illustrated as follows:



Figure 3.13 University of Minnesota's Well-being Model (adapted from Kreitzer 2012:708)

The model consists of six interconnected dimensions that contribute to well-being, namely health, security, relationships, community, purpose, and the environment (Kreitzer 2012:708; University of Minnesota 2016:Online; Bakken 2018:Online).

The model emphasises that we are both interconnected with and interdependent on our communities, friends, families, and on personal and inclusive environments. Furthermore, it emphasises the importance of safety (physical well-being) and having a purpose in life (spiritual well-being) (Bakken 2018:Online; Kreitzer 2012:708-709). As such, it addresses five of the nine dimensions of well-being that emerged from the literature (see 2.4.1 - 2.4.9).

3.4.11.1 *Strengths, weaknesses and applicability of the University of Minnesota's Well-being Model for SA public HEIs*

The University of Minnesota's Well-being Model addresses aspects related to employees' physical, social, emotional, spiritual and environmental well-being, and the importance of following an integrated approach to employee well-being (see 2.4.1 - 2.4.4; 2.4.6; 2.4.10). However, it does not address the dimensions of psychological, financial, intellectual and occupational well-being (see 2.4.3; 2.4.5; 2.4.8 - 2.4.9), and therefore it is not considered as a holistic employee well-being model suitable for application within SA public HEIs. Its focus on the importance of living a meaningful life, however, is noteworthy, as it is linked to concepts of positive psychology and Seligman's PERMA model of well-being (see 2.3.8.3; 2.3.4).

In the section below, the University of Brighton's Integrated Well-being Model is discussed.

3.4.12 *University of Brighton's Integrated Model of Well-being*

The University of Brighton initially focused on and followed a preventative approach to mental health (Marshall & Morris 2011). The university then realised that well-being entails more than merely mental health. It then aimed at addressing the well-being of both its employees and students in an integrated manner, utilising an integrated model of well-being, focusing on mental, physical, social, emotional, spiritual and academic well-being (Marshall & Morris 2011:12). The model is illustrated in Figure 3.14 below:

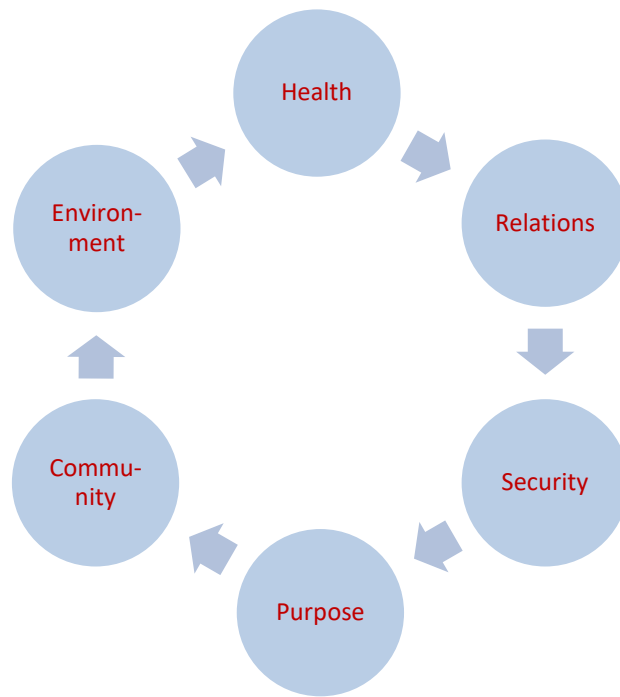


Figure 3.14 University of Brighton's Integrated Model of Well-being (adapted from Marshall & Morris 2011)

The University of Brighton became part of the network of Health Promoting Universities worldwide, and is committed to the incorporation of health promotion principles and values into its vision, mission and strategic plans, and to test different well-being approaches to determine the best approach for its students, employees, community, and society at large (Marshall & Morris 2011:36-37).

The University of Brighton has partnered with primary care mental health practitioners, the YMCA (Young Men's Christian Association) and teams providing talking therapy sessions, in an attempt to enhance the well-being of its employees and students (Hiller 2018:1). The university has done much, in an integrated manner, to promote the well-being of its employees and students and should be applauded for those efforts. However, some shortcomings were identified in its Integrated Model of Well-being. These are pointed out in the section below.

3.4.12.1 *Strengths, weaknesses and applicability of the University of Brighton's Integrated Model of Well-being for SA public HEIs*

The strength of the University of Brighton's Integrated Model of Well-being lies in its integrated approach to employee well-being, and that the university has established partnerships with primary care mental health practitioners, the YMCA and teams providing talking therapy sessions to enhance the well-being of its employees. Its well-being model addresses seven of the nine dimensions of well-being identified in the literature (i.e. mental, physical, social, emotional, spiritual, environmental, intellectual and occupational well-being), but fails to address employees' psychological and financial well-being (see 2.4.1 - 2.4.9).

However, being a part of the network of Health Promoting Universities (HPUs) is to the benefit of the university, as it would learn from best practice applied by other universities, and continue to improve on its well-being aim. Becoming a part of the HPU network also points to the university's commitment to enhance the well-being of its employees. The concept of Health Promoting Universities is discussed in detail in section 3.5 below. South African public HEIs should consider becoming a part of the network of HPUs, as they could learn from best practice applied globally in terms of integrated employee well-being programmes.

In the section below, the University of Birmingham and Health Exchange's Workplace Well-being Programme is discussed.

3.4.13 *University of Birmingham and Health Exchange's Workplace Well-Being Programme*

The University of Birmingham and a company by the name of Health Exchange studied workplace well-being programmes and their impact on organisations. Ensuing from their research, they released a report titled *Workplace wellbeing programmes and their impact on employees and their employing organisations: A scoping review of the evidence base*, authored by Carmichael *et al.* (2014), containing a proposed Workplace Well-being Programme. Their Workplace Well-being Programme

addresses the promotion of physical health at work (nutrition, physical activity, smoking cessation and prevention of musculoskeletal disorders), safety in the workplace, and mental health and well-being (Carmichael *et al.* 2014:31). These authors emphasise that a healthy workforce should be an ethical priority for organisations, and that it would benefit them materially as a result of increased productivity and reduced costs linked to absenteeism, presenteeism, illness and injuries (Carmichael *et al.* 2014:31) (see 3.2.24; 3.3).

Furthermore, the University of Birmingham and Health Exchange's well-being approach emphasises that workplace well-being programmes should be evaluated systematically, and a cost-benefit analysis of such programmes need to be done, for businesses to determine how they could benefit economically from investing in their employees' health and well-being (Carmichael *et al.* 2014:32) (see 3.2.24). The University of Birmingham and Health Exchange acknowledge that more research should be undertaken to identify more affordable employee well-being interventions (Carmichael *et al.* 2014:32) (see 3.2.10).

3.4.13.1 *Strengths, weaknesses and applicability of the University of Birmingham and Health Exchange's Workplace Well-being Programme for SA public HEIs*

Although the University of Birmingham and Health Exchange's Workplace Well-being Programme addresses the promotion of physical health at work, safety in the workplace, and employees' mental health and well-being, it fails to address the dimensions of well-being related to employees' emotional, social, financial, spiritual and intellectual well-being (see 2.4.2; 2.4.4; 2.4.5; 2.4.8). It is therefore not regarded as an all-encompassing, integrated well-being programme applicable for use by SA public HEIs, although it is regarded as valuable in addressing especially employees' physical, environmental, mental and occupational well-being (see 2.4.1; 2.4.3; 2.4.6; 2.4.9).

Of the thirteen best practice workplace well-being programmes researched, no evidence was found of a comprehensive, integrated model, framework or programme that addresses **all the building blocks of employee well-being** (i.e. physical, emotional, social, psychological, financial, spiritual, environmental, intellectual and occupational well-being) (see 2.4.1 - 2.4.9). Furthermore, only a few of these programmes addressed their employees' well-being in an integrated manner. This proves that there is a need for such an integrated employee well-being framework or programme worldwide, and also within SA public HEIs, that would address all the building blocks of employees' well-being, as identified from the literature in an integrated manner.

In the next section, the role of higher education institutions in promoting the health and well-being of individuals, communities and societies is discussed in more detail.

3.5 THE ROLE OF HEIs IN PROMOTING THE HEALTH AND WELL-BEING OF INDIVIDUALS, COMMUNITIES AND SOCIETIES

Employees' health and well-being are critical for achieving business results and strategic outcomes (MHF 2016:2). Since HEIs play a significant role in the development of communities, individuals and societies, they have a responsibility to provide

“transformative education, engage the student voice, develop new knowledge and understanding, to lead by example and advocate to decision-makers for the benefit of society” (Okanagan Charter 2015:6) (see 3.5).

HEIs are well positioned in the emergent knowledge society to generate and share knowledge, as well as their research findings, to benefit the well-being of citizens and their communities (Okanagan Charter 2015:6). Davies and Hall (2011) and Hall, Ramm and Jeffery (2011) emphasise that universities must create health-promoting environments that will encourage and enable employees to realise their dreams, satisfy their needs and cope with the challenges of life.

In 1995, the concept of Health Promoting Universities (HPU) was established by the University of Central Lancashire (UCLan) (Okanagan Charter 2015). The Okanagan Charter was developed as a result of the 2015 International Conference on Health Promoting Universities and Colleges held on the University of British Columbia's Okanagan campus (Okanagan Charter 2015:1). The charter emphasises that individuals and their environments are interconnected, and that health is an outcome of how people live at home, the workplace, and beyond (Okanagan Charter 2015:4).

The Charter further emphasises that a holistic, proactive and positive approach to health is required, and that organisations should look beyond individual behaviour towards environmental and social programmes that promote the health and well-being of employees in organisations (Okanagan Charter 2015:6). Thus, health promotion becomes the responsibility of all sectors and organisations that want to make a positive contribution towards people's health and well-being, whilst recognising that "people, places and the planet are interdependent" (Okanagan Charter 2015:6).

The Okanagan Charter states that HEIs are to incorporate health promotion principles and values into their strategic plans, as well as their vision and mission statements. (Okanagan Charter 2015:2). By infusing health into everyday operations and practices, HPUs will enhance the success of HEIs, the well-being of their employees, students, and their communities, and by doing so, will enhance the sustainability of communities and society (Okanagan Charter 2015:2).

HEIs play a critical role in the development and transformation of individuals, communities and societies. As such, they can make a positive contribution towards the well-being of their employees and the communities they serve. Universities should therefore create environments that promote the health and well-being of their employees (Okanagan Charter 2015:6).

The HPU concept is a whole-organisation approach (Davies & Newton 2011). A holistic and whole-organisation approach to employees' well-being renders both effective and sustainable results (Marshall and Morris 2011). It reiterates that the health and well-being of employees are influenced by universities' operations, ethos,

culture and policies (Davies & Newton 2011; Hall *et al.* 2011). Consequently, the HPU initiative is aimed at integrating both structures and processes within a university's culture, towards the improvement of their employees' health and well-being. Furthermore, the initiative promotes the health and well-being of employees, students and the wider community. In 2010, more than 100 universities worldwide already formed part of the global HPU network (Davies & Newton 2011).

From the above, it is evident that the many universities that form part of the HPU global network value their employees' well-being, and have realised the role that universities have to play in terms of the holistic health and well-being of their students, employees, communities, and society. Furthermore, they value a proactive approach to health and well-being. It is therefore disturbing that no evidence could be found that any of the SA public HEIs have become an affiliate of the HPU network. Such participation should be encouraged among SA public HEIs, as it could benefit these organisations and their employees.

The WHO supports the principle of HPUs, and designed a framework for HPUs, which is based on the principles of the WHO's Ottawa Charter for Health Promotion (1986). The aim of the HPU, and those that will benefit from HPUs, are illustrated in Table 3.2 below.

Table 3.2 Aims of HPUs and beneficiaries (adapted from Tsouros, Dowding, Thompson & Dooris, in WHO 1986:Online)

Aims of HPUs	Who will benefit
Create healthy, sustainable working, living and learning environment	Employees, students, visitors
Increase the profile of health and sustainable development in research, teaching and knowledge exchange	Society at large, researchers, other universities, employees, students and stakeholders
Contribute to the health and sustainability of the broader community	Universities' communities
Evaluate work to build evidence of effectiveness and to share learning	Students, employees, broader community, society at large
Demonstrate a commitment to health, well-being and sustainability in its policies, practices & mission statements	Employees, students, universities' communities and society at large
Offer health-conducive physical environments and sustainable practices that minimise the negative impact of university life at local, regional, national and global levels	Employees, students, universities' communities and society at large

Provide high-quality health- and welfare-related support services that are sensitive to the needs of the diverse university population	Diverse university population (employees, students)
Provide support for personal and social development and creating opportunities for the development of health-enhancing personal and life skills, including global citizenship	Students, employees, university community and society at large
Make available social, leisure, sports and cultural facilities that reflect diversity and facilitate healthier choices	Employees, students, families of employees and students

Therefore, SA public HEIs should consider becoming part of the HPU network of universities globally. By doing so, they can learn from best practice globally, and do more to contribute to the holistic well-being of their employees, communities, and societies at large.

3.5.1 Unique challenges faced by South African public HEIs and how they impact on employees' well-being

South Africa has 26 public universities (BusinessTech 2015:Online). SA public HEIs are aligned and differentiated into three types of universities, to be more responsive to emergent local, national and international needs and demands. This classification gave birth to (i) 11 traditional universities (offering theoretically oriented degrees); nine universities of technology (offering vocationally oriented diplomas and degrees; and six comprehensive universities (offering both types of qualifications) (Monnapula-Mapesela 2017). It is evident that this level of diversity regarding the different types of SA public HEIs brings about differentiating views – also with regard to how employees' well-being should be addressed.

Financial resources within SA public HEIs have declined due to, amongst other things, inflation, devaluation of currencies, an increase in interest rates, economic and political turmoil, and structural and systemic adjustments (Altbach & Teferra 2004:25). This means that job demands within SA public HEIs continue to increase, whilst job resources often decrease, which can have a detrimental effect on the well-being of these institutions' employees (see 3.2.4). Amongst other burdens related to their financial sustainability, SA public HEIs now have to deal with the effects of the 2016 #Fees-Must-Fall campaign (*ibid*).

More recently, researchers (Stander & Herman 2017:206) emphasised that the rise of the knowledge economy and globalisation have led to an increased demand for higher education, which has resulted in the establishment of multiple private higher education institutions. Hence, there is great pressure on SA public universities, as more universities are competing for the same students, as well as the same employees (Stander & Herman 2017:206-207).

Furthermore, the fourth industrial revolution has arrived (World Economic Forum 2019:1). This means that, in the near future, as technologies evolve, some jobs within some sectors, including the South African higher education sector, might become redundant, and employees (such as cleaners, cashiers, etc.) might be replaced by robots (*ibid*). This might create fear amongst some employees that they might in the near future lose their jobs which, in turn, negatively affects their job security and job satisfaction levels, and ultimately their well-being (see 2.4.1 - 2.4.9).

SA public HEIs should therefore think deeper about all the broader matters impacting on their employees' well-being. They should adopt an organisation-wide approach to their employees' well-being, and integrate employee well-being strategies and solutions into their everyday activities. New and integrated approaches or mechanisms to improve both organisational and employees' well-being within these institutions are thus required.

3.6 SYNTHESIS

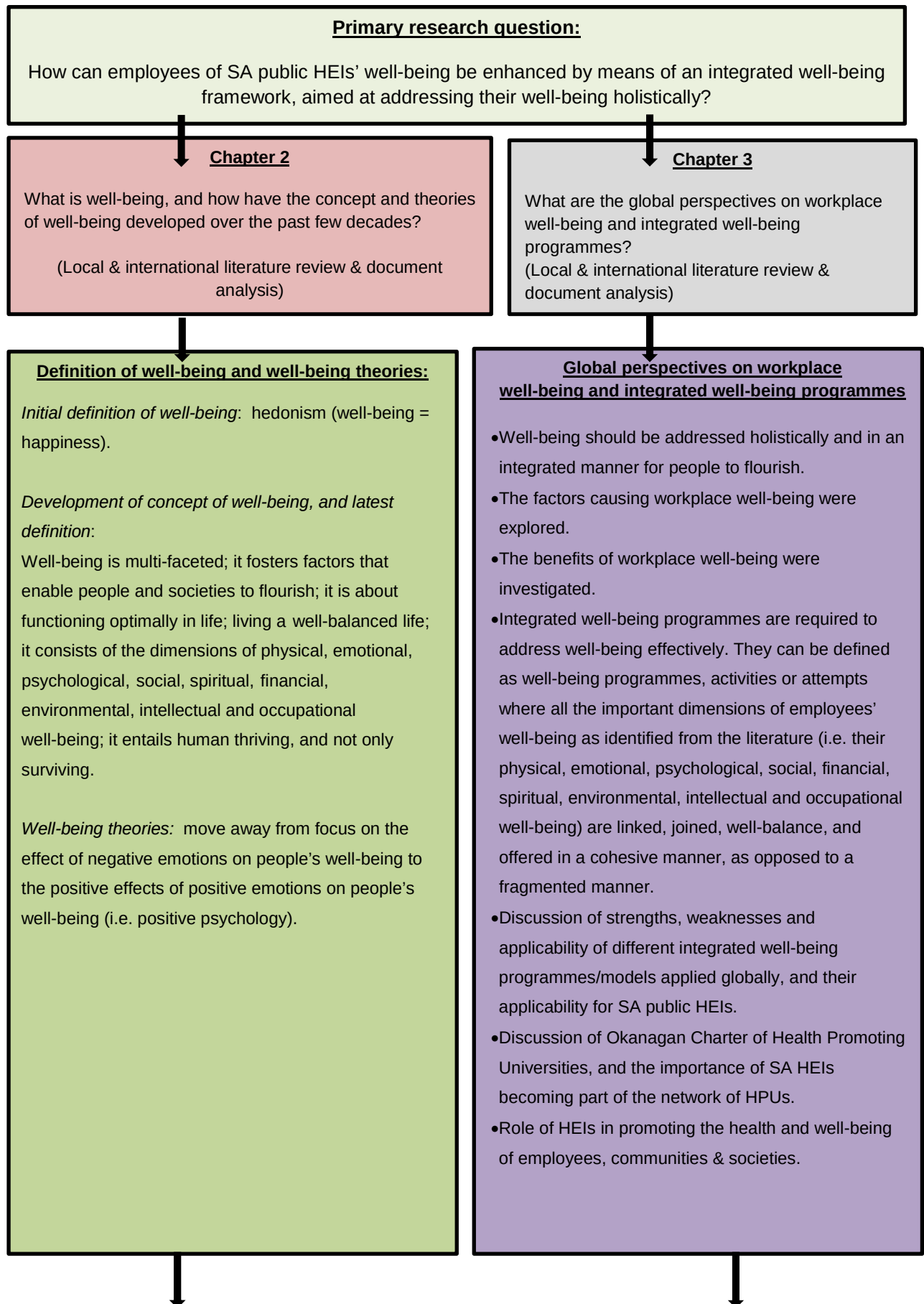
The aim of this chapter was to address the second secondary research question, namely: *What are the current global perspectives on workplace well-being and integrated well-being programmes?* To answer this question, the concepts of a healthy workplace and integrated well-being programmes were defined. Best practices in terms of well-being programmes, models, strategies, guidelines, frameworks and programmes applied by various public and private organisations and HEIs aimed at individuals, organisations, or both - both nationally and internationally - were carefully studied to determine whether they address all the important building blocks of employees' well-being as identified from the literature, and whether they do so in an

integrated manner. It became evident that there is much diversity with regard to the types of programmes that are applied, with varying degrees of success.

It is vital for organisations to invest in their employees' well-being, and to address all aspects of well-being to develop and utilise inclusive, holistic, affordable and sustained employee well-being programmes (see 2.5; 3.2). Not a single employee well-being programme could be found that addressed all of the nine identified building blocks of employees' well-being, and that does so in an integrated manner. Hence, there is a global need for the development and implementation of a holistic, integrated employee well-being framework that could inform the well-being programmes of organisations, including SA public HEIs. Such an integrated framework towards the enhanced well-being of employees of SA public HEIs was developed based on the findings of this study (see 7.2.4.1; Annexure T).

Some valuable concepts emerged from the best practice found in terms of employee well-being practices applied globally, which I applied in the design of the integrated employee well-being framework for SA public HEIs. These are: (i) the ethics and values of any organisation should form the core of their well-being programmes; (ii) the interplay between employer, employee, the community and society at large should be taken into account; (iii) workplace policies and procedures should support institutions' well-being programmes; (iv) all building blocks of well-being should be present in an effective well-being programme (see 2.4.1 to 2.4.9); and (v) employee well-being programmes should address the building blocks of employees' well-being holistically, and in an integrated manner (see 2.4.10). Finally, it should be emphasised in any well-being programme that both employees and the employer have a role to play in employees' well-being (see 3.5).

As this is the last chapter dealing with the literature review, it is appropriate to provide a holistic synthesis of the key outcomes of Chapters 2 and 3, as well as its relationship to Chapters 4, 5 and 6. This is illustrated in Figure 3.15 below:



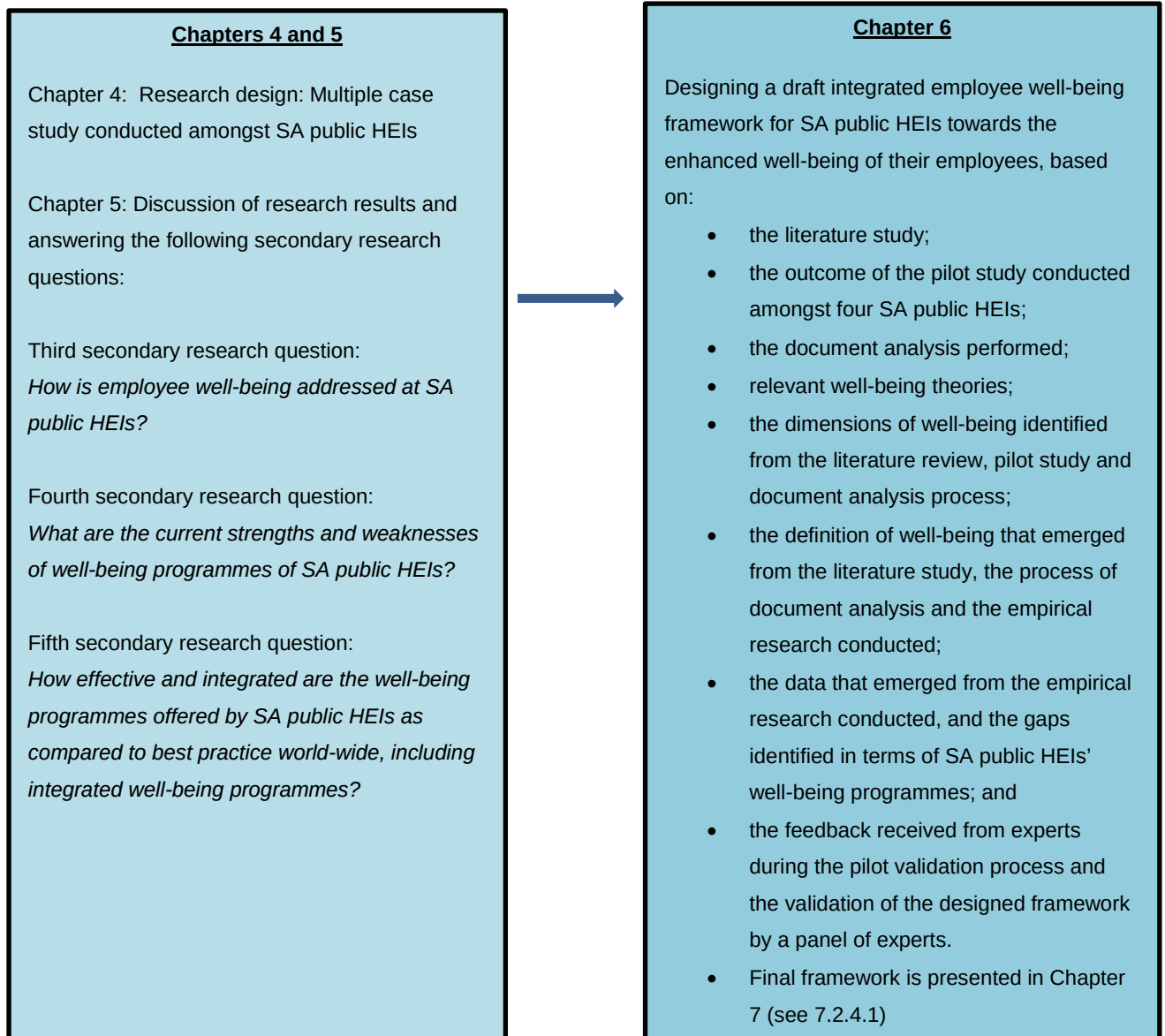


Figure 3.15 Synthesis of key outcomes of Chapters 2 and 3 and its relationship to Chapters 4, 5 and 6

In the next chapter, the research design and methodology that were applied in this study will be discussed.

CHAPTER 4

RESEARCH DESIGN AND METHODOLOGY

4.1 INTRODUCTION

Chapter 1 provided an orientation to the study. Amongst others, the research design and methodology that were applied in this study, were discussed briefly (see 1.7). In Chapter 2, the concept of well-being, different well-being theories and the dimensions/building blocks of well-being were explored, whilst Chapter 3 entailed an in-depth discussion of the causes of and factors influencing workplace well-being, and the benefits of well-being. Finally, current trends and best practice in terms of integrated employee well-being programmes offered globally, were explored.

The aim of this chapter is to discuss the research methodology applied for the empirical research component of this study, including the function of the research, paradigmatic perspectives, the research design and methods used, how quality was assured, and which ethical considerations were applied.

4.2 FUNCTION OF THE RESEARCH

The function and purpose of educational research can be grouped into four categories: basic, applied, action and evaluation research (McMillan & Schumacher 2010:13-14). This study falls within the categories of applied and evaluation research, as it was my aim to generate evidence-based knowledge on integrated employee well-being programmes and practices at SA public HEIs. Furthermore, I wanted to investigate, and make recommendations on how such practices could be improved. Hence, the purpose of my research was to study the employee well-being programmes applied by SA public HEIs to determine whether they address all the dimensions of well-being as identified from the literature, if this was done in an integrated manner, and how their employees' well-being could be improved. To this effect, an integrated employee well-being framework for SA public HEIs was developed that might contribute to the enhancement of their employees' well-being (see 7.2.4.1; Annexure T).

The South African Higher Education Act (Act No. 101 of 1997) demarcates tertiary education as higher education. Furthermore, the Act stipulates that formal education beyond secondary level education is regarded as higher education (RSA 1997:9). The research was conducted in the field of Higher Education Studies. This is a field in which limited research have been conducted prior to the 1980s (Altbach 1997:4). According to Tight's classification (Tight 2012:9), this study on the well-being programmes applied by SA public HEIs therefore will make a research contribution in the field of higher education in the category of institutional management. In higher education, the human resources function is viewed as an institutional management function. This category, amongst others, focuses on importing change and diversity theories, leadership, efficiency and managerialism (Tight 2012:9). Furthermore, the field of Higher Education Studies can be described as interdisciplinary, or multi-disciplinary (Bitzer & Wilkinson 2009). Hence, the study was conducted across the disciplines of Education, Educational Psychology, Industrial Psychology, and Public and Business Administration.

Tight (2012:9) distinguishes between the concepts of research methods and research methodology. Research methods refer to the techniques that are applied to collect and analyse data, whereas research methodology refers to the stances and views adopted by researchers when conducting research.

In the next section, the paradigmatic perspectives applied in this research, are discussed.

4.3 PARADIGMATIC PERSPECTIVES

Four paradigmatic perspectives that underpin studies of the social world are identified by Cohen, Manion and Morrison (2011:5). The epistemological and methodological paradigms within which the study was conducted, are two of these perspectives that I have adopted for purposes of conducting the empirical research in this study. These perspectives are discussed below.

4.3.1 Epistemological paradigm

The methodology applied by a researcher to his/her particular study is shaped by **epistemologies**, or so-called “*basic worldviews*” (Creswell 2014:6; Denzin & Lincoln 2011:13). The epistemological paradigm provides the framework within which knowledge is assembled and communicated (Maree 2016:67). Thus, researchers work within a particular paradigm, which guides the research method(s) they choose for studying phenomena in their field of study (Du Plooy-Cilliers, Davis & Bezuidenhout 2014:19). Although there are different paradigmatic perspectives, the principle of searching for knowledge by making use of systematically gathered empirical data, according to McMillan and Schumacher (2010:6), always applies.

Morgan (2007:49) defines “**paradigm**” as “*shared beliefs within a community of researchers*” who regard the importance of asking meaningful questions and applying appropriate procedures for answering their research questions, as important. What we believe about our world is influenced by our values, culture, and the knowledge and experience that we have gained in life (Hesse-Biber and Leavy 2011:37). Denzin and Lincoln (2011:13) also emphasise that research is guided by our beliefs about the world, and how we perceive it, and therefore the manner in which we conduct research, and our attitude towards the research we conduct are a result of the research paradigm which we choose to apply.

Four epistemological paradigms emerged from the literature (Creswell 2014:6-11; McMillan & Schumacher 2010:5-6) as indicated and briefly described in Table 4.1 below.

Table 4.1: Identification and description of the different epistemological paradigms (adapted from Creswell 2014:6011 and McMillan and Schumacher 2010:5-6)

Epistemological paradigm	Explanation
Post-positivism	• Emphasis is on quantitative research (numerical data). • Outcomes are influenced by causes. • Allows for various theories in terms of which research findings can be interpreted.
Transformative paradigm	• Critical theorists of social justice. • Study needs of marginalised groups. • Focuses on social factors, race and gender.
Pragmatism	• Multiple approaches may be used to solve the research problem. • Mixture of qualitative and quantitative research. • Scientific methods are combined with logical and practical thinking. • Emphasises that which will work best to do the investigation, or solve the research problem.
Constructivism (Interpretivism)	• Emphasis is on qualitative research (text data). • Views of research participants are regarded as important. • Less emphasis on numerical data; more emphasis on perspectives and values.

I followed a constructivist approach for purposes of this study, as the purpose of my study was to solve the research problem through the design of an integrated employee well-being framework for SA public HEIs. To accomplish this purpose, I used the research methods that I regarded as most suitable for purposes of conducting this research (see 4.4). Furthermore, the outcomes of the literature review conducted as discussed in chapters 2 and 3 were consistent, and showed evidence of experience and the application of logical and practical thinking by the applicable researchers/authors.

Mertens (2010:18) indicates that interpretivism includes the constructivist, post-positivist, transformative and pragmatic research paradigms. This study was conducted within the research paradigm of interpretivism - and more specifically, the **constructivist** paradigm (*cf.* Mertens 2010:18). The key principle of the constructivist paradigm is the belief that reality is not absolute, but that it consists of people's subjective experiences of their world, and they might therefore adopt the belief that

reality is socially constructed (Terre Blanche *et al.* 2006:276; Mertens 2010:18). Guba and Lincoln (1994) confirm that subjectivism is regarded as valuable in a constructivist paradigm.

Charmaz (2006:36-37) points out that the methodology linked to constructivism can be described as verbal, non-verbal and written communication, as well as logical argumentation. Thus, qualitative methods such as observations, telephonic sessions/interviews, text from, amongst others, open-ended questions, and document analysis (text reviews) are often utilised (Charmaz 2006:37). Open-ended questions are used for purposes of obtaining rich information from participants (Babbie 2013:255), whilst closed questions are used, amongst others, to obtain demographic information related to participants (McMillan and Schumacher 2010:198). I made use of self-constructed, open-ended questionnaires in both the pilot study and the empirical research conducted, and also conducted document analysis as part of both the literature review and the empirical research.

Furthermore, constructivist researchers examine and perform an in-depth analysis of the phenomenon they investigate (Mertens 2010:20). In the case of this study, an in-depth analysis of the well-being programmes of SA public HEIs was done. As such, observation and interpretation were of particular interest to me. Observation included the collection of information about the well-being programmes of SA public HEIs, whilst interpretation involved making meaning of that information by comparing SA public HEIs' well-being programmes with best well-being practice globally.

Research is grounded in the philosophical concepts of epistemology, axiology and ontology, and these influence the methodology chosen for one's study (O'Gorman & Macintosh 2014). These concepts are explained below.

4.3.1.1 *Epistemology*

Epistemology describes the relationship between researcher and participant, and how knowledge is acquired, formed and communicated (Mertens 2010). Constructivism recognises that the research process is interactional, and regards the relationship between the researcher and the participants as important (Ponterotto, Mathew & Roughley 2013). For this reason, participants' experiences are documented in a reflective and respectful manner by the researcher (Ponterotto *et al.* 2013). The constructivist researcher therefore does not stand outside or above the phenomenon that is investigated, but is interactively involved and engages in the activities, and distinguishes the meanings of actions as expressed within a particular social context (*cf.* Creswell 2014; Guba & Lincoln 1994;11; McMillan and Schumacher 2010). As constructivist researcher in the field of Higher Education Studies (with the focus of my study on employee well-being), I therefore attempted, by means of this research, to explain the meanings and subjective reasons for the social actions – in this case the types of employee well-being programmes applied by SA public HEIs.

The epistemology between what is being researched, and myself as researcher, is the fact that I have been an employee of a South African public HEI for more than 23 years, and therefore I am subjectively involved in this study. With more than 23 years' experience in the higher education sector, and having conducted a master's study in the same fields of higher education and employee well-being, I have valuable insight into the context of this study, and so do the research participants, who have been carefully selected based on their knowledge of their institutions' employee well-being programmes. The participants, like myself, are also employees of SA public HEIs, hence we share the same HE background. I therefore acknowledge that my previous experience as an employee of this institution, and the findings of my master's study (Van Straaten 2014) related to the well-being of the institution under study, have influenced my views and own truths. Thus, I made every effort to remain as objective as possible throughout this study, and I carefully applied discipline and reflective strategies and principles, as proposed by McMillan & Schumacher (2010:332-333), as my aim was to add true value to the subject field of employee well-being within SA public HEIs.

4.3.1.2 Axiology

Axiology addresses ethical matters related to a study. It studies the judgements about the value of a subject matter (Du Plooy-Cilliers *et al.* 2014; Dudovskiy 2018). The researcher's implementation of the knowledge gained through the research is influenced by his/her values (Ling & Ling 2017), and these values cannot be separated from the research (Ponterotto *et al.* 2013:49). Hence, axiology assesses the ethical behaviour of the researcher, and the role of the researcher's own values throughout the research process. I described in detail under 1.10 (ethical considerations) how I went about addressing ethical matters related to this study.

4.3.1.3 Ontology

Ontology, from a constructivist outlook, entails that realities are not more or less true, but rather more or less informed (Guba and Lincoln 1994:111). For this reason, multiple realities exist (Denzin & Lincoln 2011:13). My ontology links with the concept that multiple realities exist for different people. This ontology provides the basis for a constructivist epistemology. I therefore allowed the concepts of importance related to well-being programmes of SA public HEIs to surface as they were formulated by the research participants (Mertens 2010:18). Data can be tracked to their sources, and therefore I assembled SA public HEIs' interpretations of their employee well-being programmes, and made these explicit in the description of the research findings (*cf.* Denzin & Lincoln 2011).

In the next section, the methodological paradigm is explained.

4.3.2 Methodological paradigm

Constructivism has been adopted as the most suitable epistemological paradigm for this study, as pointed out in 4.3.1 above. McMillan and Schumacher (2010) state that interpretive, qualitative research is all about understanding social phenomena, and analysing the thoughts, actions and perceptions of the research participants. Consequently, I adopted a **qualitative research approach** (with some quantitative enhancement) for purposes of conducting an in-depth investigation into the subject

matter, and to gain an understanding of the views of the research participants with regard to the research context (*cf.* Mertens 2010; Creswell & Creswell 2018). Qualitative data was collected, analysed and interpreted in the natural environment of the research participants, in order to identify the key themes that emerged (Leedy & Ormrod 2005:94; Braun & Clarke 2006; Saldanã 2009). Thus, the findings progressively emerged from the analysis of the data that I performed (*cf.* McMillan & Schumacher 2010:323). I worked through the data multiple times to identify all the emerging themes, and I constantly checked these against the data (Creswell 2014) (see 5.3.1 - 5.3.6; 5.4.1 - 5.4.15).

There has been phenomenal growth in qualitative research conducted in the fields of organisational studies, management and psychology (Johnson, Buehring, Cassell & Symon, 2007; Madill & Gough, 2008; O'Neil & Koekemoer 2016). Merriam (2002) points out that qualitative research has, for many years, infiltrated most of social sciences and applied fields of practice. More recently, researchers emphasised that qualitative research should play a more central role in organisational studies (Blustein, Kenna, Murphy, DeVoy, & DeWine, 2005; McMahon & Watson, 2009; O'Neil & Koekemoer 2016; Ponterotto, 2005; Stead, Perry, Munka, Bonnett, Shiban & Care 2011).

Qualitative research provides deeper insights into the world of the research participants, which cannot be easily accomplished through quantitative research (Rynes & Gephardt 2004). All of the above strengthened my choice of doing qualitative research, as I conducted organisational research, and wanted to understand the reality of the research participants in terms of the strengths and possible weaknesses of their institutions' well-being programmes. Furthermore, in constructivism, much emphasis is placed on understanding the reality of the research participants from their perspective (*cf.* Terre Blanche *et al.* 2006; Mertens 2010; Creswell 2014). Doing qualitative research offered me flexibility, and it enabled me to focus my research, and to gain a deeper understanding of how the participants perceived their own worlds (*cf.* Creswell 2013:24; Fouché and De Vos 2011; Nieuwenhuis 2007:51; Terre Blanche *et al.* 2006:280). It also enabled me to collect multiple forms of data using different research methods, approaches and strategies: a literature review was conducted on

employee well-being and best practice in terms of employee well-being programmes applied globally; a semi-structured questionnaire with mainly open-ended questions was sent to all participating SA HEIs; and text reviews (document analysis) were conducted. I constantly evaluated the qualitative data obtained via the questionnaires sent to SA public HEIs and well-being experts against the data that I have obtained from the literature review and the process of document analysis.

Since qualitative research renders data that are nuanced, it delivers optimal research results (O'Neil & Koekemoer 2016). Regardless of the sample sizes, qualitative research strengthens the credibility of the research conducted, since it entails in-depth research; it provides a voice for the research participants; and it highlights the complexities of the phenomenon under research (Blustein *et al.* 2005; Halbesleben 2011; Ponterotto 2005; Stead *et al.* 2011).

Qualitative research is therefore suitable for purposes of researching psychology-related issues and challenges pertaining to the workplace (Pratt 2009:19). Qualitative research enables us to better understand the subjective life within organisations (Cassell, Symon, Buehring & Johnson 2006; Merriam & Tisdell 2016; O'Neil & Koekemoer 2016). Since my research into the well-being programmes of SA public HEIs involved organisational research and principles of industrial psychology, my choice to perform qualitative research is evident. I interpreted what I understood from the collected data, and my interpretation of the data is linked to my own life experiences and background. I made every effort to avoid bias in my interpretation of the data. This is in accordance with McMillan and Schumacher's, and Creswell's ideas on disciplined subjectivity and reflexivity to be applied by a researcher (Creswell 2013:45; McMillan & Schumacher 2010:332). By applying discipline, and reflexive strategies, I was able to gain a deep understanding of both the research phenomenon and the views and lived experiences of participants.

The advantage of making use of a multiple case study design using a qualitative approach, was that I was able to collect multiple forms of data using different research strategies, approaches and methods. In this case of this study, these included a literature review on employee well-being and best practice in terms of employee

well-being programmes applied globally; a semi-structured questionnaire with a few closed, and mainly open-ended questions, sent to all participating SA HEIs; and text reviews. These text reviews entailed analysing documentation such as the SA Constitution; the World Health Organization's policy on well-being; the Mental Health Organization's various policy documents on mental health; overseas' universities' policy and guiding documentation on employee well-being and their employee well-being programmes and approaches (e.g. those of the universities of Minnesota, Brighton, Birmingham); the Okanagan Charter for Health Promoting Universities and Colleges; as well as the employee well-being programmes of SA public HEIs provided to me by participants as supporting documentation to the completed questionnaires – to name but a few.

The qualitative data collected by means of the questionnaires sent to both SA public HEIs and well-being experts were further supported by the qualitative data gathered by means of the evaluation research that was performed through text reviews, and comparing that with the literature and data gathered.

4.4 RESEARCH DESIGN AND METHODOLOGY

4.4.1 Multiple case study design

There is no “blueprint” for the ideal research design to be employed (Cohen *et al.* 2011). Various factors assist the researcher in deciding on the research design and methodology to be used. For instance, the purpose of the research guides the research design and methodology. The researcher employs a theoretical paradigm to theoretically direct the research, and decides on the research context, as well as the research techniques and methods that will be used to gather and analyse the data (Terre Blanche *et al.* 2006). What is, however, important, is that the researcher should choose a research topic that is worth researching, and that he/she has considered the practicality of the manner in which the research will be conducted (*cf.* Cohen *et al.* 2011).

To address the third, fourth and fifth secondary research questions (*cf.* Creswell 2014; Patton 2015), the research design that was regarded as most suitable for this study was a qualitative, **multiple case study design** (Stake 1995). This research design enabled me to produce trustworthy and ethically sound research findings. The multiple cases included in the study were the 26 SA public HEIs, who were all invited to participate in this research, to obtain a better understanding of the employee well-being programmes offered by each of the participating institutions. Data gathered were analysed through qualitative methods for purposes of investigating the research phenomenon (employee well-being programmes of SA public HEIs) in depth, and within its real-world context (Yin 2009:237).

A case study design research can be defined as an investigation into a case(s) over time, through in-depth data collection by means of multiple data collection strategies (Creswell 2009:73). Case studies are often used as a research strategy in qualitative research, as it enables the researcher to systematically explore real-world issues in their natural contexts, to generate new knowledge (Yin 2009:237). Hence, case studies involve an in-depth analysis of a single phenomenon, and as such they allow for rich descriptions of the investigated phenomenon, and they enlighten the readers' understanding of the phenomenon (Merriam 2009:43-44).

I regarded a multiple case study design as a suitable research design for this study, as I wanted to obtain a holistic view of the experiences of well-being officers of various SA public HEIs pertaining to their institutions' employee well-being programmes. I attempted to construct knowledge by interpreting their experiences and perceptions pertaining to their institutions' well-being programmes (*cf.* Yin 2012). For purposes of this study, a linear, structured approach was followed, which involved a comprehensive literature review; gaining a clear understanding of the research problem, questions and aims; gathering, analysing and interpreting the data; coming up with relevant conclusions, and identifying the relevant implications (*cf.* Yin 2009:188). Triangulation of data therefore involved a comparison of the data with the literature findings and theories on well-being.

4.4.2 Population and selection of participants

Researchers often are not able to include the entire target population in a study, and therefore have to make a selection of participants. The most commonly used sampling strategies in research are probability sampling and non-probability sampling (Du Plooy-Cilliers *et al.* 2014:132-137). Probability sampling is preferred in quantitative studies, as it makes use of statistical techniques for purposes of enhancing representativeness and generalisability to the population (McMillan & Schumacher 2010:129-140). Non-probability sampling, on the other hand, is preferred in qualitative studies, when it is not possible to access an entire target population (Maree 2016:197-198). The term “selection of participants” also is preferred above “sampling” in qualitative studies (Yin 2011:132). Purposive selection of participants is an example of non-probability sampling (Cohen *et al.* 2011:155).

For purposes of this study, I conveniently and purposefully selected the research participants for both the pilot study and the empirical research (*cf.* Cohen 2011:156). In purposeful selection of participants, the researcher specifies the target population first, and then identifies specific members who then are invited to participate in the research (Cohen 2011:156).

4.4.2.1 Selection of participants for baseline pilot study

The population for the baseline pilot study included employees heading employee well-being sections at four participating SA public HEIs. All 26 of the SA public HEIs were invited to participate in the baseline pilot study, but only four institutions responded. The four employees heading the well-being sections at SA public HEIs were therefore selected to participate in the research, as they were responsible for employee well-being at their respective HEIs, and could best provide information on the research objectives, based on their knowledge of their institutions' well-being programmes (*cf.* Du Plooy-Cilliers *et al.* 2014:142-143). Once the participants agreed either via e-mail or telephonically to participate in the study, I sent them information on the study, as well as an informed consent letter to sign and return to me (see Annexures D & I). For purposes of the baseline pilot study, a

self-constructed, open-ended questionnaire was compiled, which was piloted with an expert in the field of industrial psychology, and scrutinised by my promoter and co-promoter. The questionnaire was completed online by the four participating SA public HEIs (see Annexure E). This process is discussed in more detail in section 4.4.3.4.2.

4.4.2.2 Selection of participants for empirical research

For purposes of completing the second self-constructed, mainly open-ended questionnaire on well-being programmes used by SA public HEIs (see 4.4.3.4.5) for the empirical study, I again purposefully selected the employees heading employee wellness sections at all of the 26 SA public HEIs to participate in the research, as I wanted to investigate these institutions' employee well-being programmes, and these employees could best provide information on the research objectives, based on their knowledge of their institutions' well-being programmes (*cf.* Du Plooy-Cilliers *et al.* 2014:142-143). There is no "perfect" sample size for qualitative research (Merriam 2009:80), as long as a point of saturation is reached where no important, new information related to the research is obtained (McMillan & Schumacher 2010:347).

The questionnaire used in the pilot study was updated for use during the main empirical study. Various questions were reformulated, and new questions were added, based on new information pertaining to employee well-being that emerged from the extended literature review conducted after the pilot study (see Annexure J), and inputs from seven industrial and educational psychologists within the higher education sector were incorporated prior to sending the questionnaire to participating SA public HEIs (see 4.4.3.4.5). The employees heading employee wellness sections at SA public HEIs are the key role players within these institutions as far as employee well-being is concerned, and as such they were able to provide more insight about their experience of the phenomenon under study (*cf.* McMillan & Schumacher 2010:347). Furthermore, I could conveniently involve them in the research by e-mailing them the questionnaire to complete.

Although 19 out of the 26 SA public HEIs responded positively to the invitation sent via-mail to participate in the study, eventually only 11 of them completed and returned the questionnaires, despite various follow-ups, either telephonically or via e-mail. Of these 11 institutions, two had also participated in the baseline pilot study. Eleven participating institutions were deemed sufficient, as generalisation was not the aim of this research.

The process of the selection of participants entailed snowball sampling, and chain or network sampling (*cf.* Merriam 2009:97) after having made contact with the relevant employees in HR departments across SA public HEIs. This means that these employees sometimes referred me to the HR practitioner within the particular HEI who dealt more directly with employee well-being, and hence would be more information rich (*cf.* Merriam 2009:79). Those participants were then included in the sample.

I contacted all SA public HEIs telephonically, and obtained the contact details (name, surname, e-mail address and telephone number) of their HR Directors, whom I then contacted telephonically or via e-mail. I explained the purpose of my research to them. In some cases, the details provided to me by the SA public HEIs regarding the person responsible for employee well-being were incorrect, and those employees then referred me to the actual employee who dealt specifically with employee well-being at their institution. I sent an e-mail message and letter explaining the purpose of my research, as well as the approval granted by the relevant institution, to the prospective participants. Once the participants agreed either via e-mail or telephonically to participate in the study, I sent them an informed consent letter to sign and return to me (see Annexures G, I and L). Some HR Directors themselves participated in the research, whilst others referred me to a senior employee within HR dealing specifically with employee well-being at their institution, such as a wellness practitioner, or well-being officer.

I was careful not to disrupt the normal activities of the participating institutions, and therefore I compiled a questionnaire that would take approximately 30 minutes of their time to complete. By doing so, I ensured that employees' productivity was not undermined as a result of participating in my research.

4.4.2.3 *Selection of participants for validating the integrated employee well-being framework*

For purposes of obtaining the inputs from employee well-being experts, who served as the validation panel for the preliminary proposed framework for integrated employee well-being that I designed for SA public HEIs, I conveniently selected four well-being experts employed within SA public HEIs for the pilot validation survey, and twelve experts with years of experience as, amongst others, industrial psychologists, psychologists and organisational well-being practitioners to provide inputs on the framework. These experts were not the same industrial and educational psychologists who have provided inputs on the questionnaire that was used for purposes of conducting the empirical research, nor did the same experts who participated in the pilot validation survey participate in the second validation. I obtained their details from other well-being experts in the fields of organisational well-being and psychology.

These members of the validation panel were selected in their personal capacity, and based on their contextual knowledge of and experience in the field of employee well-being; and on their knowledge of the different aspects and factors impacting on the feasibility of the proposed integrated employee well-being framework for SA public HEIs. I initially selected two well-being experts, who then recommended other well-being experts that I might contact (i.e. via chain or network sampling). Thus, snowball sampling was utilised to identify the validation panel members for both the pilot validation and the second validation survey. I contacted them either telephonically or via e-mail, and explained the purpose of my research to them.

Three of the four experts invited participated in the pilot validation survey, whilst six of the twelve experts invited participated in the second validation survey by providing inputs on the integrated well-being framework for SA public HEIs. They provided written consent to participate in the research (see Annexures O and R) in their personal capacity. I sent them the integrated employee well-being framework, as well as some background information explaining the purpose of my research, and the work done by me to investigate the phenomenon. Once again, I was careful not to disrupt the normal activities of the participating well-being experts. Hence, I sent a

medium-length questionnaire consisting of the integrated well-being programme, with columns for them to evaluate the necessity of each component and subcomponent, as well as a column for comments after each component, to make commenting on it easier, and more structured.

4.4.3 Data collection and documentation

Data collection and documentation entail a range of activities. Creswell (2013:146) illustrates the data collection process as indicated in Figure 4.1 below.

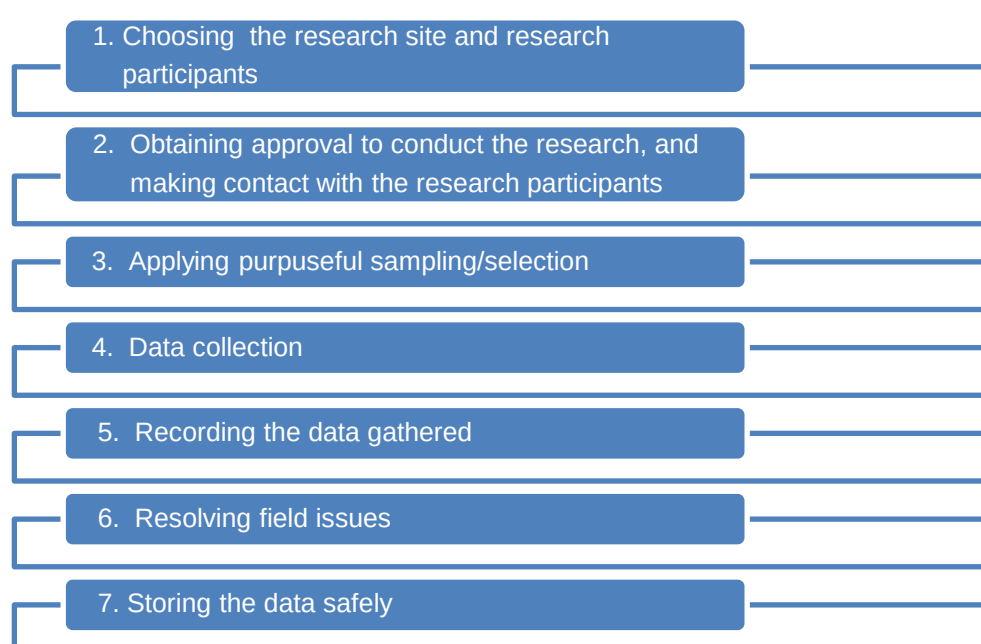


Figure 4.1 Data collection process (adapted from Creswell 2013:146)

4.4.3.1 *Choosing the research site and research participants*

The participants in this research (in both the pilot study and the empirical study) were located at various HR departments across the different participating SA public HEIs, and not at a single site. Furthermore, the well-being experts who participated in the validation of the integrated well-being framework were industrial and educational psychologists and organisational well-being specialists employed at various SA public HEIs across South Africa, or in private practices. All the participants (pilot study,

empirical study and validation panel) completed the three different survey questionnaires online, whilst two SA public HEIs' participants preferred to answer the questionnaire for purposes of the empirical study telephonically (see 4.4.3.4.8). This spread in terms of the location of participants enabled the provision of important contextual information, which assisted a great deal in the development of categories in the coding phase.

4.4.3.2 Obtaining approval to conduct the research and making contact with the research participants

Approval to conduct this study was obtained from the Ethics Committee of the Faculty of Education, University of the Free State (see Annexure A), as well as the ethics committees of all the participating SA public HEIs. However, since institutions remained anonymous, these letters are not attached as annexures, but they can be obtained from me for verification purposes. Information regarding the chosen sites, the sampling process, how data would be collected, and how the research results would be reported, was provided to the University of the Free State (UFS) and the participating SA public HEIs. Creswell and Creswell (2018) indicate that making contact with the research participants, and keeping in contact with them is important, so as not to lose access to them. I made personal contact with each of the 26 SA public HEIs to determine which processes should be followed to obtain gatekeeper approval to conduct the research, and to find out who the person at each SA public HEI was who was overseeing or responsible for employee well-being. Furthermore, I made contact with each of the participants via e-mail or telephonically, and remained in constant contact with them throughout the research process. I also obtained written, informed from all participants prior to their participation in the study.

4.4.3.3 Purposeful selection of participants

The selection of participants was discussed in detail under section 4.4.2.

4.4.3.4 Data collection

It is common for qualitative researchers to use various data collection strategies in a single study (Leedy & Ormrod 2005:148). In qualitative research, such strategies could include interviews, observations, audio-visual materials and documents (Creswell 2013:159-160). Various data collection strategies therefore were employed in this study for purposes of answering the research questions (Mason 2002), including (i) a preliminary literature review on employee well-being and best practice in terms of employee well-being programmes applied globally; (ii) a pilot study on the well-being programmes implemented at SA public HEIs; (iii) an extended literature review; (iv) qualitative data generation by means of a semi-structured questionnaire with a few closed, but mainly open-ended questions; (v) document review and analysis, and (vi) a questionnaire, together with the designed integrated employee well-being framework for SA public HEIs completed by three well-being experts in the pilot validation survey, and six well-being experts in the second validation survey. These data collection methods are discussed in more detail below (see 4.4.3.4.1 - 4.4.3.4.9).

4.4.3.4.1 Preliminary literature review

A preliminary literature review initially was conducted at the onset of the study to gain insight into best practice applied worldwide in terms of integrated employee well-being programmes applied by local and global companies and HEIs. The preliminary literature review revealed that organisations worldwide acknowledged that positive trends in employee well-being held various advantages for these organisations, and that well-being concerned various facets. Hence, organisations worldwide are turning their focus to a more holistic approach to employees' well-being. The preliminary literature review was followed by a pilot study conducted amongst SA public HEIs, as discussed in 4.4.3.4.2 below.

4.4.3.4.2 *Baseline pilot study*

The first round of data collection occurred by means of a baseline pilot study conducted amongst four SA public HEIs during 2016. The pilot study was conducted by means of a self-constructed, open-ended questionnaire (see Annexure E), which was piloted with a South African Industrial Psychologist with many years of experience in the field. It consisted of five structured questions. All the questions were open-ended questions to encourage full, meaningful answers using the participants' own knowledge and feelings, without being influenced by the researcher. Such free-form written answers reveal a great deal about how participants think, and much can be learned from reading their thoughts as described in their own words. This also allowed me to form a better idea of the employee well-being programmes applied by SA public HEIs.

The study covered the existence and characteristics of SA public HEIs' well-being programmes, focusing on (i) whether such programmes existed; (ii) the elements of employee well-being addressed; (iii) the perceived strengths and weaknesses of these programmes; (iv) how long, and how actively these programmes had been implemented at the institution; (v) how the effectiveness of the programmes was measured; and (vi) proposals on how employee well-being could be addressed in a more integrated and holistic manner.

The responses from participating institutions, as well as their well-being programmes shared with me as part of the pilot study, were carefully analysed, and six central themes emerged, which are discussed in detail in Chapter 5 (see sections 5.3.1 - 5.3.6).

The feedback from participants confirmed that, although all of the four SA public HEIs had employee well-being programmes in place, three of them did not address all of the nine identified dimensions/building blocks of well-being (see 5.3.5). For example, one institution indicated that their approach did not cover employees' spiritual well-being, whilst it was clear from the analysis of two other institutions' well-being

approaches that psychological and financial well-being of employees was not addressed via their well-being programmes (see 5.3.5.1).

Deeper analysis of the well-being programmes of the four SA public HEIs by means of document analysis showed evidence of some fragmented approaches to well-being, and a strong focus on employees' physical well-being (see 5.3.5.1). Three of the four participating institutions confirmed that they found it difficult to measure the effectiveness of their well-being programmes; that they did not have an effective, structured well-being measuring tool in place; and that evaluation of the effectiveness of their well-being programmes mainly was done by means of annual employee satisfaction surveys; feedback from workshops; and individual feedback (see 5.3.4; 5.3.4.1). Proposals from these institutions on how their employees' well-being could be addressed more effectively, included that a holistic approach to employees' well-being was required, based on a needs assessment and institutions' strategic goals (see 5.3.6; 5.3.6.1).

Thus, the pilot study confirmed my assumption that an integrated approach towards employee well-being amongst SA public HEIs was lacking, and that no integrated employee well-being framework for SA public HEIs existed. I wished to address this gap by means of the design of an integrated employee well-being framework for SA public HEIs to contribute to their employees' enhanced well-being. Therefore, following the pilot study, an extended literature review was conducted to gain a deeper insight into the best practice globally in terms of integrated employee well-being programmes applied by all types of organisations, including higher education institutions, and thereafter the empirical research amongst eleven SA public HEIs was conducted, as explained in section 4.4.3.4.5.

4.4.3.4.3 Extended literature review

As indicated in 4.4.3.4.2 above, an extended literature review was conducted following the baseline pilot study to gain a deeper insight into best practice globally in terms of integrated employee well-being programmes applied by different organisations, including higher education institutions. Furthermore, the literature was searched for

evidence of, amongst others, how employees' well-being might be addressed holistically; how the effectiveness of these programmes might be effectively measured; and how an integrated employee well-being programme could contribute positively to employees' well-being. This led to narrowing down the research focus to the employee well-being programmes applied by SA public HEIs, and how the effectiveness of these programmes could be improved by means of an integrated employee well-being framework. To this effect, a semi-structured questionnaire with only a few closed, but mainly open-ended questions was designed for completion by SA public HEIs that were willing to participate in the research.

4.4.3.4.4 Document analysis (text reviews) and evaluation research

As explained in 4.4.3.4.3 above, following the pilot study, an extended literature review was conducted over a period of two years. This included document analysis, or text reviews. Tight (2012:194) states that documentary analysis, interviews and surveys form the basis of research in the field of higher education. Analysis of documents involves studying various documents on a subject matter as valuable information sources, to gain a deeper understanding of the matter (Strydom 2011). The process of document analysis that I followed entailed studying various global and local institutional well-being policies, strategies, models, frameworks, programmes and initiatives; the WHO's guidelines related to employee wellness; the Mental Health Organization's various policy documents on mental health; overseas' universities' policy and guiding documentation on employee well-being (e.g. those of the universities of Minnesota, Brighton, Birmingham); the Okanagan Charter for Health Promoting Universities and Colleges; the websites of various companies and universities, and their well-being initiatives; the South African Board for People Practices (SABPP)'s HR Management Standard for South Africa; the South African Constitution; the South African Occupational Health and Safety Act; as well as the employee well-being programmes of SA public HEIs (including well-being strategies, policies, frameworks and annual well-being events offered) that were provided to me by SA public HEIs as part of the empirical research process, to name but a few (see 4.4.3.4.5).

This process of document analysis assisted me to confirm the literature findings on the dimensions and requirements of integrated, holistic employee well-being programmes. Furthermore, the process of document analysis allowed for in-depth, or lesser depth and breadth analysis of the data, which was applied as required. Furthermore, it enabled me to perform triangulation, and to search for different perspectives that emerged from the data around employee well-being (*cf.* Mason 2002).

This research also involved evaluation of the employee well-being programmes of SA public HEIs. Evaluation research focuses on the effectiveness of a programme or treatment for the purpose of determining how the programme is working or how it can be improved (Van Rensburg 2015). As such, it involves a systematic assessment of information to provide useful feedback about a particular programme or project (Patton 2015; Trochim 2006).

Evaluation research affords the researcher the opportunity to learn how well a programme, practice or policy is working (Connelly 2015). It was my aim to find out how well the well-being programmes applied by SA public HEIs are working, that is, what their impact is on employees' holistic well-being.

McMillan and Schumacher (2010:20) point out that evaluation research is aimed at evaluating the merit of a particular practice (in this case the type of well-being programmes applied at SA public HEIs). Furthermore, evaluation research investigates whether the practice works well, and whether it does what it is intended to do. Concerns and issues surrounding the well-being practices of SA public HEIs, as identified during the empirical investigation, are regarded as important guiding factors in the development of a viable well-being programme for SA public HEIs. Babbie and Mouton (2001:338) indicate that such an investigation can be categorised as an improvement-oriented evaluation, as it is formative in nature, and deals with a concern for improving current well-being practices of SA public HEIs.

Evaluation research allows for three forms of analysis to be conducted, namely process analysis, impact analysis and cost analysis (Connelly 2015). The main aim of my analysis of public HEIs' well-being programmes was to analyse the process (i.e. the well-being programmes, and how well they are functioning); and the impact (feedback on the intended effects of these well-being programmes).

As I am, and have been, an employee of an SA public HEI for more than 23 years, I am aware of the cost aspects related to some employee well-being programmes, and hence I kept the financial viability of the proposed, integrated employee well-being programme at SA public HEIs in mind when designing it, although the main aim of my research was not to do a cost analysis of SA public HEIs' well-being programmes, but indeed to design an integrated, effective and financially viable employee well-being framework for SA public HEIs. I utilised the data gathered from the literature review, the semi-structured questionnaires with mainly open-ended questions sent to SA public HEIs, the text reviews performed, and valid comments made by the validation panel members to come up with a framework towards enhanced employee well-being at SA public HEIs.

Ovretveit (1998) identifies the following elements of the evaluation process: judging the values of something; gathering valid data; completing systematic inquiry; making comparisons; and reaching an informed decision. My research methodology included all of these steps. Firstly, being an employee of a South African public HEI, I identified the value of employee well-being for individuals and their organisations. I then conducted an extensive literature review to gather valid data on best practice globally in terms of integrated employee well-being programmes. I completed a systematic inquiry into the well-being programmes applied by SA public HEIs by means of the empirical research conducted, followed by a process of comparing these well-being programmes, or evaluating them against best practice worldwide. Finally, I used all of the above (data gathered from the research, literature and well-being experts, as well as the organisational context of SA public HEIs and their employees) to derive at meaningful conclusions concerning integrated employee well-being programmes, and was able to design such a framework that could assist SA public HEIs in addressing their employees' well-being in a holistic and integrated manner.

4.4.3.4.5 *Semi-structured online questionnaire with mainly open-ended questions for empirical research conducted amongst SA public HEIs*

During this round of data collection, after having obtained gatekeeper approval from 19 of the 26 invited SA public HEIs to include them in my research, an invitation was sent to HR practitioners or assigned well-being officers at SA public HEIs to participate in the research. Those willing to participate in the research provided informed consent (see Annexures I & L), and the questionnaire was sent to them via electronic mail (e-mail) in Microsoft Word format (see Annexures J & K). This enabled participants to type responses directly onto the questionnaire, and to save it, and work on it in their own time. Although 19 institutions provided gatekeeper approval for the research to be conducted, 11 of them eventually participated in the research by completing the questionnaire. Hence, there was a total of 11 research participants in the main empirical research study.

The rationale behind the semi-structured, online questionnaire with mainly open-ended questions was that all the participants were widely dispersed across South Africa at eleven of the SA public HEIs. Hence, this would make engaging in face-to-face interviews a costly exercise. Furthermore, participants often have limited time available to engage in face-to-face interviews. The online questionnaire thus offered a cost-effective and convenient data collection method.

Online data collection is an accurate data collection method, as it does not require for the data to be transcribed (Gibbs 2007:20). Babbie (2013:282-283) points out that online data collection provides a comfortable, non-threatening environment, making it easier for participants to provide sensitive information. A disadvantage of online questionnaires is that participation rates sometimes are low, although the participation rate in this study was good (11 out of 26 institutions), as all participants were contacted both via e-mail and telephonically in an attempt to increase the response rate, and to reach a greater number of participants in the questionnaire survey (*cf.* Cohen *et al.* 2011:276).

The few closed-ended questions were followed by open-ended questions, to encourage full, meaningful answers involving the participants' own ideas, opinions, knowledge and feelings, without being influenced by the researcher. The free-form written answers enabled me to gain a deeper understanding of the participants' thoughts, as I was able to read their thoughts as described in their own words. This also allowed me insight into the employee well-being programmes applied by SA public HEIs.

The following section elaborates on the design of the questionnaire, which was used for purposes of conducting the empirical research.

a) *Design of the questionnaire*

Three questionnaires were developed for purposes of the baseline pilot study (see 4.4.3.4.2), the empirical research (see 4.4.3.4.5), and the validation of the designed employee well-being framework by a panel of experts (see 4.4.2.1). A semi-structured, open-ended questionnaire was designed for the baseline pilot study (see Annexure E). For the empirical research, the questionnaire used in the baseline pilot study was updated and broadened following an extended literature review. The questionnaire was semi-structured, and mainly open-ended questions were used to obtain rich information from the participants (see Annexures J). Two participants preferred to answer the questionnaire telephonically (see 4.4.3.4.7; Annexure K 1). Closed items were mainly used to gather demographic information, and other closed items were kept to a minimum, and were used to direct participants to the new questions (contingency questions). Such closed questions thus were followed by an open-ended question, which required the participant to motivate the answer provided in the closed item. This also ensured that double-barrelled questions were avoided, as proposed by Babbie (2013).

The questionnaire to be used for the empirical study then was sent to twelve experts in the field of employee well-being, identified by means of snowball sampling, for validation purposes. They were asked to comment on the clarity of the questions set, the wording and the complexity of the questions, and to make any relevant comments,

or additions, that they regarded important. These experts included industrial, counselling and educational psychologists, all working or having experience in the field of higher education. Of the twelve invited experts, seven returned their inputs on the questionnaire. Their inputs were valuable, and contributed to the completeness and relevance of the questions asked to inform the research problem. I incorporated the comments received that were regarded as valuable and relevant to the study into the questionnaire, after which it was linguistically revised, and sent to participating HEIs via e-mail.

Care was taken that the font was clear and easily readable. Related items were grouped together to make their context clear, and definitions that would assist in participants' understanding of the questions, were provided. Instructions were brief, and questions were neutral, singular and clear, and they allowed participants to respond to questions in their own words, as proposed by Patton (2002:353-354). This is important, as I wanted to obtain the participants' views regarding their institutions' employee well-being programmes, and to identify the different themes that emerged from the questions asked in the questionnaire.

The questionnaire included a section for demographic information (name of institution, position and post level of participant, race, age, gender and years of service at the institution) to be provided, and consisted of three questions, with relevant subsections (see Annexures E & J). The responses to the questionnaire are analysed in detail in Chapter 5 of this report (see 5.4.1 - 5.4.15).

4.4.3.4.6 (i) Pilot validation survey and (ii) validation survey conducted by means of a self-constructed survey questionnaire for purposes of validating the integrated employee well-being framework for SA public HEIs

The validation of the integrated employee well-being framework was done through collecting the perspectives of experts in the fields of educational and industrial psychology, and organisational and employee well-being.

(a) *Pilot validation survey by experts*

Firstly, a pilot validation survey was performed by means of a self-constructed survey questionnaire with mainly open-ended questions pertaining to the integrated employee well-being framework (see Annexure N), which was sent to four employee well-being experts employed by SA public HEIs via e-mail. Their details were obtained from some of the experts who participated in the validation of the questionnaire sent to public HEIs for purposes of the empirical research. Three of them agreed to participate in the validation process. Written consent were obtained from them, and their inputs on the integrated employee well-being framework were considered, and applied to the framework, where relevant and applicable. This process is described in detail in Chapter 6 (see 6.5.1).

(b) *Validation survey by panel of experts*

Following the pilot validation survey and adaptation of the integrated employee well-being framework, three other experts in the fields of industrial, counselling and educational psychology were purposefully selected, based on their particular expertise in employee well-being as portrayed in the literature, after which snowball sampling of experts was applied based on recommendations provided by the experts that were initially identified, and nine more employee well-being experts were contacted for purposes of validating the framework. I strived towards maximum variation of the selected experts pertaining to gender, ethnicity, experience, research focus and/or institutional affiliation (as applicable). Six experts participated in the validation process. Written consent were obtained from these psychologists and well-being experts. Based on the inputs received by these well-being experts, adjustments were made to the proposed framework, and a final integrated employee well-being framework for SA public HEIs was designed (see Annexure T). This process is described in detail in Chapter 6 (see 6.2 - 6.5).

4.4.3.4.7 Telephonic responses to questionnaires

Two of the eleven SA public HEIs that participated in the empirical research, preferred to answer the questionnaire telephonically. The same questionnaire that was e-mailed to participants who completed it via e-mail, were used for these two participants (see Annexure K 1). Participants provided written consent to participate in the research (see Annexure L). I voice-recorded the entire telephonic discussion by means of a digital voice recorder, and transcribed the answers provided by the participants per question. I then repeated the answer to the participants telephonically, for purposes of member checking, to confirm whether I had captured it correctly. After obtaining the answers to the questionnaire telephonically, I immediately listened to the voice-recordings, and made some notes following that process. Thereafter, I checked the correctness of the transcribed answers against the recordings. I then e-mailed the transcribed responses to the two participating SA public HEIs, for purposes of a second round of member checking (*cf.* Mason 2002). Both institutions indicated that the responses were captured correctly, and they did not add, or subtract, any information from the typed responses. I dealt with the data obtained in exactly the same manner as the data obtained from the SA public HEIs that had completed their questionnaires online.

4.4.3.4.8 Research journal

I kept a research journal throughout the research process for purpose of reflecting on relevant literature; the research design and methodology appropriate for the research; information related to participating SA public HEIs; the empirical research; data collection and interpreting (Patton 2015). In this journal, I captured thoughts, reflections and reasons for choosing the particular research design; notes on discussions with my supervisor and co-supervisor; the sample selection; the questions for the pilot study, empirical research and the well-being framework validation process; the experts who participated in the validation of the questionnaires and the designed integrated employee well-being framework; the data collection process; and how I went about interpreting the data.

4.4.3.4.9 *Regular discussions with promoter and co-promoter*

I had regular discussions with my promoter and co-promoter during every phase of this research, and made notes during such discussions, which I then studied carefully after each discussion session. They both have years of experience in the South African higher education sector, and in the fields of Educational Psychology and Curriculum Studies, respectively. Combined, they have supervised several master's and doctoral students for more than 23 years, and are therefore experienced. They were also the promoter and co-promoter for my master's degree study, which was conducted in the same field of employee well-being within the higher education sector, but with a focus on how Appreciative Inquiry could be utilised to enhance the well-being of support services employees of a South African public HEI (*cf.* Van Straaten 2014).

4.4.3.5 *Recording the data gathered*

When recording the information gathered, the researcher is expected to engage with it so that the connection of the information with theory becomes clear, and so that valuable insights are brought about beyond the documentation process (Willig 2013). I converted the raw data that were gathered into a thick description (*cf.* Henning, Van Rensburg & Smit 2004:6), to give a coherent account of the phenomenon. Thus, in recording the information, I provided more than mere facts and empirical content (see Chapter 5). Amongst others, I interpreted the information from the theoretical framework that guided the study, which framework was discussed in Chapters 1 and 2 respectively (see 1.6.3; 2.2).

The research findings are reported by comparing the findings in table form, and through detailed, thick descriptions (*cf.* Markula & Silk 2011) (see Chapter 5). Triangulation and validation of the feedback were applied (see 6.2 - 6.5). The limited quantitative data obtained were expressed in terms tables and/or graphical representations.

Furthermore, telephonic responses were digitally recorded, and transcribed. This process is discussed in detail in section 4.4.3.7.

4.4.3.6 Resolving field issues

Various ethical issues may arise during the research process (Creswell 2013:171-175). The ethical considerations that I applied in this study are discussed in section 4.7 (see 4.7.1 - 4.7.5). Field issues could include issues related to documents, observations, interviews and ethical issues. The relationship between the researcher and participants is therefore important. I did not experience any challenges related to field issues during the research process. A positive relationship was maintained with all participants throughout the study.

4.4.3.7 Storing the data safely

Data storage and safe-keeping are very important aspects of the data collection process, and more especially when online data are collected. Data files were backed up. Furthermore, the identity of all institutions and participants were protected by assigning codes to each participating institution and participant. A system was designed and kept safe on my computer via password protection, by which I organised the storage and retrieval of information, as proposed by Creswell (2013:176-177). I exported and saved the returned questionnaires on two removable hard drive devices, and kept them in my safe, which is only accessible when the code is known. Thus, a back-up copy of the data was kept safe, ensuring that the data could not be viewed by unauthorised individuals.

In the next section, the methods of data analysis employed are discussed comprehensively.

4.5 DATA ANALYSIS AND INTERPRETATION

When conducting research, it is important to produce accurate and meaningful data, so that the social context within which the research was conducted can be understood. The use of quantitative and qualitative data analysis methods relies completely on

“fitness for purpose” (Cohen *et al.* 2011:604). Thus, the techniques used to analyse and interpret the data that I have obtained through this study were guided by the research methods and objectives that I adopted.

As I applied a qualitative data analysis approach, I analysed and interpreted the data by identifying central themes that emerged from the data (*cf.* Cohen *et al.* 2011:537; Du Plooy-Cilliers *et al.* 2014:228-229; Maree 2016:109; McMillan & Schumacher 2010:367). Inductive thematic analysis was conducted (Anderson 2009; Braun & Clarke 2006:77). This process is discussed in detail in 4.5.3 below.

The data analysis was done by me as primary researcher. As researcher, it was my task to interpret this information. The principle of disciplined subjectivity, as formulated by McMillan and Schumacher (2006:13), was constantly applied to avoid bias. Qualitative data analysis was done by interpreting that data that were gathered (*cf.* Lincoln and Guba 1985, in Mertens 2010:226).

Furthermore, it was my task as researcher to give meaning to the data through thick descriptions, as proposed by Henning *et al.* (2004:6). This thick description gave a coherent account of the research phenomenon, and I was therefore able to interpret the information from the theoretical framework that guided the study (see 2.2). The evidence thus came from both the collected data and the theory, which strengthened both my understanding of the phenomenon, and the trustworthiness of the research.

The methods of content analysis and data interpretation that I used comprised the following four steps, as proposed by Anderson (2009:213):

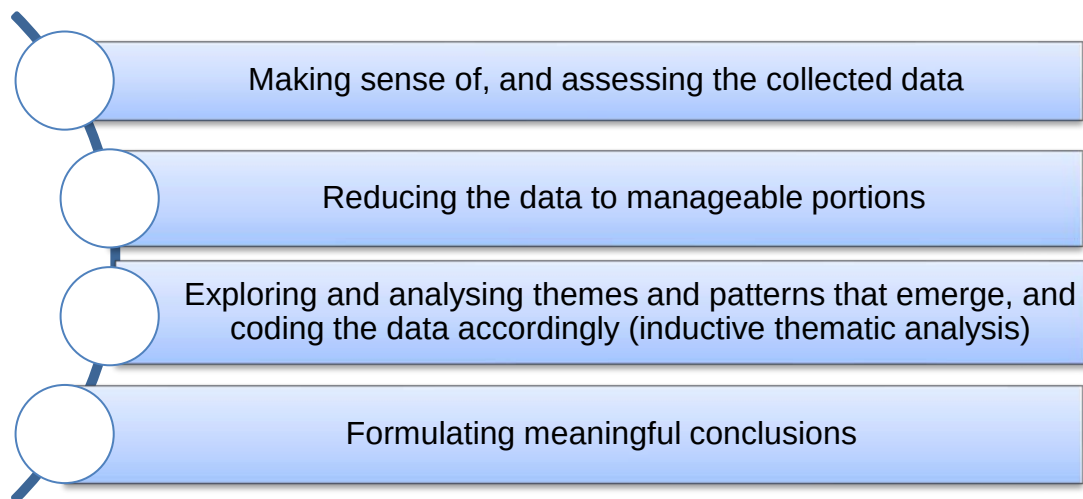


Figure 4.2 Data analysis and interpretation process (adapted from Anderson 2009:213)

4.5.1 Making sense of and assessing the collected data

The first step of data analysis, namely making sense of and assessing the content of the data collected, involved that I asked questions about the essence of what the data provided by participants by means of the questionnaire to and telephonic discussions with SA public HEIs, and the data obtained from validation questionnaire related to the integrated well-being framework sent to well-being experts, were communicating. I read the collected data multiple times to gain a clear understanding of the information provided, and made notes on these.

Since I worked in the research paradigm of constructivism, I was particularly interested in gaining an understanding of the world of all the research participants, and their views pertaining to effective, integrated employee well-being programmes (*cf.* Terre Blanche *et al.* in Terre Blanche *et al.* 2006:280). I therefore carefully read each response a few times, and looked for descriptive words – words that described the participants' emotions, reality and viewpoints. Being a linguist by occupation for many years was helpful, as my everyday work requires of me to be "language-minded", and to search for meaning from words/language.

4.5.2 Reducing the data to manageable portions of information

The second step of data analysis and interpretation, namely reducing the data to manageable portions of information by applying deductive reasoning, was performed by forming a clear understanding of what the participants had communicated, and analysing the data accordingly.

I then reduced the information gathered by means of the questionnaire and telephonic responses to the questionnaire to manageable pieces by searching for words and phrases that were related to the dimensions/building blocks of well-being (see 2.4.1 - 2.4.9), and the well-being components of the best, integrated well-being programmes worldwide, as identified during my literature review, and how these were connected with the well-being theories that were chosen to support this study (see 1.6.3; 2.3.9). The reduced information was then grouped into fitting categories related to the dimensions of well-being, the elements of effective well-being programmes, and all the factors influencing employees' well-being (see 5.4.1 to 5.4.16).

4.5.3 Exploring emerging themes and patterns, and coding the data accordingly (inductive thematic analysis)

The third step (exploring themes, subthemes and patterns, and coding the data accordingly) was addressed by searching for the key themes that emerged from the collected data, and coding the data accordingly. This is known as inductive thematic analysis (Braun & Clarke 2006:77).

In analysing the data, I performed both semantic analysis (dealing with the surface meanings of themes) and a latent analysis (dealing with underlying ideas, assumptions and conceptualisations to interpret and explain the data) (cf. Braun & Clarke 2006:84). I organised all the data gathered by grouping similar themes under the different dimensions of well-being, the elements of effective well-being programmes, and all the factors influencing employees' well-being, as identified from the empirical research (see 5.41 to 5.4.16). This was done by clustering the qualitative results by means of inductive thematic analysis (Braun & Clarke 2006; Saldanã 2009).

According to Braun and Clarke (2006:77), inductive thematic analysis is a qualitative research method in itself. Central themes were thus identified from these clusters of data, as well as emerging sub-themes. I then assigned codes to each theme and subtheme, to make the identification of those themes easy. Coding entailed the processing of the collected data, and breaking it up into units of meaning (Anderson 2009; Saldanã 2009). Analysis of the data was then performed by creating themes and subthemes by grouping the coded data (Anderson 2009).

4.5.4 Formulating meaningful conclusions

During the final step of data analysis and interpretation, meaningful conclusions were formulated from the data collected. The qualitative data analysis' repetitive characteristics allowed me to formulate conclusions in terms of evidence found (Anderson 2009:230). I justified my research conclusions based on the data analysis process that I followed by constantly comparing the research findings with the best practice in terms of employee well-being programmes worldwide, as identified from the literature review (see Chapter 5).

4.6 TRUSTWORTHINESS

In order to establish trustworthiness of the research conducted, the data that are gathered during the research should mirror the phenomenon that was studied. Nieuwenhuis (2016) states that the use of multiple data gathering methods assists in establishing trustworthiness. I followed this advice and used multiple data gathering methods for purposes of this research, namely an extensive literature review, a pilot study using a semi-structured, open-ended questionnaire, an empirical investigation using a semi-structured questionnaire with a few closed, and mainly open-ended questions; document analysis; and the validation of the integrated well-being framework by well-being experts. This contributed to the quality and trustworthiness of my research.

In qualitative research, various terminologies make reference to the establishment of believable results. Lincoln *et al.* (1985 in Cohen *et al.* 2011:181) identified four criteria to be met to increase the trustworthiness of a study, namely credibility (related to validity), transferability (related to external validity or generalisability), dependability (related to reliability) and confirmability (related to degree of objectivity /subjectivity/ authenticity). I shall now explain how I complied with these and other criteria to optimise the trustworthiness of my research.

4.6.1 Credibility

Mertens (2005:254) argues that credibility relates to the fact that there should be correspondence between the manner in which participants perceive social constructs, and the way researchers present their own viewpoint. This is confirmed by Merriam (2009:213) and Mertens (2010:388).

First of all, I used well-established and appropriate research methods in the qualitative study, as proposed by Harris, Gleason, Sheean, Boushey, Beto and Bruemmer (2009:87), and as outlined earlier in this chapter. I performed a thorough literature review prior to conducting the empirical research (see Chapters 2 and 3), and used multiple sources of data collection (namely a literature review, pilot questionnaire (see Annexure E), a questionnaire for purposes of the empirical research (see Annexure J), document analysis (see 4.4.3.4.4); and validation of the well-being programme by well-being experts (see 6.5) - referred to as triangulation (Markula & Silk 2011:205).

Mertens (2010:257) indicates that peer reviews – also known as debriefing – provides an external check of the research process. Peer review entails that an individual, or individuals are involved who keep the research honest, to ask questions regarding the research methods, meanings and interpretations, and to provide the researcher with the opportunity to ask questions and raise any concerns (Creswell 2013:252). I had regular discussions with my promoter and co-promoter during every phase of conducting this research. This was done purposely to strengthen the reliability of my study. The two research promoters provided regular debriefing and a valuable peer-review. They asked questions about the literature review that was conducted, the

empirical research conducted, the research questions, methodology, method and the interpretation of data. Furthermore, they provided valuable guidance and answered some of my questions and concerns.

Member checking is another method of increasing the credibility of research (Merriam 2009:229). It is also referred to as participant validation or participant review, and solicits participants' views of the credibility of the research findings, and interpretation thereof. This process may involve checking the accuracy of interpretations with participants in an informal manner (McMillan & Schumacher 2010:33). To this end, I contacted the participants from SA public HEIs via e-mail or telephonically when they returned their questionnaires to me, for purposes of checking the accuracy of my interpretation of some of their responses to questions asked in my questionnaire that required further clarification.

With regard to the telephonic answering of the questionnaire, I repeated responses to questions provided by the two SA public HEIs who preferred to answer the questionnaire telephonically, to them after each response had been provided, to ensure that I had captured their responses correctly. Upon completion, I listened to the recordings of the telephonic responses to the questionnaire, and transcribed the respondents' responses unto the questionnaire. I then e-mailed the completed questionnaire to these two participants, and asked them to check if their responses were captured accurately. No amendments to the responses were made by the two participants, which was proof that I had captured their responses accurately.

I also used member checking with experts in the field of industrial, educational and counselling psychology, as well as organisational and employee well-being, during validation of the integrated well-being framework that I designed for SA public HEIs, (see 4.4.3.4.6; 6.5). I contacted them telephonically to discuss some of their responses and comments, in order to check the accuracy of my interpretations thereof.

As indicated in 4.4.3.7, I kept the data safe on my computer via password protection, for purposes of storing and retrieving the information. Furthermore, I saved the returned questionnaires on two removable hard drive devices, which were locked up in my safe. This ensured that the data could not be viewed by unauthorised individuals.

To ensure saturation of data collected, I read the data collected multiple times to ensure that I did not overlook any information. All of the above-mentioned steps were performed in an attempt to increase the credibility of my research. McMillan and Schumacher (2010:330) indicate that verbatim accounts of conversations and direct quotes from data collected are valuable. Thus, I used direct quotations from collected data to illustrate the interpretation of research questions by participants, and to enhance the confirmability and credibility of the research findings.

Finally, the credibility of this study was enhanced by the careful selection of research participants, checking the findings with them, and with experts in the field, and also through the careful analysis and reporting of the data.

4.6.2 Transferability

Merriam (2009:223) states that transferability is about the degree to which the research findings can be applied to other contexts (Merriam 2009:223). The reader of the research findings determines the degree of transferability or generalisability between the context of the study and the context in which it is applied (Mertens 2005:256). Thus, the researcher should provide sufficient data in the study report to enable the reader to make a sound judgement (Mertens 2005:309). A thorough, or thick description of the research in terms of the research setting, research participants and findings of the study, as supported by sufficient evidence and maximum variation in the selection of the sample, strengthens the transferability of a study (McMillan & Schumacher 2010: 335; Merriam 2009:225).

I attempted to provide a rich description of the study and study setting; the participants; how they were selected; and reported the research through careful descriptions of the evidence, and by citing the findings of existing research, to enable the reader to apply

the research findings to similar or related contexts (*cf.* McMillan and Schumacher 2010:335); and so that others will reach the same conclusions as I from the data (Du Plooy-Cilliers *et al.* 2014:258-259). However, transferability was not the main aim of this study.

4.6.3 Dependability

The dependability of a study is influenced by the manner in which the research findings are consistent with the data collected (Merriam 2009:220; Mertens 2010:258). It therefore is directly related to the reliability of a study, and to the consistency of the research findings, and whether the findings are repeatable in similar circumstances (Merriam 2009:220). Thus, the researcher should provide detailed explanations of the study, and how the data were collected and analysed.

To this effect, I provided detailed descriptions of the research findings. Reasons for choosing the particular research design, questionnaires, research sample; data collection and interpretation were provided. These detailed descriptions increase the dependability of my study. Peer review and triangulation further enhanced the dependability of the study.

4.6.4 Confirmability

Confirmability refers to the degree to which the research findings are shaped by the participants, and not by the researcher's interests (Guba & Lincoln 2005). In qualitative research, confirmability refers to the strategies that the researcher implements to ensure that researcher bias and prejudices are limited and objectivity is preserved to such an extent that the same conclusions will be reached by others who look at the data (Du Plooy-Cilliers *et al.* 2014:259; Maree 2016:125). Thus, the researcher must be explicit about the instruments used in interpreting the data, and must ensure that qualitative data can be traced back to the original sources (Lincoln *et al.*, in Mertens 2005:258). I have applied the strategy of disciplined subjectivity and reflexivity (*cf.* McMillan & Schumacher 2006:13; 2010) throughout this study in an attempt to increase the confirmability of my research.

The researcher must also ensure that data are captured accurately and stored safely. Lincoln *et al.* (in Mertens 2005:258) emphasise the importance of the researcher keeping evidence of all the sources used and information gathered and analysed, so that, should an audit be performed, the same conclusions would be reached. I have explained how I had adhered to these principles by storing all the data gathered in an appropriate manner, and had ensured that the data would be accessible, if required. I also documented how I went about analysing the data (see 4.6).

4.6.5 Authenticity

Authenticity refers to the extent to which a study provides an accurate description of the phenomena from a particular point of view, and avoiding bias by making sure that the voices of the research participants emerge clearly (Mertens 2014). In an attempt to enhance the validity and authenticity of the research findings, amongst others, I reported the data that were collected verbatim (by means of direct quotations) (see 5.4.1 to 5.4.15).

Furthermore, I made an all-out effort to consider and understand the multiple perspectives provided by participants pertaining the well-being programmes offered by their institutions. As proposed by McMillan and Schumacher (2010), bias was avoided in the interpretation of the data by applying disciplined subjectivity and reflexivity. Amongst others, this entailed that I asked questions about my own bias, motivation for and interest in the study.

4.7 ETHICAL CONSIDERATIONS

Credible research does not only consist of selecting participants and following certain chosen research strategies. It involves adherence to research ethics (McMillan & Schumacher 2010:338). Ethics can be described as the researcher's moral compass that determines his/her attitude and behaviour (McMillan & Schumacher 2010). These attitudes and behaviours are important, since the researcher's actions have an effect on all the stakeholders involved in the study.

The reflective approach that I followed enabled me to engage with the ethical considerations as they arose. The ethical considerations that were implemented in this study are discussed below.

4.7.1 Permission to conduct research

As researcher working with humans, I had to take special cognisance of ethical considerations. Prior to conducting a study, approval must be obtained from the relevant institution for the data collection involved in the study (Creswell 2013:57). Approval to conduct this was obtained from the Ethics Committee of the University of the Free State (as per ethics number UFS-HSD2016/1176), the UFS Title Registration Committee, and the Faculty Board of the Faculty of Education of the University of the Free State. I then obtained permission (gatekeeper approval) from 19 of the 26 invited SA public HEIs to conduct the research, although only 11 participants eventually participated in the research by returning their completed questionnaires.

4.7.2 Written informed consent and participation on voluntary basis

Written informed consent were obtained from all research participants (see Annexures D, I, L & O). The principles of informed consent and voluntary participation in the empirical research, and in the validation of the integrated well-being framework by well-being experts, were explained in an invitation letter to SA public HEIs (see Annexures C & H) and the validation panel members (see Annexures M1 & P1), and obtained by means of an attachment to the online questionnaires). The consent forms were designed as such to include a summary of the ethical issues (see Annexures D, I, L & O).

Participants were notified that their participation in the study was entirely voluntary, and that they could withdraw from the research at any stage, should they wish to do so (*cf. Vogt et al. 2012:254*). The nature of the research was shared with participants, and they were informed that they and their institutions would remain anonymous, and that any data that would be collected as part of the research would not be linked to

them. I thus could identify the participants for the purposes of further validation and clarification of answers.

Furthermore, during the data analysis and reporting processes, names of institutions were coded, and the data were kept confidential by not allowing unauthorised persons access to the data.

4.7.3 Confidentiality, anonymity and respect for privacy

I followed Leedy and Ormrod's (2013:151) principles to keep the data confidential by allocating various pseudonyms for different participating institutions, and using aliases both during data collection and in the final research report. Pseudonyms and random codes were used to ensure the confidentiality of data. Furthermore, data were safeguarded by locking hard copies in a cabinet.

A system was designed and kept safe on my computer via password protection, by which I organised the storage and retrieval of information, and ensured that data that were stored electronically, were protected (*cf.* Creswell 2013:176-177; Leedy & Ormrod 2010:102-103; McMillan & Schumacher 2010:339). I exported and saved the returned questionnaires for both the empirical research and the integrated well-being framework validation process on two removable hard drive devices, and kept them in my safe, which could only be opened by inserting a code that only I have, to ensure that it could not be viewed by unauthorised individuals.

As explained in section 4.4.3.7, the identity and privacy of institutions and their participants, as well as experts who participated in the validation of the integrated well-being framework, were protected by assigning codes to each participating institution, participant and well-being expert. For example, participating institutions were named Institution A, Institution B, Institution C, etc. (for purposes of protecting their privacy and identity), meaning participant 1, 2 and 3, and so forth. Furthermore, as proposed by Merriam (2009:161), care also was taken to ensure that participants and validating well-being experts were not identifiable by the details of their responses in the reporting of data.

4.7.4 Caring and fairness

Throughout the research process care was taken not to humiliate participants, or to lose their trust, and to treat them with respect and fairly. I took precautions to ensure that the participants were not exposed to any harm. The pilot study and empirical research, as well as the validation process for the integrated well-being framework designed for SA public HEIs were conducted by means of three different, semi-structured, mainly open-ended questionnaires distributed to participants and well-being experts via electronic mail, which meant that participants and experts could complete it in the environment of their offices, or homes – hence a safe and familiar environment.

As already indicated, the anonymity of all institutions, their participants and the well-being experts who performed the validation of the integrated well-being framework was ensured, and no details of the institutions, or their employees who participated in the research, or the well-being experts were or shall be made known at any time. Hence, I was continuously aware of the harm that may be caused to participants during data collection, analysis and reporting, and made every attempt to avoid it.

4.7.5 Minimising deception/misinterpretation of research results

During the analysis of the research results, I was conscious not to side with participants, or to disclose only positive or negative results. Furthermore, I ensured that the privacy of all institutions, their participants and well-being experts was protected, and that they were not identifiable in any of the data files and reports. I was honest in reporting the research results, did not plagiarise, and communicated the results in clear, understandable language. I also was aware of possible limitations of the study which could impair the generalisation of the conclusions reached (Babbie 2013:65; Creswell 2013:58-59). The limitations of the study are reported in detail in Chapter 7.

4.8 CONCLUSION

This chapter provided a detailed overview of the research design and methodology employed in this study. The research design was discussed, as well as the research strategies employed, and the research methods applied were explained.

Choosing to work within the constructivist research paradigm, and choosing a qualitative research design (by means of semi-structured, mainly open-ended questionnaires answered online by seven, and telephonically by two of the participating SA public HEIs) and evaluation research (by means of document analysis and active research) as research methods for this study proved to be useful in gaining insight into, and sufficient, relevant information on the research phenomenon, namely employee well-being programmes offered by SA public HEIs, and whether they address employees' well-being holistically and in an integrated manner. It also assisted me to design a modified, integrated employee well-being framework for SA public HEIs.

As explained in section 4.3.1 of this chapter, the principles of constructivism entail that different realities exist for different people. This paradigmatic approach enabled me to respect and value the different interpretations of the HR practitioners of SA public HEIs in terms of their employee well-being programmes, as well as the inputs provided by well-being experts during the validation process of the integrated well-being framework.

The use of a multiple case study design to gather information on the employee well-being programmes used by SA public HEIs proved particularly valuable in this study. The main aim of the study was to look into the existence, integration and effectiveness of employee well-being programmes utilised by SA public HEIs, in comparison with best practice globally, and to identify any possible gaps in terms of their employee well-being approaches that could be addressed by means of the design of an integrated well-being framework for SA public HEIs.

Figure 4.3 below provides a summary of the research title and aim of the study, as well as the paradigmatic perspectives, and the research design and methodology that were discussed in this chapter.

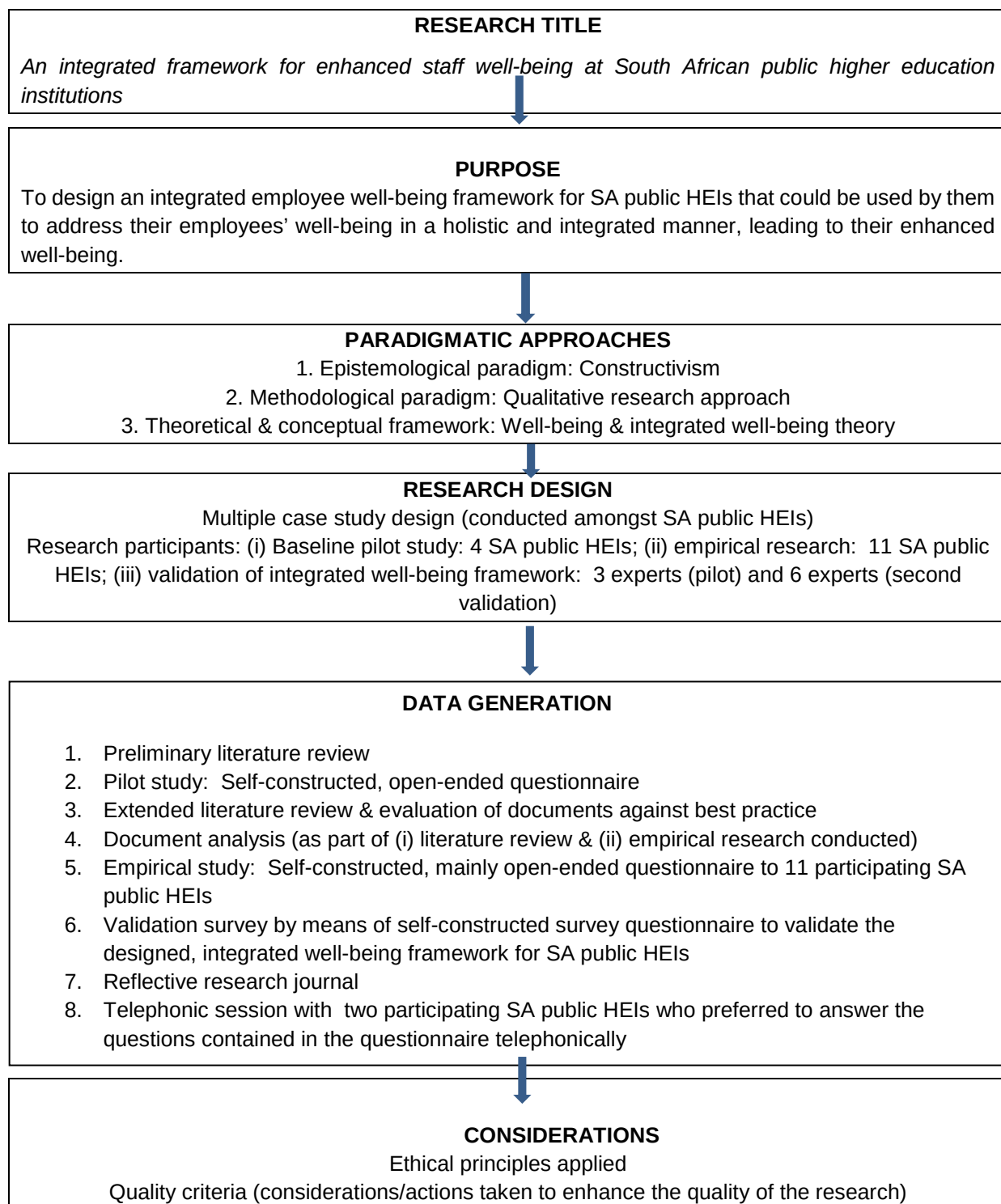


Figure 4.3 Summary of research question, research design and methodology applied

The next chapter offers a critical discussion of the analysis of the research results.

5.1 INTRODUCTION

In Chapter 4, I discussed the research design and methodology that were applied in this study. In this chapter, the research findings are discussed in relation to the research questions. Based on the research findings; the extensive literature review that was conducted; the outcome of both the pilot study and an empirical study, an integrated employee well-being framework for SA public HEIs will be designed. This framework will be presented to experts as part of a pilot validation process, followed by a final validation by a broader panel of experts in the field of employee well-being. The final framework will be presented in Chapter 7.

This chapter answers the third, fourth and fifth secondary research questions, namely:

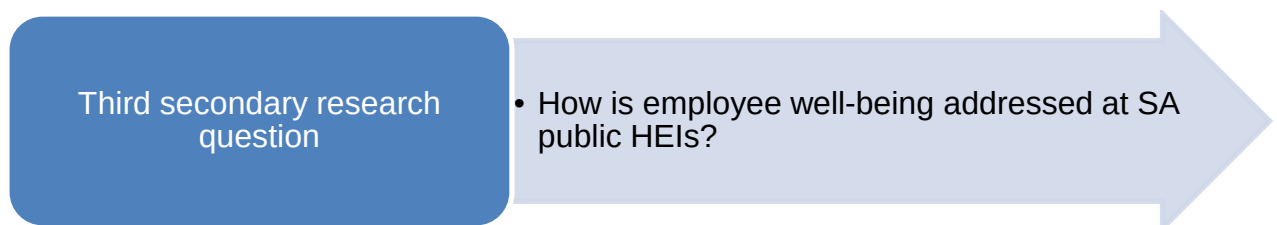


Figure 5.1 Third secondary research question addressed in this chapter

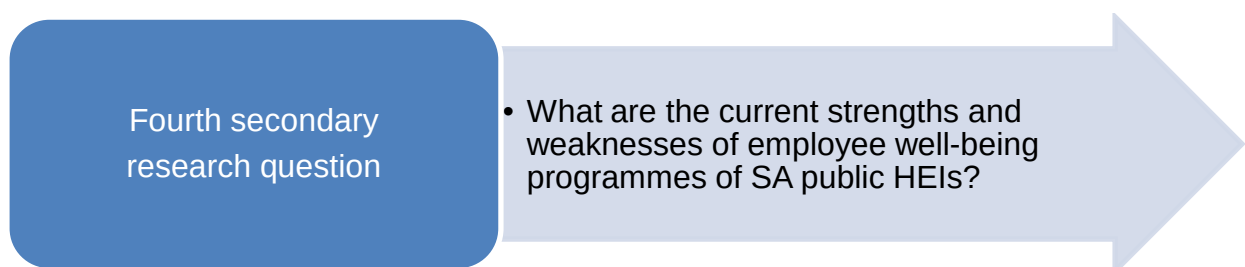


Figure 5.2 Fourth secondary research question addressed in this chapter

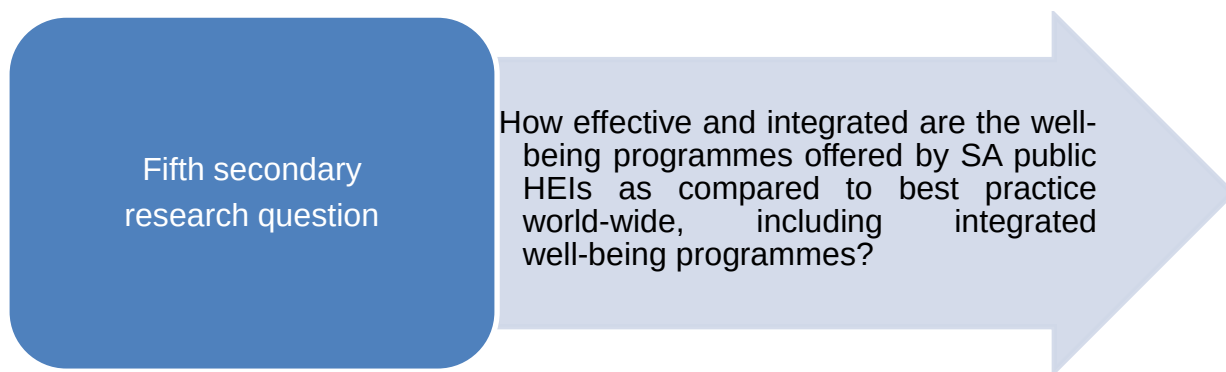


Figure 5.3 Fifth secondary research question addressed in this chapter

The research findings are discussed in this chapter, following the four steps as indicated below.

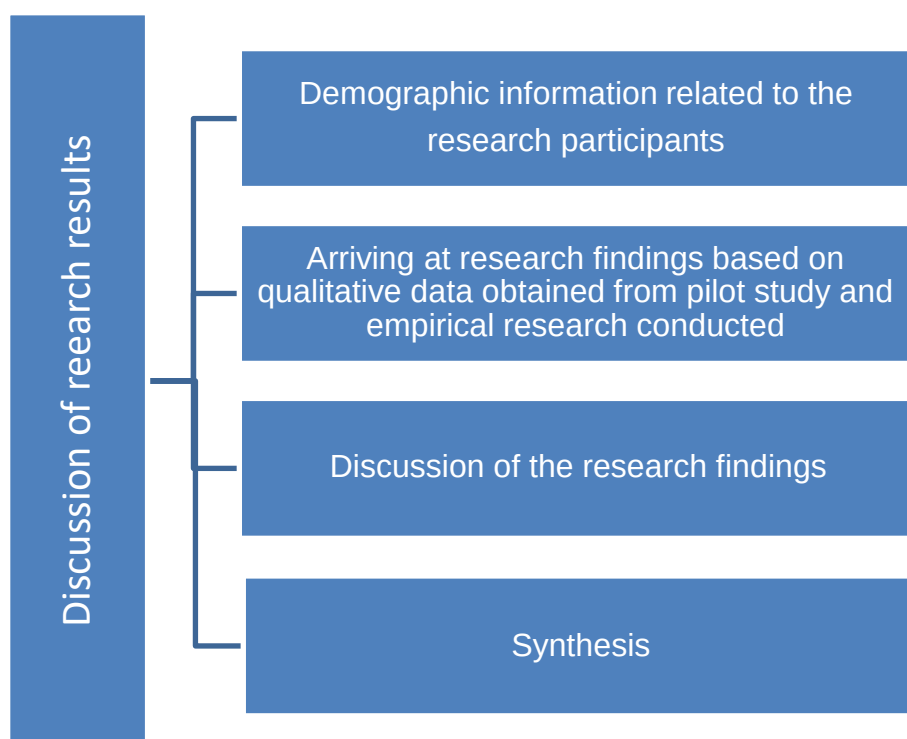


Figure 5.4 Process followed for discussion of the research results

5.2 DEMOGRAPHIC INFORMATION RELATED TO PARTICIPANTS

The demographic information related to the research participants collected during the pilot study, are described below.

5.2.1 Baseline pilot study

Four South African public higher education institutions partook in the baseline pilot study conducted at the onset of this study, which took the form of a pilot study (see 4.4.2.1; 4.4.3.4.2). All of the 26 SA public HEIs were invited to participate in the pilot study, but only four institutions responded and completed the questionnaire (see Annexure E), which had the main aim of determining whether SA public HEIs had well-being programmes in place; what the strengths of these programmes were in the view of the participants; what elements of employee well-being these well-being programmes addressed; how the effectiveness of the programmes was measured; and how the participants felt employees of SA public HEIs' well-being could be addressed holistically and effectively.

The semi-structured, open-ended questionnaires were distributed to, and completed by, HR practitioners responsible for employee well-being at the participating SA public HEIs. All the participants were fluent in English, and completed the questionnaire online, and in English. The only demographical details that were obtained, were the position and post level of the participants. These details are indicated in Table 5.1 below.

Table 5.1 Demographic information related to pilot study participants (N=4)

Characteristics	Position	Post level
Institution 1	Manager: Employee Wellness	No indication provided
Institution 2	Manager: Health Centre/Psychological Services	Post level P7
Institution 3	Wellness Manager	Post level P6
Institution 4	Senior Manager: Human Resources	Post level P12

5.2.2 Response rate

The response rate of participants that participated in the baseline pilot study is indicated in the table below.

Table 5.2 Response rate of participants

HEIs invited to participate in pilot study	Number of responding institutions	Response rate
26 SA public HEIs	4	16,66 %

As mentioned in Chapter 4 (see 4.4.3.4.2), a disadvantage of online questionnaires is that a low response rate is often obtained (*cf.* Cohen *et al.* 2011:280), which was the case in this baseline pilot study (see 4.4.3.4.2). I endeavoured to increase the response rate by explaining the purpose of the study in an e-mail to SA public HEIs, as proposed by Cohen *et al.* (2011-276). Although the response rate for the baseline pilot study was poor, the purpose was merely to obtain an indication of whether SA public HEIs offered well-being programmes; what types of well-being programmes they used; and to identify whether gaps identified during the literature review conducted in terms of the effectiveness of such programmes were present in the participants' well-being programmes. These gaps had a bearing on addressing employees' well-being holistically and in an integrated manner. Hence, the purpose of the first round of data collection (the pilot study) was not to collect data which might be generalised, but to obtain detailed information from the participants, whom I selected based on their knowledge and understanding of the research matter as employees of SA public HEIs responsible for employee well-being implementation.

5.3 DISCUSSION OF QUALITATIVE FINDINGS OF THE BASELINE PILOT STUDY CONDUCTED

In this section, the findings obtained via the baseline pilot study are discussed in terms of the themes that emerged from the literature review, and the themes or patterns that emerged from the data analysis. This is referred to as inductive thematic analysis (Braun & Clarke 2013). The process of data analysis for both the baseline pilot study and the empirical research was discussed in detail in Chapter 4 (see 4.5; 4.5.1 - 4.5.4).

Inductive thematic analysis does not entail a summary, or organisation of the data, but rather interpreting or explaining the data (Braun & Clarke 2006:84) (see 4.5.4). In terms of the analysis of data, Braun and Clarke (2006:84-85) also distinguish between a theoretical analysis of emerging themes guided by the specific research question(s), or the focus of the analyst, and an inductive analysis, which is guided by the data itself. My data analysis was driven by both a theoretical thematic analysis and the data itself, to increase trustworthiness (see 4.6).

The methods of content analysis and data interpretation that I applied are the following: understanding and assessing the data; reducing the data to manageable pieces of information; exploring and analysing emerging themes and patterns, and coding the data accordingly; and arriving at meaningful conclusions from the data (Anderson 2009:2013). This process was discussed in detail in Chapter 4 (see 4.5.1 - 4.5.4). When dealing with complex data, it means moving forward and backward between these steps of data analysis many times. As I worked with qualitative data, this method of analysis assisted me in determining and comparing the different themes and aspects of well-being addressed by the respective SA public HEIs in their well-being programmes. As a means of capturing and documenting response patterns in the words of the participants, representative responses were extracted.

The central themes that emerged from the baseline pilot study, consisting of four questions, which arose from the views shared by the participants, as interpreted by the researcher, are depicted in Table 5.3 below.

Table 5.3 Key themes that emerged from the pilot study conducted amongst SA public HEIs

Key themes covered in open-ended questionnaire to SA public HEIs during the pilot study	
1.	Existence of an employee well-being programme within the institution, and how long it has been active
2.	Strengths of each well-being programme
3.	Main focus/content/nature of well-being programme
4.	Effectiveness of employee well-being programme, and how it is measured
5.	Elements of well-being addressed (physical, emotional, social, psychological, financial, spiritual and environmental well-being)
6.	How employees' well-being can be addressed holistically and effectively

Each of these themes as identified from the views shared by participants, as well as a discussion on the findings related to each theme are discussed in 5.3.1 to 5.3.5 below. The data are interpreted, and shortcomings are identified. As verbatim information is provided, any grammatical or spelling errors made by participants are retained.

5.3.1 Theme 1: Existence of employee well-being programmes within participating SA public HEIs and how long these have been active

In question 1 (subsection 1.1) (see Annexure E), participants were requested to indicate whether their institution had a well-being programme in place, and for how long it had been actively offered at their respective institutions. Their responses are captured in Table 5.4 below.

Table 5.4 Existence of employee well-being programme in institution, and how long it has been active

Institution	Employee well-being programme utilised by institution	How long employee well-being programme has been active at institution
Institution 1	Yes	No answer provided
Institution 2	Yes	Actively for a year; but 3 years in total
Institution 3	Yes	8 years
Institution 4	Yes	10 years

5.3.1.1 *Discussion of findings and results related to Theme 1*

From the literature it became clear that organisations should have employee well-being programmes in place to address their employees' well-being effectively (see 3.3). From the responses it is clear that all four institutions had an employee well-being programme in place. Three out of the four institutions responded to the question of how long it had been active in the institution. Answers ranged from between three to ten years. Institution 2's well-being programme was relatively new, as it had only been implemented actively for a year, and for three years in total at the time of the response. Hence, the effectiveness of the programme might only be proved over time, and when it was monitored and evaluated (see 3.2.17).

Furthermore, institution 2 indicated that its well-being activities were often not attended by academic employees, which could mean that there was a problem with buy-in from academics. For any well-being efforts by the institution to be successful, it is important to establish buy-in from all institutional stakeholders (see 3.2.19). Responses from institutions 3 and 4 indicated that their employee well-being programmes had been implemented for eight and ten years respectively. This means that some level of the effectiveness thereof could have been determined over this period of implementation, depending on whether these institutions had monitoring and evaluation systems in place to perform such evaluations, as emphasised in the literature, and whether they considered the outcomes of such evaluation processes, towards improvement of their well-being efforts (see 3.2.17).

Illustrative verbatim comments:

Institution 2: *"The programme has been implemented starting 2014 and will continue to develop and roll out in 2015/2016 as employees begin to utilize the services on offer more. The challenges always remain what time to offer the events – specifically for groups. Academic employees often do not attend these events and after hour programmes are rarely supported."*

Institution 3: *"The wellness programme has been active for about 8 years."*

Institution 4: *"Developed and implemented and revised over time. The programme has been running since 2006."*

5.3.2 Theme 2: Strengths of well-being programme(s) offered

The second theme that emerged from the data collected, had a bearing on the strengths of the well-being programmes offered by SA public HEIs. The reported strengths are listed in Table 5.5 below.

Table 5.5 Strengths of participating SA public HEIs' employee well-being programmes

Institution	Strengths of employee well-being programme
Institution 1	1. Accessible 2. Six-dimensional approach focusing on preventative, remedial and educational aspects of well-being.
Institution 2	1. Wellness programme resides in Wellness Centre. Centre functions as multi-disciplinary team with psychologists, social worker, campus clinic and support services employees. 2. Wellness Centre offers wide range of services to employees. 3. Well-established referral network through which employees can be referred to appropriate service providers, if needed. 4. Professionals invited on regular basis to address various well-being topics, and to offer employees an opportunity to discuss concerns and pose questions.
Institution 3	1. Fully-functional Wellness Committee where all role players can give inputs on wellness issues. 2. Wellness champions are active and assist in implementation of Wellness Strategy. 3. Wellness policy and strategy in place. 4. Internal and external wellness programme offered. Employees can choose between internal and external Employee Assistance Programme (EAP). 5. EAP services available 24/7/365 in all official languages at no cost to employees and their immediate family members.
Institution 4	Well-being programme: 1. increases employees' morale; 2. increases employees' productivity; 3. improves relationship between colleagues, and line managers and subordinates; 4. raises awareness regarding health issues and how to deal with them.

5.3.2.1 *Discussion of results and findings related to Theme 2*

All four participants answered this question. The participants' responses confirmed that there were certain strengths pertaining to the employee well-being programmes offered by SA public HEIs, such as that their well-being programmes were accessible to all employees, and that it had a preventative, as well as a remedial and educational focus (Institution 1). These aspects were confirmed as strengths of effective employee well-being programmes in the literature (see 3.2; 3.2.1). Institution 2's response included that their Wellness Centre comprised a multi-disciplinary team with psychologists, a social worker, a campus clinic and other support employees offering wellness services to employees. Other strengths included a well-established referral network.

Institution 3 mentioned that they had wellness champions that actively assisted the institution to implement its wellness strategy. Institution 4, on the other hand, had an external Employee Assistance Programme that was available 365 days a year in all official languages and at no cost to employees and their immediate family members. Institution 4 indicated that their well-being programme increased employees' morale (see 2.4.9) and their productivity (see 2.4), and made employees more aware of health issues, and how to deal with them.

Participants' responses related to the strengths of the institutions' well-being programmes were extracted verbatim, as illustrated below.

Illustrative verbatim comments:

Institution 1: "It is a programme which is accessible to all staff at the university. It is a holistic 6 dimensional approach. Its focus is on preventative as well as remedial and educational."

Institution 2: "Our programme resides within the Wellness Centre. This Centre functions as a multi-disciplinary team with psychologists, social worker, campus clinic and other support staff. This affords us the opportunity to offer a wide range of services to our [name of institution] staff. We also have a well-established referral network through which we can refer staff to appropriate service providers in case we need to."

Institution 3: *“We have a couple of wellness champions that are active and assist in the implementation of the wellness strategy. We have an internal and external wellness programme. So people have an option of choosing between internal and external EAP. Our external EAP services is available 27/7/365 in all official languages at no cost to employees and their immediate family members.”*

Institution 4: *“Increase of staff’s morale. Increases productivity. Created better relationships with colleagues and line managers. Awareness of the health issues and how to deal with it.”*

5.3.3 Theme 3: Structure/main focus/content of well-being programme, and how institution utilises it

It is clear from the literature study that organisations make use of various employee well-being programmes to address their employees’ well-being, and that these programmes are also structured uniquely (see 3.2.19; 3.24). The third central theme identified from both the literature and the data collected, was about the structure, main focus and content of institutions’ well-being programmes, and how the respective institutions utilised these programmes. Responses received from the different participants are listed in Table 5.6 below.

Table 5.6 Structure/main focus/content of well-being programme, and how institution utilises it

Institution	Structure/main focus/content of well-being programme & how institution utilises it
Institution 1	1. Multi-dimensional approach addressing physical, emotional, social, financial, spiritual and intellectual well-being. 2. Utilised through departmental forums, workshops and lunch-hour talks.
Institution 2	1. Well-being model that comprises physical, emotional, social, spiritual and intellectual well-being, as well as HIV/AIDS. 2. Programme is utilised through: • individual/face-to-face counselling; • a lifestyle programme; • opportunity for employees to donate blood on monthly basis; • first-aid training with ER24 and serving as “first aiders” in departments and faculties;

	• morale-building events; • supporter clubs/support groups where employees can partake in mutual interests and support one another.
Institution 3	Wellness plan consisting of: 1. Employee Assistance Programme (EAP); 2. HIV/AIDS; 3. assistance to employees with disabilities.
Institution 4	Employee Wellness Programme consisting of: 1. Employee Assistance Programme (EAP); 2. emergency and trauma counselling for individuals and groups; 3. training line managers; 4. training employees; 5. addressing lifestyle challenges; 6. offering wellness days and annual wellness fairs.

5.3.3.1 *Discussion of results and findings related to Theme 3*

From the responses provided in Table 5.6 above, it is clear that participants were familiar with the structure, main focus and content of their institutions' well-being programmes. However, some responses indicated a gap in terms of addressing all the important dimensions of employees' well-being (as identified during the literature study) through the structure/contents of the institutions' well-being programmes, such as environmental well-being (Institution 1) (see 2.4.7); psychological well-being (institutions 1 & 2) (see 2.4.3); and emotional, social, psychological, financial, environmental and intellectual well-being (institutions 3 and 4) (see 2.4.3; 2.4.4; 2.4.5; 2.4.7; 2.4.8).

From the responses, it became clear that the well-being programmes of institutions 3 and 4 were mainly aimed at improving employees' physical (see 2.4.1) and intellectual well-being (2.4.8).

Some of the verbatim responses from participants to this question are provided below.

Illustrative verbatim comments:

Institution 1: *“Our structure is a multi-dimensional approach with the focus on prevention, promotion and remedial actions and activities. Dimensions: Physical well-being; emotional well-being; social well-being; financial well-being. Spiritual and intellectual well-being We utilize platforms like lunch hours talks and departmental forums, workshops, etc.”*

Institution 2: *“The programme consists of the following: Individual face to face counselling to staff...; a lifestyle programme...; the programme also offers staff the opportunity to donate blood...; first aid training with ER24...; morale building events to make working at [name of institution] fun...; we are also in the process of creating “supporter clubs” and support groups wherein staff can join to partake in mutual interests and support one another.....”*

Institution 4: *“EAP; Emergency and Trauma counselling for individuals and groups; training line managers....; Training for all employees ..; Lifestyle Challenge; Wellness Day in the faculties and Departments....; Annual Wellness Fairs.”*

5.3.4 Theme 4: Effectiveness of employee well-being programmes, and how the effectiveness is measured

The fourth central theme that emerged was about the effectiveness of the employee well-being programmes of SA public HEIs, and how the effectiveness of the programmes is measured. Participants' replies are listed in Table 5.7 below.

Table 5.7 Effectiveness of employee well-being programmes and how it is measured

Institution	Effectiveness of employee well-being programme and how effectiveness is measured
Institution 1	1. No structured measuring tool or system in place. 2. Effectiveness is measured in uptake of activities, feedback from workshops and improved performance on individual basis, and individual feedback.
Institution 2	1. No standard measure to evaluate effectiveness. 2. Measurement is complicated, as there are many facets to the well-being programme. 3. Utilises positive feedback from employees' experiences to guide efforts and ensure effectiveness thereof.

Institution 3	1. Measured against each employee's performance contract (in terms of objectives set, versus performance against these objectives). 2. Monitored at weekly meetings and via monthly, quarterly and annual reports.
Institution 4	1. Customer-focused questionnaires 2. Absenteeism reports 3. Lifestyle challenges (BMI measurement; weight and cm loss, cholesterol, diabetes and blood pressure screening) 4. Discovery Health Company Index. 5. Organisational Health Consultative Forum including representatives from unions, external service providers, medical aid, medical aid intermediary. Addresses key issues experienced by employees to provide better holistic wellness services. Also acts as monitoring mechanism to ensure that the quality of the programme is sustained.

5.3.4.1 Discussion of results and findings related to Theme 4

It is emphasised in the literature that the effectiveness of employee well-being programmes offered by institutions should be regularly monitored and evaluated (see 3.2.17; 3.1.1). However, as is evident from Table 5.7 above, two of the four HEIs that responded to the question indicated that they either had no structured, or no standard measuring tool to measure the effectiveness of their employee well-being programmes.

Institution 3 indicated that the effectiveness of their well-being programme was measured by means of a performance contract with each employee/member, and that performance was measured against a set target. The institution also stated that the effectiveness of its well-being programmes was monitored at weekly meetings. Institution 4 indicated that, amongst others, their well-being programme's effectiveness was determined by means of customer-focused questionnaires (see 3.2.17).

That two of the four institutions had no standard or structured measuring tool in place to determine the effectiveness of their institutions' well-being programmes is of concern, as these institutions would not have a clear picture of the effectiveness of their well-being programmes, as well as possible areas of improvement (see 3.2.17; 3.1.1).

Some of the verbatim responses from participants to this question are given below.

Illustrative verbatim comments:

Institution 1: *"We currently do not have any structured measuring tool in place. The effectiveness is measured on uptake of activities, feedback from workshops and improved performance on individual basis, and individual feedback."*

Institution 2: *"To measure the effectiveness of such a service or program is quite complicated as there are many facets to such a program. We do not have a standard measure to evaluate the effectiveness but utilize positive feedback from staff experiences as guide in our effort to ensure the effectiveness of programmes."*

Institution 3: *"It is measured against a performance contract and monitored at weekly meetings, submitting monthly and quarterly reports, as well as annual report."*

5.3.5 Theme 5: Elements/dimensions of well-being addressed by well-being programmes

The fifth central theme that emerged from the literature and the responses of participants is that there are different important dimensions of well-being, namely physical, emotional, psychological, social, financial, spiritual, environmental, intellectual and occupational well-being (see 2.4.1-2.4.9; 6.2.1-6.2.9). All these dimensions of well-being should be addressed through institutions' well-being programmes to render them effective (see 2.4; 2.4.10). Participants' replies are listed in Table 5.8 below.

Table 5.8 Elements/dimensions of well-being addressed via well-being programmes of participants' universities

Institution	Elements/dimensions of well-being addressed
Institution 1	1. Physical well-being (focus on health - including HIV/AIDS, physical activity and lifestyle factors through lifestyle programme; blood donating service; first-aid training). 2. Emotional well-being (EAP and counselling service for employees with psychologist/social worker/pastor (Chaplaincy). 3. Social well-being (morale-building events, supporter clubs, support groups). 4. Spiritual well-being (Chaplaincy services). 5. Intellectual well-being (no examples provided).
Institution 2	1. Physical well-being (focus on health, physical activity and lifestyle factors; annual health screening provides university with lifestyle risk factors and trends of lifestyle diseases/ illnesses). 2. Emotional well-being (EAP and advisory and support service for employees. Includes self-development and skills enhancement workshops such as stress management, conflict resolution, building effective relationships, etc.). 3. Social well-being (employee volunteer programme, team building co-ordination/facilitation). 4. Financial well-being (financial literacy and personal financial management workshops for self-development and skills enhancement). 5. Spiritual well-being (educational and awareness programmes e.g. lunch-hour talks, departmental forums, workshops, etc.).
Institution 3	1. Physical well-being (information sessions/workshops). 2. Emotional well-being (one-on-one counselling; information sessions/workshops). 3. Psychological well-being (information sessions/workshops). 4. Social well-being (information sessions/workshops). 5. Financial well-being (information sessions/workshops).
Institution 4	All elements of well-being (physical, emotional, psychological, social and financial) addressed via the lifestyle challenge and self-leadership training.

5.3.5.1 Discussion of results and findings related to Theme 5

Responses from institutions clearly indicated that some institutions failed to address all the important dimensions of well-being in their well-being programmes, as identified from the literature study (see 2.4.1 to 2.4.9). Furthermore, responses from none of the institutions provided evidence that the dimensions of well-being were addressed in an

integrated manner, as proposed in the literature (see 1.5.2; 3.3; 3.1.2). For example, Institution 1's well-being programme fails to address the dimensions of psychological and environmental well-being (see 2.4.3; 2.4.7), whilst Institution 2's well-being programme fails to address the dimensions of psychological, environmental and intellectual well-being (see 2.4.3; 2.4.7; 2.4.8). Institution 3's well-being programme does not address their employees' financial, environmental, spiritual and intellectual well-being (see 2.4.5 - 2.4.8).

Although Institution 4 indicated that its well-being programme addressed the dimensions of physical, emotional, spiritual, psychological, social and financial well-being through a lifestyle challenge and self-leadership training, it is not clear how all these dimensions of well-being could be covered via a lifestyle and self-leadership programme. It seems that the focus of their well-being programme was more on physical and intellectual well-being (see 2.4.1; 2.4.8). Hence, their well-being programme is found lacking in terms of addressing employees' emotional, psychological, social, spiritual, environmental and intellectual well-being (see 2.4.2; 2.4.3; 2.4.5; 2.4.7; 2.4.8).

The results obtained from participants in terms of the dimensions of well-being addressed by their respective SA public HEIs, cause concern, as none of the four participants indicated that their universities' well-being programmes addressed all the dimensions of employees' well-being that had been identified during the literature study (see 2.4.1 to 2.4.9). Furthermore, there was no indication or evidence that their well-being programmes were offered in an integrated manner, as proposed by the literature (see 1.5.2; 3.3; 3.1.2). This might hamper the effectiveness of these institutions' well-being programmes (see 3.3; 3.1.2).

Some of the verbatim responses of participants to this question are illustrated below.

Illustrative verbatim comments:

Institution 1: *"Dimensions: Physical wellbeing; emotional wellbeing; social well-being; financial well-being The other dimensions – spiritual and intellectual well-being is dealt with in terms of educational and awareness interventions"*

Institution 3: *"All of the above (physical, emotional, psychological, social, financial well-being) excluding the spiritual wellness ..."*

Institution 4: *"All the elements of wellbeing is addressed this is done through the Lifestyle challenge, the Self Leadership training."*

5.3.6 Theme 6: Well-being programme that will address employees' well-being holistically

The sixth, and final central theme that emerged from the literature and the responses of participants in the baseline pilot study, is the type of well-being programme that will address employees' well-being holistically. Participants' responses to the above theme are listed in Table 5.9 below.

Table 5.9 Well-being programme that will address employees' well-being holistically

Institution	Well-being programme to address employees' well-being holistically
Institution 1	1. A well-being programme based on a needs assessment. 2. A well-being programme based on the institutional strategic goals for employees.
Institution 2	1. A holistic programme that addresses employees' needs at various levels (physical, emotional, social, spiritual, intellectual level), realising that various dimensions of wellness contribute to an increase in employees' well-being.
Institution 3	1. An inclusive well-being programme, also addressing spiritual and cultural issues. 2. A well-being programme addressing employees in their language of choice.
Institution 4	1. A dynamic programme that is reviewed annually.

5.3.6.1 *Discussion of results and findings related to Theme 6*

During the literature review it became evident that employees' well-being should be addressed at all levels, that is holistically (see 2.2; 3.1.2). From the above responses, it became clear that the participants agreed that an effective employee well-being programme, as confirmed by the literature, should address employees' well-being holistically (see 2.2).

Furthermore, responses aligned with the literature findings that employers' well-being programmes should be based on the needs of their employees (see 3.2.17), and the strategic goals of the institution (3.2.24). Amongst others, their well-being programmes should address various identified building blocks (dimensions) of well-being (see 2.4.1 to 2.4.9); and such programmes should be offered in employees' language of choice, and reviewed annually (see 3.2.17).

No institution, however, made mention of the importance of offering integrated well-being programmes to employees, which was regarded as critical in the literature for effectively addressing employees' well-being holistically (see 1.5.2; 3.3; 3.1.2). Some of the responses from participants to this question are quoted verbatim below.

Illustrative verbatim comments:

Institution 1: "A well-being programme based on a needs assessment as well as one being based on the institutional strategic goals for the staff."

Institution 2: "I think that a holistic programme addresses staff's needs on various levels. It is important not to see wellness as a singular approach but rather as a holistic challenge in which various dimensions of wellness contribute to an increase in general wellbeing. It is therefore imperative that all six dimensions of wellness (physical, emotional, social, spiritual, intellectual and HIV/Aids) be addressed within a holistic well-being plan."

Institution 3: "The one that is totally inclusive. Inclusive of spiritual and cultural issues. The type of programme that addresses employees in the language of their choice."

5.3.4 Conclusions from baseline pilot study

The pilot study conducted amongst four of the SA public HEIs confirmed important findings from the literature review and document analysis conducted, namely that institutions often fail to address their employees' well-being holistically and in an integrated manner (see 2.4; 3.1.1; 3.1.2). None of the four responding institutions had holistic, integrated employee well-being programmes in place that addressed all the dimensions of well-being that emerged from the literature, namely physical, emotional, psychological, social, financial, spiritual, environmental, intellectual and occupational well-being (see 2.4.1 - 2.4.9). Hence, there is room for improvement in the well-being programmes offered by SA public HEIs.

The results obtained from the baseline pilot study (see 5.3.1.1- 5.3.6.1 above), and the fact that it became clear that the well-being programmes of SA public HEIs had some strengths, but also some gaps, encouraged me to do an extended literature review and analysis of integrated employee well-being programmes offered by various organisations, including universities, worldwide, to become acquainted with best practice worldwide in terms of integrated well-being programmes. This enabled me to identify all the important components of, and factors related to integrated employee well-being programmes.

After the literature review and document analysis process, I conducted a more comprehensive study into the employee well-being programmes offered by SA public HEIs, the results of which are discussed below.

5.4 DISCUSSION OF QUALITATIVE RESULTS OF SECOND ROUND OF DATA COLLECTION (THE MAIN EMPIRICAL STUDY)

As indicated in 5.3.7 above, following the pilot study conducted amongst four SA public HEIs, an extended literature review and document analysis process were conducted over a period of two years to find evidence of the dimensions and requirements of integrated employee well-being programmes applied at organisations and HEIs nationally and internationally (see 4.4.3.4.3 - 4.4.3.4.4). The document analysis

included, amongst others, studying various institutional policies and strategies on employees' well-being; the WHO's guidelines related to employees' wellness; the South African Constitution, the South African Occupational Health and Safety Act; websites of various universities; and well-being programmes offered by SA public HEIs that were provided to me as part of the data collection process, to name but a few (see 4.4.3.4.4).

All 26 of the SA public HEIs were invited to participate in the empirical research (see Annexure H), which was conducted by means of collecting data via an adapted, semi-structured, mainly open-ended questionnaire (see Annexure J) which was sent to HR practitioners heading employee well-being sections at SA public HEIs, after approval was granted by their HEIs. Nineteen out of the 26 SA public HEIs gave permission for me to conduct the research, and eventually 11 of the SA public HEIs participated in the research by completing the questionnaires sent to them for purposes of this research. Constant reminders were sent, and telephone calls were made to the persons heading employee well-being sections at all of these HEIs, to explain the purpose of the research to them, and to find out whether they would voluntarily participate in the research on behalf of their universities (see 4.4.2.2).

The participants varied in age from 41 to 55 years, with the majority of participants (7) being in the age group 46 to 50 years, whilst the remaining participants were in the age groups of 41 to 45 years (2 participants), and 51 to 55 years (2 participants). The ethnical representation was as follows: eight participants were Black, whilst three participants were White, and none were Coloured or Indian. Four of the participants were males, whilst seven of the participants were females. The period of employment of participants ranged between 2,5 years and 28 years, with the majority of participants having been employed for a period of between five to ten years. Three of the participants were employed by universities of technology, whilst five were employed by traditional universities, and three by comprehensive universities. All the participants were fluent in English. Nine of the participants completed the questionnaire online, whilst two of the participants completed the questionnaire telephonically. The telephonic responses were recorded and transcribed (see 4.4.3.4.8).

The positions occupied by the participants are indicated in Table 5.10 below.

Table 5.10 Post descriptions of participants

Institution	Post descriptions of participants
Institution A	Manager
Institution B	Business Owner (external company rendering service to the particular university)
Institution C	Wellness Manager
Institution D	Senior Director: Human Resources
Institution E	Head: Organisational Development & Employee Wellness
Institution F	Employee Health & Wellness Manager
Institution G	Institutional Wellness Specialist
Institution H	Employee Health & Wellbeing Specialist
Institution I	Acting Director: Centre for Excellence
Institution J	Employee Wellness Practitioner
Institution K	Director: HR Development

This indicates that all participants were either overseeing employee well-being, or were responsible for the implementation of employee well-being at their institutions, whilst one participant was the external service provider for the HEI responsible for employee well-being at the institutions. The participants were therefore regarded as information-rich individuals that would best inform the study.

The demographic profile of participants are indicated in Table 5.11 below.

Table 5.11 Demographic profile of participants (N=11)

Characteristics	Group	Frequency
Age	41-45 years	2
	46-50 years	7
	51-55 years	2
Years employed at HEI	1-5 years	3
	6-10 years	6
	11-15 years	1
	16-20 years	0
	21-25 years	0
	26-30 years	1
Ethnicity	Black	8
	White	3
	Coloured	0
	Indian	0
Gender	Male	4
	Female	7

The outcome of the baseline pilot study, the extended literature review and document analysis, as well as the responses of participants to the questionnaire items provided an indication of the central themes related to well-being and well-being programmes applicable to SA public HEIs that emerged, as indicated in Table 5.12 below.

Table 5.12 Central themes that emerged from the pilot study, text reviews, literature review, and responses from participants

List of central themes
1. What the concept of well-being entails (see 2.2).
2. Existence of an employee well-being programme within SA public HEIs, and a need for such a programme (see 3.2.24).
3. Elements/dimensions of well-being addressed via SA public HEIs' employee well-being programmes (i.e. physical, emotional, social, psychological, financial, spiritual, environmental, intellectual and occupational well-being) (see 2.4.1 to 2.4.9).
4. The types of employee well-being programmes offered by SA public HEIs (see 3.2.19; 3.2.24).
5. Perceived strengths and weaknesses of the employee well-being programmes offered by SA public HEIs (see 3.2.19; 3.2.24).
6. The core elements/structure/main focus of the employee well-being programmes offered by SA public HEIs (see 2.4.1- 2.4.9; 6.3.1-6.3.7).
7. How these well-being programmes were developed, and which stakeholders were involved in the development thereof (see 3.2.19).
8. Perceived effectiveness of employee well-being programmes, and how the effectiveness of such programmes is measured (see 3.2.17).
9. How effectiveness of SA public HEIs' well-being programmes is assessed, typical areas of focus in the assessment; and how the outcomes of such assessments/evaluations inform their employee well-being programmes (see 3.2.17).
10. For how long and how actively the employee well-being programmes have been implemented at SA public HEIs (see 3.3).
11. When last the employee well-being programmes were revised to be aligned with the latest trends in employee well-being worldwide (see 3.2.24).
12. The objectives and anticipated outcomes of the well-being programmes offered by SA public HEIs (see 3.2.17).
13. Existence of policies/procedures to support employee well-being, and how employees are informed about these policies (see 3.2.19).
14. Generic programme versus a programme based on the unique challenges affecting the well-being of SA public HEIs' employees (see 3.2.24).

Each of the central themes will now be discussed in more detail.

5.4.1 Theme 1: What the concept of well-being entails

The first central theme that emerged from the baseline pilot study, the literature study, the text reviews, and the second round of data collection, is related to what the concept of well-being entails (i.e. how well-being can be defined). It is clear from the literature that the concept of well-being has moved away from the original focus on happiness, to a much broader concept that includes both positive feelings and positive functioning at various levels (see 2.2.5). It is a multi-faceted concept fostering those factors that enable people and societies to flourish (see 1.5.1; 2.2.5).

Participants' responses pertaining to the above theme are listed in Table 5.13 below, and will be compared (see section 5.4.1.1 below) with the concept of well-being as defined in the literature.

Table 5.13 Concept of well-being defined by participants

Institution	Well-being defined
Institution A	1. No formal definition of well-being used at institution. 2. Mainly regarded as the absence of illness. 3. Own understanding and part of Management's understanding: the best balance an individual or group can reach by considering physical, emotional, social, spiritual and mental areas of life.
Institution B	1. Well-being encompasses focusing on all aspects that contribute to a whole person (mind, body, emotional, spiritual, psychological). 2. Well-being programmes aim to establish and sustain a healthy culture that motivates, educates and empowers employees to live healthily, and thereby positively impact on their quality of life, and ultimately business results.
Institution C	1. A programme that drives the wellness of employees to ensure that they function optimally in the workplace. 2. Core philosophy is based on looking at individual employee in totality, as well as their immediate family perspective (if necessary). Two wellness days offered per year testing for lifestyle diseases, HIV and other chronic diseases screening; looking at diet and nutrition; physical wellness; psychological and social drivers of wellness.
Institution D	1. Well-being encompasses a workplace programme of health and wellness attending to workplace and lifestyle challenges, financial challenges, life cycle challenges, mental and emotional stress, as well as burnout.

Institution E	1. Importance of emotional, social and physical well-being of individuals, and the impact thereof on the workplace is acknowledged. 2. Wellness programme is built on the seven dimensions of wellness and aimed at improving the health and performance of the workforce, workplace culture, engagement, and helping employees to feel valued and safe.
Institution F	1. Well-being: improving quality of life of employees as well as their families. Programmes should be designed to address employees' well-being, including their health, family, personal lives, financial, EAPs, their levels of stress and other factors that may impact on their performance.
Institution G	1. The Hettler Model was adopted, which is also used by the National Wellness Institute. It describes six dimensions of wellness: physical, occupational, social, spiritual, emotional and intellectual wellness. 2. The model emphasises that there should be a balance between the different aspects of our lives, as every area impacts on the other, and affects our overall well-being. Thus, there should not only be a balance between these aspects, but each should lead impact positively on our well-being.
Institution H	1. Well-being programme is driven by an integrated model of employee health and wellness, which encompasses psycho-social, physical, legal and financial well-being.
Institution I	1. Well-being entails making sure that employees are in good health, and that they are taking care of their psychological (mental) health, as well as how they manage stress. It also entails promoting healthy relationships between employees and management.
Institution J	1. Well-being: Establishing healthy, happy, productive employees with good interpersonal relationships. 2. Philosophy: To provide quality service to employees and their family members to improve their quality of life by providing them with support, and alleviating the impact of everyday work, and personal and family problems.
Institution K	1. Well-being is regarded holistically – addressing employees' physical, emotional, spiritual, psychological and financial well-being.

5.4.1.1 Discussion of findings and results related to Theme 1

The literature finding that a unified concept of what well-being entails is still lacking, was confirmed by the responses from participants. It was clear from the responses that participants had different views of what the concept of well-being entails. Some participants (e.g. Institution A) indicated that their institutions had not formalised a definition of well-being. This should be rectified, as it would not be possible for the

institution to address their employees' well-being effectively if they did not define what well-being entailed for them as an institution.

Institution B acknowledged that well-being encompassed aspects that contributed to the whole person, although no evidence was given that they addressed all the dimensions of well-being identified from the literature in their understanding of well-being. Institution C indicated that their philosophy of well-being looked at individuals in totality – including their physical, social and psychological well-being – that is, only three of the nine dimensions of well-being identified in literature (see 2.4.1 - 2.4.9).

Institution G indicated that they had adopted the Hettler Model, which describes six dimensions of wellness: physical, occupational, social, spiritual, emotional and intellectual well-being. Institution J, on the other hand, responded that their institution regarded well-being as establishing healthy, happy, productive employees with good interpersonal relationships.

It is clear that SA public HEIs have no unified view of the concept of employee well-being. This in itself is problematic, as a unified approach to the concept of employee well-being would enable SA public HEIs to focus on the same principles of employees' well-being, and to address their well-being holistically and effectively, as emphasised in the literature (see 2.4.1–2.4.9; 3.1.2). Some of the verbatim comments provided by institutions are quoted below.

Illustrative verbatim comments:

Institution A: *"I define well-being as being in good health both physically and mentally/emotionally."*

Institution C: *"It's the programme that drives the wellness of the employees to ensure that they function optimally in the workplace. We know that a good state of wellness creates a positive attitude towards self and others around us."*

Institution E: *"The [name of institution] values its employees and recognises its employees as their greatest asset and that their health and wellbeing is critical to the university's overall success, and therefore acknowledge the importance of emotional, social and physical wellbeing of individuals and the impact it has on the workplace."*

5.4.2 Theme 2: Existence of an employee well-being programme within the institution, and the need for such a programme

The second central theme that emerged from the empirical study via the responses obtained from participants, was whether the participating SA public HEIs had an employee well-being programme in place. Participants' responses to the above theme are listed in Table 5.14 below.

Table 5.14 Existence of employee well-being programme and the need for such a programme

Institution	Existence of employee well-being programme and a need for such
Institution A	Yes (although a formal programme does not exist). There is a need for a formal well-being programme within the institution.
Institution B	Yes. A well-being programme is in place.
Institution C	Yes. A well-being programme is in place.
Institution D	Yes. A well-being programme is in place.
Institution E	Yes. A well-being programme is in place.
Institution F	Yes. A well-being programme is in place.
Institution G	Yes. A well-being programme is in place.
Institution H	Yes. A well-being programme is in place.
Institution I	Yes. A well-being programme is in place.
Institution J	Yes. A well-being programme is in place.
Institution K	Yes. A well-being programme is in place.

5.4.2.1 Discussion of findings and results related to Theme 2

During the literature review, it was established that organisations would benefit by investing in the well-being of their employees (see 3.2.24; 3.3), and that the positive effects for organisations when investing time and money in their employees' well-being, far outweighed the cost attached thereto, and would deliver positive results and benefits for the organisation far beyond the efforts that were applied and the resources that were made available by the organisation for this purpose (see 3.3).

All the participants indicated that their institutions had an employee well-being programme in place. However, institution A indicated that their institution did not have a formal employee well-being programme in place. It would be difficult to address

employees' well-being holistically and effectively without a formal employee well-being programme, and it could result in a fragmented approach to their well-being, which is not desirable (see 2.4.10; 3.1.2). However, ten of the eleven participants indicated that their institutions had formalised well-being programmes in place, which is proof of these SA public HEIs making some effort to address the well-being of their employees.

5.4.3 Theme 3: Dimensions/building blocks of well-being addressed via SA public HEIs' well-being programmes

The third central theme that emerged from the baseline pilot study, the literature study, the text reviews, and the data obtained from the empirical research, is what the dimensions, or building blocks, of the well-being programmes of the responding SA public HEIs' well-being programmes were. Participants' responses are summarised in Table 5.15 below.

Table 5.15 Dimensions/building blocks of employee well-being addressed via HEIs' employee well-being programmes

Institution	Dimensions/building blocks of employee well-being addressed
Institution A	Physical, social, psychological well-being.
Institution B	Physical, emotional, spiritual, psychological, social, financial, environmental well-being.
Institution C	Physical, emotional, psychological, social, financial well-being.
Institution D	Physical, emotional, psychological, social, financial, spiritual well-being.
Institution E	Physical, emotional, social, financial, spiritual, career, environmental, intellectual well-being.
Institution F	Physical, emotional, social, financial well-being.
Institution G	Physical, emotional, social, occupational, spiritual, intellectual well-being (the Hettler Model).
Institution H	Physical, emotional, psycho-social, financial and legal well-being.
Institution I	Physical, emotional, social/cultural, psychological, financial, spiritual, environmental well-being.
Institution J	Physical, emotional, social, financial well-being.
Institution K	Physical, emotional, spiritual, psychological, financial well-being.

5.4.3.1 Discussion of findings and results related to Theme 3

From the literature study and text reviews conducted, it became clear that the concept of well-being is multi-faceted, and that well-being consists of various important dimensions (building blocks), namely physical, emotional, social, psychological, financial, spiritual, environmental, intellectual and occupational well-being (see 2.4.1 - 2.4.9). It further became clear that all the dimensions of well-being had to be addressed in order to address employees' well-being holistically, and effectively (see 2.2.4; 2.2.5; 2.4). By embracing all these dimensions of well-being, we are able to cope better with life's circumstances. When one or more of these well-being dimensions are jeopardised, the other dimensions have to balance out those dimensions (see 2.4).

From the responses of participants, it is clear that none of the institutions addressed all the identified dimensions or building blocks of employee well-being as identified from the literature (see 2.4.1 - 2.4.9). There also is no evidence that this is done in an integrated manner, whilst the importance of an integrated approach to employee well-being was emphasised in the literature (see 1.5.2; 3.4; 3.1.2). Although some institutions indicated that their well-being programmes were aimed at improving whole-person well-being (Institution B), and that there should be a balance among the different elements of well-being (Institution G), participants had different views of what the important building blocks of well-being were. A unified approach to the dimensions or building blocks of employee well-being would enable SA public HEIs to focus on the same principles of employees' well-being, and would ensure that employees' well-being is addressed holistically (see 3.1.2).

Furthermore, since well-being is multi-dimensional, SA public HEIs should follow integrated approaches in addressing the different dimensions of their employees' well-being in their well-being programmes, as fragmented approaches of addressing some of the dimensions of their employees' well-being will result in areas of their well-being not being addressed effectively at all the required levels (see 2.4.10; 3.4).

Some of the verbatim comments provided by institutions are quoted below.

Illustrative verbatim comments:

Institution B: *"All of the above (physical, emotional, spiritual, psychological, social, financial, environmental) well-being."*

Institution C: *"Elements of well-being addressed: physical, emotional, psychological, social, financial."*

Institution D: *"Elements of staff well-being addressed: physical, emotional, spiritual, psychological, social, financial."*

Institution E: *"The programme is managed according to the seven dimensions of wellness as defined by the WHO. These include social (also financial), physical, emotional, career, intellectual, environmental and spiritual wellness."*

Institution K: *"Physical, emotional, spiritual, psychological, financial well-being."*

Theme 4: Types of well-being programmes offered by participating SA public HEIs

The fourth central theme that emerged from the data collected in the empirical study, is the types of well-being programmes offered by the responding SA public HEIs to address their employees' well-being. Participants' responses are recorded in Table 5.16 below.

Table 5.16 Well-being programmes offered by participating SA public HEIs

Institution	Well-being programmes offered by participating SA public HEIs
Institution A	1. Not formalised. Informally addressed. 2. Activity based as supported by Wellness Centre, e.g. Wellness Week, Health Awareness Week. 3. Social cohesion: Celebration of specific events, e.g. Women's Day. 4. Awareness campaigns: Celebrating, and informing employees on Health Calendar Issues identified by Department of Health.
Institution B	1. Name of programme: Wellness@[name of institution]. 2. Employees are educated, motivated and empowered to adopt and maintain healthy lifestyle behaviours that will positively impact on their life, and ultimately on the workplace.
Institution C	1. Counselling services.

	2. Employee disability services. 3. 24/7/365 EAP provided through external service provider. 4. Employee wellness programme promotional services. 5. Preventative services. 6. Awareness and educational campaigns related to social factors affecting employees and aligned with Department of Health calendar. 7. Wellness days to screen for lifestyle diseases. 8. Training of employees on wellness-related topics. 9. Training of line managers to identify and refer employees who need assistance. 10. Wellness champions programme.
Institution D	1. Programme still to be developed and implemented. 2. In partnership with medical aid scheme, medical assessment of employees is done during Wellness Week. The event culminates into a fun day. Executives are assessed once annually, and a risk report is provided to the university's Executive Team.
Institution E	1. Awareness campaigns. 2. Lunch and Learn sessions. 3. Healthy Lifestyle initiatives. 4. Behaviour change programmes. 5. Recreational events. 6. Work-life integration programmes. 7. Stress management series. 8. Conflict management. 9. Sessions on bullying in the workplace. 10. Annual ladies' breakfast commemorating Women's Day. 11. Promotion of Employee Assistance Programme (EAP). 12. Voluntary health checks.
Institution F	1. Counselling services (e.g. marriage, domestic violence, trauma counselling, chronic disease support, death, home visits). 2. Pro-active programmes (e.g. life skills, stress management, spiritual services, substance dependency; financial management, conflict management and HIV/AIDS). 3. Priority events (e.g. Condom Week, Family Day, Candle Light Memorial, World AIDS Day, Wellness Day, Mental Health Day).
Institution G	1. First-things-first campaigns, e.g. HIV, tuberculosis, sexually transmitted diseases, blood pressure and blood sugar testing. 2. Counselling. 3. Screening. 4. Testing services.

	5. Social mobilisation on HIV, tuberculosis, sexually transmitted diseases, normalising blood pressure and blood sugar levels, women's health and empowerment, men's health and empowerment, alcohol and drug abuse prevention. 6. Programmes aimed at mitigating absenteeism and presenteeism (presenteeism = being on the job, but not being fully functional).
Institution H	1. Internal specialist and outsourced service provider provide short-term counselling on issues related to psycho-social challenges, legal and financial issues. 2. Internal aspect of programme focuses on facilitation, stakeholder management, reporting, planning and implementing proactive programmes, e.g. wellness days, health screenings, educational/awareness programmes on, for example, financial issues and stress management.
Institution I	1. Psychologist (external service provider) provides psychological services to employees. 2. Awareness sessions on health and diet offered by Occupational Nurse (an employee of the university), or dietitian (contracted via medical aid). 3. Health-screening sessions, e.g. for high blood pressure, HIV/AIDS, cholesterol, blood sugar.
Institution J	1. Wellness services (health risk assessment, blood pressure, diabetic and cholesterol checks). 2. Counselling of employees with emotional and psychological problems. 3. Training of employees (e.g. peer education, stress management and how to deal with troubled employees). 4. Awareness programmes (e.g. substance abuse, men's and women's health, financial awareness, will writing).
Institution K	1. Annual Wellness Day (attending to health screening tests; creating awareness). 2. External company was sourced to attend to employees' mental well-being challenges. 3. Awareness campaigns (e.g. cancer awareness). 4. HIV/AIDS counselling and testing / World AIDS Day. 5. Stress management and financial management workshops. 6. Counselling via external service provider (either telephonically or face to face - whatever employee prefers). Employees may refer themselves for counselling, or they may be referred by the line manager.

5.4.4.1 Discussion of findings and results related to Theme 4

The fourth central theme that emerged from the baseline pilot study, the literature study, the text reviews, and the second round of data collection via the responses of participants, is related to the types of well-being programmes offered by institutions, and in this case by the participating SA public HEIs.

From the literature study, it became clear that various organisations use various means of addressing their employees' well-being (see 3.2.19; 3.4.1-3.4.13). This finding was mirrored in the responses of participants, which confirmed that the participating SA public HEIs made use of different types of employee well-being programmes (see Table 5.16 above). However, no evidence was provided by any of the participants that their institutions' well-being programmes were offered in an integrated manner, whilst the literature confirmed the importance of integrated, versus fragmented approaches to employee well-being (see 2.4.10; 3.4).

One institution indicated that its employee well-being programme had not been formalised (Institution A), whilst another (Institution D) indicated that their wellness programme still needed to be developed and implemented. Some participants indicated that their institutions' well-being programmes entailed activities such as awareness campaigns, counselling, training, health and health screening events (e.g. institutions A, B, C, E, F, G, H, I, J and K). Some participants shared that their institutions' well-being programmes were offered by their own wellness practitioners or internal employees (Institutions A, C, D, E, F, G and J), or by an external service provider (Institutions B and I), or a combination of internal and external service providers (Institution H and K), whilst others partnered with occupational nurses (Institution I) and spiritual leaders or pastoral counsellors (Institutions F and I).

It is evident from the responses that employees' well-being was not addressed by all institutions at all levels, as identified during the literature study (see 2.4.1 - 2.4.9). Furthermore, greater integration between the different programmes offered by institutions to address their employees' well-being is required, as no evidence was provided that such campaigns, events or other attempts to address the well-being of employees of participating SA public HEIs were made in a cohesive and integrated

manner, but rather these took place as stand-alone events or sessions. This was confirmed when I studied the employee well-being programmes that were provided as annexures to the questionnaire by institutions A, C, E and K. Fragmented approaches to the well-being of employees of some SA public HEIs means that their well-being is not addressed effectively at all the required levels, as identified during the literature study and the process of document analysis (see 1.5.2; 2.4.1-2.4.10; 3.4).

Some of the verbatim comments provided by institutions to illustrate the above-mentioned points are provided below.

Illustrative verbatim comments:

Institution A: *“Currently only informal. Activity based as supported by Wellness Centre which actually focuses on students. Social cohesion: celebration of specific events e.g. Women’s Day. Awareness: Celebrating and informing on health calendar issues by Department of Health.”*

Institution D: *“Programmes still to be developed and implemented, but in partnership with medical aid schemes the university runs wellness weeks during which employees are medically assessed.”*

Institution F: *“The programme consists of pro-active and reactive services provided, e.g. counselling, pro-active workshops and priority events, e.g. Condom Week, Family Day, etc.”*

5.4.5 Theme 5: Perceived strengths and weaknesses of employee well-being programmes offered by SA public HEIs

The fifth central theme that emerged from the baseline pilot study, the literature study, document analysis and the responses of participants, is that there are perceived strengths and weaknesses in terms of well-being programmes – in this case the well-being programmes offered by SA public HEIs. The responses obtained from participants’ are recorded in Table 5.17 below.

Table 5.17 Perceived strengths and weaknesses of employee well-being programmes offered by SA public HEIs

Institution	Strengths	Weaknesses
Institution A	1. Programme focuses on prevention of illnesses, rather than curing illnesses. 2. Informing employees of certain wellness dimensions. 3. Excellent counselling services. 4. Great strength within the Wellness Team.	1. No formal programme in place. 2. Stigma attached to counselling. Employees need to be educated in this regard and informed of the benefits of counselling.
Institution B	1. Accessibility. 2. Relevance. 3. Comprehensive nature. 4. Measurability. 5. Affordability.	1. Limited budget. 2. Lack of internal ownership of programme that limits the reach of the programme.
Institution C	1. Buy-in from top management and line managers. 2. Buy-in from employees. 3. Good uptake within the Employee Assistance Programme. 4. Employees have trust in the programme. 5. Functioning wellness champions programme.	1. High-level employees (especially academics) do not use make use of the wellness services provided, and prefer to use their private practitioners. 2. Attendance of campaigns is more or less by the same crowd. 3. Although the wellness champion programme is doing well, it is not representative of the employee population and location.
Institution D	1. Well-being strategy is part of university's performance scorecard. 2. Consortium and different divisions assist with implementation of employees health and wellness programme.	No comments provided.
Institution E	1. Positive reputation amongst university community. 2. Programme experienced as positive by participating employees. 3. Preventative programme is more proactive in nature. 4. Dedicated and committed team of employees working within the Organisational Development and Employee Wellness Division. 5. Variety of prevention programmes offered. 6. Management support and buy-in. 7. Excellent reputation and past successes. 8. Wellness Ambassadors programme in place.	1. Low motivation to take part in wellness activities. 2. Monitoring and evaluation of our wellness programmes still are not effective. 3. Have not demonstrated "outside-the-box" thinking pertaining to institution's approach to employee well-being. 4. Lack of HIV/AIDS-related programmes. 5. Little inter-professional collaboration. 6. Webpage is not active and is therefore hard to navigate. 7. No social media presence.

	9. Infrastructure in place to support our employee well-being programme.	
Institution F	1. Employees refer themselves for counselling, instead of being referred by their supervisors. 2. Excellent attendance of workshops, training and events.	1. Understaffed – only one employee member responsible for the well-being of more than 3 000 employees.
Institution G	1. HIV and Employee Wellness Office, Counselling Centre, Health Care Centre & Career Centre collaborate under one umbrella term, namely Student Wellness. These centres assist the university community in respect of physical, academic, social, emotional and spiritual needs. 2. Institutional Wellness Specialist manages wellness activities, and works as part of multi-disciplinary team, namely the Counselling Centre and the Health Care Centre. 3. Institutional Wellness Specialist reports to Directors: Student Affairs and Human Resources.	1. The university is dependent on HIV/AIDS funding, and uses that to fund its employee wellness programme. 2. Top management must commit some reasonable budget and resources for the wellness programme.
Institution H	1. New programme with the potential to make a good impression/to make its mark. 2. University funds the counselling aspect of the programme. 3. Programme is guided by a Professional Social Worker with experience in running health and wellness programmes. 4. Programme Specialist reports on absenteeism, which offers the organisation with alarms of departments with high absenteeism rates.	1. Limited human resources (only one employee to facilitate and manage the programme). 2. Lack of a private Wellness Centre and a private counselling centre. 3. No visibility of Senior Management to drive and support the programme. 4. Consistent lack of availability of wellness champions to assist in driving the programme.
Institution I	1. The wellness programme is offered annually and attends to various facets of employee well-being.	1. Position of Wellness Specialist vacant, and institution has placed a moratorium on new appointments in positions, so it might not be filled in the near future.
Institution J	1. Employees are aware of health issues and are willing to look after their health.	1. Marketing of wellness events sometimes not done on time. 2. Poor attendance of wellness events by employees.
Institution K	1. Annual Wellness Day. Participation rates increase every year. Screening tests are done & employees are encouraged to participate in the activities.	1. Low-cost approach is followed due to budgetary constraints. 2. A comprehensive employee well-being programme is required.

5.4.5.1 Discussion of findings and results related to Theme 5

It already became evident from the baseline pilot study and the literature review conducted that there are various strengths related to effective employee well-being programmes – amongst others that such well-being programmes should address all the dimensions of employees' well-being in an integrated manner (see 2.4; 2.4.1 - 2.4.9; 3.1.1 - 3.1.2; 3.4; 5.3.2 - 5.3.2.1); that they should be supported by top management and employees (see 3.1.1; 3.2.19); and that institutions invest time and money in their well-being programmes to enhance their employees' well-being (3.2.24; 3.3).

On the other hand, certain weaknesses in terms of employee well-being programmes also emerged from the baseline literature review and the pilot study, amongst others fragmented approaches to employee well-being, and well-being programmes failing to address all the identified building blocks of well-being (see 2.4; 2.4.1 - 2.4.9; 5.3.3.1; 5.3.4; 5.3.4.1). These findings were confirmed by the second round of data collection conducted amongst eleven participating SA public HEIs.

It is evident from the responses provided by participants that there are various strengths related to the employee well-being programmes offered by SA public HEIs, such as the offering of workshops, awareness sessions, wellness days and training events; high participation rates by employees in wellness programmes; and counselling services offered; to name but a few (see Table 5.17 above). Other noteworthy strengths include the availability of experienced social workers, psychologists and employees to attend to employees' well-being (Institutions A, D, E, G and H), as well as buy-in from top management and employees (Institution C).

However, from the responses provided by participants, it seems that their institutions' employee well-being programmes/efforts are often focused on employees' physical health and well-being (e.g. responses provided by institutions F, J and K), and to a lesser extent on their psychological and emotional well-being, which is mainly addressed via counselling sessions (institutions A, F and G). There seems to be less

emphasis on employees' social, spiritual, financial, environmental, intellectual and occupational well-being by all participating institutions.

Institutions E and F reported that their institutions' employee well-being programmes were attended well by employees, and were experienced as positive, whilst institutions C, E and J reported that poor attendance of their well-being programmes was regarded as a weakness. Another example of such discrepancies in the reporting of strengths and weaknesses of their employee well-being programmes is that institutions B, E and H responded that buy-in from top management and/or employees, and motivation to participate in their wellness activities are low amongst employees, and therefore regarded as weaknesses of their programmes, whilst institutions C and E indicated buy-in from top management and employees as strengths of their employee well-being programmes.

Institutions A and K regarded the absence of a formal, or comprehensive employee well-being programme as weaknesses, whilst institution B indicated that their employee well-being programme was comprehensive. It is evident from the above that the responses provided by institutions differ greatly. The strengths reported by some institutions in a certain area were reported as weaknesses by others.

Institutions G and K indicated that budgetary constraints were regarded as a weakness, hindering the effective offering of employee well-being services, whilst institution F indicated that the university provided sufficient funding for its counselling programme.

Other noteworthy weaknesses mentioned were understaffed employee well-being sections (institutions F, H and I), and vacant positions in universities' wellness sections (Institutions F, H and I). Budgetary constraints (institutions B and G) might be the reason for understaffed employee wellness units and vacant positions in such units in institutions F, H and I.

It is evident from the responses that SA public HEIs would have to find innovative ways of raising funds to make sufficient financial resources available to take care of their employees' well-being. Finally, whilst Institution B indicated the measurability of their well-being programme as a strength, Institution E indicated that the absence of an effective monitoring and evaluation tool for its well-being programme was regarded as a weakness. This aspect is also addressed in detail in section 5.4.9 and 5.4.9.1, and in the employee well-being framework designed for SA public HEIs as an outcome of this study (see Annexure T).

As a means of capturing and documenting response patterns in the words of the participants, representative responses related to the strengths and weaknesses of the responding institutions' well-being programmes were extracted verbatim, as cited below.

Illustrative verbatim comments (related to strengths of well-being programmes):

Institution C: *"Buy-in from top management and line managers. Buy in from employees. Uptake within the EAP norm. Employees have trust in the program. Functioning wellness champions program."*

Institution E: *"Positive reputation in the [name of university] community. Dedicated and committed team of employees working within the OD and Employee Wellness Division."*

Institution F: *"Excellent attendance in workshops, training and events."*

Illustrative verbatim comments (related to weaknesses of well-being programmes):

Institution A: *“As indicated – no formal program. Thus weakness is that an HR driven program is required.”*

Institution B: *“Limited budget. Lack of internal ownership of programme that limits the reach of the programme.”*

Institution E: *“Monitoring and evaluation of our programmes still not effective.”*

Institution F: *“Understaffed, only one personnel responsible for more than 3 000 employees.”*

Institution G: *“[Name of university] seems to be dependent on HIV/AIDS funding for staff wellness programme. [Name of university] top management must commit some reasonable budget and resources for wellness programmes.”*

Institution H: *“Limited resources: there is only one person facilitating and managing the programme.”*

Institution K: *“The way we run it is really a very low-cost approach because of budgetary constraints. We would love to have a comprehensive employee well-being programme where employees can be assisted, such as ICAS or Careways, but the cost of those programmes is very high. There’s been a cry for an in-house employee assistance programme (EAP). The reactive part of it is funded through our medical aid provider.”*

5.4.6 Theme 6: Core elements/structure/main focus of SA HEIs’ well-being programmes and how institutions utilise them

The sixth central theme that emerged from the baseline pilot study, literature review, document analysis and the second round of data collection amongst public SA public HEIs, is the core elements, structure or main focus of SA public HEIs’ well-being programmes, and how institutions utilise/offer these well-being programmes. Participants’ responses are recorded in Table 5.18 below.

Table 5.18 Core elements/structure/main focus of SA public HEIs' well-being programmes and how institutions utilise/offer these programmes

Institution	Core elements/structure/main focus of SA public HEIs' well-being programmes and how these are utilised/offered
Institution A	<u>Core elements/structure/main focus of programme</u> 1. Medical aid-related matters. 2. Talent Management Unit attends to talent management. 3. Academic support. 4. Psychological/counselling services. 5. Social services. 6. Primary healthcare services. <u>How institution offers/utilises the programme</u> 1. On a needs basis. 2. Employees/students are referred by line manager where relevant (via an employee Assistance Programme), or can contact the Wellness Centre themselves. 3. Programmes are advertised on internal communication platforms.
Institution B	<u>Core elements/structure/main focus of programme</u> 1. Individual counselling. 2. Workshops on lifestyle management. 3. Targeted well-being programmes in collaboration with medical aid, e.g. on stress management, depression and lifestyle management. <u>How institution offers/utilises the programme</u> 1. Employees access voluntarily via Care Centre. Services offered by outsourced company.
Institution C	<u>Core elements/structure/main focus of the programme</u> 1. Awareness campaigns. 2. Wellness champion programme. 3. Counselling. 4. Training of employees and line managers. 5. Disability services for employees. 6. Wellness days. 7. Observing Department of Health National Calendar and offering incentives to participants (e.g. when doing HIV testing campaigns). 8. 24/7/365 EAP offered by external service provider. <u>How institution offers/utilises the programme</u> 1. Confidentiality is ensured when employees seek counselling services. 2. HR Business partners assist in accessing employees and managers. 3. Wellness champions assist in marketing the wellness programme. 4. Incentives are offered to participants, e.g. when doing HIV testing campaigns. 5. External wellness service providers invited to all campaigns, and they assist with the marketing of campaigns.

Institution D	<u>Core elements/structure/main focus of the programme</u> 1. Programme driven by employees health and wellness strategy, and guidelines for sustainable implementation of strategy. 2. Effectiveness monitored through framework for monitoring and evaluation. 3. Primary healthcare/health/wellness programmes and services. 4. Lifestyle programmes. 5. Workplace harassment programmes. 6. Financial workshops. 7. Life cycle challenges workshops. 8. Workshops on mental and emotional stress, stress management and burnout. 9. Management of workplace diversity. 10. Employees health and wellness surveys. <u>How institution offers/utilises the programme</u> 1. On an ad-hoc basis.
Institution E	<u>Core elements/structure/main focus of the programme</u> 1. Preventative programme aimed at creating awareness of wellness issues that will reduce employees' health risks and enhance their individual productivity and well-being. <u>How institution offers/utilises the programme</u> 1. Awareness campaigns.
Institution F	<u>Core elements/structure/main focus of the programme</u> 1. Counselling and proactive services. <u>How institution offers/utilises the programme</u> No response provided.
Institution G	<u>Core elements/structure/main focus of the programme</u> 1. Programme guided by wellness policy that addresses employees' occupational, spiritual, physical, intellectual and social well-being (e.g. via HIV and Employees Wellness Office, Counselling Centre, Health Care Centre and Career Centre, and multidisciplinary team consisting of Wellness Specialist, five psychologists and six intern psychologists). <u>How institution offers/utilises the programme</u> 1. Via HIV/Employees Wellness Office, Counselling Centre, Health Care Centre and Career Centre. 2. Wellness Specialist manages wellness activities and works within multidisciplinary team of psychologists and intern psychologists.
Institution H	<u>Core elements/structure/main focus of the programme</u> <u>Internal:</u> 1. Wellness Day 2. Health screening, manager training and consultation. 3. Resilience training, stress management workshops. 4. Financial education. 5. Employee awareness sessions and Health Calendar events. 6. Reporting on utilisation of services and absenteeism rates. <u>External:</u> 1. EAP counselling for psycho-social issues. 2. Unlimited telephonic counselling, financial advice and legal advice

	<u>How institution offers/utilises the programme</u> 1. Via EAP counselling & telephonic counselling. Utilisation was low but increased after aggressive awareness campaign.
Institution I	<u>Core elements/structure/main focus of the programme</u> Wellness Programme (guided by total rewards policy) addresses: 1. Lifestyle issues (e.g. how to improve your health; maintain a healthy weight; how to deal with illnesses, nutrition, stop-smoking campaigns). 2. Employees' emotional well-being. A psychologist is brought in to assist troubled employees via counselling sessions. 3. Valentine's Day programme to address matters such a love and affection. <u>How institution offers/utilises the programme</u> 1. Via various annual awareness campaigns/events, e.g. Healthy Lifestyle Awareness Month; Mental Health Awareness Week; Condom Week; Stop-Smoking Campaign; etc.
Institution J	<u>Core elements/structure/main focus of the programme</u> 1. An operational Employees Wellness Programme is compiled annually in January, which is aligned with the National Health Awareness Calendar. <u>How institution offers/utilises the programme</u> 1. Awareness is created via electronic media (e-mails to all employees), posters placed in strategic places on campus, flyers, and the university newsletter.
Institution K	<u>Core elements/structure/main focus of the programme</u> 1. Programme designed to address employees' broader well-being via Wellness Day and awareness campaigns. 2. Institution to look into the improvement of its well-being programme by collaborating with its Sports Department to introduce physical elements, and to encourage employees to be proactive in terms of their well-being by making healthy lifestyle choices (e.g. healthy eating, exercising). <u>How institution offers/utilises the programme</u> Via awareness sessions, e-mails, etc.

5.4.6.1 Discussion of findings and results related to Theme 6

It emerged from the literature study that well-being is multi-faceted, and that employees' well-being should be addressed at physical, emotional, psychological, social, financial, spiritual, environmental, intellectual and occupational levels (see 2.4; 2.4.1 - 2.4.9). From the above responses on the main structure/focus/content of the SA public HEIs programmes, it is clear that all participating institutions have a strong focus on primary healthcare (i.e. physical well-being), and many also on counselling and psychological services, and are attending to employees' emotional and psychological well-being via these services (Institutions A, B, C, F, G, I and K).

Some institutions indicated that they offered wellness programmes via their Wellness Centres (Institutions A, C, H, I and J), and more specifically via an employee Assistance Programmes (EAPs) (institutions A and H), counselling services (institutions A, B, C, F and I), and awareness campaigns and wellness days (institutions A, C, E, I, J and K). Some institutions offer wellness and counselling services on an *ad hoc* basis, a needs basis, or a referral basis (institutions A, D and K respectively).

What seems to be lacking, is a strong focus on employees' spiritual, environmental, intellectual and occupational well-being, as these were identified as important dimensions of employees' well-being in the literature (see 2.4.5; 2.4.7-2.4.9). Only institutions G and K made mention of a focus on spiritual well-being, whilst institution K made mention of a focus on intellectual well-being. Not a single participant made mention of the dimensions of environmental and occupational well-being in the structure/focus/main content of their well-being programmes (see 2.4.7; 2.4.9).

Furthermore, only institutions D, H and K mentioned financial well-being as one of the main structure/focus components of their well-being programmes (see 2.4.6). This testifies to the finding that SA public HEIs are not completely effective in addressing employees' well-being in a holistic and integrated manner. The integrated employee well-being framework designed as an outcome of this study may assist SA public HEIs in this regard (see Annexure T).

Illustrative verbatim comments related to core elements/main structure/focus of SA public HEIs' well-being programmes:

Institution A: *"Academic Support; Psychological/counselling services; social services; primary healthcare services".*

Institution F: *"Counselling and proactive services."*

Institution J: *"Our Wellness Programme addresses lifestyle issues (e.g. how to improve your health; maintain a healthy weight; how to deal with illnesses, nutrition, stop-smoking campaigns). A psychologist is brought in to assist struggling employees."*

Illustrative verbatim comments related to utilisation of well-being programmes:

Institution A: *"From what I know, staff/students are either referred by a line manager where relevant, or are free to contact the centre themselves. Other programmes or sessions are advertised on internal communication platforms."*

Institution B: *"Employees access voluntarily via Care Centre. Services offered through outsourced company."*

Institution D: *"Ad hoc at the moment."*

5.4.7 Theme 7: How the well-being programme of each participating SA public HEI was developed, and the stakeholders involved

The seventh central theme that emerged from the empirical study and responses of participants, is how the well-being programmes of participating SA public HEIs were developed, and which stakeholders had been involved in its development. Participants' responses are recorded in Table 5.19 below.

Table 5.19 How well-being programmes of SA public HEIs were developed, and which stakeholders were involved in its development

Institution	How well-being programme was developed	Stakeholders involved in development of programme
Institution A	1. Uncertain.	1. Uncertain.
Institution B	1. By outsourced company, in consultation with different stakeholders of university and medical aid provider.	1. HR, Health and Safety, institutional research, and Training and Development.
Institution C	1. Joint consultation with unions, management and external consultants specialising in employee wellness.	1. Unions. 2. Management. 3. Experts in field of employee wellness.
Institution D	1. HR drafted the programme and consulted the University Wellness Forum and the Human Resources Committee.	1. Unions. 2. University Wellness Forum. 3. Human Resources Committee.
Institution E	No response provided.	Wellness programmes are based on inputs from various stakeholders, e.g.: 1. Wellness Committee;

		2. Employees and managers at all levels; 3. Union representatives; 4. Communication Department; 5. HR team; 6. Learning and Development Team; 7. Wellness Ambassadors; 8. Top Management; 9. Medical Fund consultants; and 10. Sports section.
Institution F	1. By Management of Transformation & Employment Equity & Diversity sections, with assistance from Student Wellness and DPSA.	1. The Department of Public Service and Administration (DPSA)'s guidelines are used.
Institution G	1. Developed in consultation with key stakeholders.	1. Management. 2. Unions.
Institution H	1. External service provider.	1. Senior management. 2. Unions.
Institution I	1. By former Wellness Specialist. 2. Health Care Committee looks at programme annually, and recommends it to Executive Management Committee for approval.	1. Not sure which stakeholders were involved in initial development of programme. However, representatives from unions, pensioners (for post-retirement medical aid benefits), campus clinic and HR Benefits sections are involved in annual approval of programme for the year.
Institution J	1. Developed in accordance with National Health Awareness Calendar.	1. None.
Institution K	1. Employee Wellness Framework was developed by HR Section.	2. Unions were consulted, and roadshows were held to create awareness.

5.4.7.1 Discussion of findings and results related to Theme 7

It became clear from the literature review and document analysis process that there are numerous role-players in people's health and well-being (see 3.2.19; 3.4). Amongst others, these include governments, the World Health Organization, health institutes, business and industry, the private sector, universities, schools, and society at large (see 3.4). It is clear from the literature review and document analysis that there should be closer collaboration among these role-players to ensure adherence to applicable health and well-being policies, and to enhance the well-being of people worldwide (see 3.4).

From the responses received, it is clear that some of the participants are unaware of how their employee well-being programmes were developed (institutions A and E), and which stakeholders were involved in its development (institutions A and I). Institution J indicated that no stakeholders were involved in the development of the programme, which means that the institution's well-being programme might fail to address some areas related to stakeholders' needs in terms of their well-being.

Furthermore, Institution B indicated that their employee well-being programme was developed by an external service provider, in consultation with university stakeholders and the medical aid provider, whilst Institution H indicated that their employee well-being programme was developed by an external service provider, in consultation with management and the unions. Institution F indicated that their employee wellness programme was developed by management of the Transformation, Employment Equity and Diversity sections, with assistance from Student Wellness and the Department of Public Service and Administration, whilst Institution K's Employee Wellness Framework was developed by their Human Resources Department.

It is clear from participants' responses that SA public HEIs utilise different means to develop their employee well-being programmes, amongst others internal employees, committees responsible for employee wellness, and external service providers (see Table 5.19 above). Hence, it is evident that the responding SA public HEIs' well-being approaches and focus will differ. This also became clear from theme six (the core elements/structure/main focus of SA HEIs' well-being programmes and how they utilise them) (see 5.4.6.1).

The stakeholders involved in the development of SA public HEIs' well-being programmes also differed. Some institutions (institutions C, D, E, G, H, I and K) indicated that management, the unions, or both management and the unions were involved in the process. Other participants indicated that Human Resources representatives (institutions B, D, E and I), the medical aid provider (institutions E and I), and experts in the field of employee wellness (Institution C) were involved in the development of their well-being programmes.

Illustrative verbatim comments:

Institution B: *“Developed by an outsourced company in consultation with different stakeholders of [name of university] and the Medical Aid provider.”*

Institution D: *“HR drafted and consulted with the University Wellness Forum, unions and the Human Resources Committee.”*

Institution G: *“Management and both unions [names of unions].”*

5.4.8 Theme 8: Perceived effectiveness of employee well-being programmes of SA public HEIs

The eighth central theme that emerged from the second round of data collected from participants and the analysis of their well-being programmes provided to me, is the perceived effectiveness of SA public HEIs' well-being programmes, from the viewpoint of the HR/Wellness practitioners who completed the questionnaire. Participants' responses are recorded in Table 5.20 below.

Table 5.20 Perceived effectiveness of SA public HEIs' employee well-being programmes

Institution	Perceived effectiveness of employee well-being programmes offered by SA public HEIs
Institution A	1. No formalised employee well-being programme at institution, but actions launched are effective, as the intended audience is targeted, and positive feedback is received. Employees are aware of wellness services offered.
Institution B	1. Effective. Its effectiveness has been measured for the past six years. All areas impacting on work performance are addressed. 2. In line with vision and mission of the workplace and supports human resources concerns.
Institution C	1. Effective, considering the update and feedback received from users.
Institution D	1. Cannot assess effectiveness. Institution has not yet implemented its employee well-being programme.
Institution E	1. Effective. Participation rate of employees increased by 35% this year. 2. 80 teams entered the Pedometer challenge. Only six teams did not complete the challenge. 3. Response rate on the engagement and Employee Pulse surveys increased by 10%.

Institution F	1. Effective, as more than 80% of clients, including supervisors, are providing feedback of services rendered.
Institution G	1. Effective. Buy-in from organised labour and Senior Management established. 2. Employees are satisfied with what is offered in wellness programme. 3. Good number of employees utilising the healthcare services offered.
Institution H	1. At this stage more or less 60% effective. Much still to be done in terms of buy-in from top management and employees; making time for the programme; making it part of human capital; regarding it as valuable for employees. Employee health and wellness should be regarded as a business partner.
Institution I	1. Currently not effective, as the position of Wellness Specialist is vacant, and institution has placed a moratorium on the filling of positions due to budgetary constraints, so the position will not be filled in the near future.
Institution J	1. Not effective. No support from senior management. 2. Poor attendance by employees. 3. Mostly dependent on external service providers for execution of wellness programme.
Institution K	1. Not very effective, according to reports. For example, there is an increase in lifestyle diseases such as high blood pressure and stress-related diseases. More to be done to encourage healthy living and a work-life balance.

5.4.8.1 Discussion of findings and results related to Theme 8

From the responses provided in Table 5.20 above, it is clear that more than half of the participants regarded their employee well-being programmes as effective (institutions A, B, C, E, F, G, H), whilst some participants regarded their institutions' well-being programmes as ineffective (institutions I, J and K). One participant (Institution D) indicated that he/she could not comment on the effectiveness of his institution's employee well-being programme, as his institution did not have an effectively operating employee well-being programme.

Another participant (Institution A) indicated that their institution had no formal employee well-being programme in place, but that the services that were offered in terms of employee wellness were effective. Hence, Institution A's response was related to the limited range of employee well-being services offered, and not to an institutional employee well-being programme. Hence, two of the responding institutions did not have formal well-being programmes in place (institutions A and D).

Institution H regarded the institution's employee well-being programme as somewhat effective (see Table 5.20), and indicated, amongst others, that much still needed to be done to establish buy-in from management and employees, participation in the programme, and realising its value.

I find it a reason for concern that two of the responding institutions had no formalised employee well-being programme in place, as it is been emphasised in the literature that employers should value their employees, and should invest in improving their well-being by means of effective employee well-being programmes (see 3.2.19; 3.2.24). Furthermore, institutions should make available sufficient human and other resources to attend to their employees' well-being (see 2.4.24). Institution I mentioned vacant positions within the employee wellness section and budgetary constraints as reasons for the non-effectiveness of its employee well-being programme.

Participants' responses related to the effectiveness of their institutions' employee well-being programmes were mainly motivated by the participation of employees in such programmes and feedback from participants and wellness reports (institutions A, C, E, F, G, and H). Only one institution (Institution B) indicated that its employee well-being programme was aligned with the institution's vision and mission (which is emphasised as important in the literature (see 3.2.24; 3.2.12), and that it was regarded as effective, partly because its effectiveness was measured annually. The importance of regularly monitoring and evaluating the effectiveness of well-being programmes also is emphasised in the literature (see 3.2.17).

Another reason for concern is that two participants (Institutions H and J) mentioned a lack of support from senior management as a reason for the ineffectiveness of their employee well-being programmes. The importance of having the support from senior management in terms of institutional well-being efforts was established from the literature review and document analysis conducted (see 3.2.20; 3.2.24). No employee well-being programme can be effective if it has not been formalised, and does not have a clear strategy for implementation in place (see 3.2.19), if it is not supported by senior management (see 3.2.20), and if sufficient human and other resources to roll

out the programme are not provided (see 3.2.4). Below are some verbatim comments of the participants to support the findings.

Illustrative verbatim comments:

Institution B: *“Effective, has matured over a period of 6 years. Addresses the areas that impact work performance, has established itself as a resource to effectively deal with concerns impacting work performance, In line with the vision and mission of the workplace and supporting HR concerns.”*

Institution D: *“Cannot assess, as we have yet to implement.”*

Institution H: *“At this stage I will say we are 60% there. There is still a lot to be done in terms of buy-in from management, buy-in from employees, making time for the programme, making it part of Human capital, see it as a value add for employees. They say we need to work hard, have fun and also play hard; then there will be engaged employees. Therefore, EHW (Employee Health & Wellness) needs to be seen as a business partner.”*

Institution I: *“It is currently not very effective, as we have no warm body in the position of Wellness Specialist to run the programme.”*

Institution K: *“According to our reports, it is not very effective yet. Our wellness reports are showing that our employees have an increase in high blood pressure, and stress-related diseases, for example. Those reports are released annually. From those reports you can see that we need to do more to encourage healthy living, and to teach employees to establish a work-life balance.”*

5.4.9 Theme 9: (i) How the effectiveness of employee well-being programmes is assessed; (ii) typical focus areas of assessment and (ii) how the outcomes of such assessments inform SA public HEIs’ employee well-being programmes

The ninth central theme that emerged from the responses of participants during the empirical study conducted, is how the effectiveness of the institutions’ employee well-being programmes are assessed, what the typical areas of assessment are, and how such assessments inform the participating SA public HEIs’ well-being programmes. Participants’ responses are recorded in Table 5.21 below.

Table 5.21 How effectiveness of employee well-being programme is assessed, typical focus areas of assessment, and how such assessments inform the institutions' well-being programmes

Institution	How effectiveness of well-being programme is assessed	Focus areas of assessment of effectiveness of well-being programmes	How assessment of well-being programme informs SA public HEIs' well-being programmes
Institution A	1. Through HR-initiated employee satisfaction survey, although this is not done frequently.	1. Employee satisfaction.	1. Wellness Centre uses it to continue with or change the events offered.
Institution B	1. Measured in terms of utilisation of services (participation) and types of referrals (self and management) for both preventative and curative interventions. 2. General awareness and visibility done via ad hoc surveys.	1. Utilisation by different occupational levels and employees' demographical information (e.g. gender, age and ethnicity) in targeted interventions. 2. Participation of at-risk population identified by medical aid provider.	1. Comprehensive monthly and quarterly reports.
Institution C	1. Feedback from users/ faculties/ divisions. 2. Uptake as presented by wellness service provider.	1. Feedback from users, faculties, divisions and peers. 2. Participation rates.	1. Feedback provided considered at every planning session.
Institution D	1. Via institutional scorecard presented to Council on a quarterly basis.	1. Employees Wellness Week and baseline studies.	1. Yet to be determined.
Institution E	1. Medical screening test results. 2. Completion of evaluation forms after events. 3. Participation rates. 4. Behaviour change.	1. Participation rates. 2. Monitoring of behaviour change. 3. Business performance metrics. 4. Health and wellness behaviour. 5. Results from biometrics tests.	1. Current measuring tool is outdated and does not address our new inputs. Planning to update measuring tool in 2019.
Institution F	1. No assessment tool in place. 2. DPSA guidelines compel us to provide both	1. Not applicable. No assessment tool in place.	1. Not applicable. No assessment tool in place.

	proactive and reactive services.		
Institution G	1. Monitored and evaluated by Wellness Coordinating Committee. 2. Tracking of employees' performance. 3. Sick leave statistics quarterly – look for reduction. 4. Decrease in employees' stress levels.	1. Number of people assessing the services. 2. Number of programmes and campaigns per term.	No response provided.
Institution H	1. Participation rates. 2. Absenteeism rates. 3. Employee engagement.	1. Participation rates (also as against money invested by institution and whether employees utilise the services). However, this may be problematic, as some might regard higher participation rates as signs of a sick/troubled organisation.	1. Effectiveness and reports drive the interventions as a response to the risks identified.
Institution I	1. Annually by means of employee satisfaction survey.	No response provided.	1. Survey results analysed annually and programme adjustments are made when supported by majority of participants.
Institution J	1. Annual employees satisfaction survey done. Employees wellness forms part of that survey.	1. Employees satisfaction. 2. Employees' needs in terms of an employee well-being programme. 3. Maintaining confidentiality.	1. Much to be done in this regard. 2. Support of management also required.
Institution K	1. Annual Wellness Report. 2. Corporate Health Report released by medical aid provider.	1. Healthy lifestyle choices (e.g. diet, exercise, sufficient sleep, alcohol consumption, etc.)	1. Information from annual wellness reports are used to adjust wellness programmes offered (e.g. recently introduced stress management/ debriefing workshops).

5.4.9.1 Discussion of findings and results related to Theme 9

It is evident from the responses provided that participating SA public HEIs measure the effectiveness of their employee well-being programmes by means of employees participation rates in wellness programmes (institutions B, C, E and H), feedback from employees after wellness events (institutions C, E and G), and annual employee satisfaction surveys/reports, including elements of employees wellness (institutions A, G, I, J and K). However, institution E indicated that their measuring tool was outdated, and that it needed to be updated.

Institution D indicated that the effectiveness of their institution's well-being programme was measured in terms of the institutional annual scorecard, whilst one participant (Institution F) indicated that their institution had no assessment tool in place to measure the effectiveness of its employee well-being programme, which is reason for concern. It was emphasised in the literature and the findings of the document analysis that employers should regularly monitor and evaluate their well-being programmes to identify and address any possible gaps (see 3.2.17; 3.2.2).

Institutions E, G and K indicated that they measured the effectiveness of their employee satisfaction surveys in terms of behaviour change, including improved performance and engagement levels of employees, and a decrease in absenteeism rates (Institution G).

As far as the focus areas of the assessment tools for measuring the effectiveness of SA public HEIs' well-being initiatives are concerned, and how these informed the institutions' well-being programmes, institutions A and I indicated that employees' satisfaction with the programme was their area of focus, and that employees' satisfaction with the programme informed their employee well-being programmes. Thus, employees' inputs on SA public HEIs' well-being programmes are regarded as important, and could assist them to determine whether a particular well-being programme should be continued, or revised.

Institutions B, C, E, G and H indicated that they focused on participation rates of employees as a focus area for measuring the effectiveness of their employee well-being programmes. Institution B indicated that they focused on the utilisation of their employees' wellness services by different occupational levels, and employees from different age, gender and ethnical groups, as a measure for the effectiveness of their employee well-being programme. As Institution F had no measuring tool for the effectiveness of their employee well-being programme in place. The participant indicated "not applicable" to the question related to the focus area of their employee well-being programme. Institution J indicated that, amongst others, one element for measuring the effectiveness of their employee well-being programme, was whether confidentiality was maintained. However, the institution (Institution J) indicated that much had to be done in terms of how the assessment of the effectiveness of the institution's well-being programme informed the programme, and that the support of management in this regard also was required. Institution K indicated that behavioural change in terms of employees' lifestyle choices was an indication of the effectiveness of their employee well-being programme.

Once again, it became clear from the responses that SA public HEIs did not use the same measuring tool for determining the effectiveness of their employee well-being programmes. Whilst participation rates in events could be an indication of the effectiveness of the programmes offered (as indicated by institutions B, C, E and H), these rates could not provide an indication of employees' needs in terms of addressing their well-being holistically, as they only commented on the services that were provided.

Furthermore, it is reason for concern that one institution (Institution F) did not have any measuring tool in place to measure the effectiveness of its employee well-being programme, and that two participants (institutions A and B) indicated that the effectiveness of their institutions' well-being programmes was not measured frequently, but on an *ad hoc* basis. This would neither give a clear indication of the effectiveness of their well-being programmes, nor provide an opportunity to regularly evaluate the relevance of the wellness programmes offered by these institutions (see 3.2.17). More could also be done by some SA public HEIs to ensure that the

measurement of the effectiveness of their employee well-being programmes in future would inform the shaping of these programmes, as indicated by Institutions J and K.

SA public HEIs should develop reliable, validated tools to constantly monitor the impact of their well-being programmes, and line managers should play an active role in monitoring such impact (see 3.2.17; 3.2.20). Thus, monitoring and evaluating the effectiveness of employee well-being programmes offered by SA public HEIs on a regular basis and via validated monitoring and evaluation tools are included as a component in my integrated employee well-being framework for SA public HEIs (see Annexure T).

Illustrative verbatim comments on measuring the effectiveness of SA public HEIs' employee well-being programmes:

Institution A: *"I believe through HR initiated questionnaires although it is not done frequently."*

Institution C: *"Feedback from the users. Uptake as presented by the wellness service provider. Feedback from faculties/divisions."*

Institution F: *"No assessment in place, however the guidelines of DPSA compel the personnel to provide both re-active and proactive."*

Illustrative verbatim comments on typical areas of focus in the assessment of the effectiveness of SA public HEIs' employee well-being programmes & how these focus areas informed the programme:

Institution A: *"Employees satisfaction. Wellness Centre only used it to continue or change the events offered."*

Institution F: *"Not applicable (no measuring tool in place)."*

Institution G: *"The number of people assessing the services. The number of programmes and campaigns per term."*

Institution J: *"Employees' satisfaction. What they need to be included in the programme. What is it that need to be changed? Confidentiality – if it was maintained. There's a lot that needs to be addressed and Management should support the programme as well."*

5.4.10 Theme 10: For how long and how actively the well-being programmes have been implemented at SA public HEIs

The tenth central theme that emerged from the second round of data collected by means of the responses of participants, is for how long, and how actively the well-being programmes have been implemented at each of the participating SA public HEIs. Participants' responses are recorded in Table 5.22 below.

Table 5.22 For how long and how actively SA public HEIs have implemented their employee well-being programmes

Institution	How long programme has been implemented	How actively programme has been implemented
Institution A	Since 2014 (i.e. for 5 years).	1. Better implementation required. Activities offered are advertised widely to the intended recipients, but it seems that all employees are not aware of the services available.
Institution B	For approximately 11 years (since 2007).	No response provided.
Institution C	For approximately 11 years (since 2007).	1. It is very active. Wellness services are utilised daily.
Institution D	Since 2013 (the Executive Wellness Programme).	1. Not actively implemented yet. Still at elementary level.
Institution E	1. Employee Wellness programme started in 2005. 2. In 2010 Skills Development workshops were added to the programme. 3. EAP introduced in 2017.	1. Flagship events (inclusion week, annual women's breakfast, medical screening tests, social events, pedometer challenges and healthy lifestyle challenge) are actively implemented.
Institution F	Since October 2011.	1. Actively implemented for more than five years.
Institution G	Since 2011.	1. Through students and employee peer educators. 2. Through HIV and Employees Wellness Office, in collaboration with Health Care Centre and Counselling Centre.
Institution H	1. Since 2015. However, Wellness Specialist was only appointed at end of 2016.	1. Implementation could have been better in terms of creating awareness of the programme. On a scale of 1 to 10, participant indicated a score of 6 for active implementation.
Institution I	Not sure. More or less in 2012.	1. It has been actively implemented by Wellness Specialist. However, the position is currently vacant. Filling the vacant position would contribute to more

		effective implementation of the well-being programme.
Institution J	Since 2015.	1. Not actively implemented. Non-attendance/poor attendance of events.
Institution K	Since 2010.	1. Actively implemented through Wellness Day, which takes place every year. However, participation rates can be improved. Currently approximately only a third of the employees participate. 2. Employee Wellness Framework guides our activities. 3. Awareness and other events are planned annually. This year these could not be attended to, as there was a vacant position in our wellness section. 4. Wellness website can be utilised by employees.

5.4.10.1 Discussion of findings and results related to Theme 10

The responses indicated that the employee well-being programmes of all the responding institutions had been implemented during the period 2005 to 2017. Five institutions indicated that their employee well-being programmes were implemented actively (institutions C, F, G, I and K), although one participant (Institution K) indicated that participation rates in their Wellness Day could be improved. One participant (Institution B) did not answer the question whether the programme was implemented actively, whilst four of the participants indicated that their employee well-being programmes were not implemented actively (Institutions A, D, H and J), and one participant (Institution I) indicated that it had been implemented actively initially, but not since the position of Wellness Specialist became vacant in October 2017.

Institution K also mentioned that a vacant position hindered the active implementation of awareness and other campaigns in 2018. Hence, five of the eleven responding institutions at the time of the study did not have actively implemented employee well-being programmes, which causes concern, as it became evident from the findings of the document analysis and the literature study that employees' well-being cannot be effectively and holistically addressed in the absence of an actively implemented employee well-being programme (see 3.2.19; 3.2.24).

Below are some verbatim responses of participants:

Illustrative verbatim comments on how long the programme has been implemented:

Institution C: *"For about eleven years."*

Institution D: *"Executive Wellness programme has been implemented since 2013."*

Institution J: *"Since I joined the organisation in 2015."*

Institution K: *"Since 2010."*

Illustrative verbatim comments on how actively the programme has been implemented:

Institution C: *"It is very active. There has never been a single day where people do not knock at the doors of the wellness offices."*

Institution D: *"Still at elementary level."*

Institution I: *"It has been actively implemented, although a warm body in the position of Wellness Specialist will contribute to even more active implementation."*

5.4.11 Theme 11: Amendments to employee well-being programmes according to global trends

The eleventh central theme that emerged from the literature review and the empirical study conducted, had a bearing on the latest revisions of the well-being programmes to ensure they were aligned with the latest global trends related to employee well-being, and examples of such alignments done. Participants' responses are recorded in Table 5.23 below.

Table 5.23 When last was the well-being programme revised to ensure alignment with latest global trends related to employee well-being, and examples of such alignments done

Institution	Last revision of well-being programmes performed to be aligned with global trends related to employee well-being	Example(s) of alignments done
Institution A	Do not know.	No examples provided.
Institution B	Done annually.	No examples provided.
Institution C	Revised in 2017.	1. Looking at targeted intervention when working especially with in-sourced employees (e.g. security/cleaners/gardeners), as they bring their own unique dynamics to the picture. 2. Looking at introducing a targeted intervention for the restructured faculties.
Institution D	1. Strategy is fairly new. Developed in 2016.	1. Strategy is based on a holistic model for health and wellness - physical, emotional, mental, financial and psychological wellness.
Institution E	1. External service provider provides university with trends worldwide, and university then aligns some of its programmes, especially psychological initiatives, with these trends. 2. Organisational Development Specialist thoroughly researches latest trends within OD and Employee Wellness. 3. Feedback from annual employees surveys is used to measure job satisfaction, employees morale, organisational climate and employee well-being. Annual plan is then developed and implemented.	1. External service provider's EAP trends. 2. Thomas International's trends report.
Institution F	2016.	1. Inclusive of primary healthcare and physical activities.
Institution G	Done annually.	1. HE AIDS programme.
Institution H	Global alignment has never been done. Programme is currently aligned and implemented based on the EAPASA standards.	1. Programme is aligned with EAPASA standards.
Institution I	1. Employee well-being strategy was developed in 2017, based on	1. Demographics of institution recently addressed in terms of nutrition

	latest trends. However, it has not been rolled out yet. 2. Employees' wellness programme is reviewed annually, based on the responses from the employees' satisfaction survey.	programme offered to address cultural differences in diet. 2. Well-being Strategy was developed but needs to be rolled out. 3. Annual employees' satisfaction survey.
Institution J	1. Has never been revised.	1. Has never been revised.
Institution K	1. Employee Wellness Framework has never been reviewed. It is still aligned with the global perception of well-being.	1. Has never been revised. However, a programme was developed for executive managers, as their participation rate in wellness activities was low.

5.4.11.1 Discussion of findings and results related to Theme 11

It emerged from the literature study and the text reviews conducted that organisations need to regularly monitor the effectiveness of, and align their well-being programmes with best practice worldwide, based on the needs of their employees and in the specific context of the organisation (see 3.2.17; 3.2.24). Of the participants, four (institutions B, E, G and I) indicated that they revised their employee well-being programmes annually. However, deeper analysis revealed that this was based on the outcome of their annual employee satisfaction surveys in the case of three of the participants (institutions B, G and I), whilst one institution (Institution E) indicated that an external service provider provided the university with the latest trends annually, and that they used an Organisational Development Specialist who researched global trends related to Organisational Development and Employee Wellness.

One participant (Institution A) indicated that he did not know when last such a revision and alignment with national trends had taken place, whilst two of the participants (institutions J and K) indicated that such actions never had been taken by their institutions.

The responses provided evidence that most of the institutions revised their employee well-being programmes, based on annual reports and employee satisfaction survey outcomes, and not on global trends in terms of employees' well-being. Hence, their well-being programmes might have become irrelevant and outdated, as global trends should guide the revision of these programmes, based on their own needs (see 3.2.17; 3.2.24).

Furthermore, this might also be evidence of these institutions failing to address their employees' well-being holistically, as examples of such revisions done included revision of primary healthcare programmes (Institution F), HIV/AIDS programmes (Institution G), and nutrition programmes based on demographics of the institution (Institution I), whilst no examples related to employees' spiritual, financial, social, psychological, environmental and intellectual well-being were provided (see 2.4; 2.4.1-2.4.9).

One participant (Institution E) indicated that alignment took place with the Thomas International Trends Report. More SA public HEIs should study and research global trends in terms of employee well-being and apply such principles when revising their employee well-being programmes. Furthermore, such revision should be done on a regular basis, as employees' well-being should be a high priority for SA public HEIs (see 3.2.17; 3.2.24). Below are some illustrative verbatim comments from participants:

Illustrative verbatim comments related to when last the well-being programmes were aligned with global trends related to employees' well-being:

Institution B: *"Annually."*

Institution C: *"It was revised in 2017 to address and include the [number of] insourced employees."*

Institution F: *"2016."*

Institution J: *"Never revised."*

Illustrative verbatim comments related to examples of alignment with global trends that have taken place:

Institution E: *"[Name of external provider] EAP trends. Thomas International's trend reports."*

Institution G: *"HEAIDS programmes."*

Institution I: *"We align our annual employees wellness programme with the responses from our employee satisfaction survey. We have developed a Well-being Strategy on paper, but it still needs to be rolled out."*

Institution J: *"N/A. Has never been revised."*

5.4.12 Theme 12: Objectives and anticipated outcomes of the employee well-being programmes of SA public HEIs

The twelfth central theme that emerged from the findings of the literature study, document analysis and the second round of data collected from participants, entails the objectives and anticipated outcomes of the employee well-being programmes of SA public HEIs. Participants' responses are recorded in Table 5.24 below.

Table 5.24: Objectives and anticipated outcomes of SA public HEIs' employee well-being programmes

Institution	Objectives and anticipated outcomes of the employee well-being programmes
Institution A	1. Psychological – more effective behaviour; tools to cope better. 2. Social – to create awareness. 3. Physical – to create awareness and for prevention purposes.
Institution B	1. Curative and preventative: Workshops offered on a regular basis on elements that impact on employees' productivity and efficiency. Individually via counselling sessions.
Institution C	1. Looking into implementation of a targeted intervention for insourced employees (security/cleaners/gardeners).
Institution D	1. Employee Wellness Strategy is based on a holistic model for health and wellness, addressing employees' physical, emotional, mental, financial and psychological well-being.
Institution E	1. Increasing employees' level of physical activity. 2. Teaching/assisting them to handle stress better, and to take care of their mental health. 3. Doing medical screenings to make employees aware of health challenges. 4. Increasing the financial wellness of employees. 5. Teaching employees how to establish work-life integration.
Institution F	1. To assist employees to deal with their challenges. 2. To provide services expected from employees.
Institution G	1. Utilisation by employees. 2. Positive feedback from employees. 3. Overall improvement in employee satisfaction. 4. Requests for additional programmes. 5. Reduction in sick days and absenteeism rates. 6. Employees' likelihood to recommend the programme.
Institution H	1. Annual plan for employee wellness is developed at beginning of each year, in consultation with key stakeholders. It is reviewed quarterly if targets were met. Hindrances in terms of implementations or developments mean that amendments must be made. 2. Reports from service providers are used to plan interventions in response to the identified risks.
Institution I	1. Aim of awareness campaigns is to make employees aware of various matters related to their health and well-being. 2. Employees with mental challenges are referred to an external service provider.

	3. We encourage employees to embrace different cultures, and to become socially responsible. 4. Employees going through difficult times emotionally are referred for pastoral counselling. 5. We aim to teach employees about financial well-being (i.e. how to budget, become free of debt, how to save/invest, how to plan for retirement) through financial wellness sessions. 6. We make employees aware of how they can take better care of their environment, e.g. teach them the value of planting trees; teach them how to improve their work environment, e.g. by ensuring that offices are properly ventilated, and by assigning smoke-free areas.
Institution J	1. Early intervention prevents complications that may negatively affect personal and work performance. 2. Fostering employee well-being. 3. Sustained optimal functioning of employees leads to increased productivity and improved quality of life for employees and their families.
Institution K	1. Pro-active/preventative approach to employees' well-being followed. 2. Aim is to minimise lifestyle diseases by creating awareness and teaching employees to make healthy lifestyle choices.

5.4.12.1 Discussion of findings and results related to Theme 12

The aim of any well-being programme within an organisation should be to enhance employees' well-being (see 3.1.1; 3.2.19). From participants' responses, it is clear that it is the objective of all the responding SA public HEIs to establish increased health and well-being of employees by means of the employee well-being programmes (institutions A, B, C, D, E, F, G, H, I, J and K). Some institutions emphasised a preventative/early intervention focus (institutions A, B, J and K), realising that prevention is better than cure, and knowing that early intervention prevents complications that negatively affect employees' personal lives, as well as their productivity and efficiency at work (institutions B and J). This is in line with the literature findings that most well-being programmes implemented in the workplace adopt a primary or secondary disease prevention approach aimed at minimising health risks (see 3.2). However, it also became clear from the literature that a preventative approach to minimise employees' health risks alone is not enough to establish a truly flourishing employee component, as people's well-being is multi-faceted, and entails much more than improving their physical well-being by merely minimising their health risks (see 3.2).

Other objectives of SA public HEIs' employee well-being programmes that are in line with the literature findings, amongst others, are to create awareness around health and well-being related matters (institutions A, I and K) (see 3.2.19); to establish sustained optimal well-being of employees (Institution J) (see 3.3); to teach employees to be socially responsible citizens (see 3.3), and to embrace different cultures (Institution I) (see 3.2.24); to assist employees when they go through emotionally strenuous times (Institution I) (see 2.4.2; 3.3); to plan interventions in response to identified risks (Institutions H and K) (see 3.2.17); and to guide and support employees in better integrating work and their personal lives, and to create a work-life balance (Institutions E and K)(see 3.2.15).

The responses of participants clearly indicated that SA public HEIs realised the importance of setting clear objectives in terms of their well-being programmes. Proof of this is that institutions compile annual programmes to address their employees' health and well-being, and that they offer various workshops and events such as health screenings (institutions E and K); financial well-being workshops (institutions D, E, I and K); and stress management workshops (institutions E and K). However, it also is clear that the participating SA public HEIs do not always address their employees' well-being at all levels, namely at physical, emotional, psychological, social, financial, spiritual, environmental, intellectual and occupational levels, as identified during the literature study and document analysis (see 2.4.1 - 2.4.9). For instance, the participant for Institution D indicated that the university used a holistic model for health and wellness that addressed employees' physical, emotional, mental, financial and psychological well-being. However, a holistic model also would address employees' spiritual, environmental and intellectual well-being (see 2.4; 2.4.1 - 2.4.9).

Another important observation is that none of the employee well-being programmes of the responding SA public HEIs are designed to address employees' well-being in an integrated manner. According to the literature, integrated well-being programmes are required to address employees well-being holistically and effectively (see 1.5.2; 2.4). The various components of participating SA public HEIs' employee well-being programmes seem not to be linked, joined, co-ordinated and well-balanced, but rather are offered in a fragmented manner as standalone events/workshops/programmes.

Better integration between the dimensions of well-being of the various wellness programmes offered by SA public HEIs would mean that employees' well-being will be addressed more effectively (see 2.4; 3.2), and by doing so, a more enabling environment would be created for these employees to flourish (see 3.1.2).

Below are some of the verbatim quotations that testify to the objectives and anticipated outcomes of participating SA public HEIs' employee well-being programmes.

Illustrative verbatim comments:

Institution B: *"Curative and preventative. Workshops (ongoing) on elements that impact productivity and efficiency. Individuals - through counselling."*

Institution F: *"To assist employees to deal with their challenges and be able to provide services expected from them."*

Institution I: *"The objective of awareness campaigns is to make employees aware of various matters related to their health and well-being. Through these campaigns, we want to encourage employees to take better care of their own health."*

5.4.13 Theme 13: Existence of policies and procedures that support the employee well-being programmes of SA public HEIs, and how employees are made aware of such well-being policies and procedures and of employee well-being programmes offered

The thirteenth central theme that emerged from the literature study, document analysis and responses from participants related to the empirical study, is the existence of policies and procedures that support the employee well-being programmes of SA public HEIs, and how employees are made aware of such policies and procedures, as well as of employee well-being programmes offered. Participants' responses are reported in Table 5.25 below.

Table 5.25 Policies and procedures that support the employee well-being programmes of SA public HEIs, and how employees are made aware of such well-being policies/procedures and well-being programmes offered

Institution	Policy/procedure in place that supports the employee well-being programme	How employees are made aware of the policies and procedures related to their well-being and of employee well-being programmes offered
Institution A	No.	1. No policy in place. 2. Wellness events are marketed via e-mail and printed material.
Institution B	Yes.	1. Through continuous printed and online communications. HR consultants have been trained to convey the message to their respective departments.
Institution C	Yes.	1. Through various internal communication channels, e.g. circulars, meetings, posters and information sessions.
Institution D	No.	1. No policy. 2. Employees informed about wellness events via internal communication and posters.
Institution E	Yes.	1. Roadshow sessions at beginning of the year. 2. Information sessions at all departments and faculties. 3. Via presentations. 4. Management board meetings. 5. Official university communication platforms. 6. U-folders and posters. 7. Blackboard blogs.
Institution F	Yes.	1. Continuous marketing.
Institution G	No.	1. No policy. 2. Employees are informed about wellness sessions through word of mouth from employees peer educators, internal communications & pamphlets.
Institution H	Yes (though it is in an approval phase).	1. Consultations were held with faculty boards and support services departments to make them aware of the policies/procedures.
Institution I	No.	1. Only a policy on total rewards in place. 2. Employees are made aware of wellness activities via electronic communication (e-mail) and it is advertised on noticeboards. Reminders are sent to employees.
Institution J	Yes.	1. Presentations during induction of new employees. 2. During visits to faculties. 3. Making use of newsletter to employees.

Institution K	No. 1. Only an Employee Wellness Framework exists. 2. Currently looking into expanding the framework into a comprehensive well-being strategy, as this will mean that funding for wellness activities can be secured.	1. Employees are made aware of the Employee Wellness Framework via e-mail. When it was developed, roadshows were also held to increase awareness.

5.4.13.1 Discussion of findings and results related to Theme 13

It emerged from the literature review and document analysis that workplace policies can strongly influence the well-being of employees (see 3.2.19). Policies and procedures should therefore be developed and implemented by organisations to support employee health and well-being (see 3.2.19). The purpose of any policy guiding the well-being of employees thus is to provide a framework within which the organisation can encourage services and practices that will contribute positively to employees' health and well-being (see 3.2.17; 3.2.19; 3.5).

Of the eleven participants, six (institutions B, C, E, F, H and J) indicated that their institutions have a policy/procedure that guides their wellness activities. One of these six participants (Institution H) indicated that the policy still was in an approval phase. Five participants (institutions A, D, G, I and K) indicated that they have not yet developed a policy and procedure to support their employee well-being programme(s). This is reason for concern, as any employee well-being programme can only have a true, meaningful impact if it is driven and supported by clear policy guidelines (see 3.2.19).

Furthermore, participants whose institutions have a policy that supports their well-being programmes indicated that employees were made aware of such policies via various communication channels, amongst others printed and electronic media (institutions B and C); roadshow sessions (Institution E); consultation sessions with faculty boards and support services departments (Institution H); and presentations during induction of new employees (Institutions E and J). Institutions could consider placing such policies on their internal websites for employees to access them easily.

Such policies also could be displayed on centrally-placed noticeboards on campus, and at wellness events offered. This will increase awareness of such guiding policies amongst employees, which is an important aspect emphasised in the literature (see 3.2.19; 3.2.1). As far as creating awareness of their annual well-being programmes offered are concerned, electronic media (e-mail and Blackboard), newsletters and other marketing material seem to have been used by most of the responding institutions (Institutions A, B, C, D, E, F, G, I, J and K), whilst others (Institution G) made use of word-of-mouth, and participants B, E and H indicated that they had consultation sessions with faculties and divisions, and utilised induction events (Institution J) to inform them of wellness events offered. One participant (Institution I) indicated that reminders were sent to employees regarding wellness events to be offered, whilst Institution K indicated that awareness was created around the institution's Employee Wellness Framework during roadshows.

It is clear that some SA public HEIs need to establish employee well-being policies and procedures to guide their well-being programmes. Whilst most of the participants indicated that their institutions marketed their wellness events well through various communication channels, more can be done to remind employees about such events, as only one institution (Institution I) indicated that such reminders were sent to employees.

Illustrative verbatim comments related to policies and procedures:

Institution F: *"Yes. Continuous marketing."*

Institution G: *"No policy."*

Institution H: *"Yes. Consultations were done at faculty boards, departments with the support employees regarding policies and procedures."*

Institution K: *"No. We have too many HR policies. We have an Employee Wellness Framework, which is a living document. We are currently looking into expanding the framework into a comprehensive well-being strategy, as such a strategy will assist us in obtaining a budget for employee well-being. Currently, since there is no policy, we don't get any funding to support our wellness activities."*

Illustrative verbatim comments on how employees are made aware of well-being policies and procedures, and well-being programmes offered:

Institution C: *“Through various communication channels such as employee circulars, meetings, posters and information sessions.”*

Institution E: *“Roadshow sessions at the beginning of the year. Information sessions at all departments and faculties. Presentation at onboarding sessions. Management board meetings. Official university communication platforms. U-folders and posters. Blackboard Blogs.”*

Institution G: *“Through word of mouth from employees’ peer educators.”*

5.4.14 Theme 14: Generic programme utilised versus a programme based on the unique challenges/needs of the organisation

The fourteenth central theme that emerged from the literature study and data collected from participants in the empirical study, is the use of a generic employee well-being programme versus a programme based on the unique challenges or needs of the organisation. Participants’ responses are recorded in Table 5.26 below.

Table 5.26 Generic programme utilised versus a programme based on the unique challenges of the organisation

Institution	Generic programme utilised versus a programme based on the unique challenges of the organisation
Institution A	It should be focused on unique challenges of organisation. Currently it is aligned with type of well-being programmes offered to students.
Institution B	Programme based on the unique environment of the organisation.
Institution C	Based on unique challenges affecting the well-being of employees.
Institution D	Based on unique challenges affecting the well-being of employees, taking into account the various capacities available.
Institution E	1. Based on unique challenges affecting the well-being of employees. 2. Results are depicted from the quarterly [name of service provider] report and employee surveys. 3. Medical aid claims report provides an indication of the type of interventions needed.
Institution F	Generic.
Institution G	Generic and based on challenges faced by employees.
Institution H	1. Both (generic and customised). Generic part of programme is aligned with Department of Health’s Calendar. 2. Customised part responds to the needs identified from EAP reports, absenteeism reports and health screening reports.

Institution I	1. Both. 2. Most events are generic. 3. Employee satisfaction survey is utilised to address challenges unique to the organisation.
Institution J	1. Both. 2. Generic programme is compiled from the National Health Awareness Programme. 3. Unique challenges: Based on identifying stressors and how to cope with stress to improve workplace relationships.
Institution K	1. It started as a generic programme, but has become more unique in terms of challenges experienced by our employees (e.g. bullying).

5.4.14.1 Discussion of findings and results related to Theme 14

It is emphasised in the literature that organisations need to tailor employee well-being programmes and efforts that address the unique challenges of the organisation (see 3.2.17; 3.2.24).

Of the eleven participants, six (institutions A, B, C, D, E and K) indicated that their employee well-being programmes were based on the unique challenges of the organisation related to employees' well-being. Furthermore, one participant (Institution F) indicated that they used a generic well-being programme, whilst four participants (institutions G, H, I and J) indicated that they used both a generic programme and a programme based on the unique challenges of the organisation related to employees' well-being.

Although a generic health programme might be useful to ensure that all the dimensions related to employees' health are addressed, such a programme would not be able to address employees of SA public HEIs' well-being holistically, and in an integrated manner, as it is only focused on the element of physical health. Hence, a combined approach seems more appropriate, as it would ensure compliance with the national health initiative, whilst also addressing all the other important building blocks of employee well-being (see 2.4.1 - 2.4.9).

Illustrative verbatim comments:

Institution A: *"It should be focussed on unique challenges. I am not sure. What I can gather is that is just falls in line with what is currently offered to students."*

Institution B: *"Very definitely to the unique environment."*

Institution D: *"It is based on the unique challenges affecting the well-being of employees."*

Institution F: *"Generic."*

Institution G: *"It's both generic and is also based on challenges faced by employees."*

5.5 SYNTHESIS

From the results of the baseline pilot study and the empirical research conducted, it became clear that most of the participants from SA public HEIs regarded their institutions' well-being programmes as effective (see 5.2.8; 5.2.8.1), whilst best practice globally proves that some of the well-being programmes applied by SA public HEIs could be improved at various levels.

Evidence obtained from analysing the employee well-being programmes of SA public HEIs, and the responses from participants, suggests that there is much diversity in relation to the types of employee well-being programmes that are applied by these institutions, with varying degrees of success (see 5.2.4; 5.2.4.1). Hence, SA public HEIs have to develop and utilise inclusive, holistic, affordable and sustainable employee well-being programmes (see 5.2.3; 5.2.3.1).

It further is of importance that there has to be an integration of theory, research, practice, policy and health and safety standards with regard to the employee well-being programmes offered by SA public HEIs (see 3.1.2). It is understandable that the differentiation of 26 universities within the SA public HEI environment brings about various challenges as a result of the institutions' diversity - also in their approaches to employee well-being, as were evident from the research results and the interpretation of the results.

When comparing the well-being programmes of the participating SA public HEIs with best practice found during my extensive literature review and document analysis, it became evident that most of these universities lacked an integrated approach towards employee well-being. Applying employee well-being programmes in a fragmented manner means that employees' well-being is not addressed holistically and effectively (see 2.4.10). Furthermore, it became evident that most of the participating SA public HEIs did not incorporate all the dimensions/building blocks of employee well-being in their well-being programmes, namely at physical, psychological, emotional, social, spiritual, financial, environmental, intellectual and occupational levels (see 2.4.1 - 2.4.9).

It thus is vital for SA public HEIs to implement an integrated approach to employee well-being - an approach that is proactive and preventative in nature (see 3.2). However, in cases where well-being of employees has been negatively affected, SA public HEIs have to be reactive, with a focus of rehabilitating such employees back to work (see 3.2). The institutions' approaches should be to promote physical health; optimal emotional, mental, psychological, social, spiritual, financial, environmental, intellectual and occupational well-being; healthy lifestyle choices; and to create a work environment that will support, enhance and sustain employees' well-being (see 2.4.1 to 2.4.9; 3.3). The ineffective implementation of integrated employee well-being programmes at SA public HEIs addressing employees' well-being holistically therefore is a symptom of a range of problems and challenges related to their approaches to employee well-being (see 2.2.4; 2.4.9).

SA public HEIs nowadays are funded differently than in the past by government, due to financial constraints. Funding has been cut back, and universities are encouraged by Government and the Department of Higher Education and Training to apply cost-saving measures. In this landscape of scarce resources, SA public higher education institutions have to find unique ways to raise third-stream income, and to address employees' well-being holistically and effectively, but in ways that do not place them under financial strain.

Furthermore, it became evident from this research that SA public HEIs need to link their employee well-being programmes with their visions, missions, values and strategic plans, as well as their needs (see 3.2.24). Their well-being strategies and programmes should be guided by institutional well-being policies (see 3.2.19), which are not in place at five out of the 11 participating SA public HEs. Employee well-being programmes also often are not integrated with all their other employee management activities (see 3.2.10).

Finally, SA public HEIs still have to go a long way in terms of creating an institutional culture that is conducive to employee well-being (see 3.2.19). Creating a healthy, positive, functional institutional culture currently perhaps is the greatest challenge for SA public HEIs, as these are trying times in the SA educational environment as a result of students' demands for, amongst others, free education, and limited financial resources. Creating a positive institutional culture would require a commitment from top management, and down to the lowest levels of employees (see 3.2.24).

SA public HEIs therefore should reassess their priorities, and seriously pay attention to establishing positive change in their institutions and their institutional cultures. An organisational culture that do not support employees' well-being can impact negatively on both employees and their organisations (see 3.3). However, when a positive well-being culture is established within SA public HEIs, absenteeism levels will be reduced, and employees will be more engaged in their work (see 3.2.7; 3.3). SA public HEIs therefore need to do all in their power to enhance and support their employees' well-being, as it will, amongst others, have a positive impact on the retention of employees, as well as their productivity and performance (see 3.1.1; 3.3).

Figure 5.5 below illustrates the data analysis and interpretation of the research results that were discussed in Chapter 5.

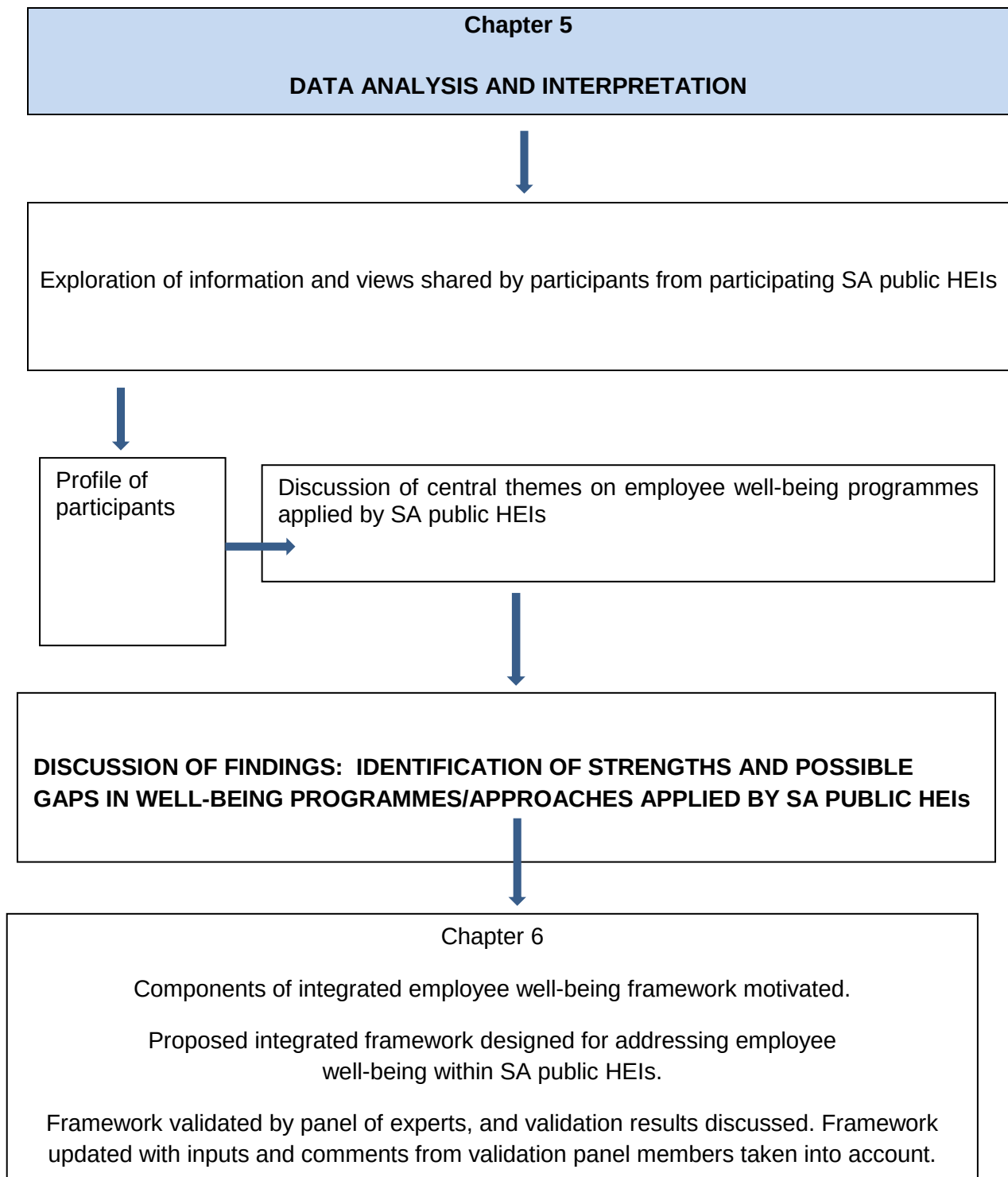


Figure 5.5 Central themes addressed in Chapter 5

In the next chapter, the integrated employee well-being framework that was designed for SA public HEIs is discussed in detail.

**DESIGN AND VALIDATION OF AN INTEGRATED EMPLOYEE
WELL-BEING FRAMEWORK FOR SOUTH AFRICAN
PUBLIC HIGHER EDUCATION INSTITUTIONS**

6.1 INTRODUCTION

The qualitative research findings and results that were obtained from the baseline pilot study and the empirical research conducted amongst SA public HEIs, were discussed in detail in Chapter 5. These findings and research results, together with the outcomes of Chapters 2 and 3, have been utilised to design a draft integrated employee well-being framework for SA public HEIs (see 6.4; Annexure S). The components and sub-components for the framework will be presented and motivated (see 6.3.1. – 6.3.7). Furthermore, the validation of the proposed framework for SA public HEIs towards enhancing their employees' well-being will be discussed (see 6.5.1 - 6.5.2). As such, this chapter addresses the primary research question, as well as the sixth secondary research question, as illustrated below:

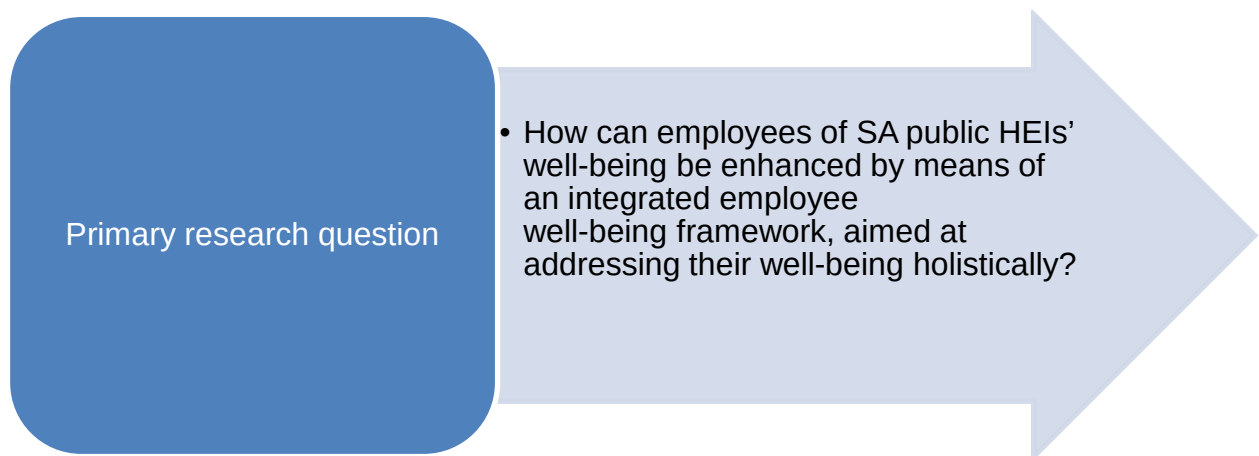


Figure 6.1 Primary research question addressed in this Chapter

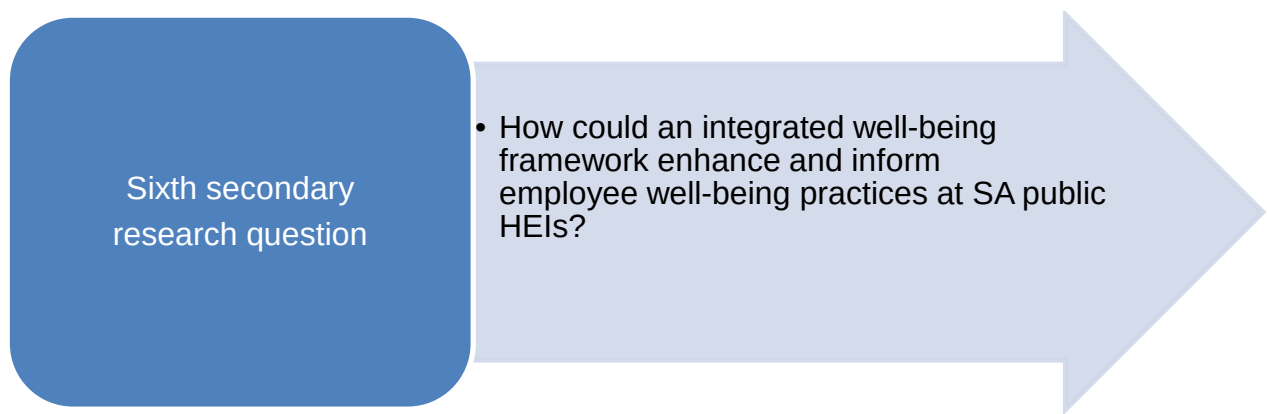


Figure 6.2 Sixth secondary research question addressed in this chapter

The following sections will be discussed in this chapter:

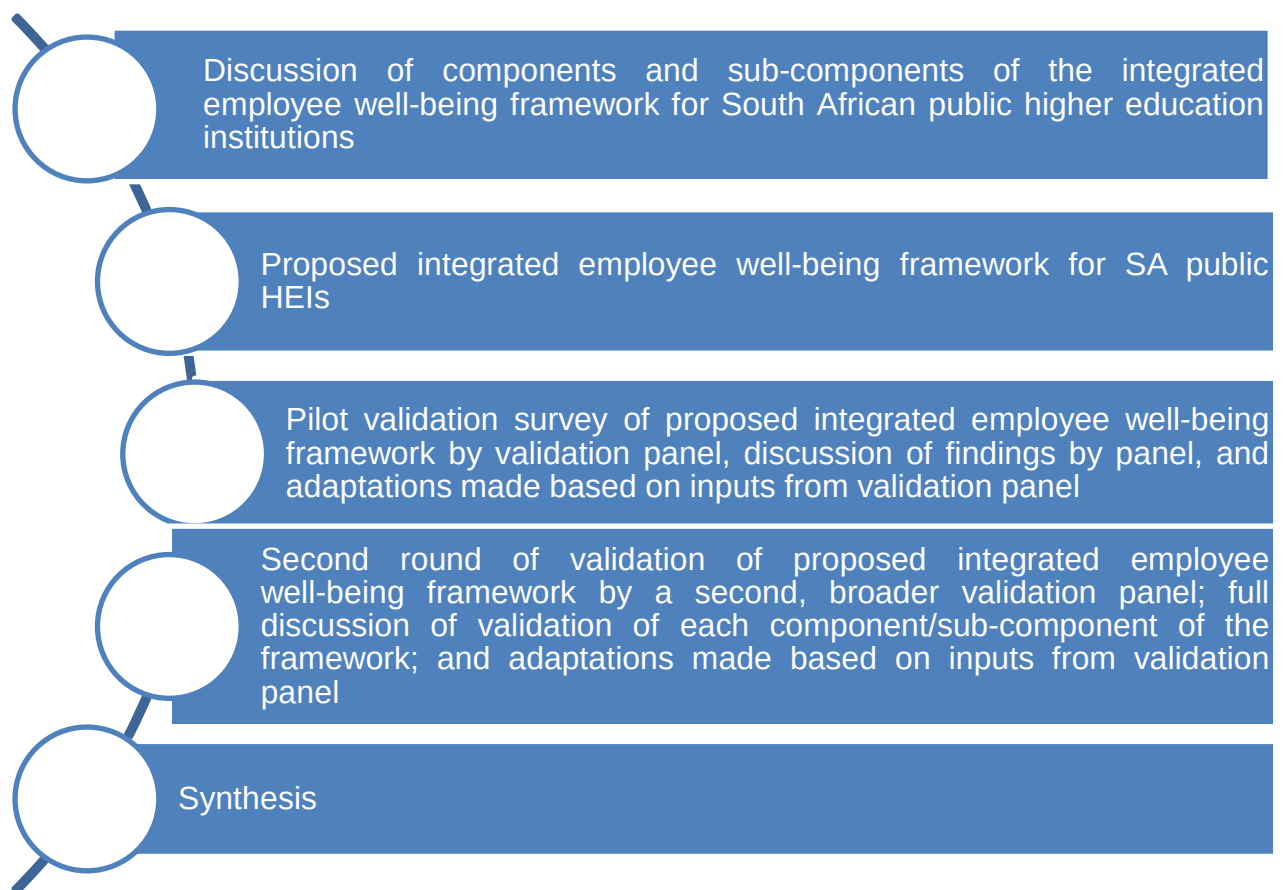


Figure 6.3 Outline of sections discussed in Chapter 6

It is evident from the literature review and document analysis conducted that the most successful well-being programme for any organisation would be one that creates an enabling environment for all employees, that is, an environment that stimulates them to flourish at all levels of their existence. A holistic and whole-organisation approach to employees' well-being renders both effective and sustainable results (see 3.5). Hence, in the design of an authentic, integrated well-being programme for SA public HEIs I kept the following in mind:

- relevant well-being theories (see 2.3.1 - 2.3.8.3; 2.3.9);
- all the dimensions/building blocks of well-being, as identified from the literature, document analysis and the multiple case study empirical research (see 2.4.1 - 2.4.9);
- current strengths, resources and capacities of SA public HEIs in terms of their well-being programmes (see 5.4.3 - 5.4.14.1), and how these can be mobilised and built upon - amongst others by applying the principles of positive psychology theory, well-being theory and flourishing theory - to improve employees' well-being (see 2.3.7.2; 2.3.7.3; 2.3.8.3; 2.3.9);
- current gaps in their well-being programmes as identified from the empirical research, and how these could be reduced or eliminated (see 5.4.1 – 5.4.14.1);
- an integrated approach to employees' well-being (see 1.5.2; 3.4);
- the current HE environment, and its impact on employees' well-being (see 3.5; 3.5.1);
- a holistic and whole-organisation approach (see 3.1.1; 3.1.2; 3.4); and
- the affordability and sustainability of the proposed integrated employee well-being framework for SA public HEIs, including financial sustainability (see 3.5; 3.5.1; 6.2; 6.4).

Organisations to an increasing extent are recognising the necessity for and positive impact of strategic well-being programmes that are measured properly, and supported by top management (see 3.2.17; 3.2.20; 3.2.24). Well-being strategies often are primarily driven by a desire to increase employee engagement (see 3.2.7), and to improve organisational culture (see 3.1.1) and employee value proposition (see 3.2.19; 3.2.23).

Employers thus are recognising the value of building healthy and resilient workforces that are equipped for change (see 3.2.19). Hence, they are turning to well-being strategies to build healthy, robust workforces (see 3.2.23). SA public HEIs should follow suit. There also is a growing realisation that good leadership is what will drive the success of organisations of all kinds (see 3.2.20). Employee well-being is taking centre stage in terms of the practices that are revolutionising organisations (see 3.3-3.4).

As indicated in Chapter 1, South Africa has 26 public universities, and these universities are aligned and differentiated into three types of universities (comprehensive universities, traditional universities, and universities of technology), to respond to emerging national and international demands and needs related to tertiary education (see 1.4.2). This level of diversity in the types of SA public HEIs will bring about differentiating views – also pertaining to employee well-being.

Amongst other burdens related to their financial sustainability, SA public HEIs now have to deal with the effects of the 2016 #Fees-Must-Fall campaign (see 3.5.1). Financial resources within SA public HEIs have declined for a number of reasons, including political and economic turmoil, inflation, increases in interest rates, and systematic and structural adjustments, to name but a few (see 3.5.1). Furthermore, the effects of globalisation and the rise of the knowledge economy ensued in universities now competing with one another in terms of appointing the best employees, and enrolling the best students (see 3.5.1).

The outcome of the multiple case study empirical research conducted amongst SA public HEIs revealed that it can no longer be business as usual in terms of well-being approaches and strategies applied by SA public HEIs. An authentic, integrated employee well-being framework is required to guide SA public HEIs to effectively and holistically address their employees' well-being as an important determining factor in their organisations' well-being and performance. This will require an organisation-wide approach, and an integration of strategies and solutions. New approaches or mechanisms to improve employees' and organisational well-being thus are required.

Any successful, integrated employee well-being programme has to take into account the unique characteristics and culture of the organisation, work practices, the work environment, policies and the workforce itself (see 3.2.1; 3.2.19; 3.2.23; 3.4). Furthermore, a holistic approach to employee well-being requires that clearly defined outcomes and methods for its constant evaluation should be established (see 3.4).

A fragmented approach to employee and organisational well-being will not suffice. A holistic, integrated employee well-being approach will create an effect of synergy in terms of bringing about optimal organisational and employee well-being. Hence, both work-related factors and non-occupational factors have to be taken into account when developing a framework for addressing employees' well-being effectively (see 2.4.10; 3.2.15). I have applied the above approaches in developing an integrated employee well-being framework that could assist SA public HEIs in addressing their employees' well-being holistically and in an integrated manner. All of the above factors impact on the well-being of employees of SA public HEIs, both inside and outside of the workplace.

The dimensions, elements and factors influencing employees' well-being were discussed extensively in Chapters 2 and 3 (see 2.4.1 - 2.4.9; 3.2.1 - 3.2.24; 3.3). In Chapter 5, the needs and shortcomings identified by participants in terms of their institutions' well-being programmes during the second round of data collection conducted amongst SA public HEIs, by means of a multiple case study, were discussed in detail (see 5.4.1 - 5.4.14.1).

In the next section, a definition of an effective framework is provided, after which a discussion of and motivation for the inclusion of each component of the integrated employee well-being framework in terms of the research findings and results, the literature review and text reviews conducted, are provided (see section 6.3). The proposed integrated employee well-being framework for SA public HEIs is presented in section 6.4 (also see Annexure S), followed by a discussion of the pilot validation survey and the amendments to the framework that were proposed, and which of these were incorporated, with reasons for such (see 6.5.1 - 6.5.2). Finally, the second validation process by a second, broader validation panel, is discussed by presenting

the actual gradings by each panel member, as well as a table, indicating the changes that were made to the framework following the validation process (see 6.5.3 - 6.5.12). The final integrated employee well-being framework is presented in Chapter 7 (see 7.2.4.1; Annexure T).

6.2 DEFINITION AND AIM OF AN EFFECTIVE FRAMEWORK

A framework can be defined as a basic structure underlying a concept, system or text (see 1.5.3). As such, a framework is a structure that provides for the functions of, or the solution to particular problem areas in the concept or system. Thus, for purposes of this study, the integrated employee well-being framework that was developed for SA public HEIs is a structure underlying the concept of “well-being”, with the aim of making a contribution to the enhanced well-being of employees of SA public HEIs, by providing guidelines to these institutions on the factors influencing their employees’ well-being, and on the components and sub-components of their well-being to be addressed (see 1.5.3).

Spencer, Schooley, Anderson, Kochtitzky, DeGroff, Devlin and Mercer (2013) designed a framework for purposes of adding value to evidence-based practices. Their framework consists of five elements: reach, effectiveness, sustainability, feasibility and transferability (Spencer *et al.* 2013). The value of their framework lies in its success to offer a common understanding of, and processes for strengthening the evidence for public health practice (Spencer *et al.* 2013). I used the five elements of their framework as a guiding tool in planning and designing the integrated well-being programme for SA public HEIs. It assisted me to constantly keep in mind the reach, feasibility, effectiveness, sustainability and transferability of the framework I developed for SA public HEIs - although transferability outside the SA public HEI context was not the main aim of this study (see 4.6.2).

The integrated employee well-being framework that I designed for SA public HEIs emphasises the importance of following an integrated approach towards employee well-being. It is, however, not a fixed, rigid or prescriptive structure, but a flexible structure, with the aim of guiding SA public HEIs towards addressing their employees’

well-being more effectively and holistically. As such, its aim is not to replace the well-being programmes offered by these institutions, as it is not a well-being programme in itself, but a guiding framework to assist SA public HEIs to address their employees' well-being holistically, in an integrated manner, and more effectively.

In the next section, each of the components of the designed framework will be discussed.

6.3 DISCUSSION AND MOTIVATION FOR COMPONENTS OF THE PROPOSED INTEGRATED EMPLOYEE WELL-BEING FRAMEWORK FOR SOUTH AFRICAN PUBLIC HIGHER EDUCATION INSTITUTIONS

As indicated at the onset of this report in Chapter 1, there is evidence that human well-being is multi-faceted, consisting of various important dimensions or building blocks, namely physical, emotional, psychological, social, spiritual, financial, environmental, intellectual and occupational well-being (see 2.4.1 - 2.4.9). It was further elucidated that, for a person to flourish in life, his/her well-being has to be addressed holistically, and in an integrated manner. Traditionally, health and well-being in the workplace were focused on supporting employees who had become unwell. However, employers since have recognised the value of their employees – also in terms of accomplishing business goals – and have shifted their focus to a more holistic approach to employees' well-being, applying preventative measures to promote their employees' health and well-being. However, as revealed by the empirical research conducted amongst SA public HEIs, more can be done to enhance all the dimensions of employees' well-being in an integrated manner. Hence, the need had emerged for an integrated framework which could assist SA public HEIs to make a positive contribution to their employees' well-being. This was further supported by the research findings and results, as discussed extensively in Chapter 5.

Thus, the integrated employee well-being framework that I designed for SA public HEIs was compiled based on the strengths and shortcomings of current employee well-being programmes and practices that emerged from the literature, and the process of document analysis that was conducted; the results from the empirical study; inputs from the validation panel members, and relevant well-being theories. Each

component of the integrated employee well-being framework is discussed and motivated in the ensuing sub-sections. The proposed well-being framework for SA public HEIs consists of seven interrelated and interdependent components, as illustrated in Figure 6.4 below:



Figure 6.4 Components of the integrated employee well-being framework designed for SA public HEIs

The detailed integrated employee well-being framework (see Annexure T) indicates all the elements and sub-components of each of the seven mentioned components. Furthermore, the framework provides some notes on its interpretation; the well-being theories that guided its development; and the supporting environment that is required

to render the implementation of the integrated employee well-being framework effective.

The motivation and basis for inclusion of each of the above-mentioned components (see Figure 6.4) in the integrated employee framework are discussed in sections 6.3.1 to 6.3.7 below.

6.3.1 Basis for inclusion of Component 1: Defining the concept of well-being

It became evident from the literature study and document analysis conducted that the concept of well-being has moved away from the original focus on happiness, to a focus that includes both positive feelings and positive functioning at various levels (see 2.2.1 - 2.2.5). Well-being is now regarded as a multi-faceted concept encouraging those factors that enable people and societies to flourish (see 1.5.1; 2.2.5).

Participants' responses obtained from the multiple case study conducted amongst SA public HEIs indicated that they had different ideas about what well-being entails (see 5.4.1; 5.4.1.1). It became clear that SA public HEIs held no unified view of the concept of employee well-being (see Table 5.13; 5.4.1.1). A unified approach to the concept of employee well-being would enable these institutions to focus on the same principles of employee well-being, and to address their well-being holistically and effectively, as emphasised in the literature (see 2.4.1 - 2.4.9; 3.1.2). Thus, defining well-being was included as a component in the integrated employee well-being framework that I designed for SA public HEIs.

6.3.2 Basis for inclusion of Component 2: Dimensions (building blocks) of well-being

Amongst others, this study aimed to identify the important dimensions, or building blocks, of human well-being, including their well-being at work (see 2.4). It became evident from the literature review and document analysis, the participants' views (from the second round of data collection), and comments provided by validation pilot

members that employees' well-being should be addressed holistically, and in an integrated manner, for it to be improved effectively.

Nine dimensions (building blocks) for employee well-being emerged, as illustrated in Figure 6.5 below.

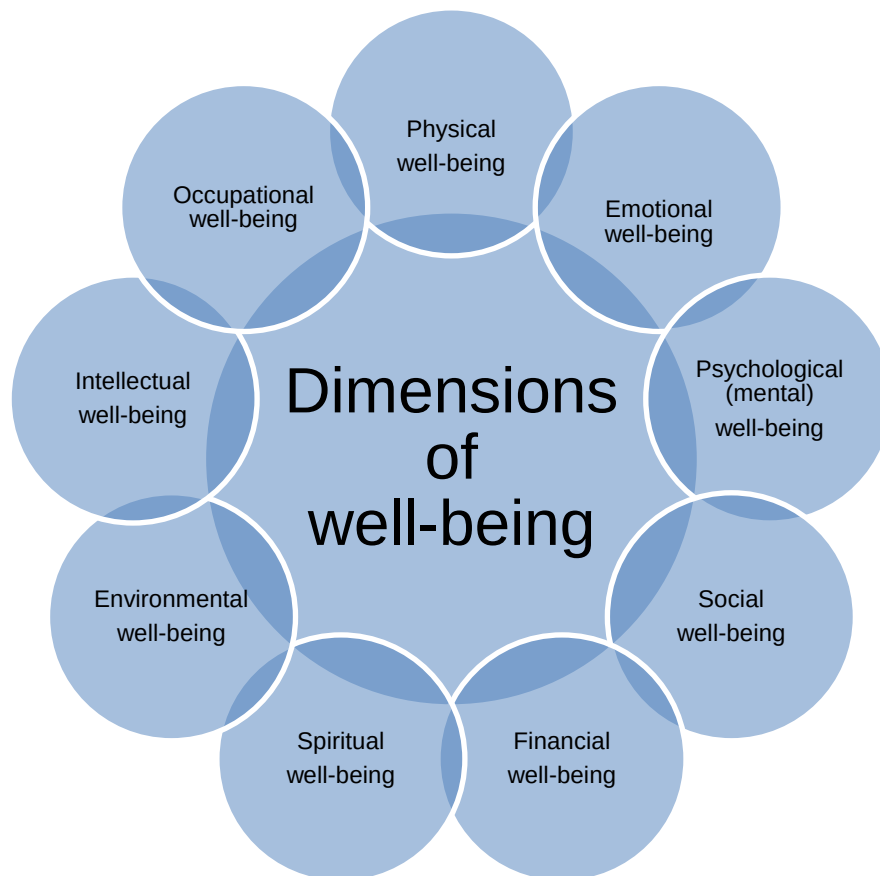


Figure 6.5 Dimensions (building blocks) of well-being (see 2.4.1 - 2.4.9)

The basis for the inclusion of each of these building blocks are discussed in sections 6.3.2.1 to 6.2.3.9 below.

6.3.2.1 Basis for inclusion of Component 2(A): Physical well-being

One of the components of well-being that constantly emerged from both the literature review, the document analysis, and the multiple case study amongst SA public HEIs, is physical well-being, which entails a person's health (see 2.4.1).

It became evident that for a person to experience optimal well-being, his/her physical well-being needs to be prioritised, paying attention to lifestyle factors such as healthy eating habits, exercise, eliminating stress, limiting alcohol usage and smoking, combating high blood pressure, diabetes and cholesterol, to name but a few (see 2.4.1). It was also clear from the literature and text reviews that a person's physical well-being affects their emotional, psychological (mental) and financial well-being, as well as their work outputs (see 2.4; 2.4.2; 2.4.3; 2.4.5; 3.1.1). These literature findings were also confirmed by the findings that emerged from the empirical study conducted (see Chapter 5).

It is, however, important to realise that the dimension of physical well-being is complexly interwoven with the other eight dimensions of well-being, which are interdependent (see 3.4). Physical well-being, therefore, is regarded as a vital component of employees' well-being.

6.3.2.2 *Basis for inclusion of Component 2(B): Emotional well-being*

As reported in Chapter 2, emotional well-being can be defined as having a positive sense of well-being that enables an individual to function in society, whilst meeting the demands of everyday life (see 2.4.2). The component of emotional well-being is included in the well-being framework for SA public HEIs, as emotional well-being also influences one's physical, psychological and social well-being (see 2.4.2). It is thus a vital component of well-being, and it is linked to our emotional awareness, and aspects such as having a positive outlook on life, self-acceptance, and taking responsibility for our lives, to name but a few (see 2.4.2).

It was also clear from the literature and responses obtained from participants in the empirical study that employees' emotional well-being has an influence on their work outputs, absenteeism rates, and the level of engagement in their work (see 3.1.1; 3.3).

6.3.2.3 *Basis for inclusion of Component 2(C): Psychological/mental well-being*

When an individual experiences optimal psychological (mental) well-being, he/she is able to cope better with life's circumstances; aware of their own limitations and abilities; and more productive at work (see 2.4.3). Psychological well-being is thus an umbrella term for our emotional, social and mental well-being (see 2.4.3).

It became evident from the baseline pilot study, the literature study, text reviews conducted, and the responses of the participants in the multiple case study that psychological well-being is a critical dimension of the well-being of employees (see 2.4.3; 5.4.3; 5.4.3.1). If an employee is not mentally well, he/she is unable to perform the daily duties effectively (see 2.4.3), or to make a positive contribution to his/her community. This will hamper productivity and engagement levels (see 2.4.3; 3.2.7), and will have a detrimental effect on both the employee and the organisation (see 3.3).

Psychological (mental) well-being is thus regarded as a critical dimension of employee well-being.

6.3.2.4 *Basis for inclusion of Component 2(D): Social well-being*

As reported in Chapter 2 (see 2.4.4), social well-being can be described as the extent to which one feels a sense of belonging and social inclusion. Our values, lifestyles, ways of living together, traditions and beliefs are all important to our social well-being and quality of life (see 2.4.4). Since we spend most of our time at work, social well-being has a profound effect on our overall well-being.

It became clear from the baseline pilot study, the literature study, text reviews and the responses of the participants in the multiple case study conducted amongst SA public HEIs that social well-being is a critical dimension of the well-being of employees (see 2.4.4; 5.4.3; 5.4.3.1). For instance, if an employee is not able to develop, build and maintain positive personal relations/social ties, or to have meaningful engagements with others in the workplace, he/she is unable to perform the daily duties effectively (see 2.4.4). This might have a detrimental effect on the employees' self-esteem and

overall emotional well-being (see 2.4.2; 2.4.4) which, in turn, would negatively impact on the organisation (see 3.3).

Employees of SA public HEIs need to be part of a caring work community, and they need to build positive relations at work, which in turn will cause them to have a sense of belonging, amongst others (see 2.3.8.3). Feeling part of a work “family” is important for our social well-being (see 2.3.8.3; 2.4.4).

Social well-being, therefore, is regarded as a vital dimension of employees’ well-being.

6.3.2.5 *Basis for inclusion of Component 2(E): Financial well-being*

As reported in Chapter 2 (see 2.4.6), financial stress has a profound effect on employees’ physical and emotional life, which in turn leads to increased healthcare costs, reduced productivity, and even more financial stress. Money is an important source of empowerment, and it has the potential to maximise our physical and emotional health by reducing financial stress (see 2.4.6).

The results obtained from the baseline pilot study, the literature study, text reviews and the responses of the participants in the multiple case study indicated that financial well-being is a critical dimension of the well-being of employees (see 2.4.6; 5.4.3; 5.4.3.1). For instance, if an employee is not able to manage his/her finances effectively, or ends up in much debt, he/she will focus on the stress caused by his/her financial situation (see 2.4.6). This might have a detrimental effect on the employees’ physical, emotional, psychological and occupational well-being (see 2.4.1 - 2.4.3; 2.4.9), which then might impact negatively on the organisation (see 3.3).

Employees of SA public HEIs should be made aware of the benefits of, amongst others, living within one’s means; proper budgeting; saving; investments; debt control and retirement planning (see 2.4.6). This will empower them, as they will feel in control of their finances, which will have a positive effect on their health and their levels of productivity and engagement at work (see 2.4.6; 3.3). Based on the research results

and its importance in the literature, it is evident that financial well-being is an important dimension of employees' well-being.

6.3.2.6 *Basis for inclusion of Component 2(F): Spiritual well-being*

As reported in Chapter 2, spirituality is defined as the manner in which people understand their lives in relation to its ultimate meaning and value (see 2.4.5). This may include religious, cultural and philosophical beliefs (see 2.4.5). Spirituality also leads us to ask questions related to our existence, such as who we are, and what the meaning and purpose of our lives are (see 2.4.5). This links with the perceptions of researchers such as Maslow (1943) (see 2.3.1), Csikszentmihalyi (2014) (see 2.3.3) and Seligman (2011) (see 2.3.8.3), who emphasised a meaningful life as a prerequisite for human well-being.

In recent years, researchers have extensively studied the effect of spirituality and religion on people's psychological adaptation and mental health (see 2.4.5). Their research has proved that religious and spiritual beliefs have a significantly positive relation with a decrease in mental health indicators such as depression and anxiety. Furthermore, it leads to increased self-control, self-esteem and tolerance (see 2.4.5).

It became evident from the findings of the baseline pilot study, the literature study, text reviews and the responses of the participants in the multiple case study that spiritual well-being is a critical dimension in the well-being of employees (see 2.4.5; 5.4.3; 5.4.3.1). Spiritual connectedness has also been proved as an effective coping strategy in various contexts (see 2.4.5). Furthermore, the effect of religion, spirituality and spiritual leadership on psychological adaptation, mental health and well-being at work has been emphasised (see 2.4.5; 3.3).

Since employees of SA public HEIs also have to discover who they are, and what their purpose in life is, and especially since their mental health is linked to their spiritual well-being (see 2.4.3; 2.4.4), it is regarded as a vital component for inclusion in the integrated employee well-being framework for SA public HEIs.

6.3.2.7 *Basis for inclusion of Component 2(G): Environmental well-being*

As reported in Chapter 2 (see 2.4.7), it became obvious from the literature studied that our personal environment impacts on our well-being. Our personal environment includes our physical environment (e.g. the street we live in, building we work in); our social environment (the space we share with others, e.g. a home or office space); and the natural environment (e.g. the water we drink, air we breathe, and earth we inhabit) (see 2.4.7). Thus, we gain personal fulfilment from our surroundings and are able to flourish in surroundings that are pleasing and healthy (see 2.4.7; 3.1.1; 33).

The literature studied put it beyond doubt that a healthy and pleasing work environment not only improves our mood, but positively affects our immune system and physical health (see 2.4.1; 2.4.7), which contributes to our overall well-being.

6.3.2.8 *Basis for inclusion of Component 2(H): Intellectual well-being*

In Chapter 2 I discussed the effect of intellectual well-being on our ability to actively participate in scholastic, cultural and community activities, as well as in creative and mentally stimulating activities (see 2.4.8). It is vital for us to gain and maintain intellectual well-being, as it allows us to live successful and stimulating lives (see 2.4.8; 3.1.1). Intellectual activities expand our knowledge and skills, and allow us to share these with others. It involves keeping our minds flexible, informed and engaged, and is as important to our overall well-being as our physical health (see 2.4.8).

The literature review clearly indicated that our intellectual well-being is improved through creativity, curiosity and lifelong learning (see 2.4.8). Amongst others, we can improve our intellectual well-being through reading widely on various subject fields; practising mindfulness by focusing on the present; stepping out of our normal routine; and improving our studying and working skills by learning more about how our brain processes information (see 2.4.8). This is in accordance with the concept of creating *flow*, or becoming engaged in an activity that totally absorbs us (Seligman & Csikszentmihalyi 2000) (see 2.3.3). Whilst stress and depression may hinder the growth of new neurons in our brains, both physical and mental exercise support the growth thereof (see 2.4.1; 2.4.3; 2.4.8). Thus, combining intellectual growth and

relaxing mindfulness can boost the health of our brains, and prevent mental decline as we age (see 2.4.8).

Based on these arguments, and the responses from participants in the empirical study, intellectual well-being is indicated as an essential component of the well-being of employees of SA public HEIs, in the light of the benefits it provides in terms of establishing overall well-being.

6.3.2.9 *Basis for inclusion of Component 2(I): Occupational well-being*

As reported in Chapter 2, occupational well-being involves using our skills, gifts and talents to enrich our lives, gain purpose, and be happy (see 2.4.9). We use our skills, gifts and talents to perform work that is both rewarding and meaningful to us. Thus, our occupational satisfaction is linked to our attitudes about our work (see 2.4.9). We display a positive attitude when we are satisfied in our work environment. When we enjoy our work, and we are also more engaged (see 2.4.9; 3.2.7). Finally, when we enjoy our work, we experience a greater sense of meaning and purpose (see 2.3.8.3; 3.1.1; 3.2.7).

Occupational well-being emerged as a vital component of employee well-being in the literature review, the document analysis conducted, as well as from the empirical study. It is therefore regarded as a vital component of the well-being of employees of SA public HEIs, based on all the benefits it provides in terms of establishing overall well-being, and it is therefore included in the integrated employee well-being framework for SA public HEIs.

6.3.3 Basis for inclusion of Component 3: SA public HEIs should develop clear employee well-being policies and procedures to guide their well-being programmes and facilitate their well-being efforts

There is sufficient evidence that workplace policies strongly influence the well-being of employees (see 3.2.19). Organisations should therefore formulate and implement policies and procedures that support the well-being of employees. The purpose of any

policy guiding the well-being of employees is to provide a framework within which the organisation will facilitate and encourage services and practices that support employee health and well-being. Such policies should also minimise the detrimental effect of work-related stress on employees and their work, and ensure that employees receive sufficient support in the workplace (see 3.2.19).

Having clear policies and procedures in place to guide and facilitate well-being activities also emerged as an important component related to employees' well-being from the empirical research conducted. It is therefore regarded as a vital component of the well-being of employees of SA public HEIs, and as such was included in the integrated employee well-being framework for SA public HEIs.

6.3.4 Basis for inclusion of Component 4: SA public HEIs each should have a clear employee well-being strategy

It became evident from the literature and the document analysis conducted that employers are beginning to realise the value of building healthy and resilient workforces. They are turning to well-being strategies to build healthy, robust workforces (see 3.2.19). Employee well-being strategies therefore provide information, programmes and support in the workplace that encourage the practice of healthy habits both at work and at home (see 3.4.6).

The importance of having a well-being strategy to guide well-being programmes, also emerged from the empirical study. Thus, clear employee well-being strategies are required within organisations to guide their employee well-being programmes, and it was therefore regarded as important for the well-being of employees of SA public HEIs, and included in the integrated employee well-being framework.

6.3.5. Basis for inclusion of Component 5: SA public HEIs should develop effective well-being programmes addressing all the dimensions of their employees' well-being in an integrated manner

It is evident from the literature that effective work-life balance programmes need to be implemented in workplaces, and that such programmes should target the specific

well-being needs and risks of employees (see 3.1.1). Workplaces therefore should establish programmes that support employees' health and well-being (see 3.2.24; 3.4.17). They also need to regularly monitor the effectiveness of, and align their well-being programmes with best practice worldwide, based on the needs of their employees and the specific context of the organisation (see 3.2.17).

Having effective well-being programmes in place also emerged as important from the empirical research conducted. It is therefore regarded as a vital component that impact on the well-being of employees of SA public HEIs, and as such it is included in the integrated employee well-being framework for SA public HEIs.

6.3.6. Basis for inclusion of Component 6: Organisational culture, climate and values should create and enabling environment for employees of SA public HEIs to flourish

Organisational values should form the basis for the behaviour of its members. Both personal and organisational values and ethics are important in the workplace, as they endorse personal and interpersonal behaviours, uphold fundamental responsibilities and accountabilities; and contribute to the continuous improvement and enhancement of the workplace (see 3.2.23). Appreciative Inquiry Theory determines that organisations have positive strengths that should be built upon to bring about positive change within these organisations (see 2.3.7.1).

The establishment of a positive institutional/organisational culture, climate and organisational values therefore are regarded as important factors impacting on employees' well-being. As such, it is included in the integrated employee well-being framework for SA public HEIs.

6.3.7 Basis for inclusion of Component 7: Role-players in the well-being of employees of SA public HEIs

There are numerous role-players worldwide in our well-being. These include, but are not limited to, governments, health institutes, business and industry, the private sector, universities, schools, society and communities (see 3.4.19). It is clear from the

literature study, documents reviewed and the outcome of the empirical study conducted that closer collaboration is required among these role-players to ensure adherence to applicable health and well-being policies, and to enhance the well-being of employees across the world (see 3.4; 3.4.19).

Organisations need to understand the value of their employees, and should protect and improve their health and well-being, as these factors are critical to optimising the results and strategic outcomes of organisations, and also impact on the well-being of employees (see 3.2). This requires a constant commitment from all employees across the entire organisation (see 3.2; 3.4.19 - 3.4.20). The component of supportive role-players in employees' well-being therefore is regarded as important, and is included in the integrated employee well-being framework for SA public HEIs.

I combined all the components discussed under 6.3.1 to 6.3.7 above into the authentic, integrated employee well-being framework that I designed for SA public HEIs, the first draft of which is presented in section 6.4 below.

6.4 INITIAL INTEGRATED EMPLOYEE WELL-BEING FRAMEWORK DESIGNED FOR SOUTH AFRICAN PUBLIC HIGHER EDUCATION INSTITUTIONS

Based on the outcome of the literature review (see 4.4.3.4.1; 4.4.3.4.3); the document analysis conducted (see 4.4.3.4.4); a synthesis of the relevant well-being theories and elements that I harvested from those theories (see 2.3.9); the pilot study conducted (see 4.4.3.4.2; 5.2; 5.3.1-5.3.6); the empirical research and data collected from this process (see 5.4; 5.4.1-5.4.14), I designed an integrated employee well-being framework for SA public HEIs, aimed at providing them with guidelines on the dimensions and factors impacting on employees' well-being, and what they could do to enhance their employees' well-being (see Annexure T). The integrated employee well-being framework for SA public HEIs may assist them with regard to the following:

- i. becoming more aware of the importance of employees' well-being, and its benefits for both for employees and the organisation;

- ii. bringing about holistic employee well-being by streamlining the well-being efforts to address all the dimensions of employees' well-being (i.e. their emotional, physical, social, psychological, financial, environmental, spiritual, intellectual and occupational well-being), in an integrated manner;
- iii. improving employees' health and overall well-being, and enabling them to flourish, through a holistic, preventative approach to their well-being;
- iv. improving the business outputs/outcomes of SA public HEIs as a result of their employees' enhanced well-being;
- v. improving the productivity of employees;
- vi. having a positive impact on absenteeism rates;
- vii. having a positive impact on employees' engagement levels;
- viii. reducing employee turnover;
- ix. considering financially sustainable ways of improving their employees' well-being, especially in view of the challenges facing SA public HEIs in terms of demands for free education from students, high costs of outsourced wellness services, etc.; and
- x. providing guidelines to SA public HEIs for monitoring and evaluating the effectiveness of their well-being approaches on a continuous basis.

The following important notes with regard to the framework were compiled, which formed part of the documentation provided to validation panel members (see Annexures M2 and N):

- (i) *“The components and sub-components of this integrated employee well-being framework developed for SA public HEIs were identified based on (i) the results obtained from the preliminary literature review performed, (ii) the baseline pilot study conducted amongst SA public HEIs; (iii) the extended literature review performed; (iv) document analysis of various well-being programmes (including well-being models, frameworks, strategies, etc.) applied globally, and based on a review of the current well-being programmes of SA public HEIs availed to me by the participants as part of the empirical research; (v) the results flowing from the empirical research conducted amongst 11 SA public HEIs; and (vi) the principles of positive psychology theory, well-being theory and flourishing*

theory, as well as other well-being theories such as appreciative inquiry, authentic happiness theory and hope theory, from which I synthesised an integrated well-being theory. My synthesis of integrated well-being theory entails that optimal human flourishing requires living a well-balanced life, and addressing one's well-being at physical, emotional, social, psychological, financial, spiritual, environmental, intellectual and occupational levels, and in an integrated manner, as applied in and advocated by this integrated well-being framework for SA public HEIs.

- (ii) This integrated well-being framework for SA public HEIs serves as a guideline for SA public HEIs, to assist them to address their employees' well-being holistically by means of an integrated approach. Furthermore, it presents SA public HEIs with seven components, and various sub-components, impacting on employees' well-being, as identified from this research.*
- (iii) This framework serves to encourage SA public HEIs to create an enabling environment within which their employees can flourish, and to do everything in their power to effectively manage their well-being processes within their well-being programmes, to the benefit of employees, SA public HEIs, and society at large.*
- (iv) This framework does not aim to serve as, or replace the actual well-being programmes of SA public HEIs, but will assist them to understand the multiple dimensions/facets of well-being and the interaction among these, in order to address their employees' well-being in a more holistic, integrated and effective manner.*
- (v) Since this is an integrated employee well-being framework, there are areas of overlapping between the different components and sub-components of well-being, e.g. the dimensions/building blocks of well-being (see components 2 A to 2 I).*
- (vi) SA public HEIs need to ensure that their efforts to improve their employees' well-being are integrated. Compartmentalising the different components and sub-components of well-being should be avoided - always keeping in mind that they are not disconnected, but interconnected. For example, negative thoughts and emotions can cause diseases in the body, and such illnesses could also influence employees' well-being at, amongst others, emotional and*

psychological level, causing stress and affecting their emotional and psychological stability.

- (vii) SA public HEIs should keep in mind that well-being is not an initiative, or a programme, but a process. It is all about creating a positive institutional culture and an enabling environment and institutional culture within which employees are able to thrive. Hence, SA public HEIs could use this framework to guide the management of their well-being processes.*
- (viii) The ethics and values of each SA public HEI should form the core of their own well-being processes and programmes.*
- (ix) SA public HEIs' well-being programmes should be aligned with their vision and mission statements, their values and strategic plans, and should be based on the unique needs of their employees in terms of their well-being.*
- (x) Government and society, SA public HEIs and their employees all have a responsibility in terms of optimising employees' well-being, including their collective and relational well-being. SA public HEIs should be aware of their unique role and responsibility in this regard. Amongst others, they should have ongoing conversations with their employees regarding their well-being, and how it can be addressed more effectively.*
- (xi) SA public HEIs' each should develop a policy on employee well-being, as well as a well-being strategy to facilitate and guide the implementation of their well-being programmes/processes. Furthermore, all institutional policies should support SA public HEIs' well-being strategies and programmes".*

The draft framework that I compiled (prior to validation by a pilot survey panel and a broader validation panel), is presented in Table 6.1 below. Cross references to the different sections of this thesis where these components and sub-components were discussed and motivated as factors impacting on employees' well-being, are also provided.

Table 6.1 Initial integrated employee well-being framework designed for SA public HEIs

INITIAL INTEGRATED EMPLOYEE WELL-BEING FRAMEWORK FOR SOUTH AFRICAN PUBLIC HIGHER EDUCATION INSTITUTIONS	
(Draft version prior to amendments proposed by pilot validation survey and validation survey)	
COMPONENT 1: DEFINING THE CONCEPT OF WELL-BEING (see 1.5.1; 2.2; 2.2.1 – 2.2.5; 6.3.1)	
A	What the concept of well-being entails:
A1	Well-being includes being happy, but is about more than happiness (see 2.2.4)
A2	Well-being is multi-faceted, and consists of various dimensions/"building blocks", (e.g. physical, emotional, psychological (mental), social, spiritual, financial, environmental, intellectual and occupational well-being). (See section 2 of this framework for more details)(see 2.4.1 - 2.4.9; 6.3.1).
A3	The different dimensions of well-being (mentioned in A2 above) are interlinked, and should therefore be addressed in an integrated manner, and not in silos (see 2.4).
A4	Well-being entails positive feelings and positive functioning such as:
A4.1	Emotional stability (see 2.4.2).
A4.2	Engagement (see 3.2.7).
A4.3	Living a meaningful life (see 2.4.5; 3.4.5).
A4.4	Living a balanced life (see 3.2.15).
A4.5	Being optimistic (see 2.3.7.2).
A4.6	Having positive emotions (see 2.2; 3.4.5).
A4.7	Having positive relationships (see 3.4.5).
A4.8	Having resilience (the ability to "bounce back")(see 2.4.5)
A4.9	Having positive self-esteem (see 2.4.3).
A4.10	Having vitality (see 2.4.1)
A4.11	Having hope for the future (see 2.4.5).
A4.12	Being satisfied with your life (including work)(see 2.2; 2.4.2)
A4.13	Flourishing (living optimally; thriving)(see 2.2; 2.2.4)
COMPONENT 2: DIMENSIONS/BUILDING BLOCKS OF WELL-BEING	
2 A: Physical well-being (see 2.4.1; 6.3.2.1)	
2 A1	Following a healthy diet (see 2.4.1)
2 A2	Proper hydration (drinking enough water per day)(see 2.4.1)
2 A3	Exercising/being active (including movement at work; option of stand-up desks, etc.)(see 2.4.1; 2.4.7; 2.4.9)
2 A4	Maintaining a healthy body weight (BMI)(see 2.4.1)
2 A5	Exposure to sunlight (see 2.4.1)
2 A6	Making time to relax (see 2.4.1; 3.4.4; 3.4.7)
2 A7	Getting sufficient sleep (see 2.4.1)
2 A8	Make time for meditation / living mindfully (see 2.3.5; 2.4.5)
2 A9	Avoiding harmful habits such as smoking, drinking too much alcohol, using drugs, etc. (see 2.4.1)
2 A10	Being safe and secure (see 2.4.1)
2 A11	Having a good posture (see 2.4.1)
2 A12	Experiencing optimal health (see 2.2; 2.2.1; 2.2.2; 2.4)
2 A13	Having vitality/having sufficient energy (see 2.4)
2 A14	Managing stress successfully (see 2.4.1; 2.4.2)
2 A15	Having regular medical check-ups (see 2.4.1)
2 B: Emotional well-being (see 2.4.2; 6.3.2.2)	

2 B1	Positive outlook on life (see 2.3.7.2; 2.3.8.2)
2 B2	Emotional awareness (understanding the value of one's emotions and using them to move forward in life; being aware of the state of your overall well-being)(see 2.4; 2.4.2)
2 B3	Emotional stability (see 2.4.2)
2 B4	Emotional energy (see 2.4.2)
2 B5	Taking positive action/responsibility for your own emotions/lives (see 2.4.2)
2 B6	Self-acceptance (having a positive self-concept)(see 2.4.2)
2 B7	Having a good self-esteem (see 2.4.2)
2 B8	Assertiveness (see 2.4.2 - 2.4.3)
2 B9	Being Happiness/joyful (see 2.4.2)
2 B10	Experiencing peace (see 2.4.2; 2.4.5)
2 B11	Being mindful/mindfulness (see 2.4.5)
2 B12	Being fulfilled (see 1.5.1; 2.2.4)
2 B13	Resilience/ability to cope with difficult life circumstances & traumatic events (see 2.4.2; 2.4.5)
2 B14	Focusing your energy on important personal priorities (see 2.4.2)
2 B15	Ability to adapt to change & make essential changes to grow & live a fulfilled life (see 2.4.2; 2.4.3; 2.4.5)
2 B16	Coping with stress (see 2.4.1; 2.4.2; 3.2.2)
2 B17	Ability to solve problems (see 2.4.2; 3.2.11)
2 B18	Interpersonal skills (see 2.4.2)
2 B19	Intrapersonal coping skills (see 2.4.2; 2.3.8.3)
2 B20	Good decision-making skills (see 2.4.2)
2 B21	Experiencing high morale (see 2.4.2; 3.2.9)
2 C: Psychological well-being (see 2.4.3; 6.3.2.3)	
2 C1	Having autonomy (see 2.4.3)
2 C2	Environmental mastery (see 2.4.3)
2 C3	Personal growth (see 2.4.3)
2 C4	Positive relations with others (see 2.3.8.2; 2.4.3; 3.2.16; 3.4.5)
2 C5	Becoming aware of/finding your purpose in life (see 3.4.5)
2 C6	Self-acceptance (see 2.4.3)
2 C7	Self-efficacy (see 2.4.3)
2 C8	Emotional stability (see 2.4.3)
2 C9	Conflict management (see 2.4.3; 3.2.16; 3.2.22)
2 C10	Knowledge of own abilities (see 2.4.3)
2 C11	Ability to cope with stressful situations (see 2.4.3; 3.2.2)
2 C12	Ability to be productive and fruitful at work (see 2.4.3; 2.4.9)
2 C13	Ability to function effectively within & contributing positively to one's community; feeling connected to one's community and surroundings (see 3.2.16; 3.4.5)
2 C14	Making the most of opportunities (see 2.4.3)
2 C15	Having control and freedom over one's life (see 2.3.6; 2.4.3)
2 C16	Mind-body integration (see 2.4.3)
2 C17	Emotional vitality (see 2.4.2; 2.4.3)
2 C18	Resilience/ability to cope with difficult life circumstances & traumatic events (see 2.4.5; 2.3.8.2; 2.3.8.3)
2 C19	Having high self-esteem (see 2.3.5; 2.3.6; 2.4.3)
2 C20	Being optimistic (see 2.4.2; 2.4.3; 3.2.9)
2 C21	Feeling valued & appreciated (see 3.2.10)
2 C22	Displaying emotional intelligence (see 2.4.2; 2.4.3)
2 C23	Having positive thoughts & emotions (see 2.2.3 – 2.2.4; 3.4.5)

2 C24	Having high morale (see 2.2.3 – 2.2.4; 3.2.9)
2 D: Social well-being (see 2.4.4; 6.3.2.4)	
2 D1	Ability to develop, build and maintain positive personal relations/social ties (social inclusion) & realising the importance thereof (see 2.4.4; 3.2.16;
2 D2	Having a sense of belonging (see 2.4.4)
2 D3	Having regular contact with other people who believe in us, support us & care for us (e.g. family, friends & colleagues)(see 2.4.4; 3.4.5)
2 D4	Developing interpersonal skills (see 2.4.4)
2 D5	Ability to manage conflict successfully (see 3.2.22)
2 D6	Using one's skills & abilities to function optimally in life (see 2.2; 2.2.4; 2.4.4)
2 D7	Developing a value system, beliefs and traditions that are important to you (see 3.2.23; 2.4.4)
2 D8	Meaningful engagement with others (see 2.4.4; 3.4.5)
2 D9	Living a meaningful life (see 2.4.5; 3.4.5)
2 D10	Embracing your cultural identity & respecting the cultural identity of others (see 2.4.4; 3.2.23)
2 D11	Improving the workplace culture (see 3.1.1; 3.2.23)
2 D12	Helping others/receiving help from others (see 2.4.4; 2.4.5)
2 E: Financial well-being (see 2.4.6; 6.3.2.5))	
2 E1	Living within your financial means (see 2.4.6; 2.4.9)
2 E2	Living according to a budget – no overspending (see 2.4.6; 3.2.24)
2 E3	Managing debt effectively (see 2.4.6)
2 E4	Going for debt counselling if you have ended up in debt/struggle to make payments (see 2.4.6)
2 E5	Saving on a monthly basis (see 2.4.5)
2 E6	Making wise financial investments (see 2.4.5)
2 E7	Putting sufficient retirement planning in place (see 2.4.5)
2 E8	Experiencing financial security (see 2.4.5)
2 E9	Being financially literate (see 2.4.5)
2 F: Spiritual well-being (see 2.4.5; 6.3.2.6)	
2 F1	Discovering who you are (see 2.4.5)
2 F2	Discovering the meaning, value and purpose of your life (see 2.3.1; 2.3.6; 2.4.5)
2 F3	A sense of peace and contentment stemming from a person's capacity to live with purpose/to fulfil their purpose (see 2.4.5; 3.4.5)
2 F4	Living for a cause/belonging to and serving something you believe to be bigger than yourself (see 2.4.5)
2 F5	Helping others (see 2.4.5)
2 F6	Making provision for quiet time in hour daily life/routine for purposes of self-reflection (see 2.4.5)
2 F7	Living a meaningful life / living for a greater cause (see 2.4.5; 3.2; 3.4.5; 6.3.2.6)
2 F8	Search for the sacred/having a relationship with/belonging to/ having faith in an exalted power you believe to be bigger than yourself (see 2.4.5)
2 F9	Assist people to deal with life stressors (e.g. divorce, illness; natural disasters; mental illness, etc.)(see 2.4.5)
2 F10	Regarding work as a calling (see 2.4.5)
2 F11	Positive effect on mortality and depression rates (see 2.4.5)
2 F12	Positive effect on our happiness and life satisfaction levels (see 2.2; 2.2.4; 2.3.1; 2.4.5)
2 F13	Forgiving others that have hurt you, or someone you love, or care about (see 2.4.5)
2 F14	Having a sense of hope (see 2.4.5; 2.3.4)

2 F15	Acts as a buffer against depression, demoralisation, despair/hopelessness, anxiety and suicide (see 2.4.2 – 2.4.3; 2.4.5)
2 F16	Meditation/spiritual purification (see 2.4.5)
2 F17	Personal values/beliefs/integrity (see 2.4.5; 3.2.23)
2 G: Environmental well-being (see 2.4.7; 6.3.2.7)	
2 G1	Positive work environment required to positively impact on our performance, behaviour and motivation to act (see 2.4.7; 2.4.9; 6.3.2.7)
2 G2	Positive work environment reduces our stress levels (see 2.4.7; 3.1.1; 3.2.2)
2 G3	Our direct environment facilitates or discourages interactions with colleagues, family and others (see 2.4.7)
2 G4	Pleasant and healthy surroundings contributes to personal fulfilment (see 2.4.7)
2 G5	A pleasant and healthy work environment improves our mood (see 2.4.7; 3.2.9)
2 G6	A pleasant and healthy work environment positively affects our immune system and physical health, including having a positive effect on depression and anxiety levels (see 2.4.1 – 2.4.3; 2.4.7)
2 G7	Living and working in a safe environment (see 2.3.1; 3.2.1; 2.4.7)
2 G8	Stimulating work environment (see 2.4.7; 2.4.9)
2 G9	Physical factors: air quality, clean water, proper ventilation, etc. impact on our well-being (see 2.4.7)
2 G10	Social factors: relations at work; discrimination free work environment; fear-free environment (see 2.4.7; 3.1.1; 3.2.12; 3.2.16)
2 G11	Ergonomics (designing/arranging workspaces, products & systems to fit the people using them, ensuring sufficient space, lighting, ventilation, support, etc.)(see 2.4.7)
2 G12	External environmental influences (e.g. family, society, politics, war, the economy, etc.) impact on our well-being (see 2.3.8.3 – 3.2.8.3; 2.4.6; 3.4.5)
2 G13	Noise levels impact on our well-being (see 2.4.7)
2 H: Intellectual well-being (see 2.4.8; 6.3.2.8)	
2 H1	Entails participation in scholastic, cultural and community activities (see 2.4.8)
2 H2	Valuing creativity, curiosity and lifelong learning (see 2.3.1; 2.4.8)
2 H3	Enables one to live a successful and stimulating life (see 2.4.3; 3.4.5)
2 H4	Expands our knowledge and skills (see 2.4.8)
2 H5	Sharing our knowledge and skills with others (see 2.4.8)
2 H6	Keeps our minds flexible, informed and engaged (see 2.3.5; 2.4.2; 2.4.3; 2.4.8).
2 H7	Intellectual well-being is improved by reading widely on various subject fields (see 2.4.8)
2 H8	Intellectual well-being is improved by practicing mindfulness (focusing on the present moment) (see 2.3.3; 2.4.8).
2 H9	Intellectual well-being stimulates and improves the health of our brains and prevents mental decline (see 2.3.5; 2.4.8).
2 I: Occupational well-being (see 2.4.9; 6.3.2.9)	
2 I1	Our skills, gifts and talents used at work enrich our lives & give purpose to our lives (see 2.4.9; 6.3.2.9)
2 I2	Performing meaningful work (see 2.4.9; 3.1.1; 3.2)
2 I3	Occupational/job satisfaction (enjoying our work & finding it work stimulating and rewarding) (see 2.4.9; 3.2.3)
2 I4	Being engaged at work (see 3.2.7)
2 I5	Work/job characteristics affects our well-being (see 3.2.14; 3.1.1; 3.2.1)
2 I6	Affective well-being (depression vs. pleasure; anxiety vs. comfort; boredom vs. enthusiasm; tiredness vs. vigour; anger vs. placidity)(see 2.4.9; 2.4.3)
2 I7	Having autonomy (see 2.4.3; 2.4.9)
2 I8	Competent to do your work (see 2.4.9)
2 I9	Aspiring to be the best you that you can be at the workplace (see 3.2; 2.4.9)

2 10	Sufficient opportunities for learning, personal growth & development (see 2.4.9; 3.2.13)
2 11	Sufficient opportunities for promotion/career advancement/job progression (see 2.4.9; 3.2.13)
2 12	Work environment that facilitates interactions with colleagues, peers, supervisors, stakeholders, etc (see 3.2.1; 2.4.9)
2 13	Successful conflict management (see 3.2.2; 2.4.9)
2 14	Healthy, positive, supportive relations with supervisors, peers & subordinates; stakeholders, etc. (see 3.2.16; 3.4.5)
2 15	Experiencing positive emotions & having positive experiences at work (see 3.4.5; 3.1.1; 3.2.9)
2 16	Creating “flow” (to be one with, engaged and happy in the moment) (see 2.3.3)
2 17	Positive attitude about your work (see 2.3.7.2; 2.4.9; 3.4.5)
2 18	Relaxed, enabling work environment (see 2.4.9; 3.2.1)
2 19	Work-life balance / balance between work and leisure time (see 3.2.15; 3.4.4)
2 20	Having a manageable workload (see 2.4.9; 3.1.1)
2 21	Balance between job demands and resources (see 3.2.4; 3.4.3)
2 22	Being suitable/fit for the job you have been appointed for (see 3.2.21)
2 23	Work provides a sense of meaning and purpose (see 3.1.1; 3.2.1)
2 24	Performance/achieving work goals (see 2.4.9)
2 25	Culture of inclusiveness at the workplace (see 2.4.9; 3.2.24)
2 26	Working in a safe environment (see 2.4.1; 2.4.9; 3.1.1)
2 27	Working in a peaceful environment (see 2.4.9; 3.1.1)
2 28	Working in a pleasant environment (see 2.4.9; 3.1.1)
2 29	Appreciative work environment (see 2.4.9; 3.2.10)
2 30	Stimulating work environment (see 2.4.9; 3.1.1)
2 31	Open to change & to learn new skills (see 2.3.7.3; 2.4.9)
2 32	Conducive work climate/culture (see 2.4.9; 3.2.23)
2 33	Successful work-life integration (see 2.4.9; 3.2.15)
2 34	Combating stress at work (see 2.4.1; 2.4.9; 3.2.2)
2 35	Receiving sufficient remuneration (see 2.4.9; 3.2.6)
2 36	Sufficient performance/reward systems in place (see 2.4.9; 3.2.13; 3.2.18)
2 37	Experiencing high morale (see 2.4.9; 3.2.9)
2 38	Having ethical leadership at work (see 2.4.9; 3.2.18; 3.2.23)
2 39	Having a positive institutional culture at the workplace (see 2.4.9; 3.2.1; 3.2.23)
COMPONENT 3: SA PUBLIC HEIs SHOULD DEVELOP A CLEAR EMPLOYEE WELL-BEING POLICY TO GUIDE AND FACILITATE THEIR WELL-BEING PROGRAMMES/EFFORTS (see 3.2.19; 6.3.3)	
3.1	Clear policies and procedures on employee well-being should be developed by each SA public HEI, to guide and facilitate their well-being efforts (see 3.2.19; 3.4.1; 3.4.1.1; 5.4.5; 5.4.13).
3.2	SA public HEIs' employee well-being policies should be guided by applicable national health and well-being legislation, frameworks, strategies and policies (e.g. the SA Constitution, SA labour and anti-discrimination legislation, etc.)(see 3.2.19; 3.2.24).
3.3	SA public HEIs' employee well-being policies should be guided by, and support the institution's mission, vision, values, strategic plans, and other applicable policies/procedures (see 3.2.19; 3.2.24; 3.4.1)
3.4	All well-being efforts of SA public HEIs should be aligned with and guided by the strategic direction provided via the institution's well-being policy, as well as its vision, mission, values and strategic plans (see 3.2.19; 3.2.24).

3.5	SA public HEIs should identify all the different stakeholders in employees' well-being, and should involve/consult them in the development of policies/procedures on employee well-being (see 2.4.9; 3.2.19; 3.4.1).
3.6	Management of SA public HEIs' support and buy-in in all employee well-being policies and well-being efforts of the institution is of vital importance.
3.7	Buy-in should be obtained from all SA public HEIs' institutional stakeholders to ensure the successful implementation of any employee well-being policy (see 3.2.20; 3.2.19)
3.8	All institutional well-being policies should be made available on SA public HEIs websites/electronic databases, or should be shared via any other appropriate communication media, (including, but not limited to, e-mail, wellness days, workshops, awareness sessions, road shows etc.), for employee to acquaint themselves with the contents thereof; to ask questions about the policy; and to adhere thereto (see 3.2.19; 2.4.9).
COMPONENT 4: SA PUBLIC HEIs SHOULD EACH HAVE A CLEAR EMPLOYEE WELL-BEING STRATEGY (see 3.2.19; 6.3.4)	
4.1	SA public HEIs should develop clear well-being strategies, guided by each institution's well-being policy, as well as each institution's vision, mission, values and strategic plans (see 3.2.19; 3.4.1).
4.2	SA public HEIs should benchmark with other HEIs, both nationally and internationally, on the contents of their well-being strategies, to determine and apply best practice in the development of their own well-being strategies (see 3.2.19; 3.2; 3.4).
4.3	SA public HEIs' well-being strategies should point out the importance of establishing employee well-being programmes to manage such activities (see 3.2.19).
4.4	SA public HEIs' well-being strategies should guide the implementation of all their employee well-being initiatives (see 3.2; 3.2.19; 3.4.1).
4.5	SA public HEIs' well-being strategies should clearly spell out their stances and theoretical frameworks on their employees' well-being (see 3.2.19; 5.4.5 - 5.4.6).
4.6	SA public HEIs' well-being strategies should clearly spell out the dimensions of employees' well-being to be addressed via their different well-being programmes (e.g. emotional, physical, social, psychological (mental), financial, environmental, spiritual, intellectual and occupational well-being)(see 2.4.1 - 2.4.9; 3.2.19; 5.4.3).
4.7	SA public HEIs' well-being strategies should support the objectives of the institutions' well-being programmes (see 3.2.19; 5.4.8; 5.4.12).
4.8	SA public HEIs' well-being strategies should contain clear goals in terms of each well-being objective set (see 3.2.19; 5.4.12).
4.9	SA public HEIs' well-being strategies should be clear on how the effectiveness of their strategies and specific well-being programmes will be monitored and evaluated (see 3.2.17; 5.3.4; 5.3.4.1).
4.10	SA public HEIs' well-being strategies should be adapted, based on outcomes and recommendations flowing from the regular monitoring and evaluation of the effectiveness of the institutions' well-being efforts by all stakeholders (see 3.2.17; 5.4.9) .
4.11	The well-being strategy should constantly be monitored against, and aligned with the latest global trends in, and research on employee well-being, as applicable to the institution (see 3.2.17; 5.4.9; 5.4.11).
4.12	The well-being strategy should provide guidelines for the sustainable implementation of the institution's well-being programmes (see 3.2.19; 5.4.8).
4.13	Each SA public HEIs should make its well-being strategy available on the institution's website/electronic database, or share it via any other appropriate communication media, (including, but not limited to, e-mail, wellness days, workshops, awareness sessions, road shows etc.), for employees to acquaint themselves with the contents thereof; to ask questions about the strategy, etc. (see 3.2.19; 5.4.13)

COMPONENT 5: SA PUBLIC HEIs SHOULD DEVELOP EFFECTIVE WELL-BEING PROGRAMMES ADDRESSING ALL THE DIMENSIONS OF EMPLOYEES' WELL-BEING IN AN INTEGRATED MANNER (see 2.4.1 - 2.4.9; 5.4.2; 5.4.3; 6.3.5)	
5.1	SA public HEIs should develop effective employee well-being programmes guided by their well-being policies and strategies (see 3.2.19; 5.4.5; 5.4.13; 6.3.5).
5.2	SA public HEIs could benchmark with other HEIs, both nationally and internationally, on the contents of their well-being programmes, to determine and apply best practice in the development of their own well-being programmes (see 5.4.11).
5.3	SA public HEIs' well-being programmes should address all the dimensions of their well-being (i.e. their emotional, physical, social, psychological (mental), financial, environmental, spiritual, intellectual and occupational well-being)(see 2.4.1 - 2.4.9; 5.4.3; 5.4.6)
5.4	SA public HEIs' well-being programmes should address all the dimensions of their well-being (i.e. their emotional, physical, social, psychological (mental), financial, environmental, spiritual, intellectual and occupational well-being)(see 2.4.1 - 2.4.9).
5.5	SA public HEIs' well-being programmes should contain clear goals in terms of dimension of employees' well-being, and how (by which means) these will be addressed. (see 5.4.12; 3.2.19)
5.6	SA public HEIs' well-being programmes should address all the dimensions of their well-being (i.e. their emotional, physical, social, psychological (mental), financial, environmental, spiritual, intellectual and occupational well-being)(see 2.4.1 - 2.4.9).
5.7	SA public HEIs' well-being programmes should address all the dimensions of their well-being in an integrated manner, and not in silos (see 1.5.2; 2.4).
5.8	The effectiveness of SA public HEIs' well-being programmes (as contained in their well-being strategies) should be monitored and evaluated (see 3.2.17; 5.4.9; 5.4.9.1).
	5.8.1 SA public HEIs' well-being strategies should clearly spell out <u>how</u> the effectiveness of their well-being programmes will be monitored and evaluated (see 3.2.17; 5.4.9; 5.4.9.1).
	5.8.2 SA public HEIs' well-being strategies should clearly spell out the <u>stakeholders</u> to monitor and evaluate the effectiveness of their well-being programmes (see 3.2.17; 5.4.7; 5.4.9; 5.4.9.1).
	5.8.3 SA public HEIs' well-being strategies should clearly spell out <u>how regularly</u> the effectiveness of their well-being programmes will be monitored (see 3.2.17; 5.4.9).
	5.8.4 SA public HEIs' well-being strategies should clearly spell out <u>by which means</u> the effectiveness of their well-being programmes will be monitored (3.2.17; 5.4.8; 5.4.8.1; 5.4.9; 5.4.9.1)
COMPONENT 6: INSTITUTIONAL CULTURE AND VALUES SHOULD CREATE AND ENABLING ENVIRONMENT FOR EMPLOYEES TO FLOURISH (see 3.1.1; 3.2.23; 6.3.6)	
6.1	Institutional culture includes, amongst others, relationships, traditions, culture and the climate/environment (positive or negative) of the institution (see 3.2.23; 6.3.6).
6.2	Employees can only flourish in an institution where the institutional culture is positive (see 3.2; 3.2.1; 3.2.23; 6.3.6).
6.3	Employees can only flourish in an institution where they have positive relations with subordinate, peers, supervisors and stakeholders (see 3.2.16).
6.4	Employees can only flourish in an institution where the institutional culture creates a conducive and enabling work environment (see 3.2.23; 3.1.1; 6.3.6).
6.5	Employees can only flourish in an institution where the institution's traditions reflect the demographics of the institution, and where these are aimed at uniting employees (see 3.2.23).
6.6	Employees can only flourish in an institution where they are regarded as important (see 3.2.10; 3.2).

6.7	Employees can only flourish in an institution where there is mutual trust (see 3.2.8).
6.8	Employees can only flourish in an institution where they are well cared for, and regarded as important assets (see 3.1.1; 3.2.1; 3.2.10).
6.9	The institutional culture is determined by all the various internal (e.g. management, employees, supervisors, teams, unions) and external (e.g. Council, the community, partners, government, society) stakeholders (see 3.2.23).
6.10	Commitment is required from <u>all stakeholders</u> to transform a negative institutional culture into a positive institutional culture (see 3.2.23).
6.11	SA public HEIs should put measures in place to regularly monitor and evaluate the institutional culture (e.g. through annual surveys, questionnaires, online forums, discussion sessions with employee, exit interviews, institutional culture audits, etc.)(see 3.2.17; 3.2.23; 5.5)
6.12	SA public HEIs should communicate the outcome of all institutional culture monitoring and evaluation processes to employee, management, Council and its appropriate standing committees (see 3.2.17; 3.2.23; 5.4.9).
6.13	SA public HEIs should build on strengths in terms of the institutional culture, as identified from monitoring and evaluation processes, and should work actively towards addressing any possible identified areas of improvement (see 3.2.17; 3.2.23; 5.5).
COMPONENT 7: WHO IS RESPONSIBLE FOR EMPLOYEE OF SA PUBLIC HEIs WELL-BEING?	
7.1	Government, society and the community have a responsibility for employee of SA public HEIs' well-being (see 3.4.1; 6.3.7)
	7.1.1 Government should establish effective health and well-being guidelines towards improving the health and well-being of their citizens (see 3.4.1).
	7.1.2 Institutions should be held accountable by Government for implementing health and well-being initiatives, as guided by national policy (see 3.4.1).
	7.1.3 Government should provide efficient and affordably health systems for its citizens (see 3.4.1).
7.2	SA public HEIs have a responsibility for their employees' well-being (see 3.5; 6.3.7).
	7.2.1 SA public HEIs should educate employees about the factors impacting on their holistic well-being, and how they can take control of and improve their well-being by taking preventative measures and adopting a healthy lifestyle (via, amongst others, their websites, electronic media, e-mail, awareness sessions, workshops, wellness days, road shows, electronically and physically distributed material such as pamphlets, booklets, and relevant research articles)(see 3.5; 5.4.13).
	7.2.2 SA public HEIs should educate employees about the different dimensions of their well-being (i.e. their emotional, physical, social, psychological (mental), social, financial, environmental, spiritual, intellectual and occupational well-being)(see 2.4.1 – 2.4.9; 3.5).
	7.2.3 SA public HEIs should have a clear policy guiding their employees' well-being (see 3.2.19).
	7.2.4 SA public HEIs should have a clear strategy guiding their employees' well-being (see 3.2.10).
	7.2.5 SA public HEIs should put effective well-being programmes in place to address their employees' well-being holistically, and in an integrated manner (see 2.4; 3.2.19; 5.3.4; 5.4.8).
	7.2.6 SA public HEIs should put measures in place for the effective monitoring and evaluation of their well-being policies, strategies and programmes (see 3.2.17; 3.2.19).
	7.2.7 SA public HEIs should clearly communicate their well-being policies, strategies, programmes and events to employee via e-mail, wellness days, workshops, awareness sessions, road shows, discussion forums, etc.), for employee to acquaint

	themselves with the contents thereof; to ask questions about these, etc. (see 3.2.19; 5.4.13; 5.4.13.1)
	7.2.8 SA public HEIs should create a conducive and enabling institutional culture and environment for their employees to experience optimal well-being (see 3.1.1; 3.5).
	7.2.9 SA public HEIs should avail sufficient resources (e.g. human, financial & infrastructural resources) to offer and manage effective employee well-being initiatives (see 3.2.4; 2.4.9; 3.4.3; 3.4.3.1; 5.4.5; 5.4.5.1).
7.3	Employee of SA public HEIs have a responsibility for their own well-being (see 6.3.7)
	7.3.1 Employees of SA public HEIs should educate themselves about the factors impacting on their holistic well-being (see 2.4; 3.2).
	7.3.2 Employees of SA public HEIs should acquaint themselves with the contents of their institutions' well-being policies, strategies and programmes (see 3.2.19).
	7.3.3 Employees of SA public HEIs should attend wellness programmes and activities offered by their employers to enhance their holistic well-being (see 5.4.5; 6.3.7) .
	7.3.4 Employees of SA public should take control of and improve their well-being by taking preventative measures and adopting a healthy lifestyle (e.g. eating healthily and exercising) to improve their own well-being (see 2.4.1; 6.3.7).

After I designed the above integrated employee well-being framework, I conducted both a pilot validation survey, and a validation process with a panel of experts for triangulation purposes, to strengthen its reliability and validation. In the next section, the two validation processes are discussed in detail.

6.5 VALIDATION OF THE PROPOSED INTEGRATED EMPLOYEE WELL-BEING FRAMEWORK FOR SOUTH AFRICAN PUBLIC HIGHER EDUCATION INSTITUTIONS

The validation process consisted of two validations. Firstly, a pilot validation survey was conducted, which is discussed below.

6.5.1 Pilot validation survey

After I designed the proposed integrated employee well-being framework for SA public HEIs towards the enhanced well-being of their employees, I purposefully selected four panel members with expertise and experience in the field of psychology and employee well-being via snowball sampling to participate in a pilot validation survey. Of the four invitees, three (a counselling psychologist and two educational psychologists, all working in the higher education sector and with a background in employee and/or organisational well-being) participated in the validation process. This pilot validation

formed part of the quality criteria (trustworthiness) implemented for purposes of answering the sixth secondary research question (see 6.1, Figure 6.2).

I supplied the validation panel members with background information on the study (see Annexure M2), an invitation to participate in the research (see Annexure M1), and they had to complete an informed consent form (see Annexure O). Furthermore, I designed a questionnaire for use by the validation panel members to validate each component and sub-component of the framework. The design of the evaluation instrument is discussed in section 6.5.2 below. The same design was used for the pilot validation survey and the validation by a panel of experts.

6.5.1.1 Response rate for pilot validation survey

The response rate of the pilot validation survey was as follows:

Table 6.2 Response rate of pilot validation survey conducted

Invited	Number of participants	Response rate
4	3	75 %

In the next section, the demographic profile of the validation panel members who participated in the pilot validation survey, is provided.

6.5.1.2 Demographic characteristics of members of pilot validation survey

This section provides information on the gender, ethnicity, occupation/expertise and years of relevant experience of the validation panel members who participated in the pilot validation survey. Questions 1, 2, 3 and 4 of the questionnaire addressed the gender, ethnicity, nature of the position occupied, and the years of relevant experience. The results are indicated in Table 6.3 below.

Table 6.3 Demographic profile of participants (n=3)

Characteristics	Group	Frequency
Gender	Male	1
	Female	2
Ethnicity	Black	2
	White	1
	Coloured	0
	Indian	0
Current job title/field of expertise	Counselling Psychologist	1
	Educational Psychologist	2
Years' relevant experience	11-15 years	1
	16-20 years	1
	21-25 years	0
	26-30 years	1

It is evident from Table 6.3 above there was a fair distribution of the gender and ethnicity of panel members. The years of experience reported by the participants ranged between 15 and 30 years, which indicates that they are all experienced psychologists and, as such, could add value to the study.

The purpose of this validation was to test the designed integrated employee well-being framework in terms of its reliability and validity within the context of higher education with experts in the field, and to obtain possible recommendations towards its improvement. Validation panel members had to rate each component and subcomponent of the framework as either “Essential” (EC), “Useful” (UC), or “Not necessary”. Constructive feedback was received from these psychologists, and their inputs that were considered valid and aligned with the literature findings, were implemented to improve the integrated employee well-being framework.

Below is a summary of the outcome of the pilot validation survey. To protect the identity of the validation panel members, they were all assigned a number, for example, Validation Panel Member 1 (VP1), Validation Panel Member 2 (VP2), and Validation Panel Member 3 (VP3):

Table 6.4 Summary of outcome of pilot validation process

Validation panel (VP) member	Components regarded as either “Essential” or “Useful”
VP1	All
VP2	All
VP3	All except 2A2.16, 2D2.11, 6.8 and 6.10

Each of the amendments proposed are listed in Table 6.5 below, with an indication of whether the amendment was affected, and a reason for affecting/not affecting each proposed amendment.

Table 6.5 Amendments to integrated employee well-being framework proposed by pilot validation survey members

Section of framework	Proposed amendment	Amendment affected: Yes/No	Reason for affecting change/not affecting change
2A 2.16	Deletion of “ <i>managing stress successfully</i> ” as sub-component of physical well-being	No	Stress emerged strongly from the literature as a component of physical well-being (see 2.4.1; 3.2.2). Hence, 2A 2.16 was retained.
2D 2.11	Deletion of “ <i>living a meaningful life</i> ” as a sub-component of social well-being	Yes	Since the component was covered under the dimension of spiritual well-being (see 2F 2.12), and emerged mostly in the literature as a component of spiritual well-being (see 2.4.6), I deleted it as a sub-component of social well-being.
6.3	Removal of the term “subordinates”	Yes	The term was removed, as it could point to a culture of dysfunctional power where some people might be regarded as less valuable than others. The importance of feeling valued and appreciated as an employee, and the importance thereof in employees’ well-being were emphasised in the literature (see 2.3.7.1).
6.8	Deletion of the reference to employees as “assets”	Yes	The section was rephrased to emphasise that employees should be regarded as

			important and valuable (see 2.3.7.1)
6.10	Deletion of 6.10, which was a repetition of 6.8	Yes	It was a repetition of 6.8.
6.14	The dynamic created within the institution by a smaller group of employees can also facilitate movement towards a more positive (functional) culture	Yes Added as sub-section 6.15	It emerged from the literature that positive action, or a positive institutional culture, can be built by focusing on the organisation's strengths (see 2.3.7.1), and the institutional culture can be influenced by employees (see 3.2.23).
6.16	Monitoring and evaluation of cultural climate should be evaluated in an ongoing manner. It could take the form of communities of practice that involve employees in the continuous evaluation process.	Yes Section 6.17 was broadened to include this emphasis.	Ongoing monitoring and evaluation was emphasised in the literature, and hence this section was broadened to emphasise this.
COMMENTS BY VALIDATION PANEL MEMBER 3 (VP 3)			
Section of framework	Comment	Comment incorporated: Yes/No	Reason for incorporation/non-incorporation
Component 1: defining well-being	Employees' individual well-being should be addressed, but also their relational and collective well-being	Yes Added as sub-component A1.6.	Comment regarded as valuable, also in terms of the literature review and document analysis conducted (see 2.4.4; 2.4.9). These aspects, however, also feature under the dimensions of social, spiritual and occupational well-being, but were made upfront in how well-being is defined in component 1.
Component 3 (SA public HEIs should have clear well-being policies and procedures)	Institutions should develop an integrative process that involves employees in ongoing conversations about the promotion of their health and well-being.	Yes. Added as sub-component 3.7.	Comment regarded as valuable, especially with regard to the focus in the literature on integrative processes focused on enhancing employees' well-being, and making them part of the process.

Component 5 (SA public HEIs should develop effective well-being programmes addressing all the dimensions of their employees' well-being)	Employees across all levels should be involved in the development of the strategies as well as the monitoring and evaluation processes related to their well-being, to ensure that their voices are clearly heard in the process, and to recognise the complex, interactive nature of health promotion.	Yes Built into sub-components 4.2. and 5.3.	Comment regarded as valuable, also in terms of the focus in the literature on involving employees in the development of well-being policies, strategies and programmes, so that their well-being needs are addressed effectively.
Component 6 (institutional culture, climate & values should create an enabling environment for employees to flourish)	• Institutional culture also should be functional and not only positive. • The application of the well-being theories mentioned in sub-section 6.19 (i.e. <i>"SA public HEIs could apply the principles of positive psychology, flourishing theory and well-being theory to create a positive institutional climate, and by doing so, enabling their employees to flourish"</i>) was confirmed as essential by VP3 in recognising human beings.	Yes Sub-components 6.3 and 6.4 were broadened to emphasise that the institutional culture should be functional. The application of these well-being theories was emphasised in sub-section 6.19.	Functional institutional culture was emphasised as important in the literature (see 3.2.23). I have pointed out the importance of SA public HEIs to "apply the principles of positive psychology, flourishing theory and well-being theory to create a positive institutional climate, and by doing so, enabling their employees to flourish", in sub-section 6.19. This was re-emphasised by VP3.
Component 7: Different role players in the well-being of employees of SA public HEIs	There should be a more discursive and interactive process between employers and employees about the needs of employees and systematic challenges associated with their well-being, since that would serve the purpose of	Yes This was added as sub-component 7.2.11	The interaction among the different role players in employees' well-being was emphasised in the literature (see 2.3.9).

	integration in the best possible way.		
General comment related to framework	Nuanced guidelines to SA public HEIs on how the different components of this framework could be integrated in the workplace would add value to the framework. It should be emphasised that fragmented practices related to employees' well-being should be avoided. Furthermore, well-being programmes, etc. should be based on the employees' needs, and this should be determined in close collaboration with employees, in a process-oriented, rather than a programme-oriented approach.	Yes This was added as section 8 (see 8.1 to 8.11) of the framework.	I agree that such nuanced guidelines would add value to the framework, and would guide SA public HEIs on how the different components of the framework could be integrated in the workplace.

After I have amended the integrated employee well-being framework as per the outcome of the validation process, and as summarised in Table 6.5 above, a validation process with a different, broader panel of experts followed. Hence, the members of this second validation panel members were all new members who had not participated in the pilot validation.

In the next section, this validation process is discussed, with reference to the design and distribution of the questionnaire that was used for purposes of evaluating the proposed integrated employee well-being framework. Secondly, the demographic profile of validation panel members is provided (see 6.5.2), and finally the results of the validation process are discussed (see 6.5.3).

6.5.2 Design and distribution of the questionnaire used for validation of the proposed integrated employee well-being framework for South African public higher education institutions

For purposes of evaluating the proposed integrated employee well-being framework for SA public HEIs, the following documentation was distributed to validation panel members:

- Background information (see Annexure P2), an invitation to participate in the research (see Annexure P1), and an informed consent form to be completed by participating validation panel members (see Annexure R).
- A questionnaire for purposes of evaluating the proposed integrated employee well-being framework for SA public HEIs towards enhanced employee well-being, which included the entire integrated employee well-being framework, with all its proposed components and sub-components. The design of the evaluation instrument is discussed in Table 6.6 below.

Table 6.6 Design of validation instrument for validation of the integrated employee well-being framework for SA public HEIs

Research objective	Type of evaluation instrument used	Structure of the evaluation instrument	Motivation for type and design of evaluation instrument
To design an integrated employee well-being framework that could be utilised by SA public HEIs to enhance their employees' well-being in an integrated and holistic manner	Semi-structured questionnaire for purposes of evaluating the necessity of each component and sub-component of the framework (Format: MS Word document) (See Annexure Q)	• Questions 1 and 2: Demographic information (multiple-choice questions to select the appropriate option). • Question 3: Demographic information related to job title(open-ended). • Question 4: Panel members were asked to provide a brief description of their expertise (e.g. qualifications and other significant achievements) in the disciplines of industrial & organisational psychology, higher education, organisational development	• To evaluate the proposed integrated employee well-being framework for SA public HEIs. • To analyse and present information regarding panel members' ideas/opinions pertaining to the reliability and viability of the proposed integrated employee well-being framework. • Purpose of questions 1, 2 and 3: To analyse the demographic profile of validation panel members. • Purpose of question 4: To establish the credibility of ratings provided with regard to the

		and employee well-being. Furthermore, they were asked to supply information related to their years of experience in these fields (open-ended). • Question 5: Validation panel members were asked to rate the components and sub-components of the proposed integrated employee well-being framework in terms of its importance (by means of a three-level rating scale).* • Question 6: Panel members were asked to provide comments & make recommendations with regard to any of the components of the proposed integrated employee well-being framework.	experience and expertise of validation panel members. • Question 5: To establish the extent of the necessity of the components and sub-components of the proposed integrated employee well-being framework, for purposes of identifying possible weaknesses in the framework, and to obtain recommendations towards its improvement. • Question 6: To obtain recommendations/comments regarding the components or sub-components of the proposed integrated employee well-being framework for SA public HEIs, for purposes of identifying possible weaknesses in the framework, and to obtain recommendations towards its improvement.

* = the rating scale of importance used consisted of three levels: **essential component (EC)**, **useful component (UC)** and **not necessary (NN)**. It was decided that a three-level rating scale would provide reliable results, as it catered for multiple viewpoints, from which the importance of the components and sub-components could be determined.

The semi-structured questionnaire used for the evaluation of the proposed framework for integrated employee well-being for SA public HEIs towards improved employee well-being was distributed as follows:

I obtained the names of twelve experts in the field of industrial psychology, counselling psychology, clinical psychology, organisational development and employee well-being by means of snowball sampling from an industrial psychologist, and an educational psychologist, employed at two of the SA public HEIs. These experts had not participated in either my pilot study, the validation of the questionnaire used for the empirical research, or the empirical research itself; or in the pilot of the validation of my integrated employee well-being framework. They were thus newly identified experts, and were purposefully selected to participate in the research, based on their relative expertise and experience. I contacted the identified validation panel members telephonically or by e-mail, introduced them to my research, and requested their voluntary participation as an independent validation panel member. Various follow-ups were also made either vial e-mail or telephonically. Six of the twelve invited validation

panel members eventually participated in the validation process. I also consulted the selection of the validation panel members with my promoter and co-promoter. They were selected based on the following criteria, and subsequently identified through snowball sampling:

- they had to be experts in the fields of industrial psychology, educational psychology, organisational development, employee health and wellness/ well-being and/or higher education;
- as the framework would be developed for use by SA public HEIs, they had to be familiar with the SA public HEI environment, or employed by a South African higher education institution; and
- diversity in terms of race and gender was considered.

After participation had been confirmed, an e-mail was sent to each of the six panel members, and the documentation mentioned under 6.3.1 were attached to those e-mails.

In the next section, demographic information related to the validation panel members is provided.

6.5.2.1 Demographic profile of validation panel members

This section provides the demographical profile (ethnicity, gender, occupation and years of relevant experience) of the members of the validation panel. The results are indicated below.

Table 6.7 Demographic profile of participants (N=6)

Characteristics	Group	Frequency
Gender	Male	1
	Female	5
Ethnicity	Black	0
	White	3
	Coloured	3
	Indian	0
Current job title	Professor: Industrial Psychology	1

	Manager: Employee Health/Wellness/Relations	3
	Senior Lecturer: Educational Psychology	1
	Employee Wellness Specialist	1
Years' relevant experience	1-5 years	0
	6-10 years	0
	11-15 years	1
	16-20 years	1
	21-25 years	4

Although I strived to ensure as much diversity as possible in terms of gender and ethnicity in the invitation to 12 experts (in terms of gender, five invitees were male, and seven female; and in terms of ethnicity, three invitees were Black, two were Indian, three were White and four were Coloured), I had no control over which of these eventually would participate in the research. The six validation panel members were all women: three were white, and three coloured. The years of experience reported by the participants ranged between 11 and 25 years, which is an indication that all of the validation panel members had many years of experience related to the study field. Their job titles at the time of participation ranged between professors (one participant), senior lecturer (one participant), managers of employee health/wellness/relations (three participants), and an employee wellness specialist (one participant).

6.5.2.2 Response rate

The response rate of the validation panel members who were invited to participate in the validation of the proposed integrated employee well-being framework for SA public HEIs is indicated below.

Table 6.8 Response rate of members of the validation panel

Invited	Number of participants	Response rate
12	6	50 %

Although I made every effort to invite a broad panel of experts, and constantly remained in contact with them, and reminded them about my invitation to participate in the research, eventually only half of the invitees participated in the validation process. This could be a limitation of the study, and is listed as such in Chapter 7 (see 7.2.4.1). However, a 50 % response rate was regarded as sufficient, especially since the designed framework also had been piloted with three experts prior to the final validation by the panel of six experts, as discussed in section 6.5, which means that a total of nine experts validated the integrated employee well-being framework.

6.5.2.3 Results of the validation of the proposed integrated employee well-being framework for South African public higher education institutions

In this section, the results of the evaluation of the proposed integrated employee well-being framework for SA public HEIs by members of the validation panel, is discussed.

As indicated in section 6.5, members of the validation panel were requested to rate each feature of the integrated employee well-being framework in the questionnaire distributed to them in accordance with perceived importance. The rating scale used was as follows: Essential component = EC, Useful component = UC; Not Necessary = NN.

Furthermore, each main section in the framework had an open-ended section for comments and recommendations by validation panel members (see Annexure Q). The purpose of providing this space for comments or recommendations was to afford validation panel members the opportunity to provide their own perspectives and comments related to each component and sub-component of the framework. The feedback provided by members of the validation panel were useful, and assisted me in further improving and refining the framework.

The components of the proposed well-being framework are listed in sections 6.5.2.3.1 to 6.5.2.3.7 below. Cross references to all the relevant sections in this thesis for purposes of motivating each component/sub-component were provided in section 6.4 (see Table 6.1). Hence, cross references are not repeated in sections 6.5.2.3.1 to 6.5.2.3.7 below. The number of validation panel members who rated each component as either an Essential Component (EC), a Useful Component (UC), or Not Necessary (NN) is reported, and their comments are also provided. An interpretation of the results is then provided, and an indication is given of any amendments that were made to the framework.

All components and sub-components that were rated as “Essential” or “Useful” by at least 75 % of the validation panel members, were retained, whilst components and sub-components rated as “Not Necessary” by 25 % or more of the validation panel members, were reconsidered - also in terms of the literature findings - and a decision was then made to either retain or remove such a component or sub-component.

6.5.2.3.1 *Component 1: Definition of concept of well-being*

This section pertains to the component of the concept of well-being. The concept of well-being was discussed in detail in Chapters 1 (see 1.5.1) and 2 (see 2.2; 2.2.1-2.2.5). It is clear from the literature that well-being is about more than happiness. It is a multi-faceted concept, and is all about functioning optimally in life, and living a well-balanced life (see 2.2.2; 2.2.5). Well-being therefore is broadened to include those factors that enable people and societies to flourish (see 2.2.2).

The concept of well-being, and all its elements that were included in the draft well-being framework for SA public HEIs in the category *Definition of concept of well-being*, as well as the ratings provided by each validation panel member, are presented in the table below.

Table 6.9 Validation of component 1: Definition of concept of well-being

1 A	Component 1: Defining the concept of well-being.			
	The concept of well-being includes/entails the following:			
		EC	UC	NN
A1.1	Well-being includes being happy, but is about more than happiness (n=5)	4	0	1
A1.2	Well-being entails high levels of subjective well-being (n=5)	4	1	0
A1.3	Well-being is multi-faceted, and consists of various dimensions/"building blocks" (see section 2 (2A to 2I) below for more details)(n=6).	5	1	0
A1.4	Important dimensions (building blocks) of well-being include physical, emotional, psychological (mental), social, financial, spiritual, environmental, intellectual and occupational well-being (see section 2 (2A to 2I) below for more details)(n=5).	4	1	0
A1.5	The different dimensions (building blocks) of well-being (mentioned in A1.4 above) are interlinked, and therefore should be addressed in an integrated manner, and not in silos(n=5).	4	1	0
A1.6	The concept of well-being includes aspects related to our personal, relational and collective well-being(n=5).	3	2	0
A2	Well-being entails positive feelings and positive functioning, such as:			
A2.1	Emotional stability (n=6)	5	1	0
A2.2	Engagement (n=6)	5	1	0
A2.3	Living a meaningful life (n=6)	6	0	0
A2.4	Living a balanced life (n=6)	6	0	0
A2.5	Being optimistic (n=6)	4	2	0
A2.6	Positive emotions (n=6)	4	2	0
A2.7	High morale (n=6)	4	2	0
A2.8	Positive relationships (n=6)	4	2	0
A2.9	Resilience (ability to cope/"bounce back")(n=6)	6	0	0
A2.10	Positive self-esteem (n=6)	5	1	0
A2.11	Vitality (n=6)	5	1	0
A2.12	Having hope for the future (n=6)	6	0	0
A2.13	Being satisfied with your life (n=6)	5	0	1
A2.14	Flourishing (living optimally; thriving)(n=6)	5	1	0

Interpretation of the results:

Validation panel member 5 (VP 5) did not provide a rating for sub-components A1.1, A1.2, A1.4, A1.5 and A1.6. Hence, the total number of participants for these sub-components were 5, and not 6. Component 1A and all of its sub-components were rated as "essential" or "useful" by more than 75% of the panel members. Hence, all of these components were retained. With regard to component 1, validation panel member (VP) 1 emphasised that employees should have an understanding of the

concept of well-being - especially those employees who worked in the wellness departments of SA public HEIs.

6.5.2.3.2 Dimensions of well-being

Nine dimensions of well-being were identified from the baseline pilot study, literature study and the document analysis performed. They are physical, emotional, psychological (mental), social, spiritual, financial, environmental, intellectual and occupational well-being (see 2.4.1 – 2.4.9). Each of these dimensions are discussed in sections 6.5.2.3.1 to 6.5.2.3.9 below.

6.5.2.3.2 A Component 2 (A): physical well-being

This section pertains to the component of physical well-being, which was identified as important for employees of SA public HEIs to experience optimal well-being (see 2.2.5; 2.4.1). Its inclusion in the framework was also discussed in section 6.3.2.1 of this chapter.

The component of physical well-being, and all its sub-components in the integrated well-being framework for SA public HEIs in the category *Dimensions (building blocks) of well-being* are indicated in Table 6.10 below, as well as the outcome of the validation process conducted.

Table 6.10 Validation of component 2 A: physical well-being (n=6)

2 A	Component 2 A: Physical well-being			
		EC	UC	NN
2A.1	Physical well-being is an important dimension of human well-being.	5	1	0
2A 2	<i>Physical well-being entails/includes:</i>			
2A 2.1	Following a healthy diet	5	1	0
2A 2.2	Proper hydration	5	1	0
2A 2.3	Exercising/being active	5	1	0
2A 2.4	Maintaining a healthy body weight (BMI)	4	2	0
2A 2.5	Exposure to sunlight	5	1	0
2A 2.6	Making time to relax	5	1	0
2A 2.7	Getting sufficient sleep	5	1	0

2A 2.8	Making time for meditation	5	1	0
2A 2.9	Living mindfully	5	1	0
2A 2.10	Avoiding harmful habits such as smoking, drinking too much alcohol, using drugs, etc.	6	0	0
2A 2.11	Being safe and secure	4	1	1
2A 2.12	Maintaining a good posture	4	2	0
2A 2.13	Experiencing optimal health	5	1	0
2A 2.14	Having vitality	5	1	0
2A 2.15	Having sufficient energy	4	1	1
2A 2.16	Managing stress successfully	5	1	0
2A 2.17	Having regular medical check-ups	4	2	0

Interpretation of the results:

Physical well-being and all its sub-features/elements were rated as “Essential” or “Useful” by at least 75 % of the validation panel members (see Table 6.10 above). Since a decision was made beforehand to retain all components that were regarded as “Essential” or “Useful” by more than 75% of the panel members, all the components and sub-components of physical well-being were retained. No additional comments were made by panel members with regard to the component of physical well-being.

6.5.2.3.2 B Component 2 (B): *emotional well-being*

This section has a bearing on the component of emotional well-being identified as important for employees of SA public HEIs to experience optimal well-being (see 2.2.5; 2.4.2). The inclusion of emotional well-being in the framework that was designed, was also discussed in section 6.3.2.2.

The component of emotional well-being, and all its sub-components in the draft well-being framework for SA public HEIs in the category *Dimensions/building blocks of well-being*, are presented in Table 6.11 below, together with the outcome of the validation process conducted.

Table 6.11 Validation of component 2 B: emotional well-being (n=6)

2 B	Component 2 B: Emotional well-being			
		EC	UC	NN
2B.1	Emotional well-being is an important dimension of human well-being.	6	0	0
2B 2	<i>Emotional well-being entails/includes:</i>			
2B 2.1	Having a positive outlook on life	5	1	0
2B 2.2	Being emotionally aware	5	1	0
2B 2.2.1	Understanding the value of your emotions	6	0	0
2 B 2.2.2	Being aware of the state of your overall well-being	6	0	0
2B 2.3	Being emotionally stable	6	0	0
2B 2.4	Having emotional energy/vitality	5	1	0
2B 2.5	Taking positive action	5	1	0
2B 2.6	Taking responsibility for your own emotions	6	0	0
2B 2.7	Self-acceptance (having a positive self-concept)	6	0	0
2B 2.8	Having a good self-esteem	4	2	0
2B 2.9	Being assertive	5	1	0
2B 2.10	Being happy/joyful	5	0	1
2B 2.11	Experiencing peace	5	1	0
2B 2.12	Being mindful	5	1	0
2B 2.13	Being fulfilled	6	0	0
2B 2.14	Resilience (the ability to cope with difficult life circumstances and traumatic events)	6	0	0
2B 2.15	Focusing your energy on important personal priorities	5	1	0
2B 2.16	Ability to adapt to change	6	0	0
2B 2.17	Ability to make essential changes to grow and live a fulfilled life	6	0	0
2B 2.18	Coping with stress/navigating stressful situations	6	0	0
2B 2.19	Ability to solve problems	6	0	0
2B 2.20	Interpersonal skills	5	1	0
2B 2.21	Intrapersonal coping skills	5	1	0
2B 2.22	Good decision-making skills	5	1	0
2B 2.23	Experiencing high morale	5	1	0
2B 2.24	Having hope for the future	6	0	0

Interpretation of the results:

The component of emotional well-being and its sub-components were rated as “Essential” or “Useful” by more than 75% of the validation panel members. Each subcomponent was rated as “Essential” by at least four of the participants, and as “Useful” by at least two of the participants.

Only sub-component 2B 2.10 (“*being happy/joyful*”) was regarded as “Not Necessary” by one validation panel member, but since more than 75% of participants supported this sub-component, it was retained. No additional comments were made by any of the panel members pertaining to the component of emotional well-being.

6.5.2.3.2 C Component 2(C): psychological (mental) well-being

This section pertains to the component of psychological (mental) well-being that was identified as important in the literature for employees to experience optimal well-being (see 2.2.5; 2.4.3). Its inclusion in the integrated employee well-being framework was also discussed in section 6.3.2.3 above.

The component of psychological well-being, together with all its sub-components, as contained in the designed integrated well-being framework for SA public HEIs in the category *Dimensions/building blocks of well-being*, are presented in Table 6.12 below, together with the ratings provided by validation panel members.

Table 6.12 Validation of component 2 C: psychological/mental well-being (n=6)

2 C	Component 2 C: Psychological well-being			
		EC	UC	NN
2C.1	Psychological well-being is an important dimension of human well-being.	6	0	0
2C 2	<i>Psychological well-being entails/includes:</i>			
2C 2.1	Autonomy	5	1	0
2C 2.2	Environmental mastery	4	2	0
2C 2.3	Personal growth	6	0	0
2C 2.4	Positive relations with others	4	2	0
2C 2.5	Self-acceptance	6	0	0
2C 2.6	Self-efficacy (the ability to believe that you will succeed in life)	5	1	0
2C 2.7	Emotional stability	5	1	0
2C 2.8	Ability to manage conflict	4	2	0
2C 2.9	Knowledge of own abilities	5	1	0
2C 2.10	Ability to cope with normal stress of life	5	1	0
2C 2.11	Ability to perform normal daily work	6	0	0
2C 2.12	Ability to function effectively within one's community	5	1	0
2C 2.13	Ability to make a positive contribution to one's community	5	1	0
2C 2.14	Feeling connected to one's community/surroundings	5	1	0

2C 2.15	Making the most of opportunities	5	1	0
2C 2.16	Having freedom and control over your life	6	0	0
2C 2.17	Mind-body integration	6	0	0
2C 2.18	Having emotional vitality	5	1	0
2C 2.19	Resilience (ability to cope/"bounce back")	6	0	0
2C 2.20	Having high self-esteem	5	0	1
2C 2.21	Being optimistic	5	1	0
2C 2.22	Feeling that your life has value	5	1	0
2C 2.23	Displaying emotional intelligence	5	0	1
2C 2.24	Having positive thoughts and emotions	5	1	0
2C 2.25	Having high morale	4	2	0
2C 2.26	Experiencing life as enjoyable	4	1	1
2C 2.27	Being enthusiastic about life	5	0	1
2C 2.28	Experiencing feelings of vigour	5	0	1

Interpretation of the results:

Just as the components of physical and emotional well-being, the component and sub-components of psychological (mental) well-being were rated as "Essential" or "Useful" by more than 75% of the validation panel members. These features were therefore retained in the final proposed framework.

Features 2C 2.20 ("*Having high self-esteem*"), 2C 2.23 ("*Displaying emotional intelligence*"), 2C 2.26 ("*Experiencing life as enjoyable*"), 2C 2.27 ("*Being enthusiastic about life*") and 2C 2.28 ("*Experiencing feelings of vigour*") were rated as "Not Necessary" by one participant. However, since their importance was emphasised in the literature (see 2.4.3), and since one member was less than 25% of the participants, these features were retained in the framework. No additional comments were made by any of the validation panel members.

6.5.2.3.2 D Component 2 (D): social well-being

This section pertains to the component of social well-being that emerged as an important dimension of employee well-being from the literature (see 2.2.4). The inclusion of social well-being in the integrated well-being framework was also discussed in section 6.3.2.4 above.

Table 6.13 below explains the proposed component of social well-being, as well as all its features, as contained in the integrated employee well-being framework (see 2 D1 to 2 D13). The outcome of the validation process is also indicated.

Table 6.13 Validation of component 2 D: social well-being (n=6)

2 D	Component 2 D: Social well-being	EC	UC	NN
2D.1	Social well-being is an important dimension of human well-being.	5	1	0
2D 2	<i>Social well-being entails/includes:</i>			
2D 2.1	The ability to develop, build and maintain positive personal relations/social ties (social inclusion)	5	1	0
2D 2.2	Having a sense of belonging	5	1	0
2D 2.3	Having a sense that one's life has value, and that others value you	5	1	0
2D 2.4	Having regular contact with other people who believe in one, support one and care for one (e.g. family, friends and colleagues)	5	1	0
2D 2.5	Developing interpersonal skills	5	1	0
2D 2.6	The ability to manage conflict successfully	5	1	0
2D 2.7	Using one's skills and abilities to function optimally in life	5	1	0
2D 2.8	Developing a value system, beliefs and traditions that are important to you	5	1	0
2D 2.9	Meaningful engagement with others	5	1	0
2D 2.10	To be socially accepted	5	1	0
2D 2.11	Embracing one's own cultural identity	5	1	0
2D 2.12	Respecting the cultural identity of others	5	1	0
2D 2.13	Ability to receive support/help from others when needed	5	1	0

Interpretation of the results:

The validation results pertaining to social well-being, with all its sub-components, indicate that all the validation panel members (i.e. 100 %) rated these features as “Essential” or “Useful”. This established the importance of social well-being as an important dimension of human well-being. No additional comments were provided by panel members.

6.5.2.3.2 E Component 2 (E): financial well-being

Financial well-being has emerged as an important dimension of well-being in the literature (see 2.4.6). The inclusion of financial well-being as a component of the integrated well-being framework was discussed in section 6.3.2.5.

Table 6.14 below explains the proposed component of financial well-being, as well as all its features (see 2 E1 to 2 E 2.9), and the ratings provided by validation panel members.

Table 6.14 Validation of component 2 E: financial well-being (n=6)

2 E	Component 2 E: Financial well-being			
		EC	UC	NN
2E.1	Financial well-being is an important dimension of human well-being.	5	1	0
<i>2E 2</i>	<i>Financial well-being entails/includes:</i>			
2E 2.1	Living within one's financial means	6	0	0
2E 2.2	Sticking to one's budget	5	1	0
2E 2.3	Managing one's finances effectively	5	1	0
2E 2.4	Regularly saving part of one's income	4	2	0
2E 2.5	Debt management (e.g. going for debt counselling if one has ended up in debt/struggle to make payments)	5	1	0
2E 2.6	Making wise financial investments	4	2	0
2E 2.7	Putting sufficient retirement planning in place	4	2	0
2E 2.8	Experiencing financial security	4	2	0
2E 2.9	Being financially literate	6	0	0

All the validation panel members (i.e. 100 %) rated the component of financial well-being, and all its sub-components, as either “Essential” or “Useful”. Once again, this is proof of the necessity of financial well-being as an important dimension of human well-being. No additional comments were provided by the panel members.

6.5.2.3.2 F Component 2 (F): spiritual well-being

Spiritual well-being was identified as an important dimension of human well-being in the literature (see 2.4.5). The importance of spiritual well-being as a dimension of human well-being was also discussed in section 6.3.2.6. As already indicated, it

became evident from the baseline pilot study, the literature study, the process of document analysis conducted and the responses of the participants in the multiple case study that spiritual well-being is a critical dimension in the well-being of employees (see 2.4.5; 5.4.3; 5.4.3.1), and both the importance of spirituality and spiritual leadership on psychological adaptation, mental health and well-being at work has been pointed out (see 2.4.5; 3.3; 6.3.2.6). Spiritual well-being is therefore regarded as a vital component for inclusion in the integrated employee well-being framework for SA public HEIs.

Table 6.15 below explains the proposed component of spiritual well-being, as well as all its features (see 2 F1 to 2 F 2.26). The outcome of the validation by validation panel members is also presented.

Table 6.15 Validation of component 2 F: spiritual well-being (n=6)

2 F	Component 2 F: Psychological well-being	EC	UC	NN
2F.1	Spiritual well-being is an important dimension of human well-being.	5	1	0
<i>2F 2</i>	<i>Spiritual well-being entails/includes:</i>			
2F 2.1	Discovering who you are	5	1	0
2F 2.2	Discovering the meaning of your life	4	2	0
2F 2.3	Discovering the value of your life	5	1	0
2F 2.4	Discovering the purpose of your life	5	1	0
2F 2.5	Having a sense of peace and contentment	6	0	0
2F 2.6	Living for a greater cause	5	1	0
2F 2.7	Having a relationship with someone you believe to be bigger than yourself (a higher power)	6	0	0
2F 2.8	Serving a higher power	5	1	0
2F 2.9	Having faith in a higher power	6	0	0
2F 2.10	Helping others	5	1	0
2F 2.11	Making provision for quiet time in your daily life/routine for purposes of self-reflection	5	1	0
2F 2.12	Living a meaningful life	5	1	0
2F 2.13	Searching for the sacred	5	1	0
2F 2.14	Assisting people to deal with major life stressors (e.g. illness, divorce; natural disasters; mental illness; etc.)	5	0	1
2F 2.15	Regarding work as a calling	4	2	0
2F 2.16	Having a positive effect on mortality and depression rates	4	2	0
2F 2.17	Having a positive effect on your happiness and life satisfaction levels	4	2	0
2F 2.18	Forgiving others	5	1	0

2F 2.19	Having a sense of hope	6	0	0
2F 2.20	Practising meditation (spiritual purification/thinking deeper about one's life)	3	2	1
2F 2.21	Having integrity	6	0	0
2F 2.22	Aligning your personal values and beliefs with what you believe in	5	1	0
2F 2.23	Spiritual well-being acts as a buffer against depression	4	1	1
2F 2.24	Spiritual well-being acts as a buffer against demoralisation	4	1	1
2F 2.25	Spiritual well-being acts as a buffer against despair/hopelessness	4	1	1
2F 2.26	Spiritual well-being acts as a buffer against anxiety	4	1	1

Interpretation of the results:

It is clear from the above ratings that the component of spiritual well-being and all its sub-components were regarded as important for employees' well-being by more than 75% of the validation panel members, who either rated this component and its sub-components as "Essential" or "Useful". Only one member of the panel rated sub-components 2F 2.14 (*"Assisting people to deal with major life stressors (e.g. loss of loved ones; illness; natural disasters; divorce; serious mental illness; etc.)"*); 2F 2.20 (*"Practising meditation - spiritual purification/thinking deeper about one's life"*); 2F 2.23 (*"Spiritual well-being acts as a buffer against depression"*); 2F2.24 (*"Spiritual well-being acts as a buffer against demoralisation"*); 2F 2.25 (*"spiritual well-being acts as a buffer against despair/hopelessness"*); and 2F 2.26 (*"spiritual well-being acts as a buffer against anxiety"*) as "Not Necessary". However, all these sub-components of spiritual well-being were emphasised in the literature (see 2.4.5). Since one member represented less than 25% of the validation panel members, these sub-components of spiritual well-being were retained in the framework.

6.5.2.3.2 G Component 2 (G): environmental well-being

It became evident from the literature that our personal environment (e.g. our physical environment, social environment and natural environment) impacts on our well-being (see 2.4.7). Furthermore, sufficient evidence exists that a healthy and pleasing work environment improves our mood, and has a positive effect on our immune system and physical health (see 2.4.1; 2.4.7). This, in turn, contributes to our overall well-being. Environmental well-being, therefore, is regarded as an important building block of employee well-being. The inclusion of this component of well-being was also

discussed in section 6.3.2.7. Table 6.16 below explains the proposed component of environmental well-being, as well as all its sub-components. The ratings provided by validation panel members are also included.

Table 6.16 Validation of component 2 G: environmental well-being (n=6)

2 G	Component 2 G: Environmental well-being	EC	UC	NN
2G.1	Environmental well-being is an important dimension of human well-being.	4	1	0
2G 2	<i>Environmental well-being entails/includes:</i>			
2G 2.1	Physical environmental factors such as air quality, clean water, proper ventilation, etc., which impact on one's well-being	6	0	0
2G 2.2	Social environmental factors such as relations at home; relations at work; a discrimination-free and fear-free work environment, which impact on our well-being	5	1	0
2G 2.3	Ergonomics (designing/arranging workspaces, products and systems to fit the people using them, ensuring sufficient space, lighting, ventilation, support, etc.)	4	2	0
2G 2.4	External environmental influences (e.g. family, society, politics, war, the economy, etc.) impact on our well-being	5	1	0
2G 2.5	A positive work environment has a positive impact on our performance	5	1	0
2G 2.6	A positive work environment has a positive impact on our behaviour	5	1	0
2G 2.7	A positive work environment has a positive impact on our motivation to act	5	1	0
2G 2.8	A positive work environment reduces our stress levels	5	1	0
2G 2.9	Our direct environment facilitates or discourages interactions with colleagues, family and others	5	0	1
2G 2.10	Pleasant and healthy surroundings contribute to personal fulfilment	6	0	0
2G 2.11	A pleasant and healthy work environment improves our mood	5	1	0
2G 2.12	A pleasant and healthy work environment positively affects our immune system	5	1	0
2G 2.13	A pleasant and healthy work environment positively affects our physical health	5	1	0
2G 2.14	Living and working in a safe environment improve our well-being	6	0	0
2G 2.15	Working in a stimulating environment contributes to our well-being	5	1	0
2G 2.16	Noise levels impact on our well-being	5	1	0

Interpretation of the results:

The component and sub-components of environmental well-being were rated as “Essential” or “Useful” by more than 75% of the validation panel members. This rating was an indication that environmental well-being and its subcomponents are important for our well-being. Only one member rated sub-component 2G 2.9 (*“Our direct environment facilitates or discourages interactions with colleagues, family and others”*), as “Not Necessary”. However, it was emphasised in the literature that our environment includes our social environment, and the impact that people within our environment have on our well-being. Furthermore, one member represents less than 25% of the validation panel members, and thus this sub-component was retained in the final proposed framework. No additional comments were made by any of the validation panel members.

6.5.2.3.2 H Component 2 (H): intellectual well-being

Intellectual well-being emerged as an important dimensions of our well-being in the literature. It was pointed out in Chapter 2 (see 2.4.8) that, to live a successful life, we have to maintain our intellectual well-being (see 2.4.8; 3.1.1; 6.3.2.9). Intellectual activities expand our knowledge, keep our minds informed and flexible, and is therefore regarded as important to our overall well-being as our physical health (see 2.4.8). Based on these arguments, intellectual well-being is regarded as an essential component of the well-being of employees of SA public HEIs, and hence I included it as a component in the integrated employee well-being framework for SA public HEIs that I designed.

Table 6.17 below explains the proposed component of intellectual well-being, as well as its sub-components. The outcome of the validation by validation panel members is also provided.

Table 6.17 Validation of component 2 H: intellectual well-being (n=6)

2 H	Component 2 H: Intellectual well-being			
		EC	UC	NN
2H.1	Intellectual well-being is an important dimension of human well-being.	4	2	0
2H 2	<i>Intellectual well-being entails/includes:</i>			
2H 2.1	Participation in scholastic, cultural and community activities	5	1	0
2H 2.2	Valuing creativity, curiosity and lifelong learning	5	1	0
2H 2.3	Enabling one to live a successful and stimulating life	4	2	0
2H 2.4	Expanding our knowledge and skills	4	2	0
2H 2.5	Sharing our knowledge and skills	5	1	0
2H 2.6	Keeping our minds flexible, informed and engaged	5	1	0
2H 2.7	Improving our mindfulness (ability to live in, and focus on the present moment)	5	0	1
2H 2.8	Stimulating and improving the health of our brains and preventing mental decline	5	1	0

Interpretation of the results:

From these ratings, it is clear that the component of intellectual well-being and all its sub-components were regarded as either “Essential” or “Useful” by more than 75% of the validation panel members, who rated these features as “Essential” or “Useful”. Only one member of the panel rated sub-component 2H 2.7 (*“improving our mindfulness”*) as “Not Necessary”. However, improving our mindfulness relates closely to the concept of “flow”, which was emphasised in the literature (see 2.3.3). Furthermore, since one member represented less than 25% of the validation panel members, this sub-component was retained in the final framework. No additional comments were received from any of the validation panel members pertaining to this component.

6.5.2.3.2 I Component 2 (I): occupational well-being

Occupational well-being emerged as an important dimension of employee well-being throughout the literature (see 2.4.9). A positive attitude is displayed when we are satisfied at work and enjoy our work, and as a result we tend to be more engaged in our work (see 2.4.9; 3.2.7). Work also provides a sense of meaning and purpose in our lives (see 2.3.8.3; 3.1.1; 3.2.7).

Thus, occupational well-being is regarded as a vital component of employee well-being, and as such I included it in my integrated employee well-being framework for SA public HEIs.

Table 6.18 below explains the proposed component of occupational well-being, as well as all its features (see 2 I 1 - 2 I 2.49.6). Furthermore, the ratings of validation panel members are listed.

Table 6.18 Validation of component 2 I: occupational well-being (n=6)

2 I	Component 2 I: Occupational well-being	EC	UC	NN
2I.1	Occupational well-being is an important dimension of human well-being.	4	2	0
2I. 2	<i>Occupational well-being entails/includes:</i>			
2I 2.1	Using our skills, gifts and talents at work to enrich our lives and give purpose to our lives	4	2	0
2I 2.2	Performing meaningful work	6	0	0
2I 2.3	Occupational/job satisfaction (enjoying our work and finding it stimulating and rewarding)	5	1	0
2I 2.4	Job security	6	0	0
2I 2.5	Being engaged at work	6	0	0
2I 2.6	Work/job characteristics affect our well-being	5	1	0
2I 2.7	Having autonomy	4	2	0
2I 2.8	Being competent to do one's work	4	2	0
2I 2.9	Aspiring to be the best you that you can be at the workplace	5	1	0
2I 2.10	Sufficient opportunities for learning, personal growth/development	5	1	0
2I 2.11	Sufficient opportunities for promotion/career advancement/job progression/talent management	4	2	0
2I 2.12	Work environment that facilitates interactions with colleagues, peers, supervisors, stakeholders, etc.	4	2	0
2I 2.13	Successful conflict management at work	5	1	0
2I 2.14	Healthy, supportive relations with supervisors, peers and stakeholders, etc.	5	1	0
2I 2.15	Healthy, positive relations with all stakeholders	5	1	0
2I 2.16	Having high morale at work	5	1	0
2I 2.17	Experiencing positive emotions and having positive experiences at work	5	1	0
2I 2.18	Creating "flow" whilst working ("flow" = a state of concentration and engagement when completing a task that requires concentration, and which challenges your skills/becoming absorbed in what you are doing)	5	0	1
2I 2.19	Positive attitude about your work	5	1	0
2I 2.20	Relaxed, enabling work environment	5	0	1

2I 2.21	Work-life balance	5	1	0
2I 2.21.1	Balance between work and family life	5	1	0
2I 2.21.2	Time to switch off from work and relax/recover from work (i.e. balance between work and leisure/work and recovery from work)	5	1	0
2I 2.21.3	A work environment that allows for successful work:life integration	5	1	0
2I 2.22	Having a manageable workload	5	1	0
2I 2.23	There should be a balance between job demands and job resources in the workplace	5	0	1
2I 2.24	Being suitable/fit for the job you have been appointed for	5	1	0
2I 2.25	Work provides a sense of meaning and purpose	5	1	0
2I 2.26	Performing well in your job	5	1	0
2I 2.27	Achieving the goals related to your job	4	2	0
2I 2.28	Feeling "part of" the organisation (a culture of inclusiveness at the workplace)	5	1	0
2I 2.29	Working in a safe environment	5	1	0
2I 2.30	Working in a peaceful environment	4	1	1
2I 2.31	Working in a pleasant environment	5	1	0
2I 2.32	Working in an appreciate environment	5	1	0
2I 2.33	Working in an environment where employees are valued	5	1	0
2I 2.34	Working in a stimulating work environment	5	1	0
2I 2.35	Working in a supportive work environment	5	1	0
2I 2.36	Working in an environment free from unnecessary stress	5	0	1
2I 2.37	Working in a discrimination-free environment (where there is no discrimination based on race, religion, gender, disability, etc.)	5	1	0
2I 2.38	Working in an environment where leaders are ethical	5	1	0
2I 2.39	Working in an environment where all employees are treated fairly	5	1	0
2I 2.40	Working in an environment where all employees are treated equally	5	1	0
2I 2.41	Being open to change in the institution	5	1	0
2I 2.42	Being willing to learn new skills to perform your job more effectively	5	1	0
2I 2.43	Having a positive/conducive work climate/organisational culture	5	1	0
2I 2.44	Combatting/successfully managing normal levels of stress at work	5	1	0
2I 2.45	Being paid fairly for the level of work you perform	5	1	0
2I 2.46	Sufficient performance/reward systems in place	5	1	0
2I 2.47	Experiencing high morale at work	5	1	0
2I 2.48	Working in an environment where leaders lead by example	5	1	0
2I 2.49	Senior/line managers play an important role in both employee and organisational well-being	5	1	0
2I 2.49.1	Senior/line managers can contribute to positive relations with employees	5	1	0
2I 2.49.2	Senior/line managers can contribute to improving the organisational culture (amongst others through ethical leadership, caring for employees, being committed to and positive about the organisation)	5	1	0
2I 2.49.3	Senior/line managers have an important role to play in motivating employees (amongst others by believing in them, inspiring them and leading by a good example)	5	1	0
2I 2.49.4	Senior/line managers have an important role to play in improving employees' performance (amongst others by motivating them,	5	1	0

	believing in them, building their self-esteem, and supporting them to perform better)			
2I 2.49.5	Senior/line managers play an important role in increasing employees' levels of engagement (amongst others by motivating them, and making them feel part of the organisation)	5	1	0
2I 2.49.6	Senior/line managers have an important role to play in increasing employees' well-being (amongst others by treating them fairly and equally, motivating them, valuing and appreciating them, allowing them sufficient opportunities for growth and development, and truly caring about them)	5	1	0

Interpretation of the results:

More than 75 % of the panel members rated the component occupational well-being and its 49 sub-components as “Essential” or “Useful” (see Table 6.18 above).

Sub-components 2I 2.18 (*“creating flow whilst working”*), 2I 2.20 (*“relaxed, enabling work environment”*), 2I 2.23 (*“there should be a balance between job demands and job resources in the workplace”*), 2I 2.30 (*“working in a peaceful environment”*) and 2I 2.36 (*“working in an environment free from unnecessary stress”*) were regarded as “Not Necessary” by one validation panel member. However, all of these sub-components emerged as important features of occupational well-being from the literature (see 2.4.9; 2.3.3; 3.2.2; 3.4.3). They were therefore retained in the final proposed framework. No panel members made any additional comments pertaining to the component of occupational well-being.

6.5.2.3.3 Component 3: SA public HEIs should develop clear employee well-being policies and procedures to guide their well-being programmes and facilitate their well-being efforts

It was continuously emphasised in the literature that organisations should have clear well-being policies and procedures to guide their well-being strategies and to facilitate their well-being programmes (see 3.2.19; 3.2.24). Well-being policies should assist in ensuring that employees are supported in the workplace, and that the effects of work-related stress on them are minimised (see 3.2.19). The inclusion of this component related to employees' well-being was also discussed in section 6.3.3.

Table 6.19 below explains the proposed component and sub-components of having policies and procedures to guide the design and facilitate the implementation of well-being programmes of SA public HEIs, as well as all their features (see 3.1 - 3.9). The outcome of the validation process is also indicated.

Table 6.19 Validation of component 3: SA public HEIs should develop clear well-being policies and procedures to guide their well-being programmes and facilitate their well-being programmes (n=6)

3	Component 3: SA public HEIs should develop clear employee well-being policies and procedures to guide and facilitate their well-being programmes and facilitate their well-being efforts			
		EC	UC	NN
3.1	A clear policy/policies and procedure(s) on employee well-being should be developed by each SA public HEI, to guide and facilitate their employee well-being efforts	5	1	0
3.2	SA public HEIs' employee well-being policies should be guided by applicable national health and well-being legislation, frameworks, standards, strategies and policies (e.g. the SA Constitution, occupational health and safety legislation, labour and anti-discrimination legislation, etc.)	5	1	0
3.3	SA public HEIs' employee well-being policies should be aligned with the institution's mission, vision, values and strategic plans	5	1	0
3.4	SA public HEIs' employee well-being policies should be aligned with other applicable institutional policies	5	1	0
3.5	All well-being programmes/efforts of SA public HEIs should be aligned with and guided by the strategic direction provided via the institution's well-being policy, as well as its vision, mission, values and strategic plans	5	1	0
3.6	SA public HEIs should identify all the different stakeholders in employee well-being, and should involve/consult them in the development of policies/procedures on employee well-being (e.g. unions, HR, employees, Institutional Forums, etc.)	5	1	0
3.7	SA public HEIs should develop an integrative process that involve employees in ongoing conversations about the promotion of their health and well-being	5	1	0
3.8	Buy-in should be obtained from all SA public HEIs' institutional stakeholders (e.g. Management, unions, HR, employees, etc.) to ensure the successful implementation of any employee well-being policy	5	0	1
3.9	All institutional well-being policies should be made available on SA public HEIs websites/electronic databases, or should be shared via any other appropriate communication media, (including, but not limited to e-mail, wellness days, workshops, awareness sessions, road shows, etc.), for employees to acquaint	5	0	1

	themselves with the its content; to ask questions about the policy; and to adhere to it.			

Interpretation of the results:

The results with a bearing on the importance of SA public HEIs developing clear employee well-being policies and procedures to guide their well-being programmes and facilitate their well-being efforts, indicate that more than 75 % of the validation panel members rated this component and all its sub-components as “Essential” or (“Useful”) (see Table 6.19 above).

Sub-components 3.8 (*“Buy-in should be obtained from all SA public HEIs’ institutional stakeholders, e.g. management, unions, HR, employees, etc., to ensure the successful implementation of any employee well-being policy”*) and 3.9 (*“All institutional well-being policies should be made available on SA public HEIs websites/electronic databases, or should be shared via any other appropriate communication media, including, but not limited to e-mail, wellness days, workshops, awareness sessions, road shows, etc., for employees to acquaint themselves with the content; to ask questions about the policy; and to adhere to it”*) were rated by one member (i.e. less than 25% of the participants) as “Not Necessary”. However, both these features were emphasised in the literature (see 3.2.19; 3.2.24; 6.3.3), and thus were retained in the integrated employee well-being framework.

6.5.2.3.4 Component 4: SA public HEIs should each have a clear employee well-being strategy

It was emphasised in the literature that organisations should have clear well-being strategies, guided by their well-being policies, to inform and support their well-being programmes, and to encourage employees to adopt healthy habits both at home and at work (see 3.2.19; 3.2.24). Furthermore, employers are relying on their well-being strategies to assist in building robust and healthy workforces (see 3.2.19; 6.3.4).

The importance for organisations to have a clear employee well-being strategy in place, also emerged from the empirical study conducted (see 5.4.8; 5.4.11), and was

discussed in section 6.3.4. Hence, is regarded as a vital component impacting on the well-being of employees of SA public HEIs, and it was thus included in the integrated employee well-being framework for SA public HEIs.

Table 6.20 below explains the proposed component and sub-components of having a clear employee well-being strategy, as well as all its features (see 4.1 - 4.15 below). The ratings provided by each validation panel member are also provided.

Table 6.20 Validation of component 4: Importance of SA public HEIs having clear employee well-being strategies in place (n=6)

4	Component 4: SA public HEIs should have a clear employee well-being strategy	EC	UC	NN
4.1	SA public HEIs should develop clear well-being strategies, guided by each institution's well-being policy, as well as its vision, mission, values and strategic plans	5	1	0
4.2	SA public HEIs should involve employees across all levels in the development of their well-being strategies, to ensure that their voices are clearly heard in the process	4	2	0
4.3	SA public HEIs could consider benchmarking with other HEIs, both nationally and internationally, on the contents of their well-being strategies to determine and apply best practice in the development of their own well-being strategies	5	1	0
4.4	SA public HEIs' well-being strategies should provide guidelines on the establishment of effective employee well-being programmes to successfully execute their well-being efforts	5	1	0
4.5	SA public HEIs' well-being strategies should guide the implementation of all their employee well-being initiatives	5	1	0
4.5.1	SA public HEIs' well-being strategies should clearly spell out the strategic thrusts related to employee well-being	5	1	0
4.5.2	SA public HEIs' well-being strategies should clearly spell out the principles adopted related to their employees' well-being	5	1	0
4.5.3	SA public HEIs' well-being strategies should clearly spell out the objectives related to their employees' well-being	5	1	0
4.5.4	SA public HEIs' well-being strategies should provide for the development of an employee well-being framework to guide the implementation of all institutional well-being efforts	5	1	0
4.5.5	SA public HEIs' well-being strategies should provide for an institutional implementation plan to be compiled to guide the implementation of their well-being programmes/efforts	5	1	0
4.6	SA public HEIs' well-being strategies should clearly spell out their stances on and theoretical frameworks related to employee well-being	4	2	0

4.7	SA public HEIs' well-being strategies should clearly spell out the dimensions of employees' well-being to be addressed via their different well-being programmes (e.g. physical, emotional, psychological (mental), social, financial, spiritual, well-being, etc.)	5	1	0
4.8	SA public HEIs' well-being strategies should support the objectives of the institutions' well-being programmes	5	1	0
4.9	SA public HEIs' well-being strategies should contain clear goals in terms of each well-being objective set	5	1	0
4.10	SA public HEIs' well-being strategies should be clear on how the effectiveness of their strategies and specific well-being programmes will be monitored and evaluated (e.g. through reliable, validated tools such as questionnaires, annual surveys, interviewing employees, evaluating employees' positive mood, negative mood and life satisfaction levels, etc.)	5	1	0
4.11	SA public HEIs' well-being strategies should be clear on how regularly the effectiveness of their employee well-being strategies and programmes will be monitored and evaluated (e.g. each semester, annually, etc.)	5	1	0
4.12	SA public HEIs' well-being strategies should be adapted, based on outcomes and recommendations flowing from the regular monitoring and evaluation of their well-being programmes	5	1	0
4.13	SA public HEIs' well-being strategies should constantly be monitored against, and aligned with the latest global trends in, and research on employee well-being, as applicable to the institution	5	1	0
4.14	SA public HEIs' well-being strategies should provide guidelines for the sustainable implementation of the institution's well-being programmes.	5	1	0
4.15	SA public HEIs could consider making their well-being strategies available on the institution's website/electronic database, or share it via any other appropriate communication media, (including, but not limited to, e-mail, wellness days, workshops, awareness sessions, road shows etc.), for employees to acquaint themselves with the content of the strategies; to ask questions about the strategy, etc.	4	2	0

Interpretation of the results:

All validation panel members (i.e. 100 %) rated the component of occupational well-being and all its sub-components as “Essential” or “Useful”. This outcome, together with the findings from the literature review, document analysis conducted, and the responses received from participants in the empirical study related to employee well-being within SA public HEIs, further emphasised the importance of occupational well-being as an important dimension of our well-being. This component and all its sub-components therefore were retained in the integrated employee well-being framework.

6.5.2.3.5 Component 5: SA public HEIs should develop effective well-being programmes addressing all the dimensions of their employees' well-being in an integrated manner

The importance of employee well-being, and employers having to take care of their well-being to benefit both employees and their organisations, was confirmed in the literature (3.2.24; 3.4; 3.4.1). To this effect, it was emphasised that organisations should develop employee well-being programmes that address the health and well-being needs of their employees in an integrated manner (see 3.4; 3.2.24; 3.6).

Table 6.21 below explains the proposed component and sub-components of developing effective well-being programmes to address all the dimensions of employees' well-being in an integrated manner.

Table 6.21 Validation of component 5: developing effective well-being programmes to address all the dimensions of employees' well-being in an integrated manner (n=6)

5	Component 5: SA public HEIs should have effective employee well-being programmes addressing all the dimensions of their well-being in an integrated manner	EC	UC	NN
5.1	SA public HEIs should develop effective employee well-being programmes guided by their well-being policies and strategies	5	1	0
5.2	SA public HEIs should consider benchmarking with other HEIs, both nationally and internationally, on the contents of their well-being programmes, to determine and apply best practice in the development and application of their own well-being programmes	5	1	0
5.3	Employees across all levels should be involved in the development of employee well-being programmes, as well as in the monitoring and evaluation of the effective thereof, to ensure that their voices are clearly heard in the process	4	2	0
5.4	SA public HEIs' well-being programmes should address all the dimensions of their employees' well-being (i.e. their emotional, physical, social, psychological, financial, environmental, spiritual, intellectual and occupational well-being)	5	1	0
5.5	SA public HEIs' well-being programmes should contain clear goals in terms of each of the dimensions of their employees' well-being, and how (by which means) these will be addressed	4	2	0
5.6	SA public HEIs' well-being programmes should address all the dimensions of their employees' well-being in an integrated manner, and not fragmentedly/in silos	5	1	0

5.7	The effectiveness of SA public HEIs' well-being programmes (as contained in their well-being strategies) should be regularly monitored and evaluated.	5	1	0
5.7.1	SA public HEIs' well-being strategies should make provision for the development of an institutional employee well-being monitoring and evaluation framework	5	1	0
5.7.2	SA public HEIs' well-being strategies should clearly spell out how the effectiveness of their well-being programmes will be monitored and evaluated	5	1	0
5.7.3	SA public HEIs' well-being strategies should clearly spell out the stakeholders to monitor and evaluate the effectiveness of their well-being programmes.	5	1	0
5.7.4	SA public HEIs' well-being strategies should clearly spell out how regularly the effectiveness of their well-being programmes will be monitored.	5	1	0
5.7.5	SA public HEIs' well-being strategies should clearly spell out by which means the effectiveness of their well-being programmes will be monitored.	5	1	0

Interpretation of the results:

This component and all of its subcomponents were rated by all the participants (i.e. 100 %) as “Essential Component” or “Useful Component”. The importance of organisations having effective employee well-being programmes in place that address all the dimensions of their well-being in an integrated manner, was continuously emphasised in the literature, and also in section 6.3.5. Hence, this component and all its sub-components were retained in the final proposed employee well-being framework.

6.5.2.3.6 Component 6: institutional/organisational culture, climate and values should create and enabling environment for employees of SA public HEIs to flourish

It has emerged from the literature review that an inclusive, functional and positive institutional culture and climate should be established by organisations for their employees to feel part of the organisation (see 2.3.7.1; 3.3; 3.5). This also would increase employees' commitment to the organisation, and their willingness to go the extra mile for the organisation (see 3.3; 3.5). Hence, it is vital to establish a supportive institutional culture. Furthermore, institutional values should be lived, and should create an enabling environment for employees to flourish (see 3.2.23).

Table 6.22 below lists the proposed component and sub-components of institutional/organisational culture, climate and values required to create an enabling environment for employees of SA public HEIs to flourish (see 6.1 - 6.21). Furthermore, the outcome of the validation of this component and its sub-components is provided.

Table 6.22 Validation of component 6: institutional/organisational culture, climate and values of SA public HEIs should create an enabling environment for their employees to flourish (n=6)

6	Component 6: The institutional/organisational culture, climate and values of SA public HEIs should create an enabling environment for employees to flourish	EC	UC	NN
6.1	Institutional culture includes, amongst others, relationships, traditions, culture and the climate/environment (positive or negative) of the institution	5	1	0
6.2	Employees are enabled to flourish in an institution where the institutional culture is positive	5	1	0
6.3	Employees are enabled to flourish in an institution where the institutional culture is functional	5	1	0
6.4	Employees are enabled to flourish in an institution where they have positive and functional relations with colleagues, supervisors and stakeholders	5	1	0
6.5	Employees are able to flourish in a discrimination-free institution (where they are not discriminated against based on, amongst others, their race, age, culture, religion, disability, social status, etc).	5	1	0
6.6	Employees are able to flourish in an institution where there is no dysfunctional power or unhealthy hierarchies	5	1	0
6.7	Employees are able to flourish in an institution where the institutional culture creates an enabling work environment conducive to work and employee well-being	5	1	0
6.8	Employees are able to flourish in an institution where the institution's traditions reflect the demographics of the institution	5	1	0
6.9	Employees are able to flourish in an institution where the institution's traditions are aimed at uniting employees	4	2	0
6.10	Employees are able to flourish in an institution where they are regarded as important and valuable	5	1	0
6.11	Employees are able to flourish in an institution where they are well cared for	4	2	0
6.12	Employees are able to flourish in an institution that prioritises and addresses all the dimensions of their well-being in an integrated manner	4	2	0
6.13	Employees are able to flourish in an institution where there is mutual trust	5	1	0

6.14	The institutional culture and climate of an institution is determined by the various internal (e.g. management, employees, supervisors, teams, unions) and external (e.g. Council, the community, partners, government, society) stakeholders	5	1	0
6.15	The dynamics created within the institutions by a smaller group of employees can eventually facilitate a movement towards a more positive (functional) culture	5	1	0
6.16	Commitment is required from all stakeholders to transform a negative institutional culture and climate into a positive institutional culture/climate	5	1	0
6.17	SA public HEIs should put measures in place to regularly monitor and evaluate the institutional culture/climate on an ongoing basis (e.g. through communities of practice, surveys, questionnaires, online forums, interviewing/ discussion sessions with employees, exit interviews, institutional culture audits, appreciative inquiry sessions, etc.)	5	1	0
6.18	SA public HEIs should involve their employees in the continuous monitoring and evaluation of the institutional culture/climate	5	1	0
6.19	SA public HEIs should communicate the outcome of all institutional culture monitoring and evaluation processes to all institutional stakeholders, including employees, unions, Management, Council and its appropriate standing committees.	5	1	0
6.20	SA public HEIs should build on strengths in terms of the institutional culture, as identified from monitoring and evaluation processes, and should work actively towards addressing any possible identified areas of improvement.	5	1	0
6.21	SA public HEIs should apply the principles of positive psychology, flourishing theory and well-being theory to create a positive institutional climate, and to recognise their employees as human beings – thereby enabling their employees to flourish	5	1	0

Interpretation of the results:

The results with a bearing on the importance of SA public HEIs establishing a positive, functional organisational culture, climate and values that contribute to an enabling environment within which their employees can flourish, show that all validation panel members (i.e. 100 %) rated this component and all its sub-components as “Essential” or “Useful” features (see Table 6.22 above). The importance of organisational culture, climate and values in creating an environment for employees to flourish also constantly emerged from the literature, and was discussed in section 6.3.6. Hence, this component and all its sub-components were retained in the integrated employee well-being framework.

6.5.2.3.7 Component 7: role-players in the well-being of employees of SA public HEIs

It has become clear from the literature review and document analysis process conducted that there are several role-players worldwide in people's health and well-being, such as governments, universities, society and communities (see 3.4.19). Furthermore, it was emphasised in the literature and via responses received from the empirical study that all the different role-players should work together closely towards enhancing the well-being of employees (see 3.4; 3.4.19).

The component of supportive role-players in employees' well-being was regarded as important, and was therefore included in my integrated employee well-being framework for SA public HEIs.

Table 6.23 below provides the proposed component of the role-players in the well-being of employees of SA public HEIs (see 7.1 - 7.3.6), as well as the ratings of validation panel members.

Table 6.23 Validation of component 7: role-players in the well-being of employees of SA public HEIs (n=7)

7	Component 7: Different role players in the well-being of employees of SA public HEIs			
		EC	UC	NN
7.1	Government, society and the community must take responsibility for employees of SA public HEIs' well-being	5	1	0
7.1.1	Government should establish effective health and well-being guidelines towards improving the health and well-being of their citizens	4	2	0
7.1.2	Institutions should be held accountable by Government for implementing health and well-being initiatives, as guided by national policy	5	1	0
7.1.3	Government should provide efficient and affordably health systems for its citizens	5	1	0
7.1.4	Government, society and communities should interact with one another, and with SA public HEIs, on issues pertaining to employees' health and well-being needs, and on systemic challenges associated with their well-being that would serve the	5	1	0

	purpose of integration of well-being practices in the best possible way			
7.2	SA public HEIs have a responsibility for their employees' well-being	5	1	0
7.2.1	SA public HEIs should create healthy, sustainable working, living and learning environments for their employees	5	1	0
7.2.2	SA public HEIs should show their employees that they care about them and their well-being, and that they are serious about optimising their well-being at all levels	5	1	0
7.2.3	SA public HEIs should educate employees about the factors impacting on their holistic well-being, and how they can take control of and improve their well-being by taking preventative measures and adopting a healthy lifestyle (via, amongst others, their websites, electronic media, e-mail, awareness sessions, workshops, wellness days, road shows, electronically and physically distributed material such as pamphlets, booklets, and relevant research articles)	5	1	0
7.2.4	SA public HEIs should incorporate values and principles in their vision, mission and strategic plans that emphasise the promotion of their employees' well-being	5	1	0
7.2.5	SA public HEIs should both model and test their employee well-being approaches for the benefit of their own employees, but also the broader community, and society at large	4	2	0
7.2.6	SA public HEIs should educate employees about the different dimensions of their well-being (i.e. their emotional, physical, social, psychological [mental], financial, environmental, spiritual, intellectual and occupational well-being)	5	1	0
7.2.7	SA public HEIs should have a clear policy guiding their employees' well-being	5	1	0
7.2.8	SA public HEIs should have a clear strategy guiding their employees' well-being	5	1	0
7.2.9	SA public HEIs should put effective well-being programmes in place to address all the dimensions of their employees' well-being, and in an integrated manner	5	1	0
7.2.10	SA public HEIs should involve their employees in the development of their well-being policies, strategies and programmes, and the evaluation of their effectiveness	5	1	0
7.2.11	SA public HEIs should interact with government, society, communities, other HEIs, and their employees on issues pertaining to employees' health and well-being needs, and on systemic challenges associated with their employees' well-being that would serve the purpose of integration of well-being practices in the best possible way	5	1	0
7.2.12	SA public HEIs should provide wellbeing-related services of a high quality that are sensitive to the diverse needs of employees	5	1	0
7.2.13	SA public HEIs should identify reliable, validated tools to constantly monitor the effectiveness and impact of their well-being policies, strategies and programmes	5	1	0
7.2.14	SA public HEIs should clearly communicate their well-being policies, strategies, programmes and events to employees via various means (e.g. e-mail, wellness days, workshops,	5	1	0

	awareness sessions, road shows, discussion forums, etc.), for employees to acquaint themselves with their contents; to ask questions about these, etc.			
7.2.15	SA public HEIs should create an enabling institutional culture and climate conducive to optimal well-being and flourishing	5	1	0
7.2.16	SA public HEIs should make available sufficient resources (e.g. human, financial and infrastructural resources) to offer and manage effective employee well-being programmes/efforts	5	1	0
7.2.17	SA public HEIs should make available social, sport, cultural and leisure facilities to their employees that encourage healthy living and reflect their diversity	5	1	0
7.2.18	SA public HEIs should realise the important role of senior and line managers in promoting organisational and employee well-being, and should train them in this regard (also see 2.1 2.48.1 to 2.1 2.38.5 of this framework)	5	1	0
7.3	Employees of SA public HEIs have a responsibility for their own well-being	6	0	0
7.3.1	Employees of SA public HEIs should educate themselves about the factors impacting on their holistic well-being.	6	0	0
7.3.2	Employees of SA public should take responsibility for their own well-being	6	0	0
7.3.3	Employees of SA public HEIs should take control of and improve their personal well-being by taking preventative measures and adopting a healthy lifestyle (e.g. eating healthily and exercising) to improve their own well-being	6	0	0
7.3.4	Employees of SA public HEIs should acquaint themselves with the contents of their institutions' well-being policies, strategies and programmes.	6	0	0
7.3.5	Employees of SA public HEIs should participate in well-being programmes and activities offered by their employers and aimed at enhancing their well-being.	5	1	0
7.3.6	Employees of SA public HEIs should interact with one another, and their employer, on issues pertaining to their health and well-being needs, and on systemic challenges associated with their well-being that would serve the purpose of integration of well-being practices in the best possible way	5	1	0

Interpretation of the results:

The results with a bearing on the importance of the different role players in the well-being of employees of SA public HEIs show that all the features were rated as “Essential” or “Useful” by all (100 %) of participants (see Table 6.23 above). The literature has also confirmed the various role-players in employees’ well-being, and that they should work together closely towards enhancing the well-being of employees globally (see 3.4; 3.4.19). This was also emphasised in

section 6.3.7. Hence, this component and all its sub-components were retained in the integrated employee well-being framework.

With regard to the different role-players in employees' well-being, a few comments were made by validation panel member 2 (VP 2). It was emphasised by this panel member that well-being is indeed the dual responsibility of both employee and employer. This was pointed out in the roles of the different role-players in my framework (see 7.2 & 7.3). The panel member further commented that employers should not load employees with so much work that they do not have time to attend to their own well-being. This aspect was already emphasised in the framework under the component of occupational well-being under sub-components 2 I 2.21 (*"work-life balance"*) and 2 I 2.22 (*"having a manageable workload"*).

Furthermore, validation panel member 2 (VP 2) emphasised that institutions are influenced by political, economic and social environments that are rapidly changing. This was also already included in the framework under the component of environmental well-being in sub-component 2 G 2.4 (*"External environmental influences, e.g. family, society, politics, war, the economy, etc., impact on our well-being"*). Hence, all of these comments were already addressed in the framework in the sections referred to above.

6.5.2.3.8 Nuanced guidelines for SA public HEIs on implementing the integrated employee well-being framework and their own well-being programmes and practices in a more integrated manner

The final section of the integrated employee well-being framework provided some nuanced guidelines for SA public HEIs. As indicated in Table 6.5 (section 6.5.1.2), it was proposed during the pilot validation survey by Validation Panel Member 3 (VP 3) that some nuanced guidelines to SA public HEIs on how the different components of this framework could be integrated in the workplace, would add value to the framework. VP 3 further proposed that it should be emphasised in these guidelines that fragmented practices related to employees' well-being should be avoided by SA public HEIs.

Furthermore, their well-being programmes should be based on their employees' needs, and should be developed in close collaboration with employees, in a process-oriented, rather than a programme-oriented approach. As indicated in Table 6.5, these aspects were aligned with the literature findings, and were regarded as valuable. As such, these guidelines (see 8.1 - 8.11 in Table 6.24 below) were developed specifically to guide SA public HEIs on how to implement the integrated employee well-being framework and their own well-being programmes and practices in a more integrated manner, towards the enhanced well-being of their employees.

The nuanced guidelines, and how they were rated by the panel of experts, are listed in Table 6.24 below. Since this section was added based on feedback from the validation panel members during the pilot validation, cross referencing to other relevant sections in the thesis where these components were discussed, are provided.

Table 6.24 Validation of nuanced guidelines to SA public HEIs (n=6)

8	Nuanced guidelines for SA public HEIs on implementing the integrated employee well-being framework and their own well-being programmes and practices in a more integrated manner in the workplace			
		EC	UC	NN
8.1	Since well-being is a process, and not a programme, SA public HEIs are urged to implement more process-oriented approaches to employees' health and well-being (see 1.5.2; 3.4.2; 3.5; 3.5.1).	4	2	0
8.2	In essence, although each employee should take responsibility for his/her own health and well-being, SA public HEIs should create an enabling environment that is conducive to employees' flourishing, taking cognisance of all the key components and sub-components of their well-being contained in this framework, i.e. they should: (i) think deeper about what employee well-being entails, and clearly define the concept of well-being, in collaboration with their employees; (ii) include the nine identified dimensions of well-being in their well-being programmes to ensure that they address employees' well-being holistically; (iii) develop clear well-being policies and procedures, (iv) strategies and (v) programmes that facilitate and guide employee well-being, and monitor and evaluate the effectiveness of their employee well-being policies, strategies and programmes on a regular basis; (vi) establish a positive, functional institutional culture/climate that enables employees to flourish; and (vii) be aware of, and take responsibility for their unique role in promoting the well-being of their employees, whilst being aware of	5	1	0

	others role players (e.g. government, society, communities, employees and others) in employees' well-being (see 2.4; 2.4.1 – 2.4.9; 3.1.1; 3.4.1; 3.5; 3.5.1).			
8.3	As emphasised in this framework, SA public HEIs should avoid fragmented practices and approaches to employee well-being at all cost, since such practices are patronising and prescriptive, and do not facilitate employees' holistic well-being (see 1.5.2; 2.2.4; 2.3.7.3).	5	1	0
8.4	SA public HEIs should apply a whole-person approach to employee well-being at individual (personal), relational and organisational levels by addressing all the dimensions of their well-being (i.e. their emotional, physical, social, psychological, spiritual, financial, intellectual, environmental and occupational well-being), in an integrated manner (see 1.5.2; 2.3.7.3; 2.4.1 - 2.4.9).	5	1	0
8.5	SA public HEIs should create space and opportunities for employees to flourish in close collaboration with employees, and based on employees' needs in terms of their health and well-being (see 2.2.4; 3.2.1; 3.2.19; 3.5; 3.5.1).	5	1	0
8.6	SA public HEIs should integrate theory, research, practice and policy in terms of employee well-being for purposes of determining the drivers of employee well-being, and to plan, direct and guide the implementation of employee health and well-being initiatives (see 1.5.2; 3.5.1; 3.2.19).	5	1	0
8.7	As advocated in this framework, SA public HEIs, in collaboration with their employees, should develop integrated, effective, measurable well-being tools for purposes of evaluating and improving their employees' overall well-being (see 3.2.17). Integrated approaches to employee well-being should include strategies and resources that provide employees with programmes, tools, activities, support, information, practices and processes that encourage them to apply healthy habits at work, but also at home (see 1.5.2; 2.4; 2.4.1; 3.2.4).	5	1	0
8.8	SA public HEIs should set clear goals in terms of the desired outcomes related to employees' well-being (see 5.4.12; 5.4.12.1). Furthermore, SA public HEIs should keep in mind that the evaluation of their employee well-being programmes requires rigorous designs that assess the combined effects of their well-being efforts. Employees, therefore, should be involved in the process of evaluating the employee well-being programmes offered by SA public HEIs, and such evaluations should be based on a reliable theoretical framework, and performed regularly (see 3.5.4.12; 5.4.12.1).	5	1	0
8.9	Flowing from such evaluations of the effectiveness of their employee well-being programmes (see 8.8 above), SA public HEIs, in collaboration with employees, should identify the strengths of their well-being practices, and continue to build on those strengths (see 2.3.7.1; 5.4.5; 5.4.5.1). Furthermore, SA public HEIs, in collaboration with their employees, should identify the barriers that hinder the efficiency of their employee well-being programmes, and implement effective, tested strategies towards improved employee well-being (see 3.2.17; 5.4.8; 5.4.8.1; 3.4.1).	5	1	0
8.10	SA public HEIs should consider creating an employee well-being forum/community of practice where the design, effectiveness and monitoring of their employee well-being programmes can be	5	1	0

	discussed openly, to the benefit of SA public HEIs and their employees (see 3.2.17;3.5).			
8.11	SA public HEIs should appoint experienced HR Directors/employee well-being overseers/facilitators who are acquainted with evidence-based problem-solving and learning approaches related to employees' well-being (see 5.4.5; 5.4.5.1; 5.4.1).	5	0	1

Interpretation of the results:

The results of the validation of the nuanced guidelines to SA public HEIs on implementing the integrated employee well-being framework and their own well-being programmes and practices in a more integrated manner in the workplace, show that more than 75 % of the validation panel members rated the nuanced guidelines to SA public HEIs as “Essential” or “Useful” (see Table 6.24 above). Sub-component 8.11 (*“SA public HEIs should appoint experienced HR directors/employee well-being overseers/facilitators who are acquainted with evidence-based problem-solving and learning approaches related to employees’ well-being”*) was rated by one validation panel member as “Not Necessary”. However, I regard it as important for SA public HEIs to appoint experienced employees within their employee well-being sections, as they would be able to best apply problem-solving and learning approaches pertaining to employees’ well-being. Since one validation panel member represents less than 25 % of the participants, I decided to retain this sub-component.

6.5.3 Summary of results of the validation process by validation panel members

The results of the validation survey can be summarised as follows:

- Component 1 (*“Defining the concept of well-being”*) and its sub-components were retained in the final integrated employee well-being framework. One validation panel member emphasised the importance for employees to have a clear understanding of what the concept of well-being entails, via a comment at the end of the section.
- Components 2A - 2 I (*“Dimensions/building blocks of well-being”*), as well as all their sub-components, were regarded as “Essential” or “Useful” by more than 75%

of the validation panel members, and thus were retained in the final proposed employee well-being framework. No suggestions and/or comments were received from any of the validation panel members pertaining to components 2A - 2I.

- Component 3 (*“SA public HEIs should develop clear employee well-being policies and procedures to guide their well-being programmes and facilitate their well-being efforts”*) and its nine sub-components, were retained in the final proposed integrated employee well-being framework. No additional comments were received from the validation panel members pertaining to component 3 and its sub-components.
- Component 4 (*“SA public HEIs should have a clear employee well-being strategy”*), and its 15 sub-components were regarded as “Essential” or “Useful” by more than 75% of the validation panel members, and thus were retained in the final proposed integrated employee well-being framework. No additional comments were received from any panel members pertaining to Component 4 or any of its sub-components.
- Component 5 (*“SA public HEIs should develop effective well-being programmes addressing all the dimensions of their employees’ well-being in an integrated manner”*) and all its sub-components were retained in the final proposed framework. No comments were received from any of the panel members related to Component 5 or its sub-components.
- Component 6 (*“Institutional/organisational culture, climate and values should create an enabling environment for employees of SA public HEIs to flourish”*) and its 21 sub-components, were regarded as “Essential” or “Useful” by more than 75% of the validation panel members, and thus were retained in the final integrated employee well-being framework. No additional comments were received pertaining to component 6 from any of the validation panel members.
- Component 7 (*“Role-players in the well-being of employees of SA public HEIs”*) and all its sub-components were retained in the final integrated employee well-being framework, based on the emphasis put on these role-players in the literature, and the favourable rating of this component and all its sub-components by the validation panel members.
- As proposed during the pilot validation survey (see 6.5.1.2, Table 6.5), nuanced guidelines were developed and added to the integrated employee well-being

framework for SA public HEIs to assist them in implementing the integrated employee well-being framework and their own well-being programmes and practices in a more integrated manner. The 11 guidelines provided also had been rated by the validation panel, and more than 75% of the panel members regarded all these guidelines as “Essential” or “Useful”. Hence, they were retained in the final integrated employee well-being framework.

The following additional comments were received from members of the validation panel, emphasising the favourable outcome of the validation process:

Validation Panel Member 1: *“A very comprehensive and detailed perspective on well-being. Well done!”*

Validation Panel Member 3: *“This was quite a comprehensive and detailed questionnaire that addressed all well-being-related areas.”*

Validation Panel Member 4: *“A very interesting exposition of the well-being model/framework developed!”*

All comments and inputs received by validation panel members during the pilot validation and the validation by the extended validation panel, were considered, and incorporated, where considered relevant. I applied the principles (feasibility, reach, effectiveness, transferability and sustainability) presented in Spencer *et al.*’s framework (2013) (which were originally designed to strengthen the evidence for public health practice, but was also found relevant for application within the SA public HEI domain) as a guiding tool when I planned and designed this integrated well-being framework for SA public HEIs (see 6.2). It assisted me in thinking deeper about the feasibility and reach of this framework; how effective and sustainable it would be; and whether it could be transferred to other contexts - although it was not the main aim of this study to establish transferability (see 4.6.2; 6.2).

As indicated in section 6.4, the components and sub-components of this integrated employee well-being framework developed for SA public HEIs were identified based on (i) the results obtained from the preliminary literature review performed, (ii) the baseline pilot study conducted amongst SA public HEIs; (iii) the extended literature review performed; (iv) analysis of various well-being programmes, models, frameworks, strategies and documents applied globally, and on a review of the current well-being programmes of SA public HEIs availed to me by the participants as part of the empirical research; (v) the results flowing from the empirical research conducted amongst 11 SA public HEIs, and (vi) the principles of positive psychology theory, well-being theory and flourishing theory, as well as other well-being theories such as appreciative inquiry, authentic happiness theory and hope theory, from which I harvested and applied certain relevant principles (see 2.3.9, Table 2.3). Finally, the ratings and comments of validation panel members received during both the pilot validation survey, and the second validation survey, were considered, and incorporated into the framework, where relevant, as discussed in this chapter. The final integrated employee well-being framework is presented in Chapter 7 (see 7.2.4.1).

6.6 SYNTHESIS

In this chapter, the major components and sub-components of the proposed integrated employee well-being framework for SA public HEIs in response to the sixth secondary research question, were presented. The proposed integrated employee well-being framework was presented in table format, followed by a discussion and motivation of each of the seven components and sub-components thereof (see 6.3.1 - 6.3.7). Cross-references to relevant sections in Chapters 1 to 5 were made in support of the discussions and motivations for inclusion of each of the components of the integrated employee well-being framework.

A detailed discussion of the validation process of the proposed integrated employee well-being framework then followed. The discussion focused on the design and distribution of the semi-structured questionnaire that was used for purposes of the evaluation of the proposed integrated employee well-being framework by the

validation panel members. The demographic profile of the validation panel members was provided, and the results of the validation process were discussed. As indicated, the validation was performed for quality assurance purposes and to answer the sixth secondary research question. The purpose of the validation performed by the panel of experts was to evaluate each of the components and sub-components of the framework, to determine their validity and reliability, and to provide comments related to these components and sub-components, for consideration, and for purposes of improving the integrated employee well-being framework.

The results of the validation of the proposed integrated employee well-being framework, its components and sub-components were analysed and discussed. The evaluation by validation panel members was done by means of the semi-structured questionnaire designed for this purpose (see Annexures N & Q). Comments and recommendations made by panel members were also discussed in terms of each component.

From the results, it is evident that the components and sub-components overall were rated favourably by members of the validation panel. Hence, it was decided to retain all of the components and sub-components of the proposed integrated employee well-being framework in the final integrated employee well-being framework. Some comments and recommendations made by validation panel members flowing from both the pilot validation survey and the extended validation by a validation panel were added to the final integrated well-being framework, which is the outcome of this study.

The research contribution of this study to the fields of higher education, industrial psychology, organisational development and well-being will be pointed out in Chapter 7. Furthermore, the conclusions reached, as well as the implications of the findings, will be discussed. The final outcome of the study in the form of a proposal for an integrated employee well-being framework for SA public HEIs will be presented, and the limitations of the study will be made clear.

The central themes addressed in this chapter are illustrated in Figure 6.6 below.

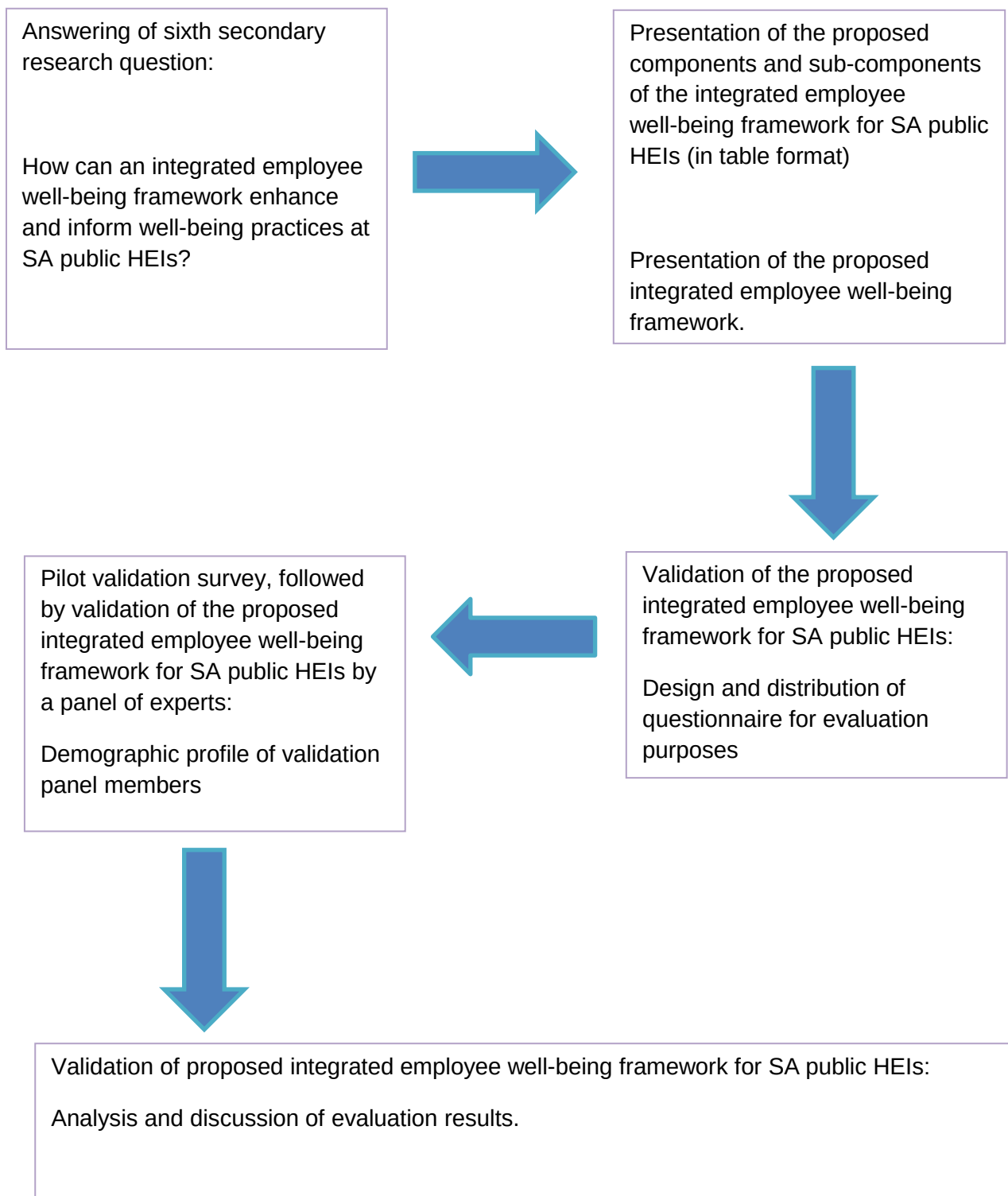


Figure 6.6: Central themes addressed in Chapter 6

CONCLUSIONS, IMPLICATIONS, RECOMMENDATIONS, LIMITATIONS AND CONTRIBUTIONS

7.1 INTRODUCTION

In Chapter 6, I motivated and discussed the components of the integrated employee well-being framework for South African public higher education institutions (HEIs)(see 6.3.1 - 6.3.7). The draft integrated employee well-being framework for SA public HEIs was presented (see 6.4). Furthermore, the results flowing from the validation of this framework by a panel of experts in a pilot validation, and a final validation, were discussed.

In this chapter, I discuss the conclusions reached by indicating how the research questions were answered in terms of the research findings. The implications of the research findings for SA public HEIs are discussed, and some recommendations for future research are made. Furthermore, I reflect on the contributions of this study towards the fields of higher education and employee well-being. The final integrated employee well-being framework for SA public HEIs is presented. Finally, the significance of the study is explained, and some limitations of the study are discussed.

7.2 CONCLUSIONS

Chapter 1 served as orientation to the study. The rationale for the study was stated, namely that due to the lack of research on an integrated employee well-being framework guiding the well-being efforts applied by SA public HEIs, a need for an integrated employee well-being framework for SA public HEIs emerged. Such an integrated employee well-being framework could guide SA public HEIs in putting systems, policies and practices in place to support employees' well-being; and could guide them to include and address in an integrated manner all the dimensions of employees' well-being as identified from the literature study (i.e. their physical, social, emotional, psychological, spiritual, financial, intellectual, environmental and

occupational well-being) (see 1.1; 2.4.1 - 2.4.9; 3.4). This absence of an integrated approach towards employees' well-being, encompassing all the dimensions of their well-being, cannot be afforded, as it is essential for purposes of establishing a flourishing employee component at SA public HEIs, and it impacts on the business outcomes of SA public HEIs (see 1.1.2).

I formulated research questions, stated the purpose and objectives of the study, and clarified the key concepts used in the study (see sections 1.2, 1.3 and 1.5). The philosophical and methodological paradigms were discussed (see 1.6.2 and 1.6.2), and the theoretical framework which was adopted for the study, and which outlined the research methodology that I applied in this study was introduced (see sections 1.6.3; 1.7). I also discussed my status, objectivity and role as researcher (see 1.8), elaborated on the ethical considerations that I applied during the study (see 1.9), and highlighted the significance of the study (see 1.11).

The rationale for this study resulted in the formulation of the primary research question and six secondary research questions, which guided the study (see section 1.2). The primary research question was:

How can employees of SA public HEIs' well-being be enhanced by means of an integrated well-being framework, aimed at addressing their well-being holistically?

In the next section, the conclusions reached and the implications of the research findings based on the research questions, are discussed.

7.2.1 First secondary research question: What is well-being, and how have the concept of and theories on well-being developed over the past few decades?

The first secondary research question led me to explore the concept of well-being, and how the concept and theories of well-being have developed over the past few decades. This was done by integrating the findings of an extensive literature review (local and international), document analysis (local and international), a pilot study conducted amongst four SA public HEIs, and a structured questionnaire survey (self-constructed) conducted amongst eleven participating SA public HEIs. It was necessary to ask this research question in order to determine the following:

- What is well-being, and which theories should be guiding my design of an integrated employee well-being framework for SA public HEIs (based on my literature review, and document analysis on the subject of well-being and well-being theories)?
- Do the opinions of human resources practitioners/employees responsible for well-being implementation at SA public HEIs relate to the concept and principles of well-being which support the rationale for this study?

Thus, in **Chapter 2**, I investigated the development of the concept of well-being, from hedonism (i.e. the notion that well-being = happiness), to holistic well-being and human flourishing (i.e. the notion that well-being entails much more than being happy)(see 2.2.1 – 2.2.5). From this theoretical analysis, I arrived at my own definition and understanding of how employees well-being should be addressed holistically and in an integrated manner (see 2.2.5).

The focus of Chapter 2 therefore was to come up with a theory-based definition of well-being (see 2.2.5); to contextualise well-being (see 2.1); discuss the different theories underpinning well-being and positive psychology (see 2.3.1 - 2.3.8.3); and to identify the building blocks (dimensions) of well-being (see 2.4.1 - 2.4.9). It was found that in recent years, the focus has shifted from studying the effect of negative emotions

on people's well-being, to the positive effects of positive emotions, and how these contribute to people's well-being (see 2.2.5). Hence, the positive principles of positive psychology were used as a "foundation theory" for this study (see 2.3.7.2). I also explored an integration of different well-being theories, and developed my own synthesis of what integrated well-being theory should entail (see 2.3.9) - namely that human flourishing requires living a well-balanced life, and addressing all the dimensions of one's well-being (see Table 7.1 below). Furthermore, it emphasises the importance of addressing all the dimensions of well-being in an integrated manner (see 2.3.9).

Sufficient evidence was found during the literature review and document analysis that the positive effects for organisations far outweigh the cost attached to investing time and money in their employees' well-being, and that it will deliver positive results and benefit the organisation far beyond the efforts and costs (see 3.2.24). Thus, organisations cannot afford **not** to invest in their employees' well-being. Finally, a synthesis was provided of the theories and dimensions related to well-being that I harvested from the literature review (see 2.3.9; 2.5), for purposes of designing a contextual framework for employees' well-being within SA public HEIs (see 7.2.3.4.1; Annexure T).

I further discovered that well-being is multi-faceted, and that there are various important dimensions of well-being, which are interrelated, and therefore should be addressed in an integrated manner to accomplish optimal well-being (see 2.4). These dimensions are listed in Table 7.1 below.

Table 7.1: Nine dimensions/building blocks of well-being identified from the literature (see 2.4.1 - 2.4.9)

Dimensions/building blocks of well-being
1. Physical well-being
2. Emotional well-being
3. Psychological (mental) well-being
4. Social well-being
5. Financial well-being
6. Spiritual well-being
7. Environmental well-being
8. Intellectual well-being
9. Occupational well-being

Each of these dimensions of well-being is discussed extensively in Chapter 2 (see 2.4.1 - 2.4.9). The implication is that these nine dimensions (building blocks) of well-being can be regarded as comprehensive and sufficient for addressing employees of SA public HEIs' well-being holistically, and in an integrated manner. Furthermore, I established from the empirical research that the opinions of human resources practitioners and employees responsible for the implementation of employee well-being practices at SA public HEIs supported the rationale for this study in terms of the absence of an integrated employee well-being framework aimed at addressing all the dimensions of employees' well-being (see 5.3.5; 5.3.5.1), and the absence of effective tools for monitoring and evaluating the effectiveness of their well-being programmes (see 5.4.9; 5.4.9.1). The nine dimensions of well-being were also regarded as essential by members of the validation panel in both the pilot validation survey and the second validation survey (see 6.5.2.3.2 A - 6.5.2.3.2 I). The implication is that the views of practising HR practitioners, industrial and educational psychologists and employee wellness specialists within public higher education institutions, as well as in private practice, in South Africa could be added to the views of the sources from the literature review to provide even greater motivation for the rationale for this study.

It also became clear in the discussion of the research results in Chapter 5 that SA public HEIs do not have a unified definition of the concept of well-being, and that none of them addresses all of the nine dimensions of well-being as identified from the literature (see 5.4.1.1; 5.4.4; 5.4.4.1). This is problematic, since a unified approach to the concept of employees' well-being would enable SA public HEIs to focus on the same principles of employees' well-being, and to address their well-being holistically and effectively. Furthermore, their approaches to employees' well-being are often compartmentalised, and not integrated (see 5.4.1 to 5.4.15). I therefore addressed all these gaps in the integrated employee well-being framework for SA public HEIs (see Annexure T). Furthermore, guidelines were provided to these institutions on how to implement the framework, to contribute positively to their employees' well-being (see section 8 of Annexure T).

7.2.2 Second secondary research question: What are the current global perspectives on workplace well-being and integrated well-being programmes?

The objective ensuing from the second secondary research question was to explore the current global perspectives on workplace well-being and integrated well-being programmes by means of an extensive literature review (local and international) and document analysis. It was necessary to ask this question in order to determine best practice in terms of global well-being perceptions and integrated well-being programmes, as such best practice guided me in terms of the well-being dimensions and aspects to be included in the design of the integrated employee well-being framework for SA public HEIs (according to the literature).

In **Chapter 3**, I discussed the concepts of a healthy workplace, and integrated well-being programmes, and explored, through the literature review and document analysis, what workplace health and well-being entailed, and how it could be improved (see 3.1; 3.1.1). I explored the causes of and factors influencing well-being (see 3.2), as well as the benefits of well-being at work for both individuals and their organisations (see 3.3). Furthermore, I identified and discussed various integrated well-being programmes (including well-being models, frameworks, guidelines, approaches,

strategies, charters and programmes) from the literature and document analysis that might best address employees' well-being in a holistic and integrated manner (see 3.4; 3.4.1 - 3.4.13). I also identified the possible strengths and weaknesses (gaps) pertaining to each of these well-being programmes, and discussed their applicability for SA public HEIs (see 3.4.1.11 – 3.4.13.1).

From the literature I discovered that there are noteworthy efforts by various institutions globally to improve the well-being of their employees (see 3.2.1 - 3.2.13), especially in terms of promoting employees' physical well-being. I also discovered that organisations worldwide acknowledge the importance of addressing their employees' well-being holistically and in an integrated manner (see 3.2.1; 3.2.2; 3.4.5; 3.4.6; 3.4.11; 3.4.12). However, not a single integrated well-being intervention could be found that addresses all of the nine dimensions of well-being as identified from the literature – also not at SA public HEIs, and this is the gap that I wished to address through this research. I also found that, amongst others, work-life balance (see 3.2.14), person-environment fit (see 3.2.21) and organisational culture (see 3.2.23) are important factors impacting on a person's well-being at work (see 3.1.1; 3.2). Furthermore, it was established that health and well-being efforts should be guided by workplace policies on health and well-being (see 3.2.19) and that, if health and well-being programmes are implemented effectively according to evidence-based principles (see 3.2.19), and if their effectiveness is measured accurately and continuously (see 3.2.17), they are most likely to improve workers' health and performance (see 3.1.1; 3.2). Table 7.2 below provides a summary of the strengths and gaps found through the literature review and document analysis in terms of integrated health and well-being programmes applied globally.

Table 7.2 Summary of strengths and weaknesses (gaps) found globally in integrated well-being programmes

Strengths
Noteworthy efforts to improve employees' physical well-being (see 2.4.1).
Emphasises (i) the importance of evaluating well-being models, based on the dynamic relationship and equilibrium among identified indicators, and (ii) that theoretical frameworks must be reviewed by organisations for developing and implementing best practices in health and well-being (see 3.2.17).
Emphasises the importance of a balance between job demands and job resources (see 3.2.4; 3.4.3).
Emphasises the importance of leisure and therapeutic recreation in establishing subjective well-being (see 3.4.4; 3.4.7).
Addresses the importance of positive emotions, engagement, relations, meaningful life/work and accomplishment for human flourishing (see 3.4.5).
Recognises the importance of recovery from work (see 3.4.7).
Addresses the importance of subjective well-being as an important component of overall well-being (see 2.2.5; 2.3.20).
Recognises the importance of having satisfied, engaged employees (see 3.2.3; 3.2.7).
Points out that partnerships with primary care mental health practitioners and teams providing therapy sessions may contribute towards the enhancement of employees' well-being (see 3.4.12).
Some international universities joined the network of Health Promoting Universities, showing their commitment to employee health and well-being (see 3.5). SA public HEIs should follow suit.
Weaknesses/possible gaps
Strong focus on either workplace well-being, or individual well-being (see 3.1.1). Thus, the interplay between workplace and individual well-being is not well established.
Found lacking in terms of addressing well-being holistically, i.e. addressing all nine dimensions of well-being – especially spiritual, emotional, financial, environmental and intellectual well-being (see 3.4.1 – 3.4.13).
Fragmented approaches to employee well-being, compartmentalising the different dimensions of well-being. Fails to provide evidence that employees' well-being is addressed in an integrated manner (see 2.2; 2.2.4 – 2.2.5).
Some models would be costly to implement (see 3.4.6), whilst affordability is an important consideration for SA public HEIs in these times of demands for free education, etc. (see 3.5.1)
Well-being programmes in organisations often are not supported by applicable well-being policies and strategies (see 3.2.19).
Some organisations do not have a clear well-being strategy, or framework, which results in a fragmented approach to employees' well-being, rendering efforts less effective (see 3.2.19).

These current global perspectives on well-being and integrated well-being programmes led to the third secondary research question asked pertaining to how SA public HEIs address their employees' well-being, as very limited research related to this aspect could be found during the literature review. This is discussed in section 7.2.3 below.

7.2.3 Answering of third, fourth and fifth secondary research questions

The third, fourth and fifth secondary research questions were related to the well-being programmes offered by SA public HEIs. These questions were answered by utilising a semi-structured, self-constructed questionnaire survey conducted amongst 11 SA public HEIs that were willing to participate in the empirical research (see Annexure J).

In **Chapter 4**, the research methods applied for the empirical research conducted were discussed. Eleven institutions completed the self-constructed questionnaire for the collection of qualitative data (see Annexure J & section 4.4.3.4.5). Inductive thematic analysis was applied to organise and summarise the collected qualitative data related to SA public HEIs' well-being programmes in an expressive manner (see section 4.5.1 - 4.5.13). Section 4.7 outlined the strategies that were applied to enhance the validity and the reliability of the qualitative research conducted.

Chapter 5 was devoted to a discussion of the research results that had been derived from the qualitative data collected during the fieldwork stage for purposes of addressing the third secondary research question. First, the occupational demographics of participants (i.e. HR practitioners/employees heading employee wellness sections at SA public HEIs) were reported (see Tables 5.10 and 5.11), and the response rate, analysis and interpretation of the results related to the third, fourth and fifth secondary research question were discussed (see 5.4.1 - 5.4.14).

7.2.3.1 Third secondary research question: How is employee well-being addressed at South African public higher education institutions?

The objective emanating from the third secondary research question was to determine how, or by which means, SA public HEIs addressed their employees' well-being. It was necessary to ask this question to determine:

- Whether SA public HEIs have employee well-being programmes in place.
- The efforts applied by SA public HEIs to enhance their employees' well-being.

It was determined that all the participating SA public HEIs realised the value and need for an employee well-being programme (see 5.4.2; 5.4.2.1), although some indicated that they did not have a formal well-being programmes in place, and that they sometimes had fragmented approaches to employees' well-being (see Table 5.14). Furthermore, most of their well-being efforts were aimed at improving employees' physical well-being, whilst, amongst others, some programmes, such as awareness sessions, Employee Assistance Programmes (EAPs), psychological services and stress and financial management workshops were indicated as being offered by some institutions (see 5.4.4; Table 5.16).

It thus was confirmed by the responses of research participants that employee well-being at SA public HEIs could be improved, as some did not have formalised well-being efforts, whilst others focused mainly on improving employees' physical health. All these gaps were addressed in the integrated employee well-being framework for SA public HEIs that was designed as an outcome of this study.

7.2.3.2 Fourth secondary research question: What are the current strengths and weaknesses of employee well-being programmes of SA public HEIs?

The objective emanating from the fourth secondary research question was to determine the current strengths and weaknesses of well-being programmes of SA public HEIs. It was necessary to ask this question in order to determine:

- The strengths and possible weaknesses pertaining to the well-being programmes applied by SA public HEIs to address their employees' well-being, and to include the identified strengths in the design of the integrated employee well-being framework for SA public HEIs, whilst addressing identified weaknesses.

Inductive thematic analysis was applied to organise and summarise the collected qualitative data in terms of the strengths and weakness of the well-being programmes of SA public HEIs in an expressive manner (see 4.5). Section 4.6 outlined the strategies that were applied to enhance the validity and the reliability of the qualitative research conducted.

I identified (from the empirical research conducted amongst SA public HEIs) the current strengths and weaknesses in terms of their well-being programmes, and clearly indicated the gaps in the integrated employee well-being framework in terms of, amongst others, the non-integration of their well-being programmes; lack of buy-in from employees and management; well-being activities often not being guided by well-being policies and strategies, and some SA public HEIs failing to evaluate the effectiveness of their well-being efforts, or not having formalised well-being programmes in place. Guidelines are provided in the integrated employee well-being framework on how to bridge these gaps (see Annexure T, section 8). The implication is that the views of the research participants pertaining to these aspects of well-being could be added to the views of the sources used in the literature review. This further strengthens the motivation for the rationale for this study.

I also established that the research participants from SA public HEIs indeed experienced several challenges regarding the application of their well-being efforts as a result of, amongst others, limited financial and human resources, and a failure to obtain employees' and management's buy-in (see 5.4.5; 5.4.5.1). One of the most important strategies is to educate management and employees on the benefits of establishing optimal well-being for individuals and the institution, and to implement well-being strategies such as valuing and appreciating employees (see 3.2.1), and involving them in the compilation of well-being policies and strategies (see 5.4.7; 5.4.7.1) - strategies that need not have immense financial implications (see 3.2.1; 3.2.10; 3.2.19).

7.2.3.3 Fifth secondary research question: How effective and integrated are the well-being programmes applied by SA public HEIs as compared to best practice world-wide, including integrated well-being programmes?

The objective emanating from the fifth secondary research question was to determine how effective and integrated the well-being programmes applied by SA public HEIs are, when compared to best practice world-wide, including integrated well-being programmes. This was done by requesting information from participating SA public HEIs as part of the empirical research conducted related to how effective and integrated they regarded their well-being efforts to be. It was necessary to ask this question to determine whether SA public HEIs had effective and integrated approaches to employee well-being aligned with best practice found globally.

The results indicated that, although some SA public HEIs regarded their well-being efforts as effective, little evidence was provided on integrated approaches to employees' well-being (see Table 5.20 and sections 5.4.9 & 5.4.9.1). From the responses provided in Table 5.20, it became clear that more than half of the responding institutions regarded their well-being programmes as effective, whilst more than a third of the responding institutions regarded their employee well-being programmes as ineffective. It was further established that some institutions had no formal employee well-being programme in place, but that they regarded the services

that were offered in terms of employees' wellness, as effective. I found it a reason for concern that more than one third of the responding institutions indicated that they had no formalised employee well-being programme in place.

Another institution mentioned a lack of human resources as the reason for its employee well-being programme not being effective (see Table 5.20). Only one institution indicated that its employee well-being programme was aligned with the vision and mission of the institution, and that it was regarded as effective, partly because its effectiveness was measured annually. Another reason for concern was that two participants mentioned a lack of support from senior management as a reason for the ineffectiveness of their employee well-being programmes.

All these areas of concern were echoed in the literature, and addressed in the design of the integrated employee well-being framework for SA public HEIs, and in guidelines towards more effective, integrated approaches to employees' well-being that were provided. Again, the views of the research participants pertaining to the effectiveness and integration of their well-being programmes, as identified from the literature review, could be added to the views of the sources used in the literature review. This strengthened the impetus for the rationale for this study.

7.2.3.4 Sixth secondary research question: How could an integrated employee well-being framework enhance and inform employee well-being practices at South African public higher education institutions?

The main outcome of this study was the design of an integrated employee well-being framework for SA public HEIs. This framework was designed for purposes of answering the sixth secondary research question.

In **Chapter 6**, I described the development and validation of a proposed integrated employee well-being framework for SA public HEIs. The draft proposed framework was outlined in table format (See Table 6.1), and each dimension/component and sub-component then were discussed and motivated in detail (see 6.3.1 to 6.3.9). The proposed framework was evaluated by a panel of experts by means of a structured

questionnaire (see Annexure R). First, a pilot validation survey was conducted with three experts (see 6.5.1), followed by a second validation survey with a panel of experts (see 6.5.2). The outcome of both these validation processes were discussed extensively in Chapter 6, and all the changes that were made to the framework, were also discussed in detail (see Table 6.1; 6.5.1 - 6.5.3).

7.2.3.4.1 Integrated employee well-being framework designed for South African public higher education institutions

As indicated in Chapter 6 (see 6.3), the integrated employee well-being framework that I designed for SA public HEIs was compiled based on the strengths and shortcomings of current employee well-being programmes and practices that emerged from the literature, and the process of document analysis that was conducted; the results from the empirical study; inputs and comments from the validation panel members, and relevant well-being theories. Each component of the integrated employee well-being framework was discussed and motivated in Chapter 6 (see 6.3.1 to 6.3.7).

The visual representation of the integrated employee well-being framework for SA public HEIs was provided in Chapter 6 (see Figure 6.4). The framework emphasises the interrelation among the different components of the framework. Furthermore, the integrated employee well-being framework is designed as a tool to guide SA public HEIs to apply their well-being activities in such a way that their specific intended outcomes related to their employees' well-being, which should be embedded in their well-being policies, strategies and programmes, can be accomplished. The roles of different role-players in employees' well-being, and they impact on one another, also form part of the framework. Furthermore, it is made clear in the framework that all the dimensions of employees' well-being are interrelated, and therefore should be addressed in an integrated manner. Thus, the well-being activities of SA public HEIs should be constructively aligned with the intended outcomes, and their effectiveness should be measured continually.

In conclusion, I designed and developed this integrated employee well-being framework for use by SA public HEIs to maintain and/or enhance their employees' well-being by creating an enabling environment for their employees to flourish. Therefore, in answering the sixth secondary research questions and consequently achieving the six objectives of this study (as set out in this section), the implication is that:

- The primary research question according to section 1.2 in Chapter 1 was answered, namely:

How can employees of SA public HEIs' well-being be enhanced by means of an integrated employee well-being framework, aimed at addressing their well-being holistically?

- The purpose of this study according to section 1.3 in Chapter 1 (to design an integrated framework which could be used by SA public HEIs to enhance their employees' well-being by addressing all the dimensions of their well-being in an integrated manner), was achieved.

The final integrated employee well-being framework is presented in Table 7.3 below. Cross-references to all the relevant sections of this thesis were provided in the framework as presented in Chapter 6 (see Table 6.1 & Table 6.24). Hence, they are not repeated in the framework below.

Table 7.3 Final integrated employee well-being framework for South African public higher education institutions

FINAL INTEGRATED EMPLOYEE WELL-BEING FRAMEWORK FOR SOUTH AFRICAN PUBLIC HIGHER EDUCATION INSTITUTIONS	
COMPONENT 1: DEFINING THE CONCEPT OF WELL-BEING	
A1	The concept of well-being includes/entails the following:
A1.1	Well-being includes being happy, but is about more than happiness
A1.2	Well-being entails high levels of subjective well-being
A1.3	Well-being is multi-faceted, and consists of various dimensions/"building blocks" (see section 2 (2A to 2I) below for more details).
A1.4	Important dimensions (building blocks) of well-being include physical, emotional, psychological (mental), social, financial, spiritual, environmental, intellectual and occupational well-being (see section 2 (2A to 2I) below for more details).

A1.5	The different dimensions (building blocks) of well-being (mentioned in A1.4 above) are interlinked, and therefore should be addressed in an integrated manner, and not in silos.
A1.6	The concept of well-being includes aspects related to our personal, relational and collective well-being.
A2	Well-being entails positive feelings and positive functioning, such as:
A2.1	Emotional stability
A2.2	Engagement
A2.3	Living a meaningful life
A2.4	Living a balanced life
A2.5	Being optimistic
A2.6	Positive emotions
A2.7	High morale
A2.8	Positive relationships
A2.9	Resilience (ability to cope/"bounce back")
A.210	Positive self-esteem
A2.11	Vitality
A2.12	Having hope for the future
A2.13	Being satisfied with your life (including work)
A2.14	Flourishing (living optimally; thriving)
COMPONENT 2: DIMENSIONS/BUILDING BLOCKS OF WELL-BEING	
2 A: Physical well-being	
2 A.1	Physical well-being is an important dimension of human well-being.
2 A.2	Physical well-being entails/includes:
	2 A 2.1 Following a healthy diet
	2 A 2.2 Proper hydration (drinking enough water)
	2 A 2.3 Exercising/being active
	2 A 2.4 Maintaining a healthy body weight (BMI)
	2 A 2.5 Exposure to sunlight
	2 A 2.6 Making time to relax
	2 A 2.7 Getting sufficient sleep
	2 A 2.8 Make time for meditation
	2 A 2.9 Living mindfully
	2 A 2.10 Avoiding harmful habits such as smoking, drinking too much alcohol, using drugs, etc.
	2 A 2.11 Being safe and secure
	2 A 2.12 Maintain a good posture
	2 A 2.13 Experiencing optimal health
	2 A 2.14 Having vitality
	2 A 2.15 Having sufficient energy
	2 A 2.16 Managing stress successfully
	2 A 2.17 Having regular medical check-ups
2 B: Emotional well-being	
2 B.1	Emotional well-being is an important dimension of human well-being.
2 B 2	Emotional well-being entails/includes:
	2 B 2.1 Having a positive outlook on life
	2 B 2.2 Being emotionally aware
	2 B 2.2.1 Understanding the value of one's emotions
	2 B 2.2.2 Being aware of the state of your overall well-being
	2 B 2.3 Being emotionally stable
	2 B 2.4 Having emotional energy/vitality

	2 B 2.5 Taking positive action
	2 B 2.6 Taking responsibility for your own emotions
	2 B 2.7 Self-acceptance (having a positive self-concept)
	2 B 2.8 Having a good self-esteem
	2 B 2.9 Being assertive
	2 B 2.10 Being happy/joyful
	2 B 2.11 Experiencing peace
	2 B 2.12 Being mindful
	2 B 2.13 Being fulfilled
	2 B 2.14 Resilience (ability to cope/"bounce back")
	2 B 2.15 Focusing your energy on important personal priorities
	2 B 2.16 Ability to adapt to change
	2 B 2.17 Ability to make essential changes to grow and live a fulfilled life
	2 B 2.18 Coping with stress/navigating stressful situations
	2 B 2.19 Ability to solve problems
	2 B 2.20 Interpersonal skills
	2 B 2.21 Intrapersonal coping skills
	2 B 2.22 Good decision-making skills
	2 B 2.23 Experiencing high morale
	2 B 2.24 Having hope for the future
2 C: Psychological well-being	
2 C 1	Psychological (mental) well-being is an important dimension of human well-being.
2 C 2	Psychological (mental) well-being entails/includes:
	2 C 2.1 Autonomy
	2 C 2.2. Environmental mastery
	2 C 2.3 Personal growth
	2 C 2.4 Positive relations with others
	2 C 2.5 Self-acceptance
	2 C 2.6 Self-efficacy (the ability to believe that you will succeed in life)
	2 C 2.7 Emotional stability
	2 C 2.8 Ability to manage conflict
	2 C 2.9 Knowledge of own abilities
	2 C 2.10 Ability to cope with normal stress of life
	2 C 2.11 Ability to perform normal daily work (be productive/fruitful)
	2 C 2.12 Ability to function effectively within one's community
	2 C 2.13 Ability to make a positive contribution to one's community
	2 C 2.14 Feeling connected to one's community/surroundings
	2 C 2.15 Making the most of opportunities
	2 C 2.16 Having control and freedom over one's life
	2 C 2.17 Mind-body integration
	2 C 2.18 Having emotional vitality
	2 C 2.19 Resilience/ability to cope with difficult life circumstances and traumatic events
	2 C 2.20 Having high self-esteem
	2 C 2.21 Being optimistic
	2 C 2.22 Feeling that your life has value
	2 C 2.23 Displaying emotional intelligence
	2 C 2.24 Having positive thoughts and emotions
	2 C 2.25 Having high morale
	2 C 2.26 Experiencing life as enjoyable
	2 C 2.27 Being enthusiastic about life

	2 C 2.28 Experiencing feelings of vigour
2 D: Social well-being	
2 D 1	Social well-being is an important dimension of human well-being
2 D 2	Social well-being entails/includes:
	2 D 2.1 The ability to develop, build and maintain positive personal relations/social ties (social inclusion)
	2 D 2.2 Having a sense of belonging
	2 D 2.3 Having a sense that your life has value, and that others value you
	2 D 2.4 Having regular contact with other people who believe in you, support you and care for you (e.g. family, friends and colleagues)
	2 D 2.5 Developing interpersonal skills
	2 D 2.6 The ability to manage conflict successfully
	2 D 2.7 Using one's skills and abilities to function optimally in life
	2 D 2.8 Developing a value system, beliefs and traditions that are important to you
	2 D 2.9 Meaningful engagement with others
	2 D 2.10 To be socially accepted
	2 D 2.11 Embracing your own cultural identity
	2 D 2.12 Respecting the cultural identity of others
	2 D 2.13 Ability to receive support/help from others when needed
2E: Financial well-being	
2 E 1	Financial well-being is an important dimension of human well-being
2 E 2	Financial well-being entails/includes:
	2 E 2.1 Living within your financial means
	2 E 2.2 Sticking to your budget
	2 E 2.3 Managing your finances effectively
	2 E 2.4 Regularly saving part of your income
	2 E 2.5 Debt management (e.g. going for debt counselling if you have ended up in debts/struggle to make payments)
	2 E 2.6 Making wise financial investments
	2 E 2.7 Putting sufficient retirement planning in place
	2 E 2.8 Experiencing financial security
	2 E 2.9 Being financially literate
2 F: Spiritual well-being	
2 F 1	Spiritual well-being is an important dimension of human well-being.
2 F 2	Spiritual well-being entails/includes:
	2 F 2.1 Discovering who you are
	2 F 2.2 Discovering the meaning of your life
	2 F 2.3 Discovering the value of your life
	2 F 2.4 Discovering your purpose in life
	2 F 2.5 A sense of peace and contentment
	2 F 2.6 Living for a greater cause
	2 F 2.7 Having a relationship with someone you believe to be bigger than yourself (a higher power)
	2 F 2.8 Serving a higher power
	2 F 2.9 Having faith in a higher power
	2 F 2.10 Helping others
	2 F 2.11 Making provision for quiet time in your daily life/routine for purposes of self-reflection
	2 F 2.12 Living a meaningful life
	2 F 2.13 Search for the sacred

	2 F 2.14 Assisting people to deal with major life stressors (e.g. illness; divorce, death, natural disasters; mental illness; etc.)
	2 F 2.15 Regarding work as a calling
	2 F 2.16 Positive effect on mortality and depression rates
	2 F 2.17 Positive effect on your happiness and life satisfaction levels
	2 F 2.18 Forgiving others
	2 F 2.19 Having a sense of hope
	2 F 2.20 Practising meditation (spiritual purification)
	2 F 2.21 Having integrity
	2 F 2.22 Aligning your personal values and beliefs with what you believe in
	2 F 2.23 Spiritual well-being acts as a buffer against depression
	2 F 2.24 Spiritual well-being acts as a buffer against demoralisation
	2 F 2.25 Spiritual well-being acts as a buffer against despair/hopelessness
	2 F 2.26 Spiritual well-being acts as a buffer against anxiety
2 G: Environmental well-being	
2 G 1	Environmental well-being is an important dimension of human well-being
2 G 2	Environmental well-being entails/includes:
	2 G 2.1 Physical environmental factors such as air quality, clean water, proper ventilation, etc., which impact on one's well-being
	2 G 2.2 Social environmental factors such as relations at home; relations at work; a discrimination-free and fear-free work environment, which impact on our well-being
	2 G 2.3 Ergonomics (designing/arranging workspaces, products and systems to fit the people using them, ensuring sufficient space, lighting, ventilation, support, etc.)
	2 G 2.4 External environmental influences (e.g. family, society, politics, war, the economy, etc.) impact on our well-being
	2 G 2.5 A positive work environment has a positive impact on our performance
	2 G 2.6 A positive work environment has a positive impact on our behaviour
	2 G 2.7 A positive work environment has a positive impact on our motivation to act
	2 G 2.8 A positive work environment reduces our stress levels
	2 G 2.9 Our direct environment facilitates or discourages interactions with colleagues, family and others
	2 G 2.10 Pleasing and healthy surroundings contribute to personal fulfilment
	2 G 2.11 A healthy and pleasing work environment improves our mood
	2 G 2.12 A healthy and pleasing work environment positively affects our immune system
	2 G 2.13 A healthy and pleasing work environment positively affects our physical health
	2 G 2.14 Living and working in a safe environment improve our well-being
	2 G 2.15 Working in a stimulating environment contributes to our well-being
	2 G 2.16 Noise levels impact on our well-being
2 H: Intellectual well-being	
2 H 1	Intellectual well-being is an important dimension of human well-being
2 H 2	Intellectual well-being entails/includes:
	2 H 2.1 Participation in scholastic, cultural and community activities
	2 H 2.2 Valuing creativity, curiosity and lifelong learning
	2 H 2.3 Enabling one to live a successful and stimulating life
	2 H 2.4 Expanding our knowledge and skills
	2 H 2.5 Sharing our knowledge and skills
	2 H 2.6 Keeping our minds flexible, informed and engaged
	2 H 2.7 Improving our mindfulness (ability to live in, and focus on the present moment)
	2 H 2.8 Stimulating and improving the health of our brains and preventing mental decline

2 I: Occupational well-being	
2 I 1	Occupational well-being is an important dimension of human well-being
2 I 2	Occupational well-being entails/includes:
	2 I 2.1 Using our skills, gifts and talents at work to enrich our lives and give purpose to our lives
	2 I 2.2 Performing meaningful work
	2 I 2.3 Occupational/job satisfaction (enjoying our work and finding it stimulating and rewarding)
	2 I 2.4 Job security
	2 I 2.5 Being engaged at work
	2 I 2.6 Work/job characteristics affect our well-being
	2 I 2.7 Having autonomy
	2 I 2.8 Being competent to do one's work
	2 I 2.9 Aspiring to be the best you that you can be at the workplace
	2 I 2.10 Sufficient opportunities for learning, personal growth/development
	2 I 2.11 Sufficient opportunities for promotion/career advancement/job progression/talent management
	2 I 2.12 Work environment that facilitates interactions with colleagues, peers, supervisors, stakeholders, etc.
	2 I 2.13 Successful conflict management at work
	2 I 2.14 Healthy, supportive relations with supervisors, peers and stakeholders, etc.
	2 I 2.15 Healthy, positive relations with all stakeholders
	2 I 2.16 Having high morale at work
	2 I 2.17 Experiencing positive emotions and having positive experiences at work
	2 I 2.18 Creating "flow" whilst working ("flow" = a state of concentration and engagement when completing a task that requires concentration, and which challenges your skills/becoming absorbed in what you are doing)
	2 I 2.19 Positive attitude about your work
	2 I 2.20 Relaxed, enabling work environment
	2 I 2.21 Work-life balance:
	2 I 2.21.1 Balance between work and family life
	2 I 2.21.2 Time to switch off from work and relax/recover from work (i.e. balance between work and leisure/work and recovery from work)
	2 I 2.21.3 A work environment that allows for successful work-life integration
	2 I 2.22 Having a manageable workload
	2 I 2.23 There should be a balance between job demands and job resources in the workplace
	2 I 2.24 Being suitable/fit for the job you have been appointed for
	2 I 2.25 Work provides a sense of meaning and purpose
	2 I 2.26 Performing well in your job
	2 I 2.27 Achieving the goals related to your job
	2 I 2.28 Feeling "part of" the organisation (a culture of inclusiveness at the workplace)
	2 I 2.29 Working in a safe environment
	2 I 2.30 Working in a peaceful environment
	2 I 2.31 Working in a pleasant environment
	2 I 2.32 Working in an appreciative work environment
	2 I 2.33 Working in an environment where employees are being valued
	2 I 2.34 Working in a stimulating work environment
	2 I 2.35 Working in a supportive work environment
	2 I 2.36 Working in an environment free from unnecessary stress

	2 2.37 Working in a discrimination-free environment (where there is no discrimination based on race, religion, gender, disability, etc.)
	2 2.38 Working in an environment where leaders are ethical
	2 2.39 Working in an environment where all employees are treated fairly
	2 2.40 Working in an environment where all employees are treated equally
	2 2.41 Being open to change in the institution
	2 2.42 Being willing to learn new skills to perform your job more effectively
	2 2.43 Having a positive/conducive work climate/organisational culture
	2 2.44 Combatting/successfully managing normal levels of stress at work
	2 2.45 Being paid fairly for the level of work you perform
	2 2.46 Sufficient performance/reward systems in place
	2 2.47 Experiencing high morale at work
	2 2.48 Working in an environment where leaders lead by example
	2 2.49 Senior/line managers play an important role in both employee and organisational well-being
	2 2.49.1 Senior/line managers can contribute to positive relations with employees
	2 2.49.2 Senior/line managers can contribute to improving the organisational culture (amongst others through ethical leadership, caring for employees, being committed to and positive about the organisation)
	2 2.49.3 Senior/line managers can play an important role to play in motivating employees (amongst others by believing in them, inspiring them and leading by a good example)
	2 2.49.4 Senior/line managers can play an important role in improving employees' performance (amongst others by motivating them, believing in them, building their self-esteem, and supporting them to perform better)
	2 2.49.5 Senior/line managers play an important role in increasing employees' levels of engagement (amongst others by motivating them, and making them feel part of the organisation)
	2 2.49.6 Senior/line managers have an important role to play in increasing employees' well-being (amongst others by treating them fairly and equally, motivating them, valuing and appreciating them, allowing them sufficient opportunities for growth and development, and truly caring about them)
COMPONENT 3: SA PUBLIC HEIS SHOULD DEVELOP A CLEAR EMPLOYEE WELL-BEING POLICY TO GUIDE AND FACILITATE THEIR WELL-BEING PROGRAMMES/EFFORTS	
3.1	A clear policy/policies and procedure(s) on employee well-being should be developed by each SA public HEI, to guide and facilitate their employee well-being efforts
3.2	SA public HEIs' employee well-being policies should be guided by applicable national health and well-being legislation, frameworks, standards, strategies and policies (e.g. the SA Constitution, occupational health and safety legislation, labour and anti-discrimination legislation, etc.)
3.3	SA public HEIs' employee well-being policies should be aligned with the institution's mission, vision, values and strategic plans
3.4	SA public HEIs' employee well-being policies should be aligned with other applicable institutional policies
3.5	All well-being programmes/efforts of SA public HEIs should be aligned with and guided by the strategic direction provided via the institution's well-being policy, as well as its vision, mission, values and strategic plans
3.6	SA public HEIs should identify all the different stakeholders in employee well-being, and should involve/consult them in the development of policies/procedures on employee well-being (e.g. unions, HR, employees, Institutional Forums, etc.)

3.7	SA public HEIs should develop an integrative process that involve employees in ongoing conversations about the promotion of their health and well-being
3.8	Buy-in should be obtained from all SA public HEIs' institutional stakeholders (e.g. Management, unions, HR, employees, etc.) to ensure the successful implementation of any employee well-being policy
3.9	All institutional well-being policies should be made available on SA public HEIs websites/electronic databases, or should be shared via any other appropriate communication media, (including, but not limited to e-mail, wellness days, workshops, awareness sessions, road shows, etc.), for employees to acquaint themselves with the its content; to ask questions about the policy; and to adhere to it
COMPONENT 4: SA PUBLIC HEIs SHOULD EACH HAVE A CLEAR EMPLOYEE WELL-BEING STRATEGY	
4.1	SA public HEIs should develop clear well-being strategies, guided by each institution's well-being policy, as well as its vision, mission, values and strategic plans
4.2	SA public HEIs should involve employees across all levels in the development of their well-being strategies, to ensure that their voices are clearly heard in the process
4.3	SA public HEIs could consider benchmarking with other HEIs, both nationally and internationally, on the contents of their well-being strategies to determine and apply best practice in the development of their own well-being strategies
4.4	SA public HEIs' well-being strategies should provide guidelines on the establishment of effective employee well-being programmes to successfully execute their well-being efforts
4.5	SA public HEIs' well-being strategies should guide the implementation of all their employee well-being initiatives
	4.5.1 SA public HEIs' well-being strategies should clearly spell out the strategic thrusts related to employee well-being
	4.5.2 SA public HEIs' well-being strategies should clearly spell out the principles adopted related to their employees' well-being
	4.5.3 SA public HEIs' well-being strategies should clearly spell out the objectives related to their employees' well-being
	4.5.4 SA public HEIs' well-being strategies should provide for the development, or use of an employee well-being framework to guide the implementation of all institutional well-being efforts
	4.5.5 SA public HEIs' well-being strategies should provide for an institutional implementation plan to be compiled to guide the implementation of their well-being programmes/efforts
4.6	SA public HEIs' well-being strategies should clearly spell out their stances on and theoretical frameworks related to employee well-being
4.7	SA public HEIs' well-being strategies should clearly spell out the dimensions of employees' well-being to be addressed via their different well-being programmes (e.g. physical, emotional, psychological (mental), social, financial, spiritual well-being, etc.)
4.8	SA public HEIs' well-being strategies should support the objectives of the institutions' well-being programmes
4.9	SA public HEIs' well-being strategies should contain clear goals in terms of each well-being objective set
4.10	SA public HEIs' well-being strategies should be clear on how the effectiveness of their strategies and specific well-being programmes will be monitored and evaluated (e.g. through reliable, validated tools such as questionnaires, annual surveys, interviewing employees, evaluating employees' positive mood, negative mood and life satisfaction levels, etc.)

4.11	SA public HEIs' well-being strategies should be clear on how regularly the effectiveness of their strategies and specific well-being programmes will be monitored and evaluated (e.g. each semester, annually, etc.)
4.12	SA public HEIs' well-being strategies should be adapted, based on outcomes and recommendations flowing from the regular monitoring and evaluation of their well-being programmes
4.13	SA public HEIs' well-being strategies should constantly be monitored against, and aligned with the latest global trends in, and research on employee well-being, as applicable to the institution
4.14	SA public HEIs' well-being strategies should provide guidelines for the sustainable implementation of the institutions' well-being programmes.
4.15	SA public HEIs could consider making their well-being strategies available on their institutions' websites/electronic databases, or share it via any other appropriate communication media, (including, but not limited to, e-mail, wellness days, workshops, awareness sessions, road shows etc.), for employees to acquaint themselves with the content of the strategies; to ask questions about the strategy, etc.
COMPONENT 5: SA PUBLIC HEIs SHOULD DEVELOP EFFECTIVE WELL-BEING PROGRAMMES ADDRESSING ALL THE DIMENSIONS OF EMPLOYEES' WELL-BEING IN AN INTEGRATED MANNER	
5.1	SA public HEIs should develop effective employee well-being programmes guided by their well-being policies and strategies
5.2	SA public HEIs could consider benchmarking with other HEIs, both nationally and internationally, on the contents of their well-being programmes, to determine and apply best practice in the development and application of their own well-being programmes
5.3	Employees across all levels should be involved in the development of employee well-being programmes, as well as in the monitoring and evaluation of the effective thereof, to ensure that their voices are clearly heard in the process
5.4	SA public HEIs' well-being programmes should address all the dimensions of their employees' well-being (i.e. their emotional, physical, social, psychological, financial, environmental, spiritual, occupational and intellectual well-being)
5.5	SA public HEIs' well-being programmes should contain clear goals in terms of each of the dimensions of their employees' well-being, and how (by which means) these will be addressed
5.6	SA public HEIs' well-being programmes should address all the dimensions of their employees' well-being in an integrated manner, and not fragmentedly/in silos
5.7	The effectiveness of SA public HEIs' well-being programmes (as contained in their well-being strategies) should be regularly monitored and evaluated
	5.7.1 SA public HEIs' well-being strategies should make provision for the development of an institutional employee well-being monitoring and evaluation framework
	5.7.2 SA public HEIs' well-being strategies should clearly spell out how the effectiveness of their well-being programmes will be monitored and evaluated
	5.7.3 SA public HEIs' well-being strategies should clearly spell out the stakeholders to monitor and evaluate the effectiveness of their well-being programmes
	5.7.4 SA public HEIs' well-being strategies should clearly spell out how regularly the effectiveness of their well-being programmes will be monitored
	5.7.5 SA public HEIs' well-being strategies should clearly spell out by which means the effectiveness of their well-being programmes will be monitored
COMPONENT 6: INSTITUTIONAL CULTURE AND VALUES SHOULD CREATE AND ENABLING ENVIRONMENT FOR EMPLOYEES TO FLOURISH	
6.1	Institutional culture includes, amongst others, relationships, traditions, culture and the climate/environment (positive or negative) of the institution

6.2	Employees are enabled to flourish in an institution where the institutional culture is positive
6.3	Employees are enabled to flourish in an institution where the institutional culture is functional
6.4	Employees are enabled to flourish in an institution where they have positive and functional relations with colleagues, supervisors and stakeholders
6.5	Employees are able to flourish in a discrimination-free institution (where they are not discriminated against based on, amongst others, their race, age, culture, religion, disability, social status, etc).
6.6	Employees are able to flourish in an institution where there is no dysfunctional power or unhealthy hierarchies
6.7	Employees are able to flourish in an institution where the institutional culture creates an enabling work environment conducive to work and employee well-being
6.8	Employees are able to flourish in an institution where the institution's traditions reflect the demographics of the institution
6.9	Employees are able to flourish in an institution where the institution's traditions are aimed at uniting employees
6.10	Employees are able to flourish in an institution where they are regarded as important and valuable
6.11	Employees are able to flourish in an institution where they are well cared for
6.12	Employees are able to flourish in an institution that prioritises and addresses all the dimensions of their well-being in an integrated manner
6.13	Employees are able to flourish in an institution where there is mutual trust
6.14	The institutional culture and climate of an institution is determined by the various internal (e.g. management, employees, supervisors, teams, unions) and external (e.g. Council, the community, partners, government, society) stakeholders
6.15	The dynamics created within the institutions by a smaller group of employees can eventually facilitate a movement towards a more positive (functional) culture
6.16	Commitment is required from all stakeholders to transform a negative institutional culture and climate into a positive institutional culture/climate
6.17	SA public HEIs should put measures in place to regularly monitor and evaluate the institutional culture/climate on an ongoing basis (e.g. through communities of practice, surveys, questionnaires, online forums, interviewing/ discussion sessions with employees, exit interviews, institutional culture audits, appreciative inquiry sessions, etc.)
6.18	SA public HEIs should involve their employees in the continuous monitoring and evaluation of the institutional culture/climate
6.19	SA public HEIs should communicate the outcome of all institutional culture monitoring and evaluation processes to all institutional stakeholders, including employees, unions, Management, Council and its appropriate standing committees
6.20	SA public HEIs should build on strengths in terms of the institutional culture, as identified from monitoring and evaluation processes, and should work actively towards addressing any possible identified areas of improvement
6.21	SA public HEIs could apply the principles of positive psychology, flourishing theory and well-being theory to create a positive institutional climate, and to recognise their employees as human beings – thereby enabling their employees to flourish
COMPONENT 7: WHO IS RESPONSIBLE FOR EMPLOYEE OF SA PUBLIC HEIs WELL-BEING?	
7.1	Government, society and the community must fulfil their roles towards the well-being of employees of SA public HEIs
	7.1.1 Government should establish effective health and well-being guidelines towards improving the health and well-being of their citizens

	7.1.2 Institutions should be held accountable by Government for implementing health and well-being initiatives, as guided by national policy
	7.1.3 Government should provide efficient and affordably health systems for its citizens
	7.1.4 Government, society and communities should interact with one another, and with SA public HEIs, on issues pertaining to employees' health and well-being needs, and on systemic challenges associated with their well-being that would serve the purpose of integration of well-being practices in the best possible way
7.2	SA public HEIs have a responsibility for their employees' well-being
	7.2.1 SA public HEIs should create healthy, sustainable working, living and learning environments for their employees
	7.2.2 SA public HEIs should show their employees that they care about them and their well-being, and that they are serious about optimising their well-being at all levels
	7.2.3 SA public HEIs should educate employees about the factors impacting on their holistic well-being, and how they can take control of and improve their well-being by taking preventative measures and adopting a healthy lifestyle (via, amongst others, their websites, electronic media, e-mail, awareness sessions, workshops, wellness days, road shows, electronically and physically distributed material such as pamphlets, booklets, and relevant research articles)
	7.2.4 SA public HEIs should incorporate values and principles in their vision, mission and strategic plans that emphasise the promotion of their employees' well-being
	7.2.5 SA public HEIs should both model and test their employee well-being approaches for the benefit of their own employees, but also the broader community, and society at large
	7.2.6 SA public HEIs should educate employees about the different dimensions of their well-being (i.e. their physical, emotional, psychological [mental], social, financial, spiritual, environmental, intellectual and occupational well-being)
	7.2.7 SA public HEIs should have a clear policy guiding their employees' well-being
	7.2.8 SA public HEIs should have a clear strategy guiding their employees' well-being
	7.2.9 SA public HEIs should put effective well-being programmes in place to address all the dimensions of their employees' well-being, and in an integrated manner
	7.2.10 SA public HEIs should involve their employees in the development of their well-being policies, strategies and programmes, and the evaluation of their effectiveness
	7.2.11 SA public HEIs should interact with government, society, communities, other HEIs, and their employees on issues pertaining to employees' health and well-being needs, and on systemic challenges associated with their employees' well-being that would serve the purpose of integration of well-being practices in the best possible way
	7.2.12 SA public HEIs should provide well-being-related services of a high quality that are sensitive to the diverse needs of employees
	7.2.13 SA public HEIs should identify reliable, validated tools to constantly monitor the effectiveness and impact of their well-being policies, strategies and programmes
	7.2.14 SA public HEIs should clearly communicate their well-being policies, strategies, programmes and events to employees via various means (e.g. e-mail, wellness days, workshops, awareness sessions, road shows, discussion forums, etc.), for employees to acquaint themselves with their contents; to ask questions about these, etc.
	7.2.15 SA public HEIs should create an enabling institutional culture and climate conducive to optimal well-being and flourishing
	7.2.16 SA public HEIs should make available sufficient resources (e.g. human, financial and infrastructural resources) to offer and manage effective employee well-being programmes/efforts

	7.2.17 SA public HEIs should make available social, sports, cultural and leisure facilities to their employees that encourage healthy living and reflect their diversity
	7.2.18 SA public HEIs should realise the important role of senior and line managers in promoting organisational and employee well-being, and should train them in this regard (also see 2.I 2.48.1 to 2.I 2.38.5 of this framework)
7.3	Employees of SA public HEIs have a responsibility for their own well-being
	7.3.1 Employees of SA public HEIs should educate themselves about the factors impacting on their holistic well-being
	7.3.2 Employees of SA public should take responsibility for their own well-being
	7.3.3 Employees of SA public HEIs should take control of and improve their personal well-being by taking preventative measures and adopting a healthy lifestyle (e.g. eating healthily and exercising) to improve their own well-being
	7.3.4 Employees of SA public HEIs should acquaint themselves with the contents of their institutions' well-being policies, strategies and programmes.
	7.3.5 Employees of SA public HEIs should participate in well-being programmes and activities offered by their employers and aimed at enhancing their well-being.
	7.3.6 Employees of SA public HEIs should interact with one another, and their employer, on issues pertaining to their health and well-being needs, and on systemic challenges associated with their well-being that would serve the purpose of integration of well-being practices in the best possible way
8. NUANCED GUIDELINES FOR SA PUBLIC HEIs ON IMPLEMENTING THIS INTEGRATED EMPLOYEE WELL-BEING FRAMEWORK AND THEIR OWN WELL-BEING PROGRAMMES AND PRACTICES IN A MORE INTEGRATED MANNER IN THE WORKPLACE	
8.1	Since well-being is a process, and not a programme, SA public HEIs are urged to implement more process-oriented approaches to employees' health and well-being.
8.2	In essence, although each employee should take responsibility for his/her own health and well-being, SA public HEIs should create an enabling environment that is conducive to employees' flourishing, taking cognisance of all the key components and sub-components of well-being contained in this framework, i.e. they should: (i) think deeper about what employee well-being entails, and clearly define the concept of well-being, in collaboration with their employees; (ii) include the nine identified dimensions of well-being in their well-being programmes to ensure that they address employees' well-being holistically; (iii) develop clear well-being policies and procedures, (iv) strategies and (v) programmes that facilitate and guide employee well-being, and monitor and evaluate the effectiveness of their employee well-being policies, strategies and programmes on a regular basis; (vi) establish a positive, functional institutional culture/climate that enables employees to flourish; and (vii) be aware of, and take responsibility for their unique role in promoting the well-being of their employees, whilst being aware of others role players (e.g. government, society, communities, employees and others) in employees' well-being.
8.3	As emphasised in this framework, SA public HEIs should avoid fragmented practices and approaches to employee well-being at all cost, since such practices are patronising and prescriptive, and do not facilitate employees' holistic well-being.
8.4	SA public HEIs should apply a whole-person approach to employee well-being at individual (personal), relational and organisational levels by addressing all the dimensions of their well-being (i.e. their physical, emotional, psychological, social, spiritual, financial, environmental, intellectual and occupational well-being), in an integrated manner.
8.5	SA public HEIs should create space and opportunities for employees to flourish in close collaboration with employees, and based on employees' needs in terms of their health and well-being.

8.6	SA public HEIs should integrate theory, research, practice and policy in terms of employee well-being for purposes of determining the drivers of employee well-being, and to plan, direct and guide the implementation of employee health and well-being initiatives.
8.7	As advocated in this framework, SA public HEIs, in collaboration with their employees, should develop integrated, effective, measurable well-being tools for purposes of evaluating and improving their employees' overall well-being. Integrated approaches to employee well-being should include strategies and resources that provide employees with programmes, tools, activities, support, information, practices and processes that encourage them to apply healthy habits at work, but also at home.
8.8	SA public HEIs should set clear goals in terms of the desired outcomes related to employees' well-being. Furthermore, SA public HEIs should keep in mind that the evaluation of their employee well-being programmes requires rigorous designs that assess the combined effects of their well-being efforts. Employees, therefore, should be involved in the process of evaluating the employee well-being programmes offered by SA public HEIs, and such evaluations should be based on a reliable theoretical framework, and performed regularly.
8.9	Flowing from such evaluations of the effectiveness of their employee well-being programmes (see point 8 above), SA public HEIs, in collaboration with employees, should identify the strengths of their well-being practices, and continue to build on such strengths. Furthermore, SA public HEIs, in collaboration with their employees, should identify the barriers that hinder the efficiency of their employee well-being programmes, and implement effective, tested strategies towards improved employee well-being.
8.10	SA public HEIs could consider creating an employee well-being forum/community of practice where the design, effectiveness and monitoring of their employee well-being programmes are discussed openly to the benefit of SA public HEIs and their employees.
8.11	SA public HEIs should appoint experienced HR Directors/employee well-being overseers/facilitators who are acquainted with evidence-based problem-solving and learning approaches related to employees' well-being.

In the next section, some implications and recommendations pertaining to the study are discussed.

7.3 IMPLICATIONS AND RECOMMENDATIONS

The implications of the study, and recommendations based on the outcome of the study, are discussed in the sections 7.3.1 and 7.3.2 below.

7.3.1 Implications and recommendations for SA public HEIs

Below are some implications/recommendations for SA public HEIs related to the research findings – more specifically to their approaches to employees' well-being, their employee well-being programmes, and monitoring the effectiveness of these programmes, based on the literature review, the document analysis, pilot study and empirical research findings.

SA public HEIs may consider to:

- incorporate sustainable employee well-being into their missions, visions and strategic plans (see 3.5);
- prioritise the establishment of a supportive, enabling work environment where employee well-being is a cornerstone of the individual HEIs' cultures (see 3.1.1; 3.2.19). For example, they could conduct Appreciative Inquiry sessions with employees in an attempt to contribute to the cultivation of a positive, functional institutional culture (see 2.3.7.1; 3.2.23);
- integrate theory, research, practice and policy in terms of employees' well-being, to plan, direct and guide the implementation of their well-being initiatives (see 3.2.19; 3.2.24; 5.5);
- apply a whole-person approach to employees' well-being at both individual and organisational level by addressing their employees' well-being (including their subjective well-being) at physical, emotional, psychological, social, spiritual, financial, environmental, intellectual and occupational level, and in an integrated manner (see 1.5.1; 2.4; 2.4.1 - 2.4.9);
- have ongoing conversations with their employees on aspects related to their well-being, whilst the contents of their well-being programmes should be based on the needs of their employees (see 7.2.3.4.1; Annexure T);
- make use of integrated, effective, measurable tools for purposes of regularly evaluating and constantly monitoring and improving their employee well-being programmes (see 3.2.17; 3.4.1). Employees should be involved in the development of such measuring tools, which will provide the means for assessing the quality, effectiveness, coverage and delivery of their services, resulting in the continual improvement of their employees' well-being (see 3.2.17; 5.4.9; 5.4.9.1). Such evaluation tools should assess the combined effects of these programmes, since well-being is multi-faceted and should be addressed in an integrated manner (see 2.4; 5.4.9; 5.4.9.1);
- set clear goals in terms of what they want to achieve pertaining to their employees' well-being. They should also base the process of evaluating their employee well-being programmes on a reliable theoretical framework that would assist them to evaluate the extent to which their employee well-being goals are achieved;

- make purposeful endeavours to determine what is working well in terms of their employee well-being programmes, and to do more of the things that are working well (see 2.2.7.1);
- identify the barriers that hinder the efficiency of their employee well-being programmes, and implement effective, tested strategies towards improved employee well-being (see 3.2.19);
- create opportunities for meaningfulness and purposefulness of the work performed by employees, since employees spend many hours per day at work, and it is inevitable that their work will impact on their experiences of a meaningful life (see 3.1.1; 3.2.3; 3.2.8; 3.3);
- adopt integrated approaches to employees' well-being that include strategies and resources to provide employees with programmes, tools, activities, support, information and practices aimed at improving their holistic well-being (see 2.2; 2.2.4; 6.3.4; 6.5.2.3.4). The integrated employee well-being framework designed for SA public HEIs as the main outcome of this research could assist SA public HEIs in adopting such integrated approaches to employee well-being;
- assist their employees in managing the conflicting demands of the different aspects of their lives, and to establish a healthy work-life balance (see 3.2.15). This could be done by, amongst others, offering employees flexible working hours, monitoring the amount of overtime work performed, allowing them to work from home, where viable, and offering child care facilities at work, to name but a few (see 3.1.1; 3.2.15);
- regularly research the drivers of employee well-being, and to adjust their employee well-being approaches accordingly (see 5.4.11; 5.4.11.1);
- become part of the Health Promoting Universities (HPU) Network (see 3.5). By doing so, they can learn from best practice globally, and do more to contribute to the holistic well-being of their employees, communities, and societies at large (see 3.4.1);
- encourage their employees to take mutual responsibility for their well-being at all levels (see 2.3.8.2; 2.4.2). Whilst SA public HEIs should offer relevant employee well-being programmes, tools, activities and resources on key well-being topics (see 3.2.19), they should give due consideration to aspects such as employees' workload (see 2.4.9), to enable them to participate in

well-being programmes. In turn, employees should actively participate in their institutions' well-being programmes, and utilise the employee well-being programmes and resources that are made available by the employer (see 5.4.5; 5.4.5.1; 5.4.9; 5.4.9.1);

- ensure person-job fit/job crafting aimed at optimising the fit between a person and the university, when making appointments; as this would, amongst others, result in higher work engagement, job satisfaction, and retention levels (see 3.2.21);
- address any lack of ownership or knowledge amongst employee well-being leaders and employees. Also, when appointing Human Resources directors and officers responsible for employees' well-being, HEIs should take care to appoint experienced employees that are acquainted with evidence-based problem-solving and learning approaches related to employees' well-being (see 3.1.1);
- create a resourceful work environment, as employees' well-being increases when they have sufficient resources to do their work (see 3.2.4; 3.4.3);
- include organisational development activities aimed at supporting small groups, leaders, and other strategic players in the construction of the sub-systems of well-being in the workplace (see 3.1.1; 3.2-3.3);
- conduct more research into finding ways of combining their efforts towards measuring the combined effects of their employee well-being programmes (see 3.2.17). Hence, SA public HEIs could consider creating an employee well-being forum where the design, effectiveness and monitoring of their employee well-being programmes are openly discussed, to the benefit of SA public HEIs and their employees;
- encourage their academics to do more research on positive organisational and employee behaviour, focusing on the strengths of organisations, teams and individuals, and on optimal human functioning and flourishing (see 2.2.3 - 2.2.4; 2.3.7.1);
- begin to drive change in society by modelling, testing and transferring innovative approaches to employees' well-being, which could be applied by society at large (see 2.3.7.3; 3.5). By doing so, SA public HEIs will promote social justice, societies' health and well-being, and strengthen the social and economic sustainability of the communities they serve, as well as the broader society (see 3.5).

7.3.2 Implications and recommendations for future research

The empirical research conducted for purposes of this study could be extended to include participants from overseas universities. This would provide opportunities for the comparison of research results and to analyse the degree of agreement or disagreement between SA universities and overseas universities.

More research should also be done to identify ways of combining the well-being efforts, and measuring the combined effects of SA public HEIs' employee well-being programmes on their employees' well-being.

Furthermore, the empirical research conducted for purposes of this study could be performed amongst employees of SA public HEIs, to determine their views on their institutions' well-being programmes, and their effectiveness. This would provide opportunities for the comparison of research results to analyse the degree of agreement or disagreement between how effective SA public HEIs regard their well-being programmes, versus how their employees regard the effectiveness of their well-being programmes.

The generalisability to the target or study populations of this study could be enhanced by conducting the research amongst all 26 SA public HEIs, or other similar populations. This would allow for an opportunity to draw conclusions about the well-being approaches of the entire SA public HEI population, instead of just the eleven SA public HEIs that participated in the research.

More in-depth research on the africanisation of the concept of well-being (including aspects such as inclusion and diversity, and how these aspects influence employees' well-being), is required within the South African higher education context.

The effectiveness of the final proposed integrated employee well-being framework that was designed for purposes of this study could be tested through further research amongst employees of SA public HEIs who are implementing the integrated employee well-being framework before and after exposure to the well-being framework, so as to

determine the effect of the implementation of the well-being framework on employees' holistic well-being.

7.4 LIMITATIONS OF THE STUDY

It is normal for a researcher to experience some limitations during the research process, as there are many aspects related to research that the researcher does not have total control over (Du Plooy-Cilliers *et al.* 2014:276)(see 4.2; 4.3.1.2). Nevertheless, limitations should be considered based on their impact on the reliability and validity of the study. According to Maree (2012:230), they should also provide direction for further research to be conducted.

I am of the opinion that the following limitations applied to this study, and therefore should be reflected:

- The limited sample size (see 4.4.2.1 - 4.4.2.2).
- Participants in the empirical research were limited to HR practitioners and employees responsible for implementing employee well-being programmes/strategies at SA public HEIs (see 4.4.2.2).
- Participation in the final validation survey by a panel of experts were limited (see 4.4.2.3).
- The study did not have a strong differential focus in terms of how well-being manifests differently in different ethnic groups, although this was not the main aim of the study.
- The applicability of the integrated employee well-being framework on a global scale.

7.4.1 Limited sample size

The study was ambitious in seeking to gain insights into the well-being programmes of all SA public HEIs. Eventually, 11 of the 26 SA public HEIs participated in the study. Although this is a good representation, I would have wanted all the SA public HEIs to participate in the research, as I believe it could add value to their well-being

approaches and programmes. Various attempts were made to get more of the SA public HEIs to participate in the study, but to no avail.

However, it is worth mentioning that the participants in the first (pilot study) and second (empirical research) rounds of data collection were purposefully selected on the basis that they could inform the study based on their experience and understanding of the research problem. They were all knowledgeable individuals who worked with employee well-being within SA public HEIs, all with extensive experience in the fields of employee well-being, psychology, industrial/counselling/educational psychology, higher education and organisational development (see 6.5.1.2; 6.5.2.2). The small sample size of this research therefore also could be regarded as an advantage, as interpretive, qualitative research was conducted within the research paradigm of interpretivism - and more specifically, the constructivist paradigm, where small sample sizes are regarded as advantageous (see 1.6.1; 4.3).

7.4.2 Participants were limited to human resources practitioners and employees responsible for implementing employee well-being strategies/programmes at SA public HEIs

From the literature review conducted for purposes of this study, it became evident that much research has been done pertaining to global well-being initiatives, but limited research related to integrated well-being initiatives, and more specifically, well-being programmes applied by SA public HEIs. Hence, this study, although limited to human resources practitioners and employees responsible for implementing employee well-being at SA public HEIs, attempted to address a gap in the current research results available about the well-being programmes applied by SA public HEIs, and how an integrated employee well-being framework for SA public HEIs could assist in optimising employees' well-being (see 6.2).

7.4.3 Limited number of experts who participated in the final validation survey

As indicated in Chapter 6 (see 6.5.2.2), I made every effort to invite a broad panel of experts for validation purposes. I sent them regular reminders regarding the invitation

to participate in the validation survey on a voluntary basis, and also contacted them telephonically. Eventually, six of the twelve invited experts participated in the validation process. This could be a limitation of the study, and could affect the transferability of the research findings to other contexts. However, as indicated in Chapter 4 (see 4.6.2), transferability was not the main aim of this study. It is worth mentioning that the designed framework was also piloted with three experts prior to the final validation by the panel of six experts (see 6.5). Hence, a total of nine experts provided feedback on the framework.

7.4.4 Applicability of the integrated employee well-being framework on a global scale

The integrated employee well-being framework is intended for use by SA public HEIs, as only these institutions were included in the empirical research (see 1.7.2), which could raise questions on the applicability of the integrated employee well-being framework on a global scale. In my opinion, this should not affect the ability to apply the framework on a global scale, as both local and international sources were consulted during the literature review. Furthermore, the integrated employee well-being framework was designed to be flexible and adaptable to various contexts. I aimed to enhance the transferability of the research findings by providing rich descriptions of the literature, the research findings and the proposed integrated employee well-being framework for SA public HEIs. This might enable the reader to relate the research findings to similar situations pertaining to employees' well-being. Therefore, the transferability of this study might be limited (albeit not impossible).

7.5 CONTRIBUTION OF THE STUDY

As outlined in Chapter 1 (see 1.1), it emerged from the literature review that very little, if any, research has been done related to the employee well-being programmes applied by South African HEIs. I cited multiple sources that point to the importance of well-being for organisational success, and to well-being being a multi-faceted construct. Well-being programmes applied by organisations should address employees' well-being in an integrated manner at physical, social, emotional, financial,

psychological, environmental, spiritual, occupational and intellectual levels. Therefore, this study contributes to the body of knowledge related to an integrated, multi-faceted approach to employees' well-being.

Table 7.4 below outlines the contribution of this study towards practice and theory related to employees' well-being.

Table 7.4: Contribution of the study to practice and theory related to employees' well-being

Contribution	Explanation and motivation
Contribution to practice	<u>SA public HEIs</u> • Research shows that enhanced well-being positively affects business outcomes. Hence, SA public HEIs could benefit from the enhanced well-being of their employees. These benefits, amongst others, include that employees who are well, work harder; are more productive; perform better; are more engaged; more creative and innovative; more committed to the organisation; more willing to walk the extra mile; more positive; less prone to staying away from work; are healthier, less likely to leave the organisation; are friendlier, more cooperative; and more loyal towards the organisation (see 3.1.1 - 3.3). • The proposed integrated employee well-being framework for SA public HEIs thus could benefit these institutions in the above-mentioned areas. Hence, I recommend that the integrated employee well-being framework be used by SA public HEIs as a guideline towards enhancing the well-being of their employees in a holistic and integrated manner. • I anticipate that, if the proposed well-being framework is implemented effectively by SA public HEIs, it might result in a flourishing employee component that could benefit these SA public HEIs (as explained under the first bullet in this section).
	<u>Executive Management of SA public HEIs</u> • As mentioned in section 6.1, the integrated employee well-being framework is suitable for application by South African public HEIs, and also may be suitable for application by other universities and business entities. • The proposed integrated employee well-being framework for SA public HEIs could sensitise Executive Managers to the importance of having a policy regulating employees' well-being systems, methods, approaches, practices

	and programmes, and the importance of involving all relevant stakeholders in the development of such a policy (see 3.2.19). • The integrated framework for enhanced employee well-being emphasises the importance of Executive Managers of SA public HEIs' integrating employee well-being into all institutional policies, plans, systems and processes (see 3.2.19). This will require an organisation-wide approach, and an integration of strategies and solutions. • Executive Management further must realise the importance of buying into such a policy on employees' well-being, and of supporting their universities' well-being practices and efforts as an indication that they value employees, and regard their well-being as important (see 3.2; 3.2.20; 3.2.24). • The integrated employee well-being framework for SA public HEIs could further sensitise Executive Management to the importance of establishing a positive institutional culture, and an enabling environment for employees to experience optimal well-being, and to flourish (see 3.2.1; 3.2.23). • Through this study, Executive Management is to be made aware of the benefits of investing in their employees' well-being, which will outweigh the costs involved. However, this will take time; hence SA public HEIs first need to focus on things they can do to enhance their employees' well-being that do not cost money (e.g. putting well-being policies and strategies in place; regularly monitoring the effectiveness thereof, and involving employees in such processes; and valuing and appreciating their employees)(see 3.2.10); and secondly, they need to budget for investing in their employees' well-being (see 3.1.1; 3.2.4). • I recommend that the integrated employee well-being framework be used by Executive Managers of SA public HEIs as a guideline towards enhancing the well-being of their employees in a holistic and integrated manner (see 2.4).
	<u>Managers/employees responsible for implementing well-being practices/systems/programmes at SA public HEIs</u> • The integrated employee well-being framework lists all the dimensions of well-being, and could make managers/employees responsible for the implementation of well-being practices, systems and programmes at SA public HEIs aware of these important dimensions/components of employees' well-being (i.e. their social, emotional, physical, psychological, financial, environmental, spiritual, occupational and intellectual well-being)(see 2.4.1 – 2.4.9). Managers and responsible officers must take note of all these dimensions of employees' well-being that should be addressed in an integrated manner, in order to make a positive contribution to their employees' holistic well-being (see 2.4; 2.5).

	• The integrated employee well-being framework's sub-components listed under the nine dimensions of well-being (2A – 2I) provide well-being implementers at SA public HEIs with a birds'-eye view of the many facets related to each dimension of employees' well-being, whilst the proposed activities to facilitate each sub-component provide valuable guidelines to SA public HEIs on what they might do to enhance each specific dimension of their employees' well-being (see Annexure T). • Apart from a focus on holistic employee well-being, the integrated employee well-being framework alerts those responsible for implementing well-being practices at SA public HEIs that their well-being programmes should have clearly defined outcomes and methods for its constant evaluation in terms of effectiveness, employees' participation, compliance and sustainability of outputs (see 3.2.17). • The integrated employee well-being framework could benefit those responsible for implementing employee well-being at SA public HEIs, because of the guidelines it provides for the activation, facilitation and implementation of the enhancement of employees' well-being (see 6.5.2.3.8). • I recommend that the integrated employee well-being framework be used by employees responsible for the implementation of employee well-being at SA public HEIs as a guideline towards enhancing the well-being of their employees in a holistic and integrated manner (see 2.4; 2.5).
	<u>Employees of SA public HEIs</u> • The integrated employee well-being framework could benefit employees of SA public HEIs, as it provides various guidelines towards the enhancement of their well-being in a holistic and integrated manner (see 2.2; Annexure T). • The implementation of the integrated employee well-being framework for SA public HEIs might increase the morale of employees of SA public HEIs, and encourage them to be more motivated to go to work, as they would feel that they are valued, and would begin to enjoy their work (see 3.2.1; 3.2.3; 3.2.10). Hence, the workplace would become an enabling environment for them to flourish, and to find purpose and meaning in life through their work (see 2.3.7.2; 3.1.1). • The implementation of the integrated employee well-being framework might educate and inspire employees of SA public HEIs to take ownership of their own health and well-being, and to take positive action towards improving their health and well-being (see 2.4.1 2.4.9; 6.5.2.3.7; Annexure T).

Contribution to theory	<u>Synthesis of what the integrated well-being theory entails</u> • In sections 1.6.3 and 2.2.8.3 I discussed the theoretical framework that was adopted for this study. I stated that this study was grounded in interpretivism theory, and more specifically the constructivist paradigm. This study on employee well-being was guided by the principles of positive psychology theory, flourishing theory and well-being theory, from which I formulated a synthesis of what integrated well-being theory should entail (see 2.3.7.2; 2.3.8.2 - 2.3.8.3; 2.3.9). • This integrated well-being theory (see 2.3.9) consists of elements of positive psychology theory, flourishing theory and well-being theory, and is extended to address all the building blocks of well-being as identified from the literature, namely physical, emotional, social, psychological, financial, spiritual, environmental, intellectual and occupational well-being, in an integrated manner (see 2.4.1. - 2.4.9). • The synthesis of what integrated well-being theory entails contributed to the body of theory and knowledge related to optimal human flourishing, which, according to my theory, requires living a well-balanced life, and addressing one's well-being at physical, emotional, social, psychological, financial, spiritual, environmental, intellectual and occupational levels in an integrated manner (see 2.2.4 - 2.2.5; 2.4.1 - 2.4.9). It states that each of these dimensions of well-being should be pursued individually, and should be defined and measured independently (see 2.3.9). • Furthermore, this integrated well-being theory emphasises that optimal human flourishing entails thriving and not only surviving, both in one's personal life and at the workplace. It is all about living a meaningful life by finding one's purpose in life, and living for a higher purpose (calling). It entails having positive emotions, setting goals and accomplishing those goals (see 2.3.9). • Integrated well-being theory further emphasises that one's well-being is affected by various factors, and at various levels, and that positive emotions, positive relationships and positive engagements with others are vital for one's well-being (see 2.3.7.2; 2.3.9). • Integrated well-being theory acknowledges that individuals, groups and structures impact on behaviour within organisations, and that organisational structure, values and culture affect the behaviour and well-being of individuals and groups (see 3.2.19). It acknowledges the power of appreciation (see 3.2.10); of being positive (see 2.3.2; 2.3.7.2); and the importance of being happy and fulfilled, both in one's personal life and at the workplace (see 2.2.4; 2.3.9; 3.1.1).

	Furthermore, my novel application of a qualitative methodology, guided by other well-being and positive psychology theories, and the formulation of what, in my own opinion, integrated well-being theory should entail (see 2.3.9), contribute to the body of theory and knowledge on employee and organisational well-being.
	<u>Development of an integrated employee well-being framework for SA public HEIs</u> - I was able to identify from the literature review and document analysis that well-being is multi-faceted, and that it should be addressed in an integrated manner (see 2.2; 2.2.2 - 2.2.5). Furthermore, I identified nine dimensions or building blocks of well-being from the literature, document analysis and the empirical research conducted, namely physical, emotional, psychological, social, financial, spiritual, environmental, intellectual and occupational well-being, which were included in the integrated employee well-being framework for SA public HEIs (see 2.4.1 - 2.4.9; Annexure T). - The integrated employee well-being framework that was developed for SA public HEIs can be used to facilitate and guide these institutions' employee well-being efforts, systems, approaches and programmes (see 6.2). It emerged from the literature review, document analysis and the empirical research conducted that such an integrated framework towards enhanced employee well-being of SA public HEIs does not exist. Furthermore, it was evident from the empirical research that not all SA public HEIs have an employee well-being policy (see 5.4.13; 5.4.13.1); have embedded well-being in all institutional practices and systems (see 5.4.2.1; 5.4.5; 5.4.5.1; 5.4.8; 5.4.8.1); have clear objectives in terms of expected outcomes of their well-being efforts (see 5.4.5), and have monitoring and evaluating systems in place to monitor the effectiveness of their well-being efforts (see 5.4.9; 5.4.9.1). - Most of the participating SA public HEIs are only addressing some of building blocks of their employees' well-being; and do not apply integrated approaches towards their employees' well-being (see 5.4.3; 5.4.3.1; 5.4.5). Therefore, this integrated employee well-being framework for SA public HEIs could assist SA public HEIs to enhance the well-being of their employees by putting policies and systems in place towards enhanced employee well-being by addressing all the dimensions of their well-being in an integrated manner (see 2.4); by

	achieving their objectives in terms of employee well-being (see 6.4), and by putting effective measures in place to continuously monitor the effectiveness of their employee well-being efforts (see 3.2.17). • The application of this integrated employee well-being framework could also provide employees of SA public HEIs with sufficient knowledge on how to take responsibility for, and make positive changes towards the improvement of their own well-being (see 2.4; 6.3.7).

As can be seen in the table above, this study does indeed fill a gap in the research on integrated employee well-being activities, approaches and practices applied by SA public HEIs, and therefore contributes to the practical and theoretical body of knowledge related to the well-being of employees of SA public HEIs, specifically with regard to addressing their well-being holistically and in an integrated manner.

7.6 CONCLUDING REMARKS

The benefits of taking care of employees' well-being for institutions have been discussed extensively in Chapter 3 of this study (see 3.3). Research over the past decades has shown that institutions tend to benefit, amongst others, in terms of employees' performance, improved absenteeism rates, employees' productivity; innovation; their commitment to the organisation, and if their well-being is addressed effectively and holistically (see 3.2 - 3.3). Furthermore, it is evident from the findings of literature review and the empirical research conducted that well-being is complex and multi-faceted, and that employees' well-being has to be addressed at physical, emotional, psychological, social, financial, spiritual, environmental, intellectual and occupational levels, and in an integrated manner (see 2.4; 2.4.1 - 2.4.9).

More research is still required to inform policy and practice in terms of employee well-being programmes, both in SA public HEIs and organisations worldwide. Thus, an understanding among policymakers and individuals of what might influence or drive employee well-being is required. It is clear from this research that subjective well-being may be influenced by a wide range of individual and societal factors. It is also important to note that the importance of different drivers of employee well-being is likely to vary

across countries and across different groups within society, depending on their circumstances (see 3.3). As indicated in 7.5 above, more research should also be conducted to identify ways of combining the well-being efforts and measuring the combined effects of SA public HEIs' employee well-being programmes on their employees' well-being.

My journey through this study was both exciting and challenging. I learnt much in terms of what organisational, individual and employee well-being entails, and how holistic well-being can be established in an integrated manner. I am excited to share my research findings with SA public HEIs. I trust that the final proposed integrated employee well-being framework designed as outcome of this study will benefit both SA public HEIs and their employees by making a contribution to the enhancement of their organisational and personal well-being.

Similar to organisations worldwide, SA public HEIs cannot afford not to invest in the well-being of their employees, and addressing it in an integrated and holistic manner. I anticipate that this study and the final outcome may contribute towards the fields of industrial psychology, organisational (workplace), personal and employee well-being, and higher education studies, and that it will provide an effective and flexible, integrated framework for creating an enabling environment for employees of these institutions to flourish.

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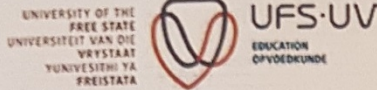
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ANNEXURE A

PROOF OF ETHICAL CLEARANCE OBTAINED



Faculty of Education

16-Jul-2018

Dear Miss Laurika Van Straaten

Ethics Clearance: **An integrated intervention for enhanced staff well-being at South African public higher education institutions**

Principal Investigator: Miss Laurika Van Straaten

Department: School of Higher Education Studies (Bloemfontein Campus)

APPLICATION APPROVED

With reference to your application for ethical clearance with the Faculty of Education, I am pleased to inform you on behalf of the Ethics Board of the faculty that you have been granted ethical clearance for your research.

Your ethical clearance number, to be used in all correspondence is: **UFS-HSD2016/1176**

This ethical clearance number is valid for research conducted for one year from issuance. Should you require more time to complete this research, please apply for an extension.

We request that any changes that may take place during the course of your research project be submitted to the ethics office to ensure we are kept up to date with your progress and any ethical implications that may arise.

Thank you for submitting this proposal for ethical clearance and we wish you every success with your research.

Yours faithfully

Prof. MM Mokhele Makgalwa
Chairperson: Ethics Committee

Education Ethics Committee

Office of the Dean: Education

T: +27 (0)51 401 3777 | F: +27 (0)86 546 1113 | E: MokheleML@ufs.ac.za

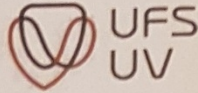
Winkie Direko Building | P.O. Box/Posbus 339 | Bloemfontein 9300 | South Africa

www.ufs.ac.za



ANNEXURE A 1 – PROOF: APPROVAL OF AMENDED RESEARCH TITLE

UNIVERSITY OF THE
FREE STATE
UNIVERSITEIT VAN DIE
VRYSTAAT
YUNIBESITHI YA
FREISTATA



Postgraduate Office
Faculty of Education

Room 14
Winkie Direko Building
Faculty of Education
University of the Free State
P.O. Box 339
Bloemfontein 9300
South Africa

T: +27(0)51 401 3651
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www.ufs.ac.za
Duvnhagecs@ufs.ac.za

5 April 2019

APPLICATION FOR TITLE REGISTRATION

Applicant: Van Straaten, L
Student Number: 2011099955
Discipline: Higher Education
Study Code: Doctoral (HES900)

Dear Ms van Straaten

The change in title as requested was approved by the CTR committee.

Your registered title will be as follows: ***"An integrated framework for enhanced staff well-being at South African public higher education institutions"***

Yours sincerely,

A handwritten signature in dark ink, appearing to read 'Jan Nieuwenhuis'.

Prof Jan Nieuwenhuis
Chair: CTR committee

A handwritten signature in dark ink, appearing to read 'Duvnhage'.

Ms CS Duvnhage
Secretary: CTR committee

ANNEXURE B

Letter: proof of linguistic revision

DECLARATION

21 June 2019

TO WHOM IT MAY CONCERN

I herewith declare that I did the language editing of the research report on *An integrated framework for enhanced staff well-being at South African public higher education institutions* by Laurika van Straaten, student number 2011099955.

The track changes function was used and the student was responsible for accepting/rejecting the changes and recommendations, and for finalising the documents.



Dr MJ Bezuidenhout PhD [HPE]; BA [Languages]

Language Practitioner

Waverley Bloemfontein

e-mail: mjbezuidenhout@absamail.co.za

Cell: 0724360299



SAVI /SATI membership number 1003226

South African Translation Institute

ANNEXURE C

Letter to HEIs: invitation to participate in baseline pilot study

**Researcher:**

Ms L van Straaten
Room 101
ZR Mahabane Building
CUT
Tel. (051) 507 3016
e-mail: lvstraat@cut.ac.za

Study leader:

Dr A du Plessis
Tel. (012) 420 2498
e-mail: Annelize.DuPlessis@up.ac.za

[Date]

Director: HR/Wellness Officer

[Name of University]

INVITATION TO PARTICIPATE IN A PILOT STUDY AMONGST SA PUBLIC HEIS RELATED TO THEIR EMPLOYEE WEL-BEING PROGRAMMES

I am a registered Doctoral Degree student in Higher Education Studies at the University of the Free State, with student number 2011099955.

As an employee of a South African HEI, I wish to contribute towards enhanced employee well-being at South African public HEIs. Thus, I intend to conduct research in the field of higher education. The title of my research is "*An integrated framework for enhanced employee well-being at South African public higher education institutions*". I plan to conduct a baseline pilot study amongst South African higher education institutions by making use of a semi-structured, open-ended questionnaire to be sent to the officer at your institution heading HR/Employee Wellness, for completion. The questionnaire will take approximately 30 minutes to complete.

The aim of the research is to explore the nature and characteristics of integrated employee well-being programmes applied by South African public higher education institutions, how the effectiveness of such programmes is measured, and whether an integrated employee well-being programme for these institutions could assist in improving employees' well-being. I have found limited research pertaining to the employee well-being programmes of these institutions, and this pilot study would point out any strengths and gaps pertaining to their well-being programmes, which would indicate to me whether a full empirical study could be conducted to make a research contribution in the field of employee well-being within South African public higher education institutions.

Participation in the study will be voluntary. The identity of all participating institutions, participants and their responses will be treated anonymously and as confidential. Participants may withdraw from the research at any stage. Participants will also sign informed consent forms. Should participants be unhappy with any aspect of the research, they may contact my supervisor, Dr A du Plessis, on telephone number 012 – 420 2498, or at e-mail address Annelize.DuPlessis@up.ac.za to intervene.

No harm will be inflicted upon any participant. The data will be regarded as confidential and kept safely on my computer, with the necessary passwords, or locked in a cabinet when printed, and by not allowing any unauthorised persons access to the data. Data will be de-identified early in the research process by means of coding keys, to be kept separate from the data.

Permission to conduct this study was obtained from the University of the Free State (UFS)'s Faculty of Education (ethical clearance number UFS-HSD2016/1176).

I hereby apply for permission to conduct this research at your institution.

You may keep this cover page for future reference purposes. Please complete the consent signature page on page 2 of this document, and return to me at e-mail address lvstraat@cut.ac.za by no later than [date].

Your favourable consideration of this application would be highly appreciated.

.....
Ms Laurika van Straaten
Student number: 2011099955

ANNEXURE D
Consent form: pilot study

Consent form

I, _____(your name),
agree / do not agree (delete that which is not applicable) that I consent to participate
in the research project titled: **“AN INTEGRATED FRAMEWORK FOR ENHANCED
STAFF WELL-BEING AT SOUTH AFRICAN PUBLIC HIGHER EDUCATION
INSTITUTIONS”**.

I understand that the researcher subscribes to the following principles:

- *Voluntary participation in research*, implying that the validation panel members might withdraw from participation in the validation process at any time.
- *Informed consent*, meaning that validation panel members must be fully informed about the validation process and purposes, and must provide written consent to participate in the validation process.
- *No harm in participation*, meaning that the validation panel members should not be placed at risk or be exposed to harm of any kind.
- *Privacy*, implying that the anonymity and confidentiality of all validation panel members shall be protected at all times.
- *Trust*, meaning that validation panel members will not be deceived or betrayed in the process of validation, or the publishing of the outcomes.

Signature: _____

Date: _____

ANNEXURE E

Questionnaire: pilot study

**Researcher:**

Ms L van Straaten
Room 101
ZR Mahabane Building
CUT
Tel. (051) 507 3016
e-mail: lvstraat@cut.ac.za

Study leader:

Dr A du Plessis
Tel. (012) 420 2498
e-mail: Annelize.DuPlessis@up.ac.za

Date

PLEASE COMPLETE THE SECTION BELOW:

Name of institution:

Position & post level of participant:

Years of service at institution:

Gender:

Race:

Age:

("Gender", "race" and "age" are included above, as these variables may play a role in how different genders, races and age groups experience well-being. However, if you wish not to provide the information on these categories, you are welcome to omit it).

PLEASE ANSWER THE QUESTIONS AS COMPREHENSIVELY AS POSSIBLE, IN THE SPACE PROVIDED BELOW EACH QUESTION.

Question 1

- 1.1 Do you have any employee well-being programme(s) / an employee well-being model/intervention that you use at your institution?

.....
.....
.....
.....

- 1.2 If your institution offers an employee well-being programme/intervention, in your view, what are the current **strengths** of that programme? Please **motivate** your answer.

.....
.....
.....
.....

- 1.3 What would you view as the **weaknesses** of this employee well-being programme? Please motivate your answer.

.....
.....
.....
.....

Question 2

Please provide detailed information regarding:

- 2.1(a) The employee well-being programme/intervention itself (its **structure / main focus / content**), and how your institution utilises it. Please provide a narrative / comprehensive answer.

.....

.....

.....

.....

- 2.1(b) Please attach any **appendices** (e.g. your institution's employee wellness programme/plan/intervention) to this questionnaire.

Wellness programme/plan/intervention attached (please mark with an X):

Yes

☐

No

☐

- 2.2(a) In your view, how **effective** is your institution's employee well-being programme/intervention?

.....

.....

.....

.....

2.2(b) Is the effectiveness of your institution's employee well-being programme/intervention measured?

Yes

No

☐

2.2(c) If you answered "Yes" to question 2.2(b) above, how is the effectiveness of the employee well-being programme/intervention measured?

.....

.....

.....

.....

2.3(a) For how long has the well-being programme/intervention been implemented at your institution?

.....

.....

.....

.....

2.3(b) How actively has the well-being programme/intervention been implemented at your institution?

.....

.....

.....

.....

Question 3

- 3(a) Which ***elements*** of employee well-being (physical, emotional, spiritual, psychological, social, financial, etc.) does your institution's well-being programme address, and ***how***/by which means is this done?

.....

.....

.....

- 3(b) How/by which means does your institution address the elements of employees' well-being indicated in 3(a) above?

.....

.....

.....

Question 4

In your opinion, what type of an employee well-being programme might address employees' ***total (holistic) well-being***?

.....

.....

.....

Question 5

- 5(a) If you do not have any well-being programme/intervention for employees at your HEI, do you think there might be a ***need*** for such a programme?

Mark your answer with an X:

Yes

☐

No

☐

- 5(b) What elements of employee well-being would you like to see addressed in an employee well-being programme? Please motivate your answer.

.....

.....

.....

My sincere appreciation for taking the time to complete this questionnaire!

Please e-mail the (i) completed consent form, (ii) completed questionnaire, (iii) as well as your institution's employee well-being programme, and any other appropriate appendices to lvstraat@cut.ac.za by no later than [date].

Yours sincerely

Laurika van Straaten

RESEARCHER

ANNEXURE F

Application for gatekeeper approval from SA public HEIs

**Researcher:**

Ms L van Straaten
Room 101
ZR Mahabane Building
CUT
Tel. (051) 507 3016
e-mail: lvstraat@cut.ac.za

Study leader:

Dr A du Plessis
Tel. (012) 420 2498
e-mail: Annelize.DuPlessis@up.ac.za

Date

To whom it may concern

APPLICATION FOR ETHICAL CLEARANCE TO CONDUCT RESEARCH AT [NAME OF UNIVERSITY]

I am a registered Doctoral Degree student in Higher Education Studies at the University of the Free State, with student number 2011099955.

As an employee member of a South African HEI, I wish to contribute towards enhanced employee well-being at South African public HEIs. Thus, I intend to conduct research in the field of higher education. The title of my research is "*An integrated framework for enhanced staff well-being at South African public higher education institutions*". The research will take the form of a semi-structured, open-ended questionnaire to be sent to the officer at your institution heading HR/employee wellness, for completion. The questionnaire will take approximately 30 minutes to complete.

The aim of the research is to explore the nature and characteristics of integrated employee well-being programmes applied by SA public HEIs, how the effectiveness of such programmes is measured, and whether an integrated employee well-being programme for SA HEIs could assist in improving their well-being. A combined interpretation of the research findings and the literature is anticipated to lead to the development/design of a proposed integrated employee well-being framework for SA HEIs, which could benefit these HEIs, should they wish to make use of the framework.

Participation in the study will be voluntary. The identity of all participating institutions, participants and their responses will be treated anonymously and as confidential. Participants may withdraw from the research at any stage. Participants will also sign informed consent forms. Should participants be unhappy with any aspect of the research, they may contact my supervisor, Dr A du Plessis, on telephone number 012 – 420 2498, or at e-mail address Annelize.DuPlessis@up.ac.za to intervene.

No harm will be inflicted upon any participant. The data will be regarded as confidential and kept safely on my computer, with the necessary passwords, or locked in a cabinet when printed, and by not allowing any unauthorised persons access to the data. Data will be

de-identified early in the research process by means of coding keys, to be kept separate from the data.

Permission to conduct this study was obtained from the University of the Free State (UFS)'s Faculty of Education (ethical clearance number UFS-HSD2016/1176).

I hereby apply for permission to conduct this research at your institution.

You may keep this cover page for future reference purposes. Please complete the consent signature page on page 2 of this document, and return to me at e-mail address lvstraat@cut.ac.za by no later than [date].

Your favourable consideration of this application would be highly appreciated!

Ms Laurika van Straaten

Student number: 2011099955

ANNEXURE G

Consent form/gatekeeper approval: SA public HEIs

Consent form / gatekeeper approval granted

The [name of university] hereby grant approval to Ms L van Straaten, student number 2011099955 to conduct the research project titled: **“AN INTEGRATED FRAMEWORK FOR ENHANCED STAFF WELL-BEING AT SOUTH AFRICAN PUBLIC HIGHER EDUCATION INSTITUTIONS”** at our university, provided that the researcher subscribes to the following principles:

- *Voluntary participation in research*, implying that the validation panel members might withdraw from participation in the validation process at any time.
- *Informed consent*, meaning that validation panel members must be fully informed about the validation process and purposes, and must provide written consent to participate in the validation process.
- *No harm in participation*, meaning that the validation panel members should not be placed at risk or be exposed to harm of any kind.
- *Privacy*, implying that the anonymity and confidentiality of all validation panel members shall be protected at all times.
- *Trust*, meaning that validation panel members will not be deceived or betrayed in the process of validation, or the publishing of the outcomes.

Signature: _____
(o.b.o. [name of university])

Date: _____

ANNEXURE H

Letter to participants in empirical research



Researcher:

Ms L van Straaten
Room 101
ZR Mahabane Building
CUT
Tel. (051) 507 3016
e-mail: lvstraat@cut.ac.za

Study leader:

Dr A du Plessis
Tel. (012) 420 2498
e-mail: Annelize.DuPlessis@up.ac.za

Date

Attention: Deputy Vice-Chancellor/Vice-Rector/Director: HR/
Officer responsible for Employee Wellness
[Name of SA public HEI]

INVITATION TO PARTICIPATE IN EMPIRICAL RESEARCH STUDY AMONGST SOUTH AFRICAN PUBLIC HIGHER EDUCATION INSTITUTIONS

I am a registered Doctoral Degree student in Higher Education Studies at the University of the Free State, with student number 2011099955.

As an employee of a South African HEI, I wish to contribute towards enhanced employee well-being at South African public HEIs. Thus, I intend to conduct research in the field of higher education. The title of my research is "*An integrated framework for enhanced staff well-being at South African public higher education institutions*". The research will take the form of a semi-structured, open-ended questionnaire to be sent to the officer at your institution heading HR/employee wellness, for completion. The questionnaire will take approximately 30 minutes to complete.

The aim of the research is to explore the nature and characteristics of integrated employee well-being programmes applied by SA public HEIs, how the effectiveness of such programmes is measured, and whether an integrated employee well-being framework for SA HEIs could assist in improving employees' well-being. A combined interpretation of the research findings and the literature is anticipated to lead to the development/design of a proposed integrated employee well-being framework for SA HEIs, which could benefit these HEIs, should they wish to make use of the framework.

Participation in the study will be voluntary. The identity of all participating institutions, participants and their responses will be treated anonymously and as confidential. Participants may withdraw from the research at any stage. Participants will also sign informed consent forms. Should participants be unhappy with any aspect of the research, they may contact my supervisor, Dr A du Plessis, on telephone number 012 – 420 2498, or at e-mail address Annelize.DuPlessis@up.ac.za to intervene.

No harm will be inflicted upon any participant. The data will be regarded as confidential and kept safely on my computer, with the necessary passwords, or locked in a cabinet when printed, and by not allowing any unauthorised persons access to the data. Data will be de-identified early in the research process by means of coding keys, to be kept separate from the data.

Permission to conduct this study was obtained from the University of the Free State (UFS)'s Faculty of Education (ethical clearance number UFS-HSD2016/1176). Your university also approved my request to conduct this research (see attached Annexure).

You may keep this cover page for future reference purposes. Please complete the consent signature page on page 2 of this document, and return to me at e-mail address lvstraat@cut.ac.za by no later than (date).

Your favourable consideration of this application would be highly appreciated!

Ms Laurika van Straaten

Student number: 2011099955

Consent form: participants in empirical research study

Consent form

I, _____ (your name),
agree / do not agree (delete that which is not applicable) that I consent to participate
in the research project titled: **“AN INTEGRATED FRAMEWORK FOR ENHANCED
STAFF WELL-BEING AT SOUTH AFRICAN PUBLIC HIGHER EDUCATION
INSTITUTIONS”** as a representative of my employer.

I understand that the researcher subscribes to the following principles:

- *Voluntary participation in research*, implying that the validation panel members might withdraw from participation in the validation process at any time.
- *Informed consent*, meaning that validation panel members must be fully informed about the validation process and purposes, and must provide written consent to participate in the validation process.
- *No harm in participation*, meaning that the validation panel members should not be placed at risk or be exposed to harm of any kind.
- *Privacy*, implying that the anonymity and confidentiality of all validation panel members shall be protected at all times.
- *Trust*, meaning that validation panel members will not be deceived or betrayed in the process of validation, or the publishing of the outcomes.

Signature: _____

Date: _____

ANNEXURE J

Questionnaire: empirical study

PLEASE COMPLETE THE SECTION BELOW:

Name of institution:

Position & post level of participant:

Years of service at institution:

Gender:

Race:

Age:

("Gender", "race" and "age" are included above, as these variables may play a role in how different genders, races and age groups experience well-being. However, if you wish not to provide the information on these categories, you are welcome to omit it).

QUESTIONNAIRE: PLEASE ANSWER THE QUESTIONS AS COMPREHENSIVELY AS POSSIBLE, IN THE SPACE PROVIDED BELOW EACH QUESTION.

Question 1

1.1

(a) How do you/does your institution define the concept of "well-being"?

.....

.....

.....

.....

- (b) What are the core premises, and what is the philosophy of employee well-being that drive/drives your institution's employee well-being efforts?

.....

.....

.....

- 1.2 Do you have an employee well-being programme at your institution? (Mark the appropriate block with an "X").

Yes

☐

No

☐

- 1.3 (a) If you do not have any well-being programme for employees at your institution, do you think there might be a need for such a programme? (Mark the appropriate block with an "X".)

Yes

☐

No

☐

- 1.3.1 Why? (Please motivate your answer in 1.3 (a) above) .

.....

.....

.....

- 1.3.2 If your institution does not have an employee well-being programme, what **elements of employees' well-being**, in your opinion, should be addressed in such an envisaged employee well-being programme for your institution? Please **motivate** your answer.

.....

.....

1.4(a) If your institution does have an employee well-being programme, please state the name(s)/type(s) of the/these well-being programme(s), and what it entails/they entail?

.....

.....

.....

1.4(b) Is/are your employee well-being programme(s) a short-term, or a medium-term programme? Mark the appropriate block with an "X":

Short-term intervention:

☐

Medium-term intervention:

☐

1.5 If your institution offers/has an employee well-being programme, in your view, (a) what are the current **strengths** of that programme? (b) Please **motivate** your answer.

(a) Current strengths (list them here):

.....

.....

.....

(b) Motivation:

.....

.....

.....

- 1.6 (a) What would you view as the **weaknesses** of your institution's current employee well-being programme? Please motivate your answer.

Weaknesses (list them here):

.....

.....

.....

Motivation:

.....

.....

.....

Question 2

- 2.1(a) Please provide detailed information regarding your institution's employee well-being programme itself (its **core elements/structure/main focus**).

.....

.....

.....

- 2.1(b) How does your institution offer its employee well-being programme? Please provide a **narrative/comprehensive** answer.

.....

.....

.....

2.1(c) Please attach your institution's employee wellness programme (including plans/framework/strategy/policies/interventions, etc.), together with the completed questionnaire, via e-mail. *(NB: I wish to re-emphasise that the name of your institution will not be made known, in any manner, neither will its well-being programme be shared beyond this research, or attached to the name of your institution. The well-being programme will be merely analysed for purposes of this research.)*

Well-being plans/framework/strategy/policy/etc. attached (please mark with an X):

Yes

☐

No

☐

2.2(a) How was your institution's employee well-being programme developed?

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2.2(b) Which stakeholders were involved in the development of the programme?

.....

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.....

2.3(a) In your view, how **effective** is your institution's employee well-being programme, and why?

.....

.....

.....

2.3(b) How is the effectiveness of your institution's employee well-being programme **assessed/measured**?

.....

.....

.....

2.3(c) What are the typical **areas of focus** in the assessment/measurement of the effectiveness of your institution's employee well-being programme, and why?

Typical areas of focus (list them here):

.....

.....

.....

Motivation:

.....

.....

.....

2.3(d) How does the assessment/measurement of the effectiveness of your institution's employee well-being programme **inform** the institution's employee well-being programme/efforts?

.....

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2.4(a) How **actively** has the well-being programme been implemented at your institution?

.....

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.....

2.4(b) For how long has the well-being programme been implemented at your institution?

.....

.....

.....

2.4 (c)

(i) When last was the well-being programme **revised** to be aligned with the latest trends in employee well-being worldwide, **and** to address the demographics of your institution?

.....

.....

.....

(ii) Please provide examples of the alignments referred to in 2.4 c (i) above that were done in the past few years.

.....

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.....

Question 3

3.1(a) Which **elements** of employee well-being (e.g. physical, emotional, spiritual, psychological, social, financial, environmental, etc.) does your institution's well-being programme address?

.....

.....

.....

3.1(b) How/by which means are the elements of your employees' well-being addressed? Please provide a comprehensive answer.

.....

.....

.....

3.2(a) What are the objectives and anticipated outcomes of each programme/element of well-being outlined in your institution's well-being programme?

.....

.....

.....

3.2(b) How are the outcomes of each programme/element of well-being outlined in your institution's well-being programme **measured**? Please provide a comprehensive answer.

.....

.....

3.3(a) Does your institution have a policy and procedure in place that support its employee well-being programme?

Yes

☐

No

☐

3.3(b) How are employees informed about the employee well-being policy and procedure, and the annual well-being programme offered?

.....

.....

.....

3.3(c) Is your institution's employee well-being programme a generic programme, or is it based on the unique challenges affecting their well-being, as relevant to the specific context of the organisation? Please motivate your answer.

.....

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.....

My sincere appreciation for taking the time to complete this questionnaire!

Please e-mail the (i) completed consent form, (ii) completed questionnaire, (iii) as well as your institution's employee well-being programme, and any other appropriate appendices to lvstraat@cut.ac.za by no later than [date].

Yours sincerely

Laurika van Straaten

RESEARCHER

ANNEXURE K 1

Letter to participants in empirical research who responded telephonically to the questionnaire

**Researcher:**

Ms L van Straaten
Room 101
ZR Mahabane Building
CUT
Tel. (051) 507 3016
e-mail: lvstraat@cut.ac.za

Study leader:

Dr A du Plessis
Tel. (012) 420 2498
e-mail: Annelize.DuPlessis@up.ac.za

Date

Attention: Deputy Vice-Chancellor/Vice-Rector/Director: HR/Officer responsible for
Employee Wellness/wellbeing
[Name of SA public HEI]

INVITATION TO PARTICIPATE IN EMPIRICAL RESEARCH STUDY AMONGST SOUTH AFRICAN PUBIC HIGHER EDUCATION INSTIITUIONS BY RESPONDING TO A QUESTIONNAIRE TELEPHONICALLY

I am a registered Doctoral Degree student in Higher Education Studies at the University of the Free State, with student number 2011099955.

As an employee of a South African HEI, I wish to contribute towards enhanced employee well-being at South African public HEIs. Thus, I intend to conduct research in the field of higher education. The title of my research is "*An integrated framework for enhanced staff well-being at South African public higher education institutions*". The research will take the form of a semi-structured, open-ended questionnaire to be administered telephonically. Your answers to each question will be repeated to you. The telephonic session will be audio recorded, and transcribed, and the completed questionnaire will be sent to you via e-mail, to confirm that your responses were captured accurately. The questionnaire will take approximately 30 minutes to complete.

The aim of the research is to explore the nature and characteristics of integrated employee well-being programmes applied by SA public HEIs, how the effectiveness of such programmes is measured, and whether an integrated employee well-being programme for SA HEIs could assist in improving employees' well-being. A combined interpretation of the research findings and the literature is anticipated to lead to the development/design of a proposed integrated employee well-being framework for SA HEIs, which could benefit these HEIs, should they wish to make use of the framework.

Participation in the study will be voluntary. The identity of all participating institutions, participants and their responses will be treated anonymously and as confidential. Participants may withdraw from the research at any stage. Participants will also sign informed consent forms. Should participants be unhappy with any aspect of the research, they may contact my supervisor, Dr A du Plessis, on telephone number 012 – 420 2498, or at e-mail address Annelize.DuPlessis@up.ac.za to intervene. Should an issue should arise that makes you uncomfortable, you may at any time inform me, and cease to participate in the telephonic session, without any repercussions.

No harm will be inflicted upon any participant. The data will be regarded as confidential and kept safely on my computer, with the necessary passwords, or locked in a cabinet when printed, and by not allowing any unauthorised persons access to the data. Data will be de-identified early in the research process by means of coding keys, to be kept separate from the data.

Permission to conduct this study was obtained from the University of the Free State (UFS)'s Faculty of Education (ethical clearance number UFS-HSD2016/1176). Your university also approved my request to conduct this research, which is attached to this e-mail.

You may keep this cover page for future reference purposes. Please complete the consent signature page on page 2 of this document, and return to me at e-mail address lvstraat@cut.ac.za by no later than (date).

Your favourable consideration of this application would be highly appreciated!

.....

Ms Laurika van Straaten

Student number: 2011099955

Questionnaire completed telephonically

Good morning/good afternoon

Thank you very much for participating in this research study by completing the questionnaire telephonically. As explained to you in our telephonic discussion of [date], I am a registered Doctoral Degree student in Higher Education Studies at the University of the Free State. Permission to conduct this study was obtained from the University of the Free State's Faculty of Education, and from your university, and I have supplied you with proof of these approvals via e-mail.

As I have indicated to you in the invitation letter to participate in this study, I am an employee of a South African higher education institution, and I wish to contribute towards enhanced employee well-being at South African public HEIs. The title of my research is "*An integrated framework for enhanced staff well-being at South African public higher education institutions*".

The aim of the research is to explore the nature and characteristics of integrated employee well-being programmes applied by SA public HEIs, how the effectiveness of such programmes is measured, and whether an integrated employee well-being framework for SA HEIs could assist in improving employees' well-being. A combined interpretation of the research findings and the literature is anticipated to lead to the development/design of a proposed integrated employee well-being framework for SA public HEIs.

While I would greatly appreciate your participation in this important study and the valuable contribution you can make, your participation in the study is on a voluntary basis, and you are under no obligation to complete this telephonic questionnaire. Your identity, as well as your responses, will be treated anonymously and as confidential. No harm will be inflicted on you as a participant. Should an issue should arise that makes you uncomfortable, you may at any time inform me, and cease to participate in the telephonic answering of the questionnaire, without any repercussions.

Should you experience any discomfort or dissatisfaction with the manner in which this telephonic questionnaire is being conducted, please feel free to alert me to this. You are also welcome to contact my research supervisor (her contact details are indicated in the letter that I sent to you when I invited you to participate in this research).

This telephonic questionnaire is envisaged to take approximately 30 minutes of your time.

I have received your written informed consent form via e-mail.

I shall now proceed to asking the questions. I shall repeat your response to each question to you, to ensure that I have captured your response accurately. I am also voice-recording the questions that I ask, and your responses, and will listen to the recording for purposes of transcribing your answers unto the questionnaire. Upon completion thereof, I shall e-mail the form with the responses to you, for you to confirm that your responses were captured accurately. Please provide the following details:

Name of your institution:

Your position & post level:

Your years of service at institution:

Gender:

Race:

Age:

("Gender", "race" and "age" are included above, as these variables may play a role in how different genders, races and age groups experience well-being. However, if you wish not to provide the information on these categories, you are welcome to omit it).

QUESTIONNAIRE: PLEASE ANSWER THE QUESTIONS AS COMPREHENSIVELY AS POSSIBLE, IN THE SPACE PROVIDED BELOW EACH QUESTION.

Question 1

1.1

(a) How do you/does your institution define the concept of "well-being"?

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.....
.....

- (b) What are the core premises, and what is the philosophy of employee well-being that drive/drives your institution's employee well-being efforts?

.....

.....

.....

- 1.4 Do you have an employee well-being programme at your institution? (Mark the appropriate block with an "X").

Yes

☐

No

☐

- 1.5 (a) If you do not have any well-being programme for employees at your institution, do you think there might be a need for such a programme? (Mark the appropriate block with an "X".)

Yes

☐

No

☐

- 1.3.1 Why? (Please motivate your answer in 1.3 (a) above) .

.....

.....

.....

- 1.3.3 If your institution does not have an employee well-being programme, what **elements of employees' well-being**, in your opinion, should be addressed in such an envisaged employee well-being programme for your institution? Please **motivate** your answer.

.....

.....

1.4(a) If your institution does have an employee well-being programme, please state the name(s)/type(s) of the/these well-being programme(s), and what it entails/they entail?

.....

.....

.....

1.4(b) Is/are your employee well-being programme(s) a short-term, or a medium-term programme? Mark the appropriate block with an "X":

Short-term intervention:

☐

Medium-term intervention:

☐

1.5 If your institution offers/has an employee well-being programme, in your view, (a) what are the current **strengths** of that programme? (b) Please **motivate** your answer.

(c) Current strengths (list them here):

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.....

.....

(d) Motivation:

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- 1.6 (a) What would you view as the **weaknesses** of your institution's current employee well-being programme? Please motivate your answer.

Weaknesses (list them here):

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Motivation:

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Question 2

- 2.1(a) Please provide detailed information regarding your institution's employee well-being programme itself (its **core elements/structure/main focus**).

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- 2.1(b) How does your institution offer its employee well-being programme? Please provide a **narrative/comprehensive** answer.

.....

.....

.....

2.1(c) Please attach your institution's employee wellness programme (including plans/framework/strategy/policies/interventions, etc.), together with the completed questionnaire, via e-mail. *(NB: I wish to re-emphasise that the name of your institution will not be made known, in any manner, neither will its well-being programme be shared beyond this research, or attached to the name of your institution. The well-being programme will be merely analysed for purposes of this research.)*

Well-being plans/framework/strategy/policy/etc. attached (please mark with an X):

Yes

☐

No

☐

2.2(a) How was your institution's employee well-being programme developed?

.....

.....

.....

2.2(b) Which stakeholders were involved in the development of the programme?

.....

.....

.....

2.3(a) In your view, how **effective** is your institution's employee well-being programme, and why?

.....

.....

.....

2.3(b) How is the effectiveness of your institution's employee well-being programme **assessed/measured**?

.....

.....

.....

2.3(c) What are the typical **areas of focus** in the assessment/measurement of the effectiveness of your institution's employee well-being programme, and why?

Typical areas of focus (list them here):

.....

.....

.....

Motivation:

.....

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.....

2.3(d) How does the assessment/measurement of the effectiveness of your institution's employee well-being programme **inform** the institution's employee well-being programme/efforts?

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2.4(a) How **actively** has the well-being programme been implemented at your institution?

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2.4(b) For how long has the well-being programme been implemented at your institution?

.....

.....

.....

2.4 (c)

(i) When last was the well-being programme **revised** to be aligned with the latest trends in employees' well-being worldwide, **and** to address the demographics of your institution?

.....

.....

.....

(ii) Please provide examples of the alignments referred to in 2.4 c (i) above that were done in the past few years.

.....

.....

.....

Question 3

3.1(a) Which **elements** of employee well-being (e.g. physical, emotional, spiritual, psychological, social, financial, environmental, etc.) does your institution's well-being programme address?

.....

.....

.....

3.1(b) How/by which means are the elements of your employees' well-being addressed? Please provide a comprehensive answer.

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3.2(a) What are the objectives and anticipated outcomes of each programme/element of well-being outlined in your institution's well-being programme?

.....

.....

.....

3.2(b) How are the outcomes of each programme/element of well-being outlined in your institution's well-being programme **measured**? Please provide a comprehensive answer.

.....

.....

3.3(a) Does your institution have a policy and procedure in place that support its employee well-being programme?

Yes

☐

No

☐

3.3(b) How are employees informed about the employee well-being policy and procedure, and the annual well-being programme offered?

.....

.....

.....

3.3(c) Is your institution's employee well-being programme a generic programme, or is it based on the unique challenges affecting their well-being, as relevant to the specific context of the organisation? Please motivate your answer.

.....

.....

.....

My sincere appreciation for taking part in this research, and for answering the questionnaire telephonically! Have a very blessed day! Goodbye.

Consent form: participants who participate in empirical research by responding to the questionnaire telephonically

Consent form

I, _____(your name), agree / do not agree (delete that which is not applicable) that I consent to participate in the research project titled: **“AN INTEGRATED FRAMEWORK FOR ENHANCED STAFF WELL-BEING AT SOUTH AFRICAN PUBLIC HIGHER EDUCATION INSTITUTIONS”** as a representative of my employer, by responding telephonically to a questionnaire.

I understand that the researcher subscribes to the following principles:

- *Voluntary participation in research*, implying that the validation panel members might withdraw from participation in the validation process at any time.
- *Informed consent*, meaning that validation panel members must be fully informed about the validation process and purposes, and must provide written consent to participate in the validation process.
- *No harm in participation*, meaning that the validation panel members should not be placed at risk or be exposed to harm of any kind.
- *Privacy*, implying that the anonymity and confidentiality of all validation panel members shall be protected at all times.
- *Trust*, meaning that validation panel members will not be deceived or betrayed in the process of validation, or the publishing of the outcomes.

Signature: _____

Date: _____

Invitation to experts to participate in pilot validation survey

**Researcher:**

Ms L van Straaten
Room 101
ZR Mahabane Building
CUT
Tel. (051) 507 3016
083 272 8602
e-mail: lvstraat@cut.ac.za

Supervisor

Dr A du Plessis
Tel. (012) 420 2498
e-mail: annelize.duplessis@up.ac.za

Date

Invitation to participate in pilot validation survey

Dear

RE: BACKGROUND INFORMATION AND REQUEST FOR INFORMED CONSENT TO PARTICIPATE AS VALIDATION PANEL MEMBER

My name is Laurika van Straaten. I am a registered PhD student at the University of the Free State in the field of Higher Education Studies. I have also been an employee of an SA public higher education institution (HEI) for more than 23 years. For the past eight years, I have conducted research on the well-being of employees of SA public HEIs, and how their well-being can be improved. First, I conducted a Master's study into the subject of the well-being of support services employees at a South African public HEI, and how their well-being could be enhanced by means of the power of appreciation. Secondly, for the past five years, as part of my doctoral study, I have conducted an extensive literature review and empirical study on the well-being programmes offered by SA public HEIs, to identify any possible gaps in terms of these addressing all the important dimensions of employees' well-being, as identified from the literature, and also in terms of how integrated their well-being programmes are.

As such, I wish to make a contribution towards the enhancement of employees of SA public HEIs' well-being.

You were selected to participate in this research as a validation panel member, in your personal/private capacity, due to your expertise in the disciplines of industrial psychology, educational psychology, organisational development, positive psychology and/or related fields within the SA higher education arena. The purpose of your participation is to evaluate the viability and relevance of each component/subcomponent of the integrated employee well-being framework, and to obtain your possible inputs towards the improvement thereof.

My research topic is *AN INTEGRATED FRAMEWORK FOR ENHANCED STAFF WELL-BEING AT SOUTH AFRICAN PUBLIC HIGHER EDUCATION INSTITUTIONS*. The purpose of this study therefore is to design an integrated well-being framework that may be used by SA public HEIs to facilitate their employee well-being efforts. This study has received ethics clearance from the Research Ethics Committee of the Faculty of Education at the University of the Free State, as per ethical clearance number UFS-HSD2016/1176.

The literature review conducted for purposes of this study indicated that there is a need for an integrated framework that may assist SA public HEIs to address their employees' well-being holistically, and in an integrated manner. The contribution of this study is therefore to design and validate such an integrated well-being framework which may be used by SA public HEIs to ensure that they address all the identified components of employees' well-being via their different well-being programmes, and that they do so in a holistic, integrated manner, towards enhanced employee well-being. The integrated well-being framework could also be of value to other organisations aspiring to make a positive contribution towards their employees' well-being.

The findings of the following research activities were integrated to present the proposed integrated employee well-being framework for SA public HEIs:

- A preliminary literature review (local and international) on the topic of employee well-being.
- A baseline pilot study amongst four SA public HEIs conducted at the onset of this study (in 2016) via a semi-structured, open-ended questionnaire to determine why it is important for SA public HEIs to improve their employees' well-being; what holistic well-being entails (i.e. what the important dimensions (building blocks) of well-being are); and how optimal well-being can be achieved and sustained.
- An extended literature review (local and international) was conducted on conclusion of the baseline pilot study to explore which well-being programmes (models, frameworks, interventions, frameworks, etc.) are most effective in enhancing employees' well-being and establishing a flourishing workforce.
- After having invited all 26 SA public HEIs to participate in the research, a semi-structured, mainly open-ended questionnaire survey was conducted amongst 11 SA public HEIs who were willing to participate in the research; amongst others to determine how they define the concept of employee well-being; whether they have employee well-being programmes in place, and what these programmes entail; what dimensions of well-being their employee well-being programmes are addressing; whether their well-being efforts are guided by institutional policies on employee well-being; what the perceived strengths and weaknesses of their well-being programmes are, etc.
- As explained above, following the pilot study, an extended literature review was conducted over a period of two years. This included document analysis, or text reviews. The process of document analysis that I followed entailed studying various global and local institutional well-being documents – amongst others policies, strategies, models, frameworks, programmes and initiatives; the WHO's guidelines related to employee wellness; the Mental Health Organization's various policy documents on mental health; overseas' universities' policy and guiding documentation on employee well-being (e.g. those of the universities of Minnesota, Brighton, Birmingham); the Okanagan

Charter for Health Promoting Universities and Colleges; the websites of various companies and universities, and their well-being initiatives; the South African Board for People Practices (SABPP)'s HR Management Standard for South Africa; the South African Constitution; as well as the employee well-being programmes of SA public HEIs (including well-being strategies, policies, frameworks and annual well-being events offered) that were provided to me by SA public HEIs as part of the empirical research process. This process of document analysis assisted me to confirm the literature findings on the dimensions and requirements of integrated employee well-being programmes. Furthermore, the process of document analysis allowed for greater or lesser depth and breadth in data analysis, as required. It also allowed for the use of triangulation and the ability to search for variations in the data around the same phenomenon.

Please refer to the attached document for the presentation of the proposed integrated employee well-being framework for SA public HEIs. The following should be noted:

- **Sections 1 to 7 present the proposed integrated employee well-being framework for SA public HEIs, as well as three columns next to each component/subcomponent, where you are required to use the rating scale (ES = Essential; UF = Useful; NN = Not Necessary) to indicate your evaluation of each specific component/subcomponent, by marking the appropriate chosen block with an X.**

No possible risks are foreseen for your participation in this research as a validation panel member. The confidentiality of information will be ensured at all times. Names/surnames will not be recorded anywhere, and answers will be given a fictitious code number or a pseudonym, and will be referred to in this manner in the data, any publications, or other research reporting methods such as conference proceedings or journal articles. Only the principal researcher, whose name appears above, will have access to the raw data. The researcher will store hard copies of answers in a locked cupboard/filing cabinet in her office for auditing purposes, whilst electronic information

will be stored on a computer, and protected via password protection. Future use of the stored data will be subject to further research ethics review and approval, if and where applicable. Hard copies will be destroyed after a period of five years, and digital files will be deleted.

No payment or incentive will be offered to any member of the validation panel. Validation panel members will also not be required to incur or contribute to any costs that may arise from the validation process.

If you would like to be informed of the final research findings, please contact me (Ms L van Straaten on 0832728602, or at e-mail address lvstraat@cut.ac.za). The findings should be available after December 2019. Should you require any further information, or wish to contact the researcher regarding any aspect related to the study, please contact Ms L van Straaten.

Should you have concerns about the way in which the validation has been conducted, you may contact Dr A du Plessis on 012- 4202498, or at e-mail address Annelize.DuPlessis@up.ac.za.

If you agree to participate as a validation panel member, **please complete the consent form below and e-mail it back to Ms L van Straaten.**

Yours sincerely

Ms L van Straaten (Researcher)

Dr A du Plessis (Supervisor)

Information to pilot validation panel members

IMPORTANT NOTES ON THE INTEGRATED EMPLOYEE WELL-BEING FRAMEWORK DESIGNED FOR SOUTH AFRICAN PUBLIC HIGHER EDUCATION INSTITUTIONS

1. This integrated well-being framework for SA public HEIs serves as a guideline for SA public HEIs, to assist them to include all the dimensions of well-being into their own well-being programmes, to identify some of the components of each dimension, and to create an enabling environment within which their employees can flourish.
2. This framework does not aim to replace the actual well-being programmes of SA public HEIs, but will assist them to understand the multiple dimensions/facets of well-being and the interchange between these dimensions, and their subcomponents, in order to address their employees' well-being in a more holistic, integrated and effective manner.
3. Since this is an integrated employee well-being framework, there are areas of overlapping between the different subcomponents of the dimensions/building blocks of well-being (see components 2 A to 2 I).
4. Furthermore, the components and sub-components of the integrated employee well-being framework developed for SA public HEIs were identified based on (i) the results obtained from the preliminary literature review performed, (ii) the baseline pilot study conducted amongst SA public HEIs; (iii) the extended literature review performed; (iv) document analysis on various well-being programmes (including well-being models, frameworks, strategies, etc.) applied globally, and based on a review of the current well-being programmes of SA public HEIs availed to me by the participants as part of the empirical research; (v) the results flowing from the empirical research conducted amongst 11 SA public HEIs, and (vi) the principles of positive psychology theory, well-being theory and flourishing theory, as well as other well-being theories such as appreciative inquiry, authentic happiness theory and hope theory, from which I synthesised an integrated well-being theory. My synthesis of integrated well-being theory entails that optimal human flourishing requires living a well-balanced life, and addressing one's well-being at physical, emotional, social, psychological, financial, spiritual, environmental, intellectual and occupational level, and in an integrated manner, as applied in, and advocated by this integrated well-being framework for SA public HEIs.

5. SA public HEIs need to ensure that their efforts to improve their employees' well-being are done in an integrated manner, whilst compartmentalising the different dimensions/components of well-being should be avoided - always keeping in mind that these dimensions/components of well-being are not disconnected, but interconnected. For example, negative thoughts and emotions can cause diseases in the body such as cancer, high blood pressure, depression, insulin resistance, etc., and such illnesses could also influence employees' well-being at, amongst others, emotional and psychological level.
6. SA public HEIs should keep in mind that well-being is not an initiative. It is all about creating a positive institutional culture and an enabling environment and institutional culture within which employees are able to thrive.
7. The ethics and values of each SA public HEI should form the core of their own well-being interventions.
8. SA public HEIs' well-being programmes should be aligned with their vision and mission statements, their values and strategic plans.
9. Both employees and their employers have a responsibility in terms of optimising their well-being. SA public HEIs should be aware of their unique role and responsibility in this regard.
10. SA public HEIs' should each develop a policy on employee well-being, as well as a well-being strategy to facilitate and guide the implementation of their well-being efforts. Furthermore, all institutional policies should support SA public HEIs' well-being programmes.

Questionnaire for completion by validation panel members: pilot validation

Please answer all the questions as honestly as possible. Mark your choice with a cross (X) in the appropriate box.

	Male
	Female

	Black
	Coloured
	White
	Indian
	Other (please specify):

4. Please provide a brief description of your expertise (including qualifications and significant achievements) in the disciplines of industrial psychology, educational psychology, organisational development, well-being and/or higher education, as well as your number of years' experience in each field mentioned:

Field of expertise	Number of years' experience

5. 1 Please answer all questions/choose options in our personal capacity and not on behalf of your institution.
- 5.2 Please rate, in your own opinion, each of the components and sub-components included in the proposed integrated well-being framework for SA public HEIs according to its importance. The rating scale for importance consists of three levels to choose from, namely **“essential” (ES)**, **“useful” (UF)**, and **“not necessary” (NN)**.

INTEGRATED EMPLOYEE WELL-BEING FRAMEWORK FOR SOUTH AFRICAN PUBLIC HIGHER EDUCATION INSTITUTIONS				
COMPONENT 1: DEFINING THE CONCEPT OF WELL-BEING (see A1 – A2.14 below)				
A. What the concept of well-being entails				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
A1	The concept of well-being includes/entails the following:			
	A1.1 Well-being includes being happy, but is about more than happiness			
	A1.2 Well-being entails high levels of subjective well-being			
	A1.3 Well-being is multi-faceted, and consists of various dimensions/"building blocks" (see section 2 (2A to 2I) below for more details).			
	A1.4 Important dimensions (building blocks) of well-being include physical, emotional, psychological (mental), social, financial, spiritual, environmental, intellectual and occupational well-being (see section 2 (2A to 2I) below for more details).			
	A1.5 The different dimensions (building blocks) of well-being (mentioned in A1.4 above) are interlinked, and should therefore be addressed in an integrated manner, and not in silos.			
A2	Well-being entails positive feelings and positive functioning, such as:			
	A2.1 Emotional stability			
	A2.2 Engagement			
	A2.3 Living a meaningful life			
	A2.4 Living a balanced life			
	A2.5 Being optimistic			
	A2.6 Positive emotions			
	A2.7 High morale			
	A2.8 Positive relationships			

	A2.9 Resilience (ability to “bounce back”/cope with difficult life circumstances)			
	A2.10 Positive self-esteem			
	A2.11 Vitality			
	A2.12 Having hope for the future			
	A2.13 Being satisfied with your life (including work)			
	A2.14 Flourishing (living optimally; thriving)			
Additional comments:				
COMPONENT 2: DIMENSIONS/BUILDING BLOCKS OF WELL-BEING				
2 A: <u>Physical well-being</u>, which includes features 2 A.1 to 2 A 2.17 below				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
2 A.1	Physical well-being is an important dimension of human well-being.			
2 A.2	Physical well-being entails/includes:			
	2 A 2.1 Following a healthy diet			
	2 A 2.2 Proper hydration			
	2 A 2.3 Exercising/being active			
	2 A 2.4 Maintaining a healthy body weight (BMI)			
	2 A 2.5 Exposure to sunlight			

	2 A 2.6 Making time to relax			
	2 A 2.7 Getting sufficient sleep			
	2 A 2.8 Make time for meditation			
	2 A 2.9 Living mindfully			
	2 A 2.10 Avoiding harmful habits such as smoking, drinking too much alcohol, using drugs, etc.			
	2 A 2.11 Being safe and secure			
	2 A 2.12 Maintain a good posture			
	2 A 2.13 Experiencing optimal health			
	2 A 2.14 Having vitality			
	2 A 2.15 Having sufficient energy			
	2 A 2.16 Managing stress successfully			
	2 A 2.17 Having regular medical check-ups			
Additional comments:				
2 B: <u>Emotional well-being</u>, which includes features 2 B 1 to 2 B 2.24 below				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
2 B.1	Emotional well-being is an important dimension of human well-being.			
2 B 2	Emotional well-being entails/includes:			
	2 B 2.1 Having a positive outlook on life			

	2 B 2.2 Being emotionally aware			
	2 B 2.2.1 Understanding the value of one's emotions			
	2 B 2.2.2 Being aware of the state of your overall well-being			
	2 B 2.3 Being emotionally stable			
	2 B 2.4 Having emotional energy/vitality			
	2 B 2.5 Taking positive action			
	2 B 2.6 Taking responsibility for your own emotions			
	2 B 2.7 Self-acceptance (having a positive self-concept)			
	2 B 2.8 Having a good self-esteem			
	2 B 2.9 Being assertive			
	2 B 2.10 Being happy/joyful			
	2 B 2.11 Experiencing peace			
	2 B 2.12 Being mindful			
	2 B 2.13 Being fulfilled			
	2 B 2.14 Resilience (the ability to cope with difficult life circumstances and traumatic events)			
	2 B 2.15 Focusing your energy on important personal priorities			
	2 B 2.16 Ability to adapt to change			
	2 B 2.17 Ability to make essential changes to grow and live a fulfilled life			
	2 B 2.18 Coping with stress/navigating stressful situations			
	2 B 2.19 Ability to solve problems			
	2 B 2.20 Interpersonal skills			
	2 B 2.21 Intrapersonal coping skills			
	2 B 2.22 Good decision-making skills			
	2 B 2.23 Experiencing high morale			
	2 B 2.24 Having hope for the future			

Additional comments:				
2 C: <u>Psychological (mental) well-being</u>, which includes features 2 C 1 to 2 C 2.29 below				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
2 C 1	Psychological (mental) well-being is an important dimension of human well-being.			
2 C 2	Psychological (mental) well-being entails/includes:			
	2 C 2.1 Autonomy			
	2 C 2.2. Environmental mastery			
	2 C 2.3 Personal growth			
	2 C 2.4 Positive relations with others			
	2 C 2.5 Becoming aware of/finding your purpose in life			
	2 C 2.6 Self-acceptance			
	2 C 2.7 Self-efficacy (the ability to believe that your will succeed in life)			
	2 C 2.8 Emotional stability			
	2 C 2.9 Ability to manage conflict			
	2 C 2.10 Knowledge of own abilities			
	2 C 2.11 Ability to cope with normal stress of life			
	2 C 2.12 Ability to work productively/fruitfully			

	2 C 2.13 Ability to function effectively within one's community			
	2 C 2.14 Ability to make a positive contribution to one's community			
	2 C 2.15 Feeling connected to one's community/surroundings			
	2 C 2.16 Making the most of opportunities			
	2 C 2.17 Having control and freedom over one's life			
	2 C 2.18 Mind-body integration			
	2 C 2.19 Having emotional vitality			
	2 C 2.20 Resilience/ability to cope with difficult life circumstances and traumatic events			
	2 C 2.21 Having high self-esteem			
	2 C 2.22 Being optimistic			
	2 C 2.23 Feeling that your life has value			
	2 C 2.24 Displaying emotional intelligence			
	2 C 2.25 Having positive thoughts and emotions			
	2 C 2.26 Having high morale			
	2 C 2.27 Experiencing life as enjoyable			
	2 C 2.28 Being enthusiastic about life			
	2 C 2.29 Experiencing feelings of vigour			
Additional comments:				

2 D: <u>Social well-being</u> , which includes features 2 D 1 to 2 D 2.16 below				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
2 D 1	Social well-being is an important dimension of human well-being			
2 D 2	Social well-being entails/includes:			
	2 D 2.1 The ability to develop, build and maintain positive personal relations/social ties (social inclusion)			
	2 D 2.2 Having a sense of belonging			
	2 D 2.3 Having a sense that your life has value, and that others value you			
	2 D 2.4 Having regular contact with other people who believe in us, support us and care for us (e.g. family, friends and colleagues)			
	2 D 2.5 Developing interpersonal skills			
	2 D 2.6 The ability to manage conflict successfully			
	2 D 2.7 Using one's skills and abilities to function optimally in life			
	2 D 2.8 Developing a value system, beliefs and traditions that are important to you			
	2 D 2.9 Meaningful engagement with others			
	2 D 2.10 To be socially accepted			
	2 D 2.11 Living a meaningful life			
	2 D 2.12 Embracing your own cultural identity			
	2 D 2.13 Respecting the cultural identity of others			
	2 D 2.14 Improving the workplace culture			
	2 D 2.15 Offering help/assistance to others (e.g. doing community work)			
	2 D 2.16 Ability to receive support/help from others when needed			
Additional comments:				

2 E: <u>Financial well-being</u>, which includes features 2 E 1 to 2 E 2.10 below				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
2 E 1	Financial well-being is an important dimension of human well-being			
2 E 2	Financial well-being entails/includes:			
	2 E 2.1 Living within your financial means			
	2 E 2.2 Sticking to your budget			
	2 E 2.3 Managing your finances effectively			
	2 E 2.4 Feeling good about the financial decisions you are making			
	2 E 2.5 Saving on a monthly basis			
	2 E 2.6 Debt management (e.g. going for debt counselling if you have ended up in debt/struggle to make payments)			
	2 E 2.7 Making wise financial investments			
	2 E 2.8 Putting sufficient retirement planning in place			
	2 E 2.9 Experiencing financial security			
	2 E 2.10 Being financially literate			
Additional comments:				

2 F: <u>Spiritual well-being</u> , which includes features 2 F 1 to 2 F 2.26 below				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
2 F 1	Spiritual well-being is an important dimension of human well-being.			
2 F 2	Spiritual well-being entails/includes:			
	2 F 2.1 Discovering who you are			
	2 F 2.2 Discovering the meaning of your life			
	2 F 2.3 Discovering the value of your life			
	2 F 2.4 Discovering your purpose in life			
	2 F 2.5 A sense of peace and contentment			
	2 F 2.6 Living for a greater cause			
	2 F 2.7 Having a relationship with someone you believe to be bigger than yourself (a higher power)			
	2 F 2.8 Serving a higher power			
	2 F 2.9 Having faith in a higher power			
	2 F 2.10 Helping others			
	2 F 2.11 Making provision for quiet time in your daily life/routine for purposes of self-reflection			
	2 F 2.12 Living a meaningful life			
	2 F 2.13 Search for the sacred			
	2 F 2.14 Assisting people to deal with major life stressors (e.g. loss of loved ones; illness; natural disasters; divorce; serious mental illness; etc.)			
	2 F 2.15 Regarding work as a calling			
	2 F 2.16 Positive effect on mortality and depression rates			
	2 F 2.17 Positive effect on our happiness and life satisfaction levels			

	2 F 2.18 Forgiving others			
	2 F 2.19 Having a sense of hope			
	2 F 2.20 Practicing meditation (spiritual purification)			
	2 F 2.21 Having integrity			
	2 F 2.22 Aligning your personal values and beliefs with what you believe in			
	2 F 2.23 Spiritual well-being acts as a buffer against depression			
	2 F 2.24 Spiritual well-being acts as a buffer against demoralisation			
	2 F 2.25 Spiritual well-being acts as a buffer against despair/hopelessness			
	2 F 2.26 Spiritual well-being acts as a buffer against anxiety			
Additional comments:				
2 G: <u>Environmental well-being</u>, which includes features 2 G1 to 2 G16 below				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
2 G 1	Environmental well-being is an important dimension of human well-being			
2 G 2	Environmental well-being entails/includes:			
	2 G 2.1 Physical environmental factors such as air quality, clean water, proper ventilation, etc., which impact on our well-being			
	2 G 2.2 Social environmental factors such as relations at home; relations at work; a discrimination free and fear-free work environment, which impact on our well-being			

	2 G 2.3 <i>Ergonomics (designing/arranging workspaces, products and systems to fit the people using them, ensuring sufficient space, lighting, ventilation, support, etc.)</i>			
	2 G 2.4 <i>External environmental influences (e.g. family, society, politics, war, the economy, etc.) impact on our well-being</i>			
	2 G 2.5 A positive work environment positively impacts on our performance			
	2 G 2.6 A positive work environment positively impacts on our behaviour			
	2 G 2.7 A positive work environment positively impacts on our motivation to act			
	2 G 2.8 A positive work environment reduces our stress levels			
	2 G 2.9 Our direct environment facilitates or discourages interactions with colleagues, family and others			
	2 G 2.10 Pleasing and healthy surroundings contribute to personal fulfilment			
	2 G 2.11 A pleasing and healthy work environment improves our mood			
	2 G 2.12 A pleasing and healthy work environment positively affects our immune system			
	2 G 2.13 A pleasing and healthy work environment positively affects our physical health			
	2 G 2.14 Living and working in a safe environment improves our well-being			
	2 G 2.15 Working in a stimulating environment contributes to our well-being			
	2 G 2.16 <i>Noise levels impact on our well-being</i>			
Additional comments:				
2 H: <u>Intellectual well-being</u> , which includes features 2 H1 to 2 H 2.8 below				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				

		ES	UF	NN
2 H 1	Intellectual well-being is an important dimension of human well-being			
2 H 2	Intellectual well-being entails/includes:			
	2 H 2.1 Participation in scholastic, cultural and community activities			
	2 H 2.2 Valuing creativity, curiosity and lifelong learning			
	2 H 2.3 Enabling one to live a successful and stimulating life			
	2 H 2.4 Expanding our knowledge and skills			
	2 H 2.5 Sharing our knowledge and skills			
	2 H 2.6 Keeping our minds flexible, informed and engaged			
	2 H 2.7 Improving our mindfulness (ability to live in, and focus on the present moment)			
	2 H 2.8 Stimulating and improving the health of our brains and preventing mental decline			
Additional comments:				
2 I: <u>Occupational well-being</u>, which includes features 2 I 1 to 2 I 2 50.6 below				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
2 I 1	Occupational well-being is an important dimension of human well-being			
2 I 2	Occupational well-being entails/includes:			
	2 I 2.1 Using our skills, gifts and talents at work to enrich our lives and give purpose to our lives			

	2 2.2 Performing meaningful work			
	2 2.3 Occupational/job satisfaction (enjoying our work and finding it stimulating and rewarding)			
	2 2.4 Job security			
	2 2.5 Being engaged at work			
	2 2.6 Work/job characteristics affects our well-being			
	2 2.7 Having autonomy			
	2 2.8 Being competent to do your work			
	2 2.9 Aspiring to be the best you that you can be at the workplace			
	2 2.10 Sufficient opportunities for learning, personal growth/development			
	2 2.11 Sufficient opportunities for promotion/career advancement/job progression/talent management			
	2 2.12 Work environment that facilitates interactions with colleagues, peers, supervisors, stakeholders, etc.			
	2 2.13 Successful conflict management at work			
	2 2.14 Healthy, supportive relations with supervisors, peers and stakeholders, etc.			
	2 2.15 Healthy, positive relations with all stakeholders			
	2 2.16 Having high morale at work			
	2 2.17 Experiencing positive emotions and having positive experiences at work			
	2 2.18 Creating “flow” whilst working (“flow” = a state of concentration and engagement when completing a task that requires concentration, and which challenges your skills/becoming absorbed in what you are doing)			
	2 2.19 Positive attitude about your work			
	2 2.20 Relaxed, enabling work environment			
	2 2.21 Work-life balance:			
	2 2.21.1 Balance between work and family life			

	2 2.21.2 Time to switch off from work and relax/recover from work (i.e. balance between work and leisure/work and recovery from work)			
	2 2.21.3 A work environment that allows for successful work/life integration			
	2 2.22 Having a manageable workload			
	2 2.23 There should be a balance between job demands and job resources in the workplace			
	2 2.24 Being suitable/fit for the job you have been appointed for			
	2 2.25 Work provides a sense of meaning and purpose			
	2 2.26 Performing well in your job			
	2 2.27 Achieving the goals related to your job			
	2 2.28 Feeling “part of” the organisation (a culture of inclusiveness at the workplace)			
	2 2.29 Working in a safe environment			
	2 2.30 Working in a peaceful environment			
	2 2.31 Working in a pleasant environment			
	2 2.32 Working in an appreciative work environment			
	2 2.33 Working in an environment where employees are being valued			
	2 2.34 Working in a stimulating work environment			
	2 2.35 Working in a supportive work environment			
	2 2.36 Working in an environment free from unnecessary stress			
	2 2.37 Working in a discriminatory free environment (where there is no discrimination based on race, religion, gender, disability, etc.)			
	2 2.38 Working in an environment where leaders are ethical and lead by example			
	2 2.39 Working in an environment where all employees are treated fairly			
	2 2.40 Working in an environment where all employees are treated equally			
	2 2.41 Being open to change in the institution			
	2 2.42 Being willing to learn new skills to perform your job more effectively			

	2 2.43 Having a positive/conducive work climate/organisational culture			
	2 2.44 Combatting/successfully managing normal levels of stress at work			
	2 2.45 Being paid fairly for the level of work you perform			
	2 2.46 Sufficient performance/reward systems in place			
	2 2.47 Experiencing high morale at work			
	2 2.48 Having ethical leaders who lead by setting a good example			
	2 2.49 Senior/line managers have an important role to play in both organisational and employee well-being			
	2 2.50.1 Senior/line managers can contribute to positive relations with employees			
	2 2.50.2 Senior/line managers can contribute to improving the organisational culture (amongst others through ethical leadership, caring for employees, being committed to and positive about the organisation)			
	2 2.50.3 Senior/line managers have an important role to play in motivating employees (amongst others by believing in them, inspiring them and leading by a good example)			
	2 2.50.4 Senior/line managers have an important role to play in increasing employees' performance (amongst others by motivating them, believing in them, building their self-esteem, and supporting them to perform better)			
	2 2.50.5 Senior/line managers have an important role to play in increasing employees' levels of engagement (amongst others by motivating them, and making them feel part of the organisation)			
	2 2.50.6 Senior/line managers have an important role to play in increasing employees' well-being (amongst others by treating them fairly and equally, motivating them, valuing and appreciating them, allowing them sufficient opportunities for growth and development, and truly caring about them)			
Additional comments:				

COMPONENT 3: SA PUBLIC HEIs SHOULD DEVELOP CLEAR EMPLOYEE WELL-BEING <u>POLICIES AND PROCEDURES</u> TO GUIDE AND FACILITATE THEIR WELL-BEING PROGRAMMES/EFFORTS (see 3.1 – 3.8 below)				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
3.1	A clear policy/policies and procedure(s) on employee well-being should be developed by each SA public HEI, to guide and facilitate their employee well-being efforts			
3.2	SA public HEIs' employee well-being policies should be guided by applicable national health and well-being legislation, frameworks, standards, strategies and policies (e.g. the SA Constitution, occupational health and safety legislation, labour and anti-discrimination legislation, etc.)			
3.3	SA public HEIs' employee well-being policies should be guided by, and support the institution's mission, vision, values and strategic plans			
3.4	SA public HEIs' employee well-being policies should be aligned with other applicable institutional policies			
3.5	All well-being programmes/efforts of SA public HEIs should be aligned with and guided by the strategic direction provided via the institution's well-being policy, as well as its vision, mission, values and strategic plans			
3.6	SA public HEIs should identify all the different stakeholders in employee well-being, and should involve/consult them in the development of policies/procedures on employee well-being (e.g. unions, HR, employees, Institutional Forums, etc.)			
3.7	Buy-in should be obtained from all SA public HEIs' institutional stakeholders (e.g. Management, unions, HR, employees, etc.) to ensure the successful implementation of any employee well-being policy			
3.8	All institutional well-being policies should be made available on SA public HEIs websites/electronic databases, or should be shared via any other appropriate communication media, (including, but not limited to e-mail, wellness days, workshops, awareness sessions, road shows etc.), for employees to acquaint themselves with the contents thereof; to ask questions about the policy; and to adhere thereto.			

Additional comments:				
COMPONENT 4: SA PUBLIC HEIs SHOULD EACH HAVE A CLEAR EMPLOYEE WELL-BEING <u>STRATEGY</u> (see 4.1 to 4.15 below)				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
4.1	SA public HEIs should develop clear well-being strategies, guided by each institution's well-being policy, as well as its vision, mission, values and strategic plans			
4.2	SA public HEIs should benchmark with other HEIs, both nationally and internationally, on the contents of their well-being strategies, to determine and apply best practice in the development of their own well-being strategies			
4.3	SA public HEIs' well-being strategies should provide guidelines on the establishment of effective employee well-being <u>programmes</u> to successfully execute their well-being efforts			
4.4	SA public HEIs' well-being strategies should guide the implementation of all their employee well-being initiatives			
	4.4.1 SA public HEIs' well-being strategies should clearly spell out the strategic thrusts related to employee well-being			
	4.4.2 SA public HEIs' well-being strategies should clearly spell out the principles adopted related to their employees' well-being			
	4.4.3 SA public HEIs' well-being strategies should clearly spell out the objectives related to their employees' well-being			

	4.4.4 SA public HEIs' well-being strategies should provide for the development of an employee well-being framework to guide the implementation of all institutional well-being efforts			
	4.4.5 SA public HEIs' well-being strategies should provide for an institutional implementation plan to be compiled to guide the implementation of their well-being programmes/efforts			
4.5	SA public HEIs' well-being strategies should clearly spell out their stances on and theoretical frameworks related to employee well-being			
4.6	SA public HEIs' well-being strategies should clearly spell out the dimensions of employees' well-being to be addressed via their different well-being programmes (e.g. physical, emotional, psychological (mental), social, financial, spiritual, well-being, etc.)			
4.7	SA public HEIs' well-being strategies should support the objectives of the institutions' well-being programmes			
4.8	SA public HEIs' well-being strategies should contain clear goals in terms of each well-being objective set			
4.10	SA public HEIs' well-being strategies should be clear on <u>how</u> the effectiveness of their strategies and specific well-being programmes will be monitored and evaluated (e.g. through reliable, validated tools such as questionnaires, annual surveys, interviewing employees, evaluating employees' positive mood, negative mood and life satisfaction levels, etc.)			
4.11	SA public HEIs' well-being strategies should be clear on <u>how regularly</u> the effectiveness of their strategies and specific well-being programmes will be monitored and evaluated (e.g. each semester, annually, etc.)			
4.12	SA public HEIs' well-being strategies should be adapted, based on outcomes and recommendations flowing from the regular monitoring and evaluation of their well-being programmes			
4.13	SA public HEIs' well-being strategies should constantly be monitored against, and aligned with the latest <u>global trends</u> in, and research on employee well-being, <u>as applicable to the institution</u>			
4.14	SA public HEIs' well-being strategies should provide guidelines for the <u>sustainable implementation</u> of the institution's well-being programmes.			

4.15	SA public HEIs could make their well-being strategies available on the respective institution's websites/electronic databases, or share it via any other appropriate communication media, (including, but not limited to, e-mail, wellness days, workshops, awareness sessions, road shows etc.), for employees to acquaint themselves with the contents thereof; to ask questions about the strategy, etc.			
Additional comments:				
COMPONENT 5: SA PUBLIC HEIs SHOULD DEVELOP EFFECTIVE WELL-BEING PROGRAMMES ADDRESSING ALL THE DIMENSIONS OF THEIR EMPLOYEES' WELL-BEING IN AN INTEGRATED MANNER (see 5.1 to 5.6.5 below)				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary NB: Mark with an X in the chosen block.				
		ES	UF	NN
5.1	SA public HEIs should develop effective employee well-being programmes guided by their well-being policies and strategies.			
5.2	SA public HEIs should benchmark with other HEIs, both nationally and internationally, on the contents of their well-being programmes, to determine and apply best practice in the development and application of their own well-being programmes.			
5.3	SA public HEIs' well-being programmes should address all the dimensions of their employees' well-being (i.e. their physical, emotional, psychological, social, financial, spiritual, environmental, intellectual and occupational well-being).			
5.4	SA public HEIs' well-being programmes should contain clear goals in terms of each of the dimensions of their employees' well-being, and how (by which means) these will be addressed			

5.5	SA public HEIs' well-being programmes should address all the dimensions of their employees' well-being in an <u>integrated</u> manner, and not fragmentedly/in silos			
5.6	The effectiveness of SA public HEIs' well-being programmes (as contained in their well-being strategies) should be regularly monitored and evaluated.			
	5.6.1 SA public HEIs' well-being strategies should make provision for the development of an institutional employee well-being monitoring and evaluation framework			
	5.6.2 SA public HEIs' well-being strategies should clearly spell out how the effectiveness of their well-being programmes will be monitored and evaluated			
	5.6.3 SA public HEIs' well-being strategies should clearly spell out the stakeholders to monitor and evaluate the effectiveness of their well-being programmes.			
	5.6.4 SA public HEIs' well-being strategies should clearly spell out how regularly the effectiveness of their well-being programmes will be monitored.			
	5.6.5 SA public HEIs' well-being strategies should clearly spell out by which means the effectiveness of their well-being programmes will be monitored.			
Additional comments:				
COMPONENT 6: INSTITUTIONAL/ORGANISATIONAL CULTURE, CLIMATE AND VALUES SHOULD CREATE AND ENABLING ENVIRONMENT FOR EMPLOYEES OF SA PUBLIC HEIs TO FLOURISH (see 6.1 to 6.17 below)				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
6.1	Institutional culture includes, amongst others, relationships, traditions, culture and the climate/environment (positive or negative) of the institution			

6.2	Employees are enabled to flourish in an institution where the institutional culture is positive			
6.3	Employees are enabled to flourish in an institution where they have positive relations with subordinates, peers, supervisors and stakeholders			
6.4	Employees are able to flourish in a discrimination free institution (where they are not discriminated against based on, amongst others, their race, age, culture, religion, disability, social status, etc).			
6.5	Employees are able to flourish in an institution where the institutional culture creates a conducive and enabling work environment			
6.6	Employees are able to flourish in an institution where the institution's traditions reflect the demographics of the institution			
6.7	Employees are able to flourish in an institution where the institution's traditions are aimed at uniting employees			
6.8	Employees are able to flourish in an institution where they are regarded as important and valuable			
6.9	Employees are able to flourish in an institution where they are well cared for			
6.10	Employees are able to flourish in an institution that prioritises and addresses all the dimensions of their well-being in an integrated manner			
6.11	Employees are able to flourish in an institution where there is mutual trust			
6.12	The institutional culture and climate of an institution is determined by all the various internal (e.g. management, employees, supervisors, teams, unions) and external (e.g. Council, the community, partners, government, society) stakeholders			
6.13	Commitment is required from <u>all stakeholders</u> to transform a negative institutional culture and climate into a positive institutional culture/climate			
6.14	SA public HEIs should put measures in place to regularly monitor and evaluate the institutional culture/climate (e.g. through annual surveys, questionnaires, online forums, interviewing/discussion sessions with employees, exit interviews, institutional culture audits, appreciative inquiry sessions, etc.)			

6.15	SA public HEIs should communicate the outcome of all institutional culture monitoring and evaluation processes to all institutional stakeholders, including employees, unions, Management, Council and its appropriate standing committees.			
6.16	SA public HEIs should build on strengths in terms of the institutional culture, as identified from monitoring and evaluation processes, and should work actively towards addressing any possible identified areas of improvement.			
6.17	SA public HEIs should apply the principles of positive psychology, flourishing theory and well-being theory to create a positive institutional climate, and by doing so, enabling their employees to flourish			
Additional comments:				
COMPONENT 7: ROLE PLAYERS IN WELL-BEING OF EMPLOYEES OF SA PUBLIC HEIs (see 7.1 – 7.3.5 below)				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
7.1	Government, society and the community have a responsibility for employees of SA public HEIs' well-being			
	7.1.1 Government should establish effective health and well-being guidelines towards improving the health and well-being of their citizens			
	7.1.2 Institutions should be held accountable by Government for implementing healthy and well-being initiatives, as guided by national policy			

	7.1.3 Government should provide efficient and affordably health systems for its citizens			
7.2	SA public HEIs have a responsibility for their employees' well-being			
	7.2.1 SA public HEIs should create healthy, sustainable working, living and learning environments for their employees			
	7.2.2 SA public HEIs should show their employees that they care about them and their well-being, and that they are serious about optimising their well-being at all levels			
	7.2.3 SA public HEIs should educate employees about the factors impacting on their holistic well-being, and how they can take control of and improve their well-being by taking preventative measures and adopting a healthy lifestyle (via, amongst others, their websites, electronic media, e-mail, awareness sessions, workshops, wellness days, road shows, electronically and physically distributed material such as pamphlets, booklets, and relevant research articles)			
	7.2.4 SA public HEIs should incorporate health promotion values and principles into their mission, vision and strategic plans			
	7.2.5 SA public HEIs should both model and test their employee well-being approaches for the benefit of their own employees, but also the broader community, and society at large			
	7.2.6 SA public HEIs should educate employees about the different dimensions of their well-being (i.e. their physical, emotional, psychological (mental), social, financial, spiritual, environmental, intellectual and occupational well-being)			
	7.2.7 SA public HEIs should have a clear policy guiding their employees' well-being			
	7.2.8 SA public HEIs should have a clear strategy guiding their employees' well-being			
	7.2.9 SA public HEIs should put effective well-being programmes in place to address all the dimensions of their employees' well-being, and in an integrated manner			
	7.2.10 SA public HEIs should provide high-quality health- and wellbeing-related support services that are sensitive to the needs of the diverse their employees			

	7.2.11 SA public HEIs should identify reliable, validated tools to constantly monitor the effectiveness and impact of their well-being policies, strategies and programmes			
	7.2.12 SA public HEIs should clearly communicate their well-being policies, strategies, programmes and events to employees via various means (e.g. e-mail, wellness days, workshops, awareness sessions, road shows, discussion forums, etc.), for employees to acquaint themselves with the contents thereof; to ask questions about these, etc.			
	7.2.13 SA public HEIs should create a conducive and enabling institutional culture and climate within which their employees can experience optimal well-being, and flourish			
	7.2.14 SA public HEIs should avail sufficient resources (e.g. human, financial and infrastructural resources) to offer and manage effective employee well-being programmes/efforts			
	7.2.15 SA public HEIs should make available social, leisure, sports and cultural facilities to their employees that reflect their diversity and facilitate healthier choices			
	7.2.16 SA public HEIs should realise the important role of senior and line managers in promoting organisational and employee well-being, and should train them in this regard (also see 2.I 2.48.1 to 2.I 2.38.5 of this framework)			
7.3	Employees of SA public HEIs have a responsibility for their own well-being			
	7.3.1 Employees of SA public HEIs should educate themselves about the factors impacting on their holistic well-being.			
	7.3.2 Employees of SA public should take responsibility for their own well-being			
	7.3.3 Employees of SA public HEIs should take control of and improve their well-being by taking preventative measures and adopting a healthy lifestyle (e.g. eating healthily and exercising) to improve their own well-being			
	7.3.4 Employees of SA public HEIs should acquaint themselves with the contents of their institutions' well-being policies, strategies and programmes.			

	7.3.5 Employees of SA public HEIs should participate in well-being programmes and activities offered by their employers and aimed at enhancing their well-being.			
Additional comments: 				

Do you have any other suggestions and/or comments with regard to any of the components or sub-components of the proposed integrated well-being framework?

Thank you for completing this survey!

Consent form: pilot survey validation panel members

Consent form

I, _____(your name),
agree / do not agree (delete that which is not applicable) that I consent to participate
as a validation panel member for the research project titled: **“AN INTEGRATED
FRAMEWORK FOR ENHANCED EMPLOYEE WELL-BEING AT SOUTH AFRICAN
PUBLIC HIGHER EDUCATION INSTITUTIONS”** in my personal capacity, and not as
a representative of my employer.

I understand that the researcher subscribes to the following principles:

- *Voluntary participation in research*, implying that the validation panel members may withdraw from participation in the validation process at any time.
- *Informed consent*, meaning that validation panel members must be fully informed about the validation process and purposes, and must provide written consent to participate in the validation process.
- *No harm in participation*, meaning that the validation panel members will not be placed at risk, or be exposed to harm of any kind.
- *Privacy*, implying that the anonymity and confidentiality of all validation panel members shall be protected at all times.
- *Trust*, meaning that validation panel members will not be deceived or betrayed in the process of validation, or the publishing of the outcomes.

Signature: _____

Date: _____

ANNEXURE P1

Invitation to panel of experts to participate in final validation survey

**Researcher:**

Ms L van Straaten
Room 101
ZR Mahabane Building
CUT
Tel. (051) 507 3016
083 272 8602
e-mail: lvstraat@cut.ac.za

Supervisor

Dr A du Plessis
Tel. (012) 420 2498
e-mail: annelize.duplessis@up.ac.za

Date

Invitation to participate in final validation survey

Dear

RE: BACKGROUND INFORMATION AND REQUEST FOR INFORMED CONSENT TO PARTICIPATE AS VALIDATION PANEL MEMBER

My name is Laurika van Straaten. I am a registered PhD student at the University of the Free State in the field of Higher Education Studies. I have also been an employee of an SA public higher education institution (HEI) for more than 23 years. For the past eight years, I have conducted research on the well-being of employees of SA public HEIs, and how their well-being can be improved. First, I conducted a Master's study into the subject of the well-being of support services employees at a South African public HEI, and how their well-being could be enhanced by means of the power of appreciation. Secondly, for the past five years, as part of my doctoral study, I have conducted an extensive literature review and empirical study on the well-being programmes offered by SA public HEIs, to identify any possible gaps in terms of these addressing all the important dimensions of employees' well-being, as identified from the literature, and also in terms of how integrated their well-being programmes are.

As such, I wish to make a contribution towards the enhancement of employees of SA public HEIs' well-being.

You were selected to participate in this research as a validation panel member, in your personal/private capacity, due to your expertise in the disciplines of industrial psychology, educational psychology, organisational development, positive psychology and/or related fields within the SA higher education arena. The purpose of your participation is to evaluate the viability and relevance of each component/subcomponent of the integrated employee well-being framework, and to obtain your possible inputs towards the improvement thereof.

My research topic is *AN INTEGRATED FRAMEWORK FOR ENHANCED STAFF WELL-BEING AT SOUTH AFRICAN PUBLIC HIGHER EDUCATION INSTITUTIONS*. The purpose of this study therefore is to design an integrated well-being framework that may be used by SA public HEIs to facilitate their employee well-being efforts. This study has received ethics clearance from the Research Ethics Committee of the Faculty of Education at the University of the Free State, as per ethical clearance number UFS-HSD2016/1176.

The literature review conducted for purposes of this study indicated that there is a need for an integrated framework that may assist SA public HEIs to address their employees' well-being holistically, and in an integrated manner. The contribution of this study is therefore to design and validate such an integrated well-being framework which may be used by SA public HEIs to ensure that they address all the identified components of employees' well-being via their different well-being programmes, and that they do so in a holistic, integrated manner, towards enhanced employee well-being. The integrated well-being framework could also be of value to other organisations aspiring to make a positive contribution towards their employees' well-being.

The findings of the following research activities were integrated to present the proposed integrated employee well-being framework for SA public HEIs:

- A preliminary literature review (local and international) on the topic of employee well-being.
- A baseline pilot study amongst four SA public HEIs conducted at the onset of this study (in 2016) via a semi-structured, open-ended questionnaire to determine why it is important for SA public HEIs to improve their employees' well-being; what holistic well-being entails (i.e. what the important dimensions (building blocks) of well-being are); and how optimal well-being can be achieved and sustained.
- An extended literature review (local and international) was conducted on conclusion of the baseline pilot study to explore which well-being programmes (models, frameworks, interventions, frameworks, etc.) are most effective in enhancing employees' well-being and establishing a flourishing workforce.
- After having invited all 26 SA public HEIs to participate in the research, a semi-structured, mainly open-ended questionnaire survey was conducted amongst 11 SA public HEIs who were willing to participate in the research; amongst others to determine how they define the concept of employee well-being; whether they have employee well-being programmes in place, and what these programmes entail; what dimensions of well-being their employee well-being programmes are addressing; whether their well-being efforts are guided by institutional policies on employee well-being; what the perceived strengths and weaknesses of their well-being programmes are, etc.
- As explained above, following the pilot study, an extended literature review was conducted over a period of two years. This included document analysis, or text reviews. The process of document analysis that I followed entailed studying various global and local institutional well-being documents – amongst others policies, strategies, models, frameworks, programmes and initiatives; the WHO's guidelines related to employee wellness; the Mental Health Organization's various policy documents on mental health; overseas' universities' policy and guiding documentation on employee well-being (e.g. those of the universities of Minnesota, Brighton, Birmingham); the Okanagan

Charter for Health Promoting Universities and Colleges; the websites of various companies and universities, and their well-being initiatives; the South African Board for People Practices (SABPP)'s HR Management Standard for South Africa; the South African Constitution; as well as the employee well-being programmes of SA public HEIs (including well-being strategies, policies, frameworks and annual well-being events offered) that were provided to me by SA public HEIs as part of the empirical research process. This process of document analysis assisted me to confirm the literature findings on the dimensions and requirements of integrated employee well-being programmes. Furthermore, the process of document analysis allowed for greater or lesser depth and breadth in data analysis, as required. It also allowed for the use of triangulation and the ability to search for variations in the data around the same phenomenon.

- A pilot validation survey was conducted with three experts in the fields of Industrial and Educational Psychology. Their inputs were valuable, and have been incorporated into the framework presented to you for final validation purposes.

Please refer to the notes that I provided for further information, as well as the attached questionnaire, in which the proposed integrated employee well-being framework for SA public HEIs is presented, for validation purposes. The following should be noted:

- **Sections 1 to 8 present the proposed integrated employee well-being framework for SA public HEIs, as well as three columns next to each component/subcomponent, where you are required to use the rating scale (ES = Essential; UF = Useful; NN = Not Necessary) to indicate your evaluation of each specific component/subcomponent, by marking the appropriate chosen block with an X.**

No possible risks are foreseen for your participation in this research as a validation panel member. The confidentiality of information will be ensured at all times. Names/surnames will not be recorded anywhere, and answers will be given a fictitious

code number or a pseudonym, and will be referred to in this manner in the data, any publications, or other research reporting methods such as conference proceedings or journal articles. Only the principal researcher, whose name appears above, will have access to the raw data. The researcher will store hard copies of answers in a locked cupboard/filing cabinet in her office for auditing purposes, whilst electronic information will be stored on a computer, and protected via password protection. Future use of the stored data will be subject to further research ethics review and approval, if and where applicable. Hard copies will be destroyed after a period of five years, and digital files will be deleted.

No payment or incentive will be offered to any member of the validation panel. Validation panel members will also not be required to incur or contribute to any costs that may arise from the validation process.

If you would like to be informed of the final research findings, please contact me (Ms L van Straaten on 0832728602, or at e-mail address lvstraat@cut.ac.za). The findings should be available after December 2019. Should you require any further information, or wish to contact the researcher regarding any aspect related to the study, please contact Ms L van Straaten.

Should you have concerns about the way in which the validation has been conducted, you may contact Dr A du Plessis on 012- 4202498, or at e-mail address Annelize.DuPlessis@up.ac.za.

If you agree to participate as a validation panel member, **please complete the consent form below and e-mail it back to Ms L van Straaten.**

Yours sincerely

Ms L van Straaten (Researcher)

Dr A du Plessis (Supervisor)

Information to validation panel members: final validation process

**IMPORTANT NOTES ON THE INTEGRATED EMPLOYEE WELL-BEING
FRAMEWORK**

- (xii) *This integrated well-being framework for SA public HEIs serves as a guideline for SA public HEIs, to assist them to include all the dimensions of well-being into their own well-being programmes, to identify some of the components of each dimension, and to create an enabling environment within which their employees can flourish.*
- (xiii) *This framework does not aim to replace the actual well-being programmes of SA public HEIs, but will assist them to understand the multiple dimensions/facets of well-being and the interchange between these dimensions, and their subcomponents, in order to address their employees' well-being in a more holistic, integrated and effective manner.*
- (xiv) *Since this is an integrated employee well-being framework, there are areas of overlapping between the different subcomponents of the dimensions/building blocks of well-being (see components 2 A to 2 I).*
- (xv) *Furthermore, the components and sub-components of the integrated employee well-being framework developed for SA public HEIs were identified based on (i) the results obtained from the preliminary literature review performed, (ii) the baseline pilot study conducted amongst SA public HEIs; (iii) the extended literature review performed; (iv) document analysis on various well-being programmes (including well-being models, frameworks, strategies, etc.) applied globally, and based on a review of the current well-being programmes of SA public HEIs availed to me by the participants as part of the empirical research; (v) the results flowing from the empirical research conducted amongst 11 SA public HEIs, and (vi) the principles of positive psychology theory, well-being theory and flourishing theory, as well as other well-being theories such as appreciative inquiry, authentic happiness theory and hope theory, from which I synthesised an integrated well-being theory. My synthesis of integrated well-being theory entails that optimal human flourishing requires living a well-balanced life, and addressing one's well-being at physical, emotional, social, psychological, financial, spiritual, environmental, intellectual and occupational level, and in an integrated manner, as applied in, and advocated by this integrated well-being framework for SA public HEIs.*
- (xvi) *SA public HEIs need to ensure that their efforts to improve their employees' well-being are done in an integrated manner, whilst compartmentalising the different dimensions/components of well-being should be avoided - always*

keeping in mind that these dimensions/components of well-being are not disconnected, but interconnected. For example, negative thoughts and emotions can cause diseases in the body such as cancer, high blood pressure, depression, insulin resistance, etc., and such illnesses could also influence employees' well-being at, amongst others, emotional and psychological level.

- (xvii) SA public HEIs should keep in mind that well-being is not an initiative. It is all about creating a positive institutional culture and an enabling environment and institutional culture within which employees are able to thrive.*
- (xviii) The ethics and values of each SA public HEI should form the core of their own well-being interventions.*
- (xix) SA public HEIs' well-being programmes should be aligned with their vision and mission statements, their values and strategic plans.*
- (xx) Both employees and their employers have a responsibility in terms of optimising their well-being. SA public HEIs should be aware of their unique role and responsibility in this regard.*
- (xxi) SA public HEIs' should each develop a policy on employee well-being, as well as a well-being strategy to facilitate and guide the implementation of their well-being efforts. Furthermore, all institutional policies should support SA public HEIs' well-being programmes.*

Questionnaire for completion by validation panel: final validation

Please answer all the questions as honestly as possible. Mark your choice with a cross (X) in the appropriate box.

	Male
	Female

	Black
	Coloured
	White
	Indian
	Other (please specify):

4. Please provide a brief description of your expertise (including qualifications and significant achievements) in the disciplines of industrial psychology, educational psychology, organisational development, well-being and/or higher education, as well as your number of years' experience in each field mentioned:

Field of expertise	Number of years' experience

5. 1 Please answer all questions/choose options in our personal capacity and not on behalf of your institution.
- 5.2 Please rate, in your own opinion, each of the components and sub-components included in the proposed integrated well-being framework for SA public HEIs according to its importance. The rating scale for importance consists of three levels to choose from, namely **“essential” (ES)**, **“useful” (UF)**, and **“not necessary” (NN)**.

INTEGRATED EMPLOYEE WELL-BEING FRAMEWORK FOR SOUTH AFRICAN PUBLIC HIGHER EDUCATION INSTITUTIONS				
COMPONENT 1: DEFINING THE CONCEPT OF WELL-BEING (see A1 – A2.14 below)				
A. What the concept of well-being entails				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
A1	The concept of well-being includes/entails the following:			
	A1.1 Well-being includes being happy, but is about more than happiness			
	A1.2 Well-being entails high levels of subjective well-being			
	A1.3 Well-being is multi-faceted, and consists of various dimensions/"building blocks" (see section 2 (2A to 2I) below for more details).			
	A1.4 Important dimensions (building blocks) of well-being include physical, emotional, psychological (mental), social, financial, spiritual, environmental, intellectual and occupational well-being (see section 2 (2A to 2I) below for more details).			
	A1.5 The different dimensions (building blocks) of well-being (mentioned in A1.4 above) are interlinked, and should therefore be addressed in an integrated manner, and not in silos.			
	A1.6 The concept of well-being includes aspects related to our personal, relational and collective well-being.			
A2	Well-being entails positive feelings and positive functioning, such as:			
	A2.1 Emotional stability			
	A2.2 Engagement			
	A2.3 Living a meaningful life			
	A2.4 Living a balanced life			
	A2.5 Being optimistic			
	A2.6 Positive emotions			

	A2.7 High morale			
	A2.8 Positive relationships			
	A2.9 Resilience (ability to “bounce back”/cope with difficult life circumstances)			
	A2.10 Positive self-esteem			
	A2.11 Vitality			
	A2.12 Having hope for the future			
	A2.13 Being satisfied with your life (including work)			
	A2.14 Flourishing (living optimally; thriving)			
Additional comments:				
COMPONENT 2: DIMENSIONS/BUILDING BLOCKS OF WELL-BEING				
2 A: <u>Physical well-being</u>, which includes features 2 A.1 to 2 A 2.17 below				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
2 A.1	Physical well-being is an important dimension of human well-being.			
2 A.2	Physical well-being entails/includes:			
	2 A 2.1 Following a healthy diet			
	2 A 2.2 Proper hydration			
	2 A 2.3 Exercising/being active			
	2 A 2.4 Maintaining a healthy body weight (BMI)			

	2 A 2.5 Exposure to sunlight			
	2 A 2.6 Making time to relax			
	2 A 2.7 Getting sufficient sleep			
	2 A 2.8 Make time for meditation			
	2 A 2.9 Living mindfully			
	2 A 2.10 Avoiding harmful habits such as smoking, drinking too much alcohol, using drugs, etc.			
	2 A 2.11 Being safe and secure			
	2 A 2.12 Maintain a good posture			
	2 A 2.13 Experiencing optimal health			
	2 A 2.14 Having vitality			
	2 A 2.15 Having sufficient energy			
	2 A 2.16 Managing stress successfully			
	2 A 2.17 Having regular medical check-ups			
Additional comments:				
2 B: <u>Emotional well-being</u>, which includes features 2 B 1 to 2 B 2.24 below				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
2 B.1	Emotional well-being is an important dimension of human well-being.			
2 B 2	Emotional well-being entails/includes:			

	2 B 2.1 Having a positive outlook on life			
	2 B 2.2 Being emotionally aware			
	2 B 2.2.1 Understanding the value of one's emotions			
	2 B 2.2.2 Being aware of the state of your overall well-being			
	2 B 2.3 Being emotionally stable			
	2 B 2.4 Having emotional energy/vitality			
	2 B 2.5 Taking positive action			
	2 B 2.6 Taking responsibility for your own emotions			
	2 B 2.7 Self-acceptance (having a positive self-concept)			
	2 B 2.8 Having a good self-esteem			
	2 B 2.9 Being assertive			
	2 B 2.10 Being happy/joyful			
	2 B 2.11 Experiencing peace			
	2 B 2.12 Being mindful			
	2 B 2.13 Being fulfilled			
	2 B 2.14 Resilience (the ability to cope with difficult life circumstances and traumatic events)			
	2 B 2.15 Focusing your energy on important personal priorities			
	2 B 2.16 Ability to adapt to change			
	2 B 2.17 Ability to make essential changes to grow and live a fulfilled life			
	2 B 2.18 Coping with stress/navigating stressful situations			
	2 B 2.19 Ability to solve problems			
	2 B 2.20 Interpersonal skills			
	2 B 2.21 Intrapersonal coping skills			
	2 B 2.22 Good decision-making skills			
	2 B 2.23 Experiencing high morale			

	2 B 2.24 Having hope for the future			
Additional comments:				
2 C: <u>Psychological (mental) well-being</u>, which includes features 2 C 1 to 2 C 2.28 below				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
2 C 1	Psychological (mental) well-being is an important dimension of human well-being.			
2 C 2	Psychological (mental) well-being entails/includes:			
	2 C 2.1 Autonomy			
	2 C 2.2. Environmental mastery			
	2 C 2.3 Personal growth			
	2 C 2.4 Positive relations with others			
	2 C 2.5 Self-acceptance			
	2 C 2.6 Self-efficacy (the ability to believe that your will succeed in life)			
	2 C 2.7 Emotional stability			
	2 C 2.8 Ability to manage conflict			
	2 C 2.9 Knowledge of own abilities			
	2 C 2.10 Ability to cope with normal stress of life			

	2 C 2.11 Ability to perform normal daily work			
	2 C 2.12 Ability to function effectively within one's community			
	2 C 2.13 Ability to make a positive contribution to one's community			
	2 C 2.15 Feeling connected to one's community/surroundings			
	2 C 2.56 Making the most of opportunities			
	2 C 2.16 Having control and freedom over one's life			
	2 C 2.17 Mind-body integration			
	2 C 2.18 Having emotional vitality			
	2 C 2.19 Resilience/ability to cope with difficult life circumstances and traumatic events			
	2 C 2.20 Having high self-esteem			
	2 C 2.21 Being optimistic			
	2 C 2.22 Feeling that your life has value			
	2 C 2.23 Displaying emotional intelligence			
	2 C 2.24 Having positive thoughts and emotions			
	2 C 2.25 Having high morale			
	2 C 2.26 Experiencing life as enjoyable			
	2 C 2.27 Being enthusiastic about life			
	2 C 2.28 Experiencing feelings of vigour			
Additional comments:				

2 D: <u>Social well-being</u> , which includes features 2 D 1 to 2 D 2.13 below				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
2 D 1	Social well-being is an important dimension of human well-being			
2 D 2	Social well-being entails/includes:			
	2 D 2.1 The ability to develop, build and maintain positive personal relations/social ties (social inclusion)			
	2 D 2.2 Having a sense of belonging			
	2 D 2.3 Having a sense that your life has value, and that others value you			
	2 D 2.4 Having regular contact with other people who believe in us, support us and care for us (e.g. family, friends and colleagues)			
	2 D 2.5 Developing interpersonal skills			
	2 D 2.6 The ability to manage conflict successfully			
	2 D 2.7 Using one's skills and abilities to function optimally in life			
	2 D 2.8 Developing a value system, beliefs and traditions that are important to you			
	2 D 2.9 Meaningful engagement with others			
	2 D 2.10 To be socially accepted			
	2 D 2.11 Embracing your own cultural identity			
	2 D 2.12 Respecting the cultural identity of others			
	2 D 2.13 Ability to receive support/help from others when needed			
Additional comments:				

2 E: <u>Financial well-being</u> , which includes features 2 E 1 to 2 E 2.9 below				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
2 E 1	Financial well-being is an important dimension of human well-being			
2 E 2	Financial well-being entails/includes:			
	2 E 2.1 Living within your financial means			
	2 E 2.2 Sticking to your budget			
	2 E 2.3 Managing your finances effectively			
	2 E 2.4 Regularly saving on part of your income			
	2 E 2.5 Debt management (e.g. going for debt counselling if you have ended up in debt/struggle to make payments)			
	2 E 2.6 Making wise financial investments			
	2 E 2.7 Putting sufficient retirement planning in place			
	2 E 2.8 Experiencing financial security			
	2 E 2.9 Being financially literate			
Additional comments:				

2 F: <u>Spiritual well-being</u> , which includes features 2 F 1 to 2 F 2.26 below				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
2 F 1	Spiritual well-being is an important dimension of human well-being.			
2 F 2	Spiritual well-being entails/includes:			
	2 F 2.1 Discovering who you are			
	2 F 2.2 Discovering the meaning of your life			
	2 F 2.3 Discovering the value of your life			
	2 F 2.4 Discovering your purpose in life			
	2 F 2.5 A sense of peace and contentment			
	2 F 2.6 Living for a greater cause			
	2 F 2.7 Having a relationship with someone you believe to be bigger than yourself (a higher power)			
	2 F 2.8 Serving a higher power			
	2 F 2.9 Having faith in a higher power			
	2 F 2.10 Helping others			
	2 F 2.11 Making provision for quiet time in your daily life/routine for purposes of self-reflection			
	2 F 2.12 Living a meaningful life			
	2 F 2.13 Search for the sacred			
	2 F 2.14 Assisting people to deal with major life stressors (e.g. loss of loved ones; illness; natural disasters; divorce; serious mental illness; etc.)			
	2 F 2.15 Regarding work as a calling			
	2 F 2.16 Positive effect on mortality and depression rates			
	2 F 2.17 Positive effect on our happiness and life satisfaction levels			

	2 F 2.18 Forgiving others			
	2 F 2.19 Having a sense of hope			
	2 F 2.20 Practicing meditation (spiritual purification)			
	2 F 2.21 Having integrity			
	2 F 2.22 Aligning your personal values and beliefs with what you believe in			
	2 F 2.23 Spiritual well-being acts as a buffer against depression			
	2 F 2.24 Spiritual well-being acts as a buffer against demoralisation			
	2 F 2.25 Spiritual well-being acts as a buffer against despair/hopelessness			
	2 F 2.26 Spiritual well-being acts as a buffer against anxiety			
Additional comments:				
2 G: <u>Environmental well-being</u> , which includes features 2 G1 to 2 G16 below				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
2 G 1	Environmental well-being is an important dimension of human well-being			
2 G 2	Environmental well-being entails/includes:			

	2 G 2.1 Physical environmental factors such as air quality, clean water, proper ventilation, etc., which impact on our well-being			
	2 G 2.2 Social environmental factors such as relations at home; relations at work; a discrimination free and fear-free work environment, which impact on our well-being			
	2 G 2.3 Ergonomics (designing/arranging workspaces, products and systems to fit the people using them, ensuring sufficient space, lighting, ventilation, support, etc.)			
	2 G 2.4 External environmental influences (e.g. family, society, politics, war, the economy, etc.) impact on our well-being			
	2 G 2.5 A positive work environment positively impacts on our performance			
	2 G 2.6 A positive work environment positively impacts on our behaviour			
	2 G 2.7 A positive work environment positively impacts on our motivation to act			
	2 G 2.8 A positive work environment reduces our stress levels			
	2 G 2.9 Our direct environment facilitates or discourages interactions with colleagues, family and others			
	2 G 2.10 Pleasing and healthy surroundings contribute to personal fulfilment			
	2 G 2.11 A pleasing and healthy work environment improves our mood			
	2 G 2.12 A pleasing and healthy work environment positively affects our immune system			
	2 G 2.13 A pleasing and healthy work environment positively affects our physical health			
	2 G 2.14 Living and working in a safe environment improves our well-being			
	2 G 2.15 Working in a stimulating environment contributes to our well-being			
	2 G 2.16 Noise levels impact on our well-being			
Additional comments:				

2 H: <u>Intellectual well-being</u> , which includes features 2 H1 to 2 H 2.8 below				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
2 H 1	Intellectual well-being is an important dimension of human well-being			
2 H 2	Intellectual well-being entails/includes:			
	2 H 2.1 Participation in scholastic, cultural and community activities			
	2 H 2.2 Valuing creativity, curiosity and lifelong learning			
	2 H 2.3 Enabling one to live a successful and stimulating life			
	2 H 2.4 Expanding our knowledge and skills			
	2 H 2.5 Sharing our knowledge and skills			
	2 H 2.6 Keeping our minds flexible, informed and engaged			
	2 H 2.7 Improving our mindfulness (ability to live in, and focus on the present moment)			
	2 H 2.8 Stimulating and improving the health of our brains and preventing mental decline			
Additional comments:				

2 I: <u>Occupational well-being</u> , which includes features 2 I 1 to 2 I 2 50.6 below				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
2 I 1	Occupational well-being is an important dimension of human well-being			
2 I 2	Occupational well-being entails/includes:			
	2 I 2.1 Using our skills, gifts and talents at work to enrich our lives and give purpose to our lives			
	2 I 2.2 Performing meaningful work			
	2 I 2.3 Occupational/job satisfaction (enjoying our work and finding it stimulating and rewarding)			
	2 I 2.4 Job security			
	2 I 2.5 Being engaged at work			
	2 I 2.6 Work/job characteristics affects our well-being			
	2 I 2.7 Having autonomy			
	2 I 2.8 Being competent to do your work			
	2 I 2.9 Aspiring to be the best you that you can be at the workplace			
	2 I 2.10 Sufficient opportunities for learning, personal growth/development			
	2 I 2.11 Sufficient opportunities for promotion/career advancement/job progression/talent management			
	2 I 2.12 Work environment that facilitates interactions with colleagues, peers, supervisors, stakeholders, etc.			
	2 I 2.13 Successful conflict management at work			
	2 I 2.14 Healthy, supportive relations with supervisors, peers and stakeholders, etc.			
	2 I 2.15 Healthy, positive relations with all stakeholders			
	2 I 2.16 Having high morale at work			
	2 I 2.17 Experiencing positive emotions and having positive experiences at work			

	2 2.18 Creating “flow” whilst working (“flow” = a state of concentration and engagement when completing a task that requires concentration, and which challenges your skills/becoming absorbed in what you are doing)			
	2 2.19 Positive attitude about your work			
	2 2.20 Relaxed, enabling work environment			
	2 2.21 Work-life balance:			
	2 2.21.1 Balance between work and family life			
	2 2.21.2 Time to switch off from work and relax/recover from work (i.e. balance between work and leisure/work and recovery from work)			
	2 2.21.3 A work environment that allows for successful work/life integration			
	2 2.22 Having a manageable workload			
	2 2.23 There should be a balance between job demands and job resources in the workplace			
	2 2.24 Being suitable/fit for the job you have been appointed for			
	2 2.25 Work provides a sense of meaning and purpose			
	2 2.26 Performing well in your job			
	2 2.27 Achieving the goals related to your job			
	2 2.28 Feeling “part of” the organisation (a culture of inclusiveness at the workplace)			
	2 2.29 Working in a safe environment			
	2 2.30 Working in a peaceful environment			
	2 2.31 Working in a pleasant environment			
	2 2.32 Working in an appreciative work environment			
	2 2.33 Working in an environment where employees are being valued			
	2 2.34 Working in a stimulating work environment			
	2 2.35 Working in a supportive work environment			
	2 2.36 Working in an environment free from unnecessary stress			

	2 2.37 Working in a discriminatory free environment (where there is no discrimination based on race, religion, gender, disability, etc.)			
	2 2.38 Working in an environment where leaders are ethical and lead by example			
	2 2.39 Working in an environment where all employees are treated fairly			
	2 2.40 Working in an environment where all employees are treated equally			
	2 2.41 Being open to change in the institution			
	2 2.42 Being willing to learn new skills to perform your job more effectively			
	2 2.43 Having a positive/conducive work climate/organisational culture			
	2 2.44 Combatting/successfully managing normal levels of stress at work			
	2 2.45 Being paid fairly for the level of work you perform			
	2 2.46 Sufficient performance/reward systems in place			
	2 2.47 Experiencing high morale at work			
	2 2.48 Having ethical leaders who lead by setting a good example			
	2 2.49 Senior/line managers have an important role to play in both organisational and employee well-being			
	2 2.50.1 Senior/line managers can contribute to positive relations with employees			
	2 2.50.2 Senior/line managers can contribute to improving the organisational culture (amongst others through ethical leadership, caring for employees, being committed to and positive about the organisation)			
	2 2.50.3 Senior/line managers have an important role to play in motivating employees (amongst others by believing in them, inspiring them and leading by a good example)			
	2 2.50.4 Senior/line managers have an important role to play in increasing employees' performance (amongst others by motivating them, believing in them, building their self-esteem, and supporting them to perform better)			

	2 2.50.5 Senior/line managers have an important role to play in increasing employees' levels of engagement (amongst others by motivating them, and making them feel part of the organisation)			
	2 2.50.6 Senior/line managers have an important role to play in increasing employees' well-being (amongst others by treating them fairly and equally, motivating them, valuing and appreciating them, allowing them sufficient opportunities for growth and development, and truly caring about them)			
Additional comments:				
COMPONENT 3: SA PUBLIC HEIs SHOULD DEVELOP CLEAR EMPLOYEE WELL-BEING <u>POLICIES AND PROCEDURES</u> TO GUIDE AND FACILITATE THEIR WELL-BEING PROGRAMMES/EFFORTS (see 3.1 – 3.9 below)				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
3.1	A clear policy/policies and procedure(s) on employee well-being should be developed by each SA public HEI, to guide and facilitate their employee well-being efforts			
3.2	SA public HEIs' employee well-being policies should be guided by applicable national health and well-being legislation, frameworks, standards, strategies and policies (e.g. the SA Constitution, occupational health and safety legislation, labour and anti-discrimination legislation, etc.)			
3.3	SA public HEIs' employee well-being policies should be aligned with the institution's mission, vision, values and strategic plans			

3.4	SA public HEIs' employee well-being policies should be aligned with other applicable institutional policies			
3.5	All well-being programmes/efforts of SA public HEIs should be aligned with and guided by the strategic direction provided via the institution's well-being policy, as well as its vision, mission, values and strategic plans			
3.6	SA public HEIs should identify all the different stakeholders in employee well-being, and should involve/consult them in the development of policies/procedures on employee well-being (e.g. unions, HR, employees, Institutional Forums, etc.)			
3.7	SA public HEIs should develop an integrative process that involve employees in ongoing conversations about the promotion of their health and well-being			
3.8	Buy-in should be obtained from all SA public HEIs' institutional stakeholders (e.g. Management, unions, HR, employees, etc.) to ensure the successful implementation of any employee well-being policy			
3.9	All institutional well-being policies should be made available on SA public HEIs websites/electronic databases, or should be shared via any other appropriate communication media, (including, but not limited to e-mail, wellness days, workshops, awareness sessions, road shows etc.), for employees to acquaint themselves with the contents thereof; to ask questions about the policy; and to adhere thereto.			
Additional comments:				
COMPONENT 4: SA PUBLIC HEIs SHOULD EACH HAVE A CLEAR EMPLOYEE WELL-BEING <u>STRATEGY</u> (see 4.1 to 4.15 below)				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
4.1	SA public HEIs should develop clear well-being strategies, guided by each institution's well-being policy, as well as its vision, mission, values and strategic plans			

4.2	SA public HEIs should involve employees across all levels in the development of their well-being strategies, to ensure that their voices are clearly heard in the process			
4.3	SA public HEIs should benchmark with other HEIs, both nationally and internationally, on the contents of their well-being strategies, to determine and apply best practice in the development of their own well-being strategies			
4.4	SA public HEIs' well-being strategies should provide guidelines on the establishment of effective employee well-being <u>programmes</u> to successfully execute their well-being efforts			
4.5	SA public HEIs' well-being strategies should guide the implementation of all their employee well-being initiatives			
	4.5.1 SA public HEIs' well-being strategies should clearly spell out the strategic thrusts related to employee well-being			
	4.5.2 SA public HEIs' well-being strategies should clearly spell out the principles adopted related to their employees' well-being			
	4.5.3 SA public HEIs' well-being strategies should clearly spell out the objectives related to their employees' well-being			
	4.5.4 SA public HEIs' well-being strategies should provide for the development of an employee well-being framework to guide the implementation of all institutional well-being efforts			
	4.5.5 SA public HEIs' well-being strategies should provide for an institutional implementation plan to be compiled to guide the implementation of their well-being programmes/efforts			
4.6	SA public HEIs' well-being strategies should clearly spell out their stances on and theoretical frameworks related to employee well-being			
4.7	SA public HEIs' well-being strategies should clearly spell out the dimensions of employees' well-being to be addressed via their different well-being programmes (e.g. physical, emotional, psychological (mental), social, financial, spiritual, well-being, etc.)			
4.8	SA public HEIs' well-being strategies should support the objectives of the institutions' well-being programmes			
4.9	SA public HEIs' well-being strategies should contain clear goals in terms of each well-being objective set			

4.10	SA public HEIs' well-being strategies should be clear on <u>how</u> the effectiveness of their strategies and specific well-being programmes will be monitored and evaluated (e.g. through reliable, validated tools such as questionnaires, annual surveys, interviewing employees, evaluating employees' positive mood, negative mood and life satisfaction levels, etc.)			
4.11	SA public HEIs' well-being strategies should be clear on <u>how regularly</u> the effectiveness of their strategies and specific well-being programmes will be monitored and evaluated (e.g. each semester, annually, etc.)			
4.12	SA public HEIs' well-being strategies should be adapted, based on outcomes and recommendations flowing from the regular monitoring and evaluation of their well-being programmes			
4.13	SA public HEIs' well-being strategies should constantly be monitored against, and aligned with the latest <u>global trends</u> in, and research on employee well-being, <u>as applicable to the institution</u>			
4.14	SA public HEIs' well-being strategies should provide guidelines for the <u>sustainable implementation</u> of the institution's well-being programmes.			
4.15	SA public HEIs could make their well-being strategies available on their websites/electronic databases, or share it via any other appropriate communication media, (including, but not limited to, e-mail, wellness days, workshops, awareness sessions, road shows etc.), for employees to acquaint themselves with the contents thereof; to ask questions about the strategy, etc.			
Additional comments:				

COMPONENT 5: SA PUBLIC HEIs SHOULD DEVELOP EFFECTIVE WELL-BEING PROGRAMMES ADDRESSING ALL THE DIMENSIONS OF THEIR EMPLOYEES' WELL-BEING IN AN INTEGRATED MANNER (see 5.1 to 5.7.5 below)				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
5.1	SA public HEIs should develop effective employee well-being programmes guided by their well-being policies and strategies			
5.2	SA public HEIs should benchmark with other HEIs, both nationally and internationally, on the contents of their well-being programmes, to determine and apply best practice in the development and application of their own well-being programmes			
5.3	Employees across all levels should be involved in the development of employee well-being programmes, as well as in the monitoring and evaluation of the effective thereof, to ensure that their voices are clearly heard in the process			
5.4	SA public HEIs' well-being programmes should address all the dimensions of their employees' well-being (i.e. their physical, emotional, psychological, social, financial, spiritual, environmental, intellectual and occupational well-being)			
5.5	SA public HEIs' well-being programmes should contain clear goals in terms of each of the dimensions of their employees' well-being, and how (by which means) these will be addressed			
5.6	SA public HEIs' well-being programmes should address all the dimensions of their employees' well-being in an <u>integrated</u> manner, and not fragmentedly/in silos			
5.7	The effectiveness of SA public HEIs' well-being programmes (as contained in their well-being strategies) should be regularly monitored and evaluated.			
	5.7.1 SA public HEIs' well-being strategies should make provision for the development of an institutional employee well-being monitoring and evaluation framework			

	5.7.2 SA public HEIs' well-being strategies should clearly spell out how the effectiveness of their well-being programmes will be monitored and evaluated			
	5.7.3 SA public HEIs' well-being strategies should clearly spell out the stakeholders to monitor and evaluate the effectiveness of their well-being programmes.			
	5.7.4 SA public HEIs' well-being strategies should clearly spell out how regularly the effectiveness of their well-being programmes will be monitored.			
	5.7.5 SA public HEIs' well-being strategies should clearly spell out by which means the effectiveness of their well-being programmes will be monitored.			
Additional comments:				
COMPONENT 6: INSTITUTIONAL/ORGANISATIONAL CULTURE, CLIMATE AND VALUES SHOULD CREATE AND ENABLING ENVIRONMENT FOR EMPLOYEES OF SA PUBLIC HEIs TO FLOURISH (see 6.1 to 6.21 below)				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
6.1	Institutional culture includes, amongst others, relationships, traditions, culture and the climate/environment (positive or negative) of the institution			
6.2	Employees are enabled to flourish in an institution where the institutional culture is positive			
6.3	Employees are enabled to flourish in an institution where the institutional culture is functional			

6.4	Employees are enabled to flourish in an institution where they have positive and functional relations with colleagues, supervisors and stakeholders			
6.5	Employees are able to flourish in a discrimination free institution (where they are not discriminated against based on, amongst others, their race, age, culture, religion, disability, social status, etc).			
6.6	Employees are able to flourish in an institution where there is no dysfunctional power or unhealthy hierarchies			
6.7	Employees are able to flourish in an institution where the institutional culture creates a conducive and enabling work environment			
6.8	Employees are able to flourish in an institution where the institution's traditions reflect the demographics of the institution			
6.9	Employees are able to flourish in an institution where the institution's traditions are aimed at uniting employees			
6.10	Employees are able to flourish in an institution where they are regarded as important and valuable			
6.11	Employees are able to flourish in an institution where they are well cared for			
6.12	Employees are able to flourish in an institution that prioritises and addresses all the dimensions of their well-being in an integrated manner			
6.13	Employees are able to flourish in an institution where there is mutual trust			
6.14	The institutional culture and climate of an institution is determined by all the various internal (e.g. management, employees, supervisors, teams, unions) and external (e.g. Council, the community, partners, government, society) stakeholders			
6.15	The dynamics created within the institutions by a smaller group of employees can eventually facilitate a movement towards a more positive (functional) culture			
6.16	Commitment is required from all stakeholders to transform a negative institutional culture and climate into a positive institutional culture/climate			
6.17	SA public HEIs should put measures in place to regularly monitor and evaluate the institutional culture/climate on an ongoing basis (e.g. through communities of practice, surveys, questionnaires, online forums,			

	interviewing/discussion sessions with employees, exit interviews, institutional culture audits, appreciative inquiry sessions, etc.)			
6.18	SA public HEIs should involve their employees in the continuous monitoring and evaluation of the institutional culture/climate			
6.19	SA public HEIs should communicate the outcome of all institutional culture monitoring and evaluation processes to all institutional stakeholders, including employees, unions, Management, Council and its appropriate standing committees.			
6.20	SA public HEIs should build on strengths in terms of the institutional culture, as identified from monitoring and evaluation processes, and should work actively towards addressing any possible identified areas of improvement.			
6.21	SA public HEIs should apply the principles of positive psychology, flourishing theory and well-being theory to create a positive institutional climate, and to recognise their employees as human beings – thereby enabling their employees to flourish.			
Additional comments:				
COMPONENT 7: ROLE PLAYERS IN WELL-BEING OF EMPLOYEES OF SA PUBLIC HEIs (see 7.1 – 7.3.6 below)				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary				
NB: Mark with an X in the chosen block.				
		ES	UF	NN
7.1	Government, society and the community have a responsibility for employees of SA public HEIs' well-being			
	7.1.1 Government should establish effective health and well-being guidelines towards improving the health and well-being of their citizens			

	7.1.2 Institutions should be held accountable by Government for implementing health and well-being initiatives, as guided by national policy			
	7.1.3 Government should provide efficient and affordably health systems for its citizens			
	7.1.4 Government, society and communities should interact with one another, and with SA public HEIs, on issues pertaining to employees' health and well-being needs, and on systemic challenges associated with their well-being that would serve the purpose of integration of well-being practices in the best possible way			
7.2	SA public HEIs have a responsibility for their employees' well-being			
	7.2.1 SA public HEIs should create healthy, sustainable working, living and learning environments for their employees			
	7.2.2 SA public HEIs should show their employees that they care about them and their well-being, and that they are serious about optimising their well-being at all levels			
	7.2.3 SA public HEIs should educate employees about the factors impacting on their holistic well-being, and how they can take control of and improve their well-being by taking preventative measures and adopting a healthy lifestyle (via, amongst others, their websites, electronic media, e-mail, awareness sessions, workshops, wellness days, road shows, electronically and physically distributed material such as pamphlets, booklets, and relevant research articles)			
	7.2.4 SA public HEIs should incorporate health promotion values and principles into their mission, vision and strategic plans			
	7.2.5 SA public HEIs should both model and test their employee well-being approaches for the benefit of their own employees, but also the broader community, and society at large			
	7.2.6 SA public HEIs should educate employees about the different dimensions of their well-being (i.e. their physical, emotional, psychological (mental), social, financial, spiritual, environmental, intellectual and occupational well-being)			
	7.2.7 SA public HEIs should have a clear policy guiding their employees' well-being			

	7.2.8 SA public HEIs should have a clear strategy guiding their employees' well-being			
	7.2.9 SA public HEIs should put effective well-being programmes in place to address all the dimensions of their employees' well-being, and in an integrated manner			
	7.2.10 SA public HEIs should involve their employees in the development of their well-being policies, strategies and programmes, and the evaluation of the effectiveness thereof			
	7.2.11 SA public HEIs should interact with government, society, communities, other HEIs, and their employees on issues pertaining to employees' health and well-being needs, and on systemic challenges associated with their employees' well-being that would serve the purpose of integration of well-being practices in the best possible way			
	7.2.12 SA public HEIs should provide high-quality health- and wellbeing-related support services that are sensitive to the needs of their diverse employees			
	7.2.13 SA public HEIs should identify reliable, validated tools to constantly monitor the effectiveness and impact of their well-being policies, strategies and programmes			
	7.2.14 SA public HEIs should clearly communicate their well-being policies, strategies, programmes and events to employees via various means (e.g. e-mail, wellness days, workshops, awareness sessions, road shows, discussion forums, etc.), for employees to acquaint themselves with the contents thereof; to ask questions about these, etc.			
	7.2.15 SA public HEIs should create a conducive and enabling institutional culture and climate within which their employees can experience optimal well-being, and flourish			
	7.2.16 SA public HEIs should avail sufficient resources (e.g. human, financial and infrastructural resources) to offer and manage effective employee well-being programmes/efforts			
	7.2.17 SA public HEIs should make available social, leisure, sports and cultural facilities to their employees that reflect their diversity and facilitate healthier choices			

	7.2.18 SA public HEIs should realise the important role of senior and line managers in promoting organisational and employee well-being, and should train them in this regard (also see 2.I 2.48.1 to 2.I 2.38.5 of this framework)			
7.3	Employees of SA public HEIs have a responsibility for their own well-being			
	7.3.1 Employees of SA public HEIs should educate themselves about the factors impacting on their holistic well-being.			
	7.3.2 Employees of SA public should take responsibility for their own well-being			
	7.3.3 Employees of SA public HEIs should take control of and improve their personal well-being by taking preventative measures and adopting a healthy lifestyle (e.g. eating healthily and exercising) to improve their own well-being			
	7.3.4 Employees of SA public HEIs should acquaint themselves with the contents of their institutions' well-being policies, strategies and programmes.			
	7.3.5 Employees of SA public HEIs should participate in well-being programmes and activities offered by their employers and aimed at enhancing their well-being.			
	7.3.6 Employees of SA public HEIs should interact with one another, and their employer, on issues pertaining to their health and well-being needs, and on systemic challenges associated with their well-being that would serve the purpose of integration of well-being practices in the best possible way			
Additional comments:				

NUANCED GUIDELINES FOR SA PUBLIC HEIs ON IMPLEMENTING THIS INTEGRATED EMPLOYEE WELL-BEING FRAMEWORK AN THEIR OWN WELL-BEING PROGRAMMES AND PRACTICES IN A MORE INTEGRATED MANNER IN THE WORKPLACE (These guidelines are not a “component” of the framework, but just nuances to assist SA public HEIs to implement this integrated employee well-being framework, and their own well-being programmes and practices, in a more integrated manner at their respective institutions, and to put measures in place to address employees’ well-being more effectively. However, please evaluate the necessity of each guideline).				
Rating scale: ES = Essential; UF = Useful; NN = Not Necessary NB: Mark with an X in the chosen block.				
		ES	UF	NN
1.	<i>Since well-being is a process, and not a programme, SA public HEIs are urged to implement more process-oriented approaches to employees’ health and well-being.</i>			
2.	<i>In essence, although each employee should take responsibility for their own health and well-being, SA public HEIs should create an enabling environment that is conducive for employees to flourish, with consideration of all the key components and subcomponents of well-being contained in this framework (i.e. they should: (i) think deeper about what employee well-being entails, and clearly define the concept of well-being, in collaboration with their employees; (ii) include all of the nine identified dimensions of well-being in their well-being programmes to ensure that they address employees’ well-being holistically; (iii) develop clear well-being policies and procedures, (iv) strategies and (v) programmes that facilitate and guide employee well-being, and monitor and evaluate the effectiveness of their employee well-being policies, strategies and programmes on a regular basis; (vi) establish a positive, functional institutional culture/climate that enables employees to flourish; and (vii) be aware of, and take responsibility for their unique role in promoting the well-being of their employees, whilst being aware of others role players (e.g. government, society, communities, employees and others) in employees’ well-being).</i>			
3.	<i>As emphasised in this framework, SA public HEIs should avoid fragmented practices and approaches to employee well-being at all cost, since such practices are patronising and prescriptive, and do not facilitate employees’ holistic well-being.</i>			

4.	<i>SA public HEIs should apply a whole-person approach to employee well-being at individual (personal), relational and organisational level, by addressing all the dimensions of their well-being (i.e. their physical, emotional, psychological, social, spiritual, financial, environmental, intellectual and occupational well-being), and in an integrated manner.</i>			
5.	<i>SA public HEIs should create space and opportunities for employees to flourish in close collaboration with employees, and based on employees' needs in terms of their health and well-being.</i>			
6.	<i>SA public HEIs should integrate theory, research, practice and policy in terms of employee well-being in order to determine the drivers of employee well-being, and to plan, direct and guide the implementation of employee health and well-being initiatives.</i>			
7.	<i>As advocated in this framework, SA public HEIs should, in collaboration with their employees, develop integrated, effective, measurable well-being tools for purposes of evaluating and improving their employees' overall well-being. Integrated approaches to employee well-being should include strategies and resources that provide employees with programmes, tools, activities, support, information, practices and processes that encourage them to apply healthy habits at work, but also at home.</i>			
8.	<i>SA public HEIs should set clear goals in terms of the desired outcomes related to employees' well-being. Furthermore, SA public HEIs should keep in mind that the evaluation of their employee well-being programmes requires rigorous designs that assess the combined effects of their well-being efforts. Employees should therefore be involved in the process of evaluating the employee well-being programmes offered by SA public HEIs, and such evaluations should be based on a reliable theoretical framework, and performed regularly.</i>			
9.	<i>Flowing from such evaluations of the effectiveness of their employee well-being programmes (see point 8 above), SA public HEIs should, in collaboration with employees, identify the strengths in terms of their well-being practices, and continue to build on such strengths. Furthermore, SA public HEIs should, in collaboration with their employees, identify the barriers that hinder the efficiency of their employee well-being programmes, and implement effective, tested strategies towards improved employee well-being.</i>			

10.	<i>SA public HEIs should consider creating an employee well-being forum/communities of practice where the design, effectiveness and monitoring of their employee well-being programmes are openly discussed, to the benefit of SA public HEIs and their employees.</i>			
11.	<i>SA public HEIs should appoint experienced HR Directors/employee well-being overseers/facilitators that are acquainted with evidence-based problem-solving and learning approaches related to employees' well-being.</i>			
Additional comments on these nuanced guidelines:				

Do you have any other suggestions and/or comments with regard to any of the components or sub-components of the proposed integrated well-being framework?

Thank you for completing this survey!

Consent form: validation survey panel members participating in the final validation survey

Consent form

I, _____(your name), agree / do not agree (delete that which is not applicable) that I consent to participate as a validation panel member for the research project titled: **“AN INTEGRATED FRAMEWORK FOR ENHANCED EMPLOYEE WELL-BEING AT SOUTH AFRICAN PUBLIC HIGHER EDUCATION INSTITUTIONS”** in my personal capacity, and not as a representative of my employer.

I understand that the researcher subscribes to the following principles:

- *Voluntary participation in research*, implying that the validation panel members may withdraw from participation in the validation process at any time.
- *Informed consent*, meaning that validation panel members must be fully informed about the validation process and purposes, and must provide written consent to participate in the validation process.
- *No harm in participation*, meaning that the validation panel members will not be placed at risk, or be exposed to harm of any kind.
- *Privacy*, implying that the anonymity and confidentiality of all validation panel members shall be protected at all times.
- *Trust*, meaning that validation panel members will not be deceived or betrayed in the process of validation, or the publishing of the outcomes.

Signature: _____

Date: _____

ANNEXURE S

Initial draft Integrated Employee Well-being Framework for South African public higher education institutions (draft version prior to amendments proposed by pilot validation survey and validation survey)

INITIAL INTEGRATED EMPLOYEE WELL-BEING FRAMEWORK FOR SOUTH AFRICAN PUBLIC HIGHER EDUCATION INSTITUTIONS	
COMPONENT 1: DEFINING THE CONCEPT OF WELL-BEING	
A	What the concept of well-being entails:
A1	Well-being includes being happy, but is about more than happiness (see 1.1).
A2	Well-being is multi-faceted, and consists of various dimensions/"building blocks", (e.g. physical, emotional, psychological (mental), social, spiritual, financial, environmental, intellectual and occupational well-being). (See section 2 for more details)(also see 2.3.1 to 2.3.9).
A3	The different dimensions of well-being (mentioned in A2 above) are interlinked, and should therefore be addressed in an integrated manner, and not in silos (see 2.4; 6.2).
A4	Well-being entails positive feelings and positive functioning such as:
	A4.1 Emotional stability.
	A4.2 Engagement.
	A4.3 Living a meaningful life.
	A4.4 Living a balanced life.
	A4.5 Being optimistic.
	A4.6 Having positive emotions.
	A4.7 Having positive relationships.
	A4.8 Having resilience (the ability to "bounce back")
	A4.9 Having positive self-esteem.
	A4.10 Having vitality
	A4.11 Having hope for the future.
	A4.12 Being satisfied with your life (including work) (see 1.5.1; 2.3.9; 2.4.3)
	A4.13 Flourishing (living optimally; thriving) (see 2.1.1; 2.2.8.3)
COMPONENT 2: DIMENSIONS/BUILDING BLOCKS OF WELL-BEING	
2 A: Physical well-being	
2 A1	Following a healthy diet
2 A2	Proper hydration (drinking 6 – 8 glasses of water per day)
2 A3	Exercising/being active (including movement at work; option of stand-up desks, etc.)
2 A4	Maintaining a healthy body weight (BMI)
2 A5	Exposure to sunlight
2 A6	Making time to relax
2 A7	Getting sufficient sleep
2 A8	Make time for meditation / living mindfully
2 A9	Avoiding harmful habits such as smoking, drinking too much alcohol, using drugs, etc.
2 A10	Being safety and secure
2 A11	Having a good posture

2 A12	Experiencing optimal health
2 A13	Having vitality/having sufficient energy
2 A14	Managing stress successfully
2 A15	Having regular medical check-ups
2 B: Emotional well-being	
2 B1	Positive outlook on life
2 B2	Emotional awareness (understanding the value of one's emotions & using them to move forward in life; being aware of the state of your overall well-being)
2 B3	Emotional stability
2 B4	Emotional energy
2 B5	Taking positive action/responsibility for your own emotions/lives
2 B6	Self-acceptance (having a positive self-concept)
2 B7	Having a good self-esteem
2 B8	Assertiveness
2 B9	Being Happiness/joyful
2 B10	Experiencing peace
2 B11	Being mindful/mindfulness
2 B12	Being fulfilled
2 B13	Resilience/ability to cope with difficult life circumstances & traumatic events
2 B14	Focusing your energy on important personal priorities
2 B15	Ability to adapt to change & make essential changes to grow & live a fulfilled life
2 B16	Coping with stress
2 B17	Ability to solve problems
2 B18	Interpersonal skills
2 B19	Intrapersonal coping skills
2 B20	Good decision-making skills
2 B21	Experiencing high morale
2 C: Psychological well-being	
2 C1	Having autonomy
2 C2	Environmental mastery
2 C3	Personal growth
2 C4	Positive relations with others
2 C5	Becoming aware of/finding your purpose in life
2 C6	Self-acceptance
2 C7	Self-efficacy
2 C8	Emotional stability
2 C9	Conflict management
2 C10	Knowledge of own abilities
2 C11	Ability to cope with normal stress of life
2 C12	Ability to work productively and fruitfully
2 C13	Ability to function effectively within & making a positive contribution to one's community; feeling connected to one's community and surroundings
2 C14	Making the most of opportunities
2 C15	Having control and freedom over one's life
2 C16	Mind-body integration
2 C17	Emotional vitality
2 C18	Resilience/ability to cope with difficult life circumstances & traumatic events
2 C19	Having high self-esteem
2 C20	Being optimistic
2 C21	Feeling valued & appreciated

2 C22	Displaying emotional intelligence
2 C23	Having positive thoughts & emotions
2 C24	Having high morale
2 D: Social well-being	
2 D1	Ability to develop, build and maintain positive personal relations/social ties (social inclusion) & realising the importance thereof
2 D2	Having a sense of belonging
2 D3	Having regular contact with other people who believe in us, support us & care for us (e.g. family, friends & colleagues)
2 D4	Developing interpersonal skills
2 D5	Ability to manage conflict successfully
2 D6	Using one's skills & abilities to function optimally in life
2 D7	Developing a value system, beliefs and traditions that are important to you
2 D8	Meaningful engagement with others
2 D9	Living a meaningful life
2 D10	Embracing your cultural identity & respecting the cultural identity of others
2 D11	Improving the workplace culture
2 D12	Helping others/receiving help from others
2 E: Financial well-being	
2 E1	Living within your financial means
2 E2	Living according to a budget – no overspending
2 E3	Managing debt effectively
2 E4	Going for debt counselling if you have ended up in debt/struggle to make payments
2 E5	Saving on a monthly basis.
2 E6	Making wise financial investments
2 E7	Putting sufficient retirement planning in place
2 E8	Experiencing financial security
2 E9	Being financially literate
2 F: Spiritual well-being	
2 F1	Discovering who you are
2 F2	Discovering the meaning, value and purpose of your life
2 F3	A sense of peace and contentment stemming from a person's capacity to live with purpose/to fulfil their purpose
2 F4	Living for a cause/belonging to and serving something you believe to be bigger than yourself
2 F5	Helping others
2 F6	Making provision for quiet time in hour daily life/routine for purposes of self-reflection
2 F7	Living a meaningful life / living for a greater cause
2 F8	Search for the sacred/having a relationship with/belonging to/ having faith in an exalted power you believe to be bigger than yourself
2 F9	Assists people to deal with major life stressors (e.g. loss of loved ones; illness; natural disasters; divorce; serious mental illness; etc.)
2 F10	Regarding work as a calling
2 F11	Positive effect on mortality and depression rates
2 F12	Positive effect on our happiness and life satisfaction levels
2 F13	Forgiving others that have hurt you, or someone you love, or care about
2 F14	Having a sense of hope
2 F15	Acts as a buffer against depression, demoralisation, despair/hopelessness, anxiety and suicide
2 F16	Meditation/spiritual purification

2 F17	Personal values/beliefs/integrity
2 G: Environmental well-being	
2 G1	Positive work environment required to positively impact on our performance, behaviour and motivation to act
2 G2	Positive work environment reduces our stress levels
2 G3	Our direct environment facilitates or discourages interactions with colleagues, family and others
2 G4	Pleasing and healthy surroundings contributes to personal fulfilment
2 G5	Pleasing and healthy work environment improves our mood
2 G6	Pleasing and healthy work environment positively affects our immune system and physical health, including having a positive effect on depression and anxiety levels
2 G7	Living and working in a safe environment
2 G8	Stimulating work environment
2 G9	Physical factors: air quality, clean water, proper ventilation, etc. impact on our well-being
2 G10	Social factors: relations at work; discrimination free work environment; fear-free environment
2 G11	Ergonomics (designing/arranging workspaces, products & systems to fit the people using them, ensuring sufficient space, lighting, ventilation, support, etc.)
2 G12	External environmental influences (e.g. family, society, politics, war, the economy, etc.) impact on our well-being
2 G13	Noise levels impact on our well-being
2 H: Intellectual well-being	
2 H1	Entails participation in scholastic, cultural and community activities.
2 H2	Valuing creativity, curiosity and lifelong learning.
2 H3	Enables one to live a successful and stimulating life.
2 H4	Expands our knowledge and skills, and our ability to share these with others.
2 H5	Knowledge/skills sharing
2 H6	Keeps our minds flexible, informed and engaged.
2 H7	Intellectual well-being is improved by reading widely on various subject fields.
2 H8	Intellectual well-being is improved by practicing mindfulness (focusing on the present moment).
2 H9	Intellectual well-being stimulates and improves the health of our brains and prevents mental decline.
2 I: Occupational well-being	
2 I1	Our skills, gifts and talents used at work enrich our lives & give purpose to our lives
2 I2	Performing meaningful work
2 I3	Occupational/job satisfaction (enjoying our work & finding it work stimulating and rewarding)
2 I4	Being engaged at work
2 I5	Work/job characteristics affects our well-being
2 I6	Affective well-being (depression vs. pleasure; anxiety vs. comfort; boredom vs. enthusiasm; tiredness vs. vigour; anger vs. placidity)
2 I7	Having autonomy
2 I8	Competent to do your work
2 I9	Aspiring to be the best you that you can be at the workplace
2 I10	Sufficient opportunities for learning, personal growth & development
2 I11	Sufficient opportunities for promotion/career advancement/job progression
2 I12	Work environment that facilitates interactions with colleagues, peers, supervisors, stakeholders, etc.

2 13	Successful conflict management
2 14	Healthy, positive, supportive relations with supervisors, peers & subordinates; stakeholders, etc.
2 15	Experiencing positive emotions & having positive experiences at work
2 16	Creating “flow” (to be one with, engaged and happy in the moment)
2 17	Positive attitude about your work
2 18	Relaxed, enabling work environment
2 19	Work-life balance / balance between work and leisure time
2 20	Having a manageable workload
2 21	Balance between job demands and resources
2 22	Being suitable/fit for the job you have been appointed for
2 23	Work provides a sense of meaning and purpose
2 24	Performance/achieving work goals
2 25	Culture of inclusiveness at the workplace
2 26	Working in a safe environment
2 27	Working in a peaceful environment
2 28	Working in a pleasant environment
2 29	Appreciative work environment
2 30	Stimulating work environment
2 31	Open to change & to learn new skills
2 32	Conducive work climate/culture
2 33	Successful work-life integration
2 34	Combatting stress at work
2 35	Receiving sufficient remuneration
2 36	Sufficient performance/reward systems in place
2 37	Experiencing high morale
2 38	Having ethical leadership at work
2 39	Having a positive institutional culture at the workplace
COMPONENT 3: SA PUBLIC HEIs SHOULD DEVELOP A CLEAR EMPLOYEE WELL-BEING POLICY TO GUIDE AND FACILITATE THEIR WELL-BEING PROGRAMMES/EFFORTS	
3.1	Clear policies and procedures on employee well-being should be developed by each SA public HEI, to guide and facilitate their well-being efforts (see 2.4.15; 2.4.18; 5.4.14.1).
3.2	SA public HEIs’ employee well-being policies should be guided by applicable national health and well-being legislation, frameworks, strategies and policies (e.g. the SA Constitution, SA labour and anti-discrimination legislation, etc.) (see 2.4.15; 2.4.18; 3.4; 5.4.14.1).
3.3	SA public HEIs’ employee well-being policies should be guided by, and support the institution’s mission, vision, values, strategic plans, and other applicable policies/procedures (see 2.4.19; 3.1.1).
3.4	All well-being efforts of SA public HEIs should be aligned with and guided by the strategic direction provided via the institution’s well-being policy, as well as its vision, mission, values and strategic plans.
3.5	SA public HEIs should identify all the different stakeholders in employees’ well-being, and should involve/consult them in the development of policies/procedures on employee well-being (see 5.4.8; Table 5.19; 5.4.8.1; 6.2).
3.6	Management of SA public HEIs’ support and buy-in in all employee well-being policies and well-being efforts of the institution is of vital importance (see 2.4; 5.4.9.1).
3.7	Buy-in should be obtained from all SA public HEIs’ institutional stakeholders to ensure the successful implementation of any employee well-being policy (see 2.4; 5.4.8; 5.4.8.1; 5.4.9.1).

3.8	All institutional well-being policies should be made available on SA public HEIs' websites/electronic databases, or should be shared via any other appropriate communication media, (including, but not limited to, e-mail, wellness days, workshops, awareness sessions, road shows etc.), for employees to acquaint themselves with the contents thereof; to ask questions about the policy; and to adhere thereto.
COMPONENT 4: SA PUBLIC HEIs SHOULD EACH HAVE A CLEAR EMPLOYEE WELL-BEING STRATEGY	
4.1	SA public HEIs should develop clear well-being strategies, guided by each institution's well-being policy, as well as each institution's vision, mission, values and strategic plans (see 2.4.19; 3.1.1).
4.2	SA public HEIs should benchmark with other HEIs, both nationally and internationally, on the contents of their well-being strategies, to determine and apply best practice in the development of their own well-being strategies.
4.3	SA public HEIs' well-being strategies should point out the importance of establishing employee well-being programmes to manage such activities.
4.4	SA public HEIs' well-being strategies should guide the implementation of all their employee well-being initiatives (see 3.1.2).
4.5	SA public HEIs' well-being strategies should clearly spell out their stances and theoretical frameworks on their employees' well-being (see 5.4.6.1).
4.6	SA public HEIs' well-being strategies should clearly spell out the dimensions of employees' well-being to be addressed via their different well-being programmes (e.g. physical, emotional, psychological (mental), social, financial, spiritual, environmental, intellectual and occupational well-being)(see 2.3.1 to 2.3.9).
4.7	SA public HEIs' well-being strategies should support the objectives of the institutions' well-being programmes (see 5.4.6.1).
4.8	SA public HEIs' well-being strategies should contain clear goals in terms of each well-being objective set (see 5.4.6.1).
4.9	SA public HEIs' well-being strategies should be clear on how the effectiveness of their strategies and specific well-being programmes will be monitored and evaluated.
4.10	SA public HEIs' well-being strategies should be adapted, based on outcomes and recommendations flowing from the regular monitoring and evaluation of the effectiveness of the institutions' well-being efforts by all stakeholders.
4.11	The well-being strategy should constantly be monitored against, and aligned with the latest <u>global trends</u> in, and research on employee well-being, <u>as applicable to the institution</u> (see 2.4.19; 3.1.1).
4.12	The well-being strategy should provide guidelines for the <u>sustainable implementation</u> of the institution's well-being programmes.
4.13	SA public HEIs should make their well-being strategies available on their websites/electronic databases, or share it via any other appropriate communication media, (including, but not limited to, e-mail, wellness days, workshops, awareness sessions, road shows etc.), for employees to acquaint themselves with the contents thereof; to ask questions about the strategy, etc.
COMPONENT 5: SA PUBLIC HEIs SHOULD DEVELOP EFFECTIVE WELL-BEING PROGRAMMES ADDRESSING ALL THE DIMENSIONS OF EMPLOYEES' WELL-BEING IN AN INTEGRATED MANNER	
5.1	SA public HEIs should develop effective employee well-being programmes guided by their well-being policies and strategies.
5.2	SA public HEIs should benchmark with other HEIs, both nationally and internationally, on the contents of their well-being programmes, to determine and apply best practice in the development of their own well-being programmes.

5.3	SA public HEIs' well-being programmes should address all the dimensions of their well-being (i.e. their physical, emotional, psychological (mental), social, financial, spiritual, environmental, intellectual and occupational well-being).
5.4	SA public HEIs' well-being programmes should address all the dimensions of their well-being (i.e. their physical, emotional, psychological (mental), social, financial, spiritual, environmental, intellectual and occupational well-being)(see 2.3.1 to 2.3.9).
5.5	SA public HEIs' well-being programmes should contain clear goals in terms of the dimensions of employees' well-being, and how (by which means) these will be addressed (see 5.4.6.1).
5.6	SA public HEIs' well-being programmes should address all the dimensions of their well-being (i.e. their physical, emotional, psychological (mental), social, financial, spiritual, environmental, intellectual and occupational well-being)(see 2.3.1 to 2.3.9).
5.7	SA public HEIs' well-being programmes should address all the dimensions of their well-being in an integrated manner, and not in silos (see 2.3.1 to 2.3.9).
5.8	The effectiveness of SA public HEIs' well-being programmes (as contained in their well-being strategies) should be monitored and evaluated.
	5.8.1 SA public HEIs' well-being strategies should clearly spell out how the effectiveness of their well-being programmes will be monitored and evaluated.
	5.8.2 SA public HEIs' well-being strategies should clearly spell out the stakeholders to monitor and evaluate the effectiveness of their well-being programmes.
	5.8.3 SA public HEIs' well-being strategies should clearly spell out how regularly the effectiveness of their well-being programmes will be monitored.
	5.8.4 SA public HEIs' well-being strategies should clearly spell out by which means the effectiveness of their well-being programmes will be monitored.
COMPONENT 6: INSTITUTIONAL CULTURE AND VALUES SHOULD CREATE AND ENABLING ENVIRONMENT FOR EMPLOYEES TO FLOURISH	
6.1	Institutional culture includes, amongst others, relationships, traditions, culture and the climate/environment (positive or negative) of the institution (see 2.4; 2.5).
6.2	Employees can only flourish in an institution where the institutional culture is positive (see 2.4; 2.5; 3.1.1).
6.3	Employees can only flourish in an institution where they have positive relations with subordinate, peers, supervisors and stakeholders (see 2.4; 2.5; 3.2.1).
6.4	Employees can only flourish in an institution where the institutional culture creates a conducive and enabling work environment (see 2.4; 2.5; 3.2.1; 3.2.6).
6.5	Employees can only flourish in an institution where the institution's traditions reflect the demographics of the institution, and where these are aimed at uniting employees (see 3.2.14; 5.5).
6.6	Employees can only flourish in an institution where they are regarded as important assets of the organisation (see 2.4; 2.5; 3.1.1; 3.2.1).
6.7	Employees can only flourish in an institution where they are well cared for (see 2.4; 2.5; 3.1.1; 3.2.1).
6.8	Employees can only flourish in an institution where there is mutual trust (see 2.4; 2.5; 3.1.1; 3.2.6; 3.2.14).
6.9	The institutional culture is determined by all the various internal (e.g. management, employees, supervisors, teams, unions) and external (e.g. Council, the community, partners, government, society) stakeholders (see 5.5).
6.10	Commitment is required from <u>all stakeholders</u> to transform a negative institutional culture into a positive institutional culture (see 5.5).
6.11	SA public HEIs should put measures in place to regularly monitor and evaluate the institutional culture (e.g. through annual surveys, questionnaires, online forums, discussion sessions with employees, exit interviews, institutional culture audits, etc.)

6.12	SA public HEIs should communicate the outcome of all institutional culture monitoring and evaluation processes to employees, management, Council and its appropriate standing committees.
6.13	SA public HEIs should build on strengths in terms of the institutional culture, as identified from monitoring and evaluation processes, and should work actively towards addressing any possible identified areas of improvement.
COMPONENT 7: WHO IS RESPONSIBLE FOR EMPLOYEES OF SA PUBLIC HEIs' WELL-BEING?	
7.1	Government, society and the community have a responsibility towards the well-being of employees of SA public HEIs
	7.1.1 Government should establish effective health and well-being guidelines towards improving the health and well-being of their citizens.
	7.1.2 Institutions should be held accountable by Government for implementing health and well-being initiatives, as guided by national policy.
	7.1.3 Government should provide efficient and affordably health systems for its citizens.
7.2	SA public HEIs have a responsibility for their employees' well-being.
	7.2.1 SA public HEIs should educate employees about the factors impacting on their holistic well-being, and how they can take control of and improve their well-being by taking preventative measures and adopting a healthy lifestyle (via, amongst others, their websites, electronic media, e-mail, awareness sessions, workshops, wellness days, road shows, electronically and physically distributed material such as pamphlets, booklets, and relevant research articles).
	7.2.2 SA public HEIs should educate employees about the different dimensions of their well-being (i.e. their physical, emotional, psychological (mental), social, financial, spiritual, environmental, intellectual and occupational well-being)(see 2.3.1 to 2.3.9).
	7.2.3 SA public HEIs should have a clear policy guiding their employees' well-being.
	7.2.4 SA public HEIs should have a clear strategy guiding their employees' well-being.
	7.2.5 SA public HEIs should put effective well-being programmes in place to address their employees' well-being holistically, and in an integrated manner.
	7.2.6 SA public HEIs should put measures in place for the effective monitoring and evaluation of their well-being policies, strategies and programmes.
	7.2.7 SA public HEIs should clearly communicate their well-being policies, strategies, programmes and events to employees via e-mail, wellness days, workshops, awareness sessions, road shows, discussion forums, etc.), for them to acquaint themselves with the contents thereof; to ask questions about these, etc.
	7.2.8 SA public HEIs should create a conducive and enabling institutional culture and environment for their employees to experience optimal well-being.
	7.2.9 SA public HEIs should avail sufficient resources (e.g. human, financial & infrastructural resources) to offer and manage effective employee well-being initiatives.
7.3	Employees of SA public HEIs have a responsibility for their own well-being
	7.3.1 Employees of SA public HEIs should educate themselves about the factors impacting on their holistic well-being.
	7.3.2 Employees of SA public HEIs should acquaint themselves with the contents of their institutions' well-being policies, strategies and programmes.
	7.3.3 Employees of SA public HEIs should attend wellness programmes and activities offered by their employers to enhance their holistic well-being.
	7.3.4 Employees of SA public HEIs should take control of and improve their well-being by taking preventative measures and adopting a healthy lifestyle (e.g. eating healthily and exercising) to improve their own well-being.

Final Integrated Employee Well-being Framework for South African public higher education institutions

(to be read in conjunction with the guidelines provided below this framework)

FINAL INTEGRATED EMPLOYEE WELL-BEING FRAMEWORK FOR SOUTH AFRICAN PUBLIC HIGHER EDUCATION INSTITUTIONS	
COMPONENT 1: DEFINING THE CONCEPT OF WELL-BEING	
A1	The concept of well-being includes/entails the following:
A1.1	Well-being includes being happy, but is about more than happiness
A1.2	Well-being entails high levels of subjective well-being
A1.3	Well-being is multi-faceted, and consists of various dimensions/"building blocks" (see section 2 (2A to 2I) below for more details).
A1.4	Important dimensions (building blocks) of well-being include physical, emotional, psychological (mental), social, financial, spiritual, environmental, intellectual and occupational well-being (see section 2 (2A to 2I) below for more details).
A1.5	The different dimensions (building blocks) of well-being (mentioned in A1.4 above) are interlinked, and therefore should be addressed in an integrated manner, and not in silos.
A1.6	The concept of well-being includes aspects related to our personal, relational and collective well-being.
A2	Well-being entails positive feelings and positive functioning, such as:
A2.1	Emotional stability
A2.2	Engagement
A2.3	Living a meaningful life
A2.4	Living a balanced life
A2.5	Being optimistic
A2.6	Positive emotions
A2.7	High morale
A2.8	Positive relationships
A2.9	Resilience (ability to cope/"bounce back")
A.210	Positive self-esteem
A2.11	Vitality
A2.12	Having hope for the future
A2.13	Being satisfied with your life (including work)
A2.14	Flourishing (living optimally; thriving)
COMPONENT 2: DIMENSIONS/BUILDING BLOCKS OF WELL-BEING	
2 A: Physical well-being	
2 A.1	Physical well-being is an important dimension of human well-being.
2 A.2	Physical well-being entails/includes:
	2 A 2.1 Following a healthy diet
	2 A 2.2 Proper hydration (drinking enough water)
	2 A 2.3 Exercising/being active
	2 A 2.4 Maintaining a healthy body weight (BMI)
	2 A 2.5 Exposure to sunlight
	2 A 2.6 Making time to relax
	2 A 2.7 Getting sufficient sleep
	2 A 2.8 Make time for meditation

	2 A 2.9 Living mindfully
	2 A 2.10 Avoiding harmful habits such as smoking, drinking too much alcohol, using drugs, etc.
	2 A 2.11 Being safe and secure
	2 A 2.12 Maintain a good posture
	2 A 2.13 Experiencing optimal health
	2 A 2.14 Having vitality
	2 A 2.15 Having sufficient energy
	2 A 2.16 Managing stress successfully
	2 A 2.17 Having regular medical check-ups
2 B: Emotional well-being	
2 B.1	Emotional well-being is an important dimension of human well-being.
2 B 2	Emotional well-being entails/includes:
	2 B 2.1 Having a positive outlook on life
	2 B 2.2 Being emotionally aware
	2 B 2.2.1 Understanding the value of one's emotions
	2 B 2.2.2 Being aware of the state of your overall well-being
	2 B 2.3 Being emotionally stable
	2 B 2.4 Having emotional energy/vitality
	2 B 2.5 Taking positive action
	2 B 2.6 Taking responsibility for your own emotions
	2 B 2.7 Self-acceptance (having a positive self-concept)
	2 B 2.8 Having a good self-esteem
	2 B 2.9 Being assertive
	2 B 2.10 Being happy/joyful
	2 B 2.11 Experiencing peace
	2 B 2.12 Being mindful
	2 B 2.13 Being fulfilled
	2 B 2.14 Resilience (ability to cope/"bounce back")
	2 B 2.15 Focusing your energy on important personal priorities
	2 B 2.16 Ability to adapt to change
	2 B 2.17 Ability to make essential changes to grow and live a fulfilled life
	2 B 2.18 Coping with stress/navigating stressful situations
	2 B 2.19 Ability to solve problems
	2 B 2.20 Interpersonal skills
	2 B 2.21 Intrapersonal coping skills
	2 B 2.22 Good decision-making skills
	2 B 2.23 Experiencing high morale
	2 B 2.24 Having hope for the future
2 C: Psychological well-being	
2 C 1	Psychological (mental) well-being is an important dimension of human well-being.
2 C 2	Psychological (mental) well-being entails/includes:
	2 C 2.1 Autonomy
	2 C 2.2. Environmental mastery
	2 C 2.3 Personal growth
	2 C 2.4 Positive relations with others
	2 C 2.5 Self-acceptance
	2 C 2.6 Self-efficacy (the ability to believe that you will succeed in life)
	2 C 2.7 Emotional stability
	2 C 2.8 Ability to manage conflict

	2 C 2.9 Knowledge of own abilities
	2 C 2.10 Ability to cope with normal stress of life
	2 C 2.11 Ability to be productive and fruitful at work
	2 C 2.12 Ability to function effectively within one's community
	2 C 2.13 Ability to function effectively within and contribute positively to one's community
	2 C 2.14 Feeling connected to one's community/surroundings
	2 C 2.15 Making the most of opportunities
	2 C 2.16 Having control and freedom over one's life
	2 C 2.17 Mind-body integration
	2 C 2.18 Having emotional vitality
	2 C 2.19 Resilience/ability to cope with difficult life circumstances and traumatic events
	2 C 2.20 Having high self-esteem
	2 C 2.21 Being optimistic
	2 C 2.22 Feeling that your life has value
	2 C 2.23 Displaying emotional intelligence
	2 C 2.24 Having positive thoughts and emotions
	2 C 2.25 Having high morale
	2 C 2.26 Experiencing life as enjoyable
	2 C 2.27 Being enthusiastic about life
	2 C 2.28 Experiencing feelings of vigour
2 D: Social well-being	
2 D 1	Social well-being is an important dimension of human well-being
2 D 2	Social well-being entails/includes:
	2 D 2.1 The ability to develop, build and maintain positive personal relations/social ties (social inclusion)
	2 D 2.2 Having a sense of belonging
	2 D 2.3 Having a sense that your life has value, and that others value you
	2 D 2.4 Having regular contact with other people who believe in you, support you and care for you (e.g. family, friends and colleagues)
	2 D 2.5 Developing interpersonal skills
	2 D 2.6 The ability to manage conflict successfully
	2 D 2.7 Using one's skills and abilities to function optimally in life
	2 D 2.8 Developing a value system, beliefs and traditions that are important to you
	2 D 2.9 Meaningful engagement with others
	2 D 2.10 To be socially accepted
	2 D 2.11 Embracing your own cultural identity
	2 D 2.12 Respecting the cultural identity of others
	2 D 2.13 Ability to receive support/help from others when needed
2E: Financial well-being	
2 E 1	Financial well-being is an important dimension of human well-being
2 E 2	Financial well-being entails/includes:
	2 E 2.1 Living within your financial means
	2 E 2.2 Sticking to your budget
	2 E 2.3 Managing your finances effectively
	2 E 2.4 Regularly saving part of your income
	2 E 2.5 Debt management (e.g. going for debt counselling if you have ended up in debts/struggle to make payments)
	2 E 2.6 Making wise financial investments
	2 E 2.7 Putting sufficient retirement planning in place
	2 E 2.8 Experiencing financial security

	2 E 2.9 Being financially literate
2 F: Spiritual well-being	
2 F 1	Spiritual well-being is an important dimension of human well-being.
2 F 2	Spiritual well-being entails/includes:
	2 F 2.1 Discovering who you are
	2 F 2.2 Discovering the meaning of your life
	2 F 2.3 Discovering the value of your life
	2 F 2.4 Discovering your purpose in life
	2 F 2.5 A sense of peace and contentment
	2 F 2.6 Living for a greater cause
	2 F 2.7 Having a relationship with someone you believe to be bigger than yourself (a higher power)
	2 F 2.8 Serving a higher power
	2 F 2.9 Having faith in a higher power
	2 F 2.10 Helping others
	2 F 2.11 Making provision for quiet time in your daily life/routine for purposes of self-reflection
	2 F 2.12 Living a meaningful life
	2 F 2.13 Search for the sacred
	2 F 2.14 Assisting people to deal with major life stressors (e.g. illness; divorce, death, natural disasters; mental illness; etc.)
	2 F 2.15 Regarding work as a calling
	2 F 2.16 Positive effect on mortality and depression rates
	2 F 2.17 Positive effect on your happiness and life satisfaction levels
	2 F 2.18 Forgiving others
	2 F 2.19 Having a sense of hope
	2 F 2.20 Practising meditation (spiritual purification)
	2 F 2.21 Having integrity
	2 F 2.22 Aligning your personal values and beliefs with what you believe in
	2 F 2.23 Spiritual well-being acts as a buffer against depression
	2 F 2.24 Spiritual well-being acts as a buffer against demoralisation
	2 F 2.25 Spiritual well-being acts as a buffer against despair/hopelessness
	2 F 2.26 Spiritual well-being acts as a buffer against anxiety
2 G: Environmental well-being	
2 G 1	Environmental well-being is an important dimension of human well-being
2 G 2	Environmental well-being entails/includes:
	2 G 2.1 Physical environmental factors such as air quality, clean water, proper ventilation, etc., which impact on one's well-being
	2 G 2.2 Social environmental factors such as relations at home; relations at work; a discrimination-free and fear-free work environment, which impact on our well-being
	2 G 2.3 Ergonomics (designing/arranging workspaces, products and systems to fit the people using them, ensuring sufficient space, lighting, ventilation, support, etc.)
	2 G 2.4 External environmental influences (e.g. family, society, politics, war, the economy, etc.) impact on our well-being
	2 G 2.5 A positive work environment has a positive impact on our performance
	2 G 2.6 A positive work environment has a positive impact on our behaviour
	2 G 2.7 A positive work environment has a positive impact on our motivation to act
	2 G 2.8 A positive work environment reduces our stress levels

	2 G 2.9 Our direct environment facilitates or discourages interactions with colleagues, family and others
	2 G 2.10 Pleasing and healthy surroundings contribute to personal fulfilment
	2 G 2.11 A healthy and pleasing work environment improves our mood
	2 G 2.12 A healthy and pleasing work environment positively affects our immune system
	2 G 2.13 A healthy and pleasing work environment positively affects our physical health
	2 G 2.14 Living and working in a safe environment improve our well-being
	2 G 2.15 Working in a stimulating environment contributes to our well-being
	2 G 2.16 Noise levels impact on our well-being
2 H: Intellectual well-being	
2 H 1	Intellectual well-being is an important dimension of human well-being
2 H 2	Intellectual well-being entails/includes:
	2 H 2.1 Participation in scholastic, cultural and community activities
	2 H 2.2 Valuing creativity, curiosity and lifelong learning
	2 H 2.3 Enabling one to live a successful and stimulating life
	2 H 2.4 Expanding our knowledge and skills
	2 H 2.5 Sharing our knowledge and skills
	2 H 2.6 Keeping our minds flexible, informed and engaged
	2 H 2.7 Improving our mindfulness (ability to live in, and focus on the present moment)
	2 H 2.8 Stimulating and improving the health of our brains and preventing mental decline
2 I: Occupational well-being	
2 I 1	Occupational well-being is an important dimension of human well-being
2 I 2	Occupational well-being entails/includes:
	2 I 2.1 Using our skills, gifts and talents at work to enrich our lives and give purpose to our lives
	2 I 2.2 Performing meaningful work
	2 I 2.3 Occupational/job satisfaction (enjoying our work and finding it stimulating and rewarding)
	2 I 2.4 Job security
	2 I 2.5 Being engaged at work
	2 I 2.6 Work/job characteristics affect our well-being
	2 I 2.7 Having autonomy
	2 I 2.8 Being competent to do one's work
	2 I 2.9 Aspiring to be the best you that you can be at the workplace
	2 I 2.10 Sufficient opportunities for learning, personal growth/development
	2 I 2.11 Sufficient opportunities for promotion/career advancement/job progression/talent management
	2 I 2.12 Work environment that facilitates interactions with colleagues, peers, supervisors, stakeholders, etc.
	2 I 2.13 Successful conflict management at work
	2 I 2.14 Healthy, supportive relations with supervisors, peers and stakeholders, etc.
	2 I 2.15 Healthy, positive relations with all stakeholders
	2 I 2.16 Having high morale at work
	2 I 2.17 Experiencing positive emotions and having positive experiences at work
	2 I 2.18 Creating "flow" whilst working ("flow" = a state of concentration and engagement when completing a task that requires concentration, and which challenges your skills/becoming absorbed in what you are doing)
	2 I 2.19 Positive attitude about your work
	2 I 2.20 Relaxed, enabling work environment
	2 I 2.21 Work-life balance:

	2 2.21.1 Balance between work and family life
	2 2.21.2 Time to switch off from work and relax/recover from work (i.e. balance between work and leisure/work and recovery from work)
	2 2.21.3 A work environment that allows for successful work-life integration
	2 2.22 Having a manageable workload
	2 2.23 There should be a balance between job demands and job resources in the workplace
	2 2.24 Being suitable/fit for the job you have been appointed for
	2 2.25 Work provides a sense of meaning and purpose
	2 2.26 Performing well in your job
	2 2.27 Achieving the goals related to your job
	2 2.28 Feeling "part of" the organisation (a culture of inclusiveness at the workplace)
	2 2.29 Working in a safe environment
	2 2.30 Working in a peaceful environment
	2 2.31 Working in a pleasant environment
	2 2.32 Working in an appreciative work environment
	2 2.33 Working in an environment where employees are being valued
	2 2.34 Working in a stimulating work environment
	2 2.35 Working in a supportive work environment
	2 2.36 Working in an environment free from unnecessary stress
	2 2.37 Working in a discrimination-free environment (where there is no discrimination based on race, religion, gender, disability, etc.)
	2 2.38 Working in an environment where leaders are ethical
	2 2.39 Working in an environment where all employees are treated fairly
	2 2.40 Working in an environment where all employees are treated equally
	2 2.41 Being open to change in the institution
	2 2.42 Being willing to learn new skills to perform your job more effectively
	2 2.43 Having a positive/conducive work climate/organisational culture
	2 2.44 Combatting/successfully managing normal levels of stress at work
	2 2.45 Being paid fairly for the level of work you perform
	2 2.46 Sufficient performance/reward systems in place
	2 2.47 Experiencing high morale at work
	2 2.48 Working in an environment where leaders lead by example
	2 2.49 Senior/line managers play an important role in both employee and organisational well-being
	2 2.49.1 Senior/line managers can contribute to positive relations with employees
	2 2.49.2 Senior/line managers can contribute to improving the organisational culture (amongst others through ethical leadership, caring for employees, being committed to and positive about the organisation)
	2 2.49.3 Senior/line managers can play an important role to play in motivating employees (amongst others by believing in them, inspiring them and leading by a good example)
	2 2.49.4 Senior/line managers can play an important role in improving employees' performance (amongst others by motivating them, believing in them, building their self-esteem, and supporting them to perform better)
	2 2.49.5 Senior/line managers play an important role in increasing employees' levels of engagement (amongst others by motivating them, and making them feel part of the organisation)
	2 2.49.6 Senior/line managers have an important role to play in increasing employees' well-being (amongst others by treating them fairly and equally, motivating

	them, valuing and appreciating them, allowing them sufficient opportunities for growth and development, and truly caring about them)
COMPONENT 3: SA PUBLIC HEIs SHOULD DEVELOP A CLEAR EMPLOYEE WELL-BEING POLICY TO GUIDE AND FACILITATE THEIR WELL-BEING PROGRAMMES/EFFORTS	
3.1	A clear policy/policies and procedure(s) on employee well-being should be developed by each SA public HEI, to guide and facilitate their employee well-being efforts
3.2	SA public HEIs' employee well-being policies should be guided by applicable national health and well-being legislation, frameworks, standards, strategies and policies (e.g. the SA Constitution, occupational health and safety legislation, labour and anti-discrimination legislation, etc.)
3.3	SA public HEIs' employee well-being policies should be aligned with the institution's mission, vision, values and strategic plans
3.4	SA public HEIs' employee well-being policies should be aligned with other applicable institutional policies
3.5	All well-being programmes/efforts of SA public HEIs should be aligned with and guided by the strategic direction provided via the institution's well-being policy, as well as its vision, mission, values and strategic plans
3.6	SA public HEIs should identify all the different stakeholders in employee well-being, and should involve/consult them in the development of policies/procedures on employee well-being (e.g. unions, HR, employees, Institutional Forums, etc.)
3.7	SA public HEIs should develop an integrative process that involve employees in ongoing conversations about the promotion of their health and well-being
3.8	Buy-in should be obtained from all SA public HEIs' institutional stakeholders (e.g. Management, unions, HR, employees, etc.) to ensure the successful implementation of any employee well-being policy
3.9	All institutional well-being policies should be made available on SA public HEIs' websites/electronic databases, or should be shared via any other appropriate communication media, (including, but not limited to e-mail, wellness days, workshops, awareness sessions, road shows, etc.), for employees to acquaint themselves with the its content; to ask questions about the policy; and to adhere to it.
COMPONENT 4: SA PUBLIC HEIs SHOULD EACH HAVE A CLEAR EMPLOYEE WELL-BEING STRATEGY	
4.1	SA public HEIs should develop clear well-being strategies, guided by each institution's well-being policy, as well as its vision, mission, values and strategic plans
4.2	SA public HEIs should involve employees across all levels in the development of their well-being strategies, to ensure that their voices are clearly heard in the process
4.3	SA public HEIs should benchmark with other HEIs, both nationally and internationally, on the contents of their well-being strategies to determine and apply best practice in the development of their own well-being strategies
4.4	SA public HEIs' well-being strategies should provide guidelines on the establishment of effective employee well-being <u>programmes</u> to successfully execute their well-being efforts
4.5	SA public HEIs' well-being strategies should guide the implementation of all their employee well-being initiatives
	4.5.1 SA public HEIs' well-being strategies should clearly spell out the strategic thrusts related to employee well-being
	4.5.2 SA public HEIs' well-being strategies should clearly spell out the principles adopted related to their employees' well-being
	4.5.3 SA public HEIs' well-being strategies should clearly spell out the objectives related to their employees' well-being

	4.5.4 SA public HEIs' well-being strategies should provide for the development of an employee well-being framework to guide the implementation of all institutional well-being efforts
	4.5.5 SA public HEIs' well-being strategies should provide for an institutional implementation plan to be compiled to guide the implementation of their well-being programmes/efforts
4.6	SA public HEIs' well-being strategies should clearly spell out their stances on and theoretical frameworks related to employee well-being
4.7	SA public HEIs' well-being strategies should clearly spell out the dimensions of employees' well-being to be addressed via their different well-being programmes (e.g. physical, emotional, psychological (mental), social, financial, spiritual, well-being, etc.)
4.8	SA public HEIs' well-being strategies should support the objectives of the institutions' well-being programmes
4.9	SA public HEIs' well-being strategies should contain clear goals in terms of each well-being objective set
4.10	SA public HEIs' well-being strategies should be clear on <u>how</u> the effectiveness of their strategies and specific well-being programmes will be monitored and evaluated (e.g. through reliable, validated tools such as questionnaires, annual surveys, interviewing employees, evaluating employees' positive mood, negative mood and life satisfaction levels, etc.)
4.11	SA public HEIs' well-being strategies should be clear on <u>how regularly</u> the effectiveness of their strategies and specific well-being programmes will be monitored and evaluated (e.g. each semester, annually, etc.)
4.12	SA public HEIs' well-being strategies should be adapted, based on outcomes and recommendations flowing from the regular monitoring and evaluation of their well-being programmes
4.13	SA public HEIs' well-being strategies should constantly be monitored against, and aligned with the latest <u>global trends</u> in, and research on employee well-being, <u>as applicable to the institution</u>
4.14	SA public HEIs' well-being strategies should provide guidelines for the <u>sustainable implementation</u> of the institution's well-being programmes.
4.15	SA public HEIs could make their well-being strategies available on their websites/electronic databases, or share it via any other appropriate communication media, (including, but not limited to, e-mail, wellness days, workshops, awareness sessions, road shows etc.), for employees to acquaint themselves with the content of the strategies; to ask questions about the strategy, etc.
COMPONENT 5: SA PUBLIC HEIs SHOULD DEVELOP EFFECTIVE WELL-BEING PROGRAMMES ADDRESSING ALL THE DIMENSIONS OF EMPLOYEES' WELL-BEING IN AN INTEGRATED MANNER	
5.1	SA public HEIs should develop effective employee well-being programmes guided by their well-being policies and strategies
5.2	SA public HEIs should benchmark with other HEIs, both nationally and internationally, on the contents of their well-being programmes, to determine and apply best practice in the development and application of their own well-being programmes
5.3	Employees across all levels should be involved in the development of employee well-being programmes, as well as in the monitoring and evaluation of the effective thereof, to ensure that their voices are clearly heard in the process
5.4	SA public HEIs' well-being programmes should address all the dimensions of their employees' well-being (i.e. their emotional, physical, social, psychological, financial, environmental, spiritual, occupational and intellectual well-being)

5.5	SA public HEIs' well-being programmes should contain clear goals in terms of each of the dimensions of their employees' well-being, and how (by which means) these will be addressed
5.6	SA public HEIs' well-being programmes should address all the dimensions of their employees' well-being in an <u>integrated</u> manner, and not fragmentedly/in silos
5.7	The effectiveness of SA public HEIs' well-being programmes (as contained in their well-being strategies) should be regularly monitored and evaluated.
	5.7.1 SA public HEIs' well-being strategies should make provision for the development of an institutional employee well-being monitoring and evaluation framework
	5.7.2 SA public HEIs' well-being strategies should clearly spell out how the effectiveness of their well-being programmes will be monitored and evaluated
	5.7.3 SA public HEIs' well-being strategies should clearly spell out the stakeholders to monitor and evaluate the effectiveness of their well-being programmes.
	5.7.4 SA public HEIs' well-being strategies should clearly spell out how regularly the effectiveness of their well-being programmes will be monitored.
	5.7.5 SA public HEIs' well-being strategies should clearly spell out by which means the effectiveness of their well-being programmes will be monitored.
COMPONENT 6: INSTITUTIONAL CULTURE AND VALUES SHOULD CREATE AND ENABLING ENVIRONMENT FOR EMPLOYEES TO FLOURISH	
6.1	Institutional culture includes, amongst others, relationships, traditions, culture and the climate/environment (positive or negative) of the institution
6.2	Employees are enabled to flourish in an institution where the institutional culture is positive
6.3	Employees are enabled to flourish in an institution where the institutional culture is functional
6.4	Employees are enabled to flourish in an institution where they have positive and functional relations with colleagues, supervisors and stakeholders
6.5	Employees are able to flourish in a discrimination-free institution (where they are not discriminated against based on, amongst others, their race, age, culture, religion, disability, social status, etc).
6.6	Employees are able to flourish in an institution where there is no dysfunctional power or unhealthy hierarchies
6.7	Employees are able to flourish in an institution where the institutional culture creates an enabling work environment conducive to work and employee well-being
6.8	Employees are able to flourish in an institution where the institution's traditions reflect the demographics of the institution
6.9	Employees are able to flourish in an institution where the institution's traditions are aimed at uniting employees
6.10	Employees are able to flourish in an institution where they are regarded as important and valuable
6.11	Employees are able to flourish in an institution where they are well cared for
6.12	Employees are able to flourish in an institution that prioritises and addresses all the dimensions of their well-being in an integrated manner
6.13	Employees are able to flourish in an institution where there is mutual trust
6.14	The institutional culture and climate of an institution is determined by the various internal (e.g. management, employees, supervisors, teams, unions) and external (e.g. Council, the community, partners, government, society) stakeholders
6.15	The dynamics created within the institutions by a smaller group of employees can eventually facilitate a movement towards a more positive (functional) culture
6.16	Commitment is required from all stakeholders to transform a negative institutional culture and climate into a positive institutional culture/climate

6.17	SA public HEIs should put measures in place to regularly monitor and evaluate the institutional culture/climate on an ongoing basis (e.g. through communities of practice, surveys, questionnaires, online forums, interviewing/ discussion sessions with employees, exit interviews, institutional culture audits, appreciative inquiry sessions, etc.)
6.18	SA public HEIs should involve their employees in the continuous monitoring and evaluation of the institutional culture/climate
6.19	SA public HEIs should communicate the outcome of all institutional culture monitoring and evaluation processes to all institutional stakeholders, including employees, unions, Management, Council and its appropriate standing committees.
6.20	SA public HEIs should build on strengths in terms of the institutional culture, as identified from monitoring and evaluation processes, and should work actively towards addressing any possible identified areas of improvement.
6.21	SA public HEIs should apply the principles of positive psychology, flourishing theory and well-being theory to create a positive institutional climate, and to recognise their employees as human beings – thereby enabling their employees to flourish
COMPONENT 7: WHO IS RESPONSIBLE FOR EMPLOYEE OF SA PUBLIC HEIs WELL-BEING?	
7.1	Government, society and the community must take responsibility for employees of SA public HEIs' well-being
	7.1.1 Government should establish effective health and well-being guidelines towards improving the health and well-being of their citizens
	7.1.2 Institutions should be held accountable by Government for implementing health and well-being initiatives, as guided by national policy
	7.1.3 Government should provide efficient and affordably health systems for its citizens
	7.1.4 Government, society and communities should interact with one another, and with SA public HEIs, on issues pertaining to employees' health and well-being needs, and on systemic challenges associated with their well-being that would serve the purpose of integration of well-being practices in the best possible way
7.2	SA public HEIs have a responsibility for their employees' well-being
	7.2.1 SA public HEIs should create healthy, sustainable working, living and learning environments for their employees
	7.2.2 SA public HEIs should show their employees that they care about them and their well-being, and that they are serious about optimising their well-being at all levels
	7.2.3 SA public HEIs should educate employees about the factors impacting on their holistic well-being, and how they can take control of and improve their well-being by taking preventative measures and adopting a healthy lifestyle (via, amongst others, their websites, electronic media, e-mail, awareness sessions, workshops, wellness days, road shows, electronically and physically distributed material such as pamphlets, booklets, and relevant research articles)
	7.2.4 SA public HEIs should incorporate values and principles in their vision, mission and strategic plans that emphasise the promotion of their employees' well-being
	7.2.5 SA public HEIs should both model and test their employee well-being approaches for the benefit of their own employees, but also the broader community, and society at large
	7.2.6 SA public HEIs should educate employees about the different dimensions of their well-being (i.e. their physical, emotional, psychological [mental], social, financial, spiritual, environmental, intellectual and occupational well-being)
	7.2.7 SA public HEIs should have a clear policy guiding their employees' well-being
	7.2.8 SA public HEIs should have a clear strategy guiding their employees' well-being
	7.2.9 SA public HEIs should put effective well-being programmes in place to address all the dimensions of their employees' well-being, and in an integrated manner

	7.2.10 SA public HEIs should involve their employees in the development of their well-being policies, strategies and programmes, and the evaluation of their effectiveness
	7.2.11 SA public HEIs should interact with government, society, communities, other HEIs, and their employees on issues pertaining to employees' health and well-being needs, and on systemic challenges associated with their employees' well-being that would serve the purpose of integration of well-being practices in the best possible way
	7.2.12 SA public HEIs should provide well-being-related services of a high quality that are sensitive to the diverse needs of employees
	7.2.13 SA public HEIs should identify reliable, validated tools to constantly monitor the effectiveness and impact of their well-being policies, strategies and programmes
	7.2.14 SA public HEIs should clearly communicate their well-being policies, strategies, programmes and events to employees via various means (e.g. e-mail, wellness days, workshops, awareness sessions, road shows, discussion forums, etc.), for employees to acquaint themselves with their contents; to ask questions about these, etc.
	7.2.15 SA public HEIs should create an enabling institutional culture and climate conducive to optimal well-being and flourishing
	7.2.16 SA public HEIs should make available sufficient resources (e.g. human, financial and infrastructural resources) to offer and manage effective employee well-being programmes/efforts
	7.2.17 SA public HEIs should make available social, sports, cultural and leisure facilities to their employees that encourage healthy living and reflect their diversity
	7.2.18 SA public HEIs should realise the important role of senior and line managers in promoting organisational and employee well-being, and should train them in this regard (also see 2.I 2.48.1 to 2.I 2.38.5 of this framework)
7.3	Employees of SA public HEIs have a responsibility for their own well-being
	7.3.1 Employees of SA public HEIs should educate themselves about the factors impacting on their holistic well-being.
	7.3.2 Employees of SA public should take responsibility for their own well-being
	7.3.3 Employees of SA public HEIs should take control of and improve their personal well-being by taking preventative measures and adopting a healthy lifestyle (e.g. eating healthily and exercising) to improve their own well-being
	7.3.4 Employees of SA public HEIs should acquaint themselves with the contents of their institutions' well-being policies, strategies and programmes.
	7.3.5 Employees of SA public HEIs should participate in well-being programmes and activities offered by their employers and aimed at enhancing their well-being.
	7.3.6 Employees of SA public HEIs should interact with one another, and their employer, on issues pertaining to their health and well-being needs, and on systemic challenges associated with their well-being that would serve the purpose of integration of well-being practices in the best possible way
8. NUANCED GUIDELINES FOR SA PUBLIC HEIs ON IMPLEMENTING THIS INTEGRATED EMPLOYEE WELL-BEING FRAMEWORK AND THEIR OWN WELL-BEING PROGRAMMES AND PRACTICES IN A MORE INTEGRATED MANNER IN THE WORKPLACE	
8.1	Since well-being is a process, and not a programme, SA public HEIs are urged to implement more process-oriented approaches to employees' health and well-being.
8.2	In essence, although each employee should take responsibility for his/her own health and well-being, SA public HEIs should create an enabling environment that is conducive to employees' flourishing, taking cognisance of all the key components and sub-components of well-being contained in this framework, i.e. they should: (i) think deeper about what

	employee well-being entails, and clearly define the concept of well-being, in collaboration with their employees; (ii) include the nine identified dimensions of well-being in their well-being programmes to ensure that they address employees' well-being holistically; (iii) develop clear well-being policies and procedures, (iv) strategies and (v) programmes that facilitate and guide employee well-being, and monitor and evaluate the effectiveness of their employee well-being policies, strategies and programmes on a regular basis; (vi) establish a positive, functional institutional culture/climate that enables employees to flourish; and (vii) be aware of, and take responsibility for their unique role in promoting the well-being of their employees, whilst being aware of others role players (e.g. government, society, communities, employees and others) in employees' well-being.
8.3	As emphasised in this framework, SA public HEIs should avoid fragmented practices and approaches to employee well-being at all cost, since such practices are patronising and prescriptive, and do not facilitate employees' holistic well-being.
8.4	SA public HEIs should apply a whole-person approach to employee well-being at individual (personal), relational and organisational levels by addressing all the dimensions of their well-being (i.e. their physical, emotional, psychological, social, spiritual, financial, environmental, intellectual and occupational well-being), in an integrated manner.
8.5	SA public HEIs should create space and opportunities for employees to flourish in close collaboration with employees, and based on employees' needs in terms of their health and well-being.
8.6	SA public HEIs should integrate theory, research, practice and policy in terms of employee well-being for purposes of determining the drivers of employee well-being, and to plan, direct and guide the implementation of employee health and well-being initiatives.
8..7	As advocated in this framework, SA public HEIs, in collaboration with their employees, should develop integrated, effective, measurable well-being tools for purposes of evaluating and improving their employees' overall well-being. Integrated approaches to employee well-being should include strategies and resources that provide employees with programmes, tools, activities, support, information, practices and processes that encourage them to apply healthy habits at work, but also at home.
8.8	SA public HEIs should set clear goals in terms of the desired outcomes related to employees' well-being. Furthermore, SA public HEIs should keep in mind that the evaluation of their employee well-being programmes requires rigorous designs that assess the combined effects of their well-being efforts. Employees, therefore, should be involved in the process of evaluating the employee well-being programmes offered by SA public HEIs, and such evaluations should be based on a reliable theoretical framework, and performed regularly.
8.9	Flowing from such evaluations of the effectiveness of their employee well-being programmes (see point 8 above), SA public HEIs, in collaboration with employees, should identify the strengths of their well-being practices, and continue to build on such strengths. Furthermore, SA public HEIs, in collaboration with their employees, should identify the barriers that hinder the efficiency of their employee well-being programmes, and implement effective, tested strategies towards improved employee well-being.
8.10	SA public HEIs should consider creating an employee well-being forum/community of practice where the design, effectiveness and monitoring of their employee well-being programmes are discussed openly to the benefit of SA public HEIs and their employees.
8.11	SA public HEIs should appoint experienced HR Directors/employee well-being overseers/facilitators who are acquainted with evidence-based problem-solving and learning approaches related to employees' well-being.

INFORMATION RELATED TO THE INTEGRATED EMPLOYEE WELL-BEING FRAMEWORK

1. The components and sub-components of this integrated employee well-being framework were specifically developed for SA public HEIs. They were identified based on:
 - (i) the results obtained from an extensive literature review on employee well-being;
 - (ii) a baseline pilot study conducted amongst SA public HEIs;
 - (iii) an extended literature review performed;
 - (iv) document analysis of various well-being programmes (including well-being models, frameworks, strategies, etc.) applied globally, and based on a review of the current well-being programmes of 11 SA public HEIs that participated in an empirical study related to their current employee well-being programmes/practices;
 - (v) the results flowing from the empirical research conducted amongst 11 SA public HEIs; and (vi) the principles of positive psychology theory, well-being theory and flourishing theory, as well as other well-being theories such as appreciative inquiry, authentic happiness theory and hope theory, from which I synthesised an integrated well-being theory.
2. My synthesis of integrated well-being theory entails that optimal human flourishing requires living a well-balanced life, and addressing one's well-being at physical, emotional, social, psychological, financial, spiritual, environmental, intellectual and occupational levels, and in an integrated manner, as applied in and advocated by this integrated well-being framework for SA public HEIs.
3. This integrated well-being framework for SA public HEIs serves as a guideline to assist you to address your employees' well-being holistically by means of an integrated approach. Furthermore, it presents SA public HEIs with seven components, and various sub-components, impacting on employees' well-being, as identified from this research.
4. This framework does not aim to serve as, or replace the actual well-being programmes of SA public HEIs, but will assist you to understand the multiple dimensions/facets of well-being and the interaction among these, in order to

address employees' well-being in a more holistic, integrated and effective manner. It thus serves as a guiding tool towards improving your current well-being programmes/efforts.

5. I trust that this integrated employee well-being framework will create an awareness of all the important facets/components/dimensions of well-being, and that you would be able to utilise it to strengthen your current well-being efforts, towards a flourishing employee component.
6. Should you wish to receive a summary of the outcome of this study, or any further information, you are welcome to contact me at e-mail address lvstraat@cut.ac.za