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The Connection Between Wellness Programs and Employee Job Satisfaction in Higher Education

Donel J. Richemond
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Walden University

College of Management and Technology

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Donel Richemond

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Walden University
2016

Abstract

The Connection Between Wellness Programs and
Employee Job Satisfaction in Higher Education

by

Donel J. Richemond

MBA, Nova Southeastern University, 2009

BS, Florida A & M University, 2003

Doctoral Study Submitted in Partial Fulfillment
of the Requirements for the Degree of
Doctor of Business Administration

Walden University

March 2016

Abstract

Job dissatisfaction is becoming a fundamental concern for employers. Employee engagement makes an organization more productive and can reduce absenteeism. The purpose of this quantitative study was to examine the relationship between employer-sponsored wellness-program participation and job satisfaction among for-profit college and university leaders. Data collection involved an online survey of 400 faculty members' from for-profit universities in the United States contacted using the Job Satisfaction Survey; 103 participants completed the survey. The theoretical framework was the need-satisfaction theory, which includes the factors that promote job satisfaction and job dissatisfaction. The results came from a multiple regression analysis that indicated a significant negative relationship between job satisfaction and participation in the employer-sponsored wellness program ($\beta = -.22, t = -2.24, p = .027$), where faculty who were not participating in the wellness program had higher levels of job satisfaction ($M = 3.62$) in comparison to those who did participate ($M = 3.80$). Interaction analyses indicated a relationship between gender and job satisfaction ($\beta = -.26, t = -2.70, p = .008$). Females were more likely than were males to have higher levels of job satisfaction, as well as years of experience and job satisfaction. Faculty who had been employed for between 11 and 15 years were more likely to have higher levels of job satisfaction. Job satisfaction appear lower for those who participate in employer-sponsored wellness programs because of the personal gratification employees' experience. The findings may contribute to social change with information that leaders could use to reduce absenteeism, increase productivity, and profitability.

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Dedication

I dedicate this doctoral study to God, who is the head of my life; without Him in my life, this journey would not be possible. In addition, I dedicate this work to my beautiful wife, Hortense and my two children, Dheanna and Deion. I also would like to thank my family, especially my mother, Erzilie Richemond, who always provided words of encouragement.

Acknowledgments

I would like to thank the doctoral committee for assistance with this great research study: Chairperson Dr. Charles Needham, Second Committee Chairperson Dr. Robert Miller, URR Dr. Michael Ewald, and Program Director Dr. Freda Turner. Dr. Charles Needham, you are a remarkable mentor, and I could not have asked for a more compassionate and knowledgeable chairperson for a guide throughout this study process. In addition, I would like to acknowledge Dr. Fredrick Nwosu for his mentorship throughout this study and my colleagues Dr. Trenessa Williams. Dr. E M. Ekanayake, Dr. Guthridge Jean Charles, Fred Echoles (Doctoral Student). Hubert Elie, M.Ed. (School Administrator) and Taiwan Huggins (Doctoral Student) for their support and friendship.

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Section 1: Foundation of the Study

Employees are important organizational assets, according to Connolly and Myers (2012). Employees assist organizational leaders in achieving their objectives by performing effectively and efficiently, and helping to implement strategies for outperforming their competition. Employee satisfaction can predict their degree of work performance.

Employee or job satisfaction relates to employees' feelings and perceptions about different aspects of their jobs, such as satisfaction with supervisors (Fadzilar, Anwar, Maslina, & Zaharah, 2012). Employee dissatisfaction with work has associations with psychological and physical well-being (Connolly & Myers, 2012). Dissatisfied employees will often seek ways to avoid work and shirk their responsibilities (Fadzilar et al., 2012).

Organizations that create efficacious wellness programs anticipate that such wellness program can increase employee satisfaction and performance (Kossek, Kalliath, & Kalliath, 2012). Employers' goals are to design a work environment that cultivates a psychosocial climate in the organization that characterized by the opportunity for career growth (DeJoy, Wilson, Vandenberg, McGrath-Higgins, & Griffin-Blake, 2013). Considering that employers adopt wellness programs in order to improve work relationships and to encourage employees to live a healthy lifestyle, more research on the topic of employee wellness is necessary (Field & Johann, 2012).

Background of the Problem

Job satisfaction is becoming a key factor for improving employees' working environments (Connolly & Myers, 2012). Fadzilar et al. (2012) stated that researchers have demonstrated that job satisfaction improves absenteeism and organizational productivity. Ascertaining employee satisfaction is important for the performance of the employees of the organization (Fadzilar et al., 2012). Employee satisfaction creates a more productive workforce in the organization that can reduce absenteeism (Connolly & Myers, 2012).

Wellness programs could improve employees' degree of satisfaction, and thus productivity and other behaviors. The nature of the relationship between the effectiveness of wellness programs and employee satisfaction is unknown. Not all organizational types have researched the relationship between wellness programs and employee satisfaction (Sieberhagen et al., 2011).

Sponsoring a comprehensive wellness program can prove costly (Robert, 2013). Not all employees participate in wellness programs and thus increase operational costs for management, and lessen the chances for effectiveness within the organization (Fadzilar et al., 2012). Wellness programs are gaining popularity among organizations' leaders (Fadzilar et al., 2012).

Problem Statement

The scarcity of wellness programs led to decreased job satisfaction and motivation among workers in many organizations (Spreitzer & Porath, 2012). The scarcity of wellness programs led to decreased job satisfaction and motivation among

workers in many organizations (Spreitzer & Porath, 2012). Workplace dissatisfaction accounts for more than 45% of all disability claims in private and public service organizations, reducing business profits (“EAPs improve employer productivity”; 2012 & Kemp, Kopp, & Kemp, 2013). The general business problem is that the costs of employees’ worksite wellness programs can lead to a financial burden for for-profit organizations (Muya, Katsuyama, Ozaki, & Aoyama, 2014). The specific business problem was that some for-profit college and university leaders have limited information on the relationship between employer-sponsored, wellness-program participation and job satisfaction.

Purpose Statement

The purpose of this quantitative, correlational study was to examine the relationship between participation in employer-sponsored, wellness-programs and the job satisfaction of for-profit college and university leaders. The results could determine the effectiveness of wellness programs among full-time or part-time faculty members’ degree of employee satisfaction. The independent variables are wellness-program participation (WP), gender (GEN), years of teaching experience (YoE), and age (AGE). The dependent variable is job satisfaction.

The population was full-time or part-time college and university faculty members of for-profit, brick-and-mortar universities in the United States. The results of the study could make a social impact by increasing job satisfaction among faculty members. An increase in participation in worksite wellness programs in higher education settings with

a resulting increase in employee satisfaction could influence policymakers to implement more wellness programs in higher educational institutions in the future.

Nature of the Study

The three types of research methods are qualitative, quantitative, and mixed methods. Quantitative methods were appropriate for examining the relationship between participation in a worksite wellness program (IV) and the level of job satisfaction among college and university faculty members (DV). Quantitative research methodology is deductive because a researcher would derive interpretations by considering broad spectra of matter before arriving at specifics (Ostlund et al., 2011). The quantitative methodology is an avenue to provide evidence regarding a given line of inquiry through the testing of hypotheses (Gerrish & Lacey, 2013). Following a set of research objectives, the subsequent activities include drawing objective conclusions, and, in the case of this study, examining the correlation (Ostlund et al., 2011). The quantitative method was sufficient for the purposes of the study because the study purpose is to examine relationships between variables.

A qualitative research method was not appropriate for this study. Qualitative researchers adopt an *interpretivist* perspective, where the researcher elicits an understanding of the phenomenon by discerning meaning from written and spoken words, as well as actions (Horner & Minifie, 2011). Horner and Minifie noted that a qualitative design works best when the researcher is not-seeking to measure quantitative differences or effects. A mixed research method was not appropriate for this study.

The mixed methods approach includes challenges for a research with various types of data and a substantial amount of resources (Cameron, 2012).

A correlational, nonexperimental research design was appropriate for examining the relationships between independent and dependent variables. Nonexperimental designs are useful for examining the nature of an event at the time of the research without administering or controlling treatment, as is common in experimental research designs (Horner & Minifie, 2011). I considered the experimental research design, however manipulating or modifying the condition of the study participants as the experimental design was not feasible for the study. Many nonexperimental designs exist, such as descriptive, relationships, causal-comparative, and survey (Horner & Minifie, 2011). Within the relationships design type, comparative and correlational designs exist. A correlational design was best for achieving the research objective of determining the relationship between variables, wellness-program participation status, covariates, and job satisfaction in the study.

Research Questions

The overarching research question was as follows: What, if any, relationships exist between the (a) wellness program f full-time or part-time faculty participation status (WP), (b) gender (GEN), (c) years of teaching experience (YoE), (d) age (AGE), (e) job satisfaction.

The following sub research questions (SRQs) are also relevant for addressing the study's purpose:

SRQ 1. What, if any, relationship is there between employer-sponsored wellness program participation and job satisfaction?

SRQ 2. What, if any, relationship is there among employer-sponsored wellness program participation, gender, and job satisfaction?

SRQ 3. What, if any, relationship is there among employer-sponsored wellness program participation, age, and job satisfaction?

SRQ 4. What, if any, relationship is there among employer-sponsored wellness program participation, years of job experience, and job satisfaction?

Hypotheses

H1₀: There is no relationship between employer-sponsored wellness program participation and job satisfaction.

H1_a: There is a relationship is there between the wellness program participation, and job satisfaction.

H2₀: There is no relationship between the wellness program participation, gender, and job satisfaction.

H2_a: There is a relationship between the wellness program participation, gender, and job satisfaction.

H3₀: There is no relationship between the wellness program participation, years of experience at the job, and job satisfaction.

H3_a: There is a relationship between the wellness program participation, years of experience at the job, and job satisfaction.

H4₀: There is no relationship between the wellness program participation, age, and job satisfaction.

H4_a: There is a relationship between the wellness program participation, age, and job satisfaction.

Theoretical Framework

Salancik and Pfeffer (1977) developed a need-satisfaction model of job characteristics, needs, attitudes, and behaviors to explain the relationship between job satisfaction and job motivation. The theory based on the premise that leaders inspire followers to change their expectations, perceptions, and motivations to work toward common goals. Salancik and Pfeffer identified the following variables for predicting the values for the construct, job satisfaction, as measured by the instrument: (a) wellness-program participation (WP), (b) gender (GEN), (c) years of teaching experience (YoE), and (d) age (*AGE*). Applying their job satisfaction model to the current study, I would expect the dependent variables measured by the job satisfaction survey (JSS) to influence or explain employee job satisfaction because understanding factors such as human needs is critical to the implementation of employee satisfaction programs (Golnaz & Clarke, 2011).

Golnaz and Clarke (2011) described the relationship between motivation and satisfaction, positing that workers require a range of motivators to remain engaged in their work. Employers are in a continuing struggle to satisfy their employees' evolving needs, not only through extrinsic and financial means, but also through intrinsic and psychological means (Golnaz & Clarke, 2011). Golnaz and Clarke (2011) explained how

company leaders try to balance monetary (extrinsic) and nonmonetary (intrinsic) incentives. Leaders of many organizations use diverse motivators ranging from competitive monetary compensation and health insurance packages (Golnaz & Clarke, 2011). Some company leaders use concierge services and designated nap times to motivate employees (Golnaz & Clarke, 2011).

Operational Definitions

Healthcare system. Healthcare system is an interconnection or interrelatedness among different departments related to the provision of health care, including people, resources, and institutions related to health services (Kossek et al., 2012).

Job satisfaction. Job satisfaction is a composite term used to describe employees' positive feelings toward their jobs (Fadzilar et al., 2012).

Motivation. Motivation is the product of a wide range of psychological processes that can lead an individual toward a goal, and cause a person to keep striving for its achievement (Golnaz & Clarke, 2011).

Profitability. Profitability is the result of employee productivity, in terms of performance, and the benefits and gains that organizations derive from such productivity (Muya, Katsuyama, Ozaki, & Aoyama, 2014).

Relationship. The correlation between variables is a representation in form of a relationship (Connolly & Myers, 2012).

Wellness programs. Wellness programs constitute services that organizations sponsor or provide to employees within the workplace or off-site (Kortum et al., 2011).

Assumptions, Limitations, and Delimitations

Assumptions

This study had four assumptions: (a) participants would answer survey questions honestly; (b) participants represent the category that qualifies them to participate. The other assumptions were (a) wellness programs have similar characteristics among higher educational institutions, even if different individuals design the programs; (b) university leaders would give every wellness program subscriber, among the faculty, the opportunity to maximize their experience.

Limitations

This study had four limitations: (a) the sampling process of the current study. (b) Some faculty members do not actively participate in worksite wellness activities. No possibility exists for determining which faculty member is more appropriate than others to participate in worksite wellness activities. (d) Some faculty members who participate in worksite wellness activities could present the benefits of the program with less enthusiasm than the program deserves. Other faculty members might exaggerate the benefits. The results of the study would demonstrate the cause and effect relationships between variables.

Delimitations

The design of the study did not include faculty members with 21 or more years of service from the universities, nor military service veterans. The reason for excluding senior faculty was that they were likely preparing for retirement and might not perceive satisfaction in the same way as current employees. The reason for the exclusion of

military service veterans is the same: they are likely preparing for retirement and may not perceive satisfaction in the same way as current employees.

Significance of the Study

Contribution to Business Practice

The results of study may contain benefits for business performance because leaders seek to achieve similar objectives (a) educating members of society, (b) providing free tertiary education, and (c) earning profits to the benefit of shareholders (Jiang, Lepak, Hu, & Baer, 2012). As the business process of a learning institution improves, the economy grows (Jiang et al., 2012). Growth translates into increased funds for traditional or land grant universities. Shareholder dividends or owners' equity in their organizational balance sheets may arise from such growth. The success of a university leadership whose wellness program contributes to faculty retention and increased quality of teaching practices will attract businesses leaders of their local community (Sieberhagen et al., 2011). Such business leaders could decide to send their officers to learn from such an institution. A satisfied faculty may perform more effectively, leading to more profits for the for-profit brick-and-mortar institutions of higher education. Such institutional success could lead to a profitable business climate for the communities in which the universities operate and for society in general.

Implications for Social Change

The results of the study may reveal the extent and nature of the relationships between educational institutions' employee wellness programs and employee job satisfaction. With the revelations of the study, leadership in different organizations might

obtain information to consider whether organization-sponsored wellness programs are appropriate for the development and well-being of their human assets. Managers in different organizations may budget objectively for socially oriented programs.

Not all colleges and universities have optimal levels of organizational outcomes in terms of retention of educators, administrators, and student outcomes. Job satisfaction is a predictor of employee outcomes and involves factors relating to higher morale, productivity, and effective retention. As such, job satisfaction could likely lead to greater student outcomes regarding such issues as retention and academic achievement.

If an association between participation in a worksite wellness program and job satisfaction exists, then other leaders of higher education institutions might choose to implement such worksite wellness programs (Jiang et al., 2012). The implications for social change are to provide new information that could help the organizational outcomes on employee job satisfaction and worksite wellness programs. Employee job satisfaction that reveals a correlation with effective teaching may result in positive student outcomes. University leaders may witness consequences of committed faculty, positive contribution to higher learning, and improvements in the health and overall wellbeing of the population served (Jiang et al., 2012).

A Review of the Professional and Academic Literature

Literature Review Strategy

The purpose of this study was to examine the relationship between participation in employer-sponsored wellness programs and job satisfaction in for-profit college and

university settings. The results could reveal the effectiveness of employee satisfaction and wellness programs among full-time or part-time faculty.

I conducted a systematic review of the current research literature, that is, I perused and critically reviewed electronic peer-reviewed and non peer-reviewed journal articles accessed through the following EBSCO databases: Academic Search Premier, MasterFILE Premier, Business Source Premier, PsycINFO, and PsycARTICLES. The following search terms were used individually or in various combinations; *employees, job satisfaction, health, mental, physical, psychological, psychosocial, health programs, health promotion, wellness, wellness programs, stress, stress management, and human resources, employee assistance programs (EAPs), organizations, organizational climate, business, performance, productivity, motivation, absenteeism, presenteeism, turnover, incentives, participation, involvement, empowerment, social support, benefits, profitability, and return on investment (ROI).*

Publications explored during the review included government publications, peer-reviewed and non-peer-reviewed articles, and books. The research focused on peer-reviewed articles and articles are less than 5 years old. Table 1 offers a summary of publications.

Table 1

Synopsis of Sources in the Literature Review

Publications	Published within 5 years of expected graduation date	Older than 5 years	Percentage of overall sources
Books	0	2	0.015
Dissertations	1	0	0.010
Peer-reviewed articles	122	12	88
Other references	7	10	10
Total	130	32	
Total percentage	87	13	

Theoretical Framework

The theory used to guide this study was one put forth by Salancik and Pfeffer (1977), and later expanded on by Golnaz and Clarke (2011). The two researchers significantly contributed toward the understanding of the number of factors deemed important to employee satisfaction. Golnaz and Clarke (2011) asserted that motivation is the product of a wide range of psychological processes that lead an individual toward a goal and would cause the person to keep fighting for the goal. Golnaz and Clarke (2011) described the relationship between motivation and satisfaction, arguing that workers need a range of motivators in order to remain engaged in their areas. Virtually all employers are in a constant struggle to satisfy their employees, not only through extrinsic and financial means, but also through intrinsic and psychological means (Golnaz & Clarke, 2011).

Salancik and Pfeffer (1977) developed a need-satisfaction model of jobs, needs, attitudes, and behavior. The need-satisfaction model included an explanation for leaders

so that they could understand job satisfaction and occasionally job motivation based on the premise that leaders are able to inspire followers to change expectations, perceptions, and motivations to work toward common goals. These researchers identified the following key constructs underlying the theory (a) wellness-program participation (WP), (b) gender (GEN), (c) years of teaching experience (YoE), and (d) age (AGE).

Motivation is a key element in employee satisfaction. Citing the incentive model of motivation, individuals become encouraged to do something because of a reward system, which may be monetary, or nonmonetary (Salancik & Pfeffer, 1977).

Organization-sponsored employee wellness programs act to motivate employees to be more productive in an organization. Salancik and Pfeffer (1977) explained the intrinsic model of an incentive as people naturally programmed to act in a certain manner.

Nevertheless, the use of an incentive may magnify the intrinsic need to act in a particular manner.

Employee health as well as development and psychosocial well-being relate to organizational performance and productivity (Golnaz & Clarke, 2011). In applying Maslow's theory of human motivation to this study, the issue of human productivity required an understanding of the role of Frederick W. Taylor's scientific management theory in human productivity. The theory includes the perspective of nature and quality of productivity often, arising from the motivation level an employee based on Abraham Maslow's needs hierarchy (Maguad, 2011).

Maslow's hierarchy of needs theory. The hierarchy of needs is part of Taylor's legacy in that, for at least half of the 20th century, extrinsic rewards perceived as the way

to motivate employees (Maslow, 1943). Originally developed in the 1950s, classic theory includes the powerful role of intrinsic motivation (Maslow, 1943). Maslow's theory has included numerous theoretical and empirical explorations of motivation (Crum, Salovey, & Achor, 2011). The issue of whether Maslow intended his hierarchy of needs to serve as a model or whether he only meant to explain and clarify human motivation has been a subject of much dispute (Maslow, 1943). In response to critics of the hierarchical structure, Maslow acknowledged that human needs do not necessarily unfold in a rigid, linear fashion. The pyramidal design is actually one of the attractions for researchers who have chosen Maslow's theory as a theoretical framework.

Physiological needs, the essential needs for survival, are at the lowest level of the hierarchy (Maslow, 1943). After meeting these needs, the person advances to the next level of safety and security. Freedom from stress and anxiety probably fall under physiological needs. As the literature reviewed for this chapter illustrates, stress is ubiquitous in modern society. The concept of stress falls along a continuum that implies the necessity to understand that individual perceptions vary regarding acceptable levels of stress (Crum et al., 2011). Stress appraisal is central to Lazarus et al., (2012) transactional theory of stress and coping, and Lazarus (2013) emphasized the dynamic and individual nature of stress perceptions in describing occupational stress and its personal and organizational ramifications.

The eradication of workplace stress cannot occur by organizations, and even if possible, doing so would not prove desirable. Individuals differ tremendously in their perceptions of stress; and conditions that reduce stress for some employees may intensify

it for others (Lazarus, 2013). Despite the negative connotation attached to the word *stress*, it can also be enhancing and motivational (Crum et al., 2011). Creating an empowering workplace decreases stress and burnout and boosts performance and job satisfaction (Spreitzer & Porath, 2012). Financial concerns are a major source of stress for many employees, and financial counseling and education can prove effective in addressing this source of stress and improving performance and productivity (Kemp, et al., 2013).

The need for social and belongingness occupy the third level of the hierarchy (Maslow, 1943). Collaborative workplace relationships are equally pertinent to the next level of the hierarchy fulfilling the desires to feel confident, self-assured, competent, and respected. The next level of hierarchy consists of ego, status, and self-esteem needs. A healthy work organization addresses all of these needs (DeJoy et al., 2013).

The final human need in Maslow's (1970) hierarchy is the need for self-actualization. Maslow was aware that even when human beings meet all the lower needs, human beings often feel discontented. The need for self-actualization arises from the desire to fulfill one's potential to the utmost (Maslow, 1943). Spreitzer and Porath (2012) used the term *thriving* to refer to a workforce when workers experience satisfaction, productiveness, and engagement in creating the future for the company and stakeholders. Thriving employees are highly energized and adept at avoiding burnout.

Two key qualities or characteristics of thriving employees are vitality and learning (Spreitzer & Porath, 2012). Employees who possess vitality energize others around them with their commitment and passion. Learning includes the growth one

attains by acquiring new knowledge and skills. Training new knowledge and skills was the focus of a research study that relied on Maslow's theory to frame their case that technology and training were key factors in maintaining a motivated and dedicated healthcare workforce (Crum, Salovey, & Achor, 2011).

Some perspectives of technology hold the promise of fulfilling self-actualization needs to an unprecedented degree (Van Ruysseveldt, Verboon, & Smulders, 2011).

Training is the pivotal factor in exploiting the tremendous potential of new technologies for personal and organizational growth. Even apart from technology, providing employees with learning opportunities that foster personal growth can decrease burnout and benefit both the employee and the organization (Van Ruysseveldt et al., 2011).

Management using technology provides an effective way for delivering educational programs ranging from management training to psycho-educational interventions (EAPs, 2012; Luthans, Avey, Avolio, & Peterson, 2013; Wolever, Bobinet, McCabe, Mackenzie, Fekete, Kusnick, & Baime, 2012). Social media includes a forum for online communities where employees share information on topics related to health, medical decisions, and wellness (Benza, 2012).

The fulfillment of each of the needs, in particular self-actualization, varies substantially from one individual to the next (Maslow, 1943). Maslow's hierarchy is usually construed to mean that needs on lower levels of the hierarchy must be met before one aspires to meet the needs of the next level. Individual differences, however, influence how people value the different levels of needs (Maslow, 1943). For example, some people have greater need for self-esteem than for love and belonging. For some

creative individuals, the need for self-actualization takes precedence over all of the lower needs. In climates of economic uncertainty, the lower level needs represent a major source of stress for many employees (Kemp, Kopp, & Kemp, 2013). Scholars could argue that stress undermines the quest for self-actualization. Uncertain satisfaction of lower level needs often contributes to the stress by exerting a negative impact on work performance. Stress may also intensify needs for esteem and belonging.

An Indian Human Resource Management theorist, Mahesh, created a model combining Maslow's hierarchy with principles from Hindu philosophy (2013). The highest needs levels of his East-West model are *aharya* (self-esteem) and *sahaja* (self-actualization). The theorist added that an individual achieves quality of performance based on intrinsic motivation for self-actualization through achievement of mastery and self-esteem in the chosen field of endeavor. From this perspective, which exemplifies excellent HRM practice, an individual's personal and professional growth and organizational performance intertwine.

Organizational decision makers cannot entirely eradicate workplace stress, and even if they could, doing so would not prove desirable. Individuals differ tremendously in their perceptions of stress; and conditions that reduce stress for some employees may intensify it for others (Lazarus, 2013). Despite the negative connotation attached to the word *stress*, it can also be enhancing and motivational (Crum, Salovey, & Achor, 2011). Creating an empowering workplace decreases stress and burnout and boosts performance and job satisfaction (Spreitzer & Porath, 2012). Financial concerns are a major source of stress for many employees, and financial counseling and education can prove effective in

addressing this source of stress and improving performance and productivity (Kemp, Kopp, & Kemp, 2013).

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The final, uniquely human need in Maslow's (1970) hierarchy is the need for self-actualization. Maslow was aware that even when human beings meet all the lower needs, human beings often feel discontented. The need for self-actualization arises from the desire to fulfill one's potential to the utmost (Maslow, 1943). Spreitzer and Porath (2012) described the term *thriving* to refer to a workforce where workers experience satisfaction, productiveness, and engage in creating the future for the company and its stakeholders. Thriving employees are energized and adept at avoiding burnout.

Two key qualities characteristic of thriving employees are vitality and learning (Spreitzer & Porath, 2012). Employees who possess vitality energize others around them with their commitment and passion. Learning refers to the growth one attains by acquiring new knowledge and skills. Providing knowledge and training new skills was the focus of a research study that relied on Maslow's theory to frame their case that technology and training were key factors in maintaining a motivated and dedicated healthcare workforce (Benson & Dundis, 2012). Although healthcare, an industry

undergoing massive upheaval was the primary focus, Benson and Dundis (2012) recognized that similar changes are occurring across industry sectors.

Some perspectives of technology hold the promise of fulfilling self-actualization needs to an unprecedented degree (Benson & Dundis, 2003). Training is the pivotal factor in exploiting the tremendous potential of new technologies for personal and organizational growth. Even apart from technology, providing employees with learning opportunities that foster personal growth can decrease burnout and benefit both the employee and the organization (Van Ruysseveldt et al., 2011). Management, through technology, provides an effective way for delivering educational programs ranging from management training to stress management and psycho-educational interventions (EAPs, 2012; Luthans et al., 2013; Wolever et al., 2012). Social media include a forum for online communities where employees share information on topics related to health, medical decisions, and wellness (Benza, 2012).

The fulfillment of each of the needs, in particular self-actualization, would vary substantially from one individual to the next (Maslow, 1943). Maslow's hierarchy is usually construed to indicate that needs on lower levels of the hierarchy must be met before one aspires to meet the needs of the next level. Individual differences were clear in how people valued the different levels of needs. For example, some people have greater need for self-esteem than for love and belonging. For some creative individuals, the need for self-actualization takes precedence over all of the lower needs. In climates of economic uncertainty, the lower level needs represent a major source of stress for many employees (Kemp, Kopp, & Kemp, 2013). Scholars could argue that stress undermines

the quest for self-actualization. Uncertain satisfaction of lower level needs often contributes to the stress by exerting a negative impact on work performance. Stress may also intensify needs for esteem and belonging (Maslow, 1943; Kemp, Kopp, & Kemp, 2013).

An Indian HRM theorist created a model combining Maslow's hierarchy with principles from Hindu philosophy. The highest need levels of his East-West model are *aharya* (self-esteem) and *sahaja* (self-actualization) (Mahesh, 2013). The theorist added that an individual achieves quality of performance based on intrinsic motivation for self-actualization through achievement of mastery and self-esteem in the chosen field of endeavor. From this perspective, which exemplifies excellent HRM practice, an individual's personal and professional growth and organizational performance intertwine (Mahesh, 2013)

Published in 2000, *The Maslow Business Reader* is a collection of articles on employee motivation in the business and organizational environment by Maslow and a number of authors in the management field (Benson & Dundis, 2003). The basic needs level involves satisfaction with pay. Beyond the economic need for remuneration that satisfies basic survival needs, Maslow proposed that employees receiving fair compensation would not devote time to contemplate their salaries, whereas individuals whose compensation appeared unfair could spend-time ruminating over the inequity to the detriment of their work (Kemp, Kopp, & Kemp, 2013).

Alternatives to the Theoretical Framework

Taylor's theory of scientific management. Frederick Taylor's theory of scientific management laid the groundwork for successful work organizations (Maguad, 2011; Taylor, 1911). To some theorists, Taylor's work was a forerunner of the quality improvement movements of the late 20th century. As Maguad observed, Taylor's system overlooked two key tissues (a) human relations, and (b) product quality, now recognized as essential elements of organizational success. At the end of his life, Frederick Taylor came to realize that human motivation surpassed product engineering as the crucial factor in improving productivity. Taylor moved toward more of a systems perspective for managing productivity, reflecting a paradigm shift from his original focus on individual parts. Had Taylor lived, the scholar could have been in the vanguard of the modern quality improvement movement (Maguad, 2011). Taylor's theory of scientific management led the way for subsequent theories of organizational management. The neglect of the human element in scientific management leads to the creation of unhealthy work organizations (DeJoy et al., 2013).

Efficiency is the overarching goal of scientific management. A climate for service, and productivity among 14,000 employees of a large financial services firm, researchers discovered an inverse relationship between creating a climate for efficiency and work satisfaction (Maguad, 2011). An inverse connection between creating a climate for service and productivity exist. The results of the study should satisfy both Taylor's supporters and critics. At the individual level, work satisfaction typically links with higher performance (Maguad, 2011). Contrasting findings underscore the complexity of

understanding the factors that influence employees' performance, motivation, and their relationship to organizational productivity.

Alderfer's ERG theory. Alderfer's ERG theory stems from Maslow's hierarchy of needs, but it is not organized in the same fashion, as no assumption exists that a lower need must remain satisfied before focusing on a hierarchical need (Chiu & Lin, 2012). The acronym ERG stands for three classifications of needs: *existence*, *relatedness*, and *growth*. Existence needs essentially correspond to Maslow's (1970) physiological and safety needs. Relatedness needs encompass Maslow's needs of belongingness and self-esteem of others, and reflects the human desire for interpersonal relationships (Chiu & Lin, 2004). Growth needs synthesize the human needs for self-esteem and self-actualization. Service quality and internal customer needs warranted further studies in which other researchers cited both Maslow's and Alderfer's theories in the theoretical framework for their studies (Maslow, 1943). Alderfer's theory stemmed from Maslow's needs hierarchy that is one of the most respected and widely used theories of motivation.

Measuring Job Satisfaction

Adiele and Abraham (2013) indicated that the concept of job satisfaction with the establishment of different measures indicating employees' satisfaction. Job satisfaction includes people's perceptions about the workplace environment and psychological as well as physical needs that satisfy employees (Adiele & Abraham, 2013). Diverse studies, experiments, and concepts included insights into job satisfaction. Understanding ways of measuring job satisfaction is imperative. An exploration of the correlation

between employee wellness programs and job satisfaction in higher education would require understanding (Adiele & Abraham, 2013).

Adiele and Abraham (2013) developed tools that can help to evaluate the degree of happiness or dissatisfaction among employees in different workplaces. Certain tools of measuring job satisfaction are preferable over others, although job satisfaction measurement may extend as far as employers' resources, knowledge, and imagination warrant (Muya et al., 2014). Adiele and Abraham indicated the use diverse methods to determine the degrees of job contentment. Job Descriptive Index (JDI) is one of the tools. Another tool is the Measure of Job Satisfaction (MJS). Business leaders use the Job in General Scale (JIG). Employers use the Minnesota Survey Questionnaire (MSQ) and the Job Satisfaction Survey (JSS). Diverse corporate leaders and researchers use the Andrew and Whitney Job Satisfaction Questionnaire, among others (Muya et al., 2014).

The JDI is one of the most used jobs satisfaction questionnaires (Smith, Kendall, & Hulin, 1969). The questionnaire includes the measures of job satisfaction using five factors, pay, promotional opportunities, coworkers, supervision, and regular work. Researchers have employed the JDI instrument to carry out studies on job satisfaction among employees in different disciplines, including higher education (McIntyre & McIntyre, 2010a; Smith, Kendall, & Hulin, 1969). Scholars have used the Job Descriptive Index instrument in diverse research studies relating to job satisfaction (McIntyre & McIntyre, 2010b).

The JIG is another popular instrument for measuring job satisfaction (Smith et al. 1969). The tool initially pertained to the participant's considerations of job satisfaction

based on generalized opinions or overall terms. The JIG was an enhancement to the JDI instrument. The JIG instrument included overall satisfaction rather than individual facets of job satisfaction, which constitutes the focus of JDI (Smith et al., 1969).

The MSQ instrument also measures content as well as context components of job contentment (Adiele & Abraham, 2013). Management can use MSQ to evaluate job contentment because of different aspects of work as well as work environment. The instrument is versatile because it includes both long- and short-form surveys.

The MJS is a multidimensional instrument for measuring job satisfaction. MJS includes 38 items and stem queries, that is, *how content are you with this feature of your profession?* In the instrument, participants indicate their level of job contentment based on a five-point Likert scale. The scale usually ranges from *extremely satisfied* to *extremely dissatisfied*, and includes a nonaligned response choice (Dhammika, Ahmad, & Sam, 2012). Based on the features of the instruments, the JSS appears appropriate instrument for the study.

Historical Perspective

The World Health Organization's personnel (1988) defined health as an all-round human condition. An individual is healthy when he or she has full physical, mental, and social well-being, rather than just a lack of sickness in the body (WHO, 1948). Building on the holistic concept of human health and well-being, members of the World Health Organization's issued a definition of mental health as a physically fit state in which individuals realize their personal potentials, cope with the normal stresses of life, work productively and fruitfully, and make contributions to the community (WHO, 2014). The

definition of health embedded in the WHO's constitution includes the essential importance of positive mental health.

An extension of the model of health and well-being is the concept of the *healthy work organizations*. Scholars described the model as an organization that systematically strives to optimize employee well-being and productivity through work design process (DeJoy et al., 2013). The model includes a supportive psychosocial organizational climate, with equitable opportunities for career development and advancement and positive work-life balance (DeJoy et al., 2013). The results of a healthy work organization should enable employees to realize their full potential in accordance with the doctrine of mental health and Maslow's (1970) hierarchy of human needs (WHO, 2014).

Most work organizations fall somewhere along a continuum from healthy to unhealthy (Wilson et al., 2013). Occupational stress is endemic (Benza, 2012). The number of workers calling in sick because of stress tripled from 1997 to 2001 (Siegrist, 2010). More people are aware of wellness than ever before. The management from American Institute of Stress (2010) claimed that stress is factor in up to 80% of all work-related injuries and 40% of job turnover. A growing number of scholars have linked effort-reward imbalance, characterizing a psychosocial work environment where the mental and emotional demands of the job exceed the rewards enjoyed by employees, with cardiovascular disease (Benza, 2012). A stress-provoking, inequitable work environment is the antithesis of a healthy work organization (DeJoy et al., 2013).

The leaders of the U.S. Department of Health and Human Services (DeJoy et al., 2013) have examined the health of U. S. employees. For every 100 employees, employers

can anticipate encountering 25 employees with cardiovascular disease (WHO, 2014). Hypertension will affect 26 employees. High cholesterol will affect 30 employees (WHO, 2014). Obesity will affect 38 employees. Twenty-four employees will have sedentary lifestyle. Asthma will affect 12 employees and six employees will suffer from diabetes (Benza, 2012). Organizations will have 21 employees who smoke, 31 who drink alcohol excessively, 20 who do not wear seatbelts, and 44 who suffer from stress. (The figures do not include depression, the most prevalent mental health disorder, and a cause of substantial impairment in functioning among working adults. These findings mean that organizations without recreational programs such as wellness activities may witness dwindling performance on the part of officers (Benza, 2012). In the context of universities, faculty members enjoying wellness programs may constitute effective resources for the universities to achieve set objectives. The findings alluded to employees resorting to behaviors such as drinking, smoking, and other habits because of the absence of other avenues to diminish stress-related elements from the job. The findings support introduction and maintenance of wellness programs for faculty.

Depression constitutes an indirect cost for employers, both in terms of health care expenses and lost productivity (Benza, 2012). Health care costs associated with the conditions in the HHS increased by 6 to 12% annually (Benza, 2012). The percentage represented the total costs of medical care, medication, and health-related losses. The losses arising from of productivity reached \$13,000 a year for each employee (Benza, 2012). Productivity losses resulting from health conditions are even higher when the conditions are comorbid with psychological distress (Holden et al., 2011). The

productivity losses revealed increases health conditions, notably hypertension and high cholesterol for absenteeism and hypertension and back or neck pain for presenteeism. A similar effect exists for diabetes, though it did not reach statistical significance.

The findings reveal organizations are losing on diverse sectors of their businesses. Employee mental, physical, and psychological health constitutes major parts of the backbone for the organizations (Holden et al., (2011). The findings support organizations' entrenchment of assistance programs to eliminate or drastically reduce the occurrence of associated health risks. In the context of universities, faculty members enjoying wellbeing programs do not run any health risks associated with h productivity losses.

Foundation and Development of Job Satisfaction

Grachev and Rakitsky (2013) have conducted studies to develop experiments and theories to understand job satisfaction in various workplaces. Some of the studies through which business theorist have developed theories concerning job satisfaction include Maslow's hierarchy of needs, the Hawthorne study, and scientific management or Taylorism. Taylorism relates to the impending study because of the labor efficiency element it contains. Scholars have demonstrated the significance of such theories to job satisfaction (Grachev & Rakitsky, 2013). Different theories and experiments include insights on ways of ensuring job contentment.

One of the analyses related to job contentment is scientific management or Taylorism, which Taylor (1911) developed. An organizational management style is ensuring that workplace productivity by seeking to improve economic efficiency of labor

in workplaces. In the experiment, Taylor considered management as a science encompassing different interrelated aspects that can enhance employees' productivity. The main concept behind Taylor's study was to use rewards and incentives to motivate employees in becoming more productive on the job (Taylor, 1911).

The scientific management concept received criticism based on the notion that psychological efficiency experts should work together to make work more productive and satisfying. A reasonable performance level for each task and a commensurate pay scale may result in greater rewards for performance and include some advantage to extrinsic needs related to job satisfaction (Grachev & Rakitsky, 2013). Taylor developed satisfaction and the concept aligned with Herzberg's (1987) theory. The concept of pay-for-performance is a motivation factor in the workplace (Herzberg, 1987).

The landmark Hawthorne experiment laid an outstanding foundation for studies in the research field of job satisfaction and motivation (Levitt & List, 2011). Organizational decision makers gained an understanding of the concept of focusing on people as well as cultural variables. The Hawthorne study caused the modification of different aspects of employees' physical environment (Levitt & List, 2011).

The objective of the Hawthorne study was to examine ways in which physical working conditions influenced productivity (Levitt & List, 2011). Levitt and List (2011) indicated the researchers brightened and dimmed the lighting in the work area to determine the effects of the variations of work environment on employees' productivity. The experiment indicated varying levels of productivity depending on the work environment. Levitt and List (2011) concluded that changes in physical conditions did

not influence worker productivity; rather, an observer paid close attention to the workers, thereby causing increased productivity. Motivation theory or the hierarchy of needs also created a foundation for job satisfaction. The theory has a direct relationship with job satisfaction, although motivation-based (Adiele & Abraham, 2013). A deficiency of basic needs results in a decrease in an individual's motivation to move up the hierarchy for greater needs. The hierarchy of needs constitutes five echelons of needs (a) physiological, (b) safety, (c) esteem, (d) belongingness and love, and (e) self-actualization (Maslow, 1943; Levitt & List, 2011).

Meeting lower level needs before pursuing higher-level needs is necessary. Physiological needs, including food, air, and water, would represent the lowest level in the hierarchy (Adiele & Abraham, 2013). An individual would consequently not seek the next hierarchical level, safety needs, until he or she has had the physiological needs met. Individuals higher up on the hierarchy also experience-enhanced job satisfaction. The highest need of individuals, self-actualization, is rarely met (Levitt & List, 2011).

Job Satisfaction Studies in Higher Education

A research study on job satisfaction in higher education contained a consideration of institutional, work, and individual determinants of faculty at a university (Klassen & Chiu, 2012). The research-revealed that faculty members have a high level of satisfaction when they perceive that other employees respect their work. Job satisfaction also had connection with members' perception about their compensation. Women were less satisfied, although the tenured reported higher satisfaction. Bozeman and Gaughan (2011) discovered that affiliations to university and industry centers did not predict job

satisfaction. In a research study focusing on teacher job satisfaction in higher education, 1,430 teachers participated and responded to a questionnaire (Klassen & Chiu, 2012). Participant responses indicated certain differences in multiple factors. The factors included *work gender relations, teachers' characteristics, self-efficacy, job stress, and job satisfaction experience*.

The study of *presenteeism* is a recent phenomenon (Schultz, Chen, & Edington, 2013). Absenteeism was the primary measure of lost productivity. Presenteeism is the problem of employees physically present, but are functionally absent at work. Physical or psychological health conditions are responsible for such low functionality (Schultz et al., 2013). Organizational decision makers have recognized presenteeism as a threat to organizational performance and productivity. Presenteeism diminishes individual productivity by at least one-third. Unlike absenteeism, which might appear obvious, presenteeism can go unnoticed and creates a negative impact (Schultz et al., 2013). Estimating the cost of presenteeism is complicated, but researchers have been examining the cost and impact of presenteeism on organizational productivity. Activities in the study will include exploring the relationship between presenteeism, job satisfaction, and wellness programs.

Considering the escalating costs related to health conditions, increasing numbers of organizational leaders are investing in health promotion and wellness programs. The Willis North America Health and Productivity Survey (2011) revealed that more than 60% of the 1,598 organizations surveyed had some type of a wellness program. Exit interviews conducted by Nelnet revealed employees leaving organizations saying they

would mostly miss the wellness program (Willis North America, 2011). Data from organizations that have evaluated their wellness programs show Return on Investment. Many businesses incidentally do not evaluate ROI. The main reason cited is inadequate resources. Additional reasons include confusion on how to measure outcomes and the belief that ROI is not measurable or that measuring ROI is not worth the effort and cost (Willis North America, 2011).

Cost is an obstacle to establishing a company wellness program (Willis North America, 2011). The costs arising from an unhealthy workforce raise the question of whether businesses can afford not to have some type of health promotion or wellness program. A holistic perspective of health and the concept of a healthy work organization lead to programs promoting employee health and productivity. These programs occupy a broad spectrum including work redesign and empowerment strategies; training and development opportunities; employee assistance programs (EAPs); and wellness, health promotion, and stress management programs (WHO, 2014). Green buildings, designed to improve indoor environmental quality, boost productivity and reduce absenteeism and presenteeism related to asthma, respiratory allergies, stress, and depression (Willis North America, 2011). Numerous strategies exist that business leaders can apply to improve employees' physical and psychosocial health and, by extension, organizational health and productivity.

Stress management programs fall into categories such as primary, secondary, and tertiary prevention and intervention (EAPs, 2012; Kemp, Kopp, & Kemp, 2013).

Programs designed to alleviate stress fall under the heading of primary prevention and

include organizational strategies such as job redesign, employee engagement and empowerment programs, and coworker support groups. Stress management programs or interventions are usually associated with secondary prevention programs, which are programmatic creations for decreasing the severity of stress symptoms before they have a negative impact on physical or psychological health (EAPs, 2012; Kemp, Kopp, & Kemp, 2013).

Employee Assistance Programs (EAP) is tertiary programs because leaders use them for employees with confidential counseling and therapy (EAPs, 2012; & Kemp, Kopp, & Kemp, 2013). Management provide employee assistance programs more aligned with primary and secondary prevention such as helping workers find childcare, accountants, and wedding planners. Some offer financial counselling, management training, and educational seminars. Given the association with mental health problems, some kind of stigma attaches to seeking services from EAPs. Human resource (HR) professionals are working to change the image of EAPs to encourage more employees to make use of this valuable resource (EAPs, 2012; Kemp, Kopp, & Kemp, 2013).

Healthy Work and Organizational Review

The concept of *healthy work organization* drew the attention of researchers who defined it as an organization with accessible and equitable opportunities for career growth and improvement of work-life (DeJoy et al., 2013). Healthy work organizations can include a supportive social-organizational environment and offer meaningful and well-designed jobs (DeJoy et al., 2013). Organizational arrangements include health-related programs that constitute part of well-designed jobs.

The healthy work organization became a theoretical model synthesizing core elements that researchers viewed as essential (DeJoy et al., 2013). The model contained diverse elements. *Organizational climate*, emphasizing the social and interpersonal facets of the work environment, encompasses *organizational support*, *co-worker support*, *involvement and participation*, *communication*, and *health and safety climate*. Job design captures employees' subjective perceptions of their work activities. The design includes *workload*, *autonomy*, *control*, *job content*, *role clarity*, *environmental conditions*, and *work schedule*. Job future need to emphasize job security, equity, career development, encompasses *job security*, *pay and promotion equity*, *learning opportunities*, and *flexible work arrangements*. A healthy work organization includes *core organizational attributes*, *psychological work adjustment*, and *employee health and well-being* (DeJoy et al., 2013).

The study includes a sample of 1,130 employees recruited from nine stores of a large retailer (DeJoy et al., 2013). A questionnaire consisting of 194 items and reflecting 29 first-order constructs underwent an initial content validation by a panel of three experts from the National Institute of Occupational Safety and Health. Exploratory factor analyses and confirmatory factor analyses followed. The major dimensions of the questionnaire were organizational attributes, organizational climate, job design, job future, psychological work adjustment, and employee health and well-being (Spreitzer & Porath, 2012).

The analysis includes compelling evidence that works attributes influenced employees' psychological work adjustment, which in turn affected their personal health and well-being (DeJoy et al., 2013). Numerous studies are reporting a link between

specific work characteristics and various aspects of health and well-being (DeJoy et al., 2013). No prior study includes a comprehensive model with the capacity to explain the complex interrelationships among the various factors (Spreitzer & Porath, 2012).

The results of the model-revealed a good fit, with significant links among the array of variables examined. Through the findings, Spreitzer and Porath (2012) highlighted the pivotal role of organizational climate in organizational effective. The organizational climate factors relate to providing employees with social support. Participation and interaction with colleagues and supervisors or others in the work environment constitute direct support (Spreitzer & Porath, 2012; Willis North America, 2011). Indirect support occurs through creating a supportive atmosphere.

DeJoy et al. (2013) described that some researchers' social dimension of work is probably the least understood and the most intriguing. The perspective has a significant influence on the effectiveness and efficiency of the organization. The relationship between employees and managers is an important but often overlooked aspect of employee empowerment strategies (DeJoy et al., 2013). Both formal and informal types of social support are important to employee health. Human resource management practices often emphasize the creation of a supportive work environment. Strategies include promoting a culture of teamwork, encouraging collaboration, and entrenching cooperation. Techniques would include creating a buddy system, employee support groups, matching mentors, protégés, training managers, and employees in social support. The idea of cultivating a supportive workplace arose from the perspective that a

substantial body of evidence existed demonstrating a link between social support and health (DeJoy et al., 2013).

DeJoy et al. (2013) examined the impact of a healthy work organization intervention involving 21 stores from a national retail chain. The study design arose from four major goals. The goal of the study consists of assessing the effects of the intervention over time through a follow-up period of at least one year. The next goal is comparing intervention and control stores in the same retail chain in terms of employee health and well-being. The next goal is using the work site as a unit of analysis, and making use of an intervention drawn from relevant organizational and behavioral theory. The participating stores represented four districts, two districts served as the intervention group (10 stores) and two districts served as the control group (11 stores). Longitudinal studies typically have some attrition; the sample consisted of 2,207 employees at the pretest assessment, 1,723 at the posttest, and 1,510 employees at the follow-up survey (DeJoy et al., 2013).

The overall goal of the intervention was to create a healthy work organization, and the intervention includes employee involvement and problem solving (DeJoy et al., 2013). An *Action Team*, an employee problem solving team (8-10 members), at each site featured members from all departments and levels. The teams had responsibility of developing, implementing, and evaluating targeted action plans related to issues within the store as identified by the team members. A trained facilitator worked with the teams on their action plans, utilizing a five-stage problem solving process, familiarization, skill building, prioritization, action, and reaction. Teams use a manual to guide the work.

External facilitation gradually decreased so the teams became independent and self-sustaining. Each team worked on problems unique to that store and devised their own activities, strategies, and goals (DeJoy et al., 2013).

The intervention of the study took place at three levels (DeJoy et al., 2013). Except for business performance, all the measures they examined came from employee surveys based on the theoretical model of a healthy work organization tested by DeJoy et al. (2012). The study period was a turbulent time for the retail chain (DeJoy et al., 2013). The team problem-solving intervention seemed to mitigate some of the detrimental effects of the external conditions. Both the intervention and control stores suffered declines in business performance, but the decline was much sharper for the control stores (DeJoy et al., 2013). Similarly, job satisfaction, and commitment declined during this period, but to a greater degree in the control group stores. A notable finding was that stress stayed low for the employees in the action team stores, which is striking in view of the stress associated with organizational change and upheaval (Avey, Luthans, & Jensen, 2013). In contrast, stress levels rose among the employees in the control group stores (DeJoy et al., 2013).

Success for the intervention was less than the team expected from the two factors they designed for capturing empowerment, work self-efficacy and impact (DeJoy et al., 2013). The near-failure might have resulted from problems some of the teams experienced in carrying out their action plans to make changes in the store. To some extent, the near-failure was attributable to the upheaval in the organization, although that would reveal speculative (Willis North America, 2011). The impact of the intervention on

employee health and business performance was not as strong as the researchers had predicted. A positive effect exists for employee turnover and sales in the intervention stores. Based on the process analysis, the team processes unfolded successfully and the team members considered the process analysis helpful and beneficial professional development experience (Willis North America, 2011).

The findings from the Action Team intervention may not show generalizable to corporate workplaces, where team problem solving is often an integral part of everyday operations (Willis North America, 2011). The healthy work organization model could easily serve as a framework for different types of interventions tailored to the unique conditions of a particular worksite. Both the model analysis and the intervention study affirmed the validity of the model). The advantages of naturalistic research included the effects of the intervention amidst turbulent work conditions (Willis North America, 2011). The most striking finding is the employees in the intervention stores did not experience the increases in stress that typically accompany organizational change.

Thriving. A culture dedicated to creating a thriving workforce includes the characteristics of a healthy work organization. Employees thrive in workplaces that (a) empower employees by granting them the authority to make decisions, (b) share information, (c) foster organizational cultures that discourage incivility, and (d) provide performance feedback (Spreitzer & Porath, 2012). Another study results showed half of the employees who had been targets of uncivil behavior deliberately invested less effort in their work. More than one-third of the employees said they intentionally decreased the quality of their work. Two-thirds of the employees said they went out of their way to

avoid the offenders; and about the same proportion said their performance had deteriorated (Spreitzer & Porath, 2012).

Although the term *presenteeism* generally applies to employee performance adversely affected by physical or mental health conditions, employees dissatisfied and unhappy may also display associated behaviors (Schultz et al., 2013). Employees who experienced incivility often sabotage the work of their co-workers as well as their own work performance (Spreitzer & Porath, 2012). Minimizing incivility is consistent with HRM practices to promote positive organizational citizenship behaviors and trust, which in turn influence stress, job satisfaction, motivation, and turnover intentions (Spreitzer & Porath, 2012).

Performance feedback also fosters a thriving workplace and creates opportunities for learning (Spreitzer & Porath, 2012). The strategy aligns with the fulfillment of Maslow's self-esteem and self-actualization needs (Benson & Dundis, 2012). The four conditions that promote thriving are also consistent with Porath's (2012) theory of organizational empowerment. From the perspective of HRM, these practices exert a positive impact on organizational financial performance (Jiang et al., 2012).

Spreitzer and Porath (2012) discovered that across industries and job positions, individuals who matched the description of thriving performed 16% more effectively (based on their managers' reports) and experienced 125% less burnout than their colleagues. The thriving employees displayed 32% more commitment to the organization and 46% greater job satisfaction. Especially relevant to the study, the thriving employees

reported significantly fewer medical visits, which translated into healthcare cost savings and less time lost for the organization (Spreitzer & Porath, 2012).

Wellness and Wellness Programs

The term *wellness* is more than a program offering physical exercise, smoking cessation, or weight management (Muya, Katsuyama, Ozaki, & Aoyama, 2014).

Workplace wellness programs have the capacity to foster a *wellness culture* characterized by employee engagement and social networks that encourage organizational citizenship, trust, high performance, and productivity (Willis North America, 2011). The benefits are evident at the individual, group, and organizational level in the form of good health, superior performance, and profitability (Muya et al., 2014).

Wellness programs can include a number of different forms (Maguad, 2011). Wellness programs are describable as primary prevention. Unlike EAPs, Wellness programs have no negative connotation. Management may list wellness programs, EAPs, and stress management programs under the HRM umbrella. Wellness programs range in scope from rudimentary to extremely comprehensive (Willis North America, 2011).

Willis North America team leaders' conducts annual surveys of employee health and productivity. Wellness was a prominent issue for the 2010 and 2011 surveys, which include employee engagement and work-life balance as well (Willis North America, 2011). Willis team leaders characterized wellness programs as *basic*, *intermediate*, and *comprehensive*. A basic program generally just beginning, has a small (or no) budget, and offers limited activities such as lunch-and-learn seminars and health fairs. Intermediate programs include wellness committees or internal program coordinators. These programs

augment the features of a basic program with offerings such as onsite screenings, health coaching, or wellness web portals (Levitt & List, 2011). Institutional leaders have a formal budget and offer some incentives for participation. Comprehensive programs include intermediate programs by offering targeted behavioral change programs, along with incentives. The most comprehensive programs include spouses, program monitor data, and formal evaluations of their impact (Kossek, Kalliath, & Kalliath, 2012).

The number of organizations that either had a wellness program in place or planned to offer one in the future increased from 2010 to 2011 (Willis North America, 2011). Most of the wellness programs came under basic programs classification. Firms with 500 or more employees were more likely to include an intermediate or comprehensive wellness program (Willis North America North America, 2011).

In descending order, the 10 most common wellness components in 2011 were flu shots (82%), EAPs (82%), and flyers, posters, and newsletters encouraging healthy behaviors (63%; Willis North America, 2011). Others are *Lunch 'N Learn* or educational seminars (55%), physical activity programs (53%), disease management (51%), and health fairs (49%). The rest are health coaching (onsite, online, or by phone; 49%), smoking cessation programs (49%), and weight management programs (49%; Willis North America, 2011).

Evidence existed in the various wellness programs components that the term *wellness* has different meanings (Willis North America, 2011). The big three programs typically associated with the concept of wellness are physical activity, smoking cessation, and weight management. The survey results revealed some unusual program components.

Worthy of consideration are peer support groups (8%), training managers and supervisors who promote wellness program goals (8%), onsite pharmacies (7%), and provider quality measurements such as Leapfrog or Health-grades (5%) (Willis North America, 2011).

The 2010 survey include issues related to the implementation of a workplace wellness program (Willis North America, 2011). The main reason for establishing a wellness program was trends in healthcare costs, cited by 78% of the respondents; (notably, this figure was 92% in 2009). The second most prevalent reason was corporate goals and objectives (39%), followed by costs associated with chronic conditions (34%). Approximately 38% of the programs extended benefits to spouses. The main barriers to implementing a wellness program were insufficient time and staff resources (44%) and budget constraints (43%) (Willis North America, 2011). Lack of interest by employees or management was less common (21% and 11%, respectively). Many employees do not participate in wellness programs (Howard, 2012).

Wellness programs offered by management often fail because they do not reflect the personal preferences of the employees (Spreitzer & Porath, 2012). An excellent way to overcome that obstacle is to involve the employees in designing the program (Benza, 2012). Not only does the strategy encourage active participation in the program, but it also offers the employees a sense of ownership, which is inherently empowering (Spreitzer & Porath, 2012). A program promoted among employee social networks and endorsed by executive management has the best chance of being successful (Benza, 2012). In effect, word-of-mouth advertising is the most effective marketing technique (Benza, 2012).

Wellness programs date back to the 1970s, when business leaders began to analyze employee productivity and devised a strategy to increase employee efficiency (The Center for Health Affairs, 2013). During the 1970s, the Worksite Health Promotion Movement (WHP) began linking employee health with various work-related factors. In addition to providing health insurance, business leaders began to foster employee health in the workplace (Fadzilar et al., 2012). The 1970s Occupational Safety and Health Movement, which also advocated analyses of employee productivity, assisted the movement (The Center for Health Affairs, 2013).

Throughout the 1980s and 1990s, people in the United States became more interested in health as a lifestyle issue, and this led to increasing awareness of obesity problems and other related chronic illnesses. By the start of the 2000s, many leaders in firms were offering different models of wellness programs to employees (The Center for Health Affairs, 2013). To increase employee participation in workplace wellness programs, employers are trying out various types of incentives. Rewarding employees is more important than coercing them to participate in wellness programs (Howard, 2012). Numerous types of incentives exist, but gift cards and cash cards are popular (Howard, 2012; Willis North America, 2011). Some managers offer programs to employees at lower premiums on their medical plans and others offer lower deductibles. Additional incentives include merchandise, points toward rewards, and contributions to health care accounts. Notably, the most effective incentives are those related to health and insurance costs (Jiang, Lepak, Hu, & Baer, 2012).

While evidence abounds that incentives boost employee participation in wellness programs and promote adherence to certain behaviors (such as physical exercise or smoking cessation), evidence is scant regarding incentives that create enduring behavior change (Howard, 2012). Evidence exist that employees are less likely to sustain behaviors encouraged by incentive programs. Howard attributed the evidence to the observation that extrinsic rewards drove the initial behavior change. The argument was that to help people maintain the desired behaviors, staff members should emphasize the intrinsic benefits of the activity. For example, the benefits of regular physical exercise including feeling more energetic, sleeping better, maintaining a healthy weight, and feeling and looking better. The emphasis on intrinsic rewards is consistent with Maslow's (1970) theory (Maslow, 1943, 1954).

Positive and negative sides exist in the use of incentives, wellness programs, and workplace health. The programs include determinable advantages and disadvantages (Howard, 2012). First, on the positive side of the outcome-based incentives, directly linking incentive rewards to desired health outcomes can motivate employees to become and stay healthy. Second, incentives offered by management may spur employees to change unhealthy behaviors. Third, policies offered by management may prove rewarding healthy behaviors or outcomes may attract healthier individuals as prospective employees. Fourth, rewards for wellness participation by management may stimulate a shift toward a wellness culture (Howard, 2012).

Findings from behavioral economics suggest that rewarding employees for changing behavior or engaging in beneficial activities is more effective than tying

rewards to outcomes (Howard, 2012). First, constraints offered by management resulting from administrative provisions intended to protect employees against discrimination may work against outcomes-based incentives. The employees who stand to gain the most from the program may opt out instead. Second, the policy provided by management may benefit employees who might otherwise make healthy choices. The most vulnerable individuals may ultimately pay more, as they attain less positive outcomes (Howard, 2012). Members of ethnic minorities and older workers, less educated, and have lower incomes stand to gain less from the programs. Third, some people in poor health cannot try to reach a designated outcome in time for a reward. Fourth, some individuals might end up paying higher premiums. Behaviors and outcomes not fully under human control could lead to such higher premiums (Kortum, Leka, & Cox, 2011).

Disadvantages may seem to outweigh the advantages, employers tend to move away from incentives based on participation and adopting incentives programs based on health outcomes (Howard, 2012). The number of organizations offering rewards based on outcomes for weight or cholesterol level doubled in 2011 and one-third of the respondents said they planned to adopt an outcome-based incentive strategy (Howard, 2012). In 2010, only a scant 6% of employers had that type of incentive program (Horner & Minifie, 2011; Howard, 2012). If the disadvantages appear to outweigh the advantages numerically, the benefits of outcome-based incentives will have a more direct impact on the health-related costs of the organization and the organizational culture.

Program evaluation. From the broad perspective of linking health and productivity outcomes, the most common assessment techniques include (a) retrospective

databases (such as medical claims and work productivity data), (b) self-report surveys, and (c) simulations, such as work-time productivity forecasting (Colling, 2012).

Organizational decision maker with, or in the process of implementing, workplace wellness programs should adopt a data-driven approach to understanding their impact (Colling, 2012).

Reductions in absenteeism and presenteeism, lower health care costs, and lower employee turnover are all potential benefits of a wellness program. Measuring the extent of the influence of a wellness program on the outcomes and the precise impact of individual program components is complicated (Colling, 2012). About 40% of respondents cited insufficient data, staff members, or time to conduct evaluations as additional barriers. Considering the relative newness of many wellness programs, 37% said that assessing impact should come. Many business leaders are investing in wellness programs. Some organizational leaders provide incentives up to \$3,000 for every employee each year. Many organizational leaders reported they began to spend \$220 more for each employee participant than they did the previous year (Colling, 2012). Only 40% of leaders from companies in the United States sponsor wellness programs that evaluated their outcomes.

Based on the research with 10 companies that have implemented successful wellness programs, a *dashboard* exists based on a series of employee and organizational metrics for evaluating the impact of the wellness program (Spreitzer & Porath, 2012). The employee metrics fall under six categories. *Data utilization* pertains to the total number of employees who participate in various program activities. *Penetration* is the

percentage of employees that have been involved with at least one wellness activity (Spreitzer & Porath, 2012). *Depth* is the ratio between light and heavy users of the program activities. *Sustainability pertains to* the number of employees who continue to engage in specific health risk reduction behaviors. *Satisfaction* deals with the scope, relevance, quality, and accessibility of the program. *Health risk status* is the percentage of employees at high, moderate, or low health risk (Colling, 2012).

The organizational metrics fall under four categories (Colling, 2012). *Healthcare* includes medical care, drug costs and utilization (derived from claims analysis), disability costs, and workers' compensation costs. *Safety* pertains to safety incidents according to type or category and lost and modified workdays resulting from safety incidents. *Productivity* encompasses absenteeism and presenteeism. *Organizational culture* includes trust in management (derived from anonymous survey data, voluntary turnover, and willingness to recommend the company as an employer (Colling, 2012).

Grachev and Rakitsky (2013) described data from various organizational surveys attest to the potential of wellness programs to yield a substantial return on investment (ROI) For example, the Wisconsin Public Health and Policy Institute officials reported on studies documenting ROI for wellness programs ranged from \$1.81 to \$6.15 for every dollar invested. The Texas Coalition for Worksite Wellness personnel discovered every dollar invested in corporate health promotion has the potential to generate between \$3.50 and about \$6.00 by reducing absences, boosting productivity, and decreasing health care related costs. In most cases, 2 years would elapse before the organizational leaders starts to see positive results.

Various research studies include evidence of tapping into different outcomes. For example, *Johnson & Johnson* is popular for its excellent wellness program; the proportion of employees who smoke declined by two-thirds since 1995 (Grachev & Rakitsky, 2013). One organizational decision maker randomly chose a group of 185 employees and provided them with cardiac rehabilitation and exercise training led by an expert team (Grachev & Rakitsky, 2013). Among the patients identified as high risk at the onset of the study based on physical indicators, 57% were low risk by the end of the 6-month program (Grachev & Rakitsky, 2013). Notably, medical claims costs decreased by \$1,421 per participant compared too previously. Every dollar invested in the program translated into \$6 in health care cost savings. The literature is replete with case studies on successful wellness programs. While virtually no dispute exists that documenting the outcomes of a wellness program is a complex, time- and labor-intensive endeavor, a metrics can include a good framework for organizational decision makers that view program evaluation as a worthwhile investment (Grachev & Rakitsky, 2013).

Physical exercise. Findings from a longitudinal study that took place in six municipalities in 1999-2000 that included participants, 81% of whom were women (Vingård et al., 2011).The 205 women employed by the same social service agency (registered nurses, nursing assistants, care providers, and kitchen staff) were involved in a physical fitness program (Vingård et al., 2011). The study included program participants to a reference group of 165 from a similar social service agency in the same region. The program grew out of negotiations between the social service authority and local politicians. The results of the study culminated in the decision to offer employees a free

physical fitness program with a variety of different options for physical exercise, for one hour each week. Offering a variety of options is likely to generate higher levels of participation (Benza, 2012). As an incentive, the sessions took place during paid work hours (Vingård et al., 2011).

Situated across multiple worksites, the program attracted from five to 30 women at each site (Vingård et al., 2011). A health coach supervised each site and a trained experienced leader conducted all activities. The activities included strength training, aerobics, and spinning, yoga, swimming, and fast walking. Special groups also existed for obese individuals. Although the program took place during work hours, the participants could schedule alternate times if needed, and those who desired could spend more than one-hour exercising, also free of charge (“Six in 10 overweight or obese,” 2013).

The training program began roughly 18 months after the initial HAKuL survey (Vingård et al., 2011). Coordinators assessed general health with the SF 36 instrument, and additional areas surveyed included current work ability in general, work ability related to physical demands, work ability related to mental demands, future work expectations, and physical effort at work. The last aspect related to the nature of direct care provision for agency clients, primarily frail elderly adults and physically and mentally disabled individuals. The follow-up survey took place 36 months after the baseline assessment (Vingård et al., 2011).

The program included an extremely high level of involvement; nearly all the women in the intervention group engaged in one or more forms of physical exercise each

week (Vingård et al., 2011). At the baseline assessment, roughly 20% of the women had no physical training, a figure that dropped to 5% 3 years later (Vingård et al., 2011). Some differences in benefits depended on age. Among the younger women (> 45 years), significant improvements occurred in the areas of general health, general work ability, and physical and mental work ability. Among the older women, the main area of improvement was in future work expectations (Vingård et al., 2011). Notable improvements occurred among women who had reported musculoskeletal pain at the onset of the study. Vingård et al. (2011) expected to see superior levels of improvement among the older women, given the younger women tended to be apparently healthier. Future work expectations among the older women implied that older women were less likely to retire early because of excessive physical job demands (Vingård et al., 2011).

Although care giving carries physical demands not applicable to most corporate employees, the physical fitness program implemented by management can improve mental as well as physical ability (Vingård et al., 2011). The program depended on a number of techniques that effectively facilitate participation and adherence. Institutional leaders could offer the activities during work hours. Other options could include additional time or rescheduling sessions at more convenient times. Institutional leaders could also offer various exercise options, provide trained leaders and exercise coaches as well as other useful resources for encouraging employee participation (Vingård et al., 2011).

Presenteeism. A best evidence research review includes the impact of health promotion programs for employees on presenteeism contained 47 articles. Fourteen

articles ultimately met the requirements for acceptance; four studies fell under the classification of *strong* and 10 studies fell under *moderate* (Cancelliere, Cassidy, Ammendolia, & Cote, 2011). Many studies did not include productivity outcomes and most of those that did focused on absenteeism but not presenteeism. The relevant articles included preliminary evidence that workplace wellness or health promotion programs can have a positive impact on presenteeism (Cancelliere et al., 2011). The most successful programs possessed characteristics of strong organizational leadership, health risk screening, customized interventions, and a supportive workplace culture. The risk factors associated with presenteeism included being overweight, -inadequate diet, physical inactivity, high levels of stress, and negative relationships with coworkers and managers (Cancelliere et al., 2011; Field & Johann, 2012).

The results of the overall findings support the notion of building a wellness culture (Fadzilar, Anwar, Maslina, & Zaharah, 2012). The importance of creating an organizational culture that fosters physical and psychosocial health is evident in an Australian national longitudinal study documenting that a person's mental health depends upon the psychosocial quality of his or her job. Individuals in high quality jobs enjoyed better mental health than those in poor quality jobs. The assessment relied on effort-reward and job demands models. While unemployment is challenging to psychological health, going from unemployment to a poor quality job had links with a significant *decline* in mental health. A negative psychosocial work environment hinders mental health, as is visible in the studies conducting job stress from effort-reward imbalance to cardiovascular disease (Fadzilar et al., 2012).

Employee Assistance Programs

Employee assistance programs have their roots in programs designed to help employees cope with substance abuse problems in a confidential manner (Kemp, Kopp, & Kemp, 2013). The programs expanded far beyond the original model, offering employees a wide variety of services. Services range from helping with wedding planning, finding affordable childcare, to providing traditional counseling services, management training, stress management, and wellness programs. However, potentially valuable, EAPs are not used appropriately, possibly because of a sense of stigma attached to the EAP label (Kemp et al., 2013). Some scholars focused on the effects of EAP participation on stress experienced by Taiwanese employees in North America (Yu, 2013). The program would probably fall within the category of stress management program as opposed to an EAP program, although stress management is a major focus of North American EAPs (EAPs, 2012; Kemp et al., 2013). Employee assistance programs in Taiwan are still in a fledgling state, which may prove an advantage. The programs do not have negative connotations that prevent some employees from availing themselves of the increasing array of services that North American EAPs offer (Yu, 2013).

At a Bureau of National Affairs (BNA) webinar, global solutions manager Rensia Melles of Shepell-fgi health management services officials defined employee assistance as the use of particular core technologies to boost workplace effectiveness (EAPs, 2012). For employers, the primary role of EAPs is addressing issues pertaining to productivity. For employee clients, EAP's personnel can help with a spectrum of personal issues including health, marital issues, relationships, family issues, alcohol and drug problems,

legal issues, psychological distress, stress, and other personal concerns influencing job performance (Kemp et al., 2013).

At the individual level, EAPs services include counseling, coping strategies, and lifestyle change coaching (EAPs, 2012; Kemp et al., 2013). Educational seminars and psychological educational programs also addressed issues such as coping skills, lifestyle changes, and stress management. Employee assistance programs also handled issues concerning safety, trauma, and critical incident support. Management training seminars are a recent expansion of the EAP role. The seminars typically include specific issues such as communication and identifying and responding to staff members experiencing personal problems. Some EAPs include online or telephone troubleshooting advice for helping managers-cope with difficult employees. The expansion of EAP activities is part of a drive by EAPs to increase their low usage rates and become increasingly more relevant to the lives of modern day employees (Kemp et al., 2013).

Workplace Counseling

Counseling is one of the most common services offered by EAPs (EAPs, 2012; Kemp, Kopp, & Kemp, 2013). A systematic, extensive review of research on the effectiveness of *workplace counseling* referred to any intervention where providing counselling or psychotherapy. Such therapy would relate to employees experiencing work-related psychological problems. The therapy would also have an impact on work performance (Kemp, Kopp, & Kemp, 2013). Two broad types of workplace counseling interventions emerged. The first group, encompassing most of the studies reviewed, consisted of counseling services the employer provided or paid for, through in-house

programs or through external programs. Employee assistance services fell under the heading of external services, as did specialized programs such as therapy for work stress delivered by a university research clinic.

The second category included studies where the employee consulted a counselor or psychotherapist independently for a problem related to work or where the therapy improved work performance (Crum, Salovey, & Achor, 2011). Studies in this group were not numerous. Differences existed among individuals who chose to seek counseling on their own, those who turned to EAPs, and those who sought in-house services (Kemp et al., 2013). Although the study did not include EAP counseling, that raises the issue of whether employees who pursue counseling outside of their employer's EAP resources might feel stigmatized if they turned to the EAP?

The studies include four major domains *client satisfaction, psychological functioning, the meaning of work, and work behavior* (Kemp et al., 2013). Satisfaction with counseling services was typically high; none of the studies' results found low levels of satisfaction with workplace counseling, and most studies include more than 80% of the clients are satisfied. Limited number of qualitative studies includes the above subject matter. In one such study, Vesely (2012) solicited the opinions of employees regarding changes to the company's EAP. The changes decreased the benefits to the staff, generating protests and complaints. The finding, illustrating the importance of the EAP to this group of employees, should encourage HR professionals striving to increase employee use of EAPs (EAPs, 2012; Kemp et al., 2013).

Most of the studies reported positive psychological benefits of counseling using various assessment tools measuring stress symptoms and psychological distress and well-being (Kemp et al., 2013). Vesely noted positive outcomes in studies with both high and low levels of methodological rigor. Only two studies include neutral or negative outcomes. In one case (a high quality study), counseling had no impact on stress. In another study (low quality), group counseling had a slightly negative effect, based on assessment with the General Health Questionnaire (GHQ). The results of the study revealed the negative effect including four sessions of cognitive analytic therapy, which is typically of longer duration. The results of the studies demonstrated that workplace counseling has positive benefits for most employees (Kemp et al., 2013).

Stress Management

Since the 1970s, organizational leaders have been offering a vast array of programs that fall under the umbrella heading of stress management interventions (EAPs, 2012; Kemp, Kopp, & Kemp, 2013). Programs include cognitive-behavioral interventions; mind-body relaxation programs encompassing meditation, and mindfulness training, diaphragmatic breathing, and progressive muscle relaxation exercise, hatha yoga. Other program elements are biofeedback training; physical exercise programs; journaling interventions in which the participants chronicle daily stressful events to monitor their stress levels; and time management and goal setting interventions (EAPs, 2012; Kemp, Kopp, & Kemp, 2013). A substantial degree of overlap exists, as many stress management programs are multidimensional and combine several techniques.

The diversity of stress management programs parallels the various ways researchers have attempted to measure their effectiveness (EAPs, 2012; Kemp et al., 2013). At the organizational level, effects on absenteeism, presenteeism, productivity, and performance may serve as indicators of effectiveness. At the individual level, outcomes can include direct physiological indicators such as blood pressure and heart rate, and psychosocial well-being including, notably, reductions in stress, anxiety, and depression. Many studies have come under criticism for excessive reliance on anecdotes, testimonials, and less than rigorous research methods (EAPs, 2012; Kemp et al., 2013).

In view of the proliferation of occupational stress management programs and questions surrounding their effectiveness, Vesely (2012) conducted a meta-analysis of the existing research. Richardson and Rothstein included experimental evaluations of primary or secondary stress management programs involving adults who had no diagnosis of a major mental health disorder or stress-related condition (EAPs, 2012; Kemp et al., 2013). Thirty-eight articles encompassing 36 separate studies and 55 interventions (mainly secondary interventions) were part of the meta-analysis. Only eight studies included strategies that could constitute primary prevention, such as empowerment strategies and social support. Most studies include group interventions; other programs employed individual counseling, self-help techniques using the Internet or other media; or a synthesis of two or more different approaches. Relaxation and meditation programs accounted for 69% of the interventions and 56% depended on cognitive-behavioral skills training. Research studies combined techniques from both

categories (such as meditation and coping skills training), and 14 studies included four or more components (EAPs, 2012; Kemp et al., 2013).

The combined weighted effect size was substantial ($d = 0.526$, 95% confidence interval = 0.364, 0.687). The overall findings of a meta-analysis mask the variations among individual studies in such a diverse sample, which led Collins and Vesely (2012) to conduct an analysis with more detail. Based on their specific components, the researchers divided the interventions into five groups, relaxation, cognitive-behavioral, organizational, multimodal, and alternative strategies to enhance employees' personal resources for dealing with work stress. From this perspective, the largest effect sizes were for cognitive-behavioral and alternative interventions, though each group was still quite heterogeneous (EAPs, 2012; Kemp et al., 2013). With further subgroup analyses, cognitive-behavioral interventions is the most effective type of stress management program, with effect sizes consistently surpassing the other subgroups.

The cognitive-behavioral stress management interventions include active coping techniques for individuals to take control of negative emotions, thoughts, and behavior; relaxation and meditation programs diverted attention away from the sources of stress (EAPs, 2012; Kemp et al., 2013). The two modes of working with stress reflect problem-focused coping, which alter the conditions causing the stress, and emotion-focused coping, which regulate stressful emotions (Lazarus & Folkman, 2014). While cognitive-behavioral stress management interventions tap into both types of emotions, they typically include problem-solving techniques. The design of cognitive-behavioral skills

training is usually to build self-efficacy, which in itself helps people to manage psychosocial stress (Lazarus & Folkman, 2014).

Adding more components to a cognitive-behavioral intervention detracted from, rather than added to, its effectiveness (EAPs, 2012; Kemp et al., 2013). Multimodal programs appear longer, but program duration did not translate into effectiveness. A possible explanation is that programs focused on a single technique are more intensive. Too many program components may attenuate the effectiveness of each one and perhaps undermine the concentration of the participants. Program developers acknowledged that it could prove difficult to discern the effectiveness of each component of a multifaceted intervention. This complexity is one of the daunting challenges encountering employers when evaluating the effects of a wellness program (Colling, 2012).

Regardless of the superior effects of cognitive-behavioral interventions, leaders offering programs with relaxation and mediation techniques were the most popular (EAPs, 2012; Kemp et al., 2013). Colling (2012) indicated that the researchers speculated that from an organizational perspective, relaxation programs might prove simpler and less expensive to implement. From an employee perspective, many people simply enjoy relaxation programs, which encourages adherence to the program. The *alternative* label denoted programs designed to equip employees with tools to help them cope with the more stressful elements of their work. Training, development, and learning opportunities fall under the alternative heading, many of which EAPs offer (EAPs, 2012; Kemp et al., 2013).

Despite the efforts of Vesely (2012) to subdivide, the interventions as much as possible to discern which types of programs are more effective, individual differences in effectiveness remained within each sub group. Mind-body interventions continue to gain popularity, within and outside the realm of occupational stress management. An examination of the effectiveness of two types of mind-body occupational stress management programs involved a therapeutic yoga-based program and a mindfulness-based program (Wolever et al., 2012). A distinctive feature of the interventions is that it could reveal accessed either in-person or online. Both program durations were one hour weekly over a span of 12 weeks. A pilot study of the two programs includes preliminary data on stress-related health outcomes, organizational productivity, and cost-effectiveness and efficiency. The research objective was not to compare the two programs based on features of a specific workplace being more or less conducive to one or the other (Wolever et al., 2012).

The effectiveness of a given strategy to reduce stress is contingent on matching the strategy to the unique situation (Lazarus, 2013). The research on strategy effectiveness contained an assessment of the benefits of each intervention in relationship to a control group (Lazarus, 2013; Wolever et al., 2012). The two programs were the Viniyoga Stress Management Program and Mindfulness at Work. The Viniyoga program includes hatha yoga *asanas* (postures), breathing techniques, mental techniques, guided relaxation, and education regarding practicing the Viniyoga techniques at home. The participants received handouts to aid their home practice and half the group received DVDs. As described by preliminary analysis, no difference exist between the groups that

had and did not have DVDs, thus the two groups combined for additional analyses (Lazarus, 2013; Wolever et al., 2012). While many yoga traditions exist, Viniyoga as the mode of choice for three reasons, the primary emphasis on breath, the sequencing of the *asana*, and the adaptability of the format for individual practices and goals.

Employees who use mindfulness-training programs have been enjoying its increasing popularity (Wolever et al., 2012). The participants learn to focus their attention on thoughts, feelings, and sensations as the thoughts happen naturally without judging, censoring, or attempting to change. Leaders using mindfulness interventions have a sound empirical evidence base, derived from research in clinical as well as community settings. As the title implies, Mindfulness at Work was designed by management to specifically help individuals address stress arising from work issues, including job stress, work-life balance, and self-care. The study involved two Mindfulness at Work programs; they were identical in content, but one happened in a face-to-face classroom venue and the other by way of an online virtual classroom (Wolever et al., 2012). Participants in both classes received handouts as well encouragement to practice at home.

The control group participants received no specific intervention but instead received a list of resources available to all employees of the organization, a large national insurance firm (Wolever et al., 2012). The sample consisted of 239 employees of the firm, 176 in Connecticut, and 63 in California. Considering the small size of the California group, the participants were in three groups rather than four. All employees in California took part in the virtual mindfulness program, while the employees in

Connecticut were in classroom and online groups. A strongpoint of the study was the use of multiple outcome measures, which tapped into prospective individual and organizational benefits (Wolever et al., 2012). Some leaders use the Perceived Stress Scale (PSS) to assess the primary outcome. The secondary outcomes included effects on mood pain, and sleep quality using the assessment of the Center for Epidemiological Studies Depression Scale (CES-D). Decision makers can use the Work Limitations Scale (WLS) to capture effect on productivity, mindfulness, and physiological indicators, specifically blood pressure, respiratory rate, and heart rate variability (HRV).

The most significant differences between the mind-body intervention participants and the control group were in the areas of perceived stress and sleep problems (Wolever et al., 2012). The participants in both interventions also experienced significant improvements in HRV and slight improvements in breathing rate. Improvements in work productivity and mood occurred over time in the two intervention groups but fell short of statistical significance. One finding results showed participants in the virtual mindfulness program had lower attendance, but superior engagement has implications for the delivery of various types of interventions. The findings included a notably lower attrition rate than the in-person group. Fifty people completed the online mindfulness intervention versus 32 for the classroom group (Wolever et al., 2012). Wolever et al. (2012) noted the online group had an advantage because of the ability to access a video to keep up with any classes they missed while the classroom group had no similar option. Online programs offered an attractive option for many employees (Luthans et al., 2013).

Despite the subjective and physiological benefits, participation in the mind-body interventions did not seem to translate into increased productivity at work (Wolever et al., 2012). The sample size might have been insufficient for detecting changes in work productivity. Wolever et al. (2012) noted, given that participants had no physical or mental disorders, and because of the initial scores on the WLQ, enhanced work productivity would probably result from improved cognitive performance rather than improved physical health. Such changes would have included effective attention or concentration, which escaped examination. Wolever et al. viewed their findings as promising, and suggested that workplace mind-body stress management programs might prove cost-effective by reducing medical and healthcare costs. Wolever et al. (2012) coauthored a paper in which they reported that each one-point increase in PSS increased annual healthcare costs by \$96.36.

Self-efficacy. Another study results showed the effects of self-efficacy and EAP participation on stress and burnout among 205 employees of high technology companies in Taiwan (Yu, 2013). Approximately one-third of the participants took part in research and development and close to half (45.9%) had occupied their current positions for 2–3 years. The study contained findings relating to occupational stress mainly in terms of role stressors. Some of the elements included role conflict, role ambiguity, role overload, and life stress.

The results revealed burnout with questions adapted from the Maslach Burnout Inventory (MBI), the most popular instrument for assessing burnout (Yu, 2013). Self-efficacy featured in three dimensions of initiative, effort, and persistence, constitutes

general characteristics of self-efficacy. To assess the employees' perceptions of the EAP, the features of the EAP were in two dimensions, job-related activities, and life- and health-related activities (Yu, 2013).

The results revealed greater risk of burnout with every element of increase in stress employees experienced: the higher their risk of burnout. At the same time, participation in an effective EAP successfully reduced stress among these highly stressed employees (Yu, 2013). The effectiveness of the EAP includes the employees' perceptions of how well the program met their individual needs, life and work values, and goals. Programs relying on a one-size fits all approach to stress reduction typically failed (Lazarus, 2013). Self-efficacy includes the association between stress and burnout, leading to efforts to reduce burnout, Organizational leaders should devote more attention to boosting employees' sense of self-efficacy (Yu, 2013). Self-efficacy is an intrinsic element of positive psychological capital, and interventions that include psychological capital directly tap into the four sources of self-efficacy (Jiang et al., 2012; Luthans, Avey, Avolio, & Peterson, 2013).

Stress as enhancement. In contrast to the idea that stress is invariably negative, perceived as a challenge as opposed to a threat, stress is motivational in some cases (Mark, 2014; Crum et al., 2011; Lazarus, 2013). From Lazarus' (2013) perspective, organizational stress management programs were often unsuccessful, partly because the programs might prove superficial, and perhaps, more important because they do not include individual differences. The negative conception of stress advanced and perpetuated by traditional stress management programs is erroneous. The perspective

may prove counterproductive to at least some degree (Crum et al., 2011). Decision makers created the Mindset Training Program because of the premise stress can reflect on an employee's psychosocial well-being. The underlying philosophy is the more the person espouses a *stress-is-enhancing* mindset, the greater the probability that stress will enhance to one's health, well-being, and performance. By contrast, if one perceives stress as harmful, the likelihood to have harmful effects increases on those same dimensions (Crum et al., 2011).

The Mindset Training Program include participants with comprehensive information on the nature of stress, the impact of one's personal frame of mind on responses to stress, and a set of specific skills devised to help apply an enhancing mindset (Crum et al., 2011). The 2 hour, three-stage program consists of three parts, (a) Part 1- The Paradox of Stress, (b) Part 2- The Power of Mindset, and, (c) Part 3- Three Steps to a Stress-is-Enhancing Mindset. Part 1 is the process of acknowledging existing research on the detrimental effects of stress while alerting participants to the potentially enhancing properties of stress. *Part 2* begins by defining *mindset* as a prelude to presenting research examples of how a mindset can induce important changes in psychological and physiological responses. *Part 3* is a process by which participants learn simple three-step strategy for actively embracing the desired mindset (Crum et al., 2011).

The participants were 229 employees of a large international financial services firm who received random assignments either to the Mindset Training Program or to a wait list (Crum et al., 2011). Recruited by the employees of the human resource department as an opportunity to take part in a stress management-training program, the

participants came from asset management, wealth management, and investment banking, all of which involved risk and stress. The participants received the Stress Mindset Measure (SMM) designed for the study at the pretest and posttest assessments, along with the Mood and Anxiety Symptom Questionnaire (MASQ) and the Work Performance Scale (Crum et al., 2011).

The participants in the Mindset Training Program experienced improved physical health and satisfaction with overall work performance (Crum et al., 2011). Notably, the work-related benefits included improvement in participants' ability to generate creative ideas, maintain focus, engage at work, and collaborate successfully. Based on the analyses, these gains occurred mainly through alterations in mindset the training program induced. The effects of the training program were remarkable for two key reasons. First, the underlying theory that stress was enhancing diverged dramatically from the traditional belief that stress was detrimental. Second, the idea that positive changes would occur through altering one's implicit belief system regarding the nature of stress diverges from conventional approaches to stress management, which include techniques for reducing stress (Crum et al., 2011).

Occupational stress management programs were often elaborate, multi-component interventions whose costs and time demands might exceed the benefits (Crum et al., 2011). To address this concern, Crum and colleagues drew on the work of Versely (2012), who found that adding more components detracted from the effectiveness of the program. The Mindset Training Program is straightforward, and, according to the

preliminary results, presents a novel and promising alternative to traditional corporate stress management programs (Crum et al., 2011).

Psychological Capital

Psychological capital or PsyCap is a person's positive psychological state of development. The psychological state derives from positive psychology and the emerging field of positive organizational behavior. The field has four essential features. The features are (a) having confidence to confront challenging tasks, (b) being optimistic in the present and future, (c) persistent toward goals, and (d) sustaining an effort to remain resilient. The four important characteristics of PsyCap are *self-efficacy*, *optimism*, *hope*, and *resilience* (Avey et al., 2013).

Crum et al. (2011) indicated that researchers conceptualized PsyCap as a first line defense against occupational stress. Crum et al. (2011) used Lazarus and Folkman's (2014) definition of stress as the response that takes place when a person views the demands of a specific situation as beyond the realm of his or her coping ability. Stress can include positive benefits in areas such as motivation and creativity, which is the philosophy of stress as enhancement (Crum et al., 2011). The evidence is overwhelming for the negative physical and psychological impacts of stress. These detrimental effects include poor performance, burnout, absenteeism, presenteeism, turnover, and increase healthcare costs pertaining to workplace injuries, chronic disease, and disability (Crum et al., 2011).

Self-efficacy has associations with positive outcomes in a wide array of challenging situations (Mark, 2014). Educational, health, and organizational psychology

are three of the most popular applications of self-efficacy theory. Notably, studies on workplace health promotion and wellness programs, training and development programs, and stress management programs, topics that pertain to creating a positive psychosocial work environment, span all three fields (Mark, 2014).

Optimism in positive psychology and, by extension, in PsyCap, is a disposition whereby a person associates positive events to pervasive personal and permanent causes and negative events to temporary, external, and situation-specific causes (Avey et al., 2013). A critical feature of optimism in PsyCap is that it must include a realistic appraisal. Similarly, hope is not a mere reflection of a dream, but rather involves motivation, agency- or goal-direction, and pathways for meeting one's goals based on planning. As conceptualized for the purpose of PsyCap, hope is comprised of *willpower* (personal agency or determination) and *waypower* thinking, denoting the ability to create alternate pathways and plans for achieving a goal when confronted with obstacles (Avey et al., 2013). Resilience is the capacity to bounce back from adversity, setbacks, and failure, and even from positive changes and progress and heightened responsibility. In the midst of organizational upheaval arising from downsizing, restructuring, and layoffs, resilience gains is even more importance. The individual can develop resilience (Avey et al., 2013).

In addressing the ability of people to develop PsyCap, Luthans et al. (2013) situated the PsyCap resources along a continuum between *state* and *trait*. States such as moods and emotions are mutable, whereas personality traits such as conscientiousness and character strengths are more stable in nature. PsyCap is neither inherently fleeting

nor fixed. Efficacy, in particular, emerges through training and experience (Mark, 2014). Optimism on behalf of employees may prove more trait-like, but it can be the result of conscious cultivation. The results of an online training program and a training program involving university students both reveal that individuals can develop PsyCap (Luthans et al., 2013).

PsyCap theorists have conducted multiple studies examining its effects at the individual and organizational levels, along with the effectiveness of PsyCap development strategies (Luthans et al., 2013). Luthans et al. (2013) explored the effects of PsyCap on stress, turnover intentions, and job search behavior among working adults from a wide range of occupations and industries. An initial demographic survey attracted 416 respondents and yielded a diverse sample. Out of the original group, 360 respondents completed the second survey. The stage consisted of the PsyCap Questionnaire (PCQ), adapted from validated measures used in popular psychology; survey items related to intentions to quit and job search behavior; and the Depression, Anxiety, Stress Scale (DASS) (Luthans et al., 2013).

With an intervention process for building PsyCap among a wide range of employees in mind, Luthans et al. (2013) explored the effectiveness of an online intervention designed to promote PsyCap. The choice of intervention was twofold. First, the researchers noted that Internet-based interventions were equal if not more effective than face-to-face interventions in user satisfaction and learning. Second, few online interventions include the development of *positivity* (Luthans et al., 2013).

Cost- and time-efficiency constituted advantages of delivering psychosocial interventions online (Luthans et al., 2013). Even apart from the intervention, an online survey can include a large and diverse participant sample. The 364 participants represented a broad spectrum of business and industry, spanning service, sales, manufacturing, and government organizations. From the sample, 187 respondents comprised the intervention group and 177 served as the control group. More than half (59%) occupied non-managerial positions, but a substantial proportion (41%) were first-level supervisors or above (Luthans et al., 2013). The participants had a mean age of 32.2 years and had been at their jobs for 12.1 years, on average (Luthans et al., 2013).

The intervention consisted of two online sessions. The first include the positive nature of efficacy and resilience and the second include hope and optimism (Luthans et al., 2013). The multimedia presentation used flash animation, which enabled students to download a PowerPoint presentation by the facilitator and various video clips. In an engaging technique, for example, the facilitator displayed short video clips of scenes from popular movies illustrating resilience and efficacy. Activities in the first session included three elements. The elements involved, (a) asking the participants to think of challenging work experiences, (b) create a list of work situations potentially under their control, and (c) listing actions to situations under their control. The session closed with a series of self-reflection exercises and a summary of the session including advice for applying the relaxation techniques participants had learned in the exercises to real world job situations (Luthans et al., 2013).

Focused on cultivating optimism and hope, the second session included discussion of the importance of personal values and the realistic challenges of carrying out tasks and achieving goals (Luthans et al., 2013). The discussion followed by an exercise in which the participants listed tasks they deemed realistically challenging, relevant to their work, and personally valuable. Notions of realistically challenging and personally valuable goals are highly subjective. The research facilitator emphasized the significance of personal meaning and value, which stimulates intrinsic motivation to act or the willpower dimension of hope. The participants learned to break down break down their goals into smaller, more manageable goals, a process called *stepping*. Physical health and fitness programs commonly include *stepping* process (Luthans et al., 2013). Setting realistic but challenging goals is a fundamental principle for developing self-efficacy (Mark, 2014).

The intent of the second session was for each participant to achieve a level of taskmaster (*efficacy building*) by targeting a personally relevant goal and dividing it into smaller, more manageable goals (Luthans et al., 2013). Explicitly or implicitly, the session included creative problem solving, as the participants received encouragement to think of various pathways by which to attain their goals and draw up contingency plans for surmounting prospective problems and obstacles. The overarching intent of the intervention was to synthesize the two sessions into a developmental strategy integrating the four PsyCap components to build capabilities of the participants (Luthans et al., 2013).

As Luthans, Avey, Avolio, and Peterson (2013) explicitly recruited participants for an online intervention, the control group was also actively engaged in a developmental program, although of a different type. Using the same multimedia channels, the facilitator involved the control group participants in a leadership decision-making exercise. The intent reflected on the choices and feedback in the first session, followed by further reflection and opportunities to revise those choices in response to the feedback in the second session. The facilitator then proposed various solutions and discussed the implications of the exercise for successful decision-making. Although Luthans et al. (2013) referred to the group as a control group, the term comparison group might prove more appropriate, given the participants engaged in a valuable and empirically sound developmental exercise (Luthans et al., 2013).

Luthans, Avey, Avolio, and Peterson (2013) used the PCQ to assess psychological capital assessment. The findings demonstrated the intervention participants scored significantly higher on the four PsyCap capabilities from the pretest to the posttest assessment. The success of the program received a boost from the positive benefits held after controlling for demographics and job status. No significant increase occurred in PsyCap among the control group participants). Although the researchers specifically tested the web-based PsyCap intervention, the use of additional assessment tools and a comparison group design could have illuminated the prospective advantages of PsyCap over more conventional leadership development strategies. Probabilities existed that the control group participants experienced increases in self-efficacy in areas related to decision-making and creative problem solving.

The study results served its intended purpose and provided preliminary support for the online delivery of a PsyCap intervention (Luthans et al., 2013).

To further the research on PsyCap, Luthans et al. (2013) conducted a pilot study to examine whether PsyCap could develop through a brief training program. A pilot study of managers involved an examination of the effects of the intervention into superior job performance. The participants for the pilot study were 242 advanced management students attending a large Midwestern university. Luthans, Avey, Avolio and Peterson (2013) randomly selected participants' assignment to the intervention group or the control group.

As in the online study of PsyCap, the participants learned they would engage in leadership development training (Avey et al., 2013). The students in the intervention group began with the session on efficacy and hope, followed by the session on optimism and resilience, while other groups received the training in the reverse order. (Different couplings from the sessions existed in the online intervention. The control group participants engaged in an intervention on group decision-making (Luthans et al., 2013).

The results confirmed the intervention group participants experienced significant gains in PsyCap, which did not occur in the control group (Avey et al., 2013). For the main study, Luthans, Avey, Avolio, and Peterson (2013) recruited a sample of 80 managers from various organizations to engage in a public service leadership-training workshop (Avey et al., 2013). All managers received the PsyCap intervention, which was largely the same as the program they used for the pilot study but with examples more pertinent to the managers' real world situations. The manager study included self-reported

performance ratings and performance ratings by the participants' managers taken one week before and 1 week after the PsyCap training program (Luthans et al., 2013).

Taken together, results from the online study, the pilot study, and the manager study provided compelling evidence that PsyCap resources could emerge from a brief training program (Luthans et al., 2013). The managers in the study offered preliminary evidence proving training program could improve employee performance at work. Both the self-reported and superior-reported measures of work performance include significant improvements after the training sessions (Luthans et al., 2013).

Further evidence of the benefits of PsyCap in a study of employees' psychological well-being included a sample of 280 participants who had responded to requests for participation in an online survey (Jiang et al., 2012). The survey included questions measuring employee attitudes and behaviors, as well as organizational performance (Jiang et al., 2012). In addition to the Participants Survey Questionnaire (PSQ), the participants completed the Index of Psychological Well-Being (PWB) and the General Health Questionnaire (GHQ-12). Designed to capture the benefits of positive psychological capital over time, the study results included respondents at two time points, three weeks apart (Jiang et al., 2012). The study involved the selection of a three-week period based on the theory. The questionnaire was long enough to observe some variations in psychological well-being while still sustaining the interest of the participants to prevent attrition. As in other studies of PsyCap (Luthans et al., 2013), the participants represented wide range of industries, organizations, and job positions (Jiang et al., 2012).

PsyCap had relationships with both measures of psychological well-being, with the relationship holding over time. Disparities existed in the way the two instruments assessed psychological well-being. The Index of PWB includes the emotional aspects of PWB, while the GHQ aligned more with the cognitive elements (Jiang et al., 2012). Based on the analysis, the Index's assessment of PWB is more effectively in the association between PsyCap and PWB. No indication exist that PsyCap caused PWB, PsyCap accounted for a unique degree of variation in PWB (Jiang et al., 2012).

Jiang et al., (2012) assumed a relationship between employees' psychological well-being and their positive behaviors at work (). Some evidence showed that PsyCap had a positive impact on work performance, at least, among managers (Luthans et al., 2013). Successive qualitative studies of PsyCap should include the relationship between PsyCap and job performance among a more heterogeneous sample of employees (Jiang et al., 2012). Sufficient evidence existed supporting the assertion that training in PsyCap would be a valuable enhancement to HRM efforts to improve employees' attitudes and performance. Managers use stress management programs to proliferate, but with mixed success (Avey et al., 2013). Innovative new programs with empirical support would reveal a welcome addition to the HRM repertoire.

Summary and Transition

Business decision makers are investing in strategies to create a healthy work organization (Spreitzer & Porath, 2012). The reason-for investing strategies is the soaring health care costs and rampant employee stress. Employees with chronic absenteeism, presenteeism, and turnover contribute financial and human costs. Using the model of

primary, secondary, and tertiary prevention and intervention, employers can take numerous courses to promote their employees' physical and psychosocial health. Empowerment practices such as redesigning work, involving employees in decision-making, providing feedback and learning opportunities, and fostering a culture marked by collaboration and teamwork are effective primary strategies for the promotion of wellness implemented at the organizational or unit level (Spreitzer & Porath, 2012).

Wellness programs and stress management programs include primary and secondary prevention strategies. (Spreitzer & Porath, 2012). Since the 1970s, substantial increases have taken place in both the levels of stress experienced by employees and the numbers and types of available programs. Cognitive-behavioral interventions seem effective for reducing stress. Relaxation programs are more popular and innovative mind-body interventions showing promising results (Wolever et al., 2012).

Evidence on workplace wellness programs reveals high levels of enthusiasm and satisfaction among program participants, but in many cases, low levels of participation. As a result, increasing emphasis on incentive programs occurred with a marked trend toward linking incentives with health outcomes (Howard, 2012). Decision makers of some firms have seen significant declines in health care related costs as a result. Less than half the organizational leaders with wellness programs evaluate their programs (Colling, 2012; Willis North America, 2011). Data from business operators who have conducted evaluations reveal a substantial ROI in terms of decreases in health costs and improvements in productivity (Howard, 2012). With numerous variables, an understanding of the precise relationship between employee health and productivity is

elusive. Sufficient empirical support exists when establishing a connection between the variables of employee health and the productivity of the employee.

Section 2: The Project

Employee or job satisfaction is a measure of an employee's feelings and perceptions about his or her job (Connolly & Myers, 2012; Fadzilar et al., 2012). Employees quit or experience mood change in working if factors of satisfaction are missing from their work environments. On the part of a faculty member, relenting would involve applying a nonchalant attitude to teaching tasks and student counseling. Relenting could also involve absenteeism on that has no professional justification (Kossek et al., 2012). The circumstances could lead to organizational decline (Connolly & Myers, 2012; Sieberhagen et al., 2011).

Management who implement wellness programs for their employees could improve job satisfaction and thereby performance (Field & Johann, 2012). Research has found that employees in wellness programs are psychologically and physically more proficient than those who are not psychologically and physically well (Fadzilar et al., 2012; Field & Johann, 2012; Kossek et al., 2012; Sieberhagen et al., 2011). Sieberhagen and colleagues found that wellness program participants tend to have a higher degree of contentment and hardworking compared to employees who did not participate in wellness programs.

Purpose Statement

The purpose of the quantitative correlational study was to examine the relationship between employer-sponsored wellness-program participation status and job

satisfaction among for-profit college and university leaders. The results could determine the effectiveness of employee satisfaction and wellness programs among full-time or part-time faculty. The independent variables are wellness-program participation status (WP), gender (GEN), years of teaching experience (YoE), and age (AGE). The dependent variable is job satisfaction.

Role of the Researcher

Owing to the quantitative methodology of the study, Marshall and Rossman, (2013) describe the researcher as the primary means of data collection, organization, interpretation, and analysis. The presence in the study is normally passive. In the role as an observer and a nonparticipant, I merely uploaded the instrument to the web platform where participants logged on to answer questions. I did not influence the development or delivery of instrument to, nor did I influence the responses from the participants. However, at the beginning of the study, and in accordance with the sampling process, I explained the requirements for participating in the study. No relationship existed between study participants and me. Participants accessed the data collection instrument uploaded to the World Wide Web. I monitored the participant responses until the data collection process ended.

Downloading the data from Survey Monkey® initiated the data analysis activity. Gender or racial biases did not constitute factors in the study (Leitch et al., 2013). I had a key responsibility to protect and uphold the participants' rights, which remained paramount throughout the study. Participants did not suffer negative consequences from

their participation in the study. Any interaction in the recruiting process remained professional and cordial.

Participants

The strategy for gaining access to participants in a study often depends on the community of the researcher (Emmerton, Fejzic, & Tett, 2012). For the purpose of the study, accessing full-time or part-time faculty members at the qualified universities were required the use of the SurveyMonkey® online platform to communicate with the prospects. I monitored SurveyMonkey® platform to capture information from interested prospects. Prospective research subjects often show interest in participating, especially after they understand the significance of the study, as well as the potential for improving working conditions and enhancing job satisfaction (Emmerton et al., 2012)

Notifications pertaining to the study sent to participants through e-mail 2 weeks in advance of the data collection. Before commencing the data collection process, participants might receive further communication, if needed. Such possible additional communication would arise when prospective participants seek clarifications prior to participation. The interactions can help to establish a working relationship with participants prior to data collection. The schedule did not appear rigid and might change according to the availability of the participants. Participants should have the opportunity to express opinions or complaints and receive respectful responses (Emmerton et al., 2012). In case of unanticipated emergencies and eventualities precluding participants from the study, immediate arrangements for replacement took place.

Measures for ethical adequate protection of participants involved securing participants' personal information on two occasions: (a) at the time of recruitment, and (b) when participants logged in to SurveyMonkey® site to complete forms and take the survey. Participants received respect, consideration, and gratitude for the sacrifices involved in completing the survey. Extending adequate protection to participants includes sharing information on selection criteria and plans for disseminating the study results (Emmert et al., 2012).

The process of data retention included protecting the rights of the participants. The plans involved storing data in password-protected computer disks or flash drives. Filing cabinets and safes house the raw data. Passwords and other security processes are means to ensure that only I have access to both raw and public-ready data. Only I know the access combination for safes used for data storage and securing participant personal information from undue exposure before, during, or after the research study.

The population for the study consisted of for profit university and college professors in the United States. The accessible population consisted of available participants through SurveyMonkey®. I employed a purposeful sampling method (Bozeman & Gaughan, 2011). The use of demographic survey on SurveyMonkey® enable individuals who meet the selection criteria as college faculty to go through screening and recruitment (Kennedy, Kass, Myers, Fuchs, & Flexner, 2011). The sample size for the study was 292. Further justification of the sample size is available in the Population and Sample Size heading.

Ethical standards were upheld collecting data; Walden University IRB approval came before conducting the research (No. 09-02-15-0310113), Participant names did not appear on any document. I used codes to represent such names to protect their privacy. All participants remained anonymous, and the responses remained confidential.

A printable version of the informed consent will remain available through a hyperlink to participants who prefer a print version. If a prospective participant agrees to take part in this research study, the electronic survey configuration prohibited proceeding with the survey until the individual asserts he or she is willing to participate in the study (Kennedy et al., 2011). The participants must have reached 18 years or older, and a faculty member, full-time or part-time, from a college or university in the United States. Participants had the right to decline participation in the research study (Kennedy et al., 2011). The indication of IRB approval also appeared on the first page that opens when prospective participants click on the survey invitation hyperlink provided by e-mail.

Research Method and Design

The three essential types of research methods are qualitative, quantitative, and mixed methods. The most appropriate research method for a study is associated on with the type of data in need to address the research question (Marshall & Rossman, 2013). In examining the relationship between wellness-program participation (WP), gender (GEN), years of teaching experience (YoE), and age (AGE), the results may show what factors worksite wellness programs. Examining the level of job satisfaction among the university faculty members across the United States warrants an examination. Justification for the appropriate method and design follows.

Research Method

The quantitative research methodology was appropriate for the study because I wanted to address research questions answerable with statistical procedures. The quantitative methodology is also useful when obtaining information from a large cross-section of participants. Quantitative researchers use statistical procedures to evaluate relationships among the various distinct variables in the study (Salehi & Golafshani, 2013). The quantitative method embodies rational philosophical assumptions that include the statistical significance of the relationships among variables in answering the research question (Marshall & Rossman, 2013).

A qualitative research method was not appropriate for addressing the research question because qualitative methods include the exploration of in-depth responses from participants who have experienced the phenomenon of interest. Qualitative research is more subjective than objective (Horner & Minifie, 2011). The qualitative research method includes personal interaction with some level of subjectivity to enable the researcher to make connections not possible in the course of quantitative research activities (Ostlund et al., 2011).

The results of the research may identify potential relevant characteristics (such as level of job satisfaction) to include in further studies for examining if two or more variables correlate. The quantitative methodology is also useful when obtaining information from a large cross-section of participants (Salehi & Golafshani, 2013). Quantitative researchers use statistical procedures to evaluate relationships among the various distinct variables in the study.

Research Design

The design for the study was correlational. Diverse types of quantitative designs are available and the choice of design rests on how a researcher interacts with participants (Marshall & Rossman, 2013). Quantitative designs include experiments, quasi-experiments, and surveys, among others. The resultant designs fall into two categories based on the data collection approach, communication, or observation. Marshall and Rossman (2013) described that a researcher may either observe events or communicate with participants about topics and expectations (Marshall & Rossman, 2013). The appropriate category of techniques depends on the data needed to answer the research question. The correlational design may include descriptive output with charts, graphs, and tables to elucidate findings (Frels, & Onwuegbuzie, 2013).

Using surveys in quantitative research studies include a meaningful description of attitudes, trends, and opinions by evaluating the factors related to a relevant sample of the target population (Lakhmir & Kishore, 2014). The survey instrument is the tool to reveal the behavior of each variable in the study. A generalization of the findings from a sample to the population is an objective for quantitative designs (Szyjka, 2012). Quantitative online survey was appropriate for the current study as I was interested in collecting data from a large pool of prospective participants. Quasi-experimental and experimental designs were not appropriate for the study because I was not in search of causation (Horner & Minifie, 2011).

Population and Sampling

The population for the study consisted of college and university faculty across the United States selected from a purposeful sampling method. This sampling method is appropriate because sampling is the processes to pre- identify the criteria for participants, and solicitation efforts can reflect the criteria (Marshall & Rossman, 2013). At any point during the survey, participants had an opportunity to withdraw from the study by closing the web browser and effectively end their participation (Lakhmir & Kishore, 2014). Participants did not receive an incentive or reward for their participation. Participants' responses remain available in a transcribed report, according to recommendations in the Consort statement by Kennedy et al. (2011).

A priori analysis using G*Power version 3.1.9. 2 software was necessary to justify the appropriate sample size for the study (Faul, Erdfelder, Buchner, & Lang, 2013). No prior literature was identified to suggest the expected effect size. Instead, the study was limited by the size of the available population and the anticipated voluntary response rate. The anticipated achievable sample size for the study is 292. Considering the study's three hypotheses will test on a conservative alpha level of .05, an alpha level of .017 or below ($.05/3 = .017$) was selected based upon the Bonferroni adjustment (Emmertson et al., 2012). An a priori power analysis, assuming a sample size of 292, indicated an effect size of $f^2 = .036$ (a small to medium effect size) is detectable with 80% power at the .017 level of significance. Thus, a sample size of 292 is justifiable for detecting small to medium effect sizes for Hypotheses 1–3 (Lind, Marchal, & Wathen, 2012). Participating individuals must have attained the age of 18 or older and have

worked for universities at faculty level. Prospects must work within the United States. When a prospective participant agrees to take part in the research study, the electronic survey configuration prohibited the participant from proceeding with the survey until the individual answers the following eligibility criteria questions (See Appendix A).

Ethical Research

The consent process involved issuing prospects with the informed consent form. The form provided the participants with all the necessary information pertaining to the protection of their rights in this research study (Lakhmir & Kishore, 2014). All participants remain anonymous, and all participants' responses remain confidential data (Matheson, Forrester, Brazil, Doherty, & Affleck, 2012). The first webpage that opens when prospective participants click on the survey invitation hyperlink contained the informed consent form. A hyperlink to a printable version of the informed consent document is available to participants who prefer a print version document. Obtaining the approval of the Institutional Review Board (IRB) at Walden University was a necessary step before contacting participants. The IRB team ensured the right steps are in accessing participants, using participant personal information, storing and securing such information, and expunging all personal information.

Subjects had the right to decline participation in the research study data (Matheson et al, 2012). At any point during the survey, participants had an opportunity to withdraw from the research by closing the website browser and effectively ending the research inquiry. Participants did not receive any incentive or reward to participate in this research study. To protect the rights of participants, research findings did not include

names of individuals and organizations data (Matheson et al., 2012). Data will remain secure within a filing cabinet to which I alone have access for 5 years following the completion of the study (Lakhmir & Kishore, 2014).

Data Collection Instruments

The instrument for the study included the Job Satisfaction Survey (JSS) instrument listed in Appendix A. I chose the JSS instrument because of its appropriateness in assessing overall job satisfaction of employees. An instrument was used to enable the measuring associations among variables involving individuals within for-profit colleges and universities.

Concepts measured by the instrument. The Job Satisfaction Survey is an instrument for measuring job satisfaction in public and private organizations (Spector, 1985). Organizations for the study included for-profit colleges and universities. The 36-item scale assesses nine components of job satisfaction: pay, promotion, supervision, benefits, contingent rewards, operating procedures, coworkers, nature of work, and communication. The scale also includes a score for overall satisfaction (Spector, 1985).

Calculating scores and their meanings. The JSS consists of 36 items with each question having a 6-point Likert scale, anchored with 1 (Strongly Disagree) to 6 (Strongly Agree). Scoring the JSS consists of reverse coding a number of negative worded items (see Appendix A) and summing all responses. Lower scores indicate less overall job satisfaction while higher scores indicated more overall job satisfaction (Spector, 1985).

Processes for assessment of reliability and validity of the instrument.

Cronbach alpha coefficients were to determine the internal consistency of the JSS instrument. Seven of the subscales had alpha coefficients greater than .70 – indicating acceptable degree of reliability, with an alpha coefficient of .91 for the total scale. Test–retest correlations served to determine the stability of the instrument over time. The correlations for an 18-month time span would range from .37 to .74, which were adequate given the length of time between test and retest. The instrument receives testing for discriminate and convergent validity, and found to be a valid measure of job satisfaction (Bozeman & Gaughan, 2011).

Processes needed participants to complete instrument. Participants accessed the instrument on the Survey Monkey® web site and completed the survey. Participants received an e-mail invitation to participate and a link to the online survey. Participants read the informed consent, and, if they agreed, and met all qualification criteria, the participants completed the survey questions online.

Raw data availability. The data came from the Survey Monkey® web site. Upon completion of data collection, I inputted the data into an excel spreadsheet and imported it to SPSS for analysis. Upon completion of the study, the Survey Monkey® data receive deletion, and the EXCEL and SPSS data will remain safe and secure for 5 years on a thumb drive in a locked file cabinet accessible to the researcher only.

Variables

Independent variable. Wellness Program (WP): Measurement of this categorical variable remained on a categorical scale with two categories. The study participant's

worksite wellness program participation status has the numerical values 0 = non-participant, or 1 = participant. The independent variables are wellness-program participation (WP), gender (GEN), years of teaching experience (YoE), and age (AGE).

Control variables. Gender (GEN): Measurement of this categorical variable remained on a categorical scale with two categories. The study participant's gender have the numerical values 0 = female, or 1 = male. Years of Experience (YoE): Measurement of this variable will have a ratio measurement scale. Age (AGE): I measured this variable on continuous measurement scale. The study participant's age in years will also have numerical values.

Dependent variable. Job Satisfaction (JS): This variable receives measuring on an interval measurement scale with a range of 36 to 216. This measure derived from summing the responses to questions 1-36 from the Job Satisfaction Survey (JSS) questionnaire. Response choices received coding as 1 (Strongly Disagree); 2 (Moderately Disagree); 3 (Slightly Disagree); 4 (Slightly Agree); 5 (Moderately Agree); 6 (Strongly Agree). Questions 2, 4, 6, 8, 10, 12, 14, 16, 18, 19, 21, 23, 24, 26, 29, 31, 32, 34, and 36 received reverse coding prior to computing the score. Specifically, the reverse coded questions received coding as 6 (Strongly Disagree); 5 (Moderately Disagree); 4 (Slightly Disagree); 3 (Slightly Agree); 2 (Moderately Agree); 1 (Strongly Agree). Lower scores indicated less overall job satisfaction while higher scores indicated more overall job satisfaction (Spector, 1985).

Data Collection Technique

The data collection technique involved the use of a Web-based cross-sectional survey (Appendix A) managed by Survey Monkey®. Participants provided responses by clicking on options provided or typing answers. I employed SurveyMonkey® Web-based solutions for collecting, organizing, and classifying participant responses. The SurveyMonkey® product is a platform compatible with SPSS for data submission and analyses.

Data Organization Technique

Data organization commenced at the time of participant solicitation and recruitment (Emmertson et al., 2012). Names of individuals and institutions have numeric coded identifiers for the purposes of participant protection. Such organization of data became possible with research logs, cataloging, and labeling systems.

I used cataloging systems to store participant categories based on participant demographic characteristics and plan to keep in storage for 1 year for the purposes of reference and verification (Emmertson et al., 2012). Other data pertaining to this study will remain in a safe storage container for 5 years before destruction. After fulfilling all the research purposes, destruction of raw and data will occur through anti-waste and anti-pollution (Emmertson et al., 2012).

Data Analysis

The overarching research question is what, if any, relationship exists between the (a) wellness-program of full-time or part-time faculty participation status (WP), (b)

gender (GEN), (c) years of teaching experience (YoE), (d) age (AGE), (e) job satisfaction.

The following subresearch questions (SRQs) are also relevant for addressing the study's purpose:

SRQ 1. What, if any, relationship is there between wellness program participation, and job satisfaction?

SRQ 2. What relationship, if any, is there between the wellness program participation, gender, and job satisfaction?

SRQ 3. What relationship, if any, is there between the wellness program participation, years of experience at the job, and job satisfaction (JS)?

SRQ 4. What relationship, if any, is there between the wellness program participation, years of experience at the job, and job satisfaction (JS)?

Hypotheses

H1₀: There is no relationship between the wellness program participation, and job satisfaction (JS).

H1_a: There is a relationship between the wellness program participation, and job satisfaction (JS).

H2₀: There is no relationship between the wellness program participation, gender, and job satisfaction (JS).

H2_a: There is a relationship between the wellness program participation, gender, and job satisfaction (JS).

H3₀: There is no relationship between the wellness program participation, years of experience at the job, and job satisfaction (JS).

H3_a: There is a relationship between the wellness program participation, years of experience at the job, and job satisfaction (JS).

H4₀: There is no relationship between the wellness program participation, age, and job satisfaction (JS).

H4_a: There is a relationship between the wellness program participation, age, and job satisfaction (JS).

I employed all statistical analyses using SPSS for Windows (IBM SPSS 19.0, SPSS Inc., Chicago, IL). The hypotheses tests two-sided with a 0.05 alpha level; describing the demographic characteristics of the study sample involved the use of mean, standard deviation, and range for continuous scaled variables, as well as using the frequency and percentage for categorical scaled variables. Cronbach's alpha served in measuring the internal consistency and reliability of the job satisfaction score (Marshall & Rossman, 2013). By reporting the results, I may contribute important information to other researchers about the reliability of the instrument for the subject population. Correlational hypothesis testing is appropriate to analyze the relationship between the independent variable, participation in a worksite wellness program, and the dependent variable job satisfaction (Allwood, 2012).

All hypotheses 1-4, I used multiple linear regression analysis test these hypotheses. Power analysis for multiple linear regression analysis is the amount of change in R^2 attributed to the variables of interest. Cohen (2013) described that in the

Statistical Power Analysis for the Behavioral Science, small, medium and large effect sizes for hypothesis tests about R^2 are $R^2 = 0.0196$, $R^2 = 0.13$ and $R^2 = 0.26$ respectively. A sample size of 292 achieves 80% power to detect an R^2 of .090. Which is a medium effect size, attributed to two independent variables (e.g., WP and gender) using an F-test with a significance level (alpha) of 0.05. Thus, a sample size of 292 is justifiable for detecting medium effect sizes for hypotheses 1-4.

The dependent variable in the regression model is the job satisfaction score. The independent variables are the status of participation in worksite wellness program (WP) and the control, variable show gender. I entered both WP and gender into the model simultaneously. If WP is statistically significant, then I rejected the null hypothesis. In conclusion, when controlling for gender, a statistically significant relationship exists in the average level of job satisfaction between college and university faculty members who participate in a worksite wellness program and those who do not participate. I reported the equation of the model, and interpret statistically significant regression coefficients and present and interpret R^2 for the final model.

Coding

Independent variable. Wellness Program Participation (WP): Measurement of this variable reflects two categories: 0 = non-participant, or 1 = participant.

Control variables/covariates. Gender (GEN): Measurement of this variable is on a categorical scale with two categories. The study participant's gender had the numerical values 0 = female, or 1 = male.

Years of Experience (YoE). I measured the variable on an interval measurement scale. I recorded study participant's years of experience as a college or university faculty member.

Age (AGE). I measured this variable on an interval measurement scale. The study participant's age in years, also have numerical values.

Dependent variable. Job Satisfaction (JS) undergo measurement on an interval measurement scale with a range of 36 to 216. The measure is deriving by summing the responses to questions 1-36 from the Job Satisfaction Survey (JSS) questionnaire. Response choices remain coded as 1 = Strongly Disagree; 2 = Moderately Disagree; 3 = Slightly Disagree; 4 = Slightly Agree; 5 = Moderately Agree; 6 = Strongly Agree. Questions 2, 4, 6, 8, 10, 12, 14, 16, 18, 19, 21, 23, 24, 26, 29, 31, 32, 34, and 36 underwent reverse coding prior to computing the score. Specifically, the reverse coded questions had the following representation 6 (Strongly Disagree); 5 (Moderately Disagree); 4 (Slightly Disagree); 3 (Slightly Agree); 2 (Moderately Agree); 1 (Strongly Agree). Lower scores indicated less overall job satisfaction while higher scores indicated more overall job satisfaction.

Presentation of the results of the data analyses involved the use of charts, graphs, and tables for interpretation and explanation of findings (Marshall & Rossman, 2013). The relationship between data and the theoretical framework of the study relied on Maslow's hierarchy of needs as a measurement of faculty satisfaction that might arise from participation in the university's wellness program. The different levels of Maslow's needs hierarchy may prove helpful in ascertaining how many notches a faculty member

may have moved (either up or down the hierarchy) because of participation in wellness programs.

Study Validity

Construct validity is about identifying the correct operational measures for the concepts being studied (Yin, 2013)). Operational measures help to reduce subjectivity in the study (Ronau, Rakes, Bush, Driskell, Niess, & Pugalee, 2014). Sufficient operational measures for construct validity are multiple sources of evidence, a chain of evidence, and key informant review of a draft of the case study report (Ronau et al., 2014). Readers of the study should readily identify clearly how the researcher concluded from the chain of evidence. The chain of evidence begins with raw data collected from participants. Raw data undergoes analysis, and from that coded data, the researcher is able to answer the research questions.

Internal validity. Inference occurs anytime direct observation of an event is not feasible (Yin, 2013). In the study, my role was not to observe any operations to determine how sustainability occurs at an organization that designed as sustainable from its inception. Instead, the role was studying how the participants practice sustainability by interviewing those participants. Ronau et al. (2014) described that the researcher as needing to work toward maintaining internal validity by considering if the inferences are correct, if other explanations exist, if participant answers make sense, and if participant responses share similar themes.

External validity. External validity includes generalizability of the study (Yin, 2013). The results of the study should come as analytically generalizable and

meaningful. Findings could come out of the context of the study and still applicable at other organizations (Ronau et al., 2014). External validity is not automatic. External validity occurs when other researchers complete similar studies. When other practitioners apply the findings of the study to other organizations, the validity becomes external (Ronau et al., 2014).

Summary and Transition

Section 2 includes the purpose of the study as well as my role as researcher. Participant selection, sampling method, sample size, and ethical protection of participant rights were paramount in the section. The informational results of the section reconfirmed the study's use of a quantitative method rather than qualitative or mixed methods. The need arose to explain the plan for seeking a correlation between participation in a university's wellness program and level of satisfaction that a faculty member acquired. The section includes sampling procedures, data collection, instrument, data organization, and analysis techniques.

Section 3 included the presentation of findings, application to professional practice, implications for social change, and recommendations for action. Recommendations for further study and my reflections constituted the closing portions of the section.

Section 3: Application to Professional Practice and Implications for Change

Introduction

The purpose of the quantitative correlational study was to examine the relationship between employer-sponsored wellness-program participation and job

satisfaction for faculty at for-profit colleges and universities. This section includes a presentation of the findings, application to professional practice, directions for future research, and implications for social change. Finally, reflections, a summary, and conclusions close the study.

The research study findings revealed that job satisfaction factors and job dissatisfaction factors had statistically significant relationships with employee turnover intentions. Both factors showed different magnitude of relationships with employee turnover intentions. In job satisfaction factors, employee responsibility (-.52) had the highest statistical significant relationship with employee turnover intentions, followed by achievement (-.49), recognition (-.37), work itself (-.34), and advancement and growth (-.26). In job dissatisfaction factors, company policy (-.52) had the highest magnitude of relationship with employee turnover intentions, followed by working condition (-.51), salary (-.42), interpersonal relationship (-.39), and supervision (-.37). On the other hand, the criterion variance of employee turnover intentions showed that job dissatisfaction factors had higher influence than job satisfaction factors

Presentation of the Findings

Interpretation of Findings

Using frequency distributions, I summarized the participants' responses regarding their participation in their college and university's wellness programs. Table 2 presents the results of this analysis.

Table 2

Frequency Distributions – Participation in Wellness Program

Participation in Wellness Program	Number	Percent
Yes	35	34.0
No	57	66.0
Total	103	100.0

The majority of the respondents ($N = 57, 66.0\%$) were not participating in their college and university's wellness programs. The remaining 35 (34%) faculty members indicated that they were participating in these programs. The gender and age of the participants receive cross-tabulation by their participation in their college and university's wellness programs. The results of the analyses are in Table 3.

Table 3

Cross tabulations – Age and Gender by Participation in Wellness Programs

Age and Gender	Participation in Wellness Programs					
	Yes		No		Total	
	<i>N</i>	%	<i>N</i>	%	<i>N</i>	%
Age						
21 to 29	3	8.6	2	2.9	5	4.9
30 to 39	10	28.5	9	13.2	19	18.4
40 to 49	5	14.3	23	33.9	28	27.2
50 to 59	12	34.3	20	29.4	32	31.1
60 and over	5	14.3	14	20.6	19	18.4
Total	35	100.0	68	100.0	103	100.0
Gender						
Male	17	48.6	25	36.8	42	40.8
Female	18	51.4	43	63.2	61	59.2
Total	35	100.0	68	100.0	103	100.0

Of the five (4.9%) participants who were between 21 and 29 years of age, 3 (8.6%) were participating in wellness programs and 2 (2.9%) were not participating in these programs. Nineteen (18.4%) of the participants were between 30 and 39 years of age, with 10 (28.5%) participants in this age group indicating they were participating in their college/universities wellness programs and 9 (13.2%) were not participating in these programs. Five (14.3%) of participants who were between 40 and 49 years of age were participating in wellness programs and 23 (33.9%) of participants in this age group were not participating. Thirty-two (31.1%) of the participants were between 50 and 59 years of age. From the number, 12 (34.3%) were participating in their college and university's wellness programs and 20 (29.4%) were not participating. Among the participants who were 60 years of age or older ($N = 19$, 18.4%), 5 (14.3%) were participating in their college and university's wellness programs and 14 (20.6%) were not participating in these programs.

The majority of the participants ($n = 61$, 59.2%) was female. The number included 18 (51.4%) females who were participating in the wellness programs at their colleges and universities' and 25 (36.8%) who were not participating in these programs. Seventeen (48.6%) participants in wellness programs were male. Twenty-five (36.8%) of the male faculty members were not participating in these programs.

The participants provided their professional characteristics on the survey. The responses of the participants receive cross-tabulation by participation in their college and university's wellness programs. Table 4 presents the results of this analysis

Table 4

Cross tabulations – Professional Characteristics by Participation in Wellness Programs

Professional Characteristics	Participation in Wellness Programs				Total	
	Yes		No		N	%
	N	%	N	%		
Years as a faculty member	13	37.2	23	33.8	36	35.0
0 to 5 years	7	20.0	20	29.4	27	26.2
6 to 10 years	4	11.4	10	14.7	14	13.6
11 to 15 years	11	31.4	15	22.1	26	25.2
15 years or longer	35	100.0	68	100.0	103	100.0
Total						
Years in wellness program	4	11.8	38	100.0	42	58.3
NA	9	26.5	0	0.0	9	12.5
1 to 2 years	12	35.2	0	0.0	12	16.7
3 to 5 years	9	26.5	0	0.0	9	12.5
5 years of more	34	100.0	38	100.0	72	100.0
Total	1		30			
Missing						

Of the 36 (35.0%) participants who had worked from 0 to 5 years as a faculty member, 13 (37.2%) were participating in the wellness program at their college/university and 23 (33.8%) were not participating in these programs. Twenty-seven (26.2%) of the participants had from 5 to 10 years as a faculty member. Of this number, 7 (20.0%) were participating in wellness programs and 20 (29.4%) were not participating in these programs. Four (11.4%) of faculty members who had from 11–15 years' experience were participating in their college/universities' wellness programs, with 10 (14.7%) participants with this length of experience were not participating in these programs. Of the 26 (25.2%) faculty members who had 15 years or more experience, 11

(31.4%) were participating in the wellness programs at their college/universities and 15 (22.1%) were not participating in these programs.

The participants, when asked the number of years in which they had participated in the wellness programs, 4 (11.8%) in the group that indicated they had participated responded not applicable (na). Twenty-three (33.8%) in the group who indicated they had not participated indicated na. Nine (26.5%) of the participants who had participated in the wellness programs reported they participated for 1 to 2 years, with 9 (26.5%) reporting they had participated for 3 to 5 years, and 9 (26.5%) indicating they had participated for 5 years or more. One person in the group that had participated in the wellness programs did not provide a response to this question and 30 who were in the group that had not participated did not answer this question.

After recoding the values on the selected items on the survey, I obtained descriptive statistics to provide baseline information regarding the levels of job satisfaction between the faculty members who were participating in the wellness programs at their colleges and universities and those who were not participating in these programs. Table 5 presents the results of this analysis.

Table 5

Descriptive Statistics – Job Satisfaction by Group Membership

Group	Number	Mean	SD	Median	Range	
					Minimum	Maximum
Participated in wellness program	35	3.80	.52	3.69	3.11	5.42
Did not participate in wellness programs	68	3.62	.32	3.62	2.78	4.64

The mean score for job satisfaction for faculty members who participated in the wellness programs was 3.80 (SD = .52), with a median of 3.69. The range of scores was from 3.11 to 5.42. Among the faculty members who did not participate in the wellness programs, the mean score was 3.62 (SD = .32) with a median of 3.62. The actual scores on this subscale could range from 2.78 to 4.64. Possible scores on this scale could range from 1.00 to 6.00, with higher scores indicating greater job satisfaction.

Research Questions and Hypotheses

Four research questions existed with the associated hypotheses in this study. Each of these questions was address using multiple linear regression analyses, with all decisions on the statistical significance of the findings made using a criterion alpha level of .05.

SRQ 1. What if any, relationship is there between the employer-sponsored wellness program participation status, and job satisfaction?

H1₀: There is no relationship is there between the employer-sponsored wellness program participation status, and job satisfaction (JS).

H1_a: There is a relationship is there between the employer-sponsored wellness program participation status, and job satisfaction (JS).

A linear regression analysis used to determine if a statistically significant relationship existed between participation in a wellness program and job satisfaction. The results of this analysis presented in Table 6.

I used a linear regression analysis to determine if a statistically significant relationship existed between participation in a wellness program and job satisfaction. The results of this analysis are in Table 6.

Table 6

Linear Regression Analysis – Job Satisfaction and Participation in Employer-Sponsored Wellness Programs

Predictor	Constant	<i>b</i> - Weight	β - Weight	R^2	<i>t</i>	Sig
Participate in wellness program	3.99	-.19	-.22	.05	-2.24	.027
Multiple <i>R</i>	.22					
Multiple R^2	.05					
<i>F</i> Ratio	5.01					
<i>DF</i>	1,101					
Sig	.027					

Participation in the wellness program was accounting for 5% of the variance in job satisfaction, $F(1, 101) = 5.01, p = .027$. The negative relationship between job satisfaction and participation in the employer-sponsored wellness program ($\beta = -.22, t = -2.24, p = .027$) indicated that faculty who were not participating in the wellness program tended to have higher levels of job satisfaction. This finding provided support to reject the null hypothesis that job satisfaction related to participation in employer-sponsored wellness programs.

SRQ 2. What relationship, if any, is there between the employer-sponsored wellness program participation status, gender, and job satisfaction?

H_{20} : There is no relationship between the employer-sponsored wellness program participation status, gender, and job satisfaction (JS).

H2_a: There is a relationship between the employer-sponsored wellness program participation status, gender, and job satisfaction (JS).

A multiple linear regression analysis used to determine if participation in an employer-sponsored wellness program and gender could lead to the prediction of job satisfaction. The results of this analysis presented in Table 7.

Table 7

Multiple Linear Regression Analysis – Job Satisfaction, Participation in Employer-Sponsored Wellness Programs, and Gender

Predictor	Constant	<i>b</i> - Weight	β - Weight	R^2	<i>t</i>	Sig
Participate in wellness program	4.29	-.16	-.19	.11	-1.98	.050
Gender		-.21	-.26		-2.70	.008
Multiple <i>R</i>	.33					
Multiple R^2	.11					
<i>F</i> Ratio	6.29					
<i>DF</i>	2,					
Sig	100					
	.003					

Together, participation in an employer-sponsored wellness program and gender of the faculty member were accounting for 11% of the variance in job satisfaction, $F(2, 100) = 6.29, p = .003$. The negative relationship between participation in the wellness program and job satisfaction ($\beta = -.19, t = -1.98, p = .050$) provided support that faculty who did not participate in the wellness program were more likely to have higher levels of job satisfaction. The relationship between gender and job satisfaction ($\beta = -.26, t = -2.70, p = .008$) was in a negative direction, indicating that females were more likely than males to have higher levels of job satisfaction. The results of this analysis provided evidence to

reject the null hypothesis of no relationship between job satisfaction and participation in employer-sponsored wellness program and gender.

SRQ 3. What relationship, if any, is there between the employer-sponsored wellness program participation status, years of experience at the job, and job satisfaction (JS)?

H3₀: There is no relationship between the employer-sponsored wellness program participation status, years of experience at the job, and job satisfaction (JS).

H3_a: There is a relationship between the employer-sponsored wellness program participation status, years of experience at the job, and job satisfaction (JS).

A multiple linear regression analysis used to determine if job satisfaction (dependent variable) could be predicted by participation in the employer-sponsored wellness program and years of experience on the job. As years of experience were an ordinal variable, the categories were dummy coded for the analysis. Table 8 presents the results of this analysis.

Table 8

Multiple Linear Regression Analysis – Job Satisfaction, Participation in Employer-Sponsored Wellness Programs, and Years of Experience

Predictor	Constant	<i>b</i> - Weight	β - Weight	R^2	<i>t</i>	Sig
Participate in wellness program	3.90	-.20 .15	-.23 .16	.11	-2.42 1.47	.018 .145
Faculty member 6 to 10 years		.32 .12	.27 .13		2.58 1.19	.012 .237
Faculty member 11 to 15 years						
Faculty member more than 15 years						
Multiple <i>R</i>	.33					
Multiple R^2	.11					
<i>F</i> Ratio	3.02					
<i>DF</i>	4, 98					
Sig	.021					

Eleven percent of the variance in job satisfaction was explained by participation in employer sponsored wellness programs and years of experience at their institutions, $F(4, 98) = 3.02, p = .021$). The negative relationship between participation in employer-sponsored wellness programs and job satisfaction ($\beta = -.23, t = -2.42, p = .018$) provided evidence that faculty who did not participate in the wellness programs tended to have higher levels of job satisfaction. A positive relationship was found between being a faculty member for 11 to 15 years and job satisfaction ($\beta = .32, t = 2.58, p = .012$), indicating that faculty who had been employed between 11 and 15 years were more likely to have higher levels of job satisfaction. The other two variables measuring 6 to 10 years of experience and more than 15 years of experience not significantly related to job satisfaction.

Based on this finding, the null hypothesis that job satisfaction related to participation in the employer-sponsored wellness program and years of experience rejected.

SRQ 4. What statically significant relationship, if any, is there between the employer-sponsored wellness program participation status, years of experience at the job, and job satisfaction (JS)?

H4₀: There is no relationship between the employer-sponsored wellness program participation status, age, and job satisfaction (JS).

H4_a: There is a relationship between the employer-sponsored wellness program participation status, age, and job satisfaction (JS).

A multiple linear regression analysis used to determine if participation in an employer-sponsored wellness program and age of the faculty member could be used to predict job satisfaction. As age was an ordinal variable, the four categories were dummy coded to allow their inclusion in the multiple linear regression analysis. Table 8 presents the results of this analysis.

Table 9

Multiple Linear Regression Analysis – Job Satisfaction, Participation in Employer-Sponsored Wellness Programs, and Years of Experience

Predictor	Constant	<i>b</i> - Weight	β - Weight	R^2	<i>t</i>	Sig
Participate in wellness program	3.93	-.19 .06	-.22 .03	.06	-2.13 .31	.036 .761
Age 21 to 29 years		.11	.10		.92	.360
Age 30 to 39 years		.08	.08		.72	.476
Age 40 to 49 years		.10	.10		.85	.398
Age 60 and over						
Multiple <i>R</i>	.24					
Multiple R^2	.06					
<i>F</i> Ratio	1.21					
<i>DF</i>	5, 97					
Sig	.308					

Six percent of the variance in job satisfaction was accounted for by participation in employer-sponsored wellness programs and years of experience, although this result was not statistically significant, $F(5, 97) = 1.21, p = .308$. One independent variable, participation in employer-sponsored wellness programs was a statistically significant predictor of job satisfaction, ($\beta = -.22, t = -2.13, p = .036$), indicating that faculty members who did not participate in the employer-sponsored wellness programs tended to have higher levels of job satisfaction. None of the age categories was statistically significant predictors of job satisfaction. Based on this finding, the null hypothesis that job satisfaction not related to participation in employer-sponsored wellness programs and age of the faculty member retained. Based on this finding, the null hypothesis that job satisfaction not related to participation in employer-sponsored wellness programs and age of the faculty member retained.

The finding from this study mostly align with the need-satisfaction model of job characteristics, needs, attitudes, and behaviors to explain the relationship between job satisfaction and job motivation (Salancik & Pfeffer, 1977). The findings remain consistent with job characteristics, needs, attitudes, and behavior. Within the review of literature, one key factor associates with the negative relationship between job satisfaction and participation in the employer-sponsored wellness program. Wellness programs offered by management often fail because they do not reflect the personal preferences of the employees (Spreitzer & Porath, 2012). An excellent way to overcome some of the factors is to involve the employees in designing the program (Benza, 2012). Not only does the strategy encourage active participation in the program, but it also offers the employees a sense of ownership, which is inherently empowering (Spreitzer & Porath, 2012). In the doctoral study, the results of the findings indicate that negative relationship exists between job satisfaction and participation in the employer-sponsored wellness program.

Applications to Professional Practice

This research is valuable to the federal government, state university systems, board of trustees, university administrations, and university faculty. The study results present university decision makers with information on the importance of university sponsored wellness program. The results of this study may add to the body of knowledge concerning the relationship between employer-sponsored, wellness-program participation and job satisfaction for profit college and university leaders.

University decision makers that create good wellness programs anticipate the results may correlate to job satisfaction and performance (Kossek et al., 2012). In comparing the performance of employees enrolled in wellness programs with the performance of those who are not, employees who participate in wellness programs are psychologically and physically more adept (Field & Johann, 2012; Kossek et al., 2012; Sieberhagen et al., 2011). Employees who participate in wellness programs are more content with their jobs and are less likely to miss time at work (Sieberhagen et al., 2011). Field and Johann (2012) discovered a positive correlation between organization-sponsored wellness programs and worker satisfaction. Employee satisfaction associated with wellness programs is not necessarily a limit to for-profit businesses; the same result might exist in other organizational types (Field & Johann, 2012).

Decision makers of companies and organizations consider good employee health as an important goal. Good employee health increases job satisfaction, which in turn motivates employees to perform effectively and remain employed, accomplishing tasks enjoyable to them (WHO, 2014). The state of mind encourages employees to give the company optimal performance and increases profit (DeJoy et al., 2013). Employers' goals are, to design a work strategy that cultivates a psychosocial climate in the organization characterized by the opportunity for career growth, advancement, and development (DeJoy et al., 2013). Considering employers adopt wellness programs with the intention to improve work relationships and to encourage employees, more research on the topic of employee wellness is necessary (Field & Johann, 2012).

The results study showed that employees satisfied with their workplaces have an extensive social life, because wellness programs sponsored by an organization at its worksite also help to create cohesiveness among employees as they interact on a personal level with their colleagues through participation in the programs. The result provided more opportunity for increased employee job satisfaction. The result of this study includes statistical data and numerous recommendations to university decision makers on the positive relationship between employer-sponsored.

Implications for Social Change

The implications for positive social change include providing university decision makers with information on the impact of organization-sponsored employee wellness programs on employee job satisfaction. University decision makers can address issues such as absenteeism, productivity, and presenteeism, which affect an organization's revenue and profitability. More important, state-sponsored nonprofit higher education institutional management personnel can focus on spending their budgets, the funds for some of which provided by taxes, in ways that are accountable to the public. As an implication for social change, the results of the study could provide the organizational management from a non-profit higher education organization with information to support the inclusion of wellness programs into the culture, and consequently into the tax-dollar budgets of their institutions.

Recommendations for Action

University management may use the data from this study as a tool whether or not organization-sponsored wellness programs are most appropriate for the development and

well-being of their human asset. University management should pay close to the result of this study, as well as evaluate which type of wellness program is best for their organization. University leaders should work closely with employees in designing various wellness program. Not only does the employee's involvement strategy encourage active participation in the program, but also it includes a sense of ownership to their employees, which is inherently empowering.

The results of this study also prove beneficial to administrators, supervisors, executives, and human resource managers in small or large for-profit colleges and universities. Scholars and practitioners who study job satisfaction and employees wellness practices may find the results interesting. The results of this study will remain available in the ProQuest, and the UMI database. I will publish research articles of the study results in peer-reviewed scholarly journals. The journals, along with trade publications (e.g., Employees Wellness, University Health, and HR Magazine) will include a venue to disseminate the findings to a large cross-section of both researchers and practitioners at professional and academic conferences (e.g., American Marketing Association, National Association of African Americans in Human Resources, and National Black MBA).

Recommendations for Further Research

The results of the study could expand the option for future scholars to examine the effects of employee wellness programs on employee productivity, and by extension, profitability. In addition, a future scholar may wish to use a qualitative model to code what type of incentives boost employee participation in wellness programs and promote

adherence to certain behaviors. Organizational wellness programs are designed to promote workers' well-being and, hence, their satisfaction. The same result could realize in other organization types, such as the higher education workplace; however, limited evidence to support the notion. The results of the research may address gaps in the knowledge base regarding the effects of employee wellness programs on employee productivity, and profitability.

Job satisfaction is becoming a fundamental concern for employees' working environment. Studies have shown that job satisfaction affects absenteeism and organizational productivity and as a result, it exerts a great impact on an organization (Ho, 2013). This conclusion demands an evaluation of the wellness initiative to ascertain its usefulness in ensuring the wellbeing of employees (Field & Johann, 2012). The connection between employees' satisfaction and wellness programs area phenomenon with limited and unreliable documented studies, thus presenting a general problem in the business setting that needs scholarly research attention.

The results of other literature show that employees who participate in wellness programs are psychologically and physically fit comparing to their counterparts. In addition, employees taking part in wellness packages are more contented in their jobs and have decreased absenteeism rate as compared to their fellow employees. Previous studies have shown that a positive correlation between organizations' sponsored wellness programs and workers' satisfaction exists. Organizational decision makers are depending on wellness programs into organizational life. A gap exists in knowledge regarding participation in organization-sponsored wellness programs and their effect on job

satisfaction in higher educational facilities. Consequently, more research is necessary to ascertain whether if there is a relationship between organizations' sponsored wellness programs and employee satisfaction within the work environment of college and universities.

Reflections

The possibility of my personal bias was a major role in selecting a quantitative research design for the current study. I remembered the challenge of having all participants complete the entire research survey, even when the survey was short and anonymous. Two hundred and fifty participants attempted to complete the survey but only 103 participants actually completed the entire survey.

The foundation of the research began from the leadership direction of the amazing committee members appointed to guide me throughout the process of the study. The nonstop feedback from committee members and making continuous revisions of the study strengthened the scholarly writing in the research. Following the guidelines of the DBA rubric and the process checklist were essential in standardizing and measuring the progress of the study. Using Survey Monkey® to deploy the survey was sufficient in protecting the participants; however, I still had a well-founded concepts of the results based on preview research findings and personal experience as a university instructor. However, biased notions had little influence in the data collection process. No contact occurred with the participants of the survey and the data does not include participant's identification to ensure confidential of answers.

Summary and Study Conclusions

The negative relationship between job satisfaction and participation in the employer-sponsored wellness program indicated that faculty who were not participating in the wellness program tended to have higher levels of job satisfaction. The relationship between gender and job satisfaction was in a negative direction, indicating that females were more likely than males to have higher levels of job satisfaction. A positive relationship was found between being a faculty member for 11 to 15 years and job satisfaction, indicating that faculty who had been employed between 11 and 15 years were more likely to have higher levels of job satisfaction were the purpose of this correlational study. University leaders should use the findings of the current study to further question the impact of organization-sponsored employee wellness programs on employee job satisfaction. Job satisfaction is becoming a fundamental concern for employees' working environment. An employee satisfied with his or her vocation is likely motivated and dedicated to his or her work. However, dissatisfied employees will always seek ideas to stay away from work and to shirk their responsibilities (Fadzilar et al., 2012).

Employees taking part in wellness packages are more contented in their jobs with a decrease in the absenteeism rate compared to other employees. Previous studies have shown that a positive correlation between organizations' sponsored wellness programs and workers' satisfaction exists. Organizational decision makers are depending on wellness programs into organizational life (Muya et al., 2014). A gap exists in knowledge regarding participation in organization-sponsored wellness programs and their effect on

job satisfaction in the workplace. Consequently, more research is necessary to ascertain whether a relationship exist between organizations' sponsored wellness programs and employee satisfaction within that work environment.

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Appendix A: The Job Satisfaction Survey Instrument

Opening Questions: Eligibility Criteria

Instructions: If you agree to participate in this research study, please answer the following eligibility criteria questions by clicking on the mark next to the response that best describes you, or is most applicable to your current employment.

1. Informed consent to participate: I have read and understood the informed consent document and hence agree to participate in this research study voluntarily.
 - Yes
 - No (If no, end of the survey.)
2. Are you 18 years of age or older?
 - Yes
 - No (If a person indicated no, end of the survey.)
3. Are you a faculty member at college or university in United State?
 - Yes
 - No (If a person indicated no, end of the survey.)
4. Does your college or university have an organization-sponsored employee wellness program?
 - Yes
 - No (If no, end of the survey.)

Demographic Variables

Instructions: The collection of your demographic is necessary for testing the hypotheses of this research study. Please answer the following questions by clicking on the mark next to the response that best describes you or type your answer.

1. What is your gender?

Male

Female

2. What is your age?

Type in the answer_____

3. How many years have you been a faculty member?

Type in the answer_____

4. Do you participate in the university's wellness program?

Type in the answer_____

5. How long have you been participating in the university's wellness program?

Duration_____

Not Applicable_____

Job Satisfaction Survey by Spector 1994

1	2	3	4	5	6
Strongly Disagree	Moderately Disagree	Slightly Disagree	Slightly Agree	Moderately Agree	Strongly Agree

Place a check mark in the column that matches the extent to which you feel that you are at risk in each of the following situations:	1	2	3	4	5	6
1. I receive a fair wage.						
2. Too little chance for promotion on my job exists.						
3. My supervisor is quite competent in doing their job.						
4. I am not satisfied with the benefits I receive.						
5. When I do a good job, I receive the recognition I should receive.						
6. Many of our rules and procedures make doing a good job difficult.						
7. I like the people I work with.						
8. I sometimes feel my job is meaningless						
9. Communication seems good within this organization.						
10. Raises are too rare.						
11. Those who do well on the job stand a fair chance of being promoted						
12. My supervisor is unfair to me.						
13. The benefits we receive are as good as most other organizations offer.						
14. I do not feel the work I do receives appreciation.						
15. The incompetence of some people I work with seldom blocks my effort to do a good job.						
16. I find I have to work harder at my job because of the incompetence of other employees.						
17. I like doing the things I do at work.						

1	2	3	4	5	6
Strongly Disagree	Moderately Disagree	Slightly Disagree	Slightly Agree	Moderately Agree	Strongly Agree

Place a check mark in the column that matches the extent to which you feel that you are at risk in each of the following situations:	1	2	3	4	5	6
18. The goals of the organization are not clear to me.						
19. I feel unappreciated by the organization when I think about what they pay me.						
20. People get ahead as fast here as they do in other places.						
21. My supervisor shows too little interest in the feelings of subordinates						
22. The benefit package we have is equitable						
23. Few rewards exist for those who work here						
24. I have too much to do at work						
25. I enjoy my coworkers						
26. I often feel that I do not know what is going on with the organization.						
27. I feel a sense of pride in doing my job.						
28. I feel satisfied with my chances for salary increases.						
29. We do not receive some benefits that the institution offers as part of our entitlements.						
30. I like my supervisor.						
31. I have too much paperwork.						
32. I do not feel my efforts receive recognition appropriately.						
33. I am satisfied with my chance for promotion.						
34. Too much bickering and fighting at work exist.						
35. My job is enjoyable.						
36. Work assignments not described appropriately.						

Appendix B: Permission to Use JSS Instrument

Donel Richemond

<donelrichemond@gmail.com> Mon, Oct 28, 2013 at 10:05 AM

To: pspector@usf.edu

[Reply](#) | [Reply to all](#) | [Forward](#) | [Print](#) | [Delete](#) | [Show original](#)

Dr. Spector,

My name is Donel Richemond, I am a Doctoral Candidate at Walden University, and employed with Bethune Cookman University. I am currently conducting a study to measure The Relationship between Employee Wellness Programs and Employee Job Satisfaction in Higher Education. I would like to use your Job Satisfaction Survey (JSS) which you developed for use in human services organizations, which college professors definitely fit that threshold. I would appreciate your permission to use this instrument in my study. Any consideration of this request would be greatly appreciated.

Please feel free to contact me with any questions or request. Thank you.

Donel J. Richemond

Spector, Paul
<pspector@usf.edu>

To: Donel Richemond <donelrichemond@gmail.com>

[Reply](#) | [Reply to all](#) | [Forward](#) | [Print](#) | [Delete](#) | [Show original](#)

Dear Donel:

You have my permission to use the JSS in your research. You can find copies of the scale in the original English and several other languages, as well as details about the scale's development and norms in the Scales section of my website <http://shell.cas.usf.edu/~spector>. I allow free use for noncommercial research and teaching purposes in return for sharing of results. This includes student theses and dissertations, as well as other student research projects. Copies of the scale can be reproduced in a thesis or dissertation as long as the copyright notice is included, "Copyright Paul E. Spector 1994, All rights reserved." Results can be shared by providing an e-copy of a published or unpublished research report (e.g., a dissertation). You also have permission to translate the JSS into another language under the same conditions in addition to sharing a copy of the translation with me. Be sure to include the copyright statement, as well as credit the person who did the translation with the year.

Thank you for your interest in the JSS, and good luck with your research.

Best,

Paul Spector, Distinguished Professor
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