

June 2018

Workplace Wellbeing Evidence Review

Prepared for Healthy Families South Auckland (The Cause Collective)



NADINE METZGER
POINT AND ASSOCIATES (AOTEAROA) LIMITED



Table of Contents

Why wellbeing matters.....	2
Wellbeing benefits to employees.....	6
Wellbeing in the Workplace.....	8
Voluntary health practices.....	9
Organisational culture change.....	11
Occupational health and safety	14
Community intervention.....	15
What works? The Evidence.....	16
Intervention checkbox	20
What works: specific interventions:.....	20
Conclusion.....	23
Resources	24
References.....	25



Why wellbeing matters

Wellbeing is our ability to feel good and function effectively. It is what provides us with the resilience to navigate the natural highs and lows we all experience in our lives, while enabling us to flourish intellectually, emotionally, socially and physically.

Over the last decade, researchers have discovered that people with higher levels of wellbeing are more sociable and energetic, more charitable and cooperative, and better liked by others. They are more resilient in the face of hardship, have stronger immune systems and are physically healthier and happier.

The business case for building and maintaining wellbeing in the workplace is compelling. Workplace wellbeing is a key driver of engagement and is strongly linked to employee attention, retention, improved safety, productivity and positive workplace behaviour.^{1,2} Conversely, lack of employee engagement has been linked to increased absenteeism, presenteeism, and lower levels of performance and productivity,³ as well as increased safety incidents.⁴ The two concepts of wellbeing and engagement are mutually reinforcing. Put simply, engaged employees experience greater levels of wellbeing, and employees who experience greater wellbeing are more engaged.⁵

¹ Engage for Success 2014

² Chapman, 2003

³ Purcell, 2008

⁴ Gallup, 2013

⁵ Robertson Cooper, 2014

There are several benefits to employers of high employee wellbeing (Figure 1), including reduced sickness, improved retention, improved resilience, higher commitment, higher productivity, reduced accidents and improved 'brand.' These are explained in detail below.

Figure 1: Benefits to employers of employee wellbeing



Reduced sickness

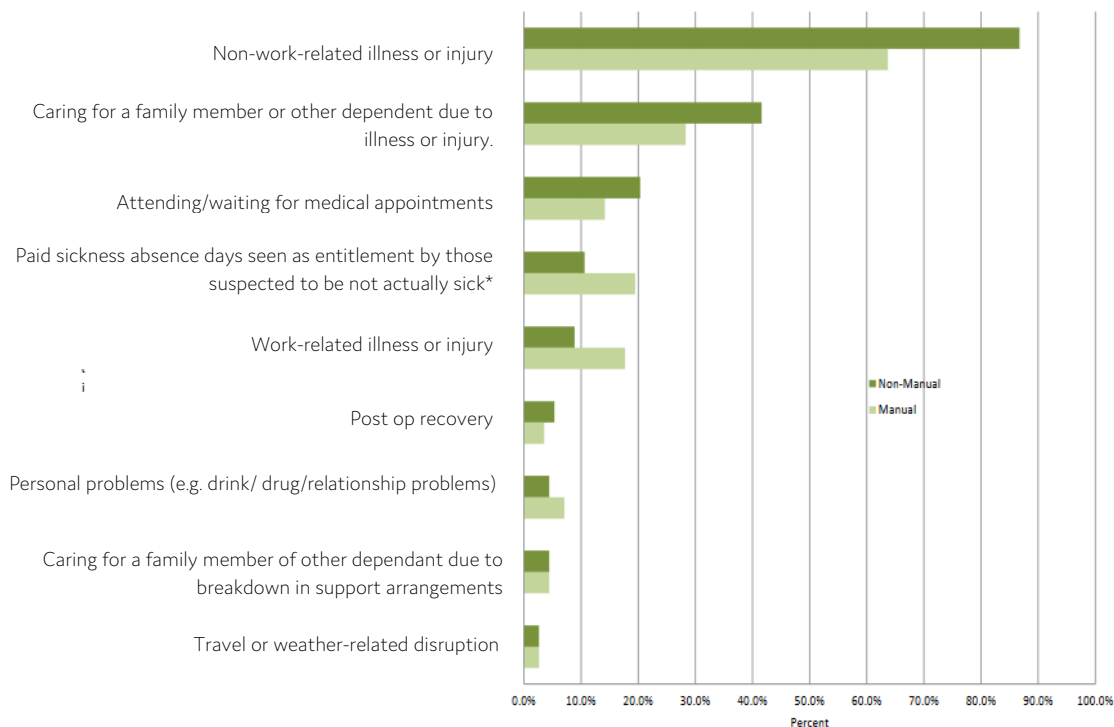
Research suggests that there are both financial and operational benefits to having a healthy workforce with lower than average sickness absence levels.⁶ The 2015 Wellness in the Workplace survey estimated that New Zealand lost 6.7 million working days to absence in 2014 (an average of 4.7 days per employee). Manual employees have a higher rate of absence than non-manual employees (an average of 5.1 days). In 2015 the direct cost of absence was estimated at an average of \$616 per employee, or \$1.45b for the total New Zealand economy.⁷

The main drivers of absences are pictured below. Note the difference between manual and non-manual workers

Figure 2: Main drivers of workplace absence (source: Wellness in the Workplace survey 2015)

⁶ The Work Foundation, 2010

⁷ Wellness in the Workplace survey 2015



A report prepared by The Work Foundation for Investors in People in the UK⁸ asserts that the costs of absence are seriously underestimated, as they do not take into account lost sales, lost customers, or inability to take on or fulfil existing contracts, the cost of overtime to cover the absent person or engaging temporary workers to get the job done.

Fewer accidents

There is growing evidence to suggest that poor health and wellbeing among employees can be a significant contributory factor to workplace injuries caused by accidents. Fatigue, sedentary lifestyles and smoking can make workers more vulnerable to concentration problems, which increase the risk of accidents⁹.

Significant cost reductions may be possible through health and wellbeing initiatives. A study by PriceWaterhouseCoopers in 2008 suggests that cost reductions averaging 50 percent have been achieved through initiatives to improve hydration, sleep and the uptake of rest breaks. They argued that such measures improve alertness, concentration and judgement, which is important especially in high-risk industries such as construction.¹⁰

⁸ Investors in People develop, pilot and evaluate approaches aimed at engaging employers in consideration of employee health and well-being as a business performance issue

⁹ The Work Foundation, 2010

¹⁰ PWC, PWC, Building the Case for Wellness, February 2008

Higher Productivity

There are several aspects of job performance that are better if employees are healthy. These include: energy; concentration; decision-making; coping with pressure, critical feedback, uncertainty and change; completion of tasks and reliability. Stress and depression can have an especially damaging effect on productivity.¹¹

A report by the Chartered Institute of Personnel and Development in 2014 found that employees who reported high levels of wellbeing were more likely to go the extra mile to support colleagues and to support the organisation, and were highly unlikely to engage in damaging behaviours or to plan to leave the organisation.¹²

Higher Commitment

Healthy employees demonstrate higher levels of commitment than those who are less healthy. Committed employees are more likely to identify with the values of their organisation, be proud to work for it and work hard on its behalf. They are significantly less likely to resign and have lower sickness absence.¹³ The authors of the Marmot Report (2004) argue that work status is a strong predictor of poor health and poor commitment. They contend that workers in lower status jobs are exposed to more stressors than their more highly paid and highly qualified colleagues, which, in turn, increases the risk of mental illness, gastro-intestinal conditions and coronary heart disease. These less-healthy employees are therefore less likely to display a strong work commitment.¹⁴

Enhanced brand

A growing number of workers are attracted to a company based on their ethical reputation and ability to offer a good work-life balance. Moreover, Engage for Success found a direct correlation between better psychological wellbeing and better customer service and performance.

Improved retention

*As an observation, the language of "entitlement" is interesting but possibly not unexpected given this is from a report prepared for a business audience. Another way to look at this could be "mental health days."

¹¹ Wellness in the Workplace, 2015

¹² CIPD, 2014

¹³ The Work Foundation, 2010

¹⁴ Marmot, 2004

Valuable employees are more likely to stay with a 'good' employer.¹⁵ This is particularly important for millennial workers.¹⁶ There is a clear correlation between low engagement and high turnover; companies with high levels of engagement have turnover rates of up to 40% lower than companies with low levels of engagement.¹⁷

Greater resilience

Healthy employees are more resilient and better able to cope with stress and anxiety. Workers who can't cope with workplace stress or anxiety are significantly more likely to have reduced productivity or poor performance.¹⁸

International Case Study: Leadership and Engagement

High levels of absence in social care teams at East Sussex County Council were an ongoing concern. Whilst there had been some improvements over the past decade, they were not sustained. A different approach and methodology was required. To this end, 'having sought employees' initial buy-in, a programme utilising the principles of Appreciative Inquiry was developed. This involved supporting and guiding senior leaders to engage with the whole team to share the root causes and impact of absence, asking views about what could be done and how best desired improvements could be achieved. The approach involved listening, taking positive action, coaching, and supporting as required. The results were immediate and quantifiable: staff morale and commitment improved, and sickness levels were reduced by 18% and sustained over the 6 months' monitoring period, thereby reducing spend on agency staff and improving social care continuity for clients.

(Source: Engage for Success 2014)

Wellbeing benefits to employees

There is a significant amount of research evidence that shows individuals who have a high level of psychological wellbeing learn effectively, work productively, have better social relationships, are more likely to contribute to their community, and have better health and life expectancy. They are also likely to experience economic benefits due to lower healthcare costs and reduced absenteeism.¹⁹

¹⁵ Wellplace.nz (2018)

¹⁶ Generally defined as people born 1981-1996

¹⁷ Gallup, 2013

¹⁸ The Work Foundation

¹⁹ Engage for Success, 2014

Work is the primary activity for many people during their waking hours, so their wellbeing at work can affect the extent to which they enjoy their lives. 91% of U.K. employees who are engaged at work say they experienced enjoyment “yesterday,” versus 72% of those who are actively disengaged.²⁰

Part of the lack of engagement with wellness programmes could be put down to cynicism around employers’ motivation. Three quarters of workers surveyed for the workplace wellness study believed that wellness programmes are self-serving, and only benefit the company; more than half (58%) believe wellness programs only exist to cut or control the company’s health costs, while another 16% think they’re designed to make employees work harder/be more productive.²¹

²⁰ Gallup, 2013

²¹ Everyday Health Inc. Global Wellness Study 2016

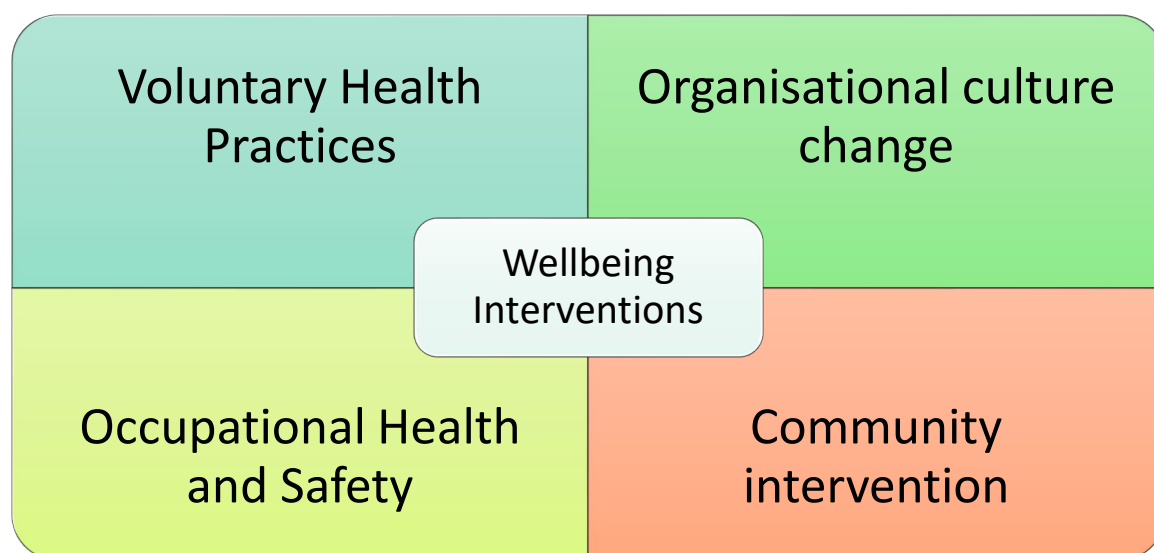
Wellbeing in the Workplace

The literature identifies four dimensions that support workplaces to protect, promote and support the complete physical, mental and social wellbeing of workers.²² They are: voluntary health practices to reduce the risk or incidence of worker illness; organisational culture change that focuses on changing worker attitudes and perceptions, management practices, and the way work is organised to improve job satisfaction and productivity; occupational health and safety programmes targeted at reducing work-related injury, illness, and disability and models of community intervention that address issues such as environmental protection, human rights, community development, and business ethics.

Evidence shows that when employers work in collaboration with employees on these four dimensions, not only does worker wellbeing improve, but this also positively impacts efficiency, productivity and customer service.

Not all four of these dimensions have equal benefits in terms of their impact on worker wellbeing. In this section we will consider the evidence around wellbeing interventions and look at case studies for each of these dimensions.

Figure 3: Wellbeing in the Workplace Model



²² The Health Communication Unit (THCU) at the Centre for Health Promotion at the University of Toronto suggests that workplace health and wellbeing is considered as a three-dimensional comprehensive model which covers at voluntary health practices (i.e. nutrition, exercise, cancer screening), organisational change (i.e. work culture and context) and occupational health and safety. The World Health Organisation asserts that there are four avenues of influence for a healthy workplace and adds community involvement to the model. For the purposes of this review, we have chosen to use the language of the THCU with the four-dimensional framework proposed by WHO.

Voluntary health practices

These lifestyle-related practices work to reduce the risk or incidence of worker illness by addressing individual worker lifestyle behaviours through awareness raising, education, supportive environments, and policy. Lifestyle programmes target individual workers in the workplace and include:

- exercise and general fitness (yoga, tai chi, relaxation classes, massage therapy);
- obesity and weight loss;
- stress;
- nutrition;
- impacts of ageing;
- work-life balance;
- reducing/quitting smoking, alcohol and drug use;
- healthy cooking;
- alternative medicine and holistic practices;
- parenting;
- health information e.g. online guidance and information sheets;
- assistance with managing personal health issues e.g. cancer and depression;
- health screening and risk assessments e.g. weight, blood glucose levels, blood pressure and cholesterol;
- counselling; and
- provision of fruit, tea/coffee.

The 2016 global wellness study found that employees were more likely to show higher levels of engagement when their companies offered tangible, proactive wellness benefits, such as exercise support, flexible work arrangements, stress reduction programs and even opportunities to have fun at the office, whether with a ping pong table or fitness challenges. Other tangible activities that enhanced engagement included:

- Taking time for self
- Pursuing hobbies
- Socialising
- Healthy eating
- Exercise
- Meditation
- Smoking cessation

Despite the plethora of wellbeing programmes in New Zealand and around the world, the *evidence of the impact on employees of workplace wellbeing programmes that*

*focus on health practices is largely inconclusive.*²³ Whilst a review by the World Health Organisation notes that there does appear to be limited evidence that health promotion activities in the workplace can make a difference in the short term, particularly if planned with workers and their representatives,²⁴ feedback from workers in the Workplace Wellness Study 2016 showed that whilst half (54%) of full-time employees said that their employer offered a workplace wellness program, less than half of those (40%) said that their participation actually helped improve their wellness or health.²⁵ Moreover, a 2018 study on the benefits of the 10,000 step challenge (which at least two of the workplaces in the workplace wellbeing design challenge have participated in) found a small but consistent effect on mental health over the term of the programme. Interestingly, however, this effect appeared irrespective of whether a person reached the 10,000-step mark, meaning that *team participation and the related organisational culture change* was likely more impactful than the physical goal itself.²⁶

The literature, therefore, is not entirely unanimous about the strength of evidence that health and wellbeing programmes based around voluntary health practices make a significant and sustainable long-term difference to workers' health and wellbeing.²⁷

Workplace Wellbeing Challenge Partner Case Study: The Pink Caravan

One of the organisations involved with the workplace wellbeing challenge partnered with the Breast Cancer Foundation NZ to bring the Pink Caravan to their South Auckland site. On-site champions encouraged their workmates to chat with the breast care nurses. An estimated 80% of women at the site visited the Pink Caravan with their questions about the signs and symptoms of breast cancer, to understand their family and lifestyle risk factors, and to know what to do if they have any worries.



²³ Health Exchange and the University of Birmingham, 2015

²⁴ WHO Healthy Workplace Framework and Model

²⁵ Everyday Health Inc. Global Wellness Study 2016

²⁶ Hallam et al, 2018

²⁷ Many authors are at pains to point out that this is not due to evidence that shows there is no impact, instead there is a lack of evidence due to very little rigorous evaluation of wellness programmes and initiatives.

Organisational culture change

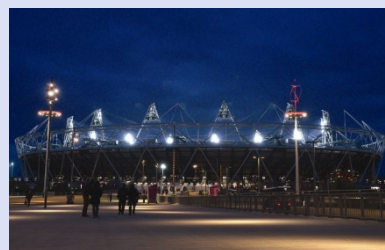
Changing organisational culture around wellbeing can improve job satisfaction and productivity by changing worker attitudes and perceptions, management practices, and the way work is organised. These factors have been shown to have a dramatic impact on employee health outcomes. These factors are also referred to as psychosocial factors or as part of the psychosocial work environment.

Organisational culture programs target the way work is organised and its relationship with the psychological health of workers. Interventions may be directed at:

- work content and context:
 - what, where and the quality/meaningfulness of work
 - hours and flexibility
 - repetitiveness
 - access to training and other career development opportunities
- workplace culture and improvements to a broad range of workplace factors, including:
 - morale
 - motivation, satisfaction, workplace engagement
 - management – attitudes, behaviours, styles
 - bullying and harassment leading to psychological injuries
 - leadership/management training for supervisors and managers
 - performance management
 - rewards and recognition
 - health and safety legislation, incident management policies and implementation on the ground
 - interactions with peers and workplace conflict.

International Case Study: The London Olympics “Big Build”

The ‘big build’ prior to the 2012 London Olympics set health and safety records. Key to the phenomenally low injury rate were human and organisational interactions that were underpinned by a culture of respect, trust, clarity, motivation, collaboration, openness and fairness. The director of construction Howard Shiplee said: “Getting the right culture and relationships in place early pays dividends, not just for health and safety but for so many of the benchmarks for success, like delivering the project on time and within budget, with high productivity and sustainability.” (Source shponline.co.uk)



One of the more interesting studies unearthed as part of this review was a white paper prepared by the Global Wellness Institute (GWI) from a survey of full-time American employees which found that the pivotal factor for employee wellness was *whether they perceived their company as caring about their health/wellness*. The study found significantly higher levels of overall physical health, engagement, stress management and job satisfaction among the 37% of workers who believed their company cared about their wellbeing. Most interestingly, the things that constituted company caring were intangible (i.e. emotional, intellectual, relational) rather than tangible (pay, wellness programmes, physical environment).²⁸

Just as the presence of caring has a positive effect on worker wellbeing, it appears that *the absence of caring has an equally negative impact*. In New Zealand, it is estimated that at any point in time, one in six working age people will be suffering from mental illness, which is associated with very high personal and economic costs. Mental illness is one of the leading causes of sickness absence and long-term work incapacity in New Zealand and is one of the main health related reasons for reduced work performance.²⁹ Mental illness is associated with high levels of presenteeism, where an employee remains at work despite experiencing symptoms resulting in lower levels of productivity.³⁰

A large-scale study of health workers in the UK found that staff who feel able to talk to their managers about their health, those who feel valued and those who are satisfied with their responsibilities report lower levels of stress than those who feel unable to talk to their managers, do not feel valued or are dissatisfied with their responsibilities. One of the key factors affecting the provision of staff health and well-being services was the attitude of local management; staff generally did not believe that senior managers were interested in their health and well-being and only 40% believe that their employers listened to their concerns about their working environment.³¹

Just over half (54%) of employees in a 2014 survey of British employees said their employer didn't care about their health and wellbeing, which left them feeling less motivated and more likely to seek work elsewhere. 13% admitted they did not work as hard, and a further 15% said they resented their employer.³²

Several studies have identified various organisational culture changes to facilitate wellbeing. The Workplace Wellness Study (2016) found that employees defined the characteristics of a caring company (in order of importance) as:

- Flexibility in the role (i.e. how I do my work);

²⁸ Everyday Health Inc. Global Wellness Study 2016

²⁹ Duncan n.d.

³⁰ Mentally Healthy Workplace Alliance, 2014

³¹ The NHS Health and Well-being Review

³² Investors in People, 2014

- flexible hours;
- opportunities for growth;
- execs and managers lead by example;
- openness and honesty at company;
- encourages me to take time for self;
- option to telecommute/work remotely; and
- encourages unplugging on annual leave/holiday.

The Mentally Healthy Workplace Alliance in Australia found that to facilitate psychological well-being, organisations need to:

- Have ethical decision-making procedures;
- involve employees in decision-making;
- have clear communication between different levels of the organisation; and
- have a strong psychosocial safety climate where senior leaders are actively engaged in mental health management and a safe physical environment.

It also found that supervisor support, a supportive organisational culture, control over working hours, encouraging variety, building social skills, learning opportunities, as well as more meaningful work can enrich family life which may help avoid or subvert pressures from the home and family which can affect employees negatively, particularly during stressful life events.³³

Studies which look at the effectiveness of organisational culture changes on worker wellbeing are limited, although the World Health Organisation notes that this is an emerging and growing area of focus. Nevertheless, some initiatives have been evaluated, with positive findings. Importantly, the WHO notes that: "while some studies are inconclusive, *no strong research has been identified to date showing that psychosocial interventions in the organization of work or organisational culture are ineffective.*"³⁴

Workplace Wellbeing Challenge Partner Case Study: Shared lunches

Seeing staff in her team frequently come to work with little or no lunch motivated a manager from one of the organisations involved with the workplace wellbeing challenge to purchase a crock pot. Staff were encouraged to bring in a vegetable each day, which were chopped and combined with stock to make vegetable soup. In recognition that some days some staff found it too hard to contribute something, all staff in the team were encouraged to eat the soup for lunch,



³³ Mentally Healthy Workplace Alliance, 2014

³⁴ WHO p.50. Emphasis author's own.

regardless of whether they had contributed or not. Prior to starting the shared lunches, the manager said the team were disconnected and rarely acknowledged each other at the beginning of the day, or said goodbye when they left. After a week or so of shared lunches the staff not only greeted one another each morning, they started conversing in their breaks, getting to know each other, and offering encouragement and support. The manager reported that the previously fractured team became a more cohesive unit, retention improved and staff came to work happier and more engaged.

Occupational health and safety

Occupational health and safety (or environmental) health programs target the overall safety of the workplace including the physical environment. They are targeted at reducing work-related injury, illness, and disability by addressing environmental issues in the workplace, such as ergonomics, chemical hazards, and air quality.

Interventions may be directed at:

- safety
 - chemicals
 - air quality
 - hazards
- infrastructure that either supports health and wellbeing by improving safety or that supports the implementation of health and fitness programs:
 - on-site gym facilities
 - showers
 - bike racks
 - eating and relaxation areas
 - facilities to prepare food/drinks.

Health and safety is not necessarily limited to hazards and infrastructure. There is sufficient evidence that fatigue and stress are important determinants of safety behaviour and safety performance. There is some evidence, however, that fatigue and stress may be affected or amplified by the psychosocial work environment (i.e. the organisational culture) as much as they are physically determined³⁵, and that a positive psychosocial work climate may act as a buffer against fatigue and assist recovery from fatigue.³⁶

³⁵ Zwetsloot et al, 2017

³⁶ Garrick et al, 2014

The World Health Organisation notes that whilst health and safety initiatives can impact on worker physical health, particularly when the worker is required to return to work after a strain or accident, there is little evidence to show that health and safety programmes influence wider wellbeing.³⁷

Workplace Wellbeing Challenge Partner Case Study: Gone Fishing

Knowing that a number of their workers liked to go fishing on their days off, one of the organisations involved with the workplace wellbeing challenge invited a chef onsite to show the workers how to prepare a healthy meal using the fish they had caught. The cooking demonstration was also paired with messages about water safety and the value of wearing life jackets.



Community intervention

Community intervention initiatives target community wellbeing around health and safety, environmental protection, human rights, human resource management practices, community development, consumer protection, business ethics, and stakeholder rights.

These types of activities could be considered “Corporate Social Responsibility”.

There is little to no evidence of the impact of these programmes on worker wellbeing

Whilst there is little evidence on the impact of corporate community interventions on worker wellbeing, the World Health Organisation asserts that the voluntary and humanitarian nature of community interventions should have positive impacts on worker health, and on the health and sustainability of the enterprise.³⁸

³⁷ WHO Healthy Workplace Framework and Model

³⁸ WHO Healthy Workplace Framework and Model

What works? The Evidence

Regardless of which type of intervention is designed, the literature has some clear advice on the foundations of successful wellbeing and engagement interventions.³⁹

Engage leadership at the beginning

The evidence is very clear that the success of any workplace wellbeing initiative is contingent on the original buy-in and ongoing commitment and support of senior management within the workplace. A prerequisite to this is understanding their underlying values and ethical positions, as their commitment will only be sincere and solid if it is in line with their deeply held beliefs and values. To secure ongoing commitment the wellbeing initiative must also have a good fit with the business goals and values of the workplace. Support from unions, middle management and informal workplace leaders is also desirable.

Successful wellbeing programmes don't simply engage leadership, instead they ensure that leaders not only embrace and endorse the initiative, but also actively and visibly participate. They need to walk the talk, hold management accountable (e.g. through KPIs) and reward success with incentives or public recognition.

Some of the literature recommends that the organisation develop and adopt a comprehensive wellbeing policy that is signed by the CEO, EGM or similar position, however there is some concern that policy development may take precedence over action, or that the policy may be handed to a committee or working group which is where the impetus may finish.

Focus on the workers, not the workplace

While companies aim to reap the financial benefits (healthcare cost reductions, greater productivity) that come with successful workplace wellness programs, their design must also take employee needs into consideration.

Provide the right environment for relationship building

Evidence shows that conflict resolution and positive communication help perpetuate stronger workplace relationships, and that social and emotional connections at work have major physical and mental health outcomes. It follows, therefore, that wellbeing

³⁹ The evidence in this section is drawn from 5 sources: WHO, Engage for Success, Worker Wellbeing Study, Investors in people and Effective Wellbeing Programs in Australia

initiatives prioritise relationship-building in the workplace to allow these informal supports to grow and flourish.

Prioritise the intangibles

It's easy to 'default' to tangible activities when considering wellbeing, e.g. 10,000 step challenges, team building days, more nutritional food in the cafeteria etc. Whilst the intangibles are less easy to imagine, the literature shows that creating a culture of caring and wellbeing may well be the most effective way to grow wellbeing in the workplace. Honest communication, creating a "vibe" of caring and teamwork, or ensuring workers are intellectually stimulated or free from harassment are all important components in driving perceptions of on-the-job wellness. And the evidence in this review shows that organisations that seize the most important intangibles will increase profitability through greater productivity, employee motivation, and less turnover.

Create better bosses

Much of the evidence around the need for workplace wellbeing shows that workers (desperately) want managers and leaders that model positive behaviour by walking the talk, communicating openly and honestly and helping employees feel valued and that their work is appreciated. To do this, the capabilities that managers need to lead, manage, develop and support people's health and wellbeing needs must be clearly defined and understood. And as already stated, managers must actively participate in the wellbeing movement themselves.

Encourage worker participation in design and decision-making

One of the most consistent findings in the literature around effective wellbeing initiatives is that successful programmes involve the workers affected by the programme and their representatives in a meaningful way in every step of the process, from planning through to implementation.

This participation needs to go beyond 'consultation' or 'information'. Workers must be actively involved, and their opinions and ideas sought out, listened to, and implemented. Attention should also be paid to worker preferences over how, when, and by whom any wellbeing initiatives are delivered. Moreover, the literature recommends that achieving appropriate input from workers may require workers having a collective voice, through a trade union or other system of worker representation.

This has a two-fold effect. First, involving workers in the design encourages them to take ownership and responsibility. Second, there is much evidence that some workplace stress and fatigue caused by psychological or mental ill-health can be mitigated through participation in decision-making and problem-solving.

Have clear goals and objectives

Key elements of successful wellbeing initiatives include having clear goals and objectives, activities that meet the organisation's health and wellbeing needs, links to business objectives, strong management support, employee involvement at all stages, supportive environments, and adapting the programme to social norms.

Acknowledge the importance of respect, cooperation, trust and contribution

The evidence shows that people feel better when teamwork and empathy is central to the work atmosphere. They want to feel their contribution to the organisation is recognised and valued, that they have input into their career path and feel part of the organisation's goals or mission. They also want to feel that their work matters and has an impact on society at large.

Address the drivers of sustainable behaviour change

Wellness initiatives, particularly those that focus on voluntary health practices, are more effective when designers understand what is behind behaviour change. A simple rule of thumb is to not have behaviour change as the goal, but instead help people internalise the value of the behaviour into their everyday lives.⁴⁰ Changeology⁴¹ believes that getting the right foundation for behaviour change involves:

- Aligning the project with people's intrinsic desires for betterment
- Lowering fears by expanding their comfort zones (see 'encourage worker participation')
- Building support systems and create ways for people to achieve their desires in easy, positive and healthy ways
- Presenting exciting invitations and opportunities for people to take the first steps

Attention should also be paid to the individual's 'readiness to change' and what the individual is or is not prepared to do at the time the programme or intervention is offered. This is the principle of personal control or 'self-efficacy'.

⁴⁰ Check out Michelle Segar's work on wellbeing and behaviour change here

<https://www.slideshare.net/hpcareernet/hp-parial-nonmembersto-postsegarwebinar2015>

⁴¹ This is a great site. Find it at <https://changeologyblog.wordpress.com/2017/07/20/the-essence-of-changeology/>

Acknowledge social support outside of the workplace

Any wellbeing initiatives or activities are bound to be influenced what happens outside of the workplace, as well as within it, so it makes sense that non-workplace social supports (e.g. friends, family, whānau) are acknowledged and included where possible.

Have a clearly designed and communicated strategy

It goes without saying that wellbeing initiatives will not be particularly successful if no-one knows they are happening. Despite this, there are several case studies in the literature where all the effort went into planning and design and communication occurred as an afterthought. Not surprisingly, the success of these initiatives was limited and not particularly sustainable. The literature recommends using innovative and creative marketing and communication (i.e. not a poster in the lunchroom) to 'sell' what is happening and build anticipation and excitement around participation. Further, the benefits of participation *for workers* must also be well communicated for them to see the value of investing their time and energy and taking part in whatever is designed.

Implement a learning-reflection cycle and evaluate for effectiveness

One of the factors that ensures sustainability of wellbeing initiatives is to evaluate and continually improve. This can be a process of asking simple questions as part of a check, reflect, adapt cycle (What did we do? Did the initiative do what it was supposed to do? If not, how can things be changed to make it work better?), as well as carrying out a baseline check at the beginning of the initiative, and revisiting with the same questions later to see if anything has changed. Without these important steps, there is no way to know if something has worked, is working, and is continuing to meet the changing needs of workers and the organisation. Lack of this step is what causes many initially good interventions to be forgotten or not sustained. Evaluation can be as complex or as simple as resources allow, but it must be carried out, documented, and acted upon to ensure ongoing success.

A good evaluation will help to demonstrate the worth of a programme or initiative over time and provide accountability to management through the assessment of programme delivery thus influencing future decisions regarding project sustainability

Communicate outcomes widely

Knowledge transfer among organisations and employers around what is working and what the benefits are is essential to helping grow a wellbeing movement.

Intervention checkbox

Based on the evidence in the literature, it is recommended that any prototypes contain as many of the following assets as possible:

Does the prototype...

- Engage leadership from the beginning?
- Focus on the workers, not the workplace?
- Provide the right environment for relationship-building?
- Prioritise the intangibles?
- Create better bosses?
- Encourage worker participation in design and decision-making?
- Have clear goals and objectives?
- Acknowledge the importance of respect, cooperation, trust and contribution?
- Address the drivers of sustainable behaviour change?
- Acknowledge social support outside of the workplace?
- Have a clearly designed and communicated strategy?
- Implement a learning-reflection cycle and evaluate for effectiveness?
- Communicate outcomes widely?

What works: specific interventions:

The literature contains some specific examples of interventions that work, and don't work. It may be more beneficial, however, to understand what has been found to be *not* effective, as it appears the keys to success for wellbeing initiatives are ensuring the foundations (as discussed in the previous section) are firmly in place.

Voluntary health practices

The WHO Healthy Workplace Framework and Model has several specific examples of activities which have enough evidence to judge efficacy. Based on their report, these things have been proven to be effective in promoting voluntary health practices:

- providing healthy food and beverages at the workplace;
- providing space for fitness or encourage stair use;
- involving the family;
- providing individual behaviour change strategies;
- integrating health promotion programmes into the organisation's operations;
- simultaneously addressing individual, environmental, policy and cultural factors affecting health and productivity; and
- targeting several health issues at once.

Organisational Culture Changes

Again, the WHO review found these effective examples:

- Health Circles⁴² are a formalized participatory method for assessing and dealing with workplace needs or deficiencies. Because of lack of good studies, evidence of their effectiveness is weak, but is nevertheless consistently positive in reducing stress and work satisfaction, as well as certain health risk factors.
- Mental health can be improved by interventions that combine personal stress management with organisational efforts to increase participation in decision-making and problem-solving, increase social support, and improved organisational communication.
- Psychosocial intervention training of employees to improve skills or job role can have a positive impact on burnout in the short term
- 'Wellbeing Champions'/'Wellbeing Officers' who are staff trained to support prevention and early identification of mental illness, can help create an environment that encourages people to speak up and seek help.

Occupational Health and Safety initiatives

- Ergonomic workstation adjustments combined with ergonomic training.
- Technical ergonomic measures can reduce the workload on the back and upper limbs without the loss of productivity and evidence that these measures can also reduce the occurrence of MSDs.

⁴² <http://www.prima-ef.org/health-circles.html>

- The Cochrane Review of interventions for preventing injuries in the construction industry concluded there is some limited evidence that a multifaceted safety campaign and a multifaceted drug programme can reduce nonfatal injuries.

Community focussed interventions

- After-work classes to teach workers and their families to read and write increased the ability of workers to understand written instructions or signage, resulting in improved health and safety.
- Encouraging workers to volunteer and allowing them scheduled time off to engage in volunteer activities increased employee loyalty, commitment, pride in employment.
- A project where a workplace collaborated city planners to build and ensure practicality and safety of bike paths, footpaths and public transport to and from the workplace helped make workers more physically active, which is believed to have contributed to a reduction of noncommunicable diseases including cardiovascular disease, cancer, depression, and musculoskeletal problems.
- Providing subsidised child care for employees reduces stress of workers and improves child welfare, health and education, as well as decreasing absenteeism and presenteeism at work.
- Working with council to ensure provision of safe public areas and support sporting or other physically active leisure activities can improve the health of workers and increase community solidarity.

What doesn't work

Most evidence around what doesn't work focusses on occupational health and safety and voluntary health practices:⁴³

- Workplace exercise programmes have little effect on muscle flexibility, body weight, body composition, blood lipids or blood pressure.
- Programmes restricted to offering information or advice on health issues are ineffective and inadequate.
- Physical activity programmes at work show no effect on workplace stress, work satisfaction or productivity.
- Self-help smoking cessation programmes that are computerised or paper based have little effect.
- Worksite programmes to prevent or reduce obesity over the long term have not been shown to be effective.

⁴³ Most of these are referenced in the WHO Healthy Workplace Framework and Model

- Rest breaks combined with exercise during the rest breaks do not have any effect on health.
- A Cochrane Review of interventions to prevent injury in the agricultural sector concluded that educational interventions alone are not effective.
- There is strong evidence that training on working methods in manual handling is not effective if it is used as the only measure to prevent low back pain.

Conclusion

To understand what has the most powerful impact on employee wellness we need to look well beyond wellbeing 'programmes'. Moreover, it pays to remember that not all wellbeing interventions have equal benefits in terms of their impact on worker wellbeing. This review considered four intervention dimensions that support workplaces to protect, promote and support the complete physical, mental and social wellbeing of workers. It found that evidence around the sustainable and long-term impacts of voluntary health practices that reduce the risk or incidence of worker illness (which form the bulk of "wellbeing programmes") is limited and inconclusive, as is evidence around the impact of health and safety programmes on wellbeing. Likewise, evidence around community interventions and activities that might be considered part of 'corporate social responsibility' is also limited. The most promising evidence for supporting and improving workplace wellbeing appears to be emerging from interventions aimed at improving the psychosocial work environment (worker attitudes and perceptions, job satisfaction, management practices and work organisation).

Resources

<https://www.good4work.nz/>

A workplace wellbeing tool for small to medium-sized businesses and businesses just getting started. Good4Work has been developed using insights from business owners and managers around the country and draws upon the most up-to-date workplace wellbeing knowledge and experience in New Zealand. It incorporates the World Health Organization's best practice ideas and recommendations for a healthy workplace.

<http://wellplace.nz/>

website dedicated to helping New Zealand workplaces build wellbeing. Wellplace.nz is where workplaces can find information and ways to take action on wellbeing topics including reducing alcohol harm, being smokefree, eating well, moving more and being SunSmart. It also features leading New Zealand businesses sharing why they invest in workplace wellbeing and some of the initiatives they've undertaken to build wellbeing.

Five Ways to Wellbeing, Nga Ara Rima: Covers five actions we can build into our everyday lives to benefit the wellbeing of individuals, workplaces/organisations, families and communities. They are Connect, Give, Take notice, Keep learning, Be active.

<https://www.mentalhealth.org.nz/home/ways-to-wellbeing/>

WHO's Healthy Workplaces: A model for action: The World Health Organization's explanation and framework for building a healthy workplace.

http://www.who.int/occupational_health/publications/healthy_workplaces_model_action.pdf

The National Institute for Health and Care Excellence: You can read NICE's recommendations or download a pdf of the document, Workplace policy and management practices to improve the health and wellbeing of employees.

<https://www.nice.org.uk/>

<https://www.employeebenefits.co.uk/healthcare-and-wellbeing/>

Lots of news items and case studies around wellbeing initiatives in the UK

References

Robertson Cooper (2014). Good day at work - Annual Report 2014/15. Robertson Cooper Website. Manchester.

Chapman LS, Meta evaluation of worksite health promotion economic return studies. *The Art of Health Promotion*, 2003, 6(6):1-16

K. T. Hallam, S. Bilsborough, M. de Courten "Happy feet": evaluating the benefits of a 100-day 10,000 step challenge on mental health and wellbeing. [BMC Psychiatry](#) December 2017, 18:19

Fenton, S-J., Pinilla Roncancio, M., Sing, M., Sadhra, S. & Carmichael, F. "Workplace wellbeing programmes and their impact on employees and their employing organisations : A scoping review of the evidence base." A collaboration between Health Exchange and the University of Birmingham. (2015).

Gerard Zwetsloot, Stavroula Leka & Pete Kines (2017) Vision zero: from accident prevention to the promotion of health, safety and well-being at work, *Policy and Practice in Health and Safety*, 15:2, 88-100, DOI: [10.1080/14773996.2017.1308701](https://doi.org/10.1080/14773996.2017.1308701)

Garrick, A. , Mak, A. S., Cathcart, S. , Winwood, P. C., Bakker, A. B. and Lushington, K. (2014), Psychosocial safety climate moderating the effects of daily job demands and recovery on fatigue and work engagement. *J Occup Organ Psychol*, 87: 694-714. doi:[10.1111/joop.12069](https://doi.org/10.1111/joop.12069)

Healthy Families South Auckland (The Cause Collective)
(www.healthyfamiliesouthauckland.nz)

For more information contact:

Tapuvakai Vea - tapuvakai.v@thecausecollective.org.nz | 021 599 265
Annie Ualesi - annie.u@thecausecollective.org.nz | 021 0261 1808