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**THE PERCEIVED BENEFITS OF WORK-BASED
WELLNESS PROGRAMS: A CASE STUDY OF
NIGERIAN COMPANIES AND EMPLOYEES**

Master's thesis

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This Master thesis has been compiled independently. All works by other authors used while compiling the thesis as well as principles and data from literary and other sources have been referred to.

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INTRODUCTION

The wellness industry has become a rapidly growing sector amongst other sectors globally, there has been a lot of demand in corporate wellness, wellness tourism, holistic wellbeing approach and many other crucial conversations on the importance of wellness in the global economy and its impact on social development. Work-based wellness programs have been found to positively impact employee's wellbeing and overall health as it is more focused on the holistic wellbeing approach and prevention measures. The World Health Organisation healthy workplace model considers work-based wellness programs as one of the best ways for prevention against non-communicable disease and for mental health (Burton, 2010, pp. 33–36).

According to the data from International Labour Organization, ILOSTAT database (The World Bank, 2021) labour force recent data retrieved in June 2020 the estimated Nigeria workforce is between 15 and 65 years with 60 million people working for an average of eight hours per day and five days a week, living a sedentary lifestyle. This lifestyle is one of the major contributions to the increased occurrences of obesity, high blood pressure, heart diseases and stroke amongst the young population and drastically reducing the life expectancy at birth which is currently 62 years according to the World Health Organization (World Health Organization, 2020b). While life expectancy at birth continues to increase amongst the OECD countries with the current age between 77 and 80 years with Japan, Switzerland and Spain exceeding 80 years. These gains amongst OECD countries can be notably attributed to the better health systems, higher income, better education systems, healthy lifestyles (OECD, 2019, p. 68–96).

Sedentary lifestyle which has been termed as the “Sitting Disease” by the scientific community refers to the term used to describe an individual who is physically inactive and sitting for a prolonged period. As much as it might not look harmless, sitting for a prolonged period has being linked to its negative impact on an individual's health and its effect associated with heart disease, diabetes, and other health issues. This level of

physical inactivity is increasing amongst the workforce population and has become a global issue affecting low- and middle-income countries (World Health Organization, 2010b, p. 10).

In the discussions revolving around work-based wellness, work-life balance is a major factor affecting overall wellbeing. The question of how to achieve a balance between life and work are questions that have posed increasing interest in the wellness industry. It is, however, interesting to note that the term work-life balance is a construct that is quite difficult to measure or investigate the impact of work on life itself. Kalliath and Brough (2008, p. 324) explain that from a research perspective, empirical information on various criteria needs to be measured to demonstrate the validity of the constructs (Work-life balance). Kalliath and Brough (2008, p. 324) define work-life balance as the individual perception that work and non-work activities are compatible and promote growth in accordance with the individual current life priorities. In determining a well-balanced life between work and individual wellbeing, several factors such as the individual, family, workplace, social environment, and others play a huge role (Delecta, 2011, p. 187).

Corporate organizations in other countries such as in Asia, Central America and Africa are beginning to take the initiative of providing wellness programs for their employees as evidence from North American companies shows that the implementation of work-based wellness programs positively improves workers productivity, reduce absenteeism, and improve workers engagement at work. On a global level, there is growing scientific evidence of a reduction in the cost of health care relating to work-based wellness programs provided by corporate organizations. (Roberts et al., 2013, pp. 3–5)

Although a successful work-based wellness program improves an individual's quality of life and overall wellbeing by decreasing rates of illness and injuries, lower health care cost, reduces the rate of absenteeism at work, improves employee retention and engagement, most importantly it enhances overall productivity and job satisfaction amongst employees. Work-based wellness programs are still not prevalent or provided in most organizations due to the perceived cost of implementing such programs or employee's unawareness of the benefits of these programs to their overall health and wellbeing and the lack of interest in these programs.

The relevance of this study considering the challenges facing the corporate wellness industry, it is important to study and gain insight on the work-based wellness programs and dimensions provided by corporate organizations, the perceived benefits of these programs to employee's wellbeing, and the awareness of employees towards the wellness programs provided by their corporate organization.

The purpose of this study is to ascertain the perceived benefits of work-based wellness programs on employee's well-being and awareness of wellness programs provided by corporate organizations in Nigeria and give suggestions based on findings to improve employee's health and wellbeing by maintaining a wellness lifestyle.

Research questions:

- RQ1: How do work-based wellness programs influence an employee's perceived wellbeing?
- RQ2: What is the kind of work-based wellness services offered by the corporate organization?

To achieve this goal, the following research task is set:

- review related research literature to provide more insight on wellness and wellbeing, work-based wellness, dimensions of wellness provided in corporate wellness programs, and the benefits of these programs to overall health and wellbeing.
- to identify the level of awareness of wellness programs amongst employees in corporate organizations.
- to analyze the perceived benefits of work-based wellness programs on employee's health and well-being.
- preparation of questionnaires for employees in corporate organizations in Nigeria.
- collection and analyzing of data to present the research findings.
- discussion of research findings and suggestions.

The research was undertaken among employees working in Victoria Island Lagos and Closed-ended questionnaires were distributed to respondents in the survey area for data collection. The Non-probability convenience sampling method was adopted for the study and a total of 201 employees filled the questionnaire.

The main chapter of the thesis focuses on the literature reviews and theoretical background related to work-based wellness, wellbeing, and health. The concept of health, quality of life, and wellbeing are described in detail using several authors like the World Health Organization, Dodge et al. (2012) wellbeing seesaw model, Dunn's (1959) health grid approach to wellbeing, and others. The second part of the literature explains the history of work-based wellness and wellness programs tracing back to the first literature by Bernardino Ramazzini (1633–1714) (Gainer, 2008, p. 6), reforms on working conditions by Robert Owen (O'Hagan, 2007, pp. 6–7) and WHO global framework of a healthy workplace. The third and fourth chapters focus on the reasons for designing, implementing work-based wellness programs and the perceived benefits of work-based wellness programs on overall health.

The second part of this thesis discusses the research method used, describes the data collection and analysis process followed by the third part which concludes the study by presenting the key findings of the research, limitations, and suggestions on work-based wellness programs.

1. LITERATURE REVIEW

1.1. Approaches and understanding of wellness, well-being, and health

Workplace wellness, safety, and health are important issues in the corporate community and not just for individuals or immediate family. The concept of health, wellness, wellbeing, quality of life, and workplace wellness are closely related. However, for the purpose of this study, it is important to define what each of these terms means exactly.

The World Health Organization (WHO) defined health as “a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity” (World Health Organization, 2020a, p. 1). This definition gives a broad view of the concept of wellbeing and not necessarily the meaning of health itself. Although the term wellbeing does not have a clear definition and what constitutes wellbeing as its difficult to measure or even understand. However, Dodge et al. (2012) was able to give a definition to the concept of wellbeing drawing from the definition of Shin and Johnson (1978, as cited in Dodge et al., 2012, p. 224): “global assessment of a person’s quality of life according to his own chosen criteria”.

The World Health Organization (1997) defined quality of life as:

individual’s perception of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards, and concerns. It is a broad-ranging concept affected in a complex way by the person’s physical health, psychological state, level of independence, social relationships, personal beliefs, and their relationship to salient features of their environment. (p. 1)

The definition of quality of life by the World Health Organization is a complex one as it covers every aspect of an individual's life and how these aspects of life is perceived by an individual relating to the person's expectations.

The term wellbeing draws from the definition of quality of life by the World Health Organisation (1997) and Dodge et al. (2012, pp. 229–230), defines wellbeing as the balance point between individual resource pool which is the psychological, social, and physical aspects and the challenges faced (see Figure 1). “Stable wellbeing is when individuals have the psychological, social and physical resources they need to meet a particular psychological, social and/or physical challenge” (Dodge et al., 2012, p. 230).



Figure 1. Wellbeing as a See-Saw model. Source: Dodge et al., 2012, p. 230

The see-saw model shows the balance point between individual resources pool and challenges. As individuals experience more challenges that are higher than the resources, it affects their personal wellbeing and in reverse, if the person experiences fewer challenges than the resources, it also affects their wellbeing on the same scale. This model of well-being can simply be explained as the ongoing process of working on one's resources to meet up with challenges to achieve stable or optimal wellbeing.

The concept of wellness differs in meaning to different people, culture, and language however, the concept of wellness still shares common elements in the sense that wellness is multi-dimensional as it integrates balance between all aspects of life, it is subjective and perpetual, Smith &, Puczkó (2009, p. 5). The idea of wellness has become increasingly popular currently, and very diverse from wellness centers, wellness programs, wellness fashion, wellness beauty and skincare, wellness conferences, and lots of wellness journals and even wellness foods (Kirkland, 2014, p. 957). But in all this what is true wellness and work-based wellness now.

The emphasis on preventative measures has always been the core of wellness. It is about taking ongoing measures to attain a high level of wellbeing focusing on the holistic self. Work-based wellness is not about safety at work, for example, wearing a helmet at a construction site. Wellness in the workplace now can be classified into mental health care, health biometrics, maintaining cholesterol level by providing healthy lunch and fruits at work, good working conditions, and others (Kirkland, 2014, p. 962).

Ardell's definition of wellness as "self-responsibility, nutritional awareness, physical fitness, stress management, and environmental sensitivity" (Ardell, 1982, as cited in Kirkland, 2014, p. 960) is what wellness is now. The focus on the individual self to attain a high level of well-being with conscious effort. The new wellness in the workplace according to Kirkland may promote individual health consciousness, promote work-based discrimination in wellness programs provided by different organizations, and provide a specific way of life that may lead to problems in the future. However, the new wellness will surely provide a lot of positive benefits which will be influenced by the design and implementation. Nonetheless, some of these wellness ideologies are troubling and can cause negative impacts in the long run (Kirkland 2014, p. 964).

In discussions of wellness now, it simply means living in a state of complete happiness when individuals meet the needs of all the dimensions: Physical, occupational, emotional, spiritual, social, and intellectual (Michael O'Donnell's 2009, as cited in Kirkland, 2014, p. 960). Therefore, to achieve this state of wellness now in the modern era, preventive measures such as work-based wellness programs are designed to promote wellness in the workplace.

Therefore, the definitions of wellness and wellbeing are a complex pursuit and often used interchangeably in scientific articles. The term wellness is not an easy concept to define, nowadays the word wellness has become a buzzword with different meanings. However, wellness cannot be discussed without talking about Dunn's (1959, p. 787) concept of wellness, which is the opposite of illness. Dunn argues that more focus should be placed on the cause of health instead of the cause of diseases goal.

Dunn's approach to wellness was embraced by other authors contributing to the paradigm shift on the modern approach to wellbeing. Dunn's health grid model shows that one's

wellness and quality of life can be impacted by environmental and external factors. To reach high-level wellness, the person himself needs to make personal life choices which include being a master of all aspects of life to attain this goal (Dunn, 1959, p. 788).

The “health grid” scale is made up of the health axis and the environmental axis which shows the impact of the environmental components which includes: the physical, socio-economic and biological factors affecting the health of the individual. These components can either impact the health axis positively with the individual attaining peak wellness, free from disease or negatively resulting in death. For this study, the definition of wellness based on Dunn’s (1959, p. 786) approach which is looking at wellness as a lifestyle towards living a healthy life and making a conscious effort to maintain a balance between the body, mind, and soul. This definition is important when talking about wellness in the workplace, the idea of maintaining balance as an ongoing way of life implies self-motivation.

Another well-known model of wellness is the Wheel of Wellness which was developed originally by Sweeney and Witmer (1991, 1992, as cited in Myers & Sweeney, 2004, p. 2–3) as an instrument to assess wellness based on the wheel of wellness to assess each domain with modifications made to the different subtasks which correlate with the quality of life, healthy lifestyle and aging well (Myers et al., 2000, p. 252). The Wheel of Wellness defined wellness as a “way of life oriented towards optimal health and well-being in which mind, body, and spirit are integrated by the individual to live life more fully within the human and natural community” (Myers et al., 2000, p. 252).

The Wheel of Wellness model includes the main domain of spirituality and self-direction which is centered on spiritual beliefs and having a sense of the meaning of life or purpose. Around the spiritual domain is the 12 sub-tasks which includes self-control, exercise, self-care, stress management, sense of worth, gender identity, nutrition, cultural identity, emotional responsiveness and management, realistic beliefs, problem-solving, and creativity which the individual has control over to direct the self on how to deal with the friendship, love, work, and leisure. The other external domain which impacts the life and wellbeing of the individual on the Wheel of Wellness includes the physical environment,

which is the government, family, community, media, religion, education, and industry. (Myers et al., 2000, p. 252)

Following the WHO definition of health, many wellness models have been discussed to understand the different facets of life and how each of these is connected, there is a shift in creating a wellness model with more focus on the subjective aspects of wellness than the objective indicators of quality of life. In this regard, it is important to study the domains of wellness as it relates to overall health, Michael et al., (2018, p. 43)

Hettler (1976) suggests that wellness is an ongoing process to attain full potential by being aware of and making conscious choices towards a more healthy and successful existence. While addressing the concept of wellness, it is important to note that the concept of wellness is multidimensional considering the various aspects of individuals' lives ranging from the psychological, social, biological, and other aspects involving the holistic model and how it contributes to overall wellbeing. Therefore, it is important to discuss the independent model or commonly referred to as the six dimensions of wellness: physical, occupational, social, emotional, spiritual, and intellectual as developed by Hettler (1976) See Figure 2.



Figure 2. The six dimensions of wellness. Source: Hettler, 1976

The six dimensions of wellness connect with the wellbeing of employees in the workplace, and it is important to design workplace wellness programs focusing on each dimension. The focus of this research paper is on work-based wellness as such it is important to discuss the wellness dimensions and how closely connected each dimension is to attain optimal wellness.

Miller and Foster (2010, p. 5) looks at wellness from a holistic perspective expanding on the discussions of the dimensions of wellness and defined occupational wellness as recognizing the importance of work satisfaction either paid or unpaid, referring to the personal level of enrichment and how individuals view their work as meaningful or impactful to the community while contributing one's unique skills or talent. This level of wellness creates a sense of fulfilment and personal achievement in overall wellbeing.

Occupational health is interrelated with occupational wellness as they both deal with the interaction between work and overall health or wellbeing. The World Health Organization (2001, p. 14) occupational health definition deals with the aspects of health and safety by protecting the health of workers from hazards and work-related diseases such as accidents, stress-related health issues, cancer, mental health problems, and others, and promoting healthy working conditions considering the working hours, health promotions, work-based wellness programs. While occupational wellness refers to the feeling of happiness, and fulfilment gotten from one's chosen career path and being able to maximize talent and skills as an individual and it is also about creating a happy environment in the workplace.

Physical wellness deals with the body's physical strength and how it responds to internal and external stress-related factors. Physical wellness is important to every individual as it deals with maintaining the body by regularly exercising, having proper nutrition, good sleeping habits, and most importantly engaging the body in continuous movement. To achieve balance in overall wellness, the individual makes personal choices such as maintain good health, seeking proper medical care when needed and avoid harmful or unhealthy habits. (Miller & Foster, 2010, p. 5)

Emotional wellness primarily focuses on the individual self and being able to maintain a positive view or attitude about life. Emotional/psychological wellness is primarily about

happiness, beliefs, and having a positive self-awareness are all interrelated (Miller & Foster, 2010, p. 6). Although it is hard to measure happiness, sadness, or satisfaction as it is subjective and what makes an individual feel these emotions vary. According to Ishak et al. (2020, p. 8), it is important to examine underlying emotions to understand wellness holistically, as life experience is subjective, individuals can share the same objective experience; however, they may have completely different perspectives on what happens. The emotional wellness dimension is commonly referred to as mental wellness, Mental health is currently one of the many stress factors in the workplace as studies shows that employees leaving work is due to work-related disabilities such as mental health problems OECD (2019, p. 83)

Spiritual wellness as defined by Adams et al. (1997, p. 166) and Miller & Foster (2010, p. 6) means having a positive sense of meaning and purpose in human existence. “It includes the development of a deep appreciation for the depth and expanse of life and natural forces that exist in the universe” (Hettler, 1976). The concept of spirituality and religion are both related but have different meanings (Miller & Foster, 2010, p. 6). This wellness dimension can be seen in the core of the wheel of wellness by Sweeney and Witmer (1991, 1992, as cited in Myers & Sweeney, 2004, p. 3) which centers on having a sense of direction. Attaining a higher level of spirituality means that one is in harmony with the body, soul, and mind giving a sense of peaceful feeling to the overall well-being.

Social wellness described broadly by Hettler (1976, p. 1) and Miller & Foster (2010, p. 6), involves the interactions between individuals, the community, work, and others. Miller explains that “besides the interactions of the individual, society, and nature, social wellness includes the motivation, action, intent, and perception of interaction”. In the discussions of social wellness in the workplace Boreham et al. (2016, pp. 2–4), concludes that there is a link between social wellness and wellbeing at work, and key aspects of one’s social capabilities have a strong impact on wellbeing. He further explained that management practices in the workplace or employment conditions either improve or diminish employee’s wellbeing.

The intellectual wellness dimension involves one’s creativity as it relates to the acquisition of knowledge and being involved in intellectual activities that stimulate the

mind. It involves the use of the mind for both personal and for the benefits of society. Hettler (1976, p. 1) As the intellectual curiosity develops, actively challenging and expanding the mind with creates endeavors improves the intellectual wellbeing which leads to self-satisfaction at work and making relevant contributions. Continuous learning and education increase the opportunity to better job security and gives individuals a sense of security which is subjective (Miller & Foster, 2010, p. 6).

In summary, to understand wellness, wellbeing, and health, this chapter looks at the definition of health by the World Health Organisation which defines health as the state of complete wellbeing between the physical, mental, and social dimension, also explained further that the quality of life is the individual's perception of life position relating to the person's expectations. Drawing from both definitions, Dodge et al (2012) also define wellbeing as a balance point between the resource pool which is the psychological, physical, and social dimension. On the other hand, Dunn's approach to wellness using the health grid-scale shows that both wellness and quality of life are impacted by the environmental and external factors and for optimal wellness, the individual must achieve balance in each of the wellness dimensions. Therefore, to further discuss work-based wellness, it is important to know the history of work-based wellness and wellness programs.

1.2. History of work-based wellness and wellness programs

The concept of wellness and corporate wellness is not a new term in the last decades, Work-based wellness programs, in the beginning, were linked to injury preventions and safety at work before World War II. As millions of individuals spend most of their lifetime at work, discussions on work-based health began to surface and research into corporate wellness focuses more on the work-based wellness programs and the benefits of these programs to employee's health and wellbeing.

The history of work-based wellness can be traced back to Bernardini Ramazzini (1633–1714) who was noted to be one of the first writers of the impact of work on workers' health. He studied workers who were affected by unnatural posture, movement of the body, and psychological stress as people left the farm to start working in factories during

the industrial revolution doing repetitive work and staying in a static position for a long time. (Gainer, 2008, p. 6)

In 1810, one of the earliest industrialist Robert Owen (1771–1858) who is best known for his reforms in the working condition of workers in his textile factory in Manchester. He proposed a social reform to improve the working and living condition by reducing working hours to 10-hour per day, ban on children below 10years old to work at the factory, and providing half-time education for workers. At the time of his proposal, the Bill was unsuccessful. However, working hours were reduced to 12 hours per workday and Owen’s idea ignited interest because it seemed to be the solution to critical social and economic problems rising at the time. (O’Hagan, 2007, pp. 6–7).

Thackrah (1832) is noted as one of the first writers to write about the health problems affecting employees. In his book Thackrah discussed man as the most interesting subject to study, his book is considered as the foundation to employee wellbeing. He noted that the world has changed due to human will and power and the wonders which science and art have affected (Thackrah, 1832, p. 2), however as much as this development is good, it is important to examine the effect of work physically and mentally. In his words:

I refer to the health of millions who spend their lives in manufactories or live by trade, civic, arts, and professions. I ask if these millions enjoy that vigor of the body which is ever a direct good, and without which all other advantages are comparatively worthless. (Thackrah, 1832, p. 3)

To find answers to his inquiry, Thackrah studied the working condition of different workers and provided suggestions to help improve the working conditions of workers (Thackrah, 1832, p. 3). After World War II, larger companies built a fitness center for employees which was available to executives or senior management. Although workplace wellness was more of a second thought by corporate organizations for their employees, the evolution of the employee assistance program in the 1940s was to provide wellness assistance to resolve problems relating to alcoholism and mental health issues amongst workers (White & Sharar, 2003, p. 3). During the 1950s, companies began to move from providing industrial alcoholism interventions to provide work-based wellness programs

which were not just provided internally but the service could be contracted from external organizations.

Today, corporate organizations have begun to invest and design work-based wellness programs to include other dimensions of wellness and providing services such as health screening, nutritional assistance, mental health programs, fitness delivery with the use of incentives to encourage employees to participate in these programs, Global Wellness Institute (2016, p. ii). The WHO launched its global framework of a healthy workplace in April 2010 defining a healthy workplace as:

one in which workers and managers collaborate to use a continual improvement process to protect and promote the health, safety, and well-being of workers and the sustainability of the workplace by considering the following, based on identified needs:

- health and safety concerns in the physical work environment.
- health, safety, and well-being concerns in the psychosocial work environment including the organization of work and workplace culture.
- personal health resources in the workplace (support and encouragement of healthy lifestyles by the employer).
- ways of participating in the community to improve the health of workers, their families, and members of the community. (World Health Organization, 2010a, p. 1).

The healthy workplace framework by WHO focuses on the importance of continuous evaluation and improvement of work-based wellness programs to benefit both the employer and the employee. Having a healthy lifestyle is very important as it promotes productivity at work, reduces the rate of absenteeism and cost on health insurance and many employers are seeking measures to improve employee's health (Cavico et al., 2014, p. 16).

According to Mujtaba & Cavico (2013, p. 193), there is simply no single uniformed definition of a wellness program from a legal, healthcare, or management perspective, in general terms wellness programs, can be seen as a program provided by employers to manage the health of their employees. Another definition of wellness program by

Juergens (2009, as cited in Mujtaba & Cavico 2013, p. 193) is a program designed “to encourage individuals to take preventative measures, through education, risk assessment and/or screening, or disability management to avert the onset or worsening of an illness or disease”. Mattke et al., (2013a, p. 5) broadly defined a workplace wellness program as an employment-based activity or employer-sponsored benefit aimed at promoting health-related behaviors (primary prevention or health promotion) and disease management (secondary prevention). It may include a combination of data collection on employee health risks and population-based strategies paired with individually focused interventions to reduce those risks.

Although, wellness program seeks the same objective which is to improve overall health and provide a balance between each of the dimensions of wellness. However, the programs are designed and managed differently depending on the needs of the corporate organization. Further to this, the Patient Protection and Affordable Care Act (2010, p. 553) provided various provisions aimed at improving healthcare cost, health promotion, and disease prevention which includes wellness and preventive service plan for individuals and corporate organization to reduce the burden of chronic illness (Mattke et al., 2013b, p. 10).

In addition, Work-based wellness programs according to Mattke et al. (2013b, p. 5) survey data shows that wellness programs have become more popular as 92% of employers with an average of 200 employees offered wellness programs to their employees in 2009. Wellness programs are becoming increasingly common as corporate organizations offer programs that consist of health risk assessment, medical examinations, nutrition or healthy diet plans, mental health assessment, and preventive interventions or counseling aimed at reducing health risk factors such as smoking, and alcohol consumption (Mujtaba & Cavico 2013, p. 194)

In conclusion, wellness programs from history serve as a preventive measure for chronic illness and to promote a healthy lifestyle. Authors such as Bernardini Ramazzini, Robert Owen, Thackrah, and others all studied the impact of work on an individual’s health and provided suggestions such as reduced working hours, better working conditions, mental health interventions to improve employee wellbeing. Various articles as mentioned

above, and other works of literature have extensively explained and provided result-based survey data on the benefits of wellness programs provided by corporate organizations.

1.3. Reasons for designing and implementing a wellness program in the workplace

In the last decade, wellness research focuses more on work-based wellness and health service to address the increasing health challenges such as obesity, mental illness, sedentary lifestyle, and other global diseases to proffer solutions to issues regarding work-life balance, long working hours, absenteeism, and productivity at work (Mattke et al., 2013a, p. 9). The WHO Tallinn Charter developed in 2008 for improving people's health and noted that "Beyond its intrinsic value, improved health contributes to social well-being through its impact on economic development, competitiveness, and productivity? High performing health systems contribute to economic development and health." (World Health Organization, 2008, p. 1)

The Global Wellness Institute (2016, p. i) employee survey report on wellness and work in 2016 declared that 3.2 billion workers are unwell as most of the employees suffer from diseases, lack of fulfilment or satisfaction with their jobs and most of the workers are unhappy or stressed. This problem has affected the economy in the United States with an estimated cost of \$2.2 trillion each year and causing an even more increasing burden in the health care system globally (Global Wellness Institute, 2016, p. i). Oyewunmi et al. (2015, pp. 109–110) reveal the need to recognize mental health in the Nigerian workplace as a major concern and interventions such as education and awareness campaigns on health and wellness promotions to improve the well-being of employees, productivity at work and significantly resolve the myriad of socio-economic problems affecting Nigeria as a whole.

According to the Sanofi Canada healthcare survey report (Sanofi, 2020, pp. 8–14), there is a high impact of stress on the mental health of millennials both in school and the workforce which is very alarming. The report shows that individuals using the Sanofi healthcare plan between the age of 18 to 34 were highly stressed more than those who were 55 years and above. 39% reported personal finances as the first factor causing stress, 34% indicated workload and 32% indicated balance between their work and personal life

responsibilities amongst other factors such as the social relationship between people at work (27%) and personal relationships (23%). This report shows the impact level of employee's well-being on productivity at work and 41% of individuals using the healthcare plan took a sick leave in the past year. There is a need for employers to step up and take appropriate measures in providing adequate support for employees in the workplace, most young individuals appear to be struggling with one chronic disease such as diabetes, arthritis, and other health conditions. There is a huge negative impact of this on productivity at work, quality of life, and the economy overall, as the call to action is to maintain a quality wellness culture in the workplace to help employees manage their health status and have a sense of job satisfaction.

Another report by the OECD (2019, p. 83) on absenteeism at work shows that 30–60% of employees were absent from work due to mental health illness. The definition of health by WHO states that health is a state of complete “physical, social and mental well-being” (World Health Organization, 2020a, p. 1). In this regard, there is no health without mental health, WHO further describes mental health as:

a state of well-being in which the individual realizes his or her own abilities can cope with the normal stresses of life can work productively and fruitfully and is able to make a contribution to his or her community (World Health Organization, 2001a, p. 1)

(Galderisi et al., 2015, p. 231) explained that mental health is affected by individual factors and experiences and proposed a new definition stating that mental health is a “dynamic state of internal equilibrium with universal values of the society”. Although quite confusing, Galderisi et al. (2015, p. 232), further explained that the *universal equilibrium* in the definition refers to respect for oneself, environment, and connection between people while the concept of the *dynamic state of internal equilibrium* means the different period of changes in one's life such as becoming a parent and retirement. It is how individuals adapt and cope with these changes. On the other hand, Keyes (2002, p. 606) identified the three components of mental health which include: emotional, psychological, and social wellbeing. All three components contribute to individuals' positive emotions and positive functioning and this relates directly to productivity at work.

The prevalence of mental health illness and other chronic diseases is a reason to introduce wellness programs in the workplace. The report on mental health and wellbeing in the workforce by Deloitte (2020, pp. 12) shows that 7 in 10 workers suffer from mental health conditions. Between 2015–2016, 37% of work-related stress was due to ill health and 45% absenteeism. While there is a continued increase in the awareness of the impact of employee's poor mental health, there seem to be slow interventions from employers to support employees by providing work-based wellness programs to address this issue.

Litchfield et al., (2016, p. 2) mentioned that the effect of work on wellbeing in the 21st century is psychological rather than physical, citing the study by The UK Health and Safety Executive on the primary source of stress in the workplace which are: workload demands, the amount of support provided by the management to employees, relationships between colleagues at work, the number of control individuals have over their work, role and finally change.

Additionally, Obianuju et al., (2020, p. 989) stated that mental health disease in Nigeria continues to increase due to lack of facilities such as mental health clinic, professionals and poor attitude of the society towards mental health disease, the author mentioned that 80% of individuals with serious mental health problems are unable to access health care facilities. Oladeji & Morakinyo (2003, p. 165) also mentioned the prevalence of mental health issues in Nigeria and the lack of physicians or mental health services, also stating that most health care workers do not have proper mental health training and the perception or belief towards mental health disorder. Due to this, there is a need for corporate organisation to design and implement wellness programs which includes educational training on mental health issues.

Furthermore, research on the effect of long working hours on incidents of diabetes amongst Ontario worker, women working 45 hours or more per week were found to have a significantly higher risk of developing diabetes than women who work less than 40 hours per week (Gilbert-Ouimet et al., 2018, p. 4). Diabetes is one of the major health risk factors and the primary cause of death globally, there is a need to further investigate the link between long working hours and diabetes as a risk factor to individuals' overall health. Long working hours is one of the main issues affecting employees in Nigerian

corporate organization and most especially the healthcare workers due to shortage of workforce (Adisa et al., 2017, p. 13).

In discussing the reasons for designing work-based wellness programs to provide preventive measures to help reduce the stress factors affecting individual health. One main area is the work-life balance which by no means is a simple concept, the construct work-life balance does not have a clear definition as it does not explain what the different term means, however it is used to describe how the three components integrate with one another to achieve a balance between each of the components.

Work-life balance according to Kalliath and Brough (2008, p. 326) “is the individual perception that work and non-work activities are compatible and promote growth in accordance with an individual’s current life priorities.” Long working hours, lack of leisure time, family engagement, and others are all major issues affecting employees in the workplace and limitations to achieving a balance between work and life (Adisa et al., 2017, p. 13). Work-life balance is one area of concern for workers in Nigeria, the perception on stress factors due to the fast speed of economic development in Lagos state, workers experience significant stress owing to long working hours, long commute hours to and from home to work, lack of proper work policies and work-life imbalance, (Akanji, 2012, pp. 225–226). However, it is quite hard to discuss the construct of work-life balance due to the lack of comprehensive empirical studies in Nigeria. Females in Nigeria tend to experience a lower work-life balance than men due to taking on more family responsibilities and caring for both aging parents and immediate family (Okoye, 2012, p. 141).

Additionally, with regards to the current Covid-19 pandemic, the World Health Organization (2020c) on March 11, 2020, declared coronavirus (Covid-19) a pandemic. Covid-19 is an infectious disease caused by a coronavirus. The widespread of the virus has led to high mortality rates, disruption in people’s lives and all sectors globally. Nations are forced to go on lockdown, social distancing, the wearing of respiratory masks, and institutions, as well as corporate organizations, are unable to function properly. The TELUS health report (TELUS Health, 2020, pp. 2–3) found that there is a massive increase in the use of medications for mental health issues over the last five years in 2019

before the Covid-19 lockdown among insured Canadian below 29 years old. This report shows that there will be even more mental health challenges in the future as social distancing, remote work, and other measures will be in place due to the Covid-19.

Evidence from the Organisation for Economic Co-operation and Development (OECD) report on the impact of Covid-19 shows that the negative impact of the pandemic on the unemployment rate rose to an unprecedented increase in March 2020 to 7.4% and 8.1% in January 2021 in Europe with youths and women most affected (OECD, 2021). One of the major impacts of the pandemic crisis on employee wellbeing is mental health illness, depression, and anxiety due to uncertainty. Hamouche (2020, p. 4) highlighted the main stressors on mental health due to the pandemic as: “perception of safety, threat and risk of contagion, Financial loss and job insecurity, excessive information causing anxiety or panic of the unknown and quarantine.” These stressors indicate a high level of negative impact on the overall health of employees such as psychological stress which can lead to depression and mental health problems.

Finally, a lot of transformation in work-based wellness program design and implementation has taken place in the past few months to mitigate the impact of the pandemic on individual health, employees as well as employers. Other wellness initiatives during the Covid-19 pandemic are the use of technology to offer mental health resources, online emotional support for employees such as communication via slack, teams, and zoom meetings. As the chronic illness continues to increase, it is important for wellness programs to be tailored to meet the needs of individuals and the perceived impact of such programs on overall health.

1.4. Perceived benefits of work-based wellness programs

As the prevalence of chronic disease caused by unhealthy lifestyles such as poor nutrition, sedentary lifestyle, and smoking with high consumption of alcohol continues to rise, the cost of medical care has also increased adding to the economic burden (Gilbert-Ouimet et al., 2018, p. 1). Corporate and government organizations in the last few decades focused on health strategies such as implementing work-based wellness programs to improve the health and lifestyle of employees as more than half of the population are of working age (Arena et al., p. 605). Empirical studies on wellness programs by Gubler (2018, pp. 4–6)

identified the perceived benefits of work-based wellness programs amongst employees on overall health.

The perceived wellness model according to Adams et al. (1997, as cited in Rothman & Ekkerd, 2007, p. 36) is a multidimensional, salutogenic construct (origin and factors that support human health and wellbeing), Perceived wellness is defined as a complete, consistent and balance between the wellness dimensions in one's life. Individuals who score high in perceived wellness are physically healthy and have holistic wellbeing. When measuring the perceived benefits of work-based wellness programs it should include all dimensions of wellness by incorporating Dunn's health grid model (Dunn, 1959, p. 788) and seeking a balance between each dimension.

According to RAND workplace wellness program study (Mattke et al., 2013b, p. 17), employers are adopting health promotion and disease primary prevention strategies by providing wellness programs which often includes health screening activities to identify employees with health risk or unhealthy lifestyle such as smoking, inactivity, lack of sleep and others to proffer solutions such as lifestyle management and disease management through work-based wellness programs. RAND health survey on wellness programs offered by employers shows that more than 77% of employers offer lifestyle management programs such as weight loss interventions, smoking cessation, stress management, fitness, health education, and others. The survey report published showed improvement in physical activities, better eating habits, and overall improvement in healthy lifestyle amongst employees who participated in the survey (Mattke et al., 2013b, p. 19).

Also, the perceived impact of wellness programs on productivity is difficult to measure. Gubler (2017, pp. 5–22) demonstrated that wellness program is designed to help employees identify and manage existing illness or improve their health conditions, some of the potential impacts of wellness programs on productivity highlighted by Gubler after examining the health data of employees over a period of one year includes the following: Improved motivation and job satisfaction through motivation, work capacity, and gratitude. The result also showed that there are two determining factors: participation rate and employee turnover for employers to achieve a productivity-based return on investment on work-based wellness programs.

The return on investment on company-sponsored wellness program benefits can either be attitudinal or behavioral, by either changing the way people feel or perform at work. Successful wellness programs influence employee's attitudes towards work by enhancing their Morales, commitment to the organization, and decrease absenteeism (Swayze & Burke, 2013, pp. 47–50). A study on the financial impact of wellness programs by Nyman et al., (2009, as cited in Sifain, 2010, p. 13) showed the calculated return on investment using three major components of wellness programs: wellness assessment survey with incentives on completion, lifestyle management, and disease management. The study showed that the disease management component had a significant impact on health care cost by \$1375 per year for each employee (Sifain, 2010, p. 13).

Additionally, Song and Baicker (2019, p. 1499) randomized clinical trial involving 32974 US warehouse retail company employees of middle and lower-income on the effect of a work-based wellness program on employee's health and economic outcome over 18months showed that individuals who used the wellness program offered reported better lifestyle behaviors such as regular exercise, healthy eating habits but no significant measures on health care spending. Also, employees who used these programs noticed changes in behavior leading to a more self-conscious healthy lifestyle which could be a return on investment in wellness programs in the long run.

Furthermore, Marshall (2020, pp. 235) examines the extent to which comprehensive wellness programs affects employee's job satisfaction level, in his survey of approximately 200 employees in the hospitality organization showed that offering a wellness program influenced both the extrinsic and intrinsic job satisfaction level as the respondents are satisfied with the job, working condition, colleagues, salary as well as the leadership.

The impact of work-based wellness programs is mostly intangible as the feeling of happiness or job satisfaction is subjective and hard to measure. However, there are a lot of perceived benefits linked between wellness and work. Global survey shows that only 52% of companies measured specific outcomes from wellness programs (Global Wellness Institute, 2016, p. 19). Companies today tend to provide wellness initiatives or programs in place aimed at reducing healthcare costs and improving employee wellbeing.

1.5. Best practices for work-based wellness programs

There are several best practices discussed by authors when it comes to introducing or implementing a work-based wellness program. Corporate organizations are implementing work-based wellness programs in response to the Affordable Care Act wellness initiative. According to section 4103 of the Patient Protection and Affordable Care Act (2010, p. 553) coverage of personalized prevention plan service, wellness programs should serve as a personalized preventive plan for individuals and should include the following components: Health risk assessment, medical or health history, body mass index, mental health assessment and list of other health risk factors to identify risk and provide preventive interventions such as counselling, health education.

Mattke et al. (2013b, p. 28) listed five factors to promote a successful wellness program for employers to develop, implement and evaluate: “1) effective communication strategy, 2) leadership engagement and commitment, 3) relationships, and partnerships to leverage resources, 4) accessible and involved employees, and 5) relevance as well as continuous improvement.” In addition to Mattke et al. (2013b) five factors, Zula (2014, pp. 785) indicated six essential pillars which include: “1) Multi-level leadership, 2) alignment, 3) accessibility, 4) partnerships, 5) communication, and 6) scope, relevance, and quality.” If these factors are implemented, wellness programs can help reduce lifestyle-related diseases and the effects are sustainable for a long period of time (Mattke et al., 2013b, p. 29).

Also, Babu et al. (2014, p. 20) explained that to achieve maximum success in work-based wellness programs both at the primary and secondary level, the following specific model must be considered:

- **Assessment:** it is important to understand the specific needs of employees and what stressors affect their overall health and plan the objectives of the programs.
- **Planning:** to implement a successful program, the author advised that a planning committee should be set up, written documentation, and laid out communication plan on the process and progress of the wellness initiative.
- **Implementation:** work-based educational programs and counselling should be implemented involving all stakeholders.

- Evaluation: constant feedback from employees should be reassessed every 2–3 years and ensure that the programs meet employee’s needs.

In addition, Swayze, & Burke (2013, p. 58) mentioned that to improve employee participation in physical wellness programs employers should offer valuable incentives on participation, enrolling, and completing of the program to keep employees interested in improving their health. Results from employee wellness programs can vary from different companies based on their employee’s needs. However, there are certain similarities in the design and implementation of wellness programs.

These benchmarks help corporate organizations to identify their specific health issue and tailor wellness programs based on the pressing health issues to design wellness programs around their employee’s health needs. The most important factor to successfully implementing wellness programs is leadership support which is the first benchmark on WELCOA’s seven benchmarks (Swayze & Burke, 2013, p. 60).

Marshall (2020, pp. 224–228) also mentioned that organizational leaders offer comprehensive wellness programs to make employees healthier and employees are motivated to use the programs provided with little or no opposition as the comprehensive programs offered are designed using the preventive approach to improve the overall health. Marshall pointed out that one main reason why leaders offer comprehensive wellness programs is to curtail the rising health care cost by addressing the causes of premature death and diseases amongst employees and increase job satisfaction.

Another literature on work-based health promotion and best practices by Goetzel et al., (2008, p. 6) identified six elements among successful wellness programs: Organization commitment, incentives for employees to participate, effective screening, evidence-based interventions, effective implementation, and ongoing program evaluation. To determine good practice and successful work-based health promotion programs, employers must tailor programs to meet the need of employees, provide promotional incentives to encourage participation, and organisations should show commitment to such programs to encourage employees (Stepanek et al., 2017, p. 6).

Considering the heterogeneity of health promotion packages offered by different employers termed as wellness, it is important to clearly distinguish between what is wellness programs and random wellness initiatives (Goetzel et al., 2014, p. 929). A lot of work-based wellness program have become common wellness strategies; however, a comprehensive wellness program should include the following components:

Health risk assessment: under the Patient Protection and Affordable Care Act (2010, p. 553), health risk assessment is compulsory and should be included in any wellness program, it is a very important tool as it examines behaviors and lifestyle, during a health risk assessment, questions regarding, nutrition, physical activities, weight, blood pressure and health risk factors such as smoking, and alcohol consumption are noted down (Mattke et al., 2013b, p. 13). This serves as a benchmark to help employees understand and manage their health while giving the employers insight on what preventive measures to offer the employee.

Due to the low cost of health screening, many employers offer biometric screening to the employees both onsite and scheduled hospital visits. The health screening measures the body weight, cholesterol level, heart rate, height, and blood glucose level. The health screening result can be used to compare the employee's health and gather data on the overall health over a long period of time (Mattke et al., 2013b, p. 13).

Another component to consider for a comprehensive wellness program is the employee assistant program. Under this initiative, counselling, and education on health or personal issues such as mental health, smoking cessation, alcohol intervention programs, or concerns on work-life balance, work-related stress is addressed by providing referrals to professional counselling services (Mattke et al., 2013b, p. 13).

Lifestyle management intervention as the component of wellness programs provides interventions that are tailored to the individual or corporate organizations. Initiatives such as fitness center at work or gym membership, healthy meal options, team events, and other healthy lifestyle activities help employees make a conscious lifestyle change to improve overall health. (Mattke et al., 2013b, p. 14).

Finally, another component of a wellness program is access to wellness resources both online and offline. As wellness is a continuous process, employers need to make wellness resources readily available to provide awareness and information to the employees and individuals who are interested in wellness information (Mattke et al., 2013b, p. 15). And to improve employee's engagement in wellness programs, incentives should be offered in various forms as studies have suggested that there is a high rate of participation in health risk assessment than other components, Although, it is quite hard to measure the level of uptake on wellness initiative provided by employers (Mattke et al., 2013b, p. 20). Sifain (2010, p. 125) investigation on the use of incentives as a reward to improve employee's participation rate shows that 56.4% of the respondent agreed that the reward of \$300 motivated them to use the wellness program offered.

Wellness programs and the best practice are interrelated and to achieve a successful comprehensive wellness program, many factors are to be considered to ensure that these programs follow the approved guidelines. The programs can vary greatly, however, the result that is sort remains the same which is achieving balance amongst the dimensions of wellness and to continue improving the overall wellbeing which is a lifelong process.

2. STUDY OF NIGERIAN COMPANIES AND EMPLOYEES

2.1. Research process

The research process consists of the necessary steps and actions needed to effectively carry out research from start to finish. This process addresses the research method and design used in collecting and analyzing primary or secondary data to gain answers to the research questions. The process of research started as a quest to gain more understanding of events and happenings in the environment, the use of experience as a tool is unjustified hence the importance of research questions which combines both the experience and scientific reasoning to give appropriate answers to questions (Igwenagu, 2016, p. 1). The research method can simply be defined as the ways in which data either primary or secondary are collected and analyzed by the researcher during a research study. Igwenagu (2016, p. 1) defines methodology as the systematic, theoretical analysis of the methods applied to a field of study, which simply means how research is conducted.

The research design is aimed at problem-solving, using available materials also known as data to solve a problem or create a sound argument based on scientific evidence and reasoning. According to Justice (2008, p. 75) research design denotes both a process and a product aimed at facilitating the construction of sound arguments, he explains further that an argument is a logical structure that offers both evidence and reasons which support some a claim. The importance of a research design can be distinguished in two parts; the quality of the research which is determined by the process used in carrying out the study and the methods, theoretical framework, and research questions used to gather evidence that supports the claim of the study (Justice 2008, p. 76).

In social and natural science, scientific research adopts both quantitative and qualitative research methods, although there are other types of research methods that also include the mixed method. Each of these paradigms considers different assumptions and premises when it comes to the purpose and nature of research (Almeida, 2018, p. 138).

A qualitative research method is used in gathering data that are not quantifiable using real-life experiences to provide answers to the questions of “what”, “why” and “how” of social events in natural settings. Qualitative research involves examining and reflecting on the less tangible aspects of a research subject, e.g., values, attitudes, perceptions. (Gabrielian et al., 2008, pp. 142–143)

The quantitative research method originates from natural science, this research method is used in collecting quantifiable data which is objective and can be used for large surveys (Gabrielian et al., 2008, pp. 142–143). Studies done using qualitative methods are reliable and separates the researcher from the study itself with the use of independent variables (Gabrielian et al., 2008, pp. 142–143). Quantitative research methods are useful in describing trends and explaining the relationship among variables using numerical data that are subjected to statistical analysis (Tian, 2018, p. 202). The specific aim of using the quantitative method in research is to measure variables, give a better understanding of existing theories and this can be achieved by formulating hypotheses, taking surveys, or questionnaires.

For this study, the author believes that the quantitative research method best fits the research design process to gain answers and understanding of the research questions posed in the study, to this end a questionnaire is designed with fixed answers to summarise, evaluate, and draw conclusions. According to Tian, (2018, p. 202), there are two major types of quantitative research methods: experimental studies and non-experimental. Experimental studies can simply be explained as the researcher’s ability to manipulate one or more controlled variables, this kind of research is carried out among an experimental group or in the laboratory. While the non-experimental studies rely on observing and interpreting data to come to conclusion. In this research study, the non-experimental quantitative research method will be used as it involves getting data from a large population by distributing questionnaires.

It is important for the purpose of this study to identify what kind of data will be collected in terms of the population, study area, time, and other factors which are classified as a unit of analysis, the unit of analysis for this study is focused on the individual which is the employee. Data will be collected at one point in time to analyze the perceived benefits

of work-based wellness programs which can be referred to as a cross-sectional study, although this kind of data collection falls short in examining the benefits of wellness programs on employee's wellbeing as a much better approach will be to use the longitudinal study to analyze these benefits to produce better quality data. Data that is collected at more than one point in time can indicate whether findings vary over time (Northrop & Arsneault, 2008, p. 215).

Surveys are used to find out what people think, feel, or intend to behave (Tian, 2018, p. 203). The design of this survey is determined by the purpose of the survey and the cross-sectional survey method is carried out for the purpose of this study.

A questionnaire allows non-numerical data to be collected in a standardized way so that the data are internally consistent and coherent for analysis (Roopa & Rani, 2012, p. 273). The questions in a survey are directly linked to the research questions to provide answers or understanding of the goal of the research. Survey questions can be both close and open-ended. In close-ended questions, the response categories are exhaustive, that is, include possible responses expected from respondents (Majumdar, 2008, p. 245). This study uses closed-ended questions drawing from reviewed works of literature used for the study such as Mattke et al., (2013b), Mujtaba & Cavico (2013), Gubler (2018), and Sifain (2010). The questions on perceived benefits of wellness programs use a five scale Likert system (see Appendix 3).

For this research, online self-administered questionnaires were prepared using Google Forms and distributed via social media: Instagram, WhatsApp, and Facebook group chat directly to respondents with a shareable link briefly explaining the aim of the survey.

The questionnaire comprises four sections (see Appendix 3) using close-ended questions in each section. Section "A" of the questionnaire focus on the demographic characteristics of the respondents such as gender, age, education, employment status, length of time working in the current organization. Section "B" comprises seven questions asked to get information on the respondent's overall wellbeing and to find out the impact of work-related stress on employee's health. Section "C" comprises of four questions, Question 13 aim at finding out if work-based wellness programs were offered by corporate organizations in Nigeria and if the employees are aware or not. Question 14 aim at finding

out the kind of wellness services offered and if participants answered yes to question 13 the participant is required to tick the list of service stating if it is offered, not offered or not aware. Question 15 aims at finding out what kind of wellness services the participant will be interested in or beneficial if the participant ticked “No or Not aware” to question 13.

The same list used in question 14 was used for question 15 and Likert scale responses ranging from 1–5 where 1 is not beneficial and 5 is extremely beneficial to each of the services. Question 16 aimed at evaluating the level of satisfaction of participants to the wellness services offered by the corporate organization. Section D comprises four questions addressing the perceived benefits of the work-based wellness programs to employee’s overall health. Question 17 aimed at finding out if participants felt more positive after using the wellness programs and question 18 indicates a list of 12 perceived benefits where participants are asked to choose. Question 18 to 20 aimed at finding out if participants are interested in work-based wellness programs and what medium would be more acceptable for participants to receive wellness information.

The questionnaire was drafted and sent to the project supervisor for revision after which corrections were made and the questionnaire was created using Google Forms survey software to prepare the questions, collecting of data, analyzing and share the results. The final link to the questionnaire was distributed on 12th April 2021 and a total of 201 respondents were received between the 12th of April 2021 to the 28th of April 2021.

The author uses descriptive statistical analysis to evaluate the items in the questionnaires, the aim of using this method is to show detailed and clear summaries of the data gathered from the questionnaire. Descriptive data analysis describes the data gathered in terms of the frequencies, proportion, mean, median, average, etc to measure the qualitative variables which are categorized into sections (Hussain, 2012, p. 741). Each variable’s type is determined by the nature of the descriptive statistics and how it is calculated, reported, and displayed (Larson, 2006, p. 76). The author uses Google Forms to create the online questionnaires and analyzed data gathered from the questionnaire using Excel and SPSS statistics V26.

In the process of distributing the links to the questionnaire to the participant, the researcher ensured that the privacy of the respondents was secure, and the respondents had the option to either fill the questionnaire or opt-out at any time if the participant wishes to not participate anymore, the respondents were also informed that the responses were strictly for educational purpose that all response remains confidential.

Sampling is the gathering of information to make conclusions about an entire population by studying part of that population (Young, 2016, p. 2). The non-probability sampling using the convenience sampling method will be adopted for this study, the researcher is based in Victoria Island Lagos and has worked and lived in the survey area making it convenient to collect data via the use of social media which includes Facebook and Instagram, and Email, the link to the questionnaire was sent by direct messaging to friends who also helped by forwarding the link to colleagues who work in the same survey area. The convenience sample method involves choosing units of study that are readily available to the researcher (Northrop & Arsneault, 2008, p. 225).

The most important step in the sampling process is defining the target population and size. The population is commonly referred to as the total number of people or entire group living in a particular environment (Majumdar, 2008, p. 244). Sample size means to collect data from a portion of the population instead of the whole units. To collect accurate data for this study, the target population needs to meet the following category: be an employee working in a corporate organization and be working in a corporate organization in Victoria Island, Lagos state Nigeria.

The geographical location for this study is Victoria Island, Lagos, which is part of the islands that form the Lagos Island. Lagos Island consists of three major areas, Ikoyi, Lekki Peninsula, and Victoria Island (see Appendix 1). Due to the lack of recent census data on labor force statistics in Nigeria, the author used the overall population of individuals in Lagos Island which includes the population of Victoria Island between the age of 15–64 years which is a total of 5,952,614 (National Population Commission of Nigeria, 2016).

According to Israel (1992, p. 2), the sample size in the research process can be determined using publish tables with a given set of criteria. Although in any research it is ideal to measure the entire population, however, due to limiting factors such as the time this study

was carried out, expenses, and the distance between the geographical location of the author and the sample area, it is quite impossible. Hence, the use of convenience sampling method, which is a common sampling method, however, a sample of convenience is difficult to represent the entire population (Northrop & Arsneault, 2008, p. 226). Based on these limiting factors, the authors choice of 200 samples between the age of 20–59 years old which is the average working population age of employees working in Victoria Island Lagos, Nigeria.

The target group for this study is specifically defined as it involves work-based wellness, the demographic information needed for this target group is age, gender, employment, and education status, and awareness level of corporate wellness practices. In addition, what kind of practices are termed wellness, wellness packages offered by the organizations, and how many employees make use of these packages provided. In conclusion, to find the perceived benefits of the wellness programs already provided on participant wellbeing.

2.2. Results and data analysis

The result from the 201-employee respondent shows that majority of the employees who responded are female with 47% and a close margin with 43% male respondents. 9% of respondents, preferred not to say their gender while 1% were gender-neutral.

The age distribution of the employees shows that the majority of the respondents were between the age of 20–29 with 44% responses followed by individuals between the age of 30–39 years with a total response of 38% and a minority of the responses where between the age of 40–49 with 9%, 50–59 with 1% and below 20 years with 6%. the age distribution of the respondents shows that a total of 168 are young and between the age of 20–39 years old.

To further situate the study on employees, additional questions asked to gather data on the respondent's educational level, employment status and to find out how long each of the respondents has been working in the corporate organization. The data analyzed shows that male respondents were slightly less than female respondents and just a minor

difference found between the age group, gender distribution, educational level, and work experience.

It can be seen from the table that the majority of the respondents which is 52% are Educated and have a bachelor's degree, 32 respondents (15%) have a postgraduate diploma and approximately 15% of the respondents have a master's degree or college degree and below. On the other hand, only 1% of the respondents have a doctoral degree. The result got from the question on employment status also shows that 62% of the respondents were full-time workers in their various organizations and 29% worked part-time. 11% of the respondents declared that they are self-employed while talking about the respondent's employment status, majority of the respondents with a total number of 126 (62%) declared they have been working in their current organization for less than five years and 31% have worked between 6–10 years in their current organization with 6% stating they have worked for 11–20 years, respectively. The demographic data shows that most of the respondents were female, and between the age of 20–29 with a minimum of a bachelor's degree and a working experience between 1–5 years. This data shows that the respondents are educated and young (see Figure 3).

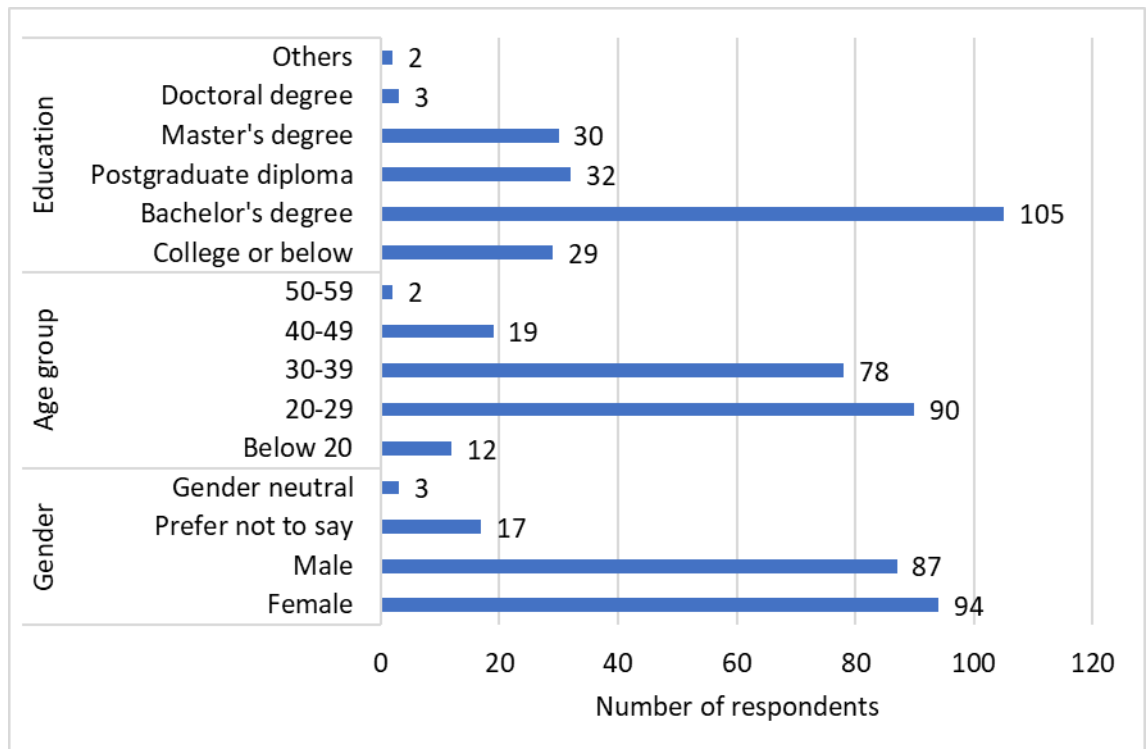


Figure 3. Demographics data. N = 201

Section B was concerned about the overall health status of the respondents and most of the respondents rate their overall health as very good with a total number of 45% while 26% said their health was excellent and 23% said it was good, less than 5% mentioned their health was fair. From the report below, a total of 145 respondents perceived their health to be very good or excellent at the time of filling the questionnaire.

Question 7 used a Likert scale response of 1–5 where 1 is not concerned and 5 is extremely concerned about which health risk are the employees concerned about? From the chart below, most of the respondents noted that they are not concerned about the health risk of smoking and alcohol consumption which is 42% and 35% are not concerned about the major health risk factor. On the other hand, respondents are concerned about work-related health risks. Figure 4 shows that 26% of respondents are slightly concerned about sitting for a long time as opposed to 24% of respondents who are more concerned about the health risk of sitting for a long time. Less than 20% of the respondents were either extremely concerned or somewhat concerned.

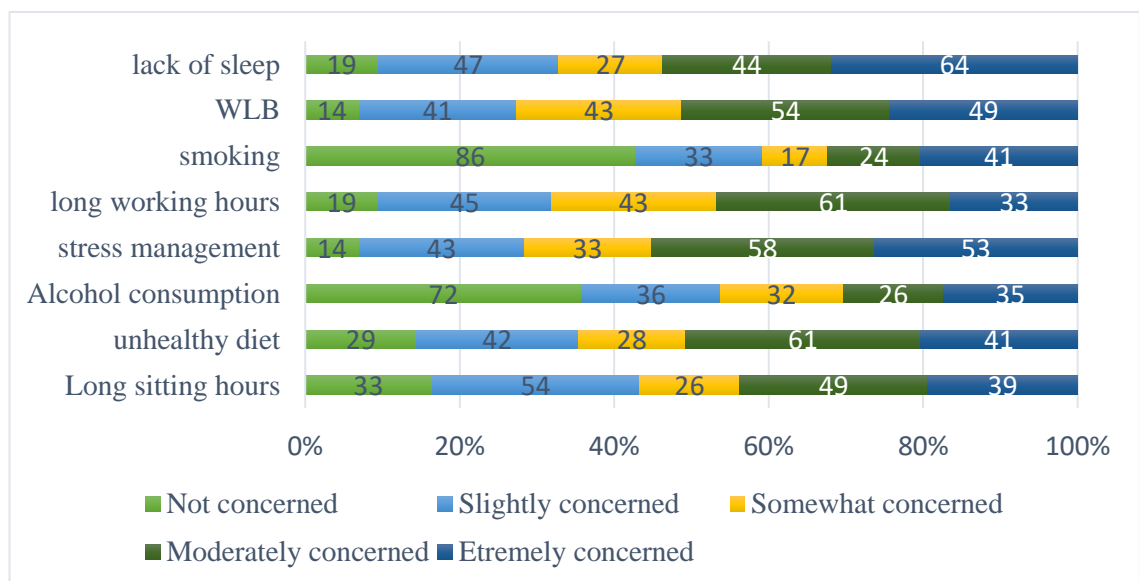


Figure 4. Health risk employees are concerned about. N = 201. WLB – work-life balance

Another health risk mentioned was unhealthy nutrition which shows that the majority (30%) of the respondents were concerned about their nutrition while between 14% and 20% were either extremely concerned or not concerned about their eating habits (see Figure 4). Respondents also showed that they were either moderately or extremely

concerned about the effect of stress on their health with a majority indicating that they are more concerned about the long working hours, work-life balance, and not enough sleep, or lack of sleep. All this major concern shows that the respondents are aware of the health risk in relation to work and some of the stressors regarding employee well-being.

Question 8 is related to employee's mental health; the respondents were asked to rate their health on a scale of 1–4 with 1 being excellent and 4 fair. A majority (43%) of the respondents noted that their mental health was very good and 30% declared good while less than 20% mentioned it was excellent with the minority stating fair (see Figure 5). Although the issues surrounding mental health in Nigeria are still being discussed and more awareness to the construct. However, most Nigerians are not open to discussing mental health or comfortable with talking about it.

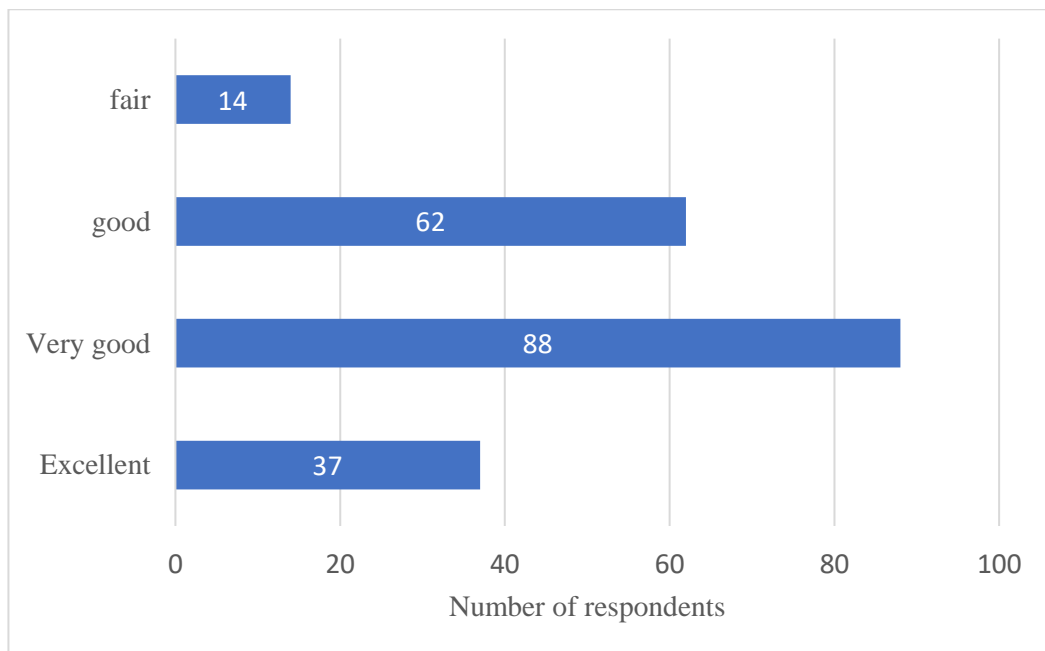


Figure 5. Mental health status of respondents. N = 201

Additionally, while talking about the impact of work on employee's overall wellbeing, question 9–12 relates to the following factors that affect employee's productivity at work. Question regarding absenteeism at work due to health problems shows that 51% of the respondents mentioned that they rarely took days off or are absent from work due to health issues and 33% mentioned they were sometimes absent from work due to health problems while a minority of the respondents said they never took days off work due to any health

problems. Following the previous question, 48% and 45% respondents respectively mentioned that they sometimes or rarely accomplished less than the required results in their task at work as a result of work-related stress while less than 5% mentioned either never, often, or always performed lower at work due to work-related stress.

Concerning the impact of work on healthy habits, between 46% and 40% were neutral when asked if they are unable to exercise or eat healthy food due to lack of time for cooking their meals. In contrast, 25% and 28% agreed that they are both unable to exercise or cook their meal due to lack of time from work.

Section C of the questionnaire asked questions regarding work-based wellness programs offered by the respondent's organizations. 59% respondents mentioned that their company offered wellness programs while 32% mentioned that wellness program was not provided by their organizations and 8% of the respondents are not aware if wellness programs are offered by their company (see Figure 6). The below report shows that the majority of the respondents are aware of the wellness programs offered and Nigerian companies provide their employees with some sort of wellness packages.

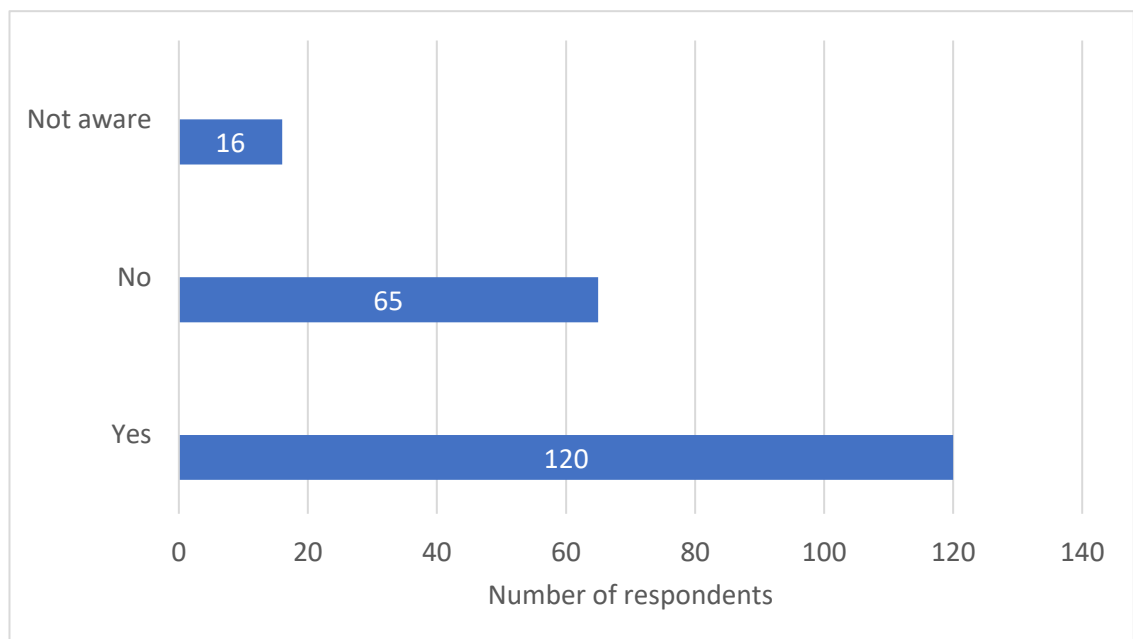


Figure 6. Wellness programs offered. N = 201

Additionally, respondents who answered yes to question 13 were asked to tick wellness services provided by their organization, and a majority (56%) of the respondents mentioned that health screening was provided by their organization and below 5% ticked either aware or not offered (see Figure 7). An average of 35% of the respondents mentioned that Nutrition education, Alcohol, and drug abuse training, daycare services, resting lounge, and In-house Clinic were offered while a majority of the respondents were either aware or not aware of such services were offered.

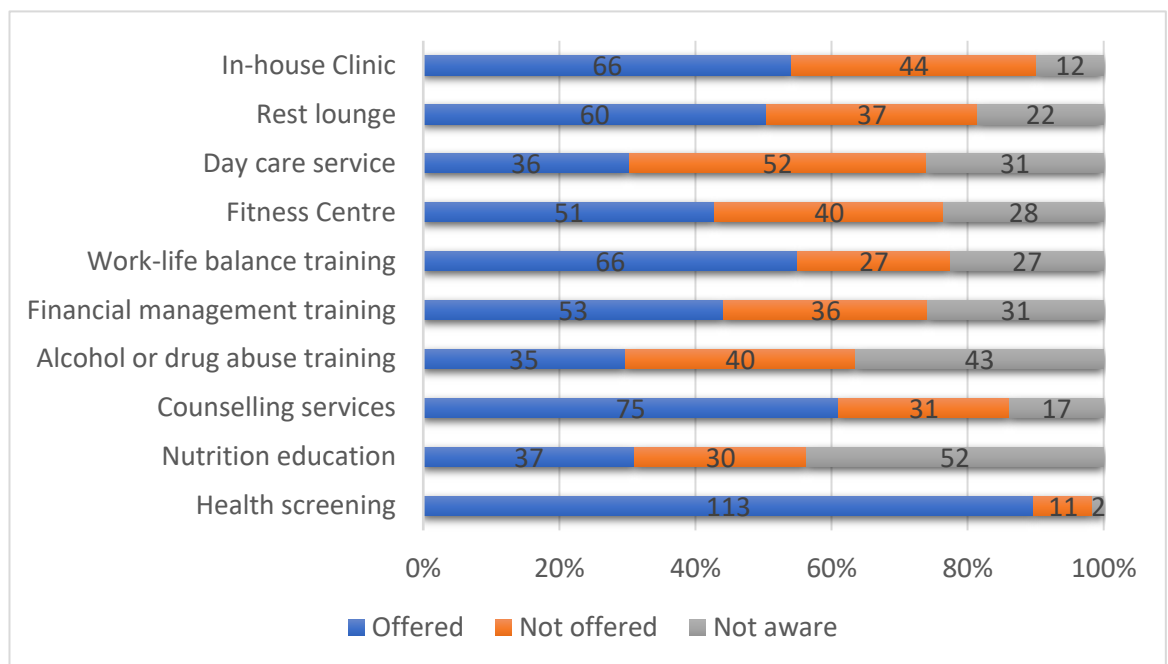


Figure 7. Wellness services provided by the organization. N = 201

While respondents who answered no to question 13 were asked to tick work-based wellness services that are beneficial to them using a Likert scale response of 1–5, where 1 is not beneficial and 5 is extremely beneficial. Approximately 20% of the respondents mentioned that all the wellness services were either extremely or moderately beneficial and are interested in it (see Figure 8).

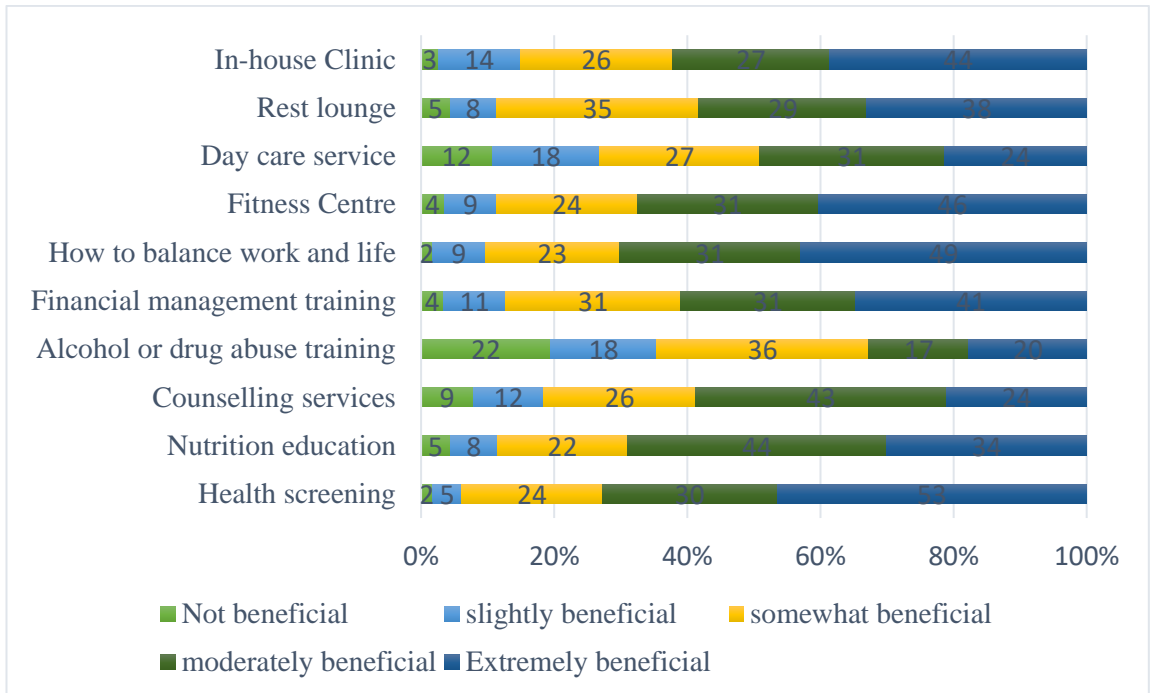


Figure 8. Wellness services employees are interested in. N = 201

Additionally, section D questions were asked to find out the perceived benefits of the wellness services provided by the respondent's organization, and based on the result below 30% of respondents mentioned that they were moderately satisfied and 21% were extremely satisfied with the work-based wellness programs provided by the organization in the past 12 months, a minority of the respondents said they were neither satisfied nor dissatisfied and 3% were extremely dissatisfied (see Figure 9).

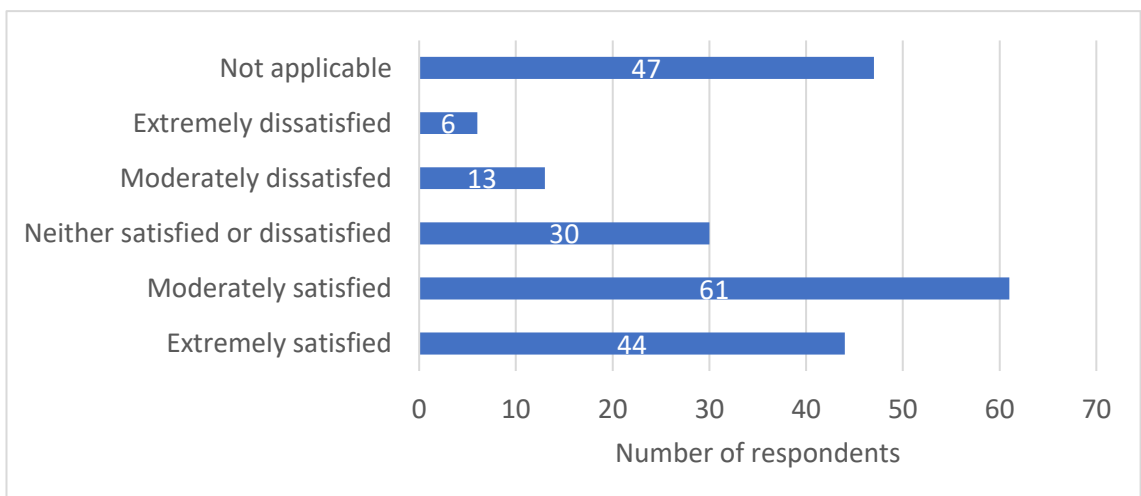


Figure 9. Level of satisfaction of wellness programs provided. N = 201

Also, the majority of respondents who answered the question *I felt more positive about my work after the program* said they were somewhat positive or neutral while 14% said they were positive about work (see Figure 10).

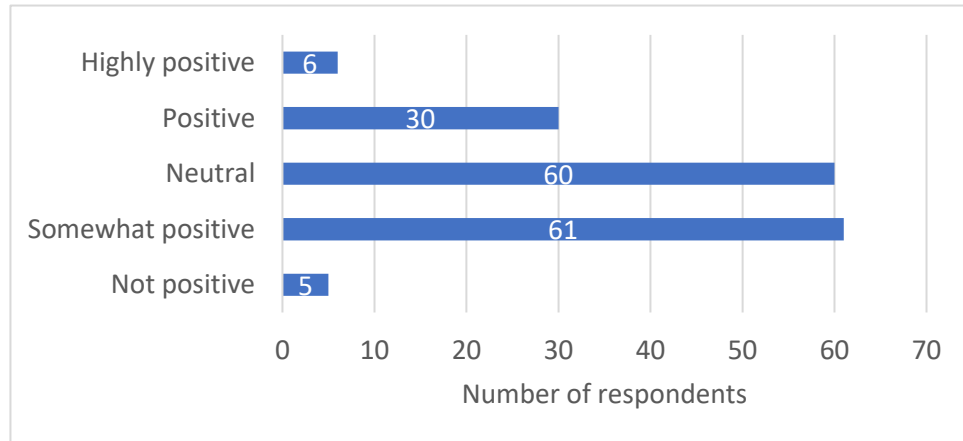


Figure 10. How positive respondents feel about work after the program. N = 201

From the below result (see Figure 11), respondents were asked to tick the perceived health benefits they noticed after following the health program provided by their organization. The majority of the respondents mentioned that they experienced better sleep quality and reduced stress after using the program, while a considerable number of respondents also said that they have a better relationship with their colleagues and were able to spend more time with their family while others mentioned they have noticed health benefits in their diet, exercise, meditation, and weight loss. A minority of the respondents also said they noticed health benefits such as yoga and less alcohol intake.

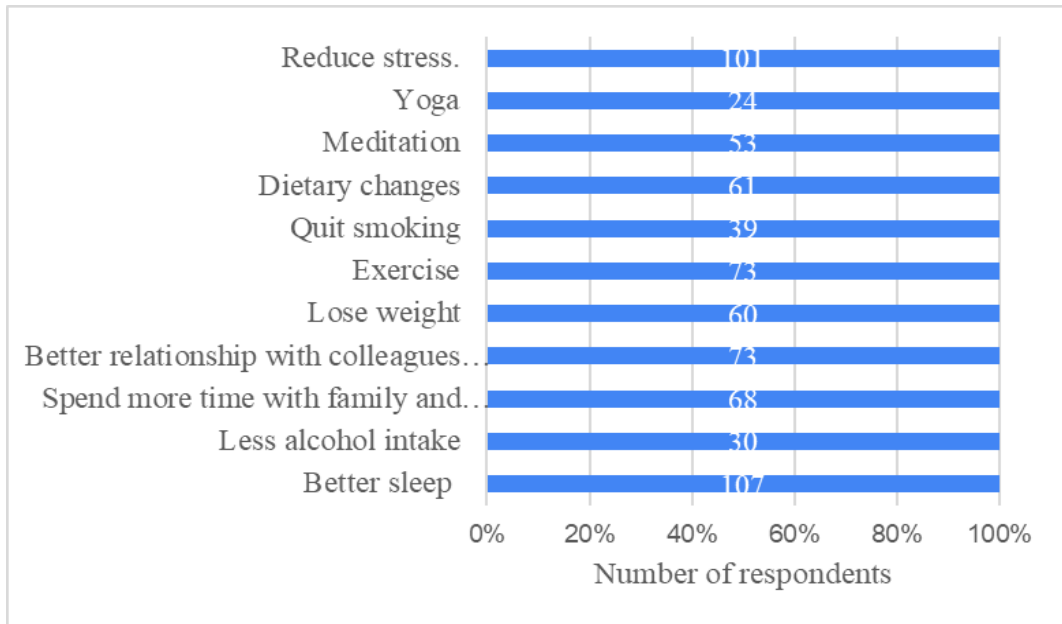


Figure 11. Perceived health benefits of a work-based wellness program. N = 201

Additionally, two questions were asked to find out what areas of wellness respondents are interested in and preferred mode of communication to receive wellness information with a scale of 1–5, 1 being totally unacceptable and 5 totally acceptable. The majority of the employees were more interested in mental health, healthy nutrition, work-life balance, and how to manage stress while the others were interested in exercise, conflict management, how to sleep better. See figure 12 for the below chart responses:

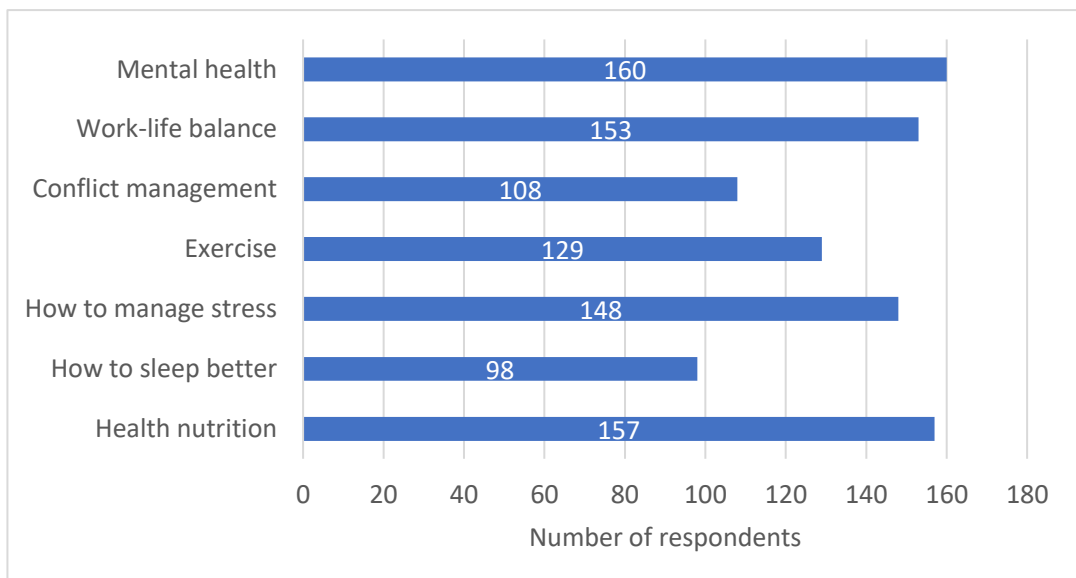


Figure 12. Work-based wellness program employees would like to learn about. N = 201

Finally, a significant number of the respondent said they were neutral regarding their preference on access to wellness information through the daily bulleting, Intranet, E-learning, free magazines, discussions during meetings, and YouTube. While others also said it was acceptable and a few respondents mentioned not acceptable. Overall, except for a few respondents, the majority of the respondents were happy to receive wellness information.

2.3. Discussion

This chapter explains the result of data analyzed in relation to the research questions for this study. The question for this study examines how work-based wellness programs influence an employee's perceived wellbeing and what kind of work-based wellness services offered by the corporate organization?

The demographic data collected included gender, age, education, and working experience. The result from the 201 respondents showed that the majority of the respondent were females, between the age of 20–39, had a bachelor's degree, worked full time, and had working experience below five years with the corporate organization. This report shows that majority of the respondents were young adults with a stable income and were also educated.

Following this health assessment questions to understand employee's perceived health status were asked of which the majority, 45% of respondents mentioned they were in good health, 43% said their mental health was good and were not concerned about health risk factors such as smoking and alcohol consumption. However, most of the respondents were more concerned about work-related health factors such as long working hours, sitting for a long time, unhealthy diet, long working hours, lack of sleep, and work-life balance. The literature reviewed in this study also showed that work-related stress is one of the major causes of health issues. The World Health Organisation (2010b, p. 10) mentioned that a sedentary lifestyle is one of the major contributions to diseases such as high blood pressure, heart diseases, obesity, and others. Also, the Global Wellness Institute (2016, p. i) reported in its wellness and work survey that these work-related stress factors are the major causes of illness and declared that a large percent of the working population. In addition to this, Sanofi's report (Sanofi, 2020, pp. 8–14) showed that 18–

34 years were highly stressed which can also be found in survey data of this study. Further to this, Adisa et al., (2017, p. 4) survey report also mentioned that work-life balance, long working hours is a major area of concern for the Nigerian worker. The workplace culture in Nigeria lacks policies guiding working hours as most corporate organisation regard being present at work and staying overtime as employee's commitment to the job, it can also be seen in the result of this study that employees are concerned with the long working hours, and as stated by (Adisa et al., 2017, p. 23) this is a prevalent issue that needs to be investigated to achieve work life balance.

According to the survey data on the impact of work on employees, 51.70% mentioned that they rarely took days off from work and 58.3% mentioned that they rarely performed less at work. Also, an average of 45% of the respondents was neutral when asked if work-related stress contributed to unhealthy eating habits or lack of exercise. This outcome does not give a clear outcome on the impact of work-related stress on employee's productive or unhealthy habits. Previous literature (Sanofi, 2020, pp. 8–14) on the impact of work on employees clearly shows that there is an increase in the rate of absenteeism and performance at work due to various health issues, however, participants of this study gave neutral response regarding their eating habits, productivity, and lack of exercises which makes it difficult to conclude if work influence their unhealthy habits.

To discuss further the aim of this study, the first question in this research was to find out the perceived benefits of work-based wellness programs on the overall health of the employees. The outcome of this study shows that 52.20% of the respondents mentioned they were satisfied with the wellness programs provided by their employer. Respondents also mentioned that they felt more positive about work after partaking in the program, a list of health benefits was given to choose from and a majority of the respondents mentioned that they noticed better sleep habits, reduced stress while others mentioned that they were able to spend more time with their family, had better relationships at work with their colleagues, started exercising and better-eating habits.

Similarities can be seen from the perceived benefits of work-based wellness program in the outcome of this study and the perceived benefits mentioned in previous literature reviewed by Mattke et al. (2013a, p. 22) which showed the results of the positive impact

of wellness programs by Harvard Business Review, the report showed that employers reported a positive impact on employee satisfaction, absenteeism, and others. Although it is interesting to also note that amongst the result gathered, while a majority of employers offered health screening only a few offered other wellness initiatives alongside.

Health screening is one of the core components of wellness programs and this service can either be provided onsite or with the use of healthcare services. Health screening is mostly done in form of a questionnaire with details regarding health issues documented to give individuals an overview of their health and what kind of healthy lifestyle habits to implement and maintain. Health assessment and screening can either be a free or low cost which makes it easy for employers to provide this for their employees (Mattke et al., 2013b, p. 13). However, the provision of health screening does not constitute a wellness program. The core components of a successful wellness program both at the primary and secondary level should include assessment, planning which is the design of wellness programs to meet the individual or corporate needs, implementation of the program, and evaluation which should be done periodically to measure the impact of the program on the individual's overall health (Babu et al., 2014, p. 20).

The second research question investigated the awareness of work-based wellness offered and literature reviews on work-based wellness programs show that there is increase awareness and work-based wellness programs have become popular (Mattke et al., 2013b, p. 5). Most respondents, 59% out of 201 respondents stated that the wellness program was offered by their employers. This is not surprising since there is currently a rise in the importance of wellness programs and companies who provide these programs are seen as reputable. Mujtaba & Cavico (2013, p. 193) also mentioned that due to the increasing cost of healthcare, employers have investigated ways to improve the health of their employees by providing work-based wellness programs as a perceived preventive measure to encourage and help employees improve or maintain their overall health. Wellness programs or plan provided by employers often includes health screening which records the individual body weight, blood pressure, cholesterol level, eye pressure test, and questions are asked relating to employee's mental health and perception towards work, Employee assistant programs, and lifestyle management programs which are tailored to

meet the health needs of the individual or corporate organization (Mattke et al. 2013b, p. 14).

However, it is also important to find out what constitutes the wellness program offered to clearly distinguish a wellness initiative from a comprehensive wellness program (Goetzel et al. 2014, p. 929). The outcome of this study showed that majority, 56% of the respondents mentioned that their employers offered health screening while 35% of respondents mentioned other components of work-based wellness programs such as Nutrition education, alcohol consumption intervention, drug abuse training, daycare services, resting lounge and inhouse clinic of were offered. This shows that employers who provided wellness programs for their employees designed and implemented programs to include the major components of wellness program which is Health risk management, Biometric screening, lifestyle management, and disease management programs (Mattke et al., 2013b, p. 14).

Finally, on the interest of wellness programs, the majority of the respondents mentioned they would like to learn more about mental health, work-life balance, and healthy nutrition. This result shows that young working adults are conscious of their health and are happy to have access to wellness information and to gain more knowledge about health and wellbeing which indicates that individuals are interested in ways to improve their health and maintain a balance between each dimension.

CONCLUSION

The study set out to find out the level of employee's awareness of work-based wellness and the perceived benefits of work-based wellness services offered by the corporate organization in Nigeria. The reason for this study is because of the prevalence of health-related issues affecting workers and the increasing statistics of chronic diseases affecting the working population globally. Also, to find out if individuals knew about wellness programs offered in Nigeria. The outcome of the survey showed that the majority of respondents were aware of the concept of work-based wellness and employers in Nigeria offered this program to their employees.

The works of literature reviewed during this study depended heavily on work-based wellness, wellness programs, and previous studies on the perceived benefits of wellness programs which showed evidence of program benefits on individual health and the use of wellness program as a preventive measure against chronic diseases has reduced the cost of health care globally. The continuous mention of balance amongst the dimensions was quite important, to achieve overall health each of the six dimensions mentioned in the literature review plays an important role and connects with the well-being of employees in the workplace and making conscious efforts to maintain a balance between the body, soul, and mind is an ongoing lifelong process which is important to design workplace wellness programs focusing on each dimension.

Nigeria's working population is quite large due to the population of the country, with Lagos being the main economic state. However, based on the study one can say that a comprehensive wellness program is not yet common, but employers offer health assessment initiatives as part of goodwill towards their employees. Additionally, due to the environmental condition and unrest in Nigeria, one can say this is a major impact to the working condition as employees commute to and back from work spending long hours in an unmovable traffic jam leaving the individual exhausted which does not favor the employee's wellbeing. Significantly, providing flexible working hours will help reduce

work-related stress. Also, based on literatures regarding work-life balance, it is evident that societal culture affects work policies and practices as there is high demand for physical presence in the workplace due to limited technology or resources. In general, Nigeria is a developing country and as such discussions regarding work life balance is still relatively new and needs external factors to influence the work culture in Nigeria.

Another major outcome of this study showed that Nigerians were not open in discussing about their mental health and issues relating to health risk such as alcohol consumption and smoking. Although some research indicated that there are limited studies in the area of mental health issues in Nigeria due to individual's perception as Nigerians perceive mental health disorder as a divine punishment or supernatural causes. Studies also revealed that most primary health facilities do not have mental health services rather most mental health patients seek the help of religious leaders or traditional healers which is a great challenge to the society. The lack of mental health services has caused a great stigma in Nigeria and needs to be addressed

The findings of the study revealed some major benefits of work-based wellness programs that can also be seen in previous related academic literature, although one must be careful as these benefits are perceived by the respondents and cannot conclusively determine if the benefits mentioned are because of the wellness program offered as the perceived benefits were not evaluated using a rigorous approach and do not represent the entire working population of the survey area.

It is also interesting to note the demographic distribution in the survey result which shows that majority of the working population are young adults and educated. Most Nigerians value education and having at least a bachelor's degree as a prerequisite to get a high-paying job and achieve financial stability. Employers also tend to follow this rule as most job offers state that candidates should have a minimum bachelor's degree to apply. Another notable outcome is the significant number of female participants in the study, some recent research also mentioned that there is increase in the education of females in Nigeria leading to better job opportunities and higher income. However, due to the long working hours and work culture in Nigeria it is quite difficult for females to keep up with

work challenges and take care of their families. As such wellness programs initiatives should be designed to promote flexible working conditions and work life balance.

Additionally, creating and implementing successful work-based wellness programs is beneficial to the corporate organization as well as the employees. Having a healthy working population improves the economy and reduces healthcare costs. Work-based wellness programs should be designed in such a way that promotes active participation as the return on investment of this program extends not only to the individual but the employer and the global economy.

While interpreting the result of this study, it is important to address the limitation of the study. One of the noticeable shortcomings of the study is the approach to the data collection which used only a quantitative method with limited response options to each question asked. The second limitation is that the study only investigated the awareness and perceived benefits of work-based wellness programs amongst employees in Victoria Island Lagos, and another major limitation is the lack of working population data for workers in Victoria Island Lagos. Finally, all the literature used in this research is not directly linked to work-based wellness in Nigeria as the concept of work-based wellness is still relatively new in Nigeria and there is a lack of literature or studies on work-based wellness related to corporate organizations in Nigeria. Finally, due to the convenience sampling method used in this study, this gives room for bias in the result. Overall, the aim of the research is partly achieved but with some limitations. For future research, it is ideal to use both the qualitative and quantitative research method to gather information from the employers regarding wellness services provided and the perceived benefits of wellness programs on employees health and wellbeing.

The findings from the result show that employers offer wellness programs however, these programs are not comprehensive to achieve the desired success. Based on the findings, the following suggestions are drawn for corporate organizations in Nigeria to help design comprehensive work-based wellness programs and implementation that can help improve employee's overall health.

1. Comprehensive work-based wellness programs should be designed following best practices as a preventive measure to improve and maintain employee's health. At this

moment, some employers in Nigeria do not offer comprehensive wellness programs but health screen as part of a goodwill measure. Therefore, to improve the overall health of individuals in Nigeria, wellness programs should become part of the benefits employees get from their employers.

2. Based on the results, the majority of the respondents are female, this shows that the expectation from work and family life contributes a large amount of stress to the employee. Respondents mentioned that they were able to spend time with their family, as such flexible working conditions should be addressed to help create a balance between work and life of the employees in Nigeria.
3. Another aspect of the study showed that wellness programs offered were mainly health screening. This does not constitute the core components of a wellness program. Therefore, the design of a wellness program should include other aspects or dimensions of wellness and should not be limited to only health screening.
4. Corporate leaders or employers should communicate with the workers to find out what kind of wellness services they are interested in and evaluate the needs to provide quality wellness services with actual evidence of health improvement after implementation.
5. Respondents mentioned that they were interested in getting wellness information, as such corporate organizations should make available, wellness information on their website, via training and other discussions to help employees gain more knowledge on how to take care of their health.
6. Finally, not all employees were aware of the wellness programs provided. Therefore, the corporate organisations should not only provide this program but should also create awareness and reward packages for employees who use and complete the program.

Since wellness or wellbeing is a continuous process, to improve the health of individuals in the workplace it is important for both the government and corporate organisations to promote the importance of self-care and create wellness consciousness in the society. Initiatives such as promoting fitness through monthly walking, running in group activities should be implemented. Healthy eating habits like providing healthy snacks in the workplace, also ergonomic working equipment should be provided by employers to

help individuals have the option of standing or sitting as opposed to sitting for a long period of time.

In conclusion, questions such as what is work-based wellness? why is work-based wellness important? And what are the benefits of work-based wellness? Has been discussed by different authors for a very long time. As much as one look to the employer to provide these preventive measures to improve employee's wellbeing and reduce the prevalence of chronic disease, one must also emphasize that it all comes down to the individual. The idea of wellness ultimately is about the individual self, it is a responsibility to oneself to attain a high level of wellbeing by creating a balance between the dimensions which requires conscious effort.

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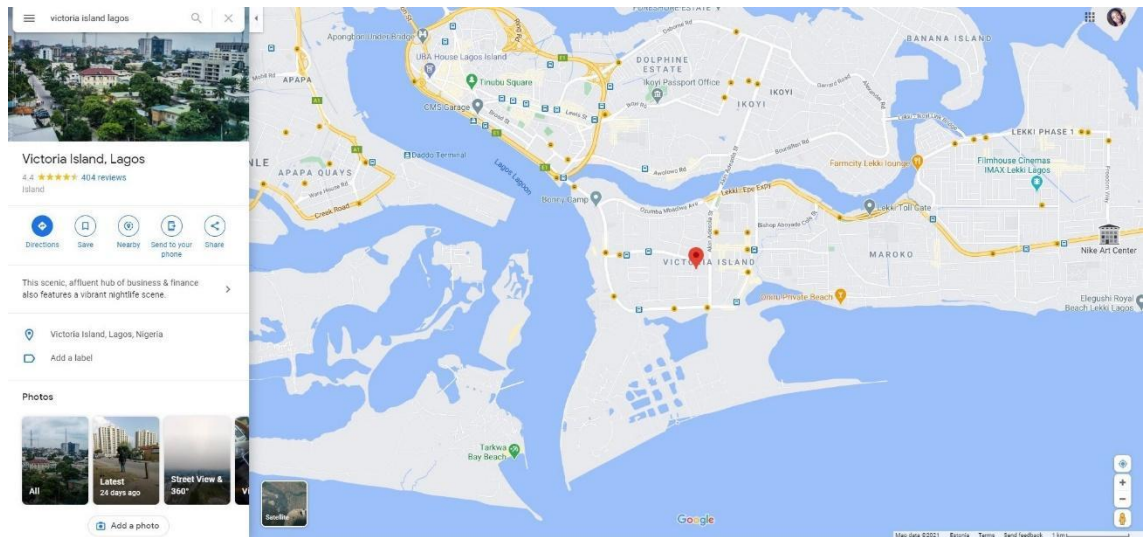
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Appendix 1. Map showing location of study area



Source: Google Maps, accessed 11.01.2021

Appendix 2. Research questionnaire

The perceived benefits of work-based wellness programs: A case study of Nigerian companies and employees

Dear Respondents,

My name is Jumai Mohammed, a Wellness and Spa Service Design and Management Masters student at the University of Tartu. The purpose of this research is to ascertain the perceived benefits of work-based wellness programs on employees! well-being and awareness of wellness programs provided by corporate organizations in Nigeria.

This questionnaire comprises four sections with different questions and will take about 5–10 minutes to complete. Your contribution to this survey is significant and completely optional.

All information collected from this survey will be unnamed, kept confidential, and will be strictly used for academic purposes alone. Completed questionnaires will be collected, analyzed, and kept in such a manner as to guarantee your privacy.

Thanks for your contribution

Section A. Demographic

1. Gender of respondents: Female, Male, Prefer not to say, Gender neutral or Other...
2. Age of respondent: Below 20, 20–29, 30–39, 40–49, 50–59, and Above 60
3. Education: College or below, Bachelor's degree, Postgraduate Diploma, Master's degree, Doctoral degree, or Others.
4. Employment status: Full-time, Part-time, Unemployed, Self-employed, or Other.
5. How long have you been working in the organization: Below 5 years, 6–10, 11–20 years?

Section B: Overall health and wellbeing status.

6. In general, my overall health is...: Excellent, very good, good, fair, poor.
7. Which of the following health risks are you concerned about? Are you concerned about sitting down too much, poor nutrition or unhealthy diet, alcohol consumption, stress management, long working hours, smoking, work-life balance, and not enough

sleep or sleep disturbance? Answer: Not concerned, slightly concerned, somewhat concerned, moderately concerned, extremely concerned.

8. How would you rate your mental health: Excellent, very good, good, fair, and poor?
9. How often are you absent from work due to health problems: Never, often, sometimes, rarely, and always?
10. To what extent have you accomplished less than you would like at work or any other activities as a result of work-related stress: Never, often, sometimes, rarely, and always
11. I do not have time to exercise properly because I do not have time after work: strongly disagree, disagree, neutral, agree, and strongly agree.
12. I tend to eat unhealthy food because I do not have time to cook because of work: Strongly disagree, disagree, neutral, agree, strongly agree.

Section C: Work-based wellness programs offered by your organization

13. Does your company offer wellness programs: Yes, no, and not aware?
14. If yes to question 13, please tick the following services offered by your employer.

	Offered	Not offered	Not aware
Health check-up			
Health screening			
Nutrition education			
Counseling services			
Wellness Training			
Alcohol or drug abuse training			
Financial management training			
Work-life balance training			
Wellness Facilities			
Fitness Centre			
Daycare service			
Rest lounge			
In-house Clinic			

15. If No which of the following will be most interesting or beneficial to you if your workplace wants to offer a work-based wellness program: Not beneficial to Extremely beneficial.
 - Health screening
 - Nutrition education
 - Counselling services
 - Alcohol or drug abuse training

- Financial management training
- How to balance work and life
- Fitness Centre
- Day care service
- Rest lounge
- In-house Clinic

16. In the past 12 months, I am satisfied with the standard and quality of the work-based wellness initiatives offered by my employer: Extremely satisfied, moderately satisfied, neither satisfied nor dissatisfied, Moderately dissatisfied, Extremely dissatisfied, and not applicable.

Section D: Perceived benefits of work-based wellness.

17. I felt more positive about my work after the program: Not positive, somewhat positive, neutral, positive, highly positive.

18. Which of the following health benefits have you seen after following the program, tick any of the following that applies to you:

- Better sleep
- Less alcohol intake
- Spend more time with family and friends
- Better relationship with colleagues at work
- Lose weight
- Exercise
- Quit smoking
- Dietary changes
- Meditation
- Yoga
- Reduce stress.

19. Which of the following areas of wellness would you like to learn more about through a work-based wellness program, tick any of the following that applies to you:

- Health nutrition

- How to sleep better
- How to manage stress
- Exercise
- Conflict management
- Work-life balance
- Mental health

20. Would you like to have increased access to wellness information? Please indicate your preferences: Totally unacceptable, unacceptable, neutral, acceptable, totally acceptable

- Daily bulletins
- Intranet
- eLearning
- Free magazines
- Discussion during meetings
- YouTube.

RESÜMEE

TÖÖPÕHISETE HEAOLU PROGRAMMIDE HÜVITISED: NIGEERIA ETTEVÕTETE JA TÖÖTAJATE UURING.

Jumai Maryam Mohammed

On leitud, et tööpõhine terviseprogramm parandab positiivselt töötaja elukvaliteeti ja üldist heaolu. Üha enam on empiirilisi tõendeid terviseprogrammide mõju tervishoiukuludele kogu maailmas. Selles uuringus püütakse välja selgitada töökohapõhiste terviseprogrammide eeliseid töötajate tervisele ja Nigeeria korporatiivsete organisatsioonide pakutavatest terviseprogrammide teadlikkusest, tehes järelduste põhjal ettepanekuid töötajate tervise ja heaolu parandamiseks. Uurimistöö eesmärgi saavutamiseks võeti kasutusele kvantitatiivne uurimismeetod ja mittetõenäosuse mugavusvalimi meetod, kasutades andmete kogumiseks suletud küsimustikke, mida analüüsiti Exceli ja SPSS-i abil. Uuringus osales kokku 201 vastajat. Uuringu tulemused näitasid, et enamus osalejatest olid naised. Vastajate vanus oli vahemikus 20-39, haridustee läbinud ja hetkel töötavad täiskohaga. Uuringu tulemused näitasid, et enamus korporatiivsed organisatsioonid pakuvad terviseprogramme töötajatele. Samuti mainisid terviseteenuseid kasutavad inimesed, et nad olid pakutava terviseprogrammidega rahul ja tundsid end töö suhtes positiivsemalt, märkasid paremaid magamisharjumusi, vähenenud stressi, paremaid toitumisharjumusi ja veedetud kvaliteetsemat aega kolleegidega ja peredega. Lähtudes siiski uuringu tulemustest, avastati, et ettevõtted pakkusid tavalisi tervisekontrolli mitte terviseprogramme. Seetõttu tuleb üldise heaolu saavutamiseks ja tasakaalu säilitamiseks iga terviseprogrammi aspekti hoolikalt kujundada ja rakendada, pidades silmas töötajate vajadusi.

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19/05/2021