

**EXPLORING THE EMPLOYEE WELLNESS PRACTICES OF
SMMES IN THE GAUTENG REGION**

by

BERNADINE ANINE VAN DER LINDE

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SUPERVISOR: PROF: YT JOUBERT

CO-SUPERVISOR: MS EC RUDOLPH

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DECLARATION

Names: Bernadine Anine van der Linde

Student number: 62056646

Qualification: Master of Commerce in Human Resource Management

Title: Exploring the employee wellness practices of SMMEs in the Gauteng region.

I, Bernadine Anine van der Linde, declare that the above dissertation is my own work and that all the sources that I have used or quoted have been indicated and acknowledged by means of complete references.

B A van der Linde

Date

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ACRONYMS

CAQDAS	Computer Assisted Qualitative Data Analysis Software
CIPRO	Companies and Intellectual Property Registration Office
DTI	Department of Trade and Industry
EAP	Employee Assistance Programmes
ENWHP	European Network for Workplace Health Promotion
ILO	International Labour Organisation
SABPP	South African Board for People Practices
SMME	Small medium and micro enterprises
WHO	World Health Organisation

ABSTRACT

Small businesses flourish when employees are happy, healthy and productive. This makes employees an important asset of a small business because its success depends on the performance of its employees. Employee wellness practices in small medium and micro enterprises (SMMEs) often focus on the physical aspects of wellbeing, despite employees wanting management to focus on their emotional needs. In view of the fact that employers do not realise that employee wellness significantly improves morale and increases retention rates, this research sought to explore the employee wellness experiences of managers and employees in SMMEs to develop an understanding of the need for employee wellness practices in these organisations. Accordingly, a qualitative study was conducted among 17 employees and four managers at three diverse industries operating in the Gauteng region of South Africa. The data were collected by means of focus groups interviews with employees and individual interviews with managers who work in SMMEs that employ less than 50 employees. The results indicated that employees consider employee wellness in terms of how well organisations treat them and take care of them. The findings demonstrated that employees depend on good working relationships to be happy and engaged in the workplace. Although management cited various financial and human resource constraints that limit employee wellness practices, the employees identified various activities and practices that were not dependent on financial resources for implementation. The results also showed there was insufficient evidence to support the notion that there is a link between unhealthy workplace conditions and higher absenteeism and staff turnover rates. The findings highlighted that employees need social interaction in order to feel valued and cared for and that this factor often outweighs the negative feelings employees have of working in unhealthy environments. Thus, employees were willing to work in unhealthy conditions as long as they felt valued by top management. The findings of the study contribute to the knowledge in the literature on employee wellness practices in SMMEs because limited studies have been conducted to demonstrate the impact of workplace conditions on employee wellness.

Keywords: SMME, wellness practices, employee wellness, wellbeing, social connectedness, organisational behaviour, unhealthy workplace conditions, SMME, health and safety, workplace conditions, sick building syndrome.

ABSTRAK

Klein ondernemings floreer wanneer werknemers gelukkig, gesond en produktief is. Dit maak werknemers 'n belangrike bate vir 'n klein onderneming, want die onderneming se sukses hang af van die werknemers se prestasie. Werknemerwelstandpraktyke in klein-, medium- en mikro-ondernemings (KMMO's) fokus dikwels op die fisieke aspekte van welstand, ten spyte daarvan dat werknemers wil hê bestuur moet op hul emosionele behoeftes fokus. In die lig daarvan dat werkgewers nie beseft dat werknemerwelstand moraal en behoudsifers aansienlik verbeter nie, het hierdie navorsing gepoog om die werknemerwelstand-ondervindinge van bestuurders en werknemers in KMMO's te ondersoek om 'n begrip van die behoefte aan werknemerwelstand-praktyke in hierdie ondernemings te ontwikkel. Ooreenkomstig hiermee is 'n kwalitatiewe studie onderneem onder 17 werknemers en vier bestuurders by drie diverse industrieë wat in die Gauteng-omgewing in Suid-Afrika sake doen. Die data is versamel deur middel van fokusgroeponderhoude met werknemers en individuele onderhoude met bestuurders wat by KMMO's met minder as 50 werknemers werk. Die bevindinge toon dat werknemers werknemerwelstand beoordeel volgens hoe goed organisasies hulle behandel en na hulle omsien. Die bevindinge het uitgewys dat werknemers staatmaak op goeie werksverhoudings om gelukkig en betrokke te wees in die werkplek. Hoewel bestuur verskeie finansiële en menslike hulpbron-beperkings uitgewys het wat werknemerwelstandpraktyke beperk, het die werknemers verskeie aktiwiteite en praktyke geïdentifiseer wat onafhanklik van finansiële hulpbronne geïmplementeer kan word. Die studie het ook bevind dat daar nie genoegsame bewyse is om die idee te staaf dat daar 'n verband is tussen ongesonde werkplekomstandighede en 'n hoër afwesigheidsyfer en personeelomset nie. Die bevindinge lig dit uit dat werknemers sosiale interaksie nodig het om gewaardeerd en na omgesien te voel en dat hierdie faktor dikwels swaarder weeg as die negatiewe gevoelens wat werknemers in 'n ongesonde werkomgewing ervaar. Werknemers is dus bereid om in ongesonde omstandighede te werk solank hulle gewaardeerd voel deur topbestuur. Die bevindinge van die studie dra by tot die kennis in die literatuur oor werknemerwelstandpraktyke in KMMO's aangesien studies wat die impak van werkplekomstandighede op werknemerwelstand demonstreer tot dusver beperk is.

Sleutelwoorde: KMMO, welstandpraktyke, werknemerwelstand, welstand, sosiale verbondenheid, organisatoriese gedrag, ongesonde werkplekstandighede, gesondheid en veiligheid, werkplektoestande, siekgebousindroom.

Kakaretso

Dikgwebo tse nyane di tswella ka bokgabane ha basebetsi ba thabile, ba phetse hantle ebile ba sebelletsa ho beha ditholoana. Sena se etsa hore basebetsi e be bona ba bohlokwa haholo dikgwebong tse nyane hobane katleho ya dikgwebo tsena e dutse mahetleng a bokgabane ba basebetsi. Bophelo bo hantle ba basebetsi dikgwebong tse nyane le tse kgolwanyane (SMMEs) hangata bo tobane le bokgoni ba basebetsi ho tswellisa pele mosebetsi o behang ditholoana, empa basebetsi le bona ba batla hore ba nahanelwe ke bo ramesebetsi ka ditlhoko tsa bona tse ba amang moyeng.

Bo nnete ba taba ke hore bo ramesebetsi ha ba eellwe hore bophelo bo hantle ba basebetsi bo bohlokwa hobane bo nyolla boitshwaro bo botle ba basebetsi, ebile ba dula dilemo mesebetsing ya bona. Dipatlisiso tsa pampiri ena di tlo sheba bophelo bo botle ba basebetsi ka ho lekola batshwari ba basebetsi le basebetsi mmoho dikgwebong tse nyane (SMMEs) hore bo ka tsela e jwang le ho re thusa ho utlwisisa bohlokwa ba bophelo bo hantle mesebetsing ka ho fapana.

Ho fumana dintlha tsa dipatlisiso, ho kopuwe basebetsi ba leshome le metso e supileng (17) le batshwari ba basebetsi ba bane (4) mesebetsing e fapaneng Gauteng, Afrika Borwa. Ho bile le di hlopha tse fapaneng tse botsuweng dipotso hore ho tholahale dintlha ka taba ya bophelo bo hantle ba basebetsi, mme batshwari ba basebetsi ba botsuwe dipotso ka bonngwe ba bona. Dikgwebo tse nyane (SMMEs) tse nkileng phato di na le basebetsi ba ka tlase ho mashome a mahlano (50).

Sepheho sa ditlatlobo tsa dipotso tse botsuweng basebetsi se bontsha hore basebetsi ba nahana hore boitshwaro bo hantle ba basebetsi bo ya ka hore mesebetsing e fapananeng batho ba hlokometswe jwang. Basebetsi ba boletse hore dikamano pakeng tsa basebetsi mmoho tse thabisang di ba loketse mesebetsing. Le ha batshwari ba

basebetsi le bo radikgwebo ba lla ka hore disebediswa le ditjhelete ha di lekane hore ba tswellise pele boitshwaro bo botle ba basebetsi, basebetsi ba buile ka dintlha tse bontshang hore boitshwaro bo botle ha bo hloke tjhelete ka dinako tsohle.

Sephele se ile sa bontsha hore ha hona bopaki bo lekaneng ho bontsha hore basebetsi ba lofa mesebetsing kapa hona ho se dule dilemo mesebetsing ka lebaka la hore poleke ya bona ya mosebetsi ha e kgahlise. Dipatlisiso di bontshitse hore basebetsi ba hloka dikamano le basebetsi ba bang, ha mmoho le bo ramesebetsi hore ba ikutlwe ba kgathallwa. Dikamano tsena di etsa hore basebetsi ba phuthollohe ha ba le mesebetsing ebile ba lebale ka dintho tse sa lokang mesebetsing ya bona. Ka hoo, basebetsi ba tsotella dikamano tse ntle pakeng tsa bona le bo ramesebetsi, le ha poleke ya mosebetsi e sa thabise ha kalo.

Dipatlisiso tsa pampiri ena di tlatselletsa tsebo e teng ho dithuto tsa bophelo bo hantle ba basebetsi le di tsamaiso tsa tsona dikgwebong tse nyane (SMMEs) hobane ha dingata dipampiri tse ngotsweng ka sehlooho sena ho re ruta hore boitshwaro bo botle ho basebetsi bo ama mesebetsi e fapaneng ka tsela tse jwang.

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CHAPTER 1 : GENERAL INTRODUCTION

1.1 INTRODUCTION

The purpose of the study was to create an understanding of existing wellness issues in small, medium and micro enterprises (SMMEs) and to highlight the importance of the underlying problems. As limited studies have been conducted to investigate the employee wellness practices in SMMEs, the researcher was interested in uncovering these underlying conditions and the constraints to employee wellness.

SMMEs often neglect employee wellness practices because they are viewed as a waste of financial resources. However, well-implemented employee wellness practices can decrease absenteeism rates, increase productivity and improve social connectedness. To improve employee wellness, targeted wellness strategies are needed to identify unhealthy workplace environments and to find sustainable solutions to unfavourable workplace conditions.

This chapter clarifies the background to the problem and provides an overview of the significance of SMMEs in South Africa. The benefits of targeted employee wellness practices are discussed as well as the constraints to implementing wellness practices in SMMEs. In the latter part of the chapter, the motivation and rationale for the study and various definitions of terms will be clarified in context.

1.2 BACKGROUND TO THE PROBLEM

1.2.1 THE SIGNIFICANCE OF SMALL MEDIUM AND MICROENTERPRISES IN SOUTH AFRICA

Small medium and micro enterprises (SMMEs) are key drivers of economic growth, innovation and job creation in South Africa (Bureau for Economic Research, 2016). SMMEs comprise an estimated 91% of formal businesses in South Africa and provide employment for about 60% of the labour force (The Banking Association South Africa, 2015). SMMEs in South Africa represent a diverse group of traders from the traditional

family businesses and home-based industries, to street traders and backyard manufacturers and service providers.

The National Small Business Act (26 of 2003) defines five categories of small business in South Africa, namely: (i) survivalists enterprises, (ii) micro-enterprises, (iii) very small enterprises, (iv) small enterprises and (v) medium enterprises. Furthermore, the Act recognises small business development as the most important driver of economic growth in South Africa.

However, small businesses encounter many challenges such as access to finance, poor infrastructure, skills shortages and inefficient bureaucracy (Bureau for Economic Research, 2016; Department of Trade and Industry, 2005), which often makes it difficult for these operations to become sustainable. Also, because SMMEs are often family-owned enterprises or display family-like relationships, employees have different expectations and experiences of working life.

1.2.2 ADVANTAGES OF EMPLOYEE WELLNESS PRACTICES IN SMMEs

SMMEs have many advantages over larger entities. Small businesses can react quickly to changes in the market and experience fewer regulatory constraints and less bureaucracy than their corporate counterparts. In small businesses, employees are seen as important assets of the business because its success is dependent on the employees' performance (Antonites et al., 2014; Warnich, Carrell, Elbert, & Hatfield, 2015). In addition, social connectedness is typically higher in SMMEs because employees know management personally and therefore experience a sense of belonging.

Research has shown that organisations that utilise employee wellness practices regularly benefit from improved productivity (Pentland, 2008), decreased rates of staff turnover and absenteeism, reduced healthcare costs, and improved employee engagement and morale (Berry, Mirabito, & Baun, 2010; Schaefer, 2015). In addition, participation rates in employee wellness practices are generally higher in SMMEs because programmes are easier to organise and administer (Warnich et al., 2015).

However, the potential benefits of having a happy and healthy workplace are often overlooked or underestimated by SMMEs, which may regard wellness as a financial liability. This may be because SMMEs do not compute the cost of absenteeism and staff turnover when they consider the implementation of wellness practices (Swanepoel, Erasmus, Schenk, & Tshilongamulenzhe, 2014), even though sustainable employee wellness practices have the ability to lower absenteeism, disability claims, healthcare costs, recruitment efforts and training costs (Grobler, Wörnich, Carrell, Elbert, & Hatfield, 2011).

It is argued that SMMEs are more likely to gain a positive return on investment through the implementation of the WHO Healthy Workplace Model and aspects of the National HR Standards Model than focusing purely on reducing costs (Grobler et al., 2011; Guest, 2017; Sieberhagen, Pienaar, & Els, 2011).

1.2.3 CONSTRAINTS TO EMPLOYEE WELLNESS PRACTICES IN SMMEs

SMMEs often operate in isolation and therefore do not have the benefit of shared costs. Moreover, employers and managers of SMMEs often disagree about the potential benefits of employee wellness practices and therefore are not willing to invest resources in them. These critics often cite misguided information that portrays wellness initiatives as expensive, time wasters, negative returns on investment and beneficial only to the employees (Sieberhagen et al., 2011). Employees, on the other hand, argue that wellness practices are irrelevant and do not focus on employees' needs (Sieberhagen et al., 2011).

1.3 MOTIVATION FOR THE STUDY

Small businesses flourish when employees are happy, healthy and productive (Knight & Haslam, 2010). However, the opposite is also true. When employees operate in unhealthy working environments, they become unhappy, unhealthy, less motivated and unproductive. While SMMEs have a moral responsibility to provide safe and hazard-free working environments, they also have a social obligation to improve employee wellness. In 2012, the International Labour Organisation (ILO) estimated that poor workplace

conditions accounted for a third of back pain, 16% of hearing loss and nearly 10% of lung cancer, as well as contributing 8% to workplace risk that caused depression (Burton, 2010). These international statistics demonstrate that employee wellness practices are a global concern.

Although SMMEs do not have the same financial or other resources available as their corporate counterparts to implement employee wellness practices because they operate on a smaller scale (Bureau for Economic Research, 2016; Sanlam, 2015), they nevertheless have a responsibility to create and maintain healthy and happy work environments free from hazards that can lead to injury, illness or death.

Wellness practices can significantly improve the perception of employer goodwill (Jones & George, 2014), as they result in employees feeling valued and respected in the workplace (Swanepoel et al., 2014). It is argued that employees who have been the recipients of wellness initiatives often respond to the organisation with gratitude after being assisted during a time of personal or financial crisis (Nicholson, 2011; SMG, 2017)

1.4 PROBLEM STATEMENT

It is evident from the preceding discussion that SMMEs often disregard aspects of employee wellness practices as a result of business constraints or management beliefs. Nevertheless, the safety requirements of the 21st century demand that employers take a proactive stance in managing health and safety aspects in the workplace (Nel, Werner, Du Plessis, Ngalo, & Poisat, 2012).

This leads to the main research question: What are SMMEs doing in terms of employee wellness?

1.5 RESEARCH OBJECTIVE

In view of the problem statement stated above, the objective of this study was to explore the way in which managers and employees in SMMEs are experiencing employee wellness practices in order to develop an understanding of the need for such practices in

SMMEs. Accordingly, this study focuses on employee wellness practices in SMMEs in Gauteng.

Main objective: to explore the experiences of employees and managers in SMMEs regarding employee wellness practices in Gauteng.

Objective two: to explore the need for employee wellness practices in SMMEs.

1.6 THEORETICAL ASSUMPTIONS

Based on a preliminary literature review, the researcher addressed the following theoretical assumptions of the study:

- The business strategy and the financial position of an organisation have an impact on the employee wellness practices.
- The expectations of employees differ from those of managers of SMMEs.

1.6.1 METHODOLOGICAL ASSUMPTIONS

The researcher formulated methodological assumptions about human knowledge (epistemological assumptions), the realities encountered during the research interviews (ontological assumptions) and the extent to which the researcher's values influenced the research process (axiological assumptions) (Saunders, Lewis, & Thornhill, 2016).

1.6.2 ONTOLOGICAL DIMENSION

According to Saunders et al. (2016), the ontological dimension refers to assumptions about the nature of reality, and in business management studies the ontological dimension includes organisations, management and individuals' working lives. The researcher used an interpretivist approach to acknowledge participants' subjective experiences to, in turn, interpret their experiences of employee wellness practices. The ontological assumptions included that the participants' realities were complex, rich and

socially constructed. The assumptions included acknowledging the participants' experiences in order to establish meaning and to find explanations behind the opinions (epistemology) (Terreblanche, Durrheim, & Painter, 2011).

1.6.3 EPISTEMOLOGICAL DIMENSION

The epistemological dimension views theories and concepts as too simplistic. Consequently, the researcher took on both a personal and an interactive role to focus on the narratives, perceptions and interpretations of the participants' experiences and realities of employee wellness practices (Guba & Lincoln, 1994; Struwig & Stead, 2013). The researcher accordingly applied an interpretivist approach to provide justifications for the experiences of the participants as voiced in the collected data (Saunders et al., 2016).

1.6.4 AXIOLOGICAL DIMENSION

The axiological dimension of the study was value-bound and recognised that the researcher's values and beliefs, as well as the interpretations of the research material and data, played a major role in the research process. The researcher needed to take a compassionate stance towards the participants in order to remain conscious and discerning in the research process. The researcher thus entered the participants' protective and social world and managed to interpret their experiences from their point of view without obscuring the truth or misinterpreting their opinions and experiences. The researcher is an ethical chartered human resource professional and accordingly displayed trustworthiness and impartiality in all interpretations (Guba & Lincoln, 1994; Ponterotto, 2010), as enshrined in the South African Board for People Practices (SABPP) code of ethics.

1.6.5 METHODOLOGICAL DIMENSION

Saunders et al. (2016) suggest that grounded theory should be used to develop theoretical explanations of social interactions in business and management environments. The methodological dimension recognises that when current theories about a phenomenon are either inadequate or non-existent, as in this study, theory is

grounded in the collection of data and the participants' experiences in particular (Leedy & Ormrod, 2015).

1.7 RATIONALE FOR THE STUDY

Despite some negative connotations to employee wellness practices in SMMEs, well-implemented wellness practices can be used to unite employers and employees, build healthy workplace relationships, increase productivity, and ensure safer working conditions. A healthy and productive workforce encourages creative and productive minds.

1.8 POTENTIAL CONTRIBUTION OF THE STUDY

Various studies have been conducted globally on the significance of employee wellness practices in organisations. However, limited research has been conducted on the employee wellness practices of SMMEs in South Africa.

The study may be expanded to investigate whether employees of SMMEs are being compelled to work in unhealthy workplace conditions because no minimum health and safety workplace standards have been set for SMMEs.

This study has the potential to encourage SMME owners to implement minimum workplace health and safety standards in order to improve employee wellness practices (South African Board for People Practices (SABPP), 2014). In Chapter 5 of this study, recommendations are made for ways in which small business owners could improve the overall wellbeing of their employees.

At the empirical level, this study has the potential to make a modest contribution to the knowledge on employee wellness practices in SMMEs so as to provide proactive people-orientated solutions to employee wellness practices in these businesses.

1.9 THESIS STATEMENT

As an essential requirement, employee wellness practices in SMMEs do not have to be official or regulated. Nevertheless, employers have a moral obligation to provide their employees with safe and healthy working conditions.

1.10 DEFINING TERMS

The following concepts will form the foundation of this research:

- **Employee wellness** refers to a "state of complete physical, mental and social wellness, not merely absence of disease or infirmity" (Burton, 2010b, p. 15).
- **Employee wellness** refers to a state of optimised social, physical and mental health and wellness in the employee. This may be facilitated by a holistic approach to promoting the physical, psychological and social welfare of the employees (Sieberhagen et al., 2011). The minimum requirement in this respect is a working environment that is safe and complies with all legal requirements (Van der Westhuizen & Wessels, 2011)
- **Healthy workplace** refers to "a place where everyone works together to achieve an agreed vision for the health and wellness of workers and the surrounding community" (Burton, 2010, p. 16).
- **Human resource practices** refer to the manner in which human resource activities are executed (South African Board for People Practices (SABPP), 2014).
- **SMMEs** refers to small, medium and micro-enterprises in South Africa, also referred to as small businesses. The definition encompasses an extensive range of small businesses which include formally registered and informal non-VAT registered entities (Bureau for Economic Research, 2016).
- **Unhealthy workplace** refers to a hostile environment in which dysfunctional and highly stressful interactions are the norm (Goldman, 2006; White & Schoonover-Shoffner, 2016).

- **Wellness** is an interactive process of becoming aware of and practising healthy choices to create a successful and balanced lifestyle. It is a dynamic process that involves learning new life skills and becoming aware of and making conscious choices for a more balanced and healthy lifestyle across seven dimensions, namely, the social, physical, emotional, career, intellectual, environmental and spiritual dimensions (Grobler, Wörnich, Carell, Elbert, & Hatfield, 2006).
- **Wellness programmes** focus mainly on current health-related matters that are preventable. According to Grobler et al. (2006), health refers to the general state of physical, mental and emotional wellness, health management practices focus on maintaining individuals' overall well-being, while safety relates to protecting people's physical wellbeing.

1.11 FORMAT OF THE STUDY

The research report consists of five chapters. The layout of the chapters is summarised below:

- **CHAPTER 1: GENERAL INTRODUCTION**

This chapter introduces the purpose of the study. The following topics are discussed:

- the background to the problem
- the research questions
- the aim of the study
- the objectives of the research
- the definition of terms
- the layout of the research report.

- **CHAPTER 2: EMPLOYEE WELLNESS – BEYOND CONFORMANCE**

This chapter comprises a literature review which examines the existing literature to support the research problem. The literature review was used to build a conceptual framework for employee wellness practices to enable reliable research findings to be obtained.

- **CHAPTER 3: METHODOLOGY AND RESEARCH DESIGN**

This chapter discusses the research philosophy and qualitative nature of the research design. The following aspects will be discussed:

- the research design (philosophy, method and strategy)
- the research methods and instruments
- the population and sampling strategy
- the data collection process
- the data analysis process (ordering and preparing data, coding the data, interpreting data)
- ethical considerations applied including measures to ensure trustworthiness.

- **CHAPTER 4: DATA RESULTS AND DISCUSSION**

This chapter provides explanations for the data collected, the data analyses and the theoretical saturation process that took place in the research. In addition, the raw data are presented after they have been coded and categorised into themes.

- **CHAPTER 5: CONCLUSIONS AND RECOMMENDATIONS**

This chapter concludes the research. It answers the research questions and includes a discussion of the significant findings and the practical implications of these findings. Subsequently, recommendations are formulated for the application of the results in SMMEs and suggestions are made for future studies on employee wellness practices in the organisations. Finally, the limitations of the research will be discussed.

1.12 SUMMARY

This chapter outlined the background to the problem, as well as the purpose and the objectives of the research study. The purpose of this research is to create an understanding of the wellness experiences and challenges of employees and managers working in SMMEs. It is hoped that the findings and recommendations of this study will assist in identifying with the challenges experienced by both managers and employees of SMMEs in the various industries and will serve as a foundation for future decisions regarding wellness practices and research projects in these organisations.

In Chapter 2, the importance of employee wellness practices, definitions of employee wellness, healthy workplace conditions and their influence on wellness, the manifestation of unhealthy workplaces and strategies to prevent workplaces from becoming unhealthy will be discussed.

2.1 INTRODUCTION

Above and beyond the legislative requirements, employers have a moral obligation to provide their employees with a working environment that is safe and conducive to work. While the employers' fiduciary duty includes safeguarding the profitability of the organisation, this must not be at the expense of employee wellness.

According to the ILO, employee wellness is a key factor in determining an organisation's long-term effectiveness. A healthy workforce is a happier and more productive workforce (Ferreira & Groenewald, 2016). Small businesses are only as successful as their employees (Everett, 2011). The ILO has shown, through various studies, that there is a direct link between the productivity levels and the general wellbeing of the workplace (ILO, 2018). Therefore, SMMEs have to be concerned about employee wellness if the organisation wishes to become productive and ultimately financially viable (Bendix, 2010; Nielsen, Nielsen, Ogbonnaya, Kansala, & Isaksson, 2017).

Unhealthy and unhappy workplaces can affect employees' wellness, which could lead to job burnout, fatigue and depression (Wilding, 2017). In contrast, happy, healthy and safe working environments can reduce absenteeism, high staff turnover and tardiness and could lead to increased job efficiency, job satisfaction and employee engagement (Grobler et al., 2006; White & Schoonover-Shoffner, 2016).

In this chapter, the researcher provides an overview of the nature of SMMEs and an in-depth discussion on employee wellness practices to understand the challenges and experiences of SMMEs in context. The researcher discusses employee wellness practices in terms of the positive outcomes such as job satisfaction, happiness, organisational commitment and work engagement, as well as the associated negative symptoms of unhealthy workplaces (Nielsen et al., 2017).

2.2 THE PURPOSE OF SMALL, MEDIUM AND MICRO ENTERPRISES IN SOUTH AFRICA

The primary purpose of a small business is to create wealth and to add value to the economy (Antonites et al., 2014; Bureau for Economic Research, 2016). SMMEs play a significant role as employment generators by contributing to the redistribution of wealth and investment in the South African economy. New SMMEs established in previously disadvantaged communities have the potential to accelerate growth opportunities by evolving from a microenterprise into a larger category enterprise (Berry et al., 2002). The small business owner's greatest motivation is to make a profit and to stimulate the environment, usually within a context of limited resources. For the small business owner, self-employment signifies an escape from inefficient bureaucracies, red tape and the burden of regulations that constrain organisations from achieving growth (Bureau for Economic Research, 2016; Mayson & Barrett, 2017). Private ownership presents an opportunity to create personal wealth and to experience freedom (Feldman & Bolino, 2000).

2.2.1 THE NATURE OF SMALL, MEDIUM AND MICRO ENTERPRISES IN SOUTH AFRICA

In 2015, the Department of Trade and Industry (DTI) reported a total of 2.25 million SMMEs in South Africa (Bureau for Economic Research, 2016). According to a Finscope Small Business Survey (2010), the majority of SMMEs (78.7%) offered retail services whilst only 21.3% provided client services (Finmark Trust, 2010). The report found that in 2010, only 17.3% of small business owners acknowledged that their businesses were registered with the Companies and Intellectual Property Registration Office (CIPRO). However, the registered business owners expressed little value in the process and provided the following reasons for registering their business: 54.1% registered to comply with legislation, 14% registered to avoid harassment from authorities and 7.1% registered to avoid fines. Furthermore, 6.5% of the businesses that registered with CIPRO argued that registration held no benefits (Finmark Trust, 2010) for the business.

A “small business” is defined in chapter 1 of the National Small Business Act 102 of 1996 as amended by the National Small Business Amendment Act of 2003 and 2004 (NSB Act) as "a separate and distinct business entity, including cooperative enterprises and non-governmental organisations, managed by one owner or more which, including its branches or subsidiaries, if any, is predominantly carried on in any sector or subsector of the economy mentioned in column I of the Schedule and which can be classified as a micro-, a very small, a small or a medium enterprise by satisfying the criteria mentioned in columns 3, 4 and 5 of the Schedule".

The NSB Act (26 of 2003) defines five categories of small businesses in South Africa namely: survivalist enterprises, micro-enterprises, very small enterprises, small enterprises and medium enterprises. The SMME definition uses the number of employees per enterprise category combined with annual turnover categories, including the gross assets excluding fixed property (Olawale & Garwe, 2010). A brief overview of each category is provided as follows:

- Survivalists generate less than the minimum standard of income and consist of hawkers, vendors and subsistence farmers. In practice, survivalists are categorised as part of the micro-enterprise sector.
- Micro-enterprises have a turnover of less than the VAT registration limit and consist of spaza shops, minibus taxis and other household industries that employ no more than five people. The annual turnover is expected to be less than R150 000 and gross assets, excluding fixed property, less than R100 000.
- Very small enterprises operate in the formal market and employ fewer than 10 employees, except for the mining, electricity, manufacturing and construction sectors in which the minimum requirement is 20 employees. The annual turnover is expected to be less than R200 000 to R500 000, depending on the industry, and the gross assets, excluding fixed property, between R150 000 and R500 000 depending on the industry.
- Small enterprises have a limit of 50 employees and operate on the basis of more complex business practices. The annual turnover is expected to be less than R2

million to R25 million, depending on the industry, and the gross assets, excluding fixed property, between R2 million and R4.5 million.

- Medium enterprises employ a maximum of 100 employees, except for the mining, electricity, manufacturing and construction sectors which have a maximum of 200 employees. The annual turnover is expected to be less than R4 million to R50 million depending on the industry and gross assets, excluding fixed property, between R2 million and R18 million, depending on the industry (Olawale & Garwe, 2010).

The NSB Act (26 of 2003) identifies small business development as an essential element of economic growth in South Africa. Despite the significant impact that SMMEs have on the economy, research conducted by the Small Enterprise Development Agency shows that the majority of SMMEs rarely survive beyond the emerging phases, lasting for an average of 3.5 years (Bureau for Economic Research, 2016) and with a failure rate of 75%. South African SMMEs consequently have one of the highest failure rates in the world (Olawale & Garwe, 2010).

Although small businesses encounter many challenges such as access to finance, poor infrastructure, skills shortages and inefficient bureaucracy (Bureau for Economic Research, 2016; Department of Trade and Industry, 2005), they contribute significantly to the upliftment of communities by combining the resources of society to produce products and services for the communities in which they operate (Du Toit, Erasmus, Strydom, Badenhorst, & Cohen, 2012). Through the entrepreneurial spirit of the owners and senior managers, these operations have the potential to become medium-sized to large business operations and therefore the contributions of SMMEs should be highly valued in developing economies (Du Toit et al., 2012; Grobler et al., 2011).

2.2.2 CHALLENGES FACED BY SMMEs

There is a significant distinction between the formal and the informal sector in South Africa (Berry et al., 2002; Bureau for Economic Research, 2016). The formal SMME sector tends to be more educated, white and centralised in the Gauteng and Western Cape

area, while the informal sector is owned mainly by black entrepreneurs located in the rural provinces (Bureau for Economic Research, 2016). In 2008, the Department of Trade and Industry (DTI) reported a total of 2.18 million SMMEs in South Africa. According to the report, more than 1.42 million SMMEs were in the informal sector. Since then, over a period of seven years from 2008 to 2015, the total number of SMMEs increased by only 3%. Gauteng, with 687 556 SMMEs, represented the largest group of SMMEs in the country, with 270 093 SMMEs in the formal sector, 405 180 SMMEs in the informal sector, and 12 283 in other sectors (Bureau for Economic Research, 2016; Department of Trade and Industry, 2008).

A report by the Bureau for Economic Research (2016) highlighted the following aspects relating to the challenges experienced by SMMEs in the South African economy:

- Start-up SMMEs are not easily financed. A lack of finance and poor profitability are the primary reasons why small businesses fail.
- Obstacles to accessing credit. These obstacles include inadequate collateral on the part of the entrepreneur, lack of credit history, an inability to produce an acceptable business plan, poor marketing research and the absence of a viable business idea.
- Inadequate infrastructure. Small businesses in Gauteng have difficulty finding physical space in which to operate (Finmark Trust, 2010).
- Low levels of research and development. Small businesses fail to form strong upward linkages with larger firms.
- Labour laws discourage SMMEs from taking on employees. SMMEs generally hire unskilled or semi-skilled workers, which hinders small business growth.
- Constraint caused by skill shortages. The National Development Plan acknowledges that small businesses in the service sector are negatively affected by skill shortages.

- Security spending pushes up costs. The high crime levels in South Africa increase security spending by SMMEs.
- Rural areas lack access to the market (Bureau for Economic Research, 2016).

According to Mayson and Barrett (2017), the regulation compliance narrative reminds small business owners that external agents are in control of the business. This is despite government's attempt to put policies, strategies and programmes in place aimed at creating enabling environments for small businesses (Bureau for Economic Research, 2016).

2.3 DEFINITIONS OF EMPLOYEE WELLNESS

A criticism of the existing literature is that wellness is not clearly defined and that many authors use 'wellness' and 'wellbeing' interchangeably. According to Susie Ellis, Chairman of the Global Wellness Institute, this notion is about to change, as wellness is becoming more frequently associated with health and prevention, whereas wellbeing is becoming more connected to people's "happiness" (Global Wellness Institute, 2016). In contrast to this opinion, some authors argue that wellbeing refers to a more holistic whole-life experience, whereas wellness refers only to the physical aspect of employee health (Kohl, 2017).

Nielsen et al. (2017, p. 104) adopt the broad definition of wellbeing developed by Danna and Griffin (1999) as "the state of individuals' mental, physical, and general health, as well as their experiences of satisfaction both at work and outside of work".

The ILO states that workplace wellbeing refers to "all aspects of working life, from the quality and safety of the physical environment, to how workers feel about their work, their working environment, the climate at work and work organisation" ILO, 2018, p. 6).

Burton (2010, p. 15) of the World Health Organisation (WHO) agrees with the above definitions, summarising employee wellness as "a state of complete physical, mental and social wellness, not merely absence of disease or infirmity".

The South African Board for People Practices (SABPP, 2014) defines employee wellness as the process of creating and maintaining an environment in which employees can perform at their peak without compromising the health and safety of employees, while at the same time complying with legislative requirements and other wellness practices to support the organisational goals and objectives.

Sieberhagen et al. (2011) define employee wellness as the state of optimised social, physical and mental health and wellness. It entails a holistic approach to the physical, psychological and social state of the welfare of the employees. Van der Westhuizen and Wessels (2011) argue that the minimum requirement in this respect is to provide a working environment that is safe and complies with all legal requirements.

From the above discussion it is clear that employee wellness should be studied from a holistic point of view. Therefore, for the purpose of this study, the researcher adopted the ILO's definition of wellness but includes the 'happiness' or satisfaction element of the Global Wellness Institute and Danna and Griffin's (1999) definition. Thus, the working definition of employee wellness for this study is 'wellness includes all aspects of working life, from the quality and safety of the physical environment, to how workers feel about their work, the climate at work and what makes them happy'.

2.4 THE BENEFITS OF EMPLOYEE WELLNESS PRACTICES

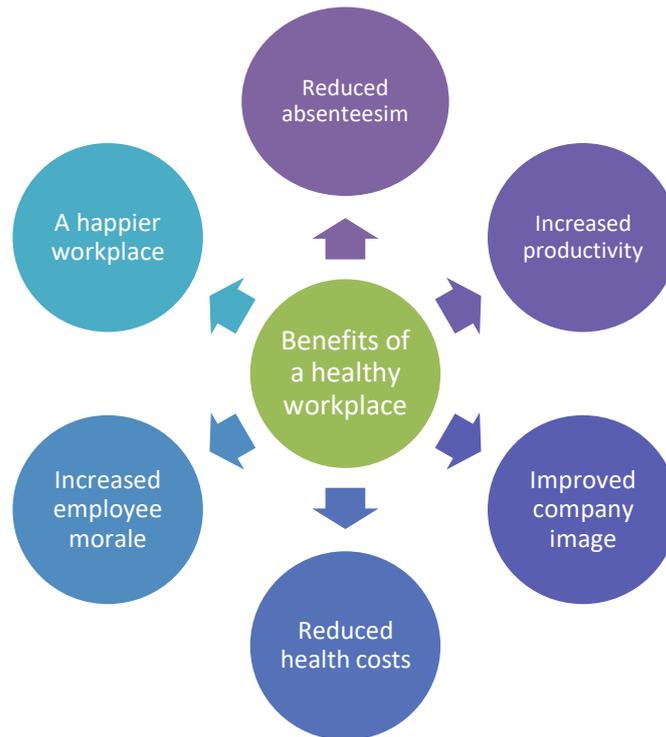
A study on the benefits and challenges of fun workplaces found that organisations that encourage creativity and playfulness are more likely to recruit and retain employees (Everett, 2011) than organisations that implement strict workplace practices. Google and Amazon have become enviable and in demand workplaces partly due to their creative freedom approach. It is estimated that Google receives around two million applications per year (Schneider, 2017). Google co-founder Larry Page maintains: "we don't want you to have a great job, we want you to have a good life". According to Knight and Haslam (2010), job satisfaction can improve employees' performance and loyalty considerably.

Healthy employees assist organisations to maintain their competitive advantage (Knight & Haslam, 2010; Nielsen et al., 2017). Happy employees work harder, are less absent,

demonstrate improved mental health and are more socially connected through close working relationships (Ferreira, Erasmus, & Groenewald, 2009; Koch, 2018).

Figure 2.1 illustrates the benefits of employee wellness practices (Global Wellness Institute, 2016).

Figure 2.1: Benefits of Employee Wellness Practices



Source: Adapted from the Global Wellness Institute (2016)

2.5 DIMENSIONS OF WELLNESS

It is suggested that SMMEs take a holistic approach to employee wellness, to value the experiences of employees and to determine employees' need for wellness practices. The wellness model, comprising six dimensions of wellness, was developed in 1976 by Bill Hettler (National Institute of Wellness, 2018) in order to establish a holistic approach to wellness. This model assists managers to understand how each dimension is connected to employee wellness as a whole.

Figure 2.2 depicts the six dimensions of wellness, namely, the physical, emotional, intellectual, spiritual, occupational and social dimensions.

Figure 2.2: The Six Dimensions of Wellness



Source: Adapted from the National Institute of Wellness (2018, p. 2)

- **Social wellness** refers to how employees interact with colleagues. The social dimension encourages employees to contribute to the human and physical environment for the common welfare of the community (Hoffmann, Farrell, Lilford, Ellis, & Cant, 2007).
- **Physical wellness** recognises the need for regular physical activity. Employees' ability to recognise that behaviours have a significant impact on physical wellness and to adopt healthy habits (routine check-ups, a balanced diet, exercise, etc.) while avoiding destructive habits (tobacco, drugs, alcohol, etc.) will lead to optimal physical wellness (National Institute of Wellness, 2018).
- **Emotional wellness** refers to the ability of employees to understand themselves and to cope with the work-life challenges. Emotional wellness is enhanced by the

ability to acknowledge and share feelings of happiness, anger, fear, sadness or stress, hope and love in a productive manner.

- **Occupational wellness** refers to the ability of employees to achieve personal fulfilment from their jobs or chosen career fields while still maintaining work-life balance.
- **Intellectual wellness** refers to employees' ability to meet their desired level of intellectual stimulation. Employees' intellectual wellness is enhanced by learning new concepts, improving skills and seeking challenges in pursuit of lifelong learning.
- **Spiritual wellness** is the process of discovering meaning and purpose in life and demonstrating values through behaviours. In addition, it is the ability to establish peace and harmony in the workplace, to develop congruency between values and actions and to realise a common purpose that binds people together.

2.6 THE SABPP EMPLOYEE WELLNESS ELEMENT

The National Human Resource Standards were developed by SABPP to provide a framework of acceptable Human Resource (HR) practices and to set objectives and minimum HR standards that any organisation (large or small) can use to build a productive workforce. The SABPP Human Resource Management (HRM) Standards Model consists of 13 elements, of which the employee wellness element is a cross-functional HR value chain component in the HR framework.

The SABPP HRM National Standards Elements contextualise employee wellness as a key driver in promoting safe and healthy working environments in pursuit of optimum productivity.

Figure 2.3 illustrates the 13 HRM National Standards Elements, including element eight: employee wellness (South African Board for People Practices (SABPP), 2014):

Figure 2.3: The HRM National Standards Elements



Source: Adapted from SABPP (2014, p. 6)

The focus of this research study has reference to element 8 – employee wellness (Figure 2.3) – which applies to aspects such as the organisation’s wellness strategy and policy, occupational health and safety procedures, chronic disease management, management of opportunities for people with disabilities, quality of work life and employee wellness services (South African Board for People Practices (SABPP), 2014).

In complying with the quality standards, the SABPP employee wellness element (element 8) focuses on four main areas (SABPP, 2014):

- The formulation of employee wellness strategies, policies and relevant HR procedures. Organisations are encouraged to develop appropriate policies, processes and systems to integrate wellness practices with other HR and non-HR processes. Organisations should, among other things, promote employee health,

support preventative health care, administer chronic disease management processes, and identify health, safety and lifestyle risks inherent in the workplace.

- The promotion of awareness of the wellness policy, strategy and procedures of the organisation. This process includes the assessment of organisational practices, processes and culture to identify opportunities to improve employees' work-life quality.
- The maintenance of statistical records on all aspects of wellness. Employers are encouraged to keep a record of identified employee risks emanating from health and wellness issues, as well as expenditure on health and wellness prevention, including disbursements on promoting employee wellness.
- The consideration of flexible work practices and other alternative work arrangements. Employers are urged to suggest alternative work arrangements that enable employees to reach and maintain a work-life balance that effectively supports their physical, mental, spiritual, financial and social wellness.

The points discussed above show that there is a strong link between sound human resource practices and the bottom-line performance of organisations (Fonarow et al., 2015; Lewis, 2016; Sieberhagen et al., 2011).

2.7 HEALTHY WORKPLACES AND THEIR INFLUENCE ON WELLNESS

According to the American Psychological Association, organisations can become healthy by "incorporating health promotion activities, offering employee assistance programmes, having flexible benefits and working conditions, treating employees fairly; and offering programmes for employee development, health and safety and the prevention of work stress" (Kelloway & Day, 2005, p. 223).

A study conducted by Knight and Haslam (2010) to determine the impact of workplace strategies on productivity and wellness found that employees who have the opportunity to realise their own identity and to create their own workspace are more productive and experience improved wellness as a result of their independence.

The study also found that productivity improves by almost 32% when employees have control over the design and layout of the office space. Not only did productivity improve but employees also became happier and healthier. These results show that workspace has a significant impact on employees' happiness because employees were able to identify more with the employer which led to more positive perceptions about their jobs in general (Knight & Haslam, 2010).

The WHO defines health as "[a] state of complete physical, mental and social wellbeing, and not merely the absence of disease" (WHO, 2010, p. 06). A healthy workplace thus enables managers and employees to work together to improve processes in order to protect and promote the health and safety of employees, ultimately sustaining overall wellness. Accordingly, the following issues are considered:

- health and safety concerns in the physical work environment
- health and safety and wellbeing concerns in the psychosocial work environment
- personal health resources in the workplace, and
- ways of participating in the community to improve the health of workers, their families and other members of the community (Burton, 2010).

A healthy work environment is one in which employees are engaged and productive to the benefit of both themselves and the employer (Everett, 2011). Thus, establishing a healthy and safe environment should be a key priority for SMMEs, as a healthy workplace has the potential to provide the SMME with a competitive edge (Swanepoel et al., 2014).

Considering the problem statement, the objective of this study is to explore the experiences of managers and employees of SMMEs and to develop an understanding of employee wellness practices in SMMEs. This leads to the next question, what are the factors that influence wellness in the workplace?

2.7.1 THE WORLD HEALTH ORGANISATION AVENUES OF INFLUENCE ON WELLNESS

The WHO promotes the implementation of a Healthy Workplace Framework and Model to enable organisations to perform their functions and attain their goals and objectives without compromising the health and safety of their employees (Burton, 2010). The WHO suggests that if healthy workplace initiatives are to have any significant impact on the business, they should be integrated into an organisation's overall strategic business plans. The model can be applied to everyone, regardless of the business sector, the size of the organisation, or the legislative or cultural background of the country (Burton, 2010).

The WHO Healthy Workplace Model suggests that SMMEs can create healthy workplaces by considering four avenues of influence on wellness, namely, (i) the physical work environment; (ii) the psychosocial work environment; (ii) personal health resources; and (iv) enterprise community involvement.

Figure 2.4 depicts the four avenues of influence for developing a healthy working environment. The diagram includes the core principles of leadership engagement, worker involvement, and ethics and values.

Figure 2.4: The WHO Healthy Workplace Model: Avenues of Influence and Core Principles



Source: Adapted from the WHO (2010, p. 98)

2.7.1.1 *Physical work environment*

The WHO defines the physical work environment as "the part of the workplace facility that can be detected by human or electronic senses, including the structure, air, machines, furniture, products, chemicals, materials and processes that are present or that occur in the workplace, and which can affect the physical or mental safety, health and well-being of workers" (WHO, 2010, p. 84).

The physical environment includes the components of the workplace that facilitate clean air, safe drinking water, ergonomic workstations, violence-free and aggression-free workplaces, available technologies, effective workplace policies and procedures, and beneficial workplace structures (Government of Ontario, 2017).

Prolonged exposure to unhygienic environments can cause increased stress levels, which can affect the immune systems, making employees more susceptible to occupational respiratory diseases and related illnesses such as asthma, bronchitis and emphysema. Dirty carpets in workplaces are breeding grounds for the dust mites and other microscopic pests that are associated with allergic reactions and other respiratory illnesses (Kerr & Cherney, 2017).

The WHO Healthy Workplace Framework and Model identifies, among others, the following examples of health hazards in the physical environment (Burton, 2010b, p. 84):

- chemical hazards (e.g. solvents, pesticides, tobacco smoke, etc.)
- physical hazards (e.g. noise, radiation, vibration, excessive heat, etc.)
- biological hazards (e.g. hepatitis B, malaria, HIV, lack of clean water, toilet and hygiene facilities)
- ergonomic hazards (e.g. excessive force, awkward posture, repetition, forced inactivity/static posture).

2.7.1.2 Psychosocial work environment

The psychosocial work environment includes the work structure and the organisational culture, which have a significant effect on the mental and physical wellness of employees (Burton, 2010). The expression 'psychosocial work environment' thus covers aspects concerning both the employees' work and the working conditions. Psychological factors include perceptions and interpretations of work-related matters and are determined by the interaction between environmental factors, other workers and individuals. Social factors, on the other hand, involve the influence of the social context and certain interpersonal factors such as workplace relationships and support. These social factors can cause workers emotional or psychological stress. By contrast, good social interactions can improve overall productivity as well as collaboration and cooperation between employees (Koch, 2018).

Research in the past has clearly shown that various situations in the workplace can be labelled unhealthy or 'psychosocial hazards' because the causes are related to psychological and social conditions in the workplace rather than physical conditions. These hazards can be harmful to employees' mental and physical health and are referred to as stressors by the WHO (Burton, 2010).

The WHO Healthy Workplace Framework and Model identifies, among others, the following examples of psychosocial hazards (Burton, 2010, p. 85):

- Poor work organisation (e.g. problems with work demands, time pressure, decision latitude, reward and recognition, workloads, support from supervisors, job clarity, job design, job training, poor communication).
- Organisational culture (e.g. lack of policies and practices related to dignity and respect for all workers; harassment and bullying; discrimination based on HIV status; intolerance for gender diversity; ethnicity; sexual orientation; religion; lack of support for healthy lifestyles).
- Command and control management style (e.g. lack of consultation, negotiation, two-way communication, constructive feedback, respectful performance management).
- Inconsistent application and protection of fundamental workers' rights (e.g. legislated employment standards for contracts, maternity leave, non-discriminatory recruitment and selection practices, hours of work, time off, vacation time, occupational health and safety rights).
- Lack of support for work-life balance.
- Lack of awareness of and competence in dealing with mental health and illness issues.
- Fear of job loss related to mergers, acquisitions, reorganisations, or the labour market economy.

2.7.1.3 Personal health resources

Personal health resources refer to the efforts organisations make to encourage healthy lifestyle practices. This includes the provision of the supportive environment, health services, information, resources, opportunities and flexibility that support and motivate employees in efforts to monitor ongoing physical and mental health (Burton, 2010). It is vital that SMMEs inform employees ways to address unhealthy lifestyle choices, as a lack of knowledge may cause employees to become complacent (World Health Organisation (WHO), 2010).

The WHO Healthy Workplace Framework and Model identifies the following examples of unhealthy personal health resources in the workplace (Burton, 2010b, p. 86):

- Physical inactivity may occur because employees are unaware of the length of the breaks that may be taken.
- Poor diet because of a lack of access to healthy snacks or meals at work or a lack of refrigeration for storing healthy snacks.
- Smoking may be allowed in the workplace.
- Excessive alcohol use may be encouraged at workplace parties and functions.
- Poor sleeping habits may be brought about by work overload, a stressful workplace or shift work.
- Illnesses may remain undiagnosed or untreated because employees are not afforded the opportunity to visit a healthcare specialist.

2.7.1.4 Enterprise community involvement

The WHO also recognises the importance of enterprise community involvement by highlighting the involvement of communities in organisational community development projects and the effect organisational activities have on the community.

Employees live in the communities that surround the workplace and thus their health is affected by the physical and social environments.

The WHO Healthy Workplace Framework and Model identifies some examples of ways in which even small organisations can become involved in the community (Burton, 2010b, p. 88):

- Institute gender-equality policies in the workplace to protect and support woman.
- Provide free or affordable supplemental literacy education for employees and their families.
- Encourage and allow employees to volunteer for non-profit organisations during office hours.

2.7.2 LEADERSHIP ENGAGEMENT

Leadership is the ability to influence a group of people towards the achievement of a vision or set of goals (Robbins et al., 2016). SMMEs need strong leadership and management to inspire organisational members to achieve the organisational goals and objectives and to change behaviour (Wärnich et al., 2015). It is often argued that great leaders are highly competent and skilled managers (Grobler et al., 2011; Robbins et al., 2016; Swanepoel et al., 2014) and that employees often regard competence as a trait of trustworthiness (Robbins et al., 2016). Hence, managers can play a significant role in establishing trust relationships with employees. In turn, trust relationships with owners can be useful for convincing them to provide resources required to establish healthy workplaces.

Small businesses have many unique characteristics, and leadership support for wellness can vary greatly between organisations (Wärnich et al., 2015). In a research study conducted by Wellsteps (2018) to establish the need for wellness programmes in SMMEs, it was discovered that small businesses with strong leadership support for wellness produced significantly better participation rates and outcomes. Moreover, strong

leadership support for wellness was found to be more powerful in small businesses than in corporate entities because leaders were more visible and interacted with employees daily.

2.7.3 EMPLOYEE ENGAGEMENT

Employee engagement refers to an employee's involvement with, satisfaction with and enthusiasm for their work (Robbins, Judge, Odendaal, & Roodt, 2013). According to Robbins et al. (2013) engagement is about employees having access to resources and opportunities to acquire new knowledge and skills, the perceived value and meaning they attach to their work and the meaningful relationships they develop with colleagues and managers. Robinson et al. (2004, cited in Swarnalatha & Prasanna, 2012, p. 2018) define employee engagement as "a positive attitude held by the employee towards the organisation and its value". Accordingly, an engaged employee is committed to the organisation and is willing to be productive (Ferreira, Basson, Coetzee, & Ferreira, 2010; Swarnalatha & Prasanna, 2012). According to Noe, Hollenbeck, Gerhart, and Wright (2015), employee engagement is influenced by the way managers treat employees, as well as other human resource practices. Meaningful work allows employees to use a variety of their skills. This relates to engagement, which includes satisfaction, intention to stay, pride and opportunity to perform challenging work.

The key drivers of employee engagement are the following (Deloitte South Africa, 2014; Robbins et al., 2016):

- Quality of work life: freedom and autonomy in jobs.
- Work processes: trust, creativity, and honesty.
- Work relationships with managers and senior leadership: employees need to work well within their teams and divisions in order to achieve targets. Teambuilding events should be supported and encouraged.
- Career opportunities: employees value opportunities to learn new skills.
- Total rewards: employees value rewards and recognition.

- Company practices: an engaged employee is committed to furthering the organisation's goals.

Organisations often struggle with low levels of employee engagement and trust (Health Advocate, 2015). It has been found that employees display higher engagement when they believe the organisation is ethical and responsible (Robbins et al., 2016). According to research conducted by Quantum Workplace and Limeade to establish the link between engagement and health and wellness benefits, employees are more likely to be engaged in workplaces with health and wellness benefits than in organisations that have no health and wellness benefits in place (Hackbart, Brown, & Albrecht, 2015). According to the results of this research, employees who believed their employees cared about their health and wellness were 38% more engaged, 10% less likely to be hostile, 17% more likely to be in the organisation in a year's time and 18% more likely to put in extra effort for the organisation (Hackbart et al., 2015)

The following strategies can be used to build employee engagement (Koch, 2018; Maurer, 2013; Swarnalatha & Prasanna, 2012):

- Create fun and innovative processes that align with the organisational culture.
- Value employees who contribute to the organisation's success.
- Build relationships between managers and colleagues.
- Build trust.
- Provide opportunities for regular socials to engage colleagues and managers.
- Recognise and reward the performance of exceptional employees.
- Organise physical sports activities to encourage employees to get active and to get to know each other on another level.
- Provide support and encouragement when needed.
- Ask employees what they need to improve their overall wellness.

Employee engagement drives productivity, profitability and business success (Hackbart et al., 2015). Robbins et al. (2016, p. 302) define employee involvement (engagement) as "a participative process that uses employees' input to increase their commitment to organisational success". Thus, employee engagement is another key aspect to consider when developing healthy workplaces. If employees are engaged in the decisions that affect them they are more likely to be more motivated, more committed and more productive (Robbins et al., 2016; Swanepoel et al., 2014; Vance, 2004). Robbins et al. (2016) argue that employee engagement is strongly related to increased productivity, job satisfaction, worker wellbeing and an organisational culture which ultimately affects the bottom line. To reach optimal success in developing healthy workplaces, employees should be consulted and informed from the planning phase right up to the evaluation phase (Swanepoel et al., 2014; WHO, 2010).

Figure 2.5 illustrates how Maslow's hierarchy of needs can be applied to employee engagement. The figure also demonstrates employees' needs to feel valued and appreciated. Highly engaged employees have a passion for their work and feel valued and connected to the organisation, whereas disengaged employees have often checked out emotionally. Job dissatisfaction is manifested as the psychological effects of stress often caused by high workloads which lead to lower emotional wellness (Robbins et al., 2016).

Figure 2.5: Maslow's Hierarchy of Needs applied to Employee Engagement



Source: Adapted from Vance (2004, p. 35)

Employees that reach the self-actualisation stage are most likely self-managing and need little praise from the organisation because they are aware of their contribution to the organisation.

2.7.4 BUSINESS ETHICS AND LEGALITY

Business ethics and legality are key elements of healthy workplaces (Burton, 2010; World Health Organisation (WHO), 2010) as there is an increased need for more ethical behaviour worldwide. The introduction of new technologies and the discovery of new evidence that question beliefs and values are accelerating change in processes and procedures in the workplace (Ferreira & Groenewald, 2016). Employers often have to deal with diverse values systems and beliefs and must remain accountable for their actions and the way they treat employees either according to their own beliefs or according to the employees' beliefs.

Ferreira and Groenewald (2016) list the following benefits to managing ethics in the work environment:

- Society is improved.
- The external relations and public image of the organisation are improved.
- Employees are educated.
- The risk of illegal issues in the workplace is decreased.
- Trust within the organisation is improved.

Comfortable, safe and healthy work environments can make a contribution to organisational productivity. An employee who is well will usually perform better than one who is not well. Matlala (1999) states that the failure of the organisational culture to adopt wellness practices can lead to an escalation of illness and a deterioration in organisational performance.

2.8 MANIFESTATION OF UNHEALTHY WORKPLACES

An increasingly important aspect of employee wellness is the need for employers to show concern for their employees (Swanepoel et al., 2014). It is argued that an environment in which employees feel undervalued, disrespected and not cared for may become unhealthy (Anon., 2008; Tastan, 2017). Such environments are often the cause of absenteeism, lower employee retention rates, low productivity and raised stress levels and are related to poor physical health and workplace safety (Swanepoel et al., 2014; Tastan, 2017). According to the South African Stress and Health Survey (SASH), the cost of absenteeism accounts for an estimated R 40 billion per annum, which is equal to 2.2% of the country's gross domestic product (Herman et al., 2009; Wilbers, 2016).

Employees do not necessarily have to be working in dangerous environments to be faced with health-destroying or life-threatening workplaces (Pfeffer, 2018).

Unhealthy workplaces severely affect the general wellbeing of employees and workplace-related illnesses, such as sick building syndrome (SBS), stress, tenosynovitis and repetitive strain injury (Ferreira, Erasmus, & Groenewald, 2013), often result in excessive absenteeism, damage to equipment, safety issues, attitude and behavioural problems, higher recruitment and training costs, loss of skilled people and high litigation cost.

Poor mental health is regularly cited as the leading cause of early retirement, resignation or withdrawal from the workplace (McDaid & Park, 2011). According to a report by the ILO on workplace stress, 38% of workers worldwide suffer from excessive pressure on the job and 24% are actively disengaged at work. Furthermore, 313 million work-related accidents and 2.3 million work-related deaths are recorded annually (Global Wellness Institute, 2016; International Labour Organisation (ILO), 2016).

Unhealthy workplaces refer to unfavourable environments in which dysfunctional and highly stressful interactions are normal (Tastan, 2017; White & Schoonover-Shoffner, 2016). These workplaces are characterised by three elements: (i) unhealthy systems, (ii) unhealthy leaders; and (iii) dysfunctional colleagues (White & Schoonover-Shoffner, 2016).

Unhealthy systems often include the use of scare tactics to threaten employees into staying in marginalised positions which are symptomatic of organisations that thrive on bullying tactics (Wilding, 2017).

Leadership becomes unhealthy when leaders use bullying tactics, are arrogant, display manipulative and dictatorial behaviour, implement micro-management strategies and display a lack of empathy (Goldman, 2006; Johnson, 2016; Kusy & Holloway, 2009; Omar, Robinson, & Dudau, 2017). According to a study conducted by Omar et al. (2017), to explore concepts of unhealthy leadership, unhealthy leadership often leads to reduced performance, social disconnectedness and emotional disturbances.

Dysfunctional colleagues refers to the unhealthy behaviour of co-workers in tearing each other down and engaging in passive-aggressive communication and gossip (Tastan, 2017; White & Schoonover-Shoffner, 2016). According to Jeffrey Pfeffer, a Stanford University professor in organisational behaviour, unhealthy workplaces are the fifth leading cause of death. According to his research, workplace conditions such as excessive working hours, lack of control and autonomy, work-family conflict and lack of health insurance are among the major causes of more than 120 000 deaths per year in the United States (Pfeffer, 2018).

Other telling signs of unhealthy environments include poor workplace communication which includes getting little to no feedback about work performance, operating in an environment where dysfunction reigns and engaging in destructive conversations (Tastan, 2017; Too & Harvey, 2012). Employees often feel unhappy in such environments. In addition, unfavourable environmental conditions may result in sick building syndrome (SBS) (Ferreira & Groenewald, 2016).

2.8.1 WHAT IS SICK BUILDING SYNDROME?

Physical and logistical limitations in the workplace can result in employees being less effective, less productive and less accurate in the workplace (Ferreira & Groenewald, 2016). SBS refers to a condition where employees experience severe health problems such as headaches, dizziness and fatigue due to the time spent in the workplace. Causes

of SBS results from poor indoor air quality caused by inadequate ventilation and pollutants resulting from airborne contamination. Environmental hazards in the workplace such as lack of natural ventilation and dusty and polluted air have been linked to bronchitis, emphysema, lymphoma and in severe cases cancer (Grobler et al., 2011; Nel et al., 2011; Swanepoel et al., 2014; Van der Westhuizen & Wessels, 2011).

A study conducted in 1992 under Healthy Buildings International to establish the impact of SBS found that 65% of the interviewed employees stayed away from work to recover from symptoms related to this syndrome (Erwee, 1993). A study conducted in 2007 to establish the psychosocial factors associated with SBS found that employees who have been exposed to sick buildings reported significantly higher levels of stress, lower levels of environmental control and lower levels of job satisfaction (Heslop, 2007).

2.8.2 CAUSES OF SICK BUILDING SYNDROME

According to Ferreira and Groenewald (2016), the central control of lighting, cable management and the positioning of furniture often leads to decreased feelings of personal and local control in employees.

Ferreira and Groenewald (2016, p. 236) identify the following physical factors that cause SBS:

- Internal pollutants such as bad odours, carbon dioxide, radiation, asbestos and ozone (released by photographers)
- Varying temperatures and fresh air because of conservation of energy
- Obstruction of air movement by furniture or equipment
- High noise levels related to office systems and equipment
- Inadequate heating, ventilation and air-conditioning systems and irregular maintenance of this equipment
- Poor office design

- Inadequate lighting.

The perceptions and reactions of employees regarding working conditions have implications for satisfaction and retention that reach beyond legislative compliance (Noe et al., 2015). Physical and logistical limitations in the workplace can reduce productivity and lead to employees feeling discontented. Employees value the ability to have autonomy over their workplace conditions. This may range from being able to open windows themselves to switching desk lights on and having control over office temperatures. A healthy workforce is happier and therefore more productive.

2.9 STRATEGIES TO PREVENT UNHEALTHY WORKPLACES

Noe et al. (2015) state that managers must communicate effectively with employees from a wide variety of cultural backgrounds to create an environment in which employees can feel comfortable. A well-executed employee wellness strategy demonstrates to employees that management cares about their health and wellness. Therefore, the aim of a wellness strategy is to provide information, support and motivation to employees to participate in wellness practices and to maintain good health (Swanepoel et al., 2014). Examples of strategies that can be implemented to prevent unhealthy workplaces include awareness programmes that communicate the importance of mental health and wellness, including risk management strategies for stress and burnout. Such strategies should include measures to identify unhealthy working conditions and social relations, terms of employment, and modifications to physical working environments that could affect the overall wellbeing of employees (Booyesen & Els, 2014; Guest, 2017; Lewis, 2016; McDaid & Park, 2011).

2.9.1 ADDRESSING WORKPLACE BULLYING

Workplace bullying severely affects employee wellness. Stone (2002, cited in Swanepoel et al., 2014) states that workplace bullying includes among other things, harassing a person by making unrealistic demands, setting impossible work targets and implementing petty work rules, intrusive surveillance cameras, abusive language and open or implied threats of dismissal or demotion.

Other telling signs of unhealthy environments which culminate in workplace bullying include being told "you're lucky to have a job" and constantly being put down by a tyrannical boss or manager (Wilding, 2017).

2.9.2 POLICIES TO ENCOURAGE EMPLOYEE WELLNESS

The argument is often made that only corporate entities have policies and practices in place to integrate employee wellness practices (from an ethical, business and legal perspective) and that small businesses (SMMEs) mostly rely on unstructured isolated interventions which often do not form part of the organisation's strategic priority (Sieberhagen et al. 2011). In 1998, the European Network for Workplace Health Promotion (ENWHP) addressed this issue by adopting a memorandum that outlines the differences and difficulties experienced by SMMEs when attempting to implement healthy workplaces.

Health management practices in organisations strive to maintain the physical, mental and emotional wellness of individuals, while safety practices aim to protect the physical wellness of employees, thus preventing work-related injuries and accidents (Swanepoel et al., 2014). Unhealthy workplaces are plagued by confusion, arbitrary deadlines, lack of focus and 'a take it or leave it' approach to job functions. There are often no agreed and implemented policies to back up procedures. For example, a chronic disease management policy can assist SMMEs to identify and prevent potential health challenges including precautionary steps to reduce or eliminate the identified health-related problems. By enforcing occupational health codes and legislation, SMMEs can take responsibility for their employees' health and safety. Furthermore, a health and safety policy can ensure a healthy work-life balance by laying down rules to prevent workplace accidents and illnesses (Leppink, 2015; Swanepoel et al., 2014).

2.9.3 MAINTAINING A SAFE WORK ENVIRONMENT

The Occupational Health and Safety Act, No. 85 of 1993 (OHSA) states that employers have a duty to employees to provide safe working systems and machinery, to develop

safe production processes and to eliminate hazards. This duty includes not to permit employees to perform dangerous tasks unless precautionary measures are in place to ensure the health and safety of all employees (Finnemore & Joubert, 2013).

Employee safety, health and wellness are all important issues in ensuring that employees are not endangered or exposed to health and safety risks because of being unprepared or untrained in certain conditions at the workplace. Organisations are responsible for creating and maintaining working conditions free from avoidable hazards that can lead to injury, illness or death (Sieberhagen et al., 2011; South African Government, 1993).

2.9.3.1 Employee safety

Safety and security in SMMEs refer to aspects such as protecting the office against fire or theft as well as ensuring the safety of employees at work. Safety management programmes can encourage accident-free workplaces and promote productive workforces. Thus, by implementing a safety management programme, organisations can prevent workplace accidents by conducting training and motivating employees to adopt safe working habits, which include developing procedures to eliminate hazards and to use dangerous equipment safely. One important safety aspect is ensuring that employees are aware of the procedures to follow when working with dangerous chemicals and machinery, including wearing protective clothing where necessary (Swanepoel et al., 2014).

Ferreira and Groenewald (2016, p. 237) identify the following ways in which office buildings can be safeguarded against fire:

- Indicate fire exits with clear markings.
- Conduct regular fire drills.
- Post evacuation instructions in all key areas throughout the building.
- Ensure sufficient fire extinguishers.
- Appoint sufficient fire officers.

- Allocate sufficient external fire doors.

According to Ferreira and Groenewald (2016, p. 237), the following security measures can be implemented to ensure the safety of employees:

- Access, information and keys should be monitored and controlled.
- Visitors and employees must sign in and out at a central point.
- Dissatisfied employees should be tracked.
- Employees should be regularly reminded of the security measures in place.
- Only permanent employees should have access to confidential matters.
- Confidential information and keys should not be left unattended at desk space, for example during lunch times.

2.9.4 MODIFYING THE PHYSICAL ENVIRONMENT

Management should create a positive environment for human resources which involves ensuring that HRM practices comply with legislative requirements (Noe et al., 2015). For example, The OHS Act explicitly states: "Every employer must provide and maintain a working environment that is safe and without risk to the health of his/her employees, as well as the people affected by the operations of the business" (South African Government, 1993). Thus, the absolute minimum requirement is providing a working environment that is safe, hygienic and in compliance with legal requirements. This includes providing a work environment that is ergonomically satisfactory (Ferreira & Groenewald, 2016; Hatting, 1992).

Workplaces can become "stress pools" unless management assists employees to cope with their environment (Grobler et al., 2011). SMMEs should consider modifying the physical environment to protect employees against the elements of nature. Ferreira and Groenewald (2016) suggest studying the physical ergonomics and social aspects of the

workplace to establish ventilation, lighting and noise problems. This may include providing indoor plants, vacuuming carpets regularly and opening windows often to allow fresh air in.

Equipment must be designed to meet the psychological and physiological needs of employees, referred to as the ergonomic design of equipment (Knight & Haslam, 2010). Ergonomics plays an important role in matching the physical work environment to the employee (Swanepoel et al., 2014), thus ensuring that the equipment that employees use does not endanger employees' health or safety.

2.9.5 MANAGING WORK-RELATED STRESS

Robbins et al. (2016, p. 701) define stress as "a dynamic condition in which individuals are confronted with opportunities, demands or resources related to what individuals desire and for which the outcome is perceived to be both uncertain and important". According to Grobler et al. (2011), measurement of employees' stress should encourage organisations to modify the physical environment to lower their overall stress levels. The literature suggests that employee wellness should be holistically measured in terms of employees' state of optimised social, physical and mental health and wellness (Sieberhagen et al., 2011).

According to Robbins et al. (2013), sources of experienced stress can be categorised as follows:

- Environmental: economic, political and technological uncertainty.
- Organisational: task, role and interpersonal demands, organisational structure and leadership.
- Individual: family and financial problems; personality, perception, job experience and locus of control.

Furthermore, job-stress hazards can be divided into two categories:

- Work content: work overload or underload; work pace, work hours, work participation and control
- Work context: career development, status and pay, interpersonal relationships, organisational culture, and work-life balance (Burton, 2010; Lewis, 2016; Sieberhagen & Pienaar, 2008).

Organisational factors that have a severe impact on employee wellness in SMMEs are tasks, roles and interpersonal demands. In a small business, employees often work in overcrowded environments where noise and interruptions are constant and, as such, may lead to anxiety and stress. Also, employees in small businesses often experience a lack of social support from colleagues and management.

Poor interpersonal relationships, especially among employees with high social needs, often affect productivity (Robbins et al., 2016). Dr Alex Pentland of MIT found that workplace socialising increases productivity (Pentland, 2008) and, thus, he advises managers to encourage employees to engage with each other to obtain different perspectives on problems and life. In a diverse environment, it is particularly important to share ideas about personal lives to strengthen relationships.

At the individual level, job stress and job insecurity and threats of dismissal or demotion often result in an employee believing that they are no longer capable of performing the required tasks and can lead to high staff turnover and absenteeism rates (Bernstein & Trimm, 2016; Guest, 2017; Lewis, 2016; Sieberhagen et al., 2011; Swanepoel et al., 2014; Takawira, Coetzee, & Schreuder, 2014). Absenteeism severely affects productivity in SMMEs because work requirements cannot always be absorbed by others (A. Berry et al., 2002).

Job stress is caused by physical, psychological or emotional factors that require coping behaviours from employees (Grobler et al., 2011).

Research has shown that negative co-workers and supervisor behaviour, bullying, incivility, as well as racial and sexual harassment are among the highest causes of work stress (Robbins et al., 2016).

Nelson and Quick (2009, cited in Nel et al., 2012) state that work stress can also be caused by issues outside the workplace that are then brought into the work environment. Therefore, it is often difficult to distinguish between work-related and non-work-related illnesses because the causal relationship between an employee's ill health and hazards in work or private life are multifaceted and interconnected (Swanepoel et al., 2014). For example, because physical symptoms and psychological states are interlinked, negative emotions such as frustration, anger and anxiety may contribute to stomach ulcers, and as soon as the physical symptoms become evident in the employee, the psychological state is heightened by more anxiety and worries over the physical symptoms (Robbins et al., 2016).

2.9.5.1 Burnout

Burnout is more than job stress; it occurs when employees believe they are no longer capable or worthy of doing a job. Forbes (cited in Grobler et al., 2011) identifies three types of burnout: (i) frenetic burnout, (ii) under-challenged burnout and (iii) worn-out burnout.

Frenetic burnout refers to the point of workaholicism experienced by employees because of taking on too much work and being too ambitious and hard working. Under-challenged employees experience frustration when their capabilities are not utilised to their full capacity. Work-out burnout is experienced by employees who feel their accomplishments are not recognised or are undervalued.

SMME owners and managers need to be aware of the sources of stress in order to intervene in time to minimise the effects of these factors on employee wellness. Employee assistance programmes may be useful for identifying problems early in development and to motivate employees to get treatment (Grobler et al., 2011).

2.9.6 PROVIDING EMPLOYEE ASSISTANCE PROGRAMMES

Managers are the primary change agents in most organisations (Nel et al., 2011; Robbins et al., 2016; Swanepoel et al., 2014). Sustainable organisational cultures are shaped by management's decisions and role-modelling behaviours. Managers should, therefore, implement employee assistance programmes (EAPs) to encourage healthy lifestyles. EAPs are structured interventions that take a holistic approach to assist employees in avoiding situations where their health could be at risk (Bendix, 2010). EAPs aim to identify and solve individual problems such as substance abuse and financial, relationship and mental problems that adversely affect employee wellness and job performance, regardless of the cause (Lewis, 2016; Nel et al., 2011; Sieberhagen et al., 2011).

The purpose of employee wellness programmes is to address rising health costs, poor fitness and the overall health of employees. Wellness programmes consist of three components, namely: (i) identifying potential health risks; (ii) educating employees about health risks; and (iii) encouraging employees to change their behaviour (Booyesen & Els, 2014; Burton, 2010; Kaelo, 2013; Lewis, 2016; Sieberhagen et al., 2011).

2.10 EMPLOYEE WELLNESS IN SMMEs

One would think that the workplace practices described in section 2.7 to 2.9 only apply to larger organisations, but they regularly occur in SMMEs because small businesses are not regulated by legislative authorities such as unions or bargaining councils. The WHO healthy workplace model identifies factors that can have a significant influence on organisational wellness. For example, the psychosocial hazards identified in the WHO model often present itself in SMMEs, because organisations are small, employees fall victim to poor work organisation, diverse organisational cultures, command and control issues, unsympathetic management styles and inconsistent application and protection of fundamental worker rights.

It is clear from the information provided in section 2.7.1 that the WHO model can be effortlessly applied to SMMEs because it provides distinct guidelines for all types of

organisations, no matter the size, type of business industry or organisational culture. The model further provides practical guidelines to employers on how to improve and promote health and safety practices in the organisation without making a huge financial investment which is often a concern in small businesses and suggest various aspects of wellness that can contribute to make employees feel valued and cared for in the workplace by focusing on employees' physical work environment, psychosocial work environment and personal health resources.

In addition, the WHO model identifies leadership and employee engagement as key aspects of healthy workplaces which are particularly important in SMMEs because these features often contribute to strengthen the bond between management and employees.

2.11 SUMMARY

Research on employee wellness practices shows that an increase in employee health has a significant impact on the sustainability and success of an organisation, no matter the type or size of organisation (Bernstein & Trimm, 2016; Burton, 2010; Cunniff & Mostert, 2012; Lewis, 2016). Burton (2010) argues that the successful implementation of the WHO Healthy Workplace Framework and Model can prevent and significantly minimise occupational illnesses and substantially improve organisational efficiency especially in terms of social, physical and mental health. Thus, by implementing employee wellness practices in SMMEs, owners and managers are creating awareness and educating employees to take responsibility for their health, safety and personal wellness (Lewis, 2016; Sieberhagen et al., 2011).

SMMEs regard success as sustaining an independent lifestyle and an adequate income (Mayson & Barrett, 2017) and therefore often view employee wellness as a nice to have, and not as a strategic priority (Berry et al., 2010; Sieberhagen et al., 2011). SMMEs often have a survivalist approach and are therefore more likely to focus on elements that are perceived to have a direct influence on the sustainability and profitability of the business rather than placing emphasis on the wellness of their employees and building lasting employee relationships. However, by disregarding employee wellness, SMMEs are dismissing the WHO's caution that wellness is a moral imperative (Burton, 2010; Guest,

2017). Evelyn Kortum of the WHO states: "It is an unethical and short-sighted business practice to compromise the health of workers for the wealth of enterprises" (Kortum, Stravroula, & Thomas, 2010).

This study will endeavour to explore the wellness practices in SMMEs and attempt to establish the need for employee wellness practices in these organisations. In section 2.2.1 the various categories of SMMEs was explained according to the NSB Act for definition purposes. The researcher opted not to select a specific category of SMME as defined in the NSB Act because this process would require business owners to disclose their financial status to the researcher even though the SMMEs' financial positions were not deemed relevant to this particular research study. Thus, the researcher conducted the study on SMMEs who employs less than 50 employees irrespective of their annual turnover.

Chapter 3 will deal with the research methodology and research design employed in the study.

CHAPTER 3 : METHODOLOGY AND RESEARCH DESIGN

3.1 INTRODUCTION

The research questions represented the aspects of inquiry that the researcher sought to discover. The research was conducted to explore the experiences of managers and employees of SMMEs regarding employee wellness practices and to establish the need for these practices in these organisations. Accordingly, focus groups and individual interviews were conducted to address these objectives.

The researcher opted to use a qualitative approach to firstly inquire into employees' and managers' experiences of wellness practices in SMMEs and, secondly, to establish the meaning behind their experiences. Once the meaning was established, the researcher was able to explore ways to connect these meanings to the social world around the managers and employees (Miles, Huberman, & Saldana, 2014). The researcher made use of an interpretative research approach to explain the first-hand accounts of employees and managers and to interpret their experiences in an engaging and meaningful manner that readers can identify with (Terreblanche et al., 2011).

This chapter explains the research design and methodology applied to achieve the research objectives. The data collection methods, sampling strategy and data analysis methods will also be discussed.

3.2 THE RESEARCH MODEL

Qualitative research is an approach that enables well-grounded, rich descriptions and interpretations of human experiences that are embedded in and influenced by their social context (Miles et al., 2014).

3.2.1 THE QUALITATIVE STUDY

The researcher used a qualitative research approach to collect vast amounts of data from participants who had experienced employee wellness practices in SMMEs (Maree et al., 2016; Miles et al., 2014; Terreblanche et al., 2011). The researcher needed to interpret the experiences in context to ensure that the underlying issues and challenges that emerged during the research were evident in the data. The researcher interpreted and rationalised the experiences of managers and employees not only in the context of small businesses but also in the context of the type of industry in which the business operates to ensure that the data remain trustworthy. Three diverse industries were investigated, namely, the manufacturing, education and accounting industries. The qualitative approach allowed the researcher to build trusting relationships with participants, which was necessary to gain insight into the sometimes profound and unprincipled practices that took place within these industries (Miles et al., 2014).

3.2.1.1 *Features of qualitative research*

In qualitative research the use of theory is much more varied than in quantitative research. In this study, the researcher generated a theory as the final outcome and presented it in the findings such as is anticipated in grounded theory (Creswell, 2014). This is supported by Miles et al. (2014), who note that qualitative data emphasise people's lived experiences and are well suited to studies that aim to find the meaning behind people's expectations and sentiments.

3.2.1.2 *Assumptions of qualitative research*

The researcher initially formulated methodological assumptions (section 1.6.1) about human knowledge, the realities encountered during the research interviews and the extent to which the researcher's values influenced the research process (Saunders et al., 2016). Accordingly, the qualitative research was grounded in the following assumptions as suggested by Creswell (2016) when using an interpretivist perspective:

- Human life can only be understood from within.

- Social life is a distinctively human product.
- The human mind is the purposive source of origin of meaning.
- Human behaviour is affected by knowledge of the social world.
- The social world does not 'exist' independently of human knowledge.

3.2.1.3 Rationale for conducting qualitative research

Qualitative research was deemed most suitable for this study as it allowed the researcher to collect data from the participants during individual interviews and focus group discussions, thus developing a composite description of the experiences of wellbeing practices in SMMEs. The researcher's aim was to discover new ideas as well as uncover the participants' social psychological processes (Charmaz, 1983). Taking an analytical approach to the data enabled the researcher to discover and develop theory rather than verifying the data against a pre-existing theory, thus allowing for an inductive data analysis process. Therefore, the researcher worked with an emerging theoretical framework rather than in terms of an established method (Collis & Hussey, 2009; Maree et al., 2016; Mouton, 2001). The inductive approach allowed the researcher to analyse the data while collecting more data in order to achieve data saturation.

3.2.1.4 Advantages of qualitative research methods

Using qualitative research methods, data may be collected in written form, in spoken language, or in observations. A significant advantage of a qualitative research approach is that it allowed the researcher to analyse the data and thus identify significant themes and categories to support the emerging theories. The data analyses emphasised specific themes which focused on employee wellness practices that were embedded in the context. An additional advantage of using qualitative research methods is that the researcher developed her own research instrument and essentially acted as the main instrument in the study (Miles et al., 2014, p. 9), thus ensuring that only useful and relevant information was collected for the purpose of the study. A major advantage of the qualitative method used in this research was that during the interviews the researcher

was able to build a trusting relationship with the participants, which gave the researcher an opportunity to understand the experiences from the participants' point of view. In return, the participants were able to express their views and opinions in an unprejudiced setting.

3.2.1.5 Disadvantages of qualitative research methods

One disadvantage of using interviews is that participants risk being subjected to victimisation for disclosing controversial and sensitive information. During the focus group interviews, various participants shared disconcerting and sensitive information that could have had undesirable consequences if the organisation's identity became known. The researcher implemented tight security around the transcripts to protect the identity of all participants and the organisations.

In addition, qualitative research has the potential for researcher bias if the researcher does not establish trustworthiness throughout the study. The researcher attempted to limit researcher bias by using reflexive commentary and having regular consultation sessions with her supervisor. Additionally, to limit the risk of researcher bias the researcher applied reliability and validity measures such as trustworthiness and conscientiousness, which limited the contamination of data interpretations (Guba et al., 1994; Ortlipp, 2008; Trafford & Leshem, 2012).

Furthermore, the researcher recognises that the qualitative paradigm focuses on the researcher's interpretations and that reasoning is not independent from the researcher's background. In keeping with the postmodern approach, the researcher opened her values and assumptions up to the participants' and mentors' scrutiny by making known her experiences, values and assumptions and acknowledged that her interpretations flowed from personal, cultural and historical experiences (Creswell, 2014; Willis, Sullivan-Bolyai, Knafli, & Cohen, 2016).

3.3 RESEARCH STRATEGY

Strategies are used to achieve a goal. Saunders et al. (2011) define strategy as a plan of action to answer the research questions.

3.3.1 GROUNDED THEORY RESEARCH STRATEGY

Grounded theory develops or generates new theories that are grounded in data that may have been collected using a variety of methods. Grounded theory makes use of qualitative research designs and analyses data as they are collected.

Saunders et al. (2016) suggest using grounded theory to develop theoretical explanations for social interactions in business and management environments. The methodological dimension recognises that theory is grounded in the collection of data or the experiences of the participants, particularly when current theories about a phenomenon are either inadequate or non-existent, as in this case (Leedy & Ormrod, 2015).

The strength of grounded theory lies in its potential to capture content and complexity in a social context (Corbin & Strauss, 2008) through a process known as a comparative method (Williams, 2007), which involves the continuous process of collecting and analysing data. The researcher used a cycle of four components, as suggested by Corbin and Strauss (2008), to conduct fieldwork and to analyse the data:

- Theoretical sampling
- Data collection
- Data analysis
- Theoretical saturation.

Theoretical sampling forms the foundation of grounded theory (Terreblanche et al., 2011). This involves the process of collecting data specifically for building theory, and it refines, elaborates and exhausts conceptual categories (Charmaz, 1983). Guba and Lincoln

(1994) believe that research questions cannot be established prior to the study but rather that they develop and evolve as the study progresses.

Accordingly, a grounded theory approach was used to develop categories. The theory development was facilitated by the researcher's use of open-ended questions during interviews. In addition, the theoretical sampling approach informed the types of organisations and participants that should be interviewed to support data collection and to reach data saturation (Terreblanche et al., 2011).

Furthermore, the grounded theory approach enabled the researcher to collect and analyse data simultaneously (Terreblanche et al., 2011). On completion of the focus group interviews, the researcher started categorising and refining the data in Atlas.ti. The data refining process enabled the researcher to establish theoretical ideas, concepts and themes in order to develop and build on emerging theories that were derived from the data. This process assisted in forming an understanding of the collected data.

In addition, the researcher used this circular process of collecting and analysing data to identify when more samples were needed to support the analysis. For example, in one organisation the researcher interviewed two managers instead of one, as the researcher was not satisfied with the quality and quantity of data collected. This was because the manager presented opinions that were subjective owing to the position they held in the organisation.

The focus group discussions represented diverse industries which enabled the researcher to develop a composite description of the participants' experiences of employee wellness practices in various industries (Masadeh, 2012). The data collected from employees during focus group interviews were used to support the analysis and the emerging themes, while the individual interviews with managers were used to either confirm or contradict the employees' experiences of wellness.

3.4 PHASES OF THE RESEARCH PROCESS

According to Creswell (2014) and Saunders et al. (2016), the process of qualitative data analysis should include the following processes:

- Organise and prepare data for analysis.
- Become familiar with the data.
- Code the data.
- Identify the themes.
- Identify interrelating themes and relationships.
- Interpret the meaning of the themes.

The research was conducted in various phases as suggested by Creswell (2014) and Saunders et al. (2016) and explained below.

Table 3.1: Phases of the Research Study

PHASES	MAIN CONTENT
Conceptual phase	<ul style="list-style-type: none">• Research problem• Research objective• Literature review
Design and planning phase	<ul style="list-style-type: none">• Research approach• Data collection method• Collection method• Sampling design
Empirical phase	<ul style="list-style-type: none">• Focus group interviews with employees• Individual interviews with managers

Data analysis phase	<ul style="list-style-type: none"> • Thematic analysis of data from focus group interviews • Thematic analysis of data from individual interviews • Interpretation of data
Dissemination phase	<ul style="list-style-type: none"> • Presentation of data • Discussion of data • Recommendations made

3.4.1 CONCEPTUAL PHASE

The conceptual phase involved identifying a suitable research topic and finding research objectives for the study. A literature review was conducted that focused on thematic reviews which were structured around themes in the literature and focused on different schools of thought (Terreblanche et al., 2011).

3.4.1.1 *Background to the problem*

The background to the problem was discussed in chapter 1, section 1.2.

3.4.1.2 *Problem statement*

The problem statement was discussed in chapter 1, section 1.4.

3.4.1.3 *The research objectives*

The research objectives were discussed in chapter 1, section 1.5.

3.4.1.4 *Literature reviews*

The researcher conducted a literature review to study definitions and concepts related to the research in order to establish trustworthiness and integrity in terms of the

interpretation of the concepts. The literature review was also used to generate a starting point for the interviews and focus group discussions. The literature review was discussed in Chapter 2.

On completion of the data processing phase, the literature was again reviewed to ensure that the findings and conclusions presented an accurate reflection of the current literature.

3.4.2 DESIGN AND PLANNING PHASE

In the design and planning phase the researcher applied a qualitative research approach. Focus group interviews and individual interviews were selected as suitable data collection methods. A data gathering instrument was designed for conducting the face-to-face interviews at the selected organisations. This instrument comprised semi-structured and open-ended questions to gain insight into the experiences of employees and managers in SMMEs. In keeping with the grounded theory approach, the data sampling design was selected to develop a theory (Charmaz, 1983) rather than to test (deductive approach) theory.

The design phase involved thorough planning to ensure that data gathering remained within the agreed boundaries and established protocols for the gathering and recording of information (Creswell, 2014, p. 189). The boundaries were defined in relation to aspects of the study that directly connect the research questions and the sample design. Both the participants and the gatekeepers were briefed on the scope of the research to ensure that the participants did not move beyond the boundaries of the study which could jeopardise the integrity of the research. The researcher's boundaries were confined to the investigation of the current wellness experiences of employees and managers in SMMEs.

3.4.2.1 Research design

The research design refers to the overall approach to investigating the research problem. In this study, the researcher used a grounded theory approach to develop the research design. Creswell (2014) defines grounded theory as is a design of enquiry, taken from sociology, in which the researcher originates general, abstract theory of process, action, or interaction grounded in the views of the participants. The researcher thus applied grounded theory by using multiple stages of data collection and refining the data by identifying interrelationships among categories and themes to discover and develop theory.

3.4.2.1.1 Descriptive design features

To provide an accurate description of the participants' experiences and to ensure external validity, which is a key aspect in describing the social world, descriptive design features were used in the research (Terreblanche et al., 2011). These design features ensured that observations in the SMMEs focused on providing accurate and consistent accounts of participants' experiences (Terreblanche et al., 2011). The researcher subsequently applied a holistic approach to interpreting and describing the data which had been collected within a complex system with various interdependencies (Terreblanche et al., 2011).

The study involved discovering and interpreting the experiences of employees and managers in SMMEs using focus groups and individual interviews. The researcher used an inductive approach to develop categories and themes by organising the data into refined units of information, thereby creating a descriptive account of the employees' and managers' experiences of employee wellness from their own point of view (Creswell, 2014). The researcher focused on establishing the meaning that participants hold about employee wellness and not the meaning that the researcher brings to the research (Charmaz, 1983). For example, the participants wanted to share their ideas and opinions about what the organisations could do to make employees happy rather than discussing the types of employee wellness activities or practices that their organisations have in

place. The researcher allowed these discussions to take place because the participants interpreted wellness as the factors that contribute to happiness.

3.4.2.1.2 Exploratory design features

An exploratory design was used to discover new ideas and to make preliminary investigations into this relatively unknown territory of research. The exploratory approach allowed the researcher to employ inductive reasoning to discover new insights through interviews with managers and employees. In this regard, the researcher explored participants' experiences using open-ended questions rather than testing theoretically derived hypotheses. Although the literature review illuminated the factors that contribute to employee wellness and how these factors impact on organisations, most previous studies in this field have been conducted in multinationals and corporate entities and did not consider the small business environment.

3.4.2.1.3 Interpretive data analysis design features

The researcher attempted to interpret the unique experiences and find meanings behind the participants' opinions and experiences, thus exploring not what the reality is but rather what was preconceived by the participants to be the reality. Through this study, the researcher aimed to gain insight into the employee wellness challenges experienced by managers and employee in SMMEs. The information that emerged from the data was subsequently categorised and searched for trends, the patterns or recurrences were interpreted and reasoned explanations for the participants' experiences were formed, and thus a tentative theory developed (Maree et al., 2016; Terreblanche et al., 2011; Williams, 2007).

3.4.2.1.4 The context of the study

Poor governance, political unrest and economic instability severely affect the small business sector in South Africa, which is vulnerable to dramatic changes in the economy. Two cabinet reshuffles within a year followed by subsequent downgrades by key credit rating agencies caused a collapse in business optimism (Cilliers & Aucoin, 2016; Kilian,

2017; Leppink, 2015). While politics and the economy severely affect the stability of the country, they also have a significant impact on the profitability and sustainability of small businesses.

Furthermore, in view of the fact that the researcher interpreted participants' opinions and experiences in the context of the industry in which the business operates, she had to take cognisance of certain operating procedures that are considered standard for a particular industry. For example, accountants do not have specific lunch hours or much time for social interaction with colleagues, as they frequently conduct their work at their clients' premises.

Miles et al. (2014) point out when researchers focus solely on isolated instances and individual cases, including interactions and experiences, without considering the contexts, they run the risk of misinterpreting the meaning of experiences, as the context directs the way in which meaning is interpreted. For this study, it was important for the researcher to recognise the contexts in which the SMMEs operate, including understanding the economic constraints of the business, the legislative environment and the challenges experienced in each business sector.

3.4.2.2 Data gathering process

The researcher gathered the data according to the agreed plan, investigating the experiences that managers and employees had of employee wellness and attempting to establish whether there is a need for employee wellness practices in SMMEs.

The researcher did not select a particular category of SMME but sought to study three diverse SMMEs that employ fewer than 50 employees. To this end, two organisations that matched the research criteria were recruited through social media. The third organisation, an educational institution, was selected based on its availability and proximity to the researcher.

One of the organisations identified, an auditing company, selected six random participants from a list of employees working in the educational institution, while the

owners of the manufacturing and accounting organisations identified their research participants according to availability and willingness to participate in the study. The researcher subsequently conducted individual interviews with four managers from each organisation and held focus group interviews with the employees of the selected organisations at their workplaces. During the individual interviews with managers only the researcher and the manager was present. In the three focus group interviews only the research participants were present with the researcher in the allocated meeting room. The meetings were not interrupted by anyone.

3.4.2.2.1 The researcher as an instrument

Much of the data in the social sciences come from self-report inventories (Terreblanche et al., 2011). The researcher acted as the primary research tool and attempted to focus on the subjective experiences of individuals to demonstrate how such experiences are derived and how these experiences feed into larger discourses. Main and probing questions were asked to investigate the participants' experiences and to establish whether there is a need for employee wellness practices in SMMEs.

3.4.2.2.2 Schedule of guiding questions

Saunders et al. (2016) define a critical incident as an activity where the consequences are so severe that the participant has a definite idea about the effect. During the interviews, the researcher made use of the critical incident technique to question participants about critical incidents that relates to employee wellness practices. For example, participants were asked to describe what they believed were the best and the least liked aspects of their organisation's wellness activities or practices. In response, the participants were able to provide accurate accounts of their daily experiences of wellness in their organisations.

3.4.2.2.3 Format of questions

The researcher posed semi-structured, open-ended questions to allow participants to provide an account of situations in their workplace that the participants considered to be

important. The open-ended nature of the questions allowed participants to describe how they experienced employee wellness by recalling and discussing particular events or situations in the workplace, while the fact that they were semi-structured enabled participants to digress slightly from the main idea of the questions and to add ideas and opinions that mattered to them. By listening to these discussions, the researcher was able to formulate probing follow-up questions to determine the significance of the responses and how these responses related to the need for employee wellness practices in their organisation.

The format of the questions created openness and trust between the participants and the researcher, thus allowing meaningful expressions of opinions (Terreblanche et al., 2011). The questions were designed to encourage participation and to provide meaningful answers (Saunders et al., 2016). An example of an open-ended question that was posed to participants to give them an opportunity to express their ideas and opinions included: *"In your view, do you believe your organisation is doing enough to support your wellness?"*

The researcher also used closed-ended questions to clarify the answers. A close-ended question has a single response such as "yes" or "no". Accordingly, closed-ended questions were used to obtain an unambiguous response to a question and to ensure that participants were aware of how strongly they agreed or disagreed with a particular statement. An example of a closed-ended question that was used during a focus group interview was: *"Does it concern you?"* This question was raised after a participant provided a response to a previous question that needed clarification regarding the significance and severity of the response and the points made.

The researcher remained mindful when using a particular type of question to elicit responses. For example, the interviews started off with informal introductory questions posed to all the participants to establish a rapport with the researcher to allow ideas to be shared easily and to create a sense of togetherness. Follow-up questions were asked to elaborate further on specific issues. For example: *"You mentioned the way the organisation treats their employees; can you explain to me what you mean by 'treat'?"* Probing and interpreting questions were used to confirm responses and to explore the

significance of responses further. For example: *"Can you give me an example when you didn't feel supported?"* Direct questions were asked when the researcher needed more information to interpret a response in context. For example, *"How long have you been in this position?"*

Indirect questions were posed to obtain more idiosyncratic or personal responses and views regarding a specific theme. For example: *"Do you believe the situation is unique to your organisation?"*

3.4.2.3 Steps in the data gathering process

Grounded theory was applied to the data gathering process by developing a series of cumulative coding cycles and reflecting on journal entries to develop major categories for theory generation. Tesch's eight-step coding process was used in the data gathering process (Creswell, 2014):

- Step 1: The researcher established the main ideas from the transcripts of the interviews conducted with the managers and employees of SMMEs.
- Step 2: The researcher started with the first focus group interviewed and developed the main ideas collected from employees.
- Step 3: The researcher developed a list of categories, which were subsequently refined into "major, unique and leftovers".
- Step 4: The researcher then moved to the next focus group, coded more data and established new themes as they developed.
- Step 5: The researcher found the most descriptive words for topics and developed themes around the most frequently used topics. The themes that related to each other were then grouped into new categories.
- Step 6: The researcher abbreviated and alphabetised the codes.
- Step 7: The researcher assembled the data and performed a preliminary analysis.

- Step 8: The researcher re-coded and refined the grouped data into more manageable and significant themes.
- Step 9: During the coding process, the researcher continuously made notes as the themes developed.
- Step 10: Due to the sensitive nature of the data, ethical considerations were closely followed.

3.4.2.4 Focus group and individual interview questions

The following questions were posed to employees during the focus group interviews:

- What is your understanding of employee wellness?
- Do you believe your organisation is doing enough to support your wellness?
- What do you like best about your organisation's wellness activities/practices?
- What do you like least about your organisation's wellness activities/practices?
- What do you think is the limiting factor to the successful implementation of employee wellness practices in your organisation?

The following questions were posed to managers during the individual interviews:

- What is your understanding of employee wellness?
- Do you believe having employee wellness practices benefits the organisation in any way?
- How is your organisation's need for employee wellness practices determined?
- What suggestions can you make to improve your organisation's wellness practices?

- Which employee wellness practices, do you believe, should be mandatory for every SMME if financial/time constraints were not a concern?

The researcher posed the following probing questions to employees to establish the need for wellness practices:

- Can you give an example of when you didn't feel supported?
- Can you name a wellness activity/practice that is so important for you that you are willing to consider leaving your organisation to join a company who has this activity/practice?

The researcher asked the following probing questions to gain a better understanding of the need for wellness practices experienced by managers in SMMEs:

- Can you name, in your opinion, the most significant wellness practices in your organisation?
- Do you think your employees would leave your organisation if their wellness needs were not met?

3.4.2.5 Sample and sampling design

The researcher adopted a flexible research design and a cyclical approach to sampling, data collection, analysis and interpretation, as suggested by Corbin and Strauss (2008). The research was characterised by an emerging research design which involved a flexible collection process that relied on linguistic data (Leedy & Ormrod, 2015; Maree et al., 2016; Terreblanche et al., 2011).

Saunders et al. (2016) identify two types of sampling technique: probability sampling and non-probability sampling. In probability sampling, the researcher is aware of the likelihood of a case being selected from the target population, and each case has an equal chance

of being selected (Saunders et al., 2016). Studying a random sample provides the best opportunity to generalise the results to the population. However, it was not appropriate to study a random sample for this study as the researcher needed to understand a complex issue relating to human experiences (Marshall, 1996) and the samples needed to match the defined research criteria.

Because the selection of elements was not determined by the statistical principle of randomness, the researcher opted for non-probability sampling (Terreblanche et al., 2011) and therefore employed two sampling techniques, namely, theoretical and purposive sampling (Marshall, 1996).

3.4.2.5.1 Theoretical sampling

Theoretical sampling is a key characteristic of grounded theory and supports theory development (Corbin & Strauss, 2008). By using a qualitative sampling approach, the researcher was able to adjust the sample in accordance with the theory development (Marshall, 1996; Saunders et al., 2016; Terreblanche et al., 2011) and to identify samples that can contribute meaningfully to the research. Additionally, this approach enabled the researcher to collect additional data to support the theory development process and to allow the context to be investigated further (Corbin & Strauss, 2008), as explained earlier in this chapter.

Morse (1994, cited in Creswell et al., 2016) states that saturation is key to excellent qualitative work. Theoretical saturation occurs when all the main variations of the phenomenon have been identified. Accordingly, the researcher continued through the cycle of data collection and analysis until no new insights or new categories emerged.

3.4.2.5.2 Purposive sampling

Purposive sampling was used to identify elements of the population who were willing to participate and who matched the participation criteria. To ensure data saturation, three different focus groups were established. According to Terreblanche et al. (2011) when researching a rare phenomenon such as employee wellness practices in SMMEs, the

challenge is to find suitable cases. Therefore, it was reasonable to select and accept only suitable cases to participate in the study. The researcher made use of social media to invite organisations to participate and selected two suitable organisations from the responses obtained.

Marshall (1996) argues that not all people are equally effective at observing and interpreting their own and other people's experiences. Furthermore, some participants can be regarded as "richer" in their experiences and can thus present more meaningful insights into a particular phenomenon. Marshall (1996) further suggests using diverse groups to contextualise emerging issues in diverse settings. Thus, the researcher attempted to select participants who could add value to the research from a diversity point of view.

3.4.2.5.3 The sample design of participants

A sample is the unit or elements that are included in the study (Terreblanche et al., 2011). The aim of qualitative research is not to make generalisations beyond the sample or to generate statistical findings (Corbin & Strauss, 2008).

The researcher determined beforehand the number of participants that had to be interviewed per organisation. For the purpose of the study, it was deemed sufficient to investigate three diverse SMMEs. These SMMEs comprised one educational institution, one manufacturing firm and one accounting firm, each of which employed fewer than 50 employees. The employees from an organisation formed a focus group for that specific organisation. The three focus groups, therefore, comprised of employees from the SMMEs and one individual interview with a manager of the SMME. The three organisations employed a diverse workforce in terms of age, ethnicity, gender and language.

The sample size was determined by the amount of data that was needed to develop significant themes and categories to meet the objectives of the research. The researcher continued collecting additional data until data saturation was reached (Charmaz, 1983) and until the research questions had been answered. For example, to reach data

saturation the researcher interviewed not just one manager as planned in organisation A but two managers.

SMMEs were selected based on their match of the research criteria stipulated in section 3.4.2.5.4. Thus, no particular type of SMME was selected from the NSB Act's identified categories but rather any SMME that matched the identified criteria. Once suitable participants had been selected, a snowballing technique was used to select additional participants, as per the example above, to enable data saturation. The selected sampling approach did not facilitate generalisations beyond the sample, but this did not pose any potential threat to the study as this was not the central purpose of the research.

3.4.2.5.4 Criteria for selection of participants

The following selection criteria were stipulated for the research participants:

- Must be either a manager or employee of an SMME that employs fewer than 50 employees.
- Must be between 18 and 65 years old.
- Must be permanently employed.
- The SMME must be located in the Gauteng region.
- The employee or manager must be willing to be interviewed individually and/or in a focus group.
- Cleaners, ground staff and security guards were excluded from the study.

Terreblanche et al. (2011) identify the following ideal participant characteristics when describing personal experiences of a phenomenon:

- personal experience of what is being researched
- ability to describe the experience in detail

- openness and defensiveness, and
- interest in participating.

Prior to selecting candidates for participation, the researcher also attempted to establish a match between the characteristics identified above and those of the research participants by conducting telephone discussions with prospective candidates to establish their suitability.

3.4.2.6 Population

The population is the larger group from which the sampling elements are drawn (Terreblanche et al., 2011). Corbin and Strauss (2008) state that an appropriate sample size is one that answers the research question. The researcher was satisfied that the three organisations represented an appropriate sample and thus would render the research trustworthy.

3.4.2.7 Biographical characteristics of participants

The researcher gathered data from three focus group interviews and one-on-one interviews with four managers from three different organisations. The sample was determined when data saturation was reached.

Table 3.2 provides biographical information about the employees and managers who participated in the focus groups and the individual interviews.

Table 3.2: Biographical Characteristics of the Research Participants

FOCUS GROUP OF COMPANY A - INTERVIEW HELD 30 MAY 2018						
PARTICIPANT	GENDER	ETHNICITY	AGE	DEPENDANTS	SERVICE YEARS	POSITION
1	FEMALE	AFRICAN	26	YES	2	ASSESSOR
2	FEMALE	WHITE	29	NO	5	SENIOR ACCOUNTS CLERK
3	FEMALE	AFRICAN	44	YES	14	STUDENT LIAISON OFFICER
4	FEMALE	AFRICAN	34	NO	16	STUDENT LIAISON OFFICER
5	FEMALE	WHITE	38	YES	9	PROGRAMME DIRECTOR
6	MALE	WHITE	37	YES	12	IT
FOCUS GROUP OF COMPANY B - INTERVIEW HELD 5 JUNE 2018						
7	MALE	WHITE	25	NO	4	AUDIT CLERK
8	MALE	AFRICAN	24	YES	2	ARTICLE CLERK
9	MALE	AFRICAN	35	YES	3	AUDIT CLERK
10	FEMALE	INDIAN	25	NO	3	AUDIT CLERK
11	FEMALE	AFRICAN	25	YES	2	AUDIT CLERK
12	FEMALE	AFRICAN	27	NO	5	AUDIT CLERK
FOCUS GROUP OF COMPANY C - INTERVIEW HELD 30 MAY 2018						
13	MALE	WHITE	26	YES	1	SALES CONSULTANT
14	FEMALE	WHITE	25	NO	< 1	RECEPTIONIST
15	MALE	WHITE	31	YES	< 1	PETROL & DIESEL MECHANIC
16	MALE	WHITE	34	NO	3	SALES CONSULTANT
17	FEMALE	WHITE	23	NO	< 1	OFFICE ASSISTANT
INDIVIDUAL INTERVIEWS						
MANAGER 1 COMPANY A 30 MAY '18	FEMALE	WHITE	46	YES	11	FINANCIAL DIRECTOR
MANAGER 2 COMPANY A 30 MAY '18	MALE	WHITE	39	NO	18	VICE-PRINCIPAL
MANAGER 3 COMPANY B 5 JUNE '18	MALE	INDIAN	29	NO	11	AUDITOR
MANAGER 4 COMPANY C 6 JUNE '18	MALE	WHITE	47	YES	10	MANAGING DIRECTOR

3.4.3 EMPIRICAL PHASE

3.4.3.1 Ordering and preparing data for analysis

During the empirical phase, the researcher conducted four individual interviews with managers from three different SMMEs and three focus group discussion with employees from these SMMEs. These interviews took place between 30 May 2018 and 7 June 2018.

During the focus group interviews, each participant received a number which they had to state before responding to a question. This approach made accurate transcribing possible.

Table 3.3 below is an example of how an interview was transcribed and coded in Atlas.ti:

Table 3.3: Example of Transcribed and Coded Interview using Atlas.ti

Question 1: What is employee wellness?

D1:3 Participant 9: What I think employees should know about their rights and stuff like that (587:678).

D1:41 Participant 10: I think that employee wellness is like everyone said, how you treat your employees, a safe working environment, a healthy working environment, good training (888:1061).

D2:105 Participant 17: How they experience their health within the first company. To say like, the hours you work and the health benefits and stress levels and anything like that, that has to do with the wellness (50:257).

D1:301 Participant 12: What I think employee wellness is, is how you look after your employees. So, the way you treat them, training. Do they have a safe environment? That is what I would think employee wellness should be more or less (348:579).

D1:327 Participant 7: I think it's how you treat your employees, how basically the same, what their rights are. How you treat your staff and make sure they are happy where they are what you know (686:880)

D1:336 Participant 10: I would say a positive working environment where you don't feel the tension, there's no animosity, everyone works together very well, I think that will contribute to a happy working environment (1849:2056).

D1:354 Participant 8: I think it's all about taking care of your employees (1069:1137).

D1:365 Participant 11: Can I add more on that. I was going to say that makes me happy as well in the workspace is your relationships with your seniors and your managers as well, and other things can be like if there is tea in the morning such things contribute to staff wellness (4157:5170).

D2:230 Participant 16: I think the environment that we work in, we try to stick to health and safety, the guys outside they need to be suited up and geared and stuff not to, you know to not injure themselves. In the workplace, I think the hygiene is up to standards for us here (1289:1814).

D3:117 Participant 1: When employees are happy. They don't feel depressed to come to work every single morning they wake up with a positive attitude to come to work. It plays a huge role for the employees to ensure that everything from the content of their work description up until motivation (117:392).

D3:130 Participant 2: Being happy to excel in your work. By doing what you love so that you can grow as a person. It includes every aspect of your work as well as your emotional side (400:563).

D3:138 Participant 3: Employee wellness benefits both employee and employers deal with illnesses and balanced lifestyles (572:659).

D3:147 Participant 4: The wellbeing of the staff. The organisation needs to promote a healthy lifestyle and making sure everything from a safety aspect is guides. They need to know what and how to do when (667:969).

D3:154 Participant 5: Anything the organisation does to promote the health and well-being of its employees such as creating awareness and promoting health and well-being. Any policies and any organisational activities that can promote health and wellbeing (977:1210).

D3:167 Participant 6: It's about me as a person being mentally, spiritually, physically well. Thus, anything that the organisation does to improve that is wellbeing for me (1220:1370).

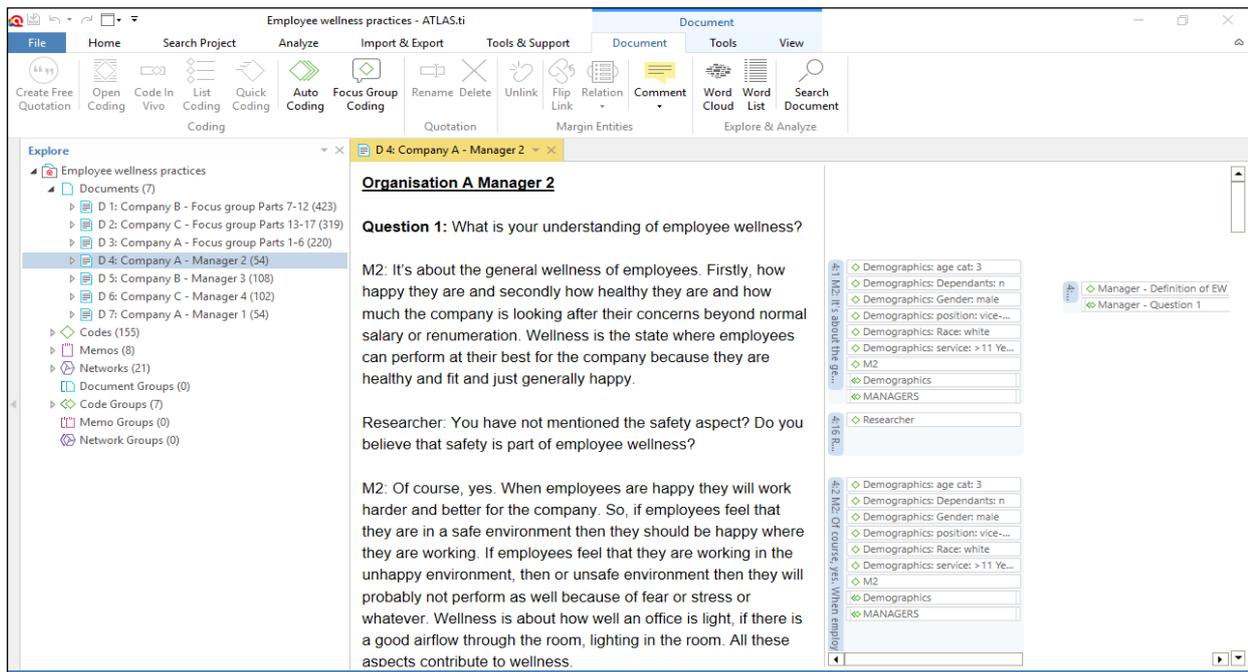
The researcher used an independent transcriber to type the recorded interviews. All the transcripts were then uploaded as a new project in Atlas.ti. The computer program then automatically numbered each transcribed document starting with D1 and ending with D7 and numbered each line and character in the documents.

Quotations in Atlas.ti were numbered according to the document number and where the quotes occur in that document, giving the quotation a unique identification (ID). Thus, each quotation can be found by referring to the document number, then the line number and the character numbers in the document.

According to Saunders et al. (2016) and Creswell (2014), the first step in data analysis involves obtaining a broad understanding of the data in the transcripts. The researcher started the data analysis process by cleaning up and then reading through the transcripts to get a feel for the data.

Figure 3.1 is a graphical representation of the document display manager in Atlas.ti. The figure displays the transcript of the document labelled D4 with the associated codes assigned to the themes in the document.

Figure 3.1: Graphical Representation of the Document Manager in Atlas.ti and Coding Display

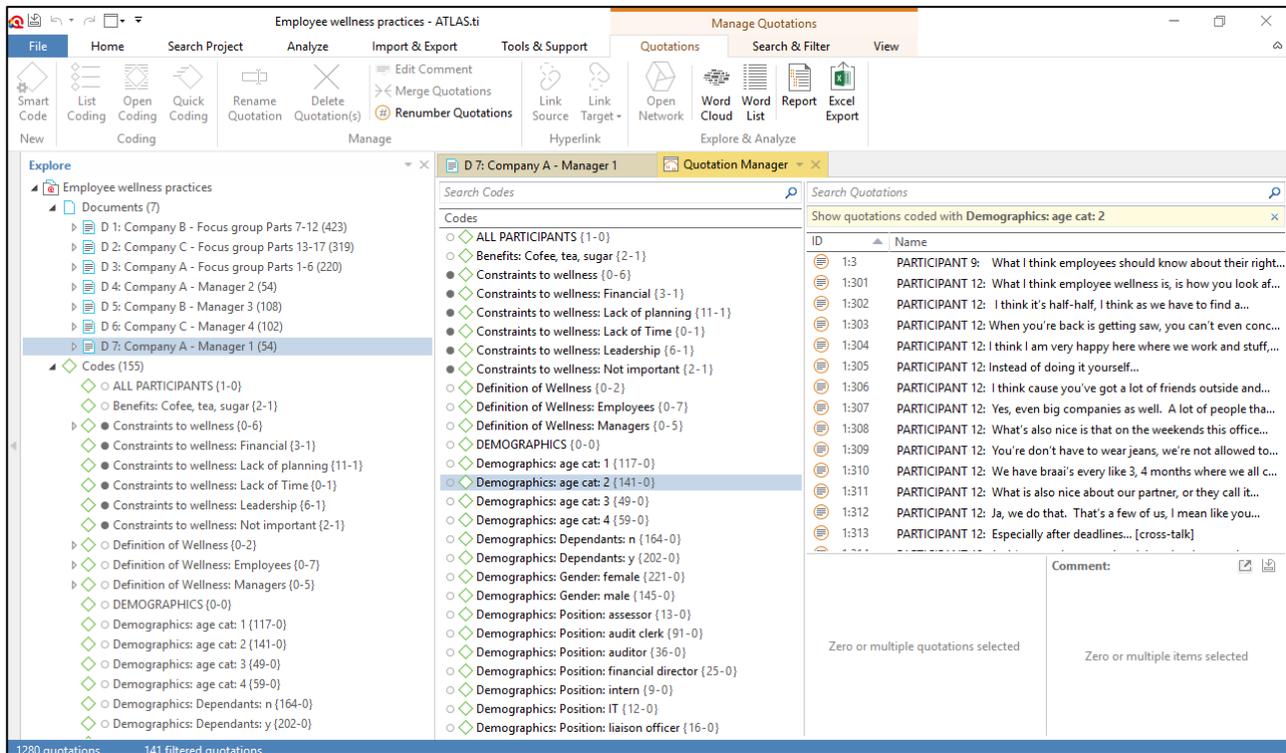


Source: Own compilation

Figure 3.2 is a graphical representation of document D7 showing the various quotes of participants who fall within 'age category 2'. The illustration also shows the various code numbers assigned to each quote of the participants, for example, 1:301 and 1:302.

By applying this selection tool, the researcher was able to identify the participants who had contributed to a particular question as well as their biographical information. This process allowed the researcher to make trustworthy interpretations of the data.

Figure 3.2: Graphical Representation of the Quotation Manager in Atlas.ti



Source: Own compilation

3.4.3.2 Focus group interviews and field notes phase

As previously discussed, various semi-structured focus group interviews and individual interviews were conducted to collect sufficient data from the SMMEs to establish an understanding of the experiences of the participants (Maree et al., 2016). The focus group discussions provided rich contextual background information to gain insight into the needs and challenges regarding employee wellness practices in SMMEs. In the semi-structured interviews the researcher followed an ‘interview schedule’ with a list of key topics, which was compiled prior to the focus group interviews (Masadeh, 2012; Terreblanche et al., 2011).

The purpose of the interviews held with employees and managers was to identify common ground. This included identifying issues that were unique or similar and that supported or contradicted the data collected during other focus group discussions. Thus, the researcher endeavoured to establish whether there were significant differences or similarities in the SMMEs' approaches to employee wellness practice.

The researcher was curious to discover what SMMEs are doing to address the challenges of employee wellness and whether there were any similarities in the approaches to addressing employee wellness challenges. Subsequently, the researcher discarded themes and issues that were considered irrelevant or outside the boundaries of the study, while meaningful themes were further investigated to determine the significance and/or relevance to the research.

The interview schedule included the following items listed below:

- *Orientation items.* These questions orientated the participants to the core issues relating to the research and tested the participant's understanding of the topic. For example, participants were asked to explain employee wellness from their perspective.
- *Content-related questions.* These questions attempted to elicit responses about the nature of the research topic.
- *Behavioural questions.* These questions attempted to measure the participants' attitudes, opinions and beliefs regarding the topic. For example, participants were asked if they believed their organisations supported their wellness and whether the situation could be improved.
- *Social demographics.* These questions aimed at developing a profile of the participants (Corbin & Strauss, 2008). These social demographics were used to interpret the data in context.

3.4.3.2.1 *Qualitative research interview*

i. Definition of interview

Qualitative interviews involve face-to-face dialogues with participants, telephone interviews, or focus group interviews. Interviews can consist of a few unstructured and generally open-ended questions to elicit views and opinions from participants (Creswell, 2014). The term 'focus group interview' refers to group interviews where the topic is clearly defined, and the focus is on interactive discussions between participants with the intention of recording the discussions for transcribing after the interviews (Saunders et al., 2016, p. 417).

Terreblanche et al. (2011, p. 304) argue that focus groups interviews are most effective for reflecting a heterogeneous cross-section of significances and positions. In this study, the focus group interviews were intended to provide an account of the experiences of a selected population and to establish the meaning behind the participants' viewpoints. The researcher deemed interviews to be the most suitable method as the participants were not known to the researcher and presented a sample of the population that could provide a true account of their experiences in terms of the research topic. Participants were selected based on the research criteria and their having certain characteristics in common that were relevant to the research study.

ii. Types of interviews

Apart from the degree to which interviews are structured, semi-structured or unstructured, interviews also vary in terms of the degree to which interviews are standardised or non-standardised (Saunders et al., 2016). The purpose of the interview determines whether it should be highly formalised, structured and conducted with standardised questions or more informal, unstructured with no predetermined questions. Structured interviews use questionnaires based on predetermined questions to collect quantifiable data. Semi-structured interviews provide a list of themes and possibly some key questions to be covered, including an interview schedule which includes some comments to open the

discussion. Unstructured interviews are informal and are used to explore general interests in depth (Saunders et al., 2016).

The researcher opted for a semi-structured, respondent interview approach to determine how the participants experienced the phenomenon.

iii. Advantages of interviews as a data collection method

Compared to other options, interviews are regarded as a low-cost research tool (Maree et al., 2016) to gain in-depth insights into a research topic. In an exploratory study, semi-structured in-depth interviews can assist the researcher to establish what is happening and how the phenomenon fits in context. The semi-structured approach was deemed most suitable as sensitive matters were raised in the focus group interviews. Thus, the data collected is trustworthy and can be clarified and expanded where needed.

During focus group interviews the researcher strove to develop a trusting relationship with the participants. This assisted in generating quality responses to issues which were often of a sensitive nature (Saunders et al., 2016). The interviews provided an unrestricted and accepting environment, allowing the researcher to focus on specific themes that encouraged participants to share their feeling and ideas.

For triangulation purposes, both employees and managers were interviewed to gather debating, confirming and disconfirming views about wellness practices in the organisations (Masadeh, 2012). This allowed the researcher to develop relevant and significant themes.

iv. Disadvantages of the interview as a data collection method

The lack of standardisation in semi-structured and in-depth interviews can lead to concerns about reliability or dependability (Saunders et al., 2016, p. 297). Reliability can be influenced by aspects such as interviewer bias or response bias. Response bias appears when participants distrust the researcher's interpretation and then become unwilling to provide sensitive information. Saunders et al. (2016) refer to the tendency of

participants to present positive feedback only and do not endorse nor disagree with the research questions as response bias. The researcher, therefore, tested the validity of emerging views by encouraging the involvement of all participants in the group and by closely observing nonverbal communication.

v. Role of the interviewer during the interview

The researcher's role in the research was to develop a holistic account of the experiences of the interviewees, which included reporting the multiple perspectives in the context of the phenomenon (Creswell, 2014, p. 186). Furthermore, the role involved encouraging participants to express their opinions freely without fear of intimidation or loss of privileges. Owing to the sensitive nature of the information gathered during certain interviews, the researcher and participants agreed not to be in contact with each other after the interviews in order to protect their identity and avoid harm should the transcript surface. Thus, the decision was taken not to disseminate the interview transcripts for clarification but to rather clarify interpretations and make comments right after the interviews (Hagens, Dobrow, & Roger, 2009). The researcher clarified each unclear response to make sure there were no misinterpretations. The participants agreed on completion of the interviews that they were satisfied with the meanings. The researcher aimed to convey the meanings without obscuring the interpretations with personal views. This included not divulging sensitive information that did not contribute to the study nor sharing information that was outside the boundaries of the study.

vi. Interview models

There are two different types of interview models, namely control and freedom. Powney and Watts (1987, cited in Saunders et al., 2016, p. 390) classify these models as respondent and informant interviews. In informant interviews, participants are encouraged to discuss events freely in relation to the topic region. In respondent interviews, the interviewer determines the direction of the discussion while allowing the participants' opinions to emerge from the questions that are asked. For this study, the researcher selected respondent interviews, although during one particular focus group interview participants were given an opportunity discuss events freely in relation to the

topic because they were hesitant to respond to the researcher's questions and did not feel comfortable sharing ideas. The participants started sharing ideas more freely once they noticed that most of the focus group participants had the same experiences and concerns.

vii. Stages in an interview

The focus group interviews consisted of four stages: procedure, interaction, content and recording. During the procedure stage, the structure and boundaries of the interviews were discussed as well as the norms and expectations of the discussions.

The interviewer explained the right to privacy, the right not to respond to questions and the right to terminate participation at any stage. The participants then signed consent forms (Annexure A and B).

During the interaction phase, the researcher encouraged lively participation by embracing the personal and interpersonal dynamics of the group, using questioning, listening, observing and responding skills to engage with the participants in meaningful discussions. By listening attentively, the interviewer was able to sense sensitive and complex themes that required compassion and understanding. Sufficient time was spent with the participants to establish trust relationships which empowered them to discuss their experiences freely.

During the content phase, the researcher listened for commonalities and differences of opinions. During the debriefing phase, the participants were requested to reflect on their experiences in order to make sense of what was happening and what could be done about it.

In the last phase, the audiotaped interviews were transcribed by an independent transcriber and reproduced in a word processor document (Saunders et al., 2016, p. 572). The researcher checked the transcriptions for accuracy.

viii. Interviewing skills and techniques

Terreblanche et al. (2011) suggest conducting interviews in an environment that is conducive to the sharing of ideas and is without any disturbances. The interviews were scheduled for afternoon sessions at the organisations' premises. The researcher opened each session by introducing herself and providing an overview of the purpose of the research. A trust relationship was established with the participants by explaining the researcher's position as an independent observer of their experiences in the workplace. The participants were informed of the need to record the sessions and then were requested to sign the informed consent forms. Participants agreed to stay within the allocated time frames, and within the agreed boundaries of the research objectives.

During the interviews, the researcher took on the role of listener, having formulated research questions to explore the research topic of wellness. Although she avoided invasive questions, the participants often responded with sensitive and controversial information as they viewed the researcher as a confidant or 'someone' who could do something about their situation. The researcher made 'process notes' to record the interview procedures. The interview started with open-ended questions that required participants to describe and define employee wellness. Subsequently, probing questions were used to explore the responses these questions further and to investigate significant themes that related to the research topic. After the interview, the researcher encouraged participants to reflect on their experiences and to clarify certain opinions or beliefs.

ix. Interpretation of non-verbal behaviour

Adler and Adler (1994, cited in Terreblanche et al., 2011) point out the need for non-intrusiveness in observation. While interviews are suitable for obtaining direct responses to people's opinions and experiences it is often the interviewer's ability to observe the participants during the interviews that allows accurate interpretations of responses. To make accurate interpretations of data, the researcher made 'after the act' notes in order to be able to recollect the interviews and recall the events. She used an unstructured approach for observing the participants, noting down what she heard, how they reacted and when they responded to certain questions.

x. Listening

The purpose of semi-structured interviews is to understand the participants' viewpoints and to attach meaning to their responses. By listening attentively, the researcher was able to sense which aspects of wellness the participants felt uneasy about discussing and which they felt very strongly about. Using effective listening skills, the researcher was able to distinguish between new and significant themes and often sensitive and distressing themes.

xi. Creativity

The researcher showed empathy and concern for the participants when they spoke of matters that significantly affected them. The researcher used different dimensions of interview skills to elicit meaningful responses from the participants, reminding participants throughout the interviews that no participant's identity would be made known, thus ensuring that participants could share information without fear of victimisation.

xii. Quality criteria for an interview

The researcher ensured the quality of interview responses by keeping the group within the boundaries of the topic and by encouraging all participants in the group to give inputs without leading the group towards a certain way of thinking (Saunders et al., 2016). The researcher avoided questions with difficult theoretical concepts or jargon to ensure that participants understood the questions and did not feel intimidated by terminology.

3.4.3.2.2 Tape recordings and field notes

The research participants agreed to the interviews being audio recorded and transcribed. A small and unobtrusive audio recorder, equipped with time and date functionalities, was placed in the middle of the table. This made it possible to reliably recollect the content and processes of each session (Terreblanche et al., 2011).

Saunders et al. (2016) identify various stages in which to make field notes, namely, the primary, secondary, experiential and contextual stages. During the primary stage, the researcher recorded observations and made field notes about how things happened and in what context things were said. During the second phase, notes were made to record the participants' emotions, uneasiness and distractions during the interviews. In the experiential stage, the researcher made notes on the emotions and feelings of the participants during the interviews and how the researcher felt at the time. The contextual stage necessitated notes about the interview settings and the roles each participant played during the interviews. The researcher also made diagrams of where each participant was seated at the table as an aid to the memory.

i. Timing and location

The interviews were conducted at various locations in the SMMEs. The focus group interviews lasted less than an hour and the individual interviews for half an hour.

3.4.4 DATA ANALYSIS PHASE

The purpose of qualitative data analysis is to disseminate volumes of data in the form of themes and categories (Maree et al., 2016). The researcher was the only data coder and could thus also ensure total confidentiality of the process.

3.4.4.1 Coding the data

Coding is the process of segmenting qualitative data into meaningful smaller units (Creswell, 2014; Maree et al., 2016). It is conducted by reading through the data to establish meaning behind the quotations. These quotations are linked to a specific word or code, which identifies or represents the phrase as part of a specific group or theme (Maree et al., 2016).

The researcher made use of three sources of codes to analyse the data:

- New codes developed and derived from data by the researcher.

- Actual terms used or referred to by participants (refer to in vivo coding in Atlas.ti).
- Codes derived from existing theory and literature (Saunders et al., 2016).

The transcripts were imported into Atlas.ti using Computer Assisted Qualitative Data Analysis Software (CAQDAS). The researcher then conducted an NCT (noticing, collecting, thinking) analysis (Friese, 2011) by applying the three basic elements of the analysis process, namely, noticing things, collecting things and thinking about things. According to Friese (2011), noticing refers to the process of finding interesting things in the data when reading through the transcripts and fields notes. The researcher then developed new codes by reading through the data line by line (Corbin & Strauss, 2008) and thus was able to notice similarities in data segments that fitted into already existing codes. The researcher continued with this approach until she no longer noticed new things and no new codes emerged. At this point, the researcher started thinking about the codes to generate code trees. During this thinking phase, she made memos while revisiting the data to establish a link between the research questions and was then able to develop interesting themes and categories by using a thematic approach to analysing the transcripts.

3.4.4.2 The data analysis phase

The data analysis phase was conducted simultaneously with the empirical phase until data saturation occurred. In addition to transcribing the notes and audio recordings, the researcher also noted contextual information and observations during the interviews to assist with recalling the context and content of each interview.

In grounded theory, data analysis focuses on the experiences of the participants and is thus a collaborative endeavour between researcher and participants (Maree et al., 2016). The researcher used a process of open coding and constant comparative analysis through which she constantly compared the data to the categories to ensure that data coding was consistent (Charmaz, 1983). By following a systematic data analysis process, the researcher ensured that the analysis and theory formulation were not shaped by pre-existing constructs.

3.4.4.3 *Data analysis procedure*

i. General considerations

During the research, various methods were used to develop reflective ideas to supplement handwritten notes and categorised data. These included interim summaries, self-memos and a reflective diary (Saunders et al., 2016, p. 575). As the interviews progressed, the researcher wrote an interim summary after each interview to record and describe interview observations. Notes on the development of her thoughts were also made to aid in the analysis process, as well as the direction in which the data analysis was going. Self-memos were made to record ideas that occurred about aspects of the research as she thought of them during the categorising, analysis and interpreting phase. The reflective journal included considerations about her experiences while undertaking the research, what she had learnt from them, and how she would be able to apply this learning to improve her research strategies going forward. These reflections occurred after each interview.

ii. Thematic analysis

The thematic analysis was used to develop and test explanations and theories based on apparent thematic patterns and emerging relationships. The researcher went through a process of refining themes and testing propositions until data saturation was reached. The thematic analysis involved the coding of qualitative data to identify themes or patterns which related to the research questions (Saunders et al., 2016).

The researcher, consistent with the grounded theory approach, adopted a threefold approach to data analysis (Corbin & Strauss, 2008). The researcher started with open coding by developing categories to classify the data. This was done line by line. Then a constant comparative method was applied by moving between data collection and data analysis (Leedy & Ormrod, 2015). This was intended to guard against researcher bias by continually “challenging concepts with fresh data” (Charmaz, 2006, cited in Corbin & Strauss, 2008). The data collection process aimed to saturate the categories by

identifying interrelationships and similarities between them that might suggest revisions or changes to be made to the categories.

During the next phase, referred to as axial coding, the researcher used codes and memos to establish relationships between the various data categories. Themes were developed into broad patterns which were compared to the experiences of other participants and the existing literature. The researcher then searched for an explanation of why and how the categories were linked to each other and selective coding was used to develop a storyline that explains the employee wellness experiences of SMMEs. Finally, the data were analysed to draw and verify conclusions.

3.4.4.4 Interpreting the data

The data were interpreted in four parts, as suggested by Maree et al. (2016). The first part involved making sense of the data, and thereafter data triangulation was checked to ensure adequate data were collected. The third part involved the validation of data, and finally, conclusions were reached based on the findings of the data. The participants were not asked to provide feedback on the findings as all parties agreed not to have contact after the interviews to protect their anonymity.

The data in chapter four was presented in two modes as suggested by Miles et al. (2014) namely text with varying degrees of details and arrangements as well as organised displays of either networks developed in Atlas.ti or tables showing emerging themes. The researcher applied a wide range of literary devices such as vignettes, organised narratives, or data display tables to report on the results. This process enables the reader to make sense of the data and to easily understand the interpretation of the data. (Miles et al., 2014)

3.4.5 DISSEMINATION PHASE

During the last phase of the research study, the findings were presented, discussed and recommendations formulated.

Throughout the study, the researcher focused on three critical areas to ensure the quality of the research design, namely, trustworthiness, reflexivity and ethical considerations.

3.4.5.1 Ensuring the trustworthiness of the research

Trustworthiness relates to the reliability of the results and whether the research study is scientifically sound (Creswell, 2014; Saunders et al., 2016; Struwig et al., 2013; Terreblanche et al., 2011).

Four criteria were used in the pursuit of trustworthiness as proposed by Guba (1981):

- credibility
- transferability
- dependability
- confirmability.

According to Saunders et al. (2016, p. 206), credibility is a parallel criterion to internal validity, which refers to the extent to which the participants' socially constructed realities match what the participants intend them to be. The researcher ensured credibility by applying the following techniques:

- encouraging meaningful participation and building trust with the participants through continuous involvement in the data collection process (Miles et al., 2014; Shenton, 2004)
- making use of a diverse group of participants to discuss ideas during focus-group interviews (Miles et al., 2014; Shenton, 2004)
- verifying data, analysis and interpretations with participants to ensure the accuracy of interview transcripts (Guba, 1981; Saunders et al., 2016; Shenton, 2004)

- eliminating preconceived expectations and not allowing prejudice to influence the interpretations of the participants' socially constructed realities (Guba et al., 1994; Saunders et al., 2016) through reflexive journaling.

The researcher also made the following provisions to promote confidence in the accuracy of the interpretations and the findings (Shenton, 2004):

3.4.5.1.1 Truth value

Truth value is about representing the realities disclosed by the participants. The researcher developed familiarity with the participants to establish a trust relationship between the parties (Guba et al., 1994). The shared experiences should enable the population to familiarise themselves with the experiences of the sample group. Owing to the independence of the researcher, participants felt comfortable about sharing their realities without fear of victimisation or retribution.

The researcher posed various interrelated questions as strategies for ensuring that answers were truthful. To ensure truthfulness and extract additional data, she often rephrased questions, confirmed responses and raised issues that had already been discussed. Where contradictions or untruths emerged, the researcher disregarded the suspect data and used other approaches to produce alternative responses.

i. Adopting well-established research methods

Credibility is improved by adopting well-established research methods. The selected data gathering and data analysis methods were in line with those successfully utilised in comparable studies on employee wellness (A. Berry et al., 2002; Lewis, 2016). Focus group interviews are deemed appropriate instruments for obtaining participants' opinions and views regarding experiences of the particular phenomenon (Saunders et al., 2016).

ii. Triangulation

The research used various data collection methods such as focus groups, individual interviews and supporting data to explain the participants' experiences. Triangulation was achieved by verifying individual viewpoints and experiences against the viewpoints and experiences of others in a diverse group of participants. Shenton (2004) argues the importance of comparing the needs of one individual with another in a comparable situation. Dervin's (cited in Shenton, 2004) concept of "circling reality" allowed the researcher to sample a number of participants in three different organisations to achieve greater diversity in terms of opinions and perspectives to portray a stable view of the participants' experiences.

iii. Frequent debriefing sessions

The researcher held regular telephonic debriefing sessions with her supervisor to ensure the credibility of the interpretations of the study. The researcher also used the supervisor as a sounding board to test developing ideas and interpretations. In turn, the supervisor used probing to assist the researcher to recognise her own biases and preferences (Miles et al., 2014).

iv. Reflexivity

The researcher used "reflective commentary" to record the impressions of each focus group, the emerging patterns and the developing theories. This commentary enabled the researcher to monitor her own developing constructions and to examine personal assumptions (Guba et al., 1994; Ortlipp, 2008). Ortlipp (2008) supports the use of critical reflective journals to clarify individual belief systems and subjectivities.

v. Funding for the study

The researcher received no funding for conducting this research.

vi. Bracketing

Any personal preconceived ideas were removed by bracketing, that is, by considering participants' perceptions and views objectively.

vii. Intuiting

According to the methods of intuition "truth is true because it is logical" (Gladwell, 2007). To interpret the data objectively the researcher developed an intuitive awareness of the participants' perceptions and experiences. During the data analysis of sensitive or controversial issues, themes were developed by the researcher using her intuition.

viii. Authority of the research

Authority in research refers accepting new ideas because some authority figure has stated these as being true (Gladwell, 2007). The credibility of the research was enhanced by establishing the authority for the following aspects:

- the researcher's knowledge of the subject
- the researcher's interpretation skills
- the researcher's ability to explore new ideas
- the researcher's postgraduate qualifications
- the researcher's extensive educational background and experiences with entrepreneurship.

3.4.5.1.2 Transferability

The sample was theoretically diverse to encourage broader applicability. Moreover, the characteristics of the sample were sufficiently described to permit adequate comparison with other samples. The findings indicated the limitation of the study to generalise to other setting and contexts. However, SMMEs in similar circumstances may be able to relate the findings to their own circumstances (Shenton, 2004).

3.4.5.1.3 Dependability

Dependability was assured by using "overlapping methods" and in-depth methodological description, as suggested by Guba and Lincoln (1994). In this study the credibility of data was established using focus groups and individual interviews (Guba et al., 1994; Saunders et al., 2016; Willis et al., 2016). The researcher recognised that people behave differently and express different opinions in changing contexts, as reality is unstable and constantly changing (Terreblanche et al., 2011). Thus, the findings were a true reflection of the participants' experiences at the time of the study. To reinforce dependability, the researcher provided an overview of the research design and its implementation and the operational details of data gathering, as well as a reflective appraisal of the study (Shenton, 2004)

3.4.5.1.4 Confirmability

The concept of 'confirmability' refers to the qualitative researcher's attempt to show objectivity in the study (Miles et al., 2014; Shenton, 2004). Triangulation plays a major role in the confirmability of research studies (Guba et al., 1994; Miles et al., 2014; Shenton, 2004). Miles and Huberman (2014) maintain that a key to confirmability is the researcher's obligation to admit her own predispositions. In addition, the researcher used reflective commentary to further reduce the effect of researcher bias, as discussed earlier. Patton (cited in Shenton, 2004) recognises that the intrusion of researcher bias is inevitable. However, in this study the researcher was committed to ensuring that the findings presented the experiences and opinions of the participants, rather than the opinions and views of the researcher.

3.4.5.2 Conclusion

This section explained the provisions made to ensure the rigour and trustworthiness of the study by discussing the credibility, transferability, dependability and confirmability of the research study.

3.5 ETHICAL CONSIDERATIONS

Potential ethical challenges were considered that could arise during the research process. According to Terreblanche et al. (2011), there are four widely accepted philosophical principles that should be applied to determine whether research is ethical. These include the principles of autonomy and respect for the dignity of persons, as well as nonmaleficence, beneficence and justice. These are explained below (Terreblanche et al., 2011, p. 67).

3.5.1 THE PRINCIPLE OF AUTONOMY AND RESPECT FOR THE DIGNITY OF PERSONS

This philosophical principle is linked to the Nuremberg code and finds expression in the requirement for voluntary informed consent by all research participants. The researcher ensured individual and institutional confidentiality throughout the research.

3.5.1.1 The right to self-determination

The right to self-determination gives the participants free will in deciding whether to take part in the study. The researcher informed the participants at the beginning of the interviews of their right to clarify questions, the right to withhold information and the right to discontinue participation at any time.

3.5.1.2 The right to full disclosure

The right to the full disclosure provides participants with the right to be informed about every aspect of the research. The researcher did a full disclosure in her personal capacity as the principal of a college and provided sufficient information about the purpose and nature of the study.

3.5.1.3 Informed consent

According to Saunders et al. (2016), informed consent involves providing sufficient information to the participants about the implications of their actions and to enable them to make a free and uncoerced decision about their participation. Informed consent forms were issued to all participants before each interview to ensure that participants knew what the study involved. The participants were informed that participation was voluntary, and that involvement could be discontinued at any point.

3.5.2 THE PRINCIPLE OF NONMALEFICENCE

This principle supplements the autonomy principle which requires that no harm befalls research participants as a direct or indirect consequence of the research. According to Saunders et al. (2016), any harm to participants must be avoided, be it through risk to emotional wellness, mental or physical health, or social or group cohesion. The researcher eliminated, as far as possible, any harm or risk that the participants might be exposed to as a direct or indirect result of participating in the research. This included suffering from embarrassment, anxiety or fear of exposure. The researcher was sensitive of the need to ensure that the participants remained anonymous, as some expressed fear of retribution for sharing sensitive and controversial information.

3.5.3 THE PRINCIPLE OF BENEFICENCE

This principle compels the researcher to maximise the benefits that the participants receive from the study. The researcher weighed up the relative risks of the study to the participants against the benefits that might directly result.

3.5.3.1 Favourable risk/benefit ratio

The researcher should identify possible risks, harms and 'costs' of the research to the participants, and identify means to minimise such risks and costs so that the risk/benefit ratio is favourable (Terreblanche et al., 2011). The researcher identified low risk in participating in this research as confidentiality could not be guaranteed in a focus group even though members were encouraged to maintain confidentiality. Further, the participants did not incur any costs for participating in the study.

3.5.3.2 Freedom of exploitation

Exploitation refers to the misuse, mistreatment or manipulation of participants' information (Miles et al., 2014). The researcher ensured that the participants would not be exploited by requesting them to verify the data analysis and research findings. In addition, participants were selected who were not directly dependent on business from the researcher.

3.5.3.3 Freedom from harm

Harm can manifest in a variety of ways including blows to self-esteem or 'looking bad' to others, to threats to one's interests, position or advancement in the organisation (Miles et al., 2014). The researcher was able to ensure freedom from harm as the study did not involve vulnerable persons or institutions, or highly publicised organisations. The study was conducted with autonomous individuals who freely opted to participate in the study. The identity of participating organisations was protected by referring to them as organisation A, B or C and identifying them merely by the type of industry in which they operated.

3.5.4 THE PRINCIPLE OF JUSTICE

Justice refers to the fair treatment of research participants and the equity considerations taken during the research (Terreblanche et al., 2011). It also refers to the fair selection of research participants and ensuring that those who stand to benefit from the research do not bear the burden of the research.

3.5.4.1 Right to fair treatment and fair selection.

When recruiting participants, they were given sufficient information the study's goals and were assured of their right to make informed decision about participation in the study (Leedy & Ormrod, 2014). The population was selected from elements that matched the research criteria and were in a position to help answer the research questions. The focus

group participants at the educational institution were selected by a gatekeeper and the other two groups by the owners of the organisations.

3.5.4.2 Right to privacy

Privacy and anonymity enrich the reliability of data. According to Saunders et al. (2016), individuals and organisations should remain anonymous and the data produced should be processed to make it non-attributable. The researcher ensured that participants' data remained anonymous and that no part of the participants' identity could be revealed. This was done by allocating a number to each participant and only referring to these numbers during the interviews and in the transcripts. In addition, the researcher ensured the safe storage of the audiotapes of the focus group interviews (Terreblanche et al., 2011) on the researcher's personal computer which is password protected.

The right to privacy allows participants to decide what type of information they wish to share and under what conditions the information may be disseminated. Individual interviews were conducted in privacy, and confidentiality was maintained throughout the research process. The managers indicated which information they wanted to remain confidential and not to be disclosed in the research report.

3.5.4.3 Ensuring permission is obtained

According to Saunders et al. (2016), the participants have the right to expect the researcher to abide by the extent of the consent given and not to widen the scope without first obtaining permission. Prior to the interviews the researcher discussed the boundaries of the research with the participants and explained the importance of staying within the boundaries. The researcher requested permission for participation without pressure or coercion and conducted the interviews according to the agreed scope.

3.6 DISCUSSION OF THE FINDINGS

The findings are discussed in Chapter 4 of this research. The researcher provided feedback to the participants who requested such in the form of a copy of the report. The

researcher strived to uphold certain research virtues throughout the study namely: (i) trustworthiness, (ii) discernment, (iii) conscientiousness, (iv) compassion and (v) integrity.

Accordingly, the researcher

- ensured trustworthiness by believing in and relying on her moral character
- used her discerning ability to be sensitive to her research participants and to gain insight into their lived experiences. In addition, wise judgement was used to reach conclusions about the experiences of participants.
- was conscientious and conducted due diligence before deciding what was right in every situation
- showed compassion where needed and regard for participants' welfare
- was faithful to her values and acted in a morally accountable manner throughout the research study.

3.7 RECOMMENDATIONS

The research recommendations will be discussed in Chapter 5 of this research study. These are based on the findings of the study and aim to improve employee wellness practices in SMMEs.

3.8 SUMMARY

The researcher applied a qualitative research approach to obtain the findings in this study. A literature review was conducted prior to the data gathering phase and the quality of the research was maintained through trustworthiness and complying with ethical considerations. Data were collected by conducting interviews with a purposive sample. In these interviews a variety of strategies were implemented to solicit applicable responses from participants.

Subsequently, based on the analysis of the data, the researcher was able to make recommendations based on a holistic approach to the experiences of employees and managers of SMMEs.

CHAPTER 4 : DATA RESULTS AND DISCUSSION

4.1 INTRODUCTION

This chapter discusses the findings of the study. Three main themes emerged from the study, namely, the perception of wellness, the experience of wellness and the mechanisms towards a healthy workplace. Subthemes were also identified in the main themes.

The main objective of the study was to explore the wellness experiences of employees and managers of SMMEs, while second objective was to establish whether there is a need for wellness practices in SMMEs. The main themes and subthemes covered the objectives of the study. The investigation determined that there are potential benefits attached to the implementation of wellness practices in SMMEs, as well as acknowledging certain constraints.

The findings of the study were based on the literature review and the thematic analysis of the data obtained from the focus groups and individual interviews conducted at three different organisations. The managers' confirming, and refuting views were used to support the interpretations of the employees' experiences in SMME.

4.2 GRAPHICAL ILLUSTRATIONS OF THE BIOGRAPHICAL INFORMATION IN THE DIFFERENT FOCUS GROUPS AND INDIVIDUAL INTERVIEWS

The researcher used a diverse sample to examine the wellness experiences of employees and managers in SMMEs. Diversity factors such as race, gender, years in service and position in the organisation often influence the way in which participants relate to experiences (Martin & Barnard, 2013). Thus, to provide the reader with an overview of the research participants, the sample will first be discussed before continuing with the actual data analysis discussion.

4.2.1 THE BIOGRAPHICAL INFORMATION DEPICTED IN ALL FOCUS GROUPS AND INDIVIDUAL INTERVIEWS

Tables 4.1 to 4.6 depict the biographical information of the total sample which included three focus group interviews and four individual interviews. Each table is followed by a discussion.

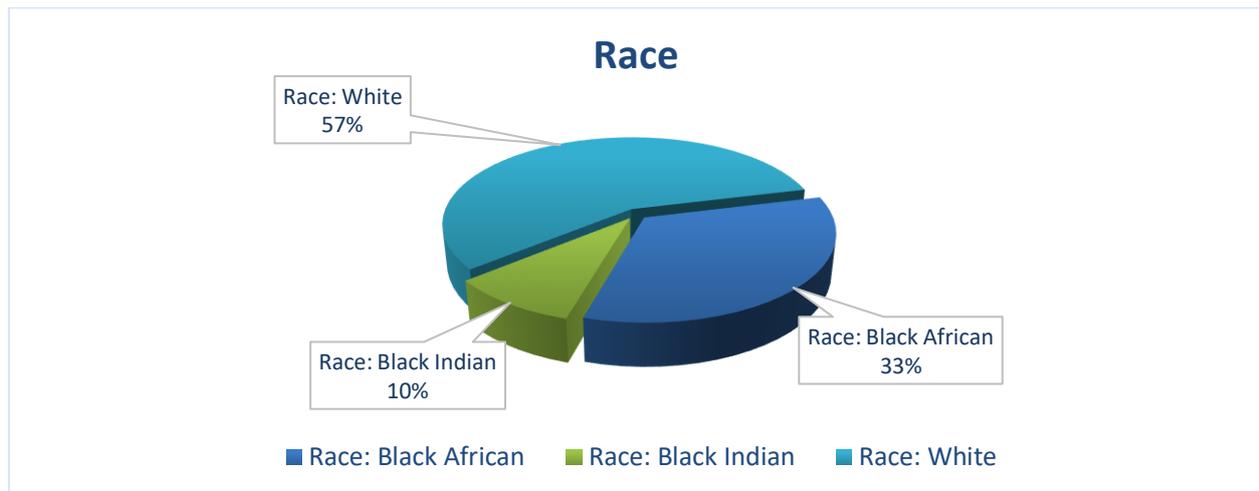
4.2.1.1 Race profile of the total sample

Table 4.1: Frequency Distribution: Race Profile of the Total Sample

Race		Frequency	Percentage
	White	12	57.1
	Black	7	33.3
	Indian	2	9.5
	Total	21	100

According to Table 4.1 the sample comprised 57.1% white participants, 9.5% Indian participants, and 33.3% black participants. The researcher requested an equal representation of all race groups from the gatekeepers but one of the organisations interviewed only employed people from a particular race group, and therefore the racial representation is slightly skewed towards white people. Nonetheless, the sample represented participants from all three race categories which made the sample sufficiently representative of SMMEs in Gauteng.

Figure 4.1: Graphical Illustration of the Sample Distribution by Race



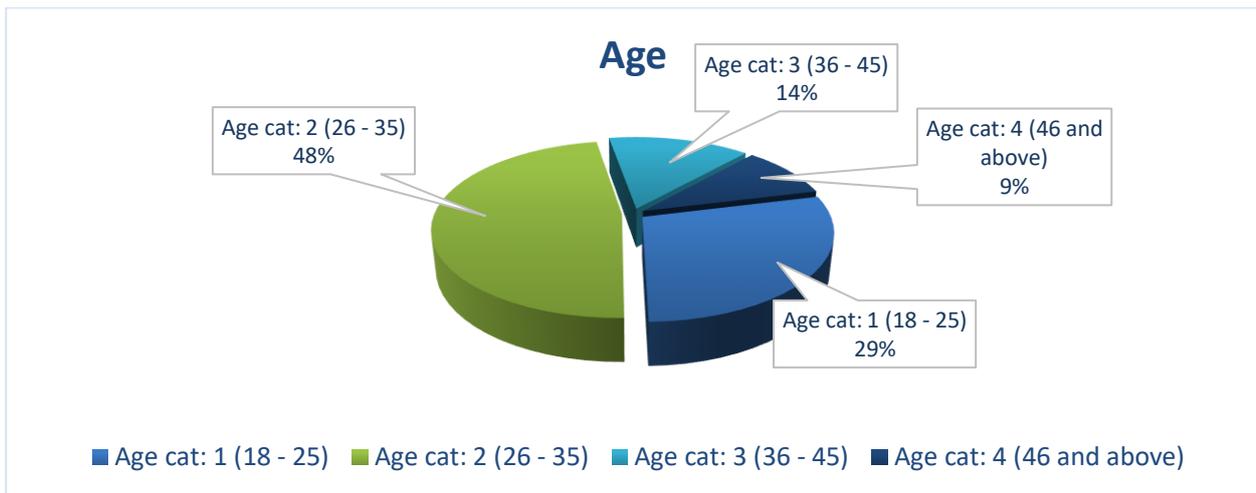
4.2.1.2 Age profile of the total sample

Table 4.2: Frequency Distribution: Age Profile of the Total Sample

Ages		Frequency	Percentage
	Cat 1: 18–25	6	28.6
	Cat 2: 26–35	10	47.6
	Cat 3 36–45	3	14.2
	Cat 4: 46 and above	2	9.5
	Total	21	100

Table 4.2 displays the age distribution of the sample. Accordingly, 28.6% of participants were between the ages of 18 and 25 years old, 47.6% between the ages of 26 and 35 years, 14.2% between the ages of 36 and 45 years, and 9.5% above 46 years of age. Almost half of the participants were between the ages of 26 and 35 years old. Nevertheless, participants between the ages of 26 and 35 years were deemed to have sufficient work-life experience to contribute meaningfully to the study.

Figure 4.2: Graphical Illustration of the Sample Distribution by Age



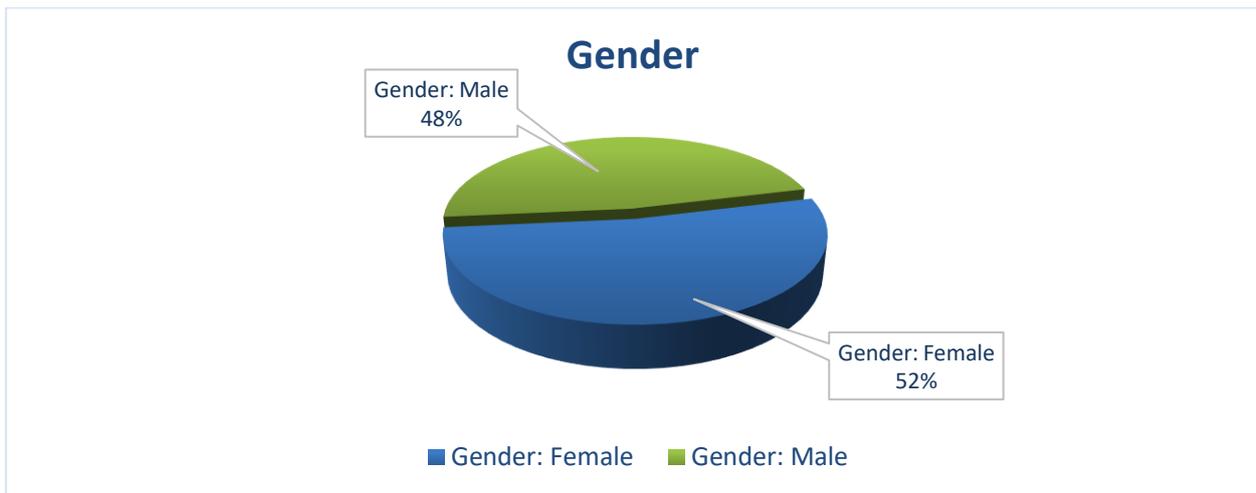
4.2.1.3 Gender profile of the total sample

Table 4.3: Frequency Distribution: Gender Profile of the Total Sample

Gender		Frequency	Percentage
	Female	11	52.4
	Male	10	47.6
	Total	21	100

As shown in Table 4.3, the sample comprised 52.4% female and 47.6% male participants. This equal representation of both genders enabled valid interpretations of the participants' experiences.

Figure 4.3: Graphical Illustration of the Sample Distribution by Gender



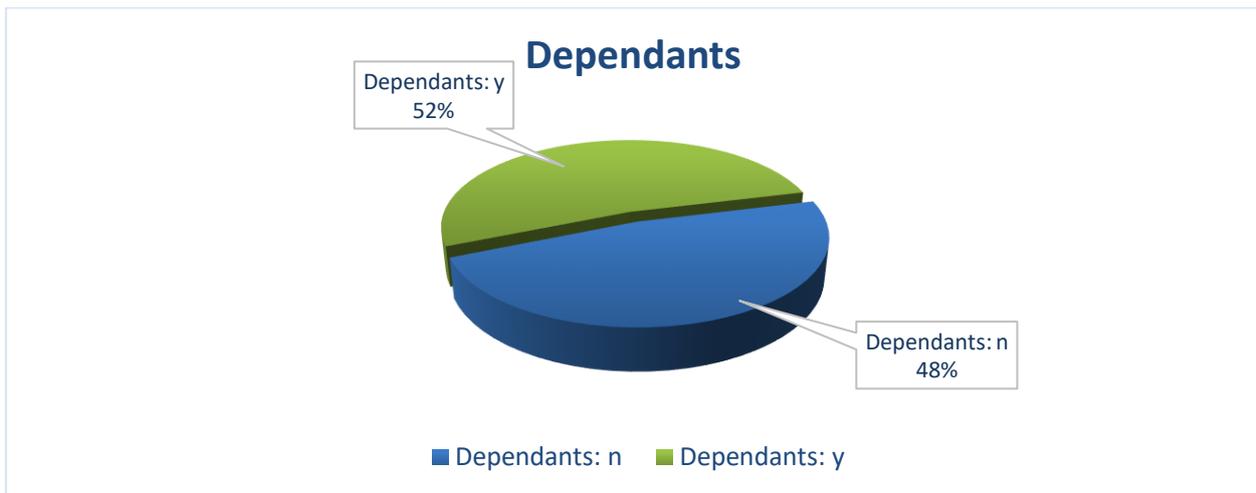
4.2.1.4 Dependant profile of the total sample

Table 4.4: Frequency Distribution: Dependants of the Total Sample

Dependants		Frequency	Percentage
	Yes	11	52.4
	No	10	47.6
	Total	21	100

According to Table 4.4, 52.4% of the sample comprised participants with dependants while 47.6% did not. The sample accordingly presented an almost 50% split between participants with dependants and those without.

Figure 4.4: Graphical Illustration of the Sample Distribution by Dependants



4.2.1.5 Job designation profile of the total sample

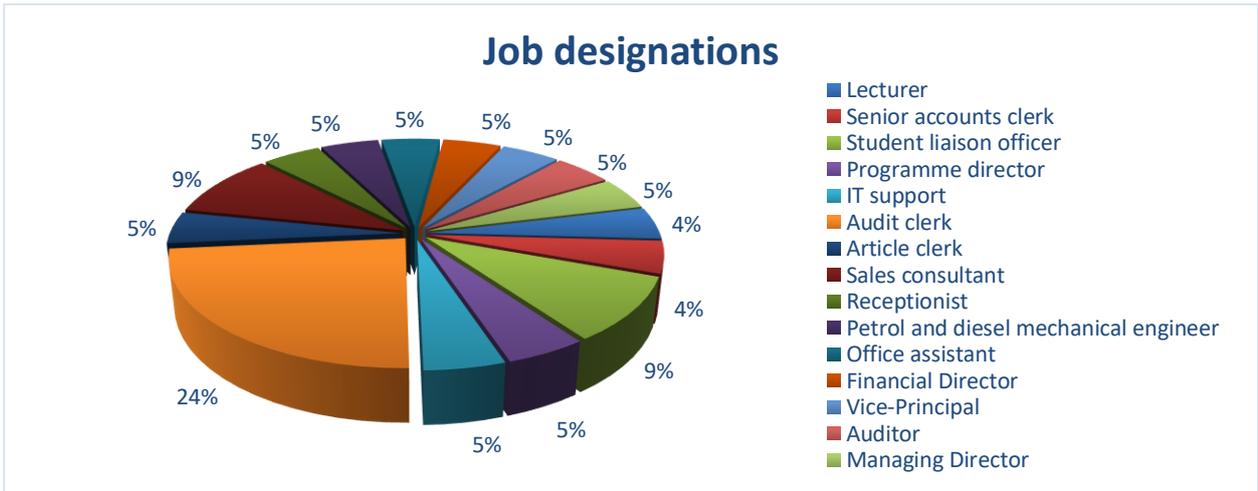
Table 4.5: Frequency Distribution: Job Designation Profile of the Total Sample

Job Designation			Frequency	Percentage
	Lecturer		1	4.76
	Senior accounts clerk		1	4.76
	Student liaison officer		2	9.52
	Programme director		1	4.76
	IT support specialists		1	4.76
	Articled clerk		5	23.8
	Audit clerk		1	4.76
	Sales consultant		2	9.52
	Receptionist		1	4.76
	Petrol and diesel mechanical engineer		1	4.76
	Office assistant		1	4.76
	Financial director		1	4.76

	Vice-principal	1	4.76
	Auditor	1	4.76
	Managing director	1	4.76
	Total	21	100

According to Table 4.5, job designation among the participants was as follows: 4.76% were lecturers, 4.76% senior accounts clerks, 9.52% student liaison officers, 4.76% programme directors, 4.76% IT support specialists, 23.8% articled clerks, 4.76% audit clerks, 9.52% sales consultants, 4.76% receptionists, 4.76% petrol and diesel mechanics, 4.76% were office assistants, 4.76% financial directors, 4.76% vice-principals, 4.76% auditors and 4.76% managing directors. The sample therefore comprised of diverse jobs which could contribute to a variety of experiences of the participants.

Figure 4.5: Graphical Illustration of the Sample Distribution by Job Designation



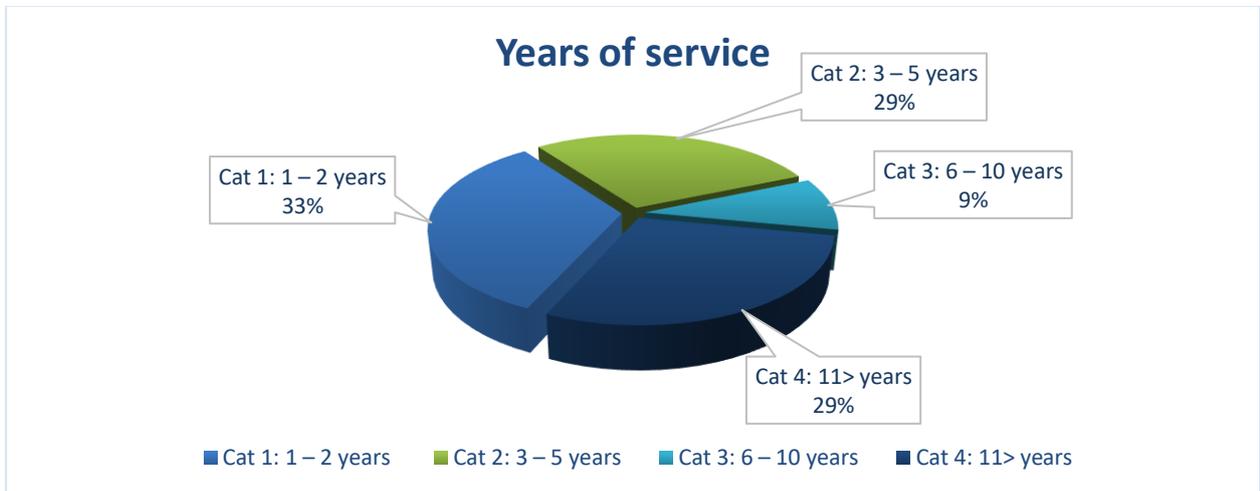
4.2.1.6 Years of service profile of the total sample

Table 4.6: Frequency Distribution: Years of Service of the Total Sample

Years of service		Frequency	Percentage
	Cat 1: 1–2 years	7	33.3
	Cat 2: 3–5 years	6	28.6
	Cat 3: 6–10 years	2	9.2
	Cat 4: 11 > years	6	28.5
	Total	21	100

According to Table 4.6, 33.3% of the sample had been employed for one to two years, 28.6% for three to five years, 9.2% for six to ten years, and 28.5% for more than 11 years. The table shows that 66% of the sample had been employed for more than three years, which supports the notion that the participants had sufficient experience to participate in the study.

Figure 4.6: Graphical Illustration of the Sample Distribution by Years of Service



4.2.2 BIOGRAPHICAL INFORMATION DEPICTED IN THE FOCUS GROUPS

Tables 4.7 to 4.12 depict the biographical information of the focus groups. Each table is followed by a discussion.

4.2.2.1 Race profile of the focus groups

Table 4.7: Frequency Distribution: Race Profile of the Focus Groups Sample

	Focus Group 1		Focus Group 2		Focus Group 3		TOTAL	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
White	3	50%	1	17%	5	100%	9	53%
Black	3	50%	4	67%	0		7	41%
Indian	0	0	1	17%	0		1	6%
TOTALS	6	100%	6	100%	5	100%	17	100%

According to Table 4.7, the participants in the first focus group comprised a 50% split between black and white participants, as at the time of this research the organisation did not have Indians in its employ. However, the sample was sufficiently representative to gain insight into the experiences of employees in SMMEs from a race perspective in Gauteng.

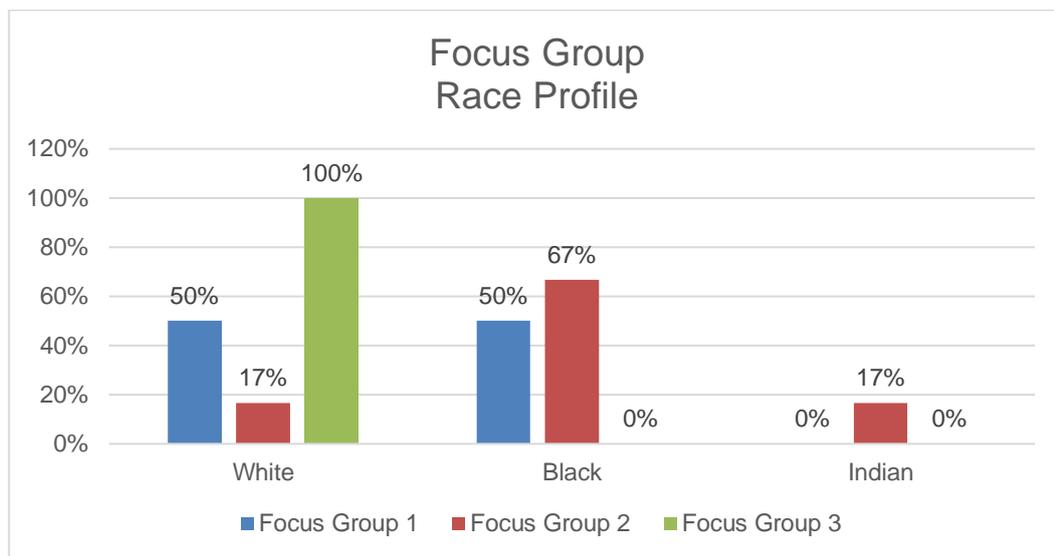
As Table 4.7 shows, the participants in the second focus group of the sample comprised of 16.6% White participants, 66.6% Black participants and 16.6% Indian participants. The gatekeeper to the organisation concerned identified participants who were available and who were suitable for the researcher study. The sample was deemed to be sufficiently representative of the population of Gauteng (Department of Labour, 2018).

As illustrated by Table 4.7, the third focus group sample comprised 100% white participants as, at the time of the research, the organisation from which this focus group was selected did not employ any Indian or Black people. The researcher was curious to investigate the reason behind this decision and the impact this recruitment and selection strategy might have on employee wellness.

By comparing the three focus groups in Table 4.7, it is evident that focus group two had the most diverse representation according to race and focus group three the least. White

people had the highest representation with 53%, followed by Black people with 41%, and Indian people with only 6%. The sample was sufficiently representative for the purpose of this study.

Figure 4.7: Graphical Illustration of the Sample Distribution by Race (Focus Groups)



4.2.2.2 Age profile of the focus groups

Table 4.8: Frequency Distribution: Age Profile of the Focus Groups Sample

	Focus Group 1		Focus Group 2		Focus Group 3		TOTAL	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
Cat 1: 18-25	0	0%	4	67%	3	60%	7	41%
Cat 2: 26-35	3	50%	1	17%	2	40%	6	35%
Cat 3: 36-45	3	50%	1	17%	0	0	4	24%
Cat 4: > 45	0	0%	0	0%	0	0	0	0
TOTALS	6	100%	6	100%	5	100%	17	100%

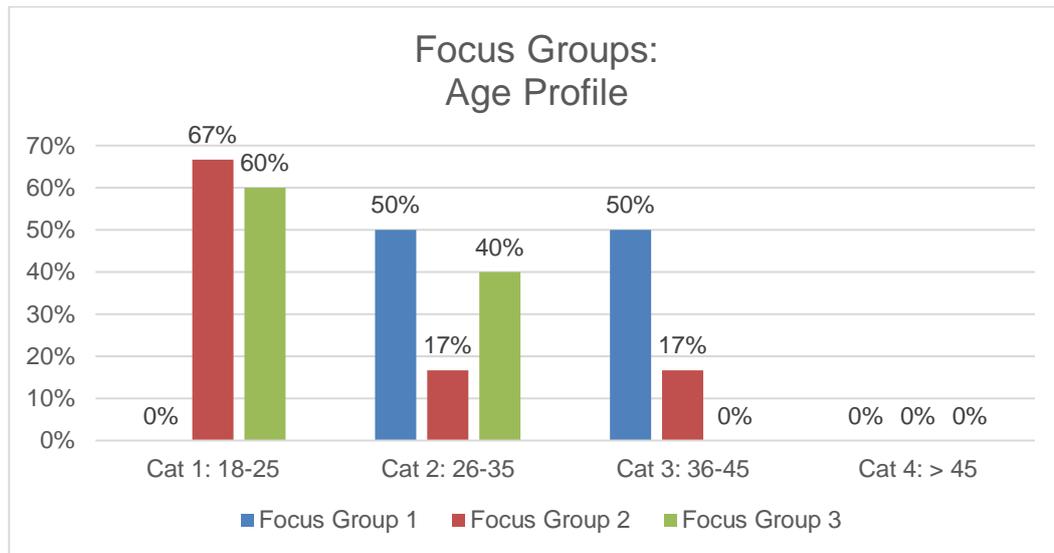
According to Table 4.8, 50% of participants in the first focus group were between the ages of 26 and 35 years and 50% between the ages of 36 and 45 years. This sample was taken from an academic institution that required a university qualification for entry. Thus, the sample was representative of a more mature workforce and was sufficiently representative in the age categories to interpret the meanings behind their experiences.

According to Table 4.8, 66.6% of participants in the second focus group were between the ages of 18 and 25 years, 16.6% between 26 and 35 years and 16.6% between 36 and 45 years. This sample represented an auditing firm with various learnership contracts in place. Accordingly, the researcher was able to gain insight into the experiences of a younger workforce as the sample included some employees who were in the process of completing their clerkship.

According to Table 4.8, the third focus group sample, which was taken from a manufacturing business, comprised 60% participants between the ages of 18 and 25 years and 40% between the ages of 26 and 35 years. Accordingly, 60% of the participants were below the age of 25, which was unexpected for this highly specialised business. According to the managing director, the organisation employs unqualified and inexperienced employees to minimise expenditure on salaries. In addition, the organisation experienced high employee turnover - eight employees resigned the previous month. The managing director believed the reason for this was that young, inexperienced employees use his organisation to build up experience and then leave his employment to join more lucrative organisations. Thus, the researcher was thus curious to investigate the perceptions and experiences of these inexperienced employees.

Table 4.8 thus show that the three focus groups represented relatively young work forces, with 41% of the participants between the ages of 18 and 25 years, 35% between the ages of 26 and 35 years, and no representation for employees over the age of 45 years.

Figure 4.8: Graphical Illustration of the Sample Distribution by Age (Focus Groups)



4.2.2.3 Gender profile of the focus groups

Table 4.9: Frequency Distribution: Gender Profile of the Focus Groups Sample

	Focus Group 1		Focus Group 2		Focus Group 3		TOTAL	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
Female	5	83%	3	50%	2	40%	10	59%
Male	1	17%	3	50%	3	60%	7	41%
TOTALS	6	100%	6	100%	5	100%	17	100%

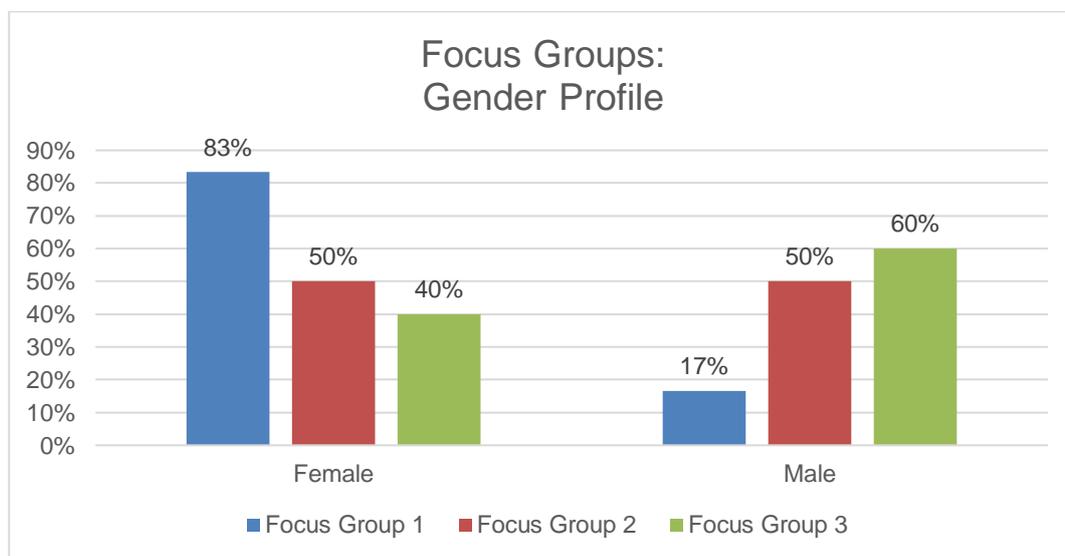
As Table 4.9 shows, the sample for the first focus group comprised 83.3% female participants and 16.6% male participants. As male representation in the total population of the organisation from which this focus group was selected was only 12.5%, the sample was representative of the organisation.

As may be seen from Table 4.9, the participants of the second focus group displayed a 50% split between female and male participants. The sample was well represented to gain insights into the experiences of employees in SMMEs from a gender perspective.

As Table 4.9 indicates, the third focus group sample comprised of 40% female and 60% male participants. The sample was thus sufficiently representative to gain insight into the experiences of employees in this SMME from a gender perspective. The managing director indicated that part of his organisation’s recruitment and selection strategy was to minimise the employment of woman because they are less productive than men because of child minding responsibilities, although certain positions in his organisation have traditionally only been filled by women, such as receptionists and those in administrative positions. The researcher was interested in investigating the motivation behind this decision and its implications for employee wellness.

Although focus groups one had a higher representation of female employees, the sample was sufficiently representative of 59% females and 41% males.

Figure 4.9: Graphical Illustration of the Sample Distribution by Gender (Focus Groups)



4.2.2.4 Dependant profile of the focus groups

Table 4.10: Frequency Distribution: Dependant Profile of the Focus Groups

Sample

	Focus Group 1		Focus Group 2		Focus Group 3		TOTALS	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
Yes	4	67%	3	50%	2	40%	9	53%
No	2	33%	3	50%	3	60%	8	47%
TOTALS	6	100%	6	100%	5	100%	17	100%

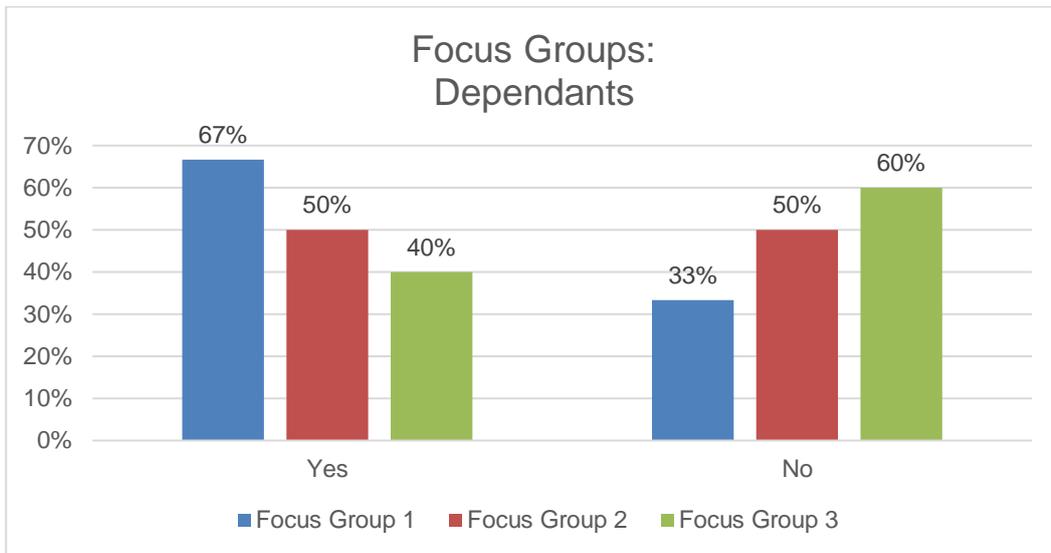
According to Table 4.10, 66.7% of the first focus group participants had dependants while 33.3% did not.

According to Table 4.10, 66.7% of the second focus group participants had dependants while 33.3% of participants did not.

According to Table 4.10, the third focus group sample comprised of 40% participants with dependants and 60% without. The researcher was interested in exploring the significance of participants with and without dependants in this sample as the managing director indicated that he did not wish to employ people with dependants, particularly woman with children, as this could interfere with workplace responsibilities. The researcher was curious to further investigate the significance of this statement and its implications for employee wellness.

The overall analysis data in the table shows that 53% of participants had dependants while 47% of participants did not have dependants.

Figure 4.10: Graphical Illustration of the Sample Distribution by Dependants (Focus Groups)



4.2.2.5 Years of service profile of the focus groups

Table 4.11: Frequency Distribution: Years of Service Profile of the Focus Groups Sample

	Focus Group 1		Focus Group 2		Focus Group 3		TOTALS	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
Cat 1: 1 - 2	1	17%	2	33%	4	80%	7	41%
Cat 2: 3 - 5	1	17%	4	67%	1	20%	6	35%
Cat 3: 6 - 10	1	17%	0	0%	0	0%	1	6%
Cat 4: > 10	3	50%	0	0%	0	0%	3	18%
TOTALS	6	100%	6	100%	5	100%	17	100%

According to Table 4.11, 16.6% of the first focus group participants had been employed for one to two years, 16.6% for three to five years, 16.6% for six to ten years, and 50% for more than 11 years. The sample thus presented a long established and mature organisation with 50% of the participants having been employed for more than 11 years.

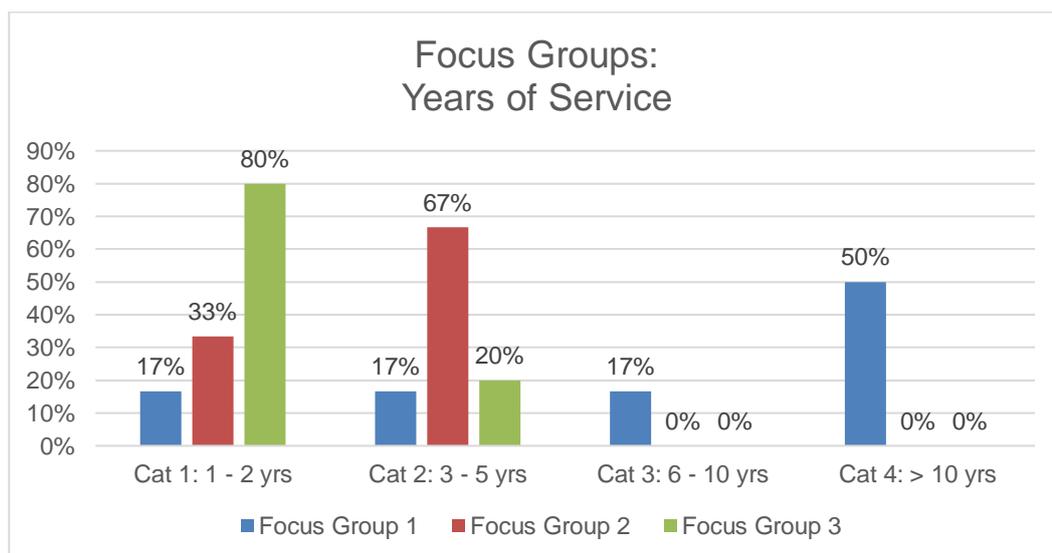
As Table 4.11 shows, the second focus group sample comprised 33.3% of participants who had been employed for one to two years and 66.7% who had been employed for three to five years. The participants interviewed were junior auditing and articled clerks, and therefore had not been employed for a long period of time by this organisation. However, the senior auditing clerks could not be interviewed as they have high daily charge rates. The organisation is a well-established auditing firm with low staff turnover.

According to the manager, most of the employees had been working for the organisation for more than 10 years, and it had never had to place an advertisement for recruitment. The researcher was thus curious to investigate the possible link between the low staff turnover and the employee wellness practices of this organisation.

Table 4.11 shows that 80% of the third focus group participants had been employed for one to two years while 20% had been employed for three to five years. The managing director indicated that the organisation did not pay market-related salaries and did not tolerate any deviances from quality standards. As explained in section 4.2.4.2, this sample represented an organisation that experienced high staff turnover, which was one of the challenges of employee wellness practices that the researcher aimed to explore.

Both focus group two and focus group three had relatively newly employed workers that may constitute high staff-turnover, which was of interest to the researcher. The data in the table further shows that 41% of participants were employed for only one to two years, while 35% were employed for three to five years. This means that 76% were employed for less than six years.

Figure 4.11: Graphical Illustration of the Sample Distribution by Years of Service (Focus Groups)



4.2.2.6 Job designations of the focus groups

Table 4.12: Frequency Distribution: Job Designation Profile of the First Focus Group Sample

Job Designation		Frequency	Percentage
	Lecturer	1	16.6
	Senior accounts clerk	1	16.6
	Student liaison officer	2	33.3
	Programme director	1	16.6
	IT support specialist	1	16.6
	Total	6	100

As may be seen in Table 4.12, the participants of focus group one comprised the following: 16.6% were lecturers, 16.6% senior accounts clerks, 33.3% student liaison officers, 16.6% programme directors, and 16.6% IT support specialist. The sample included diverse jobs and presented varied experiences at various job levels.

Figure 4.12: Graphical Illustration of the Sample Distribution by Job Designation (Focus Group 1)

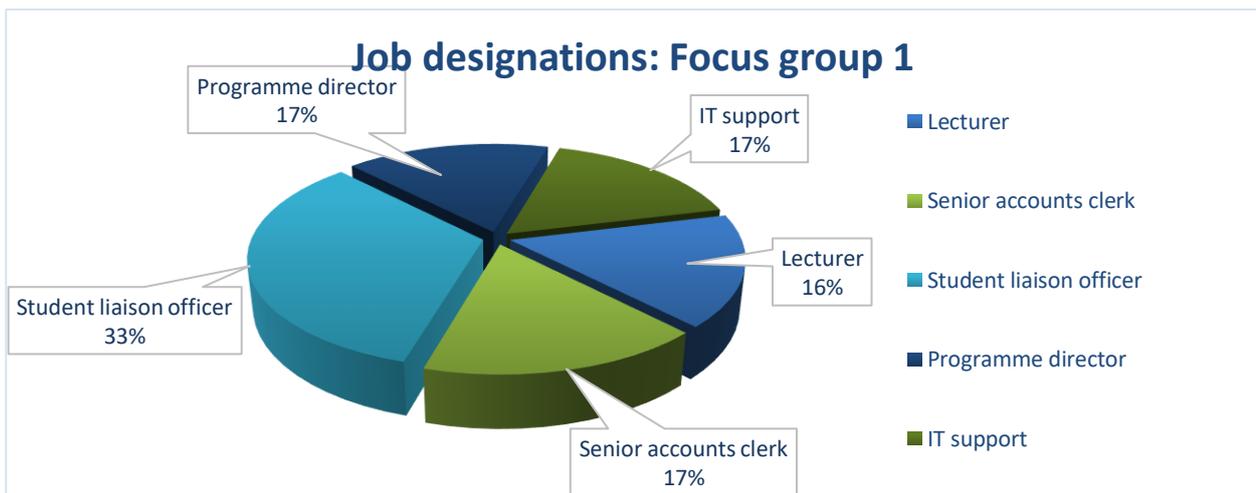


Table 4.13: Frequency Distribution: Job Designation Profile of the Second Focus Group Sample

Job Designation		Frequency	Percentage
	Audit clerk	5	83.3
	Articled clerk	1	16.6
	Total	6	100

Table 4.13 indicates that the sample of participants for focus group two comprised 83.3% audit clerks and 16.6% articulated clerks. The sample was thus sufficiently representative of a professional industry with many employees in the same job but with various levels of experience.

Figure 4.13: Graphical Illustration of the Sample Distribution by Job Designation (Focus Group 2)

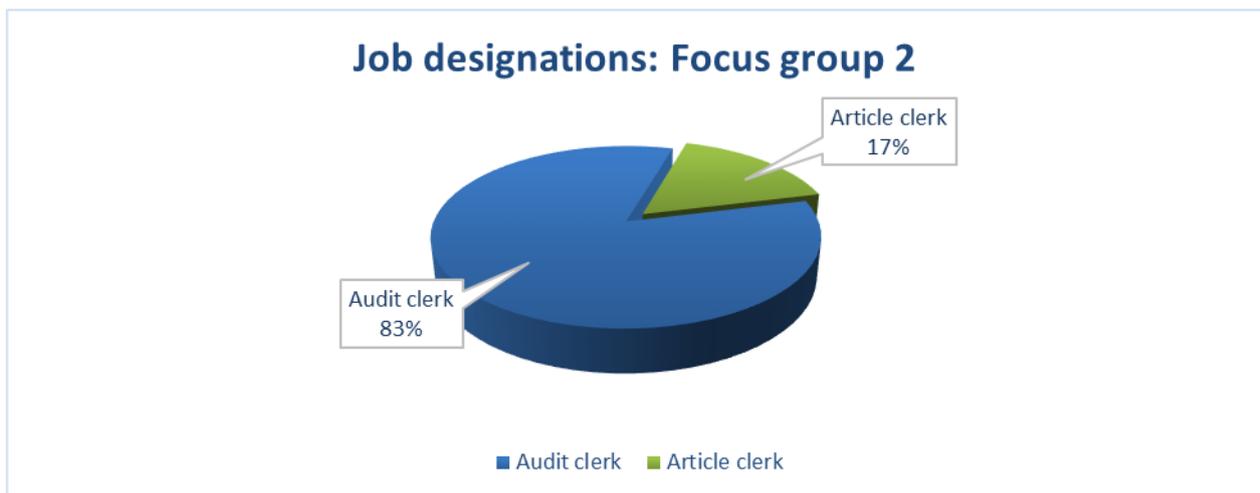
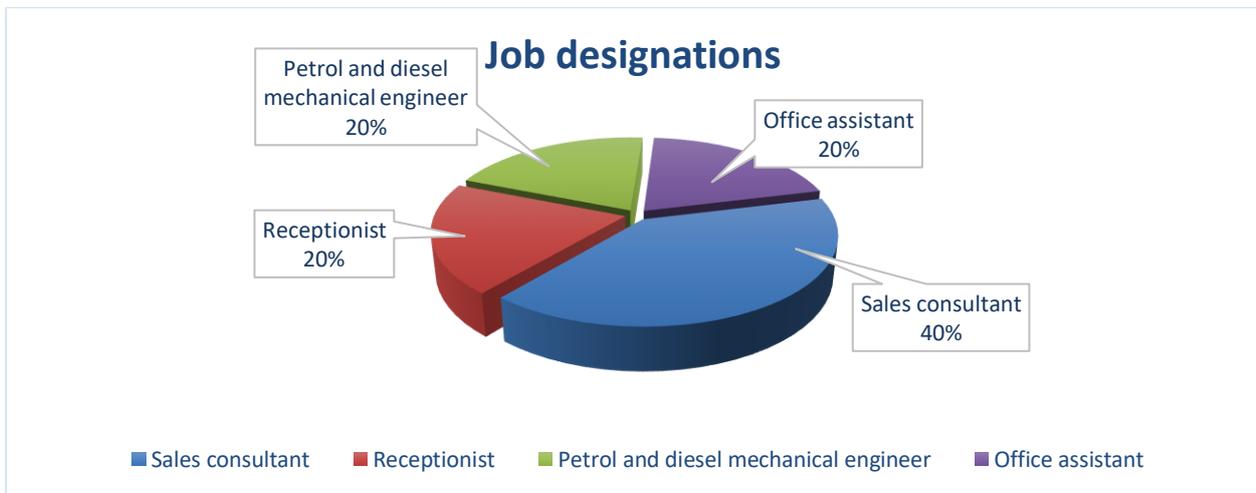


Table 4.14: Frequency Distribution: Job Designation Profile of the Third Focus Group Sample

Job Designation		Frequency	Percentage
	Sales consultant	2	40
	Receptionist	1	20
	Petrol and diesel mechanical engineer	1	20
	Office assistant	1	20
	Total	5	100

As Table 4.14 shows, the third focus group sample comprised of 40% sales consultants, 20% receptionists, 20% petrol and diesel mechanical engineers and 20% office assistants. The sample was sufficient for the research purposes as it represented a variety of jobs in the manufacturing industry.

Figure 4.14: Graphical Illustration of the Sample Distribution by Job Designation (Focus Group 3)



4.2.3 THE BIOGRAPHICAL INFORMATION DEPICTED IN INDIVIDUAL INTERVIEWS WITH MANAGERS

Tables 4.15 to 4.20 depict the biographical information of the managers. These tables are each followed by a discussion.

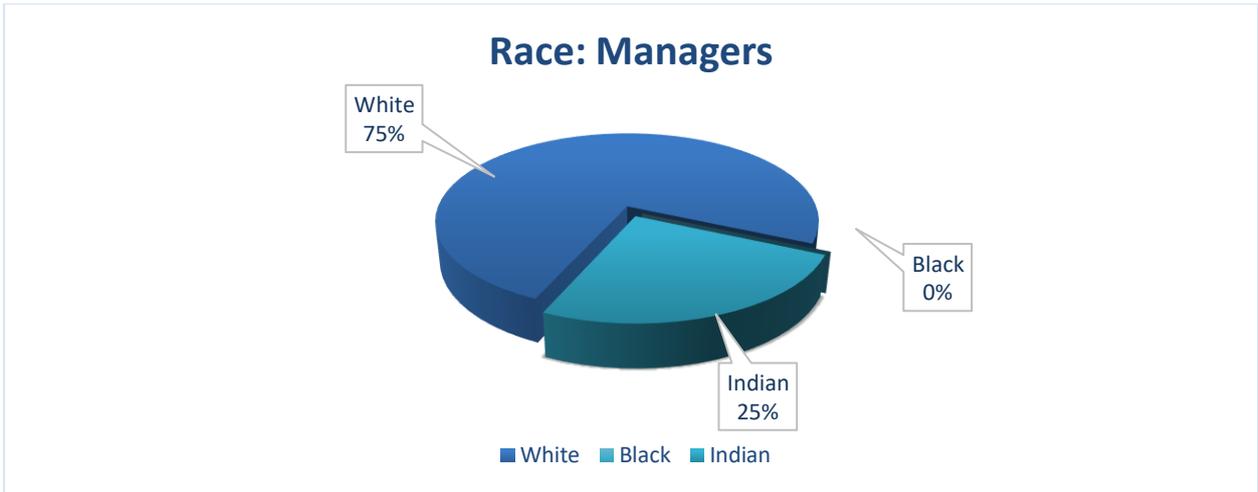
4.2.3.1 Race profile of the manager sample

Table 4.15: Frequency Distribution: Race Profile of the Manager Sample

		Frequency	Percentage
Race	White	3	75
	Black	0	0
	Indian	1	25
	Total	4	100

According to Table 4.15, the sample comprised of 75% white managers and 25% Indian managers. None of the three organisations interviewed had a black person in a management position at the time of the study. According to the 2017/2018 Employment Equity report, 87% of top management in South African organisations is white, while only 6% is black, 4% Indian and 3% coloured (Department of Labour, 2018). Hence, the sample closely represented existing statistical data of South African organisations. It should be noted here that the researcher found it challenging to obtain research participants for this study because organisations were hesitant to participate in a study which could hypothetically focus on the organisation's limited or in some cases non-existent wellness or related human resource practices.

Figure 4.15: Graphical Illustration of the Sample Distribution by Race (Managers)



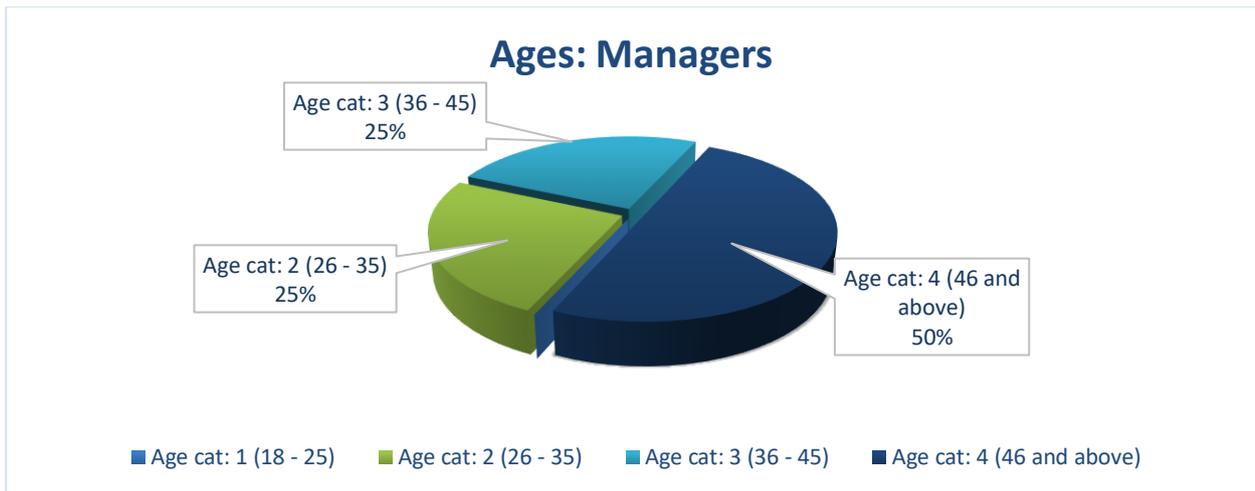
4.2.3.2 Age profile of the manager sample

Table 4.16: Frequency Distribution: Age Profile of the Manager Sample

Ages		Frequency	Percentage
	Cat 1: 18–25	0	0
	Cat 2: 26–35	1	25
	Cat 3 36–45	1	25
	Cat 4: 46 and above	2	50
	Total	4	100

According to Table 4.16, 25% of participants were between the ages of 26 and 35 years, 25% between the ages of 36 and 45 years and 50% above 46 years of age. Traditionally, to become a manager one needs appropriate work experience and often additional qualifications. Therefore, the managers interviewed were representative of higher age group categories.

Figure 4.16: Graphical Illustration of the Sample Distribution by Age (Managers)



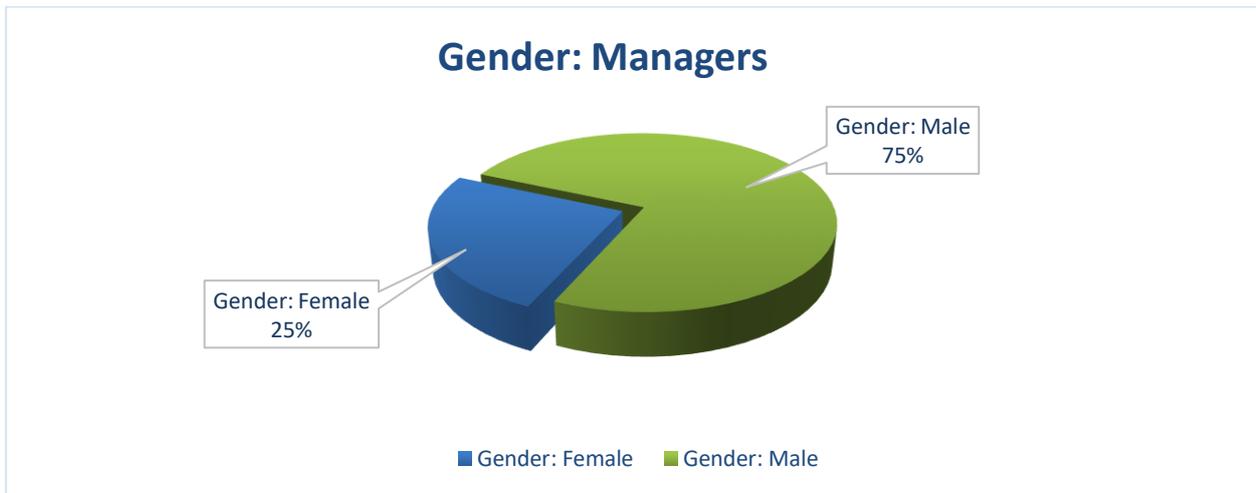
4.2.3.3 Gender profile of the manager sample

Table 4.17: Frequency Distribution: Gender Profile of the Manager Sample

Gender		Frequency	Percentage
	Female	1	25
	Male	3	75
	Total	4	100

In Table 4.17 it can be seen that the sample comprised of 25% female participants and 75% male participants. In South Africa, 87% of top management posts are held by males and only 13% by females (Department of Labour, 2018). Thus, the sample was representative of gender inequality in South African organisations.

Figure 4.17: Graphical Illustration of the Sample Distribution by Gender (Managers)



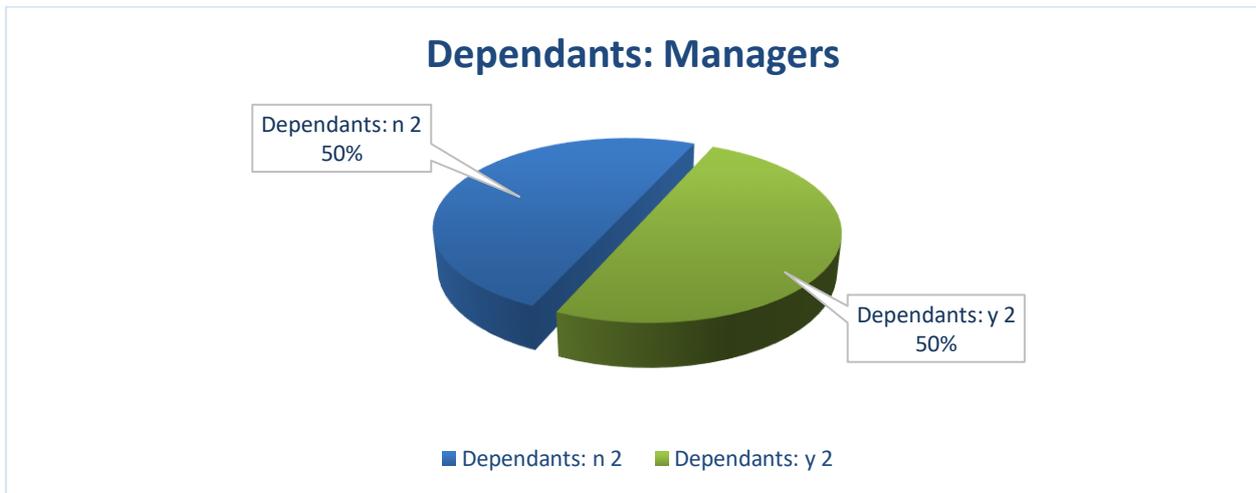
4.2.3.4 Dependant profile of the manager sample

Table 4.18: Frequency Distribution: Dependant Profile of the Manager Sample

Dependants		Frequency	Percentage
	Yes	2	50
	No	2	50
	Total	4	100

According to Table 4.18, 50% of participants had dependants while 50% did not.

Figure 4.18: Graphical Illustration of the Sample Distribution by Dependants (Managers)



4.2.3.5 Job description profile of the manager sample

Table 4.19: Frequency Distribution: Job Designation Profile of the Manager Sample

Job Designation		Frequency	Percentage
	Financial director	1	25
	Vice-principal	1	25
	Auditor	1	25
	Managing director	1	25
	Total	4	100

As indicated in Table 4.19, this sample comprised of 25% financial directors, 25% vice-principals, 25% auditors and 25% managing directors. The sample was significant for research purposes as it represented a variety of managerial positions in SMMEs.

Figure 4.19: Graphical Illustration of the Sample Distribution by Job Designation (Managers)



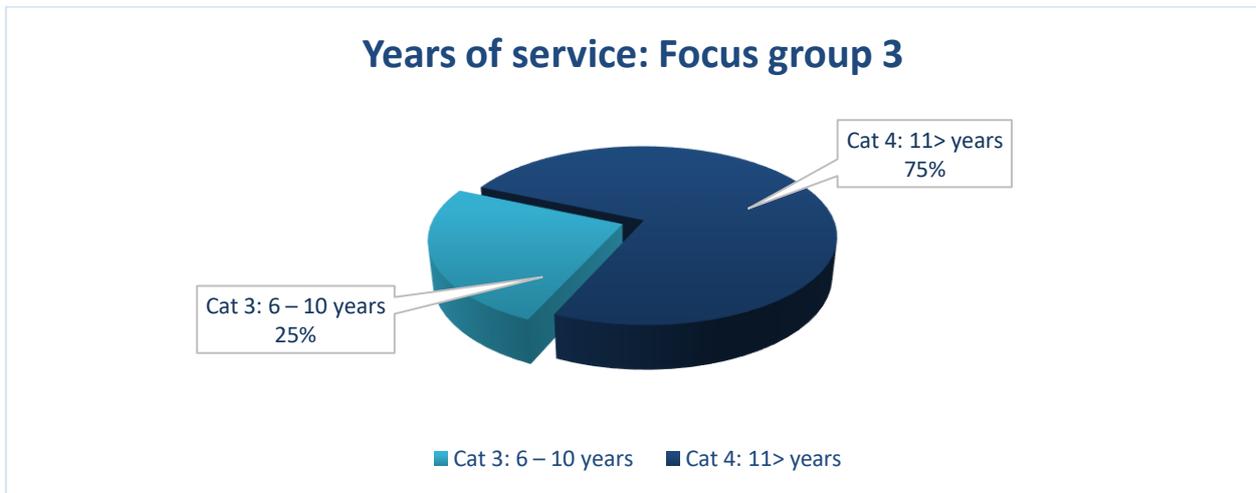
4.2.3.6 Years of service profile of the manager sample

Table 4.20: Frequency Distribution: Years of Service Profile of the Manager Sample

Years of service		Frequency	Percentage
	Cat 1: 1–2 years		0
Cat 2: 3–5 years		0	0
Cat 3: 6–10 years		1	25
Cat 4: 11 > years		3	75
Total		4	100

As shown in Table 4.20, the sample comprised of 25% participants who had been employed for six to ten years and 75% who had been employed for more than 11 years. Two of the three organisations are well-established and have been in existence for more than 30 years. The other is a relatively new organisation, established eight years ago. All three organisations applied an internal promotion strategy to promote the organisation’s employees to senior management positions and therefore all the managers had been employed for a longer period.

Figure 4.20: Graphical Illustration of the Sample Distribution by Years of Service (Managers)



4.3 THE MAIN THEMES DISCUSSED IN THE INTERVIEWS

The following main themes emerged from the participants' responses to the previously stated questions. The researcher conducted thematic data analysis and independent coding by applying a grounded theory approach to establish emerging themes. The themes and subthemes emanating from this study are included in Annexure E. The following main themes emerged:

- Theme 1: perceptions of employee wellness
- Theme 2: experience of employee wellness
- Theme 3: mechanisms towards a healthy workplace

The researcher will indicate when a main theme meets the objectives of the study.

In the following section, each of the main themes and subtheme with the associated categories will be presented and confirmed by using excerpts taken from the transcripts of the interviews. The identified themes, subthemes and categories are then compared to available literature.

4.3.1 THEME 1: PERCEPTIONS OF EMPLOYEE WELLNESS

The responses to the following questions originated and developed the theme of perceptions of employee wellness:

- What is your definition of 'wellness'?
- Can you give me examples of how you would like to be treated?
- What contributes to a happy working environment?

This theme developed into the following subthemes:

- Subtheme 1.1: a definition of employee wellness
- Subtheme 1.2: the dimensions of employee wellness

4.3.1.1 Subtheme 1.1 definition of employee wellness

The main question and responses relating to the definition of employee wellness are indicated in Table 4.21 below:

Table 4.21: Definition of Employee Wellness

Main question: What is your definition of employee wellness?	
Verbatim Evidence	Code
Participant 1: When employees are happy. They don't feel depressed to come to work every single morning; they wake up with a positive attitude to come to work. Having a positive attitude and positive outlook on life. Manager 2: Firstly, how happy they are and secondly how healthy they are and how much the company is looking after their concerns beyond normal salary or remuneration. Wellness is the state where employees can perform at their	Happiness

<p>best for the company because they are healthy and fit and just generally happy. Thus, a working environment where an employee can come and feel safe. Where they feel their work is appreciated.</p> <p>Participant 7: How you treat your staff and make sure they are happy.</p> <p>Participant 2: Being happy to excel in your work and doing what you love so that you can grow as a person.</p>	
<p>Participant 2: It includes every aspect of your work as well as your emotional side and how the company takes care of you.</p> <p>Participant 6: It's about me as a person being mentally, spiritually and physically well. Thus, anything that the organisation does to improve my life.</p> <p>Participant 7: I think it's how you treat your employees.</p> <p>Participant 8: I think it's all about taking care of your employees.</p> <p>Participant 10: I think that employee wellness is like everyone said, how you treat your employees ...</p> <p>Participant 12: What I think employee wellness is, is how you look after your employees. So, the way you treat them ...</p> <p>Participant 11: What makes me happy is the workplace relationships with your seniors and your managers as well, and other things can be like, if there is tea in the morning such things contribute to staff wellness.</p>	Treatment
<p>Participant 3: Employee wellness benefits both employees and employers. It deals with illnesses and balanced lifestyles.</p> <p>Participant 4: The wellbeing of the staff. The organisation needs to promote a healthy lifestyle and making sure everything from a safety aspect is guided ... maybe just encourage them to eat healthily and drink water.</p> <p>Participant 5: I think it relates more to the actual health of a person, making sure that you're in good health. Specific activities could be creating awareness about health, creating awareness regarding maintaining good health.</p>	Health

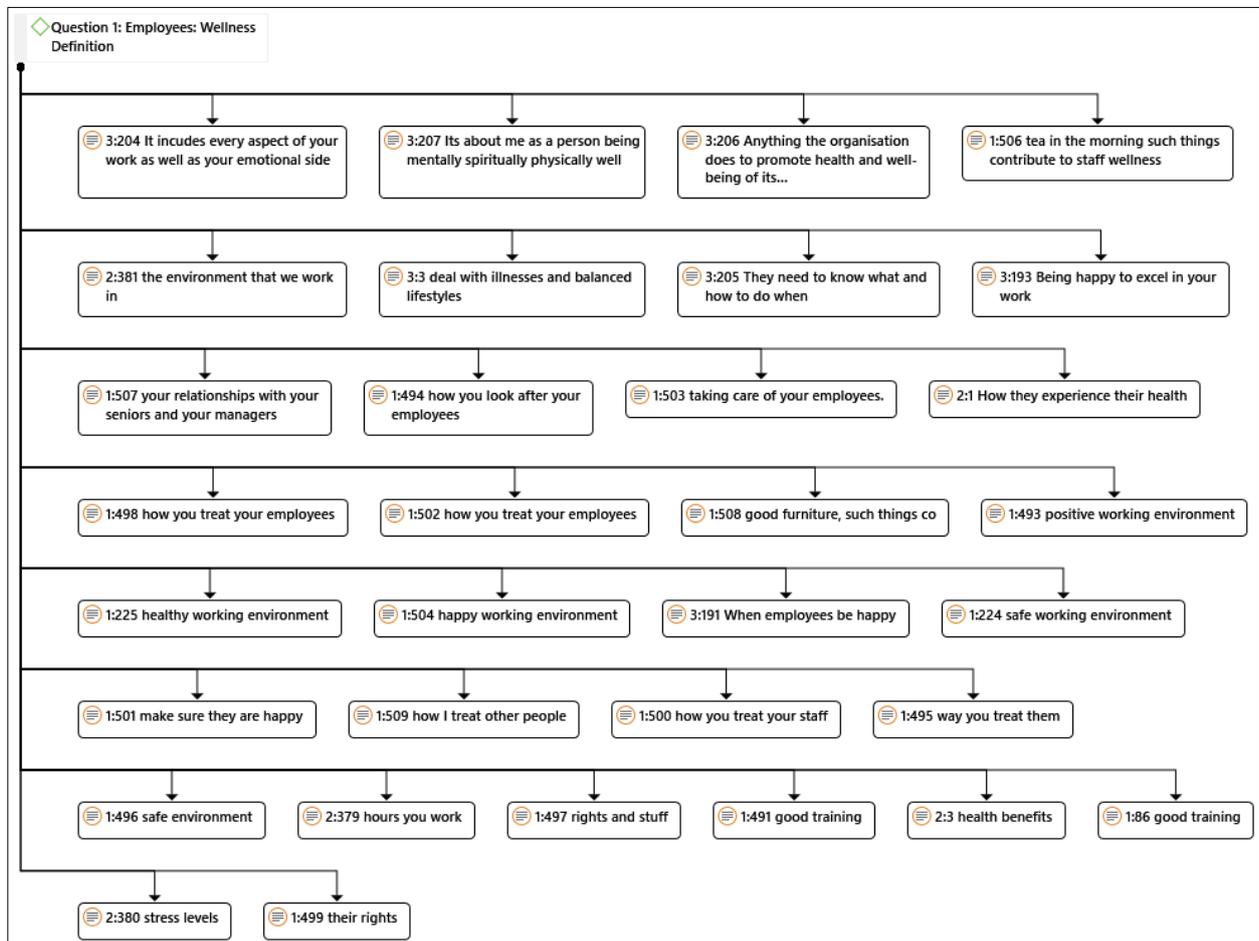
<p>Participant 17: To say like, the hours you work and the health benefits and stress levels and anything like that, that has to do with the wellness.</p> <p>Participant 11: It's about having a healthy environment.</p> <p>Participant 16: Wellness relates to the health and safety of the environment we work in.</p>	
<p>Participant 4: The organisation needs to make sure everything from a safety aspect is guided.</p> <p>Participant 5: Yes, I agree with participant 4. Safety is part of it because if you fear for your life or your life is in danger or there's a possible risk, that could impact on your wellbeing and on your health.</p> <p>Participant 6: Agree with participant 5. If your environment is not safe to work in, you are not going to be a healthy employee.</p> <p>Participant 16: Wellness relates to the health and safety of the environment we work in.</p>	Safety
<p>Participant 4: Employees need to know what to do and how to do it and when. For example, give fire training.</p> <p>Participant 10: Give good training.</p> <p>Participant 12: Give training.</p>	Training
<p>Participant 5: Anything the organisation does to promote the health and well-being of its employees such as creating awareness and promoting health and well-being. Implement any policies and organisational activities that can promote health and wellbeing.</p> <p>Participant 9: Employee wellness is what I think employees should know about their rights and stuff like that.</p> <p>Participant 14: It's about having policies in place to regulate working time, leave, etc.</p>	Policies

The information in Table 4.21 reflects the participants' perceptions of employee wellness as follows:

- Happiness is part of employee wellness (4 participants).
- Wellness relates to how employees are treated and taken care of in the workplace (7 participants).
- Wellness is about healthy lifestyles and working in a healthy environment (6 participants).
- Safety is an important aspect of employee wellness to ensure people's lives are not in danger or at risk in the workplace (4 participants).
- Employees need training to be aware of the health and safety aspect of the organisation (3 participants).
- Organisations need policies and practices in place to promote and maintain employee wellness in the organisation (3 participants).

Figure 4.21 is a graphical illustration of the direct quotations of participants to describe employee wellness. The network creator in Atlas.ti was used to create the graphic.

Figure 4.21: Graphical Illustration of the Participants' Quotes to Describe Employee Wellness



Source: Own compilation in Atlas.ti

Figure 4.22 is a graphical illustration of the most frequently used words to describe employee wellness. The word cloud illustrator in Atlas.ti was used to compile the graphic. The word cloud confirms the findings of the above network which indicates 'environment', 'treat' and 'happy' as being the most frequently used words to describe employee wellness in SMMEs.

Figure 4.22: Graphical Illustration of the Most Frequently Used Words to Define Employee Wellness



Source: Own compilation in Atlas.ti

4.3.1.2 Probing/follow-up questions and responses

The probing question and answers relating to the treatment of employees are indicated in Table 4.22.

Table 4.22: Treatment of Employees in the Workplace

Probing question: Can you explain how you would like to be treated?	
Verbatim evidence	Code
<p>Participant 8: They should look at certain things like the working environment. We should be in a healthy environment, and they should provide us with different training.</p> <p>Participant 11: What makes me happy is the relationships with my seniors and managers and if there is tea or coffee in the morning such things contribute significantly to staff happiness. If there is good furniture and clean offices.</p> <p>Participant 14: I would be happy with lesser hours to be honest and knowing if the Managing Director steps into my office he won't cut off my head about something I'm not doing right or that he builds me up instead of breaking me down.</p>	<p>Good working environments</p>
<p>Participant 1: Something fun and positive, besides the normal scope of your work.</p> <p>Participant 11: What makes me happy is the relationships with my seniors and managers and if there is tea or coffee in the morning such things contribute significantly to staff happiness. If there is good furniture and clean offices.</p>	<p>Social connectedness</p>

The results confirmed that even though employees have similar expectations of employee wellness but different experiences, they all regarded healthy and safe work environments as key priority areas.

4.3.1.3 Discussion

The researcher started the investigation by establishing the participants' perceptions of employee wellness. The participants needed to demonstrate an understanding of employee wellness to contribute positively to the study as the aim was to explore the wellness experiences of employees and managers of SMMEs. The responses confirmed

that the participants understood the concept and thus provided sufficient motivation to continue their participation.

- The results confirmed the views of various authors who argue that employee wellness is more than the absence of illness and/or disease (Burton, 2010) and that it can provide positive outcomes such as happiness and organisational commitment (Nielsen et al., 2017) (section 2.7).
- The ILO and the Global Wellness Institute (section 2.3) confirm that wellness is also about how employees are treated in the workplace and how this affects their happiness (section 2.3) in the workplace (Nielsen et al., 2017).
- Sieberhagen et al. (2011) acknowledge that the employees' state of social, physical and mental health has a significant influence on employee wellness (section 2.9.5).
- The SABPP (2014), recognises (section 2.3) employee wellness as the process of creating and maintaining an environment in which employees can perform at their peak.
- Additionally, the research results confirmed that employees and managers of SMMEs often seek caring and family-orientated environments in which they can experience a sense of belonging and social connectedness (Bureau for Economic Research, 2016) (section 2.7.3).
- The results further support the view of the Bureau for Economic Research (2016) (section 1.2.1) which argues that SMMEs in South Africa comprise a diverse group of traders, from traditional family businesses or home-based industries to street traders or backyard manufacturers and service providers, which can provide a family-orientated environment to employees.

4.3.1.4 Subtheme 1.2: dimensions of wellness

The main question and responses relating to the dimensions of wellness are set out in Table 4.23 below:

Table 4.23: Dimensions of Employee Wellness

Main question: What contributes to a happy work environment?	
Verbatim evidence	Code
<p>Manager 2: I almost want a stress-free environment, but the stress-free environment is not realistic. Thus, a working environment where an employee can come and feel safe. Where they feel their work is appreciated. Where they feel that there's a sense of camaraderie. They become friends with their colleagues. Stuff like understanding what is expected from them.</p> <p>Participant 10: I would say a positive working environment where you don't feel the tension, there's no animosity, everyone works together very well, I think that will contribute to a happy working environment.</p> <p>Participant 12: Stress-free environment where you feel supported in your work.</p>	<p>Stress-free environment</p>
<p>Participant 7: Colleagues improve workplace happiness.</p> <p>Participant 8, 9 10: I agree [chorus]</p> <p>Participant 11: What makes me happy is the workplace relationships with your seniors and your managers as well, and other things can be like, if there is tea in the morning such things contribute to staff wellness.</p> <p>Participant 12: Colleagues improve workplace happiness.</p> <p>Participants 2: Social interactions with colleagues.</p> <p>Participants 4: Getting to know my colleagues.</p>	<p>Workplace relationship</p>

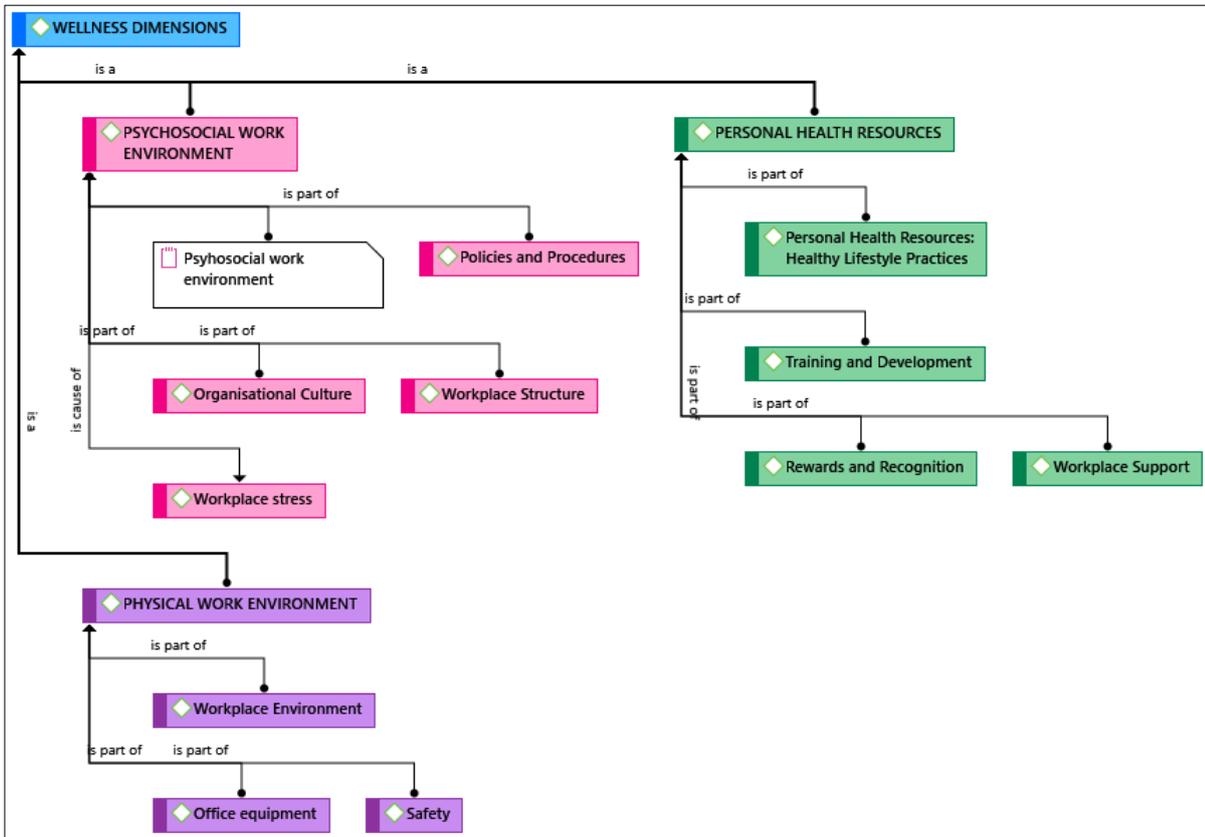
The information in Table 4.23 reflects the participants' perceptions of a happy work environment as follows:

- A stress-free environment relieves psychological factors such as distress, anxiety and emotional exhaustion and promotes positive outcomes such as a sense of purpose, social connectedness and feeling valued (3 participants).
- Employees value good workplace relationships with colleagues (8 participants).

The content analysis function in Atlas.ti was used to determine the wellness experiences of employees and managers of SMMEs. Based on these experiences, a dimension of a wellness model for SMMEs was constructed.

Figure 4.23 illustrates how the three 'families' or main ideas of wellness experiences and outcomes were created on Atlas.ti, namely, the physical work environment, the psychosocial work environment, and the personal health resources as they apply to wellness practices in SMMEs. The families were subdivided into numerous subcategories showing their links to the main categories. The psychosocial work environment includes subcategories such as workplace policies and procedures, organisational culture, structure and workplace stress, while the physical work environment includes workplace environment, office equipment and safety aspects. Finally, the personal health resources include subcategories such as healthy lifestyle practices, training and development, reward and recognition, and workplace support.

**Figure 4.23: Graphical Illustration of the Dimensions of Employee Wellness
Compiled from the Interviews**



Source: Own compilation in Atlas.ti

4.3.1.5 Probing/follow-up questions and responses

The probing questions and answers relating to how employees would like to be taken care of in the workplace are indicated in Table 4.24.

Table 4.24: Taking Care of Employees in the Workplace

Probing question: Can you explain how you would like to be taken care of in the workplace?	
Verbatim evidence	Code
<p>Participants 2: Making sure employees have the right equipment to do their work productively, and good lighting in offices are important aspects. You can't expect an employee to be productive if they don't have the right tools.</p> <p>Participants 6: Equipment must be in working order such as chairs, computer screens that don't flicker, sufficient lighting, clean air to breathe, and a good ventilated room. Sufficient windows, air conditioners must be serviced regularly, and heaters for when it's cold. A healthy working environment that's conducive to working.</p>	Physical work environment
<p>Participants 3: The organisation needs a dedicated person or committee for wellness.</p>	Someone to listen

Although the participants highlighted the emotional dimension of wellness, which refers to how employees want to be 'taken care of' and 'treated' in the workplace, the participants viewed these aspects in the light of how the organisation responds to employees' requests for basic needs such as providing safe and healthy workplace conditions. The participants placed great emphasis on being treated well in order to display a positive attitude towards their work.

Most of the participants mentioned the physical work environment in which the SMME operates and how they needed 'someone' to listen to their concerns and to be felt 'taken care of'. The participants mentioned that working with old and broken equipment is demoralising because it makes them feel unsupported.

4.3.1.6 Discussion

The participants recognised three of the WHO's (section 2.7.1) influences on wellness in their workplace, namely, physical work environment, personal health resources and psychosocial work environment. Figure 2.4 (section 2.7.1) and Figure 4.23 above are graphical representations of the avenues of influence (Burton, 2010) on employee wellness. The participants mentioned aspects of the physical work environment that affect their physical and mental wellness such as broken furniture, lack of good workplace policies and structures. The participants agreed that aspects of the psychosocial work environment, such as organisational culture, has an effect on their mental and physical wellness. They also highlighted the inconsistent application and protection of worker rights, poor organisation and a lack of support for work-life balance.

Some of the participants acknowledged the efforts their organisations make to encourage healthy lifestyles and to maintain a safe and supportive environment.

The results confirm the views of the following authors:

- Hoffmann et al. (2007) and the National Institute of Wellness (2018) (section 2.9.5) argue that wellness should be approached holistically and that wellness needs can be identified by referring to the dimensions of wellness.
- Robbins et al. (2016) identify organisational factors as a cause for stress (section 2.9.5). Interpersonal demands, on the other hand, are pressures created by other employees due to a lack of social support from colleagues or management and poor interpersonal relationships.
- Robbins et al. (2016) (section 2.9.5) argue that job dissatisfaction leads to lower emotional wellbeing.

4.3.2 THEME 2: EXPERIENCES OF WELLNESS

The responses to the following questions during the focus group interviews and individual interviews were used to develop the theme, experiences of wellness, and the subthemes discussed below:

- In your opinion, what are the best aspects of your organisation's wellness activities/practices?
- In your opinion, what is the least-liked aspect of your organisation's wellness activities/practices?
- Do you believe your organisation supports your wellness?
- Do you believe having wellness practices benefits your organisation?
- What do you think is a limiting factor in the successful implementation of employee wellness practices in your organisation?
- What aspects of your business determines the nature of your employee wellness practices?

From this theme the following subthemes were developed:

- Subtheme 2.1: the experience of employee wellness in SMMEs
- Subtheme 2.2: support of employee wellness in SMMEs
- Subtheme 2.3: benefits of employee wellness practices in SMMEs
- Subtheme 2.4: constraints to employee wellness practices in SMMEs

4.3.2.1 Subtheme 2.1: the experience of employee wellness in SMMEs

The main question and the responses relating to the experience of wellness in SMMEs are indicated in Table 4.25.

Table 4.25: Experience of Employee Wellness in SMMEs

Main question: What are the best-liked aspects of your organisation's wellness practices?	
Verbatim Evidence	Code
<p>Participant 1: Study leave. The fact that my organisation listens and cares. Also, they fix things immediately when we point it out to them, for example a broken chair.</p> <p>Participant 2: Study leave and study bursary. Social interaction with colleagues.</p> <p>Participant 4: Weekends away. Getting to know your colleagues away from work. Free coffee, sugar and milk.</p> <p>Participant 6: Study bursary. Gym. Nurse check-ups. Personal support. Training. Good coffee. Company transport. Incentive bonuses. Team building activities.</p> <p>Participant 9: Like if you need a loan for your studies and you go to the partners, you sometimes get it ...</p>	Benefits
<p>Participant 3: My organisation cares, support and listens to my personal problems and really shows compassion. They supported me through difficult times in my life.</p> <p>Participant 1: The fact that my organisation listens and cares. Also, they fix things immediately when we point it out to them, for example a broken chair.</p>	Emotional support
<p>Participant 2: Social interaction with colleagues.</p> <p>Participant 5: Social activities in smaller groups for example small team building activities. Created a sense of belonging, created comradery, group cohesion, made you feel part of the family.</p>	Social connectedness

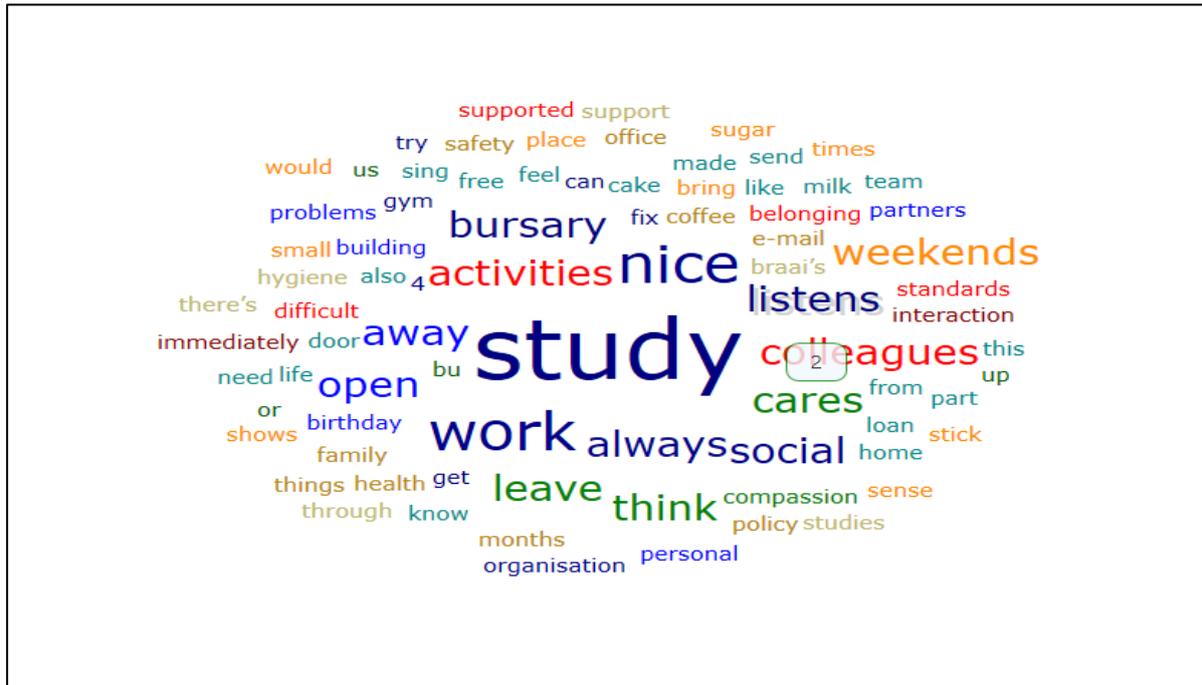
<p>Participant 12: What's also nice is that on the weekends this office is always open. So, you don't have to work at home; there's always a place that you can go and do your work. We have braais every like 3 or 4 months where we all come outside ...</p> <p>Participant 4: Weekends away. Getting to know your colleagues away from work.</p> <p>Participant 11: Open door policy. Top management sends you a nice e-mail on your birthday, and people wish you a happy birthday.</p>	
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The information in Table 4.25 reflects the participants' perceptions of the best-liked aspects of their organisation's employee wellness practices as follows:

- Employees value benefits such as study leave and bursaries (5 participants).
- Employees need emotional support from organisations (2 participants).
- Social activities develop social engagement (5 participants).

Figure 4.24 illustrates the words 'study', 'activities', 'listens' and 'colleagues' as being the words most shared by participants. The word cloud was created in Atlas.ti to illustrate the most commonly used words when employees described their best-liked aspects of employee wellness practices in their organisations.

Figure 4.24: Graphical Illustration of a Word Cloud for Best-liked Employee Wellness Practices



Source: Own compilation in Atlas.ti

Table 4.26: Least-liked Aspects of Employee Wellness Practices

Main question: What are the least-liked aspects of your organisation's wellness practices?	
Verbatim evidence	Code
Participant 14: We don't take lunch, we don't take tea times. Participant 17: Also, our contracts even say that we are not supposed to work more than 10 hours, and everyone complained because you can't change the basic conditions of employment but unfortunately that's just how it is, we work overtime every day, and don't get paid for it.	Infringement on personal time
Participant 17: Eight people resigned last month. I have gotten into trouble for socialising with my colleagues. Participant 10: I do feel that we can benefit from staff training. We can benefit from team building because a lot of us work in set teams, so we don't necessarily have a good relationship with other people.	Bad workplace relationships

<p>Participant 15: Bad workplace relationships.</p>	
<p>Participant 8: ... where we sit now, the office is dirty; we can't really work properly. The tables are broken, the carpets are dirty and dusty. I don't know what's going on.</p> <p>Participants 11: I have been with a colleague when there was a rat in her office. She went and complained so that she can get some rat poison and management told her there is no money to buy rat poison.</p> <p>Participants 12: We get home with spider bites. Two years ago, when they painted the whole office, we had to ask for almost six months almost every day before management gave in to our request.</p> <p>Participants 10: I am not sure if it is spider bites, but it comes from the carpets and you are prone to get hay fever and stuff from the dirty environment and carpets.</p> <p>Participants 9: You can't even invite your friends to come to your office because you are ashamed of your dirty environment.</p>	<p>Unhygienic workplace</p>
<p>Participant 12: We want at least someone to be there to listen to us when we have problems and not ask six months to paint offices or 11 months to fix laptops.</p> <p>Participant 8: If you go and complain no one really listens to you. It's like you are here to work, not to be concerned about the dirty office and stuff like that.</p> <p>Participant 17: I told management that things need to change because people are unhappy. I was told that he's not here to make people happy and that anyone who's unhappy should leave.</p> <p>Participant 16: Like everyone says, we are scared to voice our opinions because of the feedback we get.</p> <p>Participant 7: You feel upset when you work long hours and have to sit on a broken chair for 9, 10, 11 hours.</p>	<p>Lack of support</p>

<p>Participant 17: I think my main thing that I've experienced is loyalty because you want to work in a place where you feel safe in your job, not threatened to be fired. You want to feel okay, you're secure, this is your job, you have it. So, you're not like getting fired in a week or so for something insignificant. So, what will happen is you literally feel on edge all the time because anything happens and then it's like you're gone because you are not doing your job.</p> <p>Participant 13: I spent maybe two hours installing CCTV cameras. It's like there's not a sense of trust from management's side. For every minute of every day, at the end of the day we need to hand in a report.</p> <p>Participant 15: The situations is so bad now, we place doctor's appointment confirmations on the group chat just to show that we are going to the doctor.</p>	<p>Lack of trust</p>
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The information in Table 4.26 reflects the participants' least-liked aspects employee wellness in their organisation. These can be summarised as follows:

- Employees dislike it when organisations infringe on their personal time (2 participants).
- Employees need social interaction to develop good working relationships (3 participants).
- Employees dislike working in unhygienic and unsafe conditions (5 participants).
- Employees feel unsupported when management does not respond to their problems or concerns (5 participants).
- Employees need to feel trusted in the workplace (3 participants).

Table 4.27: Infringement on Employees' Personal Time

Probing question: Do you take breaks?	
Verbatim evidence	Code
<p>Participant 15: We're running around like headless chickens some days. Whenever you get a chance, you take your lunch.</p> <p>Participant 14: We are expected to work the entire day and also through lunchtimes or to take your lunch at your desk.</p> <p>Participant 16: We do have break times, but it seems like it only applies to the guys working outside. In here we do not have lunch times because not everyone can go for lunch at twelve then there is not going to be anyone here or nobody to answer the phones. We don't have specific lunchtimes (where it's a rule) when you can go and do whatever you want.</p> <p>Participant 13: Our contracts say we are supposed to work 8 hours per day, but unfortunately that's not how it is. We don't get paid overtime, and it's not safe to work late in this area. I have to drive home alone.</p>	<p>Infringement on personal time</p>

The participants indicated that lunch breaks are often interrupted or not taken, and management often expects employees to work overtime without compensation.

The results showed that although the SMMEs provide for tea breaks and lunch breaks employees could often not take these breaks because the break times were either not scheduled, or relief staff were not available, or employees were too overworked to take lunch breaks. In addition, employees are expected to work more than the contractual 40 hours per week, and young girls are expected to work until late in the evenings and leave the premises in unsafe conditions.

Table 4.28: The Need for Socialising at Work

Probing question: Why do you feel a need to socialise at work?	
Verbatim evidence	Code
<p>Participant 1: It is an opportunity to talk about social life issues instead of work-related issues.</p> <p>Participant 12: Like that's how you get to know people.</p> <p>Participant 11: ... so with team building your colleagues and managers, you get to know each other better ... you get to communicate about things you don't really get to when you are just stressed about work.</p> <p>Participant 5: We need social activities in smaller groups, for example small team building activities, to feel a sense of belonging, experience camaraderie, group cohesion, and to make us feel part of the family.</p>	Build relationships
<p>Participant 5: We need social activities in smaller groups, for example small team building activities, to feel a sense of belonging, experience camaraderie, group cohesion, and to make us feel part of the family.</p> <p>Participant 11: ... so with team building your colleagues and managers, you get to know each other better.</p> <p>Participant 4: It improves teamwork because you get to know them better.</p>	Encourages teamwork
<p>Participant 12: I mean, we all have really good friendships, and we've actually all made bonds together. At times, this place does make you frustrated, but there are some points when you sit here you want to come back to this office, after visiting a client. That's how I feel sometimes; I do want to come back to this office because it does make me happy.</p> <p>Participant 5: We have coffee in the mornings and lunch together in our lunch room. We laugh a lot and share many personal thoughts and ideas.</p> <p>Manager 1: I look forward to having my morning coffee with my colleagues. We laugh a lot and often brainstorm during</p>	Makes job enjoyable

<p>this time. We also discuss personal matters and become each other's support systems.</p> <p>Manager 2: I need the coffee breaks with colleagues to break the monotony of administrative work.</p> <p>Participant 2: It's fun to laugh and talk to colleagues about other things besides work so that they understand you better and that makes your job more enjoyable.</p>	
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The information in Table 4.28 reflects the participants' expectations of socialising in the workplace as follows:

- Socialising builds relationships by increasing loyalty and raising morale (4 participants).
- People enjoy working with familiar people or people they are comfortable with, and thus socialising improves teamwork (3 participants).
- Socialising with colleagues makes the job enjoyable (5 participants).

The participants all agreed that social interaction with colleagues played a significant role in their overall happiness at work. Most of the participants mentioned that good workplace relationships are often a reason for staying with the organisation no matter how negative other aspects of the jobs or the organisation are. Various participants also expressed their desire to work in an environment that complies with the legal requirements, is hygienic and promotes good communication. It is clear from the data collected that participants have a desire to work in healthy, harmonious workplaces.

The participants described their experiences of wellness by focusing on the significance of building good working relationships. The participants valued social interactions and indicated that unhealthy workplace practices have a negative impact on their morale and productivity. The participants who experienced good and trusting workplace relationships expressed a sense of belonging, high engagement and strong loyalty to their organisations.

4.3.2.3 Discussion

The results confirmed that employees expect SMMEs to take responsibility for improving employee wellness. However, the WHO supports the notion that employees should be encouraged to play an active role in taking responsible for their own health and wellbeing (The HR Hub, 2016). Burton (2010:16) defines a healthy workplace as "[a] place where everyone works together to achieve an agreed vision for the health and wellness of workers". Participants identified various social activities that developed a sense of belonging and discussed various dimensions of their organisation's wellness practices such as ergonomics, hygienic factors and trust that affect their performance and their overall wellbeing.

These findings support the view of Robbins et al. (2016), who maintain that poor interpersonal relationships, especially among employees with high social needs, often affect productivity. These authors (Robbins et al., 2016) encourage social engagement to improve productivity (section 2.7.3).

The results further support the views of the following authors with regard to positive experiences of employee wellness:

- Swanepoel et al. (2014) (section 2.8) confirm that employers need to show concern for employees.
- Koch (2018) (section 2.4) argues that happy employees display improved mental health and are more socially connected through close working relationships.
- Burton (2010) (section 2.7.1) maintains that the physical work environment, the psychosocial work environment and personal health resources all have an influence on employee wellness.
- Swarnalatha and Prasanna (2012) (section 2.7.3) maintain that engaged employees hold a positive attitude about the organisation and its values.

- Everett (2011) and Knight and Haslam (2010) (sections 2.7.3 and 2.9.4) maintain that healthy working environments encourage employee engagement and improve productivity (section 2.4).
- Robbins et al. (2013) (section 2.9.5) state that organisational factors such as interpersonal demands, organisational structure and leadership have a significant effect on employee wellness.

4.3.2.4 Subtheme 2.2: support for employee wellness in SMMEs

The main question and the responses relating to the support that employees receive from their organisations are depicted in Table 4.29.

Table 4.29: Support for Employee Wellness in SMMEs

Main question: Do you believe your organisation supports your wellness?	
Verbatim evidence	Code
<p>Participant 1: Yes, the fact that my organisation listens and cares. Also, they fix things immediately when we point it out to them, for example a broken chair. I believe they are supportive. For example, it comes close to the definition of ergonomics how everything is set up. It is perfect and up to par. We hardly have back pains. The managers are very supportive if you are overloaded with work they do something about it. They listen to us. They take our suggestions and opinions into consideration.</p> <p>Participant 3: My organisation cares, support and listens to our concerns.</p>	<p>Listen and cares</p>
<p>Participant 3: My organisation really shows compassion. They supported me through difficult times in my life.</p> <p>Participant 5: My organisation makes a conscious effort to support my wellness with the resources that they have at their disposal. We have an open-door policy. Management is very sensitive to staff needs.</p>	<p>Compassion</p>

Participant 11: There are sympathy and support at the same time.	
<p>Participant 4: Yes, they support us. They address our complaints.</p> <p>Participant 1: Yes, I believe they are. For example, it comes close to the definition of ergonomics how everything is set up. It is perfect and up to par. We hardly have back pains. The managers are very supportive, if you are overloaded with work they do something about it. They listen to us. They take our suggestions and opinions into consideration.</p> <p>Participant 2: Our organisation is very supportive, and we have good wellness. They give you opportunity to grow as an employee. They acknowledge hard work by having staff awards at the end of the year. I can speak to a manager and raise my concern when I need to. They listen and look into your problems and find ways to improve your situation.</p> <p>Participant 3: Yes, my organisation supports me. We get incentive, tools skill and social support. When we have a problem, we know who to go to. They provide us with skills to improve ourselves.</p>	Address problems

The information in Table 4.29 reflects the participants' experiences of support in the workplace and may be summarised as follows:

- Organisations can support employees in the workplace by showing concern and taking care of employees' problems (2 participants).
- Employees feel supported in the workplace when organisations show compassion towards employees (3 participants).
- Employees feel supported in the workplace when organisations address their problems (4 participants).

The participants who received support from their organisations indicated that they were engaged in the activities of the organisation and enjoyed being part of the organisation.

4.3.2.5 Discussion

- The results support the views of Hackbart et al. (2015) (section 2.7.3), who maintain that employees who experience support in the workplace are often happier and therefore more engaged.
- Vance (2004) (section 2.7.3) maintains that engaged employees experience a sense of purpose and belonging and, when they feel supported, they often become a vital part of the organisation.
- Noe et al. (2015) (section 2.7.3) maintain that employees' engagement is influenced by how managers treat them.
- Grobler et al. (2015) (section 2.7.2) maintain that SMMEs need strong leadership and management to inspire employees to achieve organisational goals. Hence, managers play a significant role in developing happy and productive workplaces (Koch, 2018).

4.3.2.6 Probing/follow-up question and responses

The probing question and the answers related to who in the organisation should take care of employees' problems or concerns are indicated in Table 4.30.

Table 4.30: Taking Care of Employees in the Workplace

Probing question: Who do you think should be responsible for listening to your problems or concerns?	
Verbatim evidence	Code
<p>Participant 11: We need good leadership and management. It's not like we want to be fancy, but we need an HR person to take care of our problems. Sometimes you just want to burst out crying, but you don't have someone to talk to. The unsafe and unhealthy environment we work in is also a big concern for us.</p> <p>Participant 3: The organisation needs a dedicated person or committee for wellness.</p> <p>Participant 4: Needs a wellness committee. Needs someone/group responsible for wellness.</p>	<p>HR person</p>

Table 4.31: Aspects in which employees did not feel supported

Probing question: Can you give examples of when you did not feel supported?	
Verbatim evidence	Code
<p>Participant 9: When we need help. You don't really know whom to go to. So, you going to go to one person and then that person will send you to another one, and you don't know what to do.</p> <p>Participant 16: I can't speak to our MD. He's got more of an open-door policy to the people that have been here the longest, which is not right.</p> <p>Participant 13: We can't go directly to the MD. We must go to HR and make an appointment with the MD. And then they told us we could only go to the MD with problems if the money value of the problem is above R5000.</p> <p>Participant 11: I don't have to go through a port of call to the secretary, the secretary takes it to the middle management. No, I want to be able to go straight to a manager's door, and</p>	<p>Lack of communication</p>

<p>then he should try and find a solution to my problem. We are quite nervous about asking for things. We are just scared to do this.</p> <p>Participant 12: I want at least someone to be there to listen to us when we have problems. I need someone to help me instead of doing it myself ... Two years ago, when they painted the whole office, I mean we had to ask for like six months – we were in that office asking every day for paint, and they finally did it.</p>	
<p>Participant 10: You don't want to feel like you need to sort out your own IT issues or your own. We are not capable of doing it, so it would be great if someone was there to assist us with that, instead of us having to figure it out on our own.</p> <p>Participant 12: Our laptops are freezing every 5 seconds and if we go to speak to someone I want them to be able to fix it for us, like quickly, not wait like 3 months or 6 months.</p>	<p>Equipment not working</p>
<p>Participant 11: A co-worker had a rat in her office. She went and complained so that she can get some rat poison and then she got the answer that there is no money to buy rat poison. I would be nice to have an HR person out there, like not just because we want to be fancy, but we have problems and then sometimes you just want to burst out crying, but you don't have someone to talk to.</p> <p>Participant 8: The tables are broken; the carpet is dirty. I don't know what's going on, and if you go and complain about it, no one really listens to you. It's like you are here to work, not to be concerned about the office, dirty office and stuff like that. We get nasty answers when we ask for things. Therefore, the next time you are scared because you're going to be told about money and everything.</p> <p>Participant 12: Especially when you get home with spider bites.</p>	<p>Unhealthy environment</p>

Participant 10: I am not sure what it is, spider bites that come from the carpets. You are prone to get hay fever and stuff in a dirty environment.	
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The information in Table 4.31 reflects the participants' experiences of neglect in the workplace as follows:

- Employees feel unsupported when there is a lack of communication in the workplace (5 participants).
- Employees feel unsupported in the workplace when they have to work with broken or outdated equipment (2 participants).
- Employees feel unsupported when they have to work in an unhealthy environment (4 participants).

The participants of the two organisations acknowledged that they did not feel supported in the workplace. The participants from one of these SMMEs experienced 'sick' systems which manifested in bullying tactics which, among other things, were aimed at keeping employees in marginalised positions. The participants of this SMME were further subjected to unhealthy leadership practices which culminated in destructive workplace relationships. These participants suffered from poor workplace communication which caused anti-social behaviour and emotional disturbances among employees.

4.3.2.7 Discussion

The results of the data analysis showed that unsupported employees were significantly unhappier than employees who believed their organisation supported their wellness.

These results confirm the views of the following authors:

- White and Schoonover-Shoffner (2016) (section 2.8) identify three elements of unhealthy workplaces, including 'sick' systems, unhealthy leaders and

dysfunctional colleagues. The unsupported participants were exposed to unfavourable environments (section 2.8) in which dysfunctional and highly stressful interactions were normal (Tastan, 2017).

- Grobler et al. (2011) (section 2.9.5) argue that workplaces can become "stress pools" unless management assists employees to cope with their environment.
- Noe et al. (2015) (section 2.9) maintain that managers have to be able to communicate effectively with employees from a wide variety of cultural backgrounds to create an environment in which employees feel comfortable sharing ideas.
- Noe et al. (2015) (section 2.9.4) also maintain that management should create a positive environment for human resources by ensuring that HRM practices comply with legislative requirements such as the OHSA.

4.3.2.8 Subtheme 2.3: benefits of employee wellness practices in SMMEs

In Chapter 1 (section 1.5), the research objectives were stated, namely, to explore how managers and employees in SMMEs experience wellness practices, as well as to develop an understanding of the need for wellness practices in SMMEs. The need for wellness practices may be determined by investigating the benefits of employee wellness in SMMEs.

The main question and responses relating to employee wellness benefits in SMMEs are highlighted in Table 4.32.

Table 4.32: Benefits of Employee Wellness Practices in SMMEs

Main question: Do you believe having employee wellness practices benefits your organisation?	
Verbatim evidence	Code
Manager 1: Yes, I do believe it benefits our organisation. In particular, the activities that are promoting health and well-	

<p>being in a workplace. It's very fine line if you say for a small company that consist of 28 people vs 150, financially for us as a small company, it's not if you are taking in consideration or all the cost involved in having employee wellness. It's a lot of money but in some instances also like activities what we do. We can take our staff for staff going away and team building.</p> <p>Manager 2: I believe it can definitely influence the organisation well. If somebody already feels safe coming to work that's one less thing to worry about. Yes, I believe it can contribute as a part but not as the only thing.</p> <p>Manager 3: Definitely. So, this not only brings people together, but you get to know the people and by knowing them outside the offices, besides what their knowledge is inside the office and stuff like that, you get a better understanding of people and things.</p>	<p>Improves social engagement</p>
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The information in Table 4.32 reflects the participants' experiences regarding the benefits of wellness practices in SMMEs as follows:

- SMMEs can benefit from wellness practices as they improve social engagement and social connectedness (3 participants).

Although the managers did not directly list the benefits of employee wellness practices, it was evident from the interviews and discussions that:

- the employees of organisations A and B (working for managers 1 to 3) felt valued, respected and cared for. The employees indicated that they were happy and experienced social connectedness with their colleagues and managers. The biographical information indicated that these two organisations experienced higher retention rates.

- the employees of organisation C (working for managers 4) indicated that they felt unsupported and undervalued. This organisation experienced high absenteeism rates and extremely low retention rates. Eight employees resigned from the organisation during the month in which the research interviews were conducted.

These results support the views of the following authors regarding the benefits of employee wellness practices:

- Tastan (2017) (section 2.8) supports the notion that environments in which employees felt valued, respected and cared for can lead to lower absenteeism rates, increased employee retention rates, raised productivity levels and lower stress levels.
- Nielsen et al. (2017) (section 2.3) and Koch (2018) (section 2.4) maintain that healthy employees assist organisations to maintain their competitive advantage. Happy employees are more productive, take less time off work, demonstrate improved mental health and are better socially connected.

4.3.2.9 Probing/follow-up question and responses

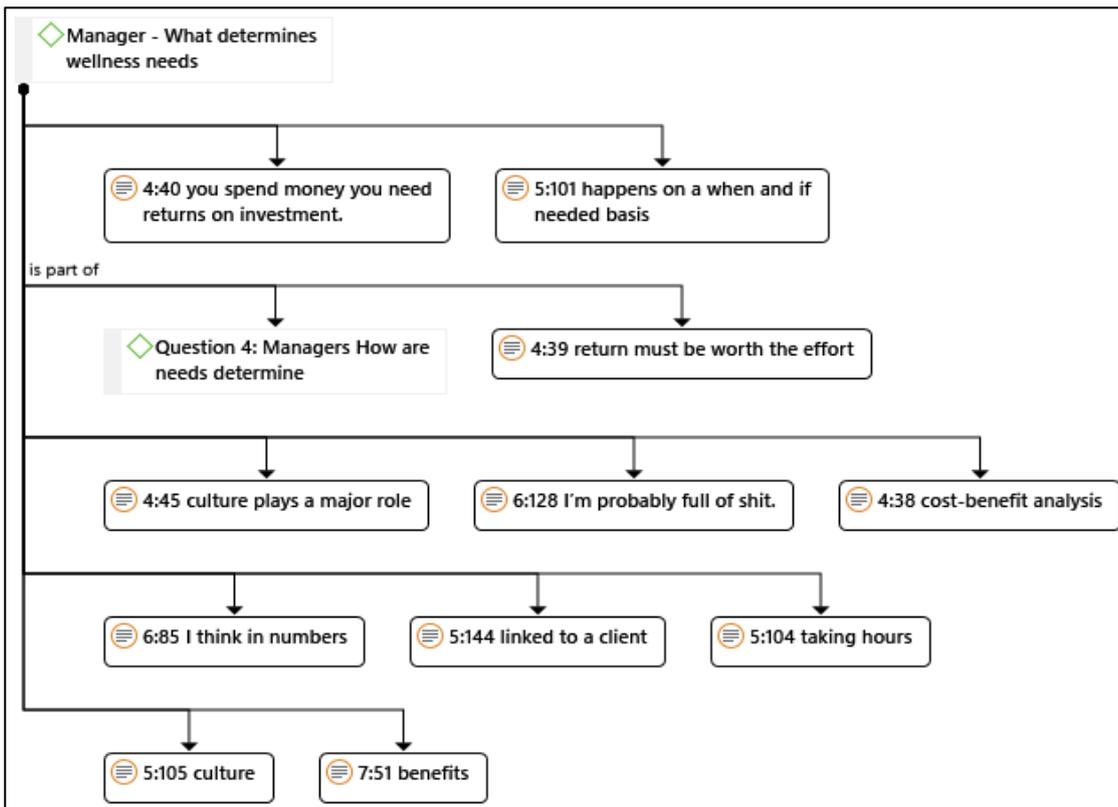
The probing question and answers relating to manager 4's social connectedness with his employees are indicated in Table 4.33. The reason for investigating this matter further was the high staff turnover experienced by this organisation and the fact that the employees communicated that they felt disengaged from their work. Eight employees resigned from the organisation in the month prior to the research study.

Table 4.33: Social Engagement

Probing question: Do you believe your employees need you to make them feel valued?	
Verbatim evidence	Code
Manager 4: So, my task is not a management task, my task is to do product development, and I deal with a lot of key accounts. So, I would by far find that that's non-emotional, that it is very focused and objective driven. So, any emotion that I would need to apply would be related to my customers. I know when it is their birthdays and I can recall all important aspects of their life.	Customer-orientated
Manager 4: I feel that it is not an adequate use of my time, to spend my time and my energy on building relationships with my staff and keeping them happy. I'm not people focused. I do not see a need to socialise with my staff.	No need for socialisation

Figure 4.26 provides a graphical illustration of the managers' quotes to show how wellness needs are determined in the organisation.

Figure 4.26: Graphical Illustration of the Managers' Quotes to Describe what Determines Wellness Needs



Source: Own compilation in Atlas.ti

The information in Figure 4.26 reflects the participants' perceptions of how the organisations determine their wellness needs:

- The organisation's employee wellness needs are determined by examining the organisation's finances (3 participants).
- A cost-benefit analysis will determine the viability of employee wellness (2 participants).
- Organisational culture plays a role in determining the wellness needs (2 participants).

The researcher asked the managers to explain what determines their organisation's employee wellness needs. In response, managers 1 and 3 mentioned that cultural

diversity and the age of the workforce determine these needs. Manager 1 was of the view that:

'Besides our financial position, we have to consider the different cultures and age groups within the company.'

Manager 4 could not identify what determines his organisation's wellness needs. He noted that he thought in numbers and did not give much thought to wellness practices. Manager 2 argued that his organisation takes a financial stance on employee wellness practices:

'It's a cost-benefit analysis for us. If we had to spend R200 000 on employee wellness every month, it would not be beneficial, because no matter how much more productive the employees become, we will not gain that amount back in profits. If employee wellness doesn't cost the company anything, it's worth doing. The return must be worth the effort. If you spend money you need returns on investment.'

Three of the four managers agreed that their organisation's employee wellness needs are determined by examining the organisation's finances. Two participants noted that a needs analysis should be conducted to determine whether the activities would increase productivity and in turn improve their organisations' profitability. These two participants acknowledged that employee wellness is much needed in their organisations and they were willing to allocate financial resources to support their employees' wellness for the benefit of their organisations.

One manager totally disagreed with this statement, indicating that employee wellness practices were not needed in his organisation, despite experiencing excessively high staff turnover rates. He blamed his frugality on that fact that there were no financial resources available for employee wellness practices and stated that he saw no value or benefit in investing in human resources. The manager indicated that financial investments and social interaction are reserved for his organisation's clients.

4.3.2.10 *Subtheme 2.4: constraints to employee wellness practices in SMMEs*

In Chapter 2 (section 2.4) the benefits of implementing employee wellness practices in SMMEs were discussed. The participants were cognisant of the many factors that influence the implementation of wellness practices in their organisations and argued that the constraints to wellness were more likely to be due to limitations other than financial constraints. The employees in the focus group interviews provided many examples of wellness practices that could be implemented without affecting the financial position of the SMMEs. to compare responses, the researcher posed a similar question to managers (see Table 4.34 and Table 4.35).

The main question and responses relating to the factors that limit the successful implementation of wellness practices in SMMEs are indicated in Table 4.34.

Table 4.34: Constraints to Employee Wellness from the Employees’ Point of View

Main question: What factor do you think limits the successful implementation of employee wellness practices in your organisation?	
Verbatim evidence	Code
<p>Participant 10: With certain people, I think there is a lack of caring, and they feel that maybe making profits is more important than the small things they can do for us that will contribute to our wellness. However, they only want more profits.</p> <p>Participant 8: We are scared to ask for anything from top management because you’re going to be told about money and everything. Clean, neat offices and functional equipment is just not a priority to them.</p> <p>Participant 11: The problems is leadership. Because they authorise anything and everything. Top management has ‘old school’ beliefs. We are here to do a job.</p>	<p>Leadership style</p>

<p>Participant 7: I think teambuilding for them is a waste of money. That's why they are not doing it. We didn't even have a year-end function last year.</p>	
<p>Participant 1: Wellness activities needs to planned and continuous so that we can experience the great benefits which are to improve our happiness.</p> <p>Participant 3: The organisation needs a dedicated person or committee for wellness.</p> <p>Participant 5: They do not happen on a consistent basis. They are not continuous, and therefore they do not have the beneficial effects. They are not long lasting. There is a lack of planning and time constraints. Because we are working at full capacity, there is no time to plan a wellness event or activity, and that's problematic because when you're working under stress, you need an activity to unwind. That's when your health starts suffering, and that is when you need wellness interventions. Responsibility needs to be assigned to a specific person or committee.</p> <p>Participant 4: Agree with participants 5 and 3 we need consistency. Many of these wellness activities worked well in the past, so we need them back. We need a wellness committee, someone/group responsible for wellness to make sure the activities happen on a continuous basis.</p>	<p>Lack of resources</p>
<p>Participant 3: The wellness activities need to be taken more seriously.</p> <p>Participant 17: Some things are difficult to plan and implement in our business, but it's not like there aren't finances. It's just not important to top management.</p> <p>Participant 6: I agree with participant 3. SMMEs must concentrate on certain areas of wellness and make that a priority. For example, there's a lot of stuff they can do that will not cost them anything or very little. Participant 5 mentioned organisations can play motivational videos, provide links to</p>	<p>Unimportant to management</p>

websites, ask people to come to the organisation to provide free talks about health and safety issues.	
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The information in Table 4.34 reflects the participants' experiences regarding the constraints to wellness from the employees' point of view as follows:

- Leaders are responsible for not implementing sufficient employee wellness practices as they have 'old school' ideas and do not value wellness practices (4 participants).
- SMMEs experience a lack of resources for implementing employee wellness practices (4 participants).
- SMMEs do not take employee employee wellness seriously (3 participants).

The participants mentioned various factors that they believed limited the successful implementation of wellness practices in their organisations.

For example, most of the participants believed one limiting factor could be a lack of planning and the time constraints experienced in their organisations. A significant number of participants believed that because wellness is not a priority in their organisations, planning and time constraints become limiting factors. Only a few participants noted that leadership style could be a limiting factor.

Table 4.35: Constraints to Employee Wellness from the Managers' Point of View

Main question: What factor do you think limits the successful implementation of employee wellness practices in your organisation?	
Verbatim evidence	Code
Manager 4: My frugality keeps me from spending money on unnecessary things. Manager 1: Financial resources limit you to what you can do and offer your staff.	Financial constraints

<p>Manager 2: It's a cost-benefit analysis for me. If we had to spend R200 000 every month on employee wellness it will not be beneficial because no matter how much more productive the employees become, we will not gain that amount back in profits. In the end it's going to be a cost exercise. If employee wellness doesn't cost the company anything its worth doing. The return must be worth the effort. If you spend money you need returns on investment.</p>	
<p>Manager 3: Time constraints and not enough human resources to plan wellness.</p> <p>Manager 1: We don't have a dedicated person at this stage and therefore our activities are not planned. We have three people that are doing certain things and that take responsibility for wellness but that is not good enough.</p>	<p>Human Resource Constraints</p>

The information in Table 4.35 reflects the constraints to wellness from the managers' point of view as follows:

- Financial constraints affect the implementation of employee wellness practices in SMMEs (3 participants).
- Human resource constraints affect the implementation of employee wellness practices in SMMEs (2 participants).

The managers could not fully substantiate their reasoning behind the constraints to employee wellness in their organisations, except for stating that it is mostly dependent on the financial position of the organisation.

One manager declared that he was not interested in building good, solid working relationships with his staff and reserved his 'people skills' for his clients. This manager also indicated that he did not wish to employ women with children as he needed staff who would be dedicated to their work. This manager did not recognise any value attached to

implementing employee wellness practices and argued that providing new, state-of-the-art office facilities should be sufficient to maintain a productive workforce.

Manager 4 noted:

'It is important in my mind to put management in place that can fulfil a supporting role. I would prefer not to be taxed with everyone's emotions. I will function better without any of these distractions.'

4.3.3 THEME 3: MECHANISMS TOWARDS A HEALTHY WORKPLACE

The responses to the following questions that were posed during the focus group interviews and the individual interviews were used to develop the following themes:

- Which employee wellness practices, do you believe, should be mandatory for every SMME if financial or time constraints were not an issue?
- Can you name an employee wellness activity or practice that is so important to you that you would be willing to leave your current organisation to join another organisation that has this practice or activity in place?
- What suggestions can you make for improving your organisation's employee wellness practices?

From this theme the following subthemes emerged:

Subtheme 3.1: solutions to unhealthy workplaces

Subtheme 3.2: improving employee wellness practices in SMMEs

Subtheme 3.3: employee retention in SMMEs

4.3.3.1 Subtheme 3.1: solutions to unhealthy workplaces

The main question and the responses relating to the solutions to unhealthy workplaces are indicated in Table 4.36.

Table 4.36: Solutions to Unhealthy Workplaces

Main question: Which employee wellness practices, do you believe, should be mandatory for every SMME if financial or time constraints were not an issue?	
Verbatim evidence:	Code:
<p>Manager 3: I think SMMEs should have solid structures in place which include good policies and procedures for wellness.</p> <p>Manager 1: Organisations should have wellness policies in place to guide implementation.</p>	<p>Policies and procedures</p>
<p>Manager 1: A safe and secure workplace. The health part plays an important role for me in order for employees to be educated to know what effects health can have on their performance.</p> <p>Manager 2: A safe working environment. Thus, an environment in which employees do not feel that their life or limb is in danger for whatever reason.</p>	<p>Safe work environments</p>

The information in Table 4.36 reflects the participants' suggestions for mandatory employee wellness practices in SMMEs as follows:

- SMMEs must have solid structures, policies and procedures in place to promote employee wellness (2 participants).
- SMMEs must provide safe and healthy working environments to improve productivity (2 participants).

4.3.3.2 Probing/follow-up questions and responses

The probing question and the answers relating to whether managers believed the suggested mandatory wellness practices could be implemented in their organisations are indicated in Table 4.37.

Table 4.37: Mandatory Employee Wellness Practices

Probing question: Do you believe it is possible to implement these suggested practices in your organisation?"	
Verbatim evidence	Code
Manager 2: Yes, I believe we can. Manager 1: Yes, we will be able to.	Implementation of mandatory practices
Manager 3: That's a difficult one. The partners are very old school; it's very difficult to implement new stuff.	Difficult to change

Manager 3, who worked in the unhygienic workplace, was oblivious to the conditions in which the employees had to operate. He did not mention that the environment posed a health risk to the employees or that the building was not in compliance with safety regulations.

4.3.3.3 Discussion

- The findings support the literature discussed in section 2.9 – strategies to prevent unhealthy workplaces.
- Leppink (2015) and Swanepoel et al. (2014) (section 2.9.2) state that Health and Safety policies can ensure healthy workplace conditions and work-life balance by laying down rules. Such rules also help to prevent workplace accidents and illnesses.
- Sieberhagen et al. (2011) (section 2.9.3) maintain that organisations are responsible for creating and maintaining working conditions free from avoidable hazards that can lead to injury, illness or death.

4.3.3.4 Subtheme 3.2: improving employee wellness practices in SMMEs

The main question and the responses relating to the improvement of employee wellness practices in SMMEs are indicated in Table 4.38.

Table 4.38: Improving Wellness Practices in SMMEs

Main question: What suggestions can you make for improving your organisation's employee wellness practices?	
Verbatim evidence	Code
<p>Manager 1: We could look at improving our benefits such as a pension.</p> <p>Manager 4: I have a very high staff turnover because I think it has to do with the salary bracket that we offer. I honestly believe the cause of the problem is in my frugality or because I end up employing people in lower pay scales. If I employ people of a higher calibre that might solve my problem, but that's of course also not a guarantee. But that would most probably double my pay scale. I know for a fact that our bonuses are not where it should be.</p>	<p>Improve benefits</p>
<p>Manager 3: I think it's probably structures. If there are structures in place, there would be less time spent on certain individual tasks and stuff. Because we don't have good structures more work is placed onto certain people and our stress levels increase, which is a major problem of our work and industry.</p> <p>Manager 2: I'm not sure there is much more that we can do right now. For me, as a manager, I need to balance profits and productivity. Unless we dedicate a specific person to wellness in our organisation. Planning may also help. If employees can identify practices that will be suitable for our diverse workforce, then the organisation may look into it.</p>	<p>Improve organisational structures</p>

The information in Table 4.38 reflects the participants' suggestions for improving wellness in their SMMEs. These are summarised as follows:

- Improving benefits could improve employee wellness in SMMEs (2 participants).

- Improving organisational structures could improve employee wellness in SMMEs (2 participants).

4.3.3.5 Probing/follow-up questions and responses

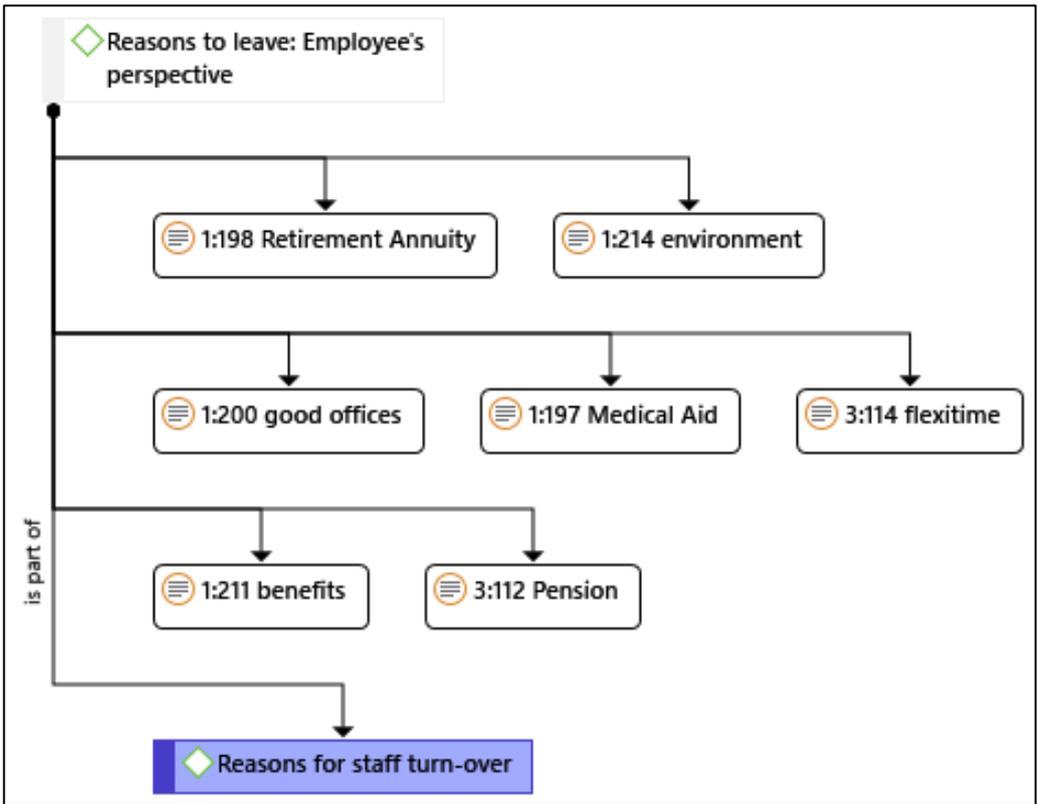
The probing question and the answers relating to employee turnover in SMMEs are indicated in Table 4.39.

Table 4.39: Employee Turnover in SMMEs

Probing question: Can you name a wellness activity or practice that is so important to you that you would be willing to leave your current organisation to join another organisation that has this practice or activity in place?	
Verbatim evidence	Code
<p>Participant 6: I stay because I feel valued as an employee. Pension and medical is important, but I wouldn't leave my company as there are more positives.</p> <p>Participant 2: I will not leave the company due to bursary benefits and caring attitude of owners.</p> <p>Participant 12: If we are under pressure, and we ask our boss, he provides someone to help us. That's one good thing about this office. He also cares about our problems and helps us where he can.</p> <p>Participant 5: There are many wellness activities in this organisation that would make me stay because it creates loyalty. But even though I have a sense of loyalty and a sense of belonging at this stage something like flexitime would make me consider moving to another company.</p>	Feeling valued
<p>Participant 10: Medical aid, retirement annuity.</p> <p>Participant 7: Yes, I agree with medical aid because medical aid is expensive and it's something that you need.</p>	Benefits

Participant 12: I think medical aid, retirement and also a cleaner environment. Coffee, nice coffee.	
Participant 5: Flexitime is important to me.	

Figure 4.27: Graphical Illustration of Employees' Quotes – Reasons to Leave Employment



Source: Own compilation

The management and employees had opposing ideas about what they believed should be improved in their organisations in order to achieve employee wellness. The managers believed that improvements in organisational structures and benefits such as pension and salaries could improve employee wellness in their organisations. However, the employees identified a need for improved working conditions.

4.3.3.6 Discussion

Every business and industry are unique, and therefore the challenge lies in identifying employees' need in a specific organisation. These results support the views of Swanepoel et al. (2014) (section 2.8), who argue that an increasingly important aspect of employee wellness is the need for employers to show concern for their employees. This includes identifying improvements to employee wellness practices.

4.3.3.7 Subtheme 3.3: employee retention in SMMEs

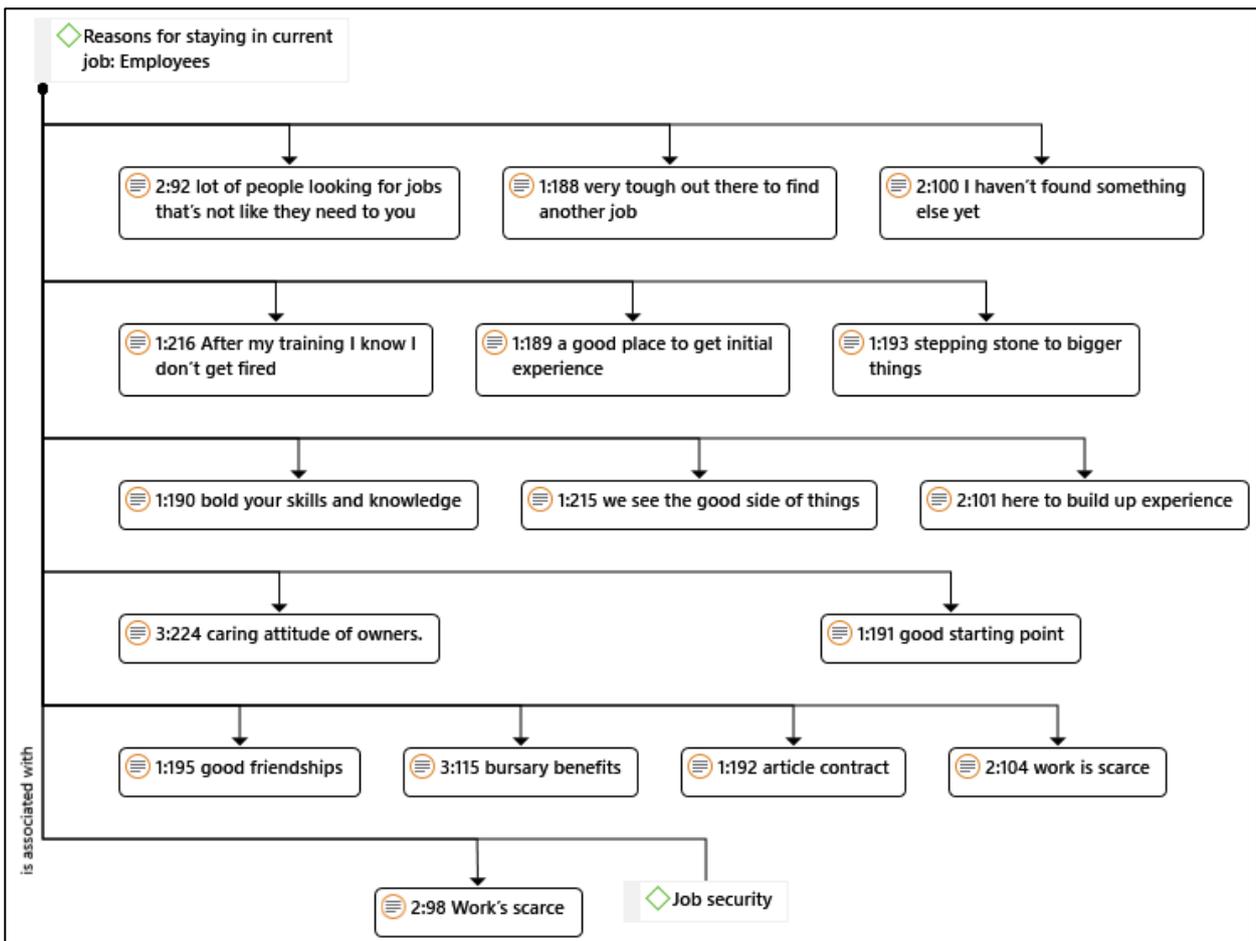
The main question and the responses relating to employee retention in SMMEs are indicated in Table 4.40.

Table 4.40: Employee Retention in SMMEs

Main question: What are the reasons for staying in your organisation?	
Verbatim evidence	Code
<p>Participant 12: I wouldn't leave here because of the people. We all have good friendships, and we've made bonds together.</p> <p>Participant 16: What I've been taught here I can take it somewhere else, but I like the people here. I don't know if I'm a sucker for pain, but I'm hoping someday we can change the environment for the better. I would like to stick around and see if we can do that.</p> <p>Participant 2: Social interaction with colleagues.</p> <p>Participant 4: Weekends away. Getting to know your colleagues away from work. Free coffee, sugar and milk.</p>	Colleagues
<p>Participant 6: Pension and medical is important, but I wouldn't leave my company as there are more positives. I have a sense of loyalty and belonging.</p>	Caring attitude

<p>Participant 11: We still stay because we see the good side of things, we are not worried about retrenchments. After my training I know I don't get fired, I still have a job here.</p> <p>Participant 2: ... caring attitude of owners.</p>	
<p>Participant 1: We get good study leave.</p> <p>Participant 2: I will not leave the company due to bursary benefits and caring attitude of owners.</p> <p>Participant 6: We get study bursaries. We have a gym on the premises. We've had nurse check-ups. We get personal support. Regular training that benefit our work. Good coffee. Incentive bonuses. We have regular team building activities.</p>	Benefits
<p>Participant 15: Work is scarce. I don't have other options. I don't have a choice but to stay.</p> <p>Participant 13: Because I haven't found something else yet.</p> <p>Participant 10: It's very tough out there to find another job.</p> <p>Participant 17: I have no other options, work is scarce.</p>	No other options
<p>Participant 10: This is a good place to get initial experience and to build your skills and knowledge.</p> <p>Participant 14: I'm just here to build up experience. It's difficult to get work without experience.</p>	Need experience

Figure 4.28: Graphical Illustration of Reasons for Staying in Employment



Source: Own compilation

The information in Table 4.40 and Figure 4.28 reflects the participants' reasons for not leaving the employ of their current organisation as follows:

- Good working relationships with colleagues provides sufficient reason to stay with an organisation (4 participants).
- Caring attitudes of employers and managers often provides motivation to stay with an organisation (3 participants).
- Good benefits can motivate employees to stay (3 participants).
- In countries with high unemployment rates, it is often difficult to obtain alternative work (4 participants).

- Employees stay with organisations that provide good work experiences (2 participants).

4.3.3.8 Probing/follow-up questions and responses

The probing question and the answers relating to solutions to employee wellness problems are indicated in Table 4.41.

Table 4.41: Solutions to Employee Wellness Problems

Probing question: Do you believe your organisation can find solutions to your wellness problems?	
Verbatim evidence	Code
<p>Manager 1: Yes, our biggest challenge is that we don't have a dedicated HR person to take care of our employees' wellness. We are three directors in the organisation, and each one tries to take responsibility for certain activities or practices, but because the activities are not planned, they happen sporadically.</p> <p>Manager 4: I honestly believe the challenge lies in my frugality or the cause of the problem is in my frugality because I end up employing people in a lower pay scale. If I most probably doubled my pay scale, I am assuming now, I would employ a higher calibre of person, but that's of course also not a guarantee. I need to focus my attention more on wellness.</p>	<p>Prioritise wellness</p>

Manager 4 was unaware of the reasons for his employees' unhappiness, in particular the fact that none of the reasons related to financial rewards or compensation.

Although management and employees had opposing ideas about what needs to change to improve employee wellness, all participants agreed that there was more reason to stay than to leave – the positive outweighed the negative. The expectations of participants in

SMMEs showed that solutions could be found without affecting the profitability of the organisation. The major theme regarding solutions voiced by employees was that they wanted organisations to create awareness about the importance of health and safety in order to feel valued and cared for.

4.3.3.9 Discussion

The results confirmed that although every business and industry is unique, employees in SMMEs have similar expectations regarding employee wellness practices. Even though every organisation in the study had unique challenges to overcome, the participants provided similar solutions for addressing the challenges.

- The results support the views of Booyesen and Els (2014), Guest (2017), Lewis (2016) and McDaid and Park (2011) (section 2.9), who suggest implementing strategies to support healthy workplaces and promoting awareness about the importance of social and mental wellness as a possible solution to unhealthy workplaces.

4.4 SUMMARY

The data were systematically interpreted to identify significant concepts, categories and recurring themes. Subsequently, data that were considered insignificant were discarded. The data were then compared to the literature review to support the interpretation and understanding of employee wellness practices in SMMEs.

In the next chapter, the conclusions and limitations of the study will be discussed, and recommendations will be made for practice and for future research.

CHAPTER 5 : CONCLUSIONS, LIMITATIONS AND RECOMMENDATIONS

5.1 INTRODUCTION

This chapter deals with the conclusions drawn from this study. In addition, the limitations of the research are discussed together with recommendations for implementing employee wellness practices in SMMEs and suggestions for minimising the constraints to employee wellness practices. The chapter also briefly discusses the possibility of conducting further research related to this topic.

The findings and recommendations are based on the perceptions and experiences of 17 employees and four managers employed at three different SMMEs in various economic sectors in the Gauteng region.

The research objectives of the study were as follows:

- Main objective: to explore the experiences of employees and managers in SMMEs regarding employee wellness practices in Gauteng.
- Objective two: to explore the need for employee wellness practices in SMMEs.

To address the research problem, a literature review was conducted to examine the existing literature on the topic of employee wellness. This review was used to build a conceptual framework for employee wellness practices in order to produce reliable research findings. A research problem was identified, and research objectives were subsequently formulated. Non-probability sampling was applied as the qualitative nature of the research meant that the statistical principle of randomness was not applicable. The researcher employed two non-probability sample selection techniques, namely, theoretical and purposive sampling, to identify 21 participants for the focus groups and the individual interviews. These were conducted in order to gather relevant information for addressing the research objectives.

Circling reality was used to sample a number of participants in three different organisations and to achieve greater diversity in terms of opinions and perceptions to

portray a stable view of the participants' experiences. The three main themes that emerged during the focus groups with employees and the individual interviews with managers were the participants' perception of employee wellness; the participants' experience of employee wellness and mechanisms towards a healthy workplace. A number of subthemes subsequently emerged from the main themes (Annexure E). Finally, guidelines were formulated for transferability.

Four criteria were used in the pursuit of trustworthiness, as proposed by Guba (1981): credibility, transferability, dependability and confirmability. Trustworthiness relates to the reliability of the results and whether the research study is scientifically sound.

5.2 CONCLUSIONS

From the results presented and discussed in Chapter 4, a number of conclusions were drawn in relation to the research objectives. These conclusions will now be discussed according to the identified themes.

5.2.1 CONCLUSIONS RELATING TO THE PARTICIPANTS' PERCEPTIONS OF EMPLOYEE WELLNESS

5.2.1.1 Perceptions of the definition of employee wellness (subtheme 1.1)

Participants perceived employee wellness to be how people are treated and cared for in the workplace (section 4.3.1.1). The participants linked employee wellness either to a social or an emotional dimension of wellness. All participants agreed that healthy and safe work environments must be prioritised. These views are supported by the literature reviewed for this work, where the definition of employee wellness is comprehensively discussed, and which also supports the results.

Organisations should make employees feel valued and cared for so as to enable them to become productive and engaged in the organisation's activities. The evidence provided by the literature suggests that organisations flourish when employees are happy, healthy, and productive.

During the interviews, the researcher observed that happy employees were often the resilient employees and managers who could withstand or recover from demanding situations. These resilient employees not only identified less than ideal conditions but also discussed various appreciated employee wellness practices that are often overlooked in organisations.

5.2.1.2 Perceptions of the dimensions of employee wellness (subtheme 1.2)

It is concluded that the participants were aware of the different dimensions of employee wellness. The subtheme developed around two dimensions of wellness – the psychosocial work environment and personal health resources (section 4.3.1.4). The participants' perceptions on these employee wellness dimensions supported the findings in the literature.

Close relationships with management contribute to the overall happiness of employees. SMMEs are encouraged to provide stress-free environments to relieve psychological factors such as distress, anxiety and emotional exhaustion and promote positive experiences such as feeling valued and socially connected within a safe and secure environment.

Although this study and other similar studies of wellness suggest that social support is a greater predictor of happiness than any other factor (Anchor, 2010), the problem with linking happiness to wellness is that happiness is often closely linked to the process of social comparison (Ungar, 2014). The employees in all three organisations compared their wellness practices to superior organisations and thus experienced a sense of inequity.

5.2.2 CONCLUSIONS RELATING TO THE PARTICIPANTS' EXPERIENCE OF WELLNESS

5.2.2.1 Experiencing employee wellness in the workplace (subtheme 2.1)

It is concluded (sections 4.3.2.1) that although the participants experienced some positive wellness practices which they appreciated such as the study benefits, emotional support, and social activities, there were far more negative experiences that participants particularly disliked such as infringement on their personal time, unhealthy working relationships, unhygienic workplace conditions, unsupported workplaces, and mistrust.

The participants from all three organisations were able to recognise areas in need of change although the participants from one organisation found it difficult to discuss employee wellness initiatives or experiences, possibly because they were negatively inclined towards the organisation and thus preferred to discuss the organisation's shortcomings. However, the participants' perceptions and experiences of employee wellness in the workplace agreed with the discussion in the literature review.

If SMMEs are to develop trusting relationships with employees, they have to provide healthy and safe work environments. It was found in this study that employees who feel emotionally and physically supported are happier and healthier, and therefore take less time off work. In addition, employees of SMMEs voiced a need to socialise in the workplace because it helps build trusting relationships, encourages teamwork, and makes work more enjoyable.

5.2.2.2 Support of employee wellness in SMMEs (subtheme 2.2)

It was concluded (section 4.3.2.4) that most of the employees in the focus groups did not feel supported in terms of their wellness in the workplace either because the organisations did not show concern for employees or they did not act on employees' concerns. SMMEs could show their support for employee wellness by:

- listening to employees' concerns

- taking care of employees' problems
- providing a safe and healthy work environment.

Employees feel unsupported and abandoned in the workplace if their emotional and physical needs are not met. Accordingly, SMMEs need to appoint responsible people to support employee wellness and address work-related problems and challenges.

SMMEs need to align their strategic goals with employee wellness objectives in order to gain a competitive advantage. Because the owners of the accounting and the manufacturing organisations are purely profit driven, they do not recognise the way employee wellness could improve the profitability of their organisations.

5.2.2.3 Benefits of employee wellness in SMMEs (subtheme 2.3)

It is concluded from the interviews with the managers and the employees that SMMEs experience the following benefits from employee wellness in the workplace (section 4.3.2.8). These findings are in agreement with those in the literature:

- lower absenteeism rates
- higher retention rates
- happier employees.

Organisations improve their competitive advantage when employees are happier, healthier and regularly at work. The results obtained from the interviews held with employees and managers of the manufacturing organisation show that high staff turnover has a negative impact on employee morale. It is also more beneficial for SMMEs to allocate financial resources to employee wellness practices that help retain staff rather than it would be to constantly train and develop new staff.

5.2.2.4 Constraints to employee wellness practices in SMMEs (subtheme 2.4)

From the results discussed in section 4.3.2.10, the following constraints may be identified that hinder the implementation of employee wellness practices in SMMEs:

- leadership style
- lack of resources
- lack of serious intent
- financial constraints
- human resource constraints
- lack of personal interest.

Although the managers and employees identified various constraints to implementing wellness practices, the participants agreed that the constraints identified are unique to every small business. Therefore, unique solutions should be found to address these constraints. The participants further agreed that even though SMMEs do not have the same financial and human resources available as their corporate counterparts, most of the employee wellness activities and practices valued by employees do not require financial resources.

It was interesting to note that although the employees of the accounting firm experienced unhealthy workplace conditions, they still enjoyed working in the organisation because they felt valued by management. The employees indicated that they felt at liberty to discuss personal problems and believed that management had their wellbeing at heart.

5.2.3 CONCLUSIONS RELATING TO THE MECHANISMS TOWARDS A HEALTHY WORKPLACE

5.2.3.1 Conclusions relating to the solutions to unhealthy workplaces (subtheme 3.1)

It was concluded in section 4.3.3.1 that the following solutions should be implemented to prevent unhealthy workplaces. These findings agree with the findings in the literature:

- policies and procedures for healthy and safe working conditions
- training.

Health and Safety policies lay down the rules and regulations aimed at preventing workplace accidents and illnesses (Finnemore & Joubert, 2013). Accordingly, it was found in this study that SMMEs are responsible for creating and maintaining working conditions that are free from hazards that could lead to injury, illness or death. Thus, employees should receive regular training to comply with safety aspects in the workplace.

5.2.3.2 Improving employee wellness practices (subtheme 3.2)

It was concluded (section 4.3.3.4) that the following improvements could be implemented to prevent unhealthy workplaces. These agree with the findings in the literature:

- improvement to work structures
- improvements to benefits.

Improvements to organisational benefits such as pension and the provision of market-related salaries could improve wellness in SMMEs although these were not expressed as top priorities by employees. In contrast, the interviewees highlighted working hours and hygienic working conditions which could have a severe impact on employees' health and wellness. In the manufacturing organisation, the researcher believes that improvements to financial benefits would make little to no difference to employee wellness because there is such great disparity between the manager and his employees (section 4.3.2.4 and Table 4.41). Until the manager realises that he needs to treat employees with dignity and respect no improvements can be made to decrease absenteeism and increase retention rates.

5.2.3.3 Employee retention in SMMEs (subtheme 3.3)

It was concluded (section 4.3.3.7) that the employees stay with their organisations for the following reasons, which agree with the findings in the literature:

- good working relationships with colleagues and managers (social connectedness)
- good working relationships with clients
- caring attitudes displayed by employers and managers

- good benefits
- the difficulty in finding alternative work
- to obtain decent work experience.

It can be concluded in the study that SMMEs should implement strategies that support healthy and safe workplace environments. Healthy environments make employees feel nurtured and cared for. The results showed that despite experiencing negative aspects of the job, employees were willing to stay in their job because they valued the workplace relationships they had with their colleagues, managers and clients.

5.2.3.4 Conclusion

There is a great disparity between what owners of SMMEs believe employee wellness is and what employees need from wellness. When the researcher started the journey to investigate the wellness practices of SMMEs she came up against severe resistance from SMME owners. They told the researcher that they were afraid she would expose their lack of wellness practices and encourage employees to demand more employee wellness practices. In this way, the owners confused wellness practices with voluntary benefits such as pension funds, employee assistance programmes, medical aid schemes, and the like. The owners had to be convinced that they might be offering great employee wellness initiatives that employees value but which the owner might not view as employee wellness such as a caring, healthy and safe work environment.

Despite the owners' lack of knowledge about employee wellness practices, most of the owners who the researcher connected with during the two years of the study strived to offer safe and healthy working conditions for their employees where every employee could reach their full potential within a caring environment.

5.3 PERSONAL EXPERIENCES DURING THE STUDY

The study enriched the researcher's personal and professional life and enhanced her academic competence. The participants' challenging, and problematic realities gave the researcher a new appreciation for employee wellness practices, and through this

experience she developed deep compassion for employees working in unhealthy workplace conditions.

The researcher would value the opportunity to conduct further research on developing minimum standards for employee wellness in SMMEs.

5.4 STRENGTHS OF THE STUDY

Once the participants had established a trusting relationship with the researcher, they started sharing intimate details of their organisation's employee wellness practices and how these affected their daily lives. They viewed the researcher as a confident and respected person who was interested in their personal experiences. As the employees began sharing their experiences, they experienced a sense of freedom which was the result of being able to discuss their concerns and dissatisfaction with their organisations' practices. In some organisations, the participants were hoping for a more punitive approach to dealing with the organisation's actions. While this was obviously not the intention of this research, the researcher nevertheless assured the participants that they were contributing to solving the problems by highlighting areas in need of improvement.

5.5 LIMITATIONS AND RECOMMENDATIONS OF THE STUDY

Certain limitations were identified in the study. These include researcher bias, data collection and data analysis and the participant effect.

5.5.1 LIMITATIONS AND RECOMMENDATIONS RELATING TO RESEARCHER BIAS, DATA COLLECTION AND DATA ANALYSIS

This study was limited to SMMEs and no comparisons could be made between the employee wellness practices of SMMEs and corporate entities in the Gauteng region.

As a small business owner, the researcher acknowledged the contribution her professional experience made to the choice of topic and recognised the need to establish credibility with the participants. Prior to each focus group discussion, the researcher

made a self-disclosure to establish credibility with the participants and to minimize researcher bias. On completion of the focus group interviews and individual interviews, participants were encouraged to challenge the data interpretations and to comment on the identified patterns, where needed (Ortlipp, 2008). Additionally, the researcher applied intuiting, bracketing and reflexivity during all the phases of the research.

5.5.2 LIMITATIONS AND RECOMMENDATIONS RELATING TO THE IMPLEMENTATION OF WELLNESS PRACTICES IN SMMEs

Although managers believed they were doing enough to support employees' wellness, the research could not confirm the results. None of the organisations was requested to produce current wellness policies and procedures because it was outside the boundaries of the study. Thus, the study did not gather sufficient evidence to establish to what extent employee wellness practices are being successfully implemented in SMMEs.

5.5.3 LIMITATIONS AND RECOMMENDATIONS RELATING TO THE PARTICIPATING ORGANISATIONS

- The research was limited to three economic sectors in the Gauteng region, and therefore the findings cannot be generalised to all SMMEs. In terms of transferability, it will be possible for SMMEs to relate to the findings in the context of the study.
- The study involved no black men or women in management positions. Additionally, all three organisations were white-owned entities. The reason for this is that only white-owned organisations responded to the researcher's call for participation.

5.6 RECOMMENDATIONS

5.6.1 RECOMMENDATIONS FOR FURTHER RESEARCH

Based on the conclusions drawn from the findings, the following recommendations can be made for further research:

- The researcher recommends repeating the research but including a wider spectrum of industries and using a more diversified sample of organisations nationally and, in particular, black-owned organisations.
- It is recommended that a comparative study be conducted to investigate the employee wellness practices of corporate entities in relation to SMMEs.
- It is recommended that the impact of owners' or managers' leadership style on employee wellness practices in the organisation be further investigated. Also, a gender perspective could provide another interesting dimension for further investigation.
- It is strongly recommended that a model for minimum wellness requirements in SMMEs be developed to protect employees from unsafe and unhealthy workplace conditions.

5.6.2 RECOMMENDATIONS FOR IMPLEMENTING EMPLOYEE WELLNESS PRACTICES IN SMMEs

- The researcher recommends investigating the avenues of influence in the small business to develop guidelines for the implementation of healthy workplaces.
- It is recommended that SMMEs appoint a responsible person to manage the emotional, physical and mental wellness of employees through organised practices and activities.
- It is further recommended that SMMEs prioritise social connectedness and that management should put structures in place to nurture the emotional wellness of employees.
- It is recommended that management consult regularly with employees to establish their wellness needs in order to draw up a list of minimum requirements for wellness.

5.7 SUMMARY

This chapter provided the conclusions and recommendations based on the research findings. The findings were discussed based on the three main themes developed from the focus group interviews and the individual interviews. In addition, recommendations

were made for further research, as well as for implementing wellness in SMMEs. Additionally, the chapter discussed the strengths and limitations of the study.

It is hoped that this study will contribute to developing empathy for the workplace circumstances that employees of SMMEs often find themselves in and that the study will contribute to highlighting the plight of vulnerable employees and, in the process, focus attention on the importance of wellness practices in SMMEs. Many employees have no alternative but to stay in their job, no matter how dire the circumstances, because they need to support their families.

The researcher expresses the hope that this study may contribute to the development of minimum employee wellness standards for SMMEs in the private sector.

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ANNEXURES

ANNEXURE A: LETTER OF CONSENT (MANAGERS)

10 March 2018

Dear Respondent

Title: Exploring the HR wellness practices of SMMEs in the Gauteng region

My name is Bernadine van der Linde. I am doing research under Professor Y.T. Joubert in the Department of Economic and Management Sciences, in fulfilment of the Master of Commerce in Human Resource Management Degree at the University of South Africa (UNISA). The research is funded by the researcher, and I cordially invite you to participate in the study titled 'Exploring HR wellness practices in small, medium and micro enterprises (SMME) in the Gauteng region'.

The purpose of this study

The study will be conducted to explore how managers and employees experience human resource wellness practices in SMMEs to develop an understanding of the need for such practices in SMMEs. The researcher believes well-implemented employee wellness practices in SMMEs can encourage behavioural changes on a large scale and will benefit the community at large.

Why are you invited to participate?

As a manager of an SMME in the Gauteng region, you are experiencing employee wellness practices daily. To conduct my research successfully, I would need approximately three (3) knowledgeable managers from three different organisations to assist me with the research.

How long will it take?

The researcher has allocated one hour and thirty (30) minutes for your individual interview. It is expected that the duration of your participation will be for a minimum of forty-five (45) minutes and a maximum of two (2) hours.

What is your role in the research study?

The researcher will conduct semi-structured interviews with participants. The interviews will be audiotaped and transcribed. The researcher will focus on the following questions:

1. What is your understanding of employee wellness?
2. Do you believe having employee wellness practices benefits the organisation in any way?
3. What aspect/s of your business determines the nature of the employee wellness practices on offer in your organisation?
4. How is your organisation's need for employee wellness practices determined?
5. What suggestions can you make to improve your organisation's wellness practices?
6. Which employee wellness practice, do you believe, should be mandatory for every SMME if financial/time constraints was not a concern?

The interview will take place at your organisation's premises. Participants are encouraged to answer the research questions to the best of their ability in order to provide the researcher with an understanding of their experiences in the workplace.

Can you withdraw from the study at any stage?

Participation is voluntary, and you will not experience any penalty or loss of benefit for non-participation. Keep in mind that you may terminate your participation at any time during this study without obligation to provide a reason. It will not, however, be possible to withdraw from participation after the information has been collected from the focus group interviews.

Are there any benefits to participating in the study?

By participating in the research, you will have the opportunity to express your concerns and opinions, including gaining insight into employee wellness practices in SMMEs. Your

contribution may improve practices or even strengthen current practices in various organisations or may assist in taking corrective action on some recurring challenges. As a participant, you will have the opportunity to gain insights into current HR employee wellness practices and to familiarise yourself with current industry standards. The researcher believes the study will assist in identifying the significance of wellness practices in SMMEs and their impact on the overall wellbeing of employees.

Are there any negative consequences should you participate in the research study?

This study has a minimal risk, as there are no negative consequences of participation.

Will my information be kept confidential?

Confidentiality of information will be strictly maintained. Your privacy and anonymity will be assured by not providing your name on any documentation. Your answers will be coded, and a pseudonym will be used to refer to your data. In addition, no personal information will be made available to any third party. Your answers may be reviewed by stakeholders in the research project, which include the supervisor, transcriber, external coder and any other members of the research review committee. Records that identify a participant will only be made available to people directly involved in the research project unless direct permission is obtained by the participant.

How will the researcher(s) protect the security of the data?

Hard copies of the participants' data will be stored for a period of five years by the researcher in a secure filing cabinet at the premises of the researcher for future research or academic purposes. Electronic information will be password protected on a personal computer. After the prescribed period, hard copies will be securely destroyed, and all electronic copies permanently deleted from hard drives.

Will there be any financial benefit or incentives for participating in the study?

No payments or incentives will be provided for participating in this study.

Has this study received ethical clearance?

This study has received written approval from the Research Ethics Review Committee of

the Department of Economic & Management Science at Unisa. A copy of the approval letter can be obtained from the researcher.

How will I be informed of the findings and/or results?

If you would like to receive a copy of the research findings kindly send an email to the researcher Bernie@vanderlinde.co.za. Should you have any objections to the research, you may contact the researcher's supervisor, Professor Y.T. Joubert on 012 429 3399 or email joubeyt@unisa.ac.za.

Thanking you in advance.

Bernadine van der Linde

CONSENT TO PARTICIPATE IN THE STUDY

I, _____(participant's name and surname), herewith confirm that the researcher has informed me about the nature, procedures, potential benefits and anticipated inconvenience of participating in the study.

I agree that:

- i. I have read and understood the extent of the study as communicated in the information sheet.
- ii. I have had sufficient opportunity to ask questions, and I am ready and prepared to participate in the study.
- iii. I understand that my participation is voluntary and that I am free to withdraw at any time without penalty.
- iv. I am aware that the findings of this study will be published in a report, journal publication and/or conference proceedings, and that my participation will be kept confidential unless otherwise agreed.
- v. I agree that my interview may be recorded and transcribed.
- vi. I have received a signed copy of the informed consent agreement.

Participant's name and surname: _____(Please print)

Participant's signature: _____Date

ANNEXURE B: LETTER OF CONSENT (EMPLOYEES)

10 March 2018

Dear Participant

Title: Exploring the HR wellness practices of SMMEs in the Gauteng region

My name is Bernadine van der Linde. I am doing research under Professor Y.T. Joubert and Ms EC Rudolph in the Department of Human Resource Management, in fulfilment of the Master of Commerce in Human Resource Management Degree at the University of South Africa (UNISA). The research is funded by the researcher, and I cordially invite you to participate in the study titled exploring HR wellness practices in Small Medium Micro Enterprise (SMME) in the Gauteng region.

The purpose of this study

The study will be conducted to explore how managers and employees experience wellness practices in SMMEs to develop an understanding of the need for wellness practices in SMMEs. The researcher believes that well-implemented employee wellness practices in SMMEs can encourage behavioural changes on a large scale and to benefit the community at large.

Why are you invited to participate?

As an employee of an SMME in the Gauteng region, you are experiencing employee wellness practices daily. To conduct my research successfully, I will need approximately 15 knowledgeable employees from three different organisations to assist me with the research.

How long will it take?

The researcher has allocated one hour and thirty (30) minutes for your focus group interview. It is expected that the duration of your participation will be for a minimum of forty-five (45) minutes and a maximum of two (2) hours.

What is your role in the research study?

The researcher will conduct semi-structured interviews with participants in a focus group setting. The interviews will be audiotaped and transcribed. The researcher will focus on the following questions:

1. What is your understanding of employee wellness?
2. Do you believe your organisation is doing enough to support your wellness?
3. What do you like best about your organisation's wellness activities/practices?
4. What do you like least about your organisation's wellness activities/practices?
5. In your opinion, what factor limits the successful implementation of employee wellness practices in your organisation?

The focus group interview will take place at your organisation. Participants are encouraged to answer the research questions to the best of their ability to provide the researcher with an understanding of their experiences in the workplace.

Can you withdraw from the study at any stage?

Participation is voluntary, and you will not experience any penalty or loss of benefit for non-participation. Keep in mind that you may terminate your participation at any time during this study without obligation to provide a reason. It will not, however, be possible to withdraw from participation after the information has been collected from the focus group interviews.

Are there any benefits to participating in the study?

By participating in the research, you will have the opportunity to express your concerns and opinions, including gaining insight into employee wellness practices in SMMEs. Your contribution may improve practices or even strengthen current practices in various organisations or may assist in taking corrective action on some recurring challenges. As a participant, you will have the opportunity to gain insights into current HR employee wellness practices and to familiarise yourself with current industry standards. The researcher believes the study will assist in identifying the significance of wellness practices in SMMEs and their impact on the overall wellbeing of employees.

Are there any negative consequences should you participate in the research study?

This study has a minimal risk, as there are no negative consequences of participation.

Will my information be kept confidential?

Confidentiality of information will be strictly maintained. Your privacy and anonymity will be assured by not providing your name on any documentation. Your answers will be coded, and a pseudonym will be used to refer to your data. **However, confidentiality cannot be guaranteed in a focus group, and members are encouraged to maintain confidentiality.** In addition, no personal information will be made available to any third party. Your answers may be reviewed by stakeholders in the research project, which include the supervisor, transcriber, external coder and any other members of the research review committee. Records that identify a participant will only be made available to people directly involved in the research project unless direct permission is obtained by the participant.

How will the researcher(s) protect the security of the data?

Hard copies of the participant's data will be stored for a period of five years by the researcher in a secure filing cabinet at the premises of the researcher for future research or academic purposes. Electronic information will be password protected on a personal computer. After the prescribed period, hard copies will be securely destroyed, and all electronic copies permanently deleted from hard drives.

Will there be any financial benefit or incentives for participating in the study?

No payments or incentives will be provided for participating in this study.

Has this study received ethical clearance?

This study has received written approval from the Research Ethics Review Committee of the Department of Economic & Management Science at Unisa. A copy of the approval letter can be obtained from the researcher.

How will I be informed of the findings and/or results?

If you would like to receive a copy of the research findings kindly send an email to the

researcher Bernie@vanderlinde.co.za. Should you have any objections to the research, you may contact the researcher's supervisor, Professor Y.T. Joubert on 012 429 3399 or email joubeyt@unisa.ac.za.

Thanking you in advance.

Bernadine van der Linde

CONSENT TO PARTICIPATE IN THE STUDY

I, _____(participant's name and surname), herewith confirm that the researcher has informed me about the nature, procedures, potential benefits and anticipated inconvenience of participating in the study.

I agree that:

- i. I have read and understood the extent of the study as communicated in the information sheet.
- ii. I have had sufficient opportunity to ask questions, and I am ready and prepared to participate in the study.
- iii. I understand that my participation is voluntary and that I am free to withdraw at any time without penalty.
- iv. I am aware that the findings of this study will be published in a report, journal publication and/or conference proceedings, and that my participation will be kept confidential unless otherwise agreed.
- v. I agree that my focus group interview may be recorded and transcribed.
- vi. I have received a signed copy of the informed consent agreement.

Participant's name and surname: _____ (Please print)

Participant's signature: _____ Date

**ANNEXURE C: GUIDED QUESTIONS FOR FOCUS GROUP INTERVIEWS
(EMPLOYEES):**

1. What is your understanding of employee wellness?
2. In your view, do you believe your organisation is doing enough to support your wellness?
3. In your opinion, what do you like best about your organisation's wellness activities/practices?
4. In your opinion, what do you like least about your organisation's wellness activities/practices?
5. What do you think is the limiting factor to the successful implementation of employee wellness practices in your organisation?

**ANNEXURE D: GUIDED QUESTIONS FOR FOCUS GROUP INTERVIEWS
(MANAGERS):**

1. What is your understanding of employee wellness?
2. Do you believe having employee wellness practices benefits the organisation in any way?
3. What aspect/s of your business determines the nature of employee wellness practices on offer in your organisation?
4. How is your organisation's need for employee wellness practices determined?
5. In your opinion, what suggestions can you make to improve your organisation's wellness practices?
6. Which employee wellness practices, do you believe, should be mandatory for every SMME if financial or time constraints was not a concern?

ANNEXURE E: THEMES AND SUBTHEMES IDENTIFIED IN THE STUDY

THEMES AND SUBTHEMES IDENTIFIED IN THE STUDY	
Theme 1	Perceptions of employee wellness
Subthemes	<ol style="list-style-type: none"> 1. A definition of wellness 2. The dimensions of wellness
Theme 2	Experience of employee wellness
Subthemes	<ol style="list-style-type: none"> 1. The experience of wellness in SMMEs 2. Support of wellness in SMMEs 3. Benefits of employee wellness practices in SMMEs 4. Constraints to employee wellness practices in SMMEs
Themes 3	Mechanisms towards a healthy workplace
Subthemes	<ol style="list-style-type: none"> 1. Solutions to unhealthy workplaces 2. Improving employee wellness practices in SMMEs 3. Employee retention in SMMEs