

Vol. 7, Issue 6, pp: (1-5), Month: November - December 2020, Available at: www.noveltyjournals.com

Health in the Inclusive Workplace: Supported employees' perceptions of participation in a pilot workplace physical activity program

Janet Currie

Faculty of Arts & Social Sciences, University of Technology Sydney, Australia

Abstract: Health promotion aims to increase health and wellbeing, plus improve the health status of disadvantaged groups. Research evaluating employees with a disability's experience of workplace health promotion activities is virtually non-existent. Using a process evaluation with a participatory design approach, ten employees with a disability were surveyed of their perceptions of taking part in lunchtime Tai Chi classes held weekly for 50 weeks. Each 20 minute class contained a series of various gentle Tai Chi poses. Six in ten (60% of) participants rated the classes as highly enjoyable, one (10%) enjoyed the, while interestingly, three (30%) were neutral. The main reasons given by participants why they enjoyed the classes was that it was "Good for you" (6 mentions). Six in ten (60% of) participants were highly satisfied with the classes, two (20%) satisfied, and two (20%) neutral. When asked how Tai Chi makes them feel, five participants mentioned it was due to "Feeling better". Further research is needed into the potential health impacts of workplace health promotion initiatives for those employees experiencing disability.

Keywords: disability, health promotion, physical activity, occupational health, supported employee, workplace health, workplace health promotion.

I. INTRODUCTION

Occupational Health and Safety (OH&S) is a well-known policy and feature of workplaces worldwide. OH&S usually refers to those efforts made by employers to eradicate, manage or control the risk of injury to employees. While OH&S policies and procedures remain commonplace in most workplaces, few worksites offer more contemporary comprehensive workplace 'health promotion' programs [1].

Health promotion is the process of enabling people to increase control over their own health. It is concerned with improving the health of the population overall, plus improving the health status of disadvantaged groups. Health promotion in the workplace (HITW) refers to those strategies and programs offering a supportive environment at work, from which stakeholders find making healthier choices, the easier choices. Common health concerns often include physical inactivity and overweight [2]. Typical HITW for example, may include offering low-cost, healthy, appealing and tasty food options at the workplace canteen, or making Quit smoking support programs freely available.

The reason why workplaces are an effective place to implement health promotion is because they are considered a 'setting' for daily living where we can positively influence health and wellbeing and reduce the risk of chronic disease [1,3]. A setting refers to an environment where an individual spends a great deal of daily time, such as the home, local community or recreation venue. Therefore, any well-designed or accessible adjustments, protections and enablers put in place can help strengthen healthy behaviour choices and increase people's control over their own health and wellbeing [4].



Vol. 7, Issue 6, pp: (1-5), Month: November - December 2020, Available at: www.noveltyjournals.com

Thus a supportive workplace environment is designed as one which facilitates healthy choices and mitigates any stressors or negative factors counteracting or forming barriers to healthy behaviours [6, 7]. However, research shows that fewer than 1 in 5 worksites offer comprehensive health promotion programs [1]. This is despite evidence to show that HITW offers health and economic advantages of:

- Increased productivity; staff are feeling improved morale, job satisfaction, motivation and energy;
- Better staff decision-making, social cohesion; staff feel greater mental alertness and concentration, feel more 'valued' by the company;
- Reduced sick leave, absenteeism and less 'presenteeism', or when staff still show when feeling unwell, but are not able to function appropriately; Staff feel greater wellbeing and less stressed;
- Reduced long-term health problems incurred by staff; employees experience improved prevention of chronic diseases;
- Reduced staff turnover, increased ability to attract new workers, increased corporate responsibility, identity and image;
- Reduced risk of workplace accidents and compensation claims [8-10].

While the concept of workplace health promotion is relatively recent, there is a distinct lack of research published in the area [5]. This fact is astounding as:

Considering that employed people spend up to half their waking time at work, the workplace is, therefore, an ideal setting in which to implement mental health promotion [11, p.132].

As the workplace can provide a suitable environment to help support employees in leading a healthier lifestyle, future research is needed to investigate how HITW can address factors such as psychosocial job strain, excessive physical loads and support employee engagement [6].

This is even more so for employees with disability at work, where published research into their experience of workplace health promotion is virtually non-existent. There are 2.1 million Australians of working age with disability. Of these, just under half were employed (47.8%), compared with 80.3% of people without disability [12,13]. However, of the Australian population, over 4.4 million people in Australia have some form of disability, or 1 in 5 people [13]. If HITW is able to benefit stakeholders, these benefits should be leveraged to all workers, including noting the experiences of employees with a disability. Such research helps promote social inclusion and the work/life balance of disadvantaged or marginalised groups in society [14]. Therefore to help fill the gap in research, this study surveyed a group of supported employees to gauge their perceptions of a HITW program.

II. BODY OF ARTICLE

i. Method

Health promotion practice is built around the needs of the people for whom it is designed. This research carried out a process evaluation of a HITW initiative offering physical activity. Process evaluations survey the acceptability of a health promotion program amongst its participants and gain feedback on implementation aspects before investing or rolling out a program more widely [15]. This helps to prevent waste of resources or money, build community or group trust in the program or intervention, and add to future quality by meeting needs.

The research utilised a participatory, in-depth qualitative case study, in recognition of the value of engaging the stakeholders of the research setting in the survey process. Participatory action research works with people, enabling them to be the developers of problem-solving and change. The ability of the participants to actively take part in the research in an inclusive, meaningful manner, recognised their ability [16]. This is in line with the social model of disability, featuring empowerment and social justice versus 'impairment'. The research was underpinned by a theoretical framework recognising the socio-ecological model of health, such as the influence of settings, or work, on wellbeing [17], also demonstrated by the correlation found between working and more positive outcomes in symptom levels, self-esteem, quality of life and social functioning of people experiencing mental illness or intellectual disability [18,19].



Vol. 7, Issue 6, pp: (1-5), Month: November - December 2020, Available at: www.noveltyjournals.com

'Supported employment' is workplace employment with tasks and systems in place which are designed for people with a disability, offering additional assistance such as guidance, structure, training or help to complete the work tasks. According to the Australian Network on Disability, a disability is any condition that restricts a person's mental, sensory or mobility functions. It may be caused by accident, trauma, genetics or disease. A disability may be temporary or permanent, total or partial, lifelong or acquired, visible or invisible [14].

Following institutional ethics clearance, 10 employees with a disability and working in a supported workplace, 'Empowerment Enterprises', consented to participation in a HITW initiative consisting of 20 minute Tai Chi exercise classes held weekly for 50 weeks. Each 20 minute class contained a series of various gentle, stretching exercise poses, led by an instructor and with relaxing background music accompaniment. The classes were held one day per week during an 'early mark' timed release to the regular lunchtime period. Only employees deciding they wished to take up the invitation to participate took part. A Manager participated in every class. At the end of the program, participants completed a written survey questionnaire containing open-ended and Likert-scale rating questions, designed to gauge their acceptability and perceptions of the classes. The next section presents the main findings of the survey.

ii. Findings and Discussion

Enjoyment

Six in ten (60% of) participants rated the classes as highly enjoyable, one (10%) enjoyed the, while interestingly, three (30%) were neutral. The main reasons given by participants why they enjoyed the classes was that it was "Good for you" (6 mentions), "Enjoyable" (4 mentions), and "Relaxing" (2 mentions).

Typical responses reflecting why participants stated they enjoyed the class experience included:

I liked Tai-Chi because it is good exercise and good for you. (Participant 1)

Enjoy all the different exercises, good for me. (Participant 3)

It is good for body and soul (Participant 4).

Breaks tension and stress, good for older people. (Participant 5)

Love the environment. (Participant 9)

It is a well known societal convention that "exercise is good for you", and while this common belief backed up by the scientific research [20], it may have influenced opinions. Therefore taking part may have made the participants feel happy and good about themselves for doing something considered healthy and non-sedentary.

Exercise is also reported in the wider research literature as being able to lift mood [21], and is considered enjoyable if suited to the needs of the audience [22]. Taspinar, Ummuhan, Bulent and Ferruh (2014) found that individual self-esteem, depression, body image satisfaction, general perception of one's health and fatigue levels improved significantly for exercisers compared with non-exercisers pre-and post-session. The participants taking part in the Tai Chi may have been able to experience some of its documents effects in lowering heart rate so create a feeling of increased relaxation and wellbeing [23].

Overall Satisfaction

Six in ten (60% of) participants were highly satisfied with the classes, two (20%) satisfied, and two (20%) neutral. When asked how Tai Chi makes them feel, five participants mentioned it was due to "Feeling better". Other reasons provided included feeling "Happy" (3 mentions), "Refreshing" (1 mention), "Tired" (1 mention), or "Gets the krinkles out (sic)" (1 mention). Typical responses reflecting the theme of feeling better included:

It makes you feel better, to get all the krinkles out. (Participant 1)

Happy, not angry. (Participant 10)

Participants may have enjoyed the class and felt more refreshed as they were able to commence their lunch break earlier, hence feeling a sense of time-out and refreshment [24]. The physical activity may have also had a stress-reducing effect [25] and improved their overall outlook, cascading into further positive experiences in what Kevin Young and associates call "behavioural activation theory":



Vol. 7, Issue 6, pp: (1-5), Month: November - December 2020, Available at: www.noveltyjournals.com

Research suggests exercise promotes well-being while reducing the risk and symptoms of certain psychiatric disorders. Similarly, positive events improve quality of life and may minimize the impact of negative life events; a dearth of positive events is also associated with increased psychiatric symptoms. Thus, increasing physical exercise and the occurrence of positive events is central to well-being promotion. Behavioral activation theory suggests the occurrence of one positive event increases the likelihood of engaging in subsequent positive events. We used a daily diary approach to examine this possible positive cascade, exploring relationships between exercise and positive social and achievement events. For three weeks, participants (N = 179) completed questionnaires at the end of each day. Multilevel modeling analyses revealed that daily exercise predicted increased positive social and achievement [26, p.299].

Recommendation of Class to Others

Similar to a customer providing a 'Net Promoter Score' or the likelihood of a person who has purchased or consumed a product or service recommending it to others based on their experience, four out of the ten (40%) Tai Chi participants would highly recommend the class to other employees at Empowerment Enterprises. Five of ten (50%) participants agree they would recommend the Tai Chi to other employees, with one (10%) participant neutral or unsure whether they would. The likelihood of recommending the program to others is a measure of their loyalty. Just less than half of participants were highly loyal and enthusiastic to give a recommendation. Approximately half of the group were satisfied, but not to the extent of being outstanding promoters of the program. One participant was more passive and so perhaps vulnerable to dropping out or joining an alternate, competing lunchtime activity.

Thøgersen-Ntoumania, Fox and Ntoumanis (2005) concluded that physical activity programs should become a general feature of all workplaces. The authors found that exercise is associated directly and indirectly with high employee well-being [27]. Due to the fact employees with disability may not be as active or are disadvantaged in readily accessing physical activity as much as the wider population, it makes it even more important to offer them programs via HITW [28].

III. CONCLUSION

HITW or workplace health promotion can be described as the combined efforts of employers, employees and society to improve the health and wellbeing of people at work [5]. Work is an important setting and therefore potential resource for mental health. It can be a source of health for all people, if society organises HITW opportunities for supported workers, helping create a healthy, just society [11].

The lunchtime Tai Chi exercise classes were acceptable to this group. This concurs with the findings of other studies in supporting the inclusion of exercise within well-being enhancing interventions [26]. Further research is needed to measure impacts and outcomes of various HITW programs and monitor acceptability by supported employees.

Through building and evaluating the workplace physical activity classes around the needs of the people for whom it was designed, the program was more responsive to their needs. For health promotion to be effective, it needs to be relevant and acceptable to the needs of the people taking part, and therefore useful. However, for health to be equitable, HITW will be also become more widely available and accessible in the mainstream for employees with disability.

REFERENCES

- [1] Linnan LA, Cluff L, Lang JE, Penne M, Leff MS (2019) Results of the Workplace Health in America Survey. Amer J Health Prom; 33(5): 652-665.
- [2] PricewaterhouseCoopers (2011) Workplace Health Promotion Needs Analysis. Summary Report. Canberra: ACT Health Dept.
- [3] Australian Institute of Health & Welfare (AIHW) (2010) Risk Factors and Participation in Work. Cat. No. PHE 122. Canberra: AIHW.
- [4] World Health Organisation (WHO) (1997) WHO's Global Healthy Work Approach. Geneva: WHO.
- [5] Auvinen A-M, Kohtamaki K, Ilvesmaki A (2012) Workplace Health Promotion and Stakeholder Positions: A Finnish Case Study. Arch Enviro Occ Health; 67(3): 177-184.



Vol. 7, Issue 6, pp: (1-5), Month: November - December 2020, Available at: www.noveltyjournals.com

- [6] Ryan M, Erck L, McGovern L, McCabe K, Myers K, Nobrega S, Li W, Lin, W-C, Punnett L (2019) "Working on Wellness": protocol for a Worksite Health Promotion Capacity-Building Program for Employers. BMC Pub Health; 19:111.
- [7] WHO (2018) Workplace health promotion. Geneva: WHO.
- [8] Medibank Private (MBP) (2005) The Health of Australia's Workforce. Sydney: MBP Australia.
- [9] Sims J (2010) Wellness and Productivity Management. Presentation to the World Health & Productivity Management Congress, 2010. London: Healthwatch and Public Involvement Association.
- [10] Wright TA, Cropanzano R, Denney PJ, Loline GL (2002) When a happy worker is a productive worker: A preliminary examination of three models. Canad J of Behav Sci; 34: 146-150.
- [11] Barkway P (2006) Creating supportive environments for mental health promotion in the workplace. Contemp Nurse; 21: 131-141.
- [12] Australian Bureau of Statistics (ABS) (2019) 4430.0 Disability, Ageing and Carers. Canberra: ABS.
- [13] Australian Network on Disability (2020) Disability and Statistics. Accessed 29 Oct 2020 from https://www.and.org.au/pages/disability-statistics.html
- [14] McDaid D, Curran C, Knapp M (2005) Promoting mental well-being in the workplace: A European policy perspective. Int Rev Psychiatry; 17: 365-373.
- [15] Hawe P, Degeling DE, Hall J (1990) Evaluating health promotion: A health worker's guide. Sydney: MacLennan & Petty.
- [16] Atkins L, Duckworth V (2019) Research Methods for Social Justice and Equity in Education. London: Bloomsbury Academic.
- [17] Waddell G, Burton AK (2006) Is work good for your health and wellbeing? London: The Stationery Office.
- [18] Schneider J, Heyman A, N. (2002) Occupational outcomes: from evidence to implementation. An expert topic paper commissioned by the Department of Health. University of Durham, Durham, UK: Centre for Applied Social Studies.
- [19] Marwaha S, Johnson S. (2004) Schizophrenia and employment. A review. Soc Psychiatry & Psychiatr Epidemiol 39: 337-349.
- [20] Reiner M, Niermann C, Jekauc D, Woll A (2013) Long-term health benefits of physical activity a systematic review of longitudinal studies. BMC Public Health. 13(1): 813.
- [21] Conti CL, Ramos, P.A (2018) Depression and the benefits of physical activity. Sci & Sports. 33(1): 56-57.
- [22] Bird S, James K, Smith A, Bird S (1998) Exercise benefits and prescription (2nd ed.). Cheltenham, UK.: Thornes.
- [23] Taspinar B, Ummuhan Bas A, Bulent A, Ferruh T (2014) A comparison of the effects of hatha yoga and resistance exercise on mental health and well-being in sedentary adults: A pilot study. Comp Therapies in Med. 22(3): 433-440.
- [24] Currie JL (2018) Radical Leisure. Common Ground Research Networks, Champaign, Illinois, USA.
- [25] Whitehead BR, Blaxton JM (2017) Daily Well-Being Benefits of Physical Activity in Older Adults: Does Time or Type Matter? The Gerontologist. 57(6): 1062-1071.
- [26] Young, KC, Machell, KA, Kashdan, TB, Westwater, ML (2018) The cascade of positive events: Does exercise on a given day increase the frequency of additional positive events? Pers & Indiv Diff. 120: 299-303.
- [27] Thøgersen-Ntoumania C, Fox KR, Ntoumanisc N (2005) Relationships between exercise and three components of mental well-being in corporate employees. Psychol of Sp & Ex 6 (6): 609-62.
- [28] Carroll DD, Stevens AC, Sloan LM, Fulton JE,; Brown DR (2015) Recommending Physical Activity to Adults with Disabilities: Knowledge and Practices of Health Professionals: 1456 Board Meeting #249 May 28, 9: 00 AM 10: 30 AM. Medicine & **Science** in Sports & Exercise. 47(5S Suppl 1): 392-393.