



INTERNATIONAL JOURNAL OF RESEARCH IN COMMERCE AND MANAGEMENT

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ORGANIZATIONAL HEALTH: EXAMINING WORKPLACE PRACTICES AND WELL-BEING**DR. R. PRABHAKARA RAYA****PROFESSOR AND HEAD****DEPARTMENT OF MANAGEMENT STUDIES, SCHOOL OF MANAGEMENT****PONDICHERRY UNIVERSITY****PUDUCHERRY – 605 014****P. SIVAPRAGASAM****RESEARCH SCHOLAR****DEPARTMENT OF MANAGEMENT STUDIES, SCHOOL OF MANAGEMENT****PONDICHERRY UNIVERSITY****PUDUCHERRY – 605 014****ABSTRACT**

Today, more than ever, a business organization is exceedingly complex, stochastic and undergoing dynamic change as a result of increasing interdependencies between their people, processes, systems and the external environment. As that complexity continues to increase and external changes gather space, the need for regular monitoring of those interdependencies becomes increasingly important. This study was initiated by observing the enormous gap between how people experience work and kind of experiences to that would make an organization more likely to endure and fulfill its vision. (i.e.) the influence of healthy workplace practices on employee well-being. Works of prominent writers on organizational health and well-being were then reviewed so as to present it as a framework for analysis and discussion. It is assumed that healthy organizations have conditions, which satisfy an individual's self-esteem and increase trust between the members. Such conditions are believed to cause an effective coping on the part of the organization to the changes in environmental conditions. The review study also scrutinizes the specific characteristics of the healthy organization in the hope that a more analytical approach would not only lead us to understand why there are few such organizations, but would offer insights into how to create them.

KEYWORDS

Organizational Health, Employee Well-Being, Organizational success, Healthy practices

ORGANIZATIONAL HEALTH: EXAMINING WORKPLACE PRACTICES AND WELL-BEING

"The nature of the global business environment guarantees that no matter how hard we work to create a stable and healthy organization, our organization will continue to experience dramatic changes far beyond our control."

Margaret J. Wheatley

INTRODUCTION

An organization is a relatively isolated, purposive, coherent system consisting of entities whose relatedness in intelligently defined and mentally recognized, encapsulated in a boundary that is both flexible and permeable to the external environment. Over the last 40 years, major changes have taken place in the workplace. The growth in the use of information technology at work, the globalization of many industries, organizational restructuring, changes in work contracts and work time scheduling have radically transformed the nature of work in many organizations in response to a complex array of economic, technological, legal, political, and socio-cultural forces. The scope and magnitude of these changes have outpaced our understanding of their implications for quality of work life and occupational safety and health.

In today's market driven competitive world, a capable employee is the most important resource and a fundamental precondition of productive action. So it would be a meaningful exercise for managers to diagnose the status of their organization and promoting healthy work place practices for achieving sustainable corporate performance. It is assumed that healthy organizations have conditions, which satisfy an individual's self-esteem and increase trust between the members. The conditions include the ability of the organization to receive and communicate information reliably and validly, internal flexibility and creativity to make changes needed in the light of the information and commitment to the goal of organization, and an internal climate of support and freedom from threat. Such conditions are believed to cause an effective coping on the part of the organization to the changes in environmental conditions.

This study is based on web-based research investigating the mainstream academic and business periodicals on workplace practices, employee well-being and organizational performance. In what follows, the author discuss the primary factors associated with the association between organizational health and well-being, the consequences of low levels of health and well-being, and common methods for improving organizational health and well-being in the business environment. A healthy organization assumes more relevance in today's scenario where we have a booming economy where a growing number of young people are spending longer hours at their workplace in a competitive environment.

HEALTH AND WELL-BEING

In medical terms, the most widely agreed definition of health is as '... a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity' (WHO)¹. These attributes consider the physical, the psychological, the spiritual, and even the ethical characteristics of a broader concept of health. This definition points to health as a means to an end rather than as some abstract state. It expresses health in functional terms as a resource that permits people to lead individually, socially and economically productive lives. Health includes the ability to realize aspirations, satisfy needs, and cope with changes. It is seen as a resource for everyday life, not the objective of living.

Health is a positive concept emphasizing social and personal resources as well as physical capabilities. It describes both capacity to flourish and to enjoy life, and the resilience that enables us to cope and survive in adversity. It is about thinking (cognition), feeling (emotion) and social function (relating). It encompasses skills and attributes which include resilience, coping, self-esteem, self-efficacy, optimism, hopefulness and social integration that are associated with improved outcomes like reduced sickness absence, greater productivity, higher levels of creative thinking and problem solving². Health is a 'multidimensional dynamic

¹ http://www.who.int/occupational_health/en/ accessed 15 February 2011

² www.bitc.org.uk/healthyworkplaces

process rather than a discrete end state'. Increasingly, the concept of health is being broadened to encompass emotional, spiritual, and even ethical dimensions (Quick et al., 2002).

WORK IS A SOURCE OF ILLHEALTH: Workplace Stress

- Sixty-nine percent of employees report that work is a significant source of (American Psychological Association, 2009).
- Fifty-two percent of employees report that they have considered or made a decision about their career such as looking for a new job, declining a promotion or leaving a job based on workplace stress (American Psychological Association, 2007).

Work Demands

- One third of U.S. employees are chronically overworked. Furthermore, twenty percent of employees reporting high overwork levels say they make a lot of mistakes at work versus none of those who experience low overwork levels (Galinsky et al., 2005, p. 2).
- Twenty-four percent of employees work six or more hours per week without pay, and 47% of management does the same (Randstad, 2007, p. 8).

Work-Life Balance & Flexibility

- Fifty-two percent of employees say that job demands interfere with family or home responsibilities, while 43% say that home and family responsibilities interfere with job performance (American Psychological Association, 2007).

Employee Health & Healthcare Costs

- Seventy percent of all deaths in the U.S. are attributable to chronic diseases (Center for Disease Control and Prevention, 2003).
- The costs of chronic diseases make up more than 75% of the \$2 trillion health care costs in the U.S. (Centers for Disease Control and Prevention, 2003).

Employee and Organizational Outcomes

- For the average company, turnover costs more than 12% of pre-tax income and for those at the high end, those costs can reach almost 40% of earnings (Saratoga, 2006).
- Lost productivity due to presenteeism is almost 7.5 times greater than that lost to absenteeism (Employers Health Coalition, 2000, p. 3).
- The top five reasons employees stay with a particular company are: exciting and challenging work; opportunities for career growth, learning and development; high-quality co-workers; fair pay; and supportive management (Kaye & Jordan-Evans, 2008, p. 10).
- APA's 2010 Psychologically Healthy Workplace Award (PHWA) winners report an average turnover rate of 9% compared to 41% nationally, only 30% of their employees report chronic work stress compared to 41% nationally and PHWA winners report a 73% employee satisfaction rate compared to 65% nationally (American Psychological Association, 2010).

Job insecurity, work hours, control at work, and managerial style are four areas that emerges as a source of stress and ill-health. This situation is a cause of concern in almost all countries after economic liberalization.

WHAT DEFINES A HEALTHY ORGANIZATION? MEANINGS AND PERSPECTIVES

Though healthy organization has attracted the attention of researchers over the last decade and beyond, the concept remains poorly defined. From an almost exclusive focus on the physical work environment (the realm of traditional occupational health and safety, dealing with physical, chemical, biological and ergonomic hazards), the definition has broadened to include health practice factors (lifestyle); psychosocial factors (work organization and workplace culture); and a link to the community; all of which can have a profound effect on employee health.

The WHO Regional Office for the Western Pacific defines a healthy workplace as follows:

"A healthy workplace is a place where everyone works together to achieve an agreed vision for the health and well-being of workers and the surrounding community. It provides all members of the workforce with physical, psychological, social and organizational conditions that protect and promote health and safety. It enables managers and workers to increase control over their own health and to improve it, and to become more energetic, positive and contented."

GS Lowe differentiates between the concepts of a "healthy workplace" and a "healthy organization." He sees the term healthy workplace as emphasizing more the physical and mental well-being of employees, whereas a healthy organization has "...embedded employee health and well-being into how the organization operates and goes about achieving its strategic goals.

EVOLUTIONARY FRAMEWORK: ORGANIZATIONAL HEALTH

When the term 'efficiency' was highly prevalent among business organizations, the use of the word "health" was seldom used in the context of organizations. It slowly emerged as the concept of the organization as a "living system" became widely accepted. Organizational health is determined by a distinct combination of strategic, structural, cultural and behavioral characteristics. Organizational theorists have made fleeting references to a diverse range of features considered to be indicative of organizational health, or the lack of it. Warren Bennis (1962) was one of the first theorists to use the term health in organizational context. Bennis asserted that organizations there might be have to strike some balance to be struck between organizational performance measures and individual and collective health. According to Bennis, an organization is "healthy" when;

"First, it has to be stable in the sense that its parts have to be harmoniously integrated. Stability is the essence of orderliness, and the opposite of chaos, anarchy, or disintegration. Second, the system should be growing or mature. Of the two growths is preferable since it indicates youth and vigor. Growth, consequently, is a sign of development, promise, and opportunity, all valued commodities in our society. Third, the system must be adaptable, because healthy, complex organisms can adjust to a large number of environmental contingencies. Further, adaptability is evidence of survival potential, and of course this has to be highly regarded in times of rapid change." (Warren Bennis, 1962)

French et. al (1982) appraised that health, or the lack of it, is likely to be reflected in the attention given to ensuring the correct fit between the person and his/her environment. Cox, Leather, and Cox (1990) identified three primary sources of work demands: the work itself, the tools and technologies used in the work, and the social/organizational and physical environments in which the work is performed. Smith et al. (1995) examined five organizational factors for organizational health: organization-person balance, organizational treatment, discrimination, decision-making climate, and quality of supervision. Sauter, Lim, and Murphy (1996) identified management practices, organizational culture/climate, and organizational values as key organizational factors for health and well-being at workplace.

Danna and Griffin (1999) proposed an *antecedents-consequences* model featuring three sets of antecedent factors: work setting (primarily safety and health risks), personality traits, and occupational stress factors. In this model, occupational stress factors encompass both job demands and broader organizational characteristics such as climate and career development opportunities. NIOSH has adopted a multi-level or ecological approach that features three interacting tiers (Landsbergis, 2003; NIOSH, 2002): the external context (economics, political trends, etc.), the organizational context (management structures, etc.), and work content (job characteristics, work roles, etc.). DeJoy, Wilson, and colleagues (DeJoy & Wilson, 2003; Wilson, DeJoy, Vandenberg, Richardson, & McGrath, 2004) focused on three domains of work life: job design, organizational climate, and job future and their relationships to the leadership and cultural resources of the organization. Brache (2001) in a major validation study for the Healthy Work Organization Model concluded that management practices held the promise of 'preventing work-related stress whilst simultaneously promoting organizational effectiveness' (Browne, 2002, p. 212).

EMPLOYEE WELL-BEING AND ORGANIZATIONAL HEALTH: COMPETING PURPOSES?

Running alongside this tendency to conceptualize organizational health as the integration of individual health outcomes and organizational performance, there remains the suspicion, first alluded to by Bennis and Herzberg, that these variables are positively correlated. Frederick Herzberg, notes that individual growth is the key to organizational health and that (at the time he was writing) a real problem was the way in which mass production techniques robbed many jobs of

meaning (Herzberg, 1974). Perhaps without realizing it, both Bennis and Herzberg point to a symbiotic relationship between individual health and organizational health. Churchman argued that the criteria for determining success in relation to the parts in isolation are often the reverse of the criteria for success from the viewpoint of the whole (Churchman, 1968). Churchman's observation may mean that attempts to improve the health of the individual actors in an organization may be in tension with the health of the organization as a whole if this is measured using a framework such as the Healthy Work Organization model.

The argument that organizational and individual health is interdependent (Pritchard et al., 1990) suggests that systems theory may offer relevant insights. Gabriel also offered an interesting counterview in claiming that organizations can be effective despite individual suffering (quoted in Driver, 2003, p. 46). MacIntosh, MacLean, and Burns (2007) examined that the relationship between individual and organizational health is often portrayed as having a symbiotic relationship and is a poorly understood one. They argue that managerial practices which focus on outcomes as system-wide states can inadvertently assume that if the system is healthy, its 'elements' will be healthy. For instance, fear of job security resulted out of an organizational restructuring practices is an ideal situation where the symbiotic nature of this relationship can be questioned.

DIMENSIONS OF ORGANIZATIONAL HEALTH

Aaron De Smet, Mark Loch & Bill Schaniger (2007), proposes five overarching organizational dimensions that signifies organizational health dimension such as:

1. **Resilience:** Beyond the everyday problem, managers of today have to contend with unpredictable and often threatening disruptions: financial-market meltdowns, extreme weather conditions, power failures, even terrorism. Healthy companies are practiced at spotting and managing key risks (including low-probability but high impact catastrophes), and they build mechanisms and have the resources- cash reserves or back up IT systems- to face up such eventuality e.g. Wal-Mart response after Hurricane Katrina in US.
2. **Execution:** Even as companies hedge against external shocks, they need to get the basics right, make good decisions, and perform essential tasks. The companies that execute well share certain attributes/distinctive capabilities: the ability to make sound and timely decisions, strong forecasting skills, and employees who understand their roles and responsibilities.
3. **Alignment:** A healthy organization sketch a compelling vision of the future for everyone connected with them- employees in particular- by articulating a shared identity that rises above individuals, functions, and business units; by reflecting stakeholder concerns in corporate values; and by reinforcing the sense of common purpose with formal mechanisms, such as performance contracts.
4. **Renewal:** Healthy companies invest in their future by expanding into well-chosen markets where existing assets and competencies provide real leverage, usually with the help of a winning formula that has been honed from experience and facilitates smooth integration across the entire value chain and the efficient extraction of synergies. The success of Nike's has been attributed to its renewal capability that requires attention to softer issues, to generate ideas and adapt to change, both culturally and strategically.
5. **Complementarity:** The concept of complementarity refers to those organizational practices, such as hiring policies, training programs, and consistent and mutually reinforcing behavioral incentives that are crucial to ensuring that assets, processes, relationships, and management practices act in concert e.g. Toyota Motors. These attributes are emergent characteristics of a company's performance system rather than narrow outputs of performance.

APPROACH TO ORGANIZATIONAL HEALTH: REVIEWING BITC WORKWELL

The BITC Workwell approach is a model that proposes an integrated, holistic and strategic model to promoting healthy workplaces. It outlines actions that both employers and employees can take to create a healthy workplace. The model also demonstrates the business benefits for employers who take a proactive approach to the prevention of illness and promotion of health and wellbeing. It comprises of 4 areas that define a successful integrated approach to health and wellbeing in organizations.

1. Better Physical & Psychological Health

Create an environment where employees are encouraged to make healthy lifestyle choices that promote physical and emotional wellness.

- Promoting a physically safe working environment with optimal air quality, temperature, noise, lighting and layout of work spaces.
- Promoting healthy behaviours such as emotional resilience which builds self esteem, healthy eating, and physical activity, smoking cessations, sensible drinking and avoidance of drug misuse.

2. Better work

Create a happy and engaging work environment where 'good work' is promoted.

- A management style and an organizational culture that promotes mutual trust and respect.
- Employment security and effective talent management.
- Job design: task and variety challenge.
- Autonomy, control & task discretion.
- Non monotonous and repetitive work.

3. Better relationships

1. Promote social health through good communication and opportunities to build 'social capital' at work and at home.

2. Promoting and enabling better communication and social cohesion to support good relationships in the workplace particularly among:

- Line manager.
- Team colleagues.
- Support networks.

Relationships outside work (family and friends) can also be supported through flexible working practices and through involvement in social initiatives.

4. Better Specialist Support

1. Provide early interventions and active absence management that support wellness and recovery.

2. Better support and interventions to manage health and wellbeing can be provided by:

- Occupational health, HR, Employee Assistance
- Training for line managers & employees.

According to Ramnik Ahuja and Debasis Bhattacharya (2007), creating an environment which results in a healthy and satisfied workforce is not just an idealistic concept, but one which makes good business sense and is the key factor in developing a successful organization.

MANAGERIAL IMPLICATIONS

Today, more than ever, there is a growing body of evidence that organizations needs to invest time and money in maintaining organizational health. A healthy organization is integral to achieving excellence as the focus is on creating the right work environment for employees, which in turn creates the right approach to satisfying the strategic and operational goals of satisfied customers, clients and stakeholders. For business leaders, who tends to look for a 'silver bullet' solution to organizational challenges in the areas of strategy, technology, product design, marketing and finance, aspects of an organization's health comes as better determinant for future success, with due regard to the criticality of these components to performance. But, over-emphasis may hamper them even today neglect their proactive role- its ability to create a new thrust in the society. Thus to the old-fashioned notion of efficiency, growth, stability, and flexibility have been added as criteria for judging the health of complex organizations. It is also important to note that there is no "one size fits all" health and wellbeing approach which works for all organizations. Each organization must develop their own initiatives based on an analysis of their needs.

The study concludes that the existing literature lacks a succinct definition of healthy organization and within this paper the healthy organization is defined as one whose structure, culture and management processes contribute to high levels of organizational performance. These types of organizations effectively capitalize on their intellectual property and their ability to work as a team, engage in healthy debate, make sound decisions, nimbly navigate change, set and communicate direction and permeate a culture of accountability and results. The review study contributes by deepening the understanding of what a healthy workplace looks like and more important what business leaders can do to embed healthy attitudes throughout their organizations. For business leaders and managers, becoming well acquainted with the attributes of health – and the tensions among them—is the first step in confronting that challenge.

REFERENCES

1. Aaron De Smet, Mark Loch & Bill Schaninger, "Anatomy of a healthy corporation", *Indian Management*, July 2007; pp 62-68.
2. Arnold, K., Turner, N., Barling, J., Kelloway, E.K. & McKee, M.C. (2007). "Transformational leadership and psychological well-being: The mediating role of meaningful work", *Journal of Occupational Health Psychology*, 12, 193-203.
3. Bakker, A. B., & Schaufeli, W. B. (2008). "Positive organizational behavior: Engaged employees in flourishing organizations", *Journal of Organizational Behavior*, 29, 147-154.
4. Bennis, W.G. (1961), "Revisionist theory of leadership", *Harvard Business Review*, Vol. 39.
5. Christin Shoaf, Ash Genaidy, Waldemar Karwowski and Samuel H. Huang, (2004), "Improving Performance and Quality of Working Life: A Model for Organizational Health Assessment in Emerging Enterprises", *Human Factors and Ergonomics in Manufacturing*, Vol. 14, 1, pp. 81-95.
6. Confederation of British Industry, 1993, "Working for Your Health: Practical Steps to Improve the Health of Your Business", London: CBI.
7. Cooper, C. L., & Cartwright, S. (1994), "Healthy mind; healthy organization: A proactive approach to occupational stress", *Human Relations*, 47(4), 455-471.
8. Cox, T., Leather, P., & Cox, S. (1990, February/March), "Stress, health and organizations", *Occupational Health Review*, 13-18.
9. Danna, K., & Griffin, R.W. (1999), "Health and well-being in the workplace: A review and synthesis of the literature", *Journal of Management*, 25(3), 357-384.
10. David M. DeJoy et al (2010). "Assessing the impact of healthy work organization intervention", *Journal of Occupational and Organizational Psychology* (2010), 83, 139-165.
11. Dugdill, L. (2000), "Developing a holistic understanding of workplace health: the case of bank workers", *Ergonomics*, 43, pp. 1738 - 49.
12. Glibbreath, B. (2004), "Creating healthy workplaces: The supervisor's role", In C. Cooper & I. Robertson (Eds.), *International review of industrial and organizational psychology*, volume 19. Chichester, UK: John Wiley.
13. Goetzel, R. Z., Guindon, A. M., Turshen, I. J., & Ozminkowski, R. J. (2001), "Health and productivity management: Establishing key performance measures, benchmarks, and best practices", *Journal of Occupational and Environmental Medicine*, 43, 10-17.
14. Ian Saunders & Steve Barkers (2001), "Organizational Health: A Framework for Checking Organizations Fitness for Success", *Journal of Change Management*, Vol. 2, 2, pp 173-183
15. Imre Lovey, Manohar S. Nadkarni, (2003), "The Joyful Organization- Understanding Organizational Health, Diseases and Joy", Response Books, New Delhi.
16. James Campbell Quick, Marilyn Macik-Frey and Cary L. Cooper (2007). "Managerial Dimensions of Organizational Health: The Healthy Leader at Work", *Journal of Management Studies*, 44:2 March 2007, pp. 189-205
17. James Purnell and Alan Johnson, (2008) , "Improving health and work: changing lives", Presented to Parliament by the Secretaries of State of the Department for Work and Pensions and the Department of Health by Command of Her Majesty, November 2008.
18. James R. Lucas, "The passionate organization", Sage publications, New Delhi.
19. Joan Burton, (2010), "WHO Healthy Workplace Framework and Model: Background and Supporting Literature and Practices", February 2010 Submitted to Evelyn Kortum, WHO Headquarters, Geneva, Switzerland
20. Kelloway, E.K., & Day, A. (2005), "Building healthy workplaces. What we know so far", *Canadian Journal of Behavioral Science*, 34(7), 223-235.
21. Marie McHugh & Chris Brotherton (2000), "Health is wealth: Organisational Utopia or myopia?", *Journal of Managerial Psychology*, Vol. 15 No. 8, 2000, pp. 744-770
22. Mark G. Wilson, David M. DeJoy, Robert J. Vandenberg, Hettie A. Richardson and Allison L. McGrath, (2004), "Work characteristics and employee health and well-being: Test of a model of healthy work organization", *Journal of Occupational and Organizational Psychology*, 77, 565-588.
23. Maslach, C. and Jackson, S.E. (1981). "The measurement of experienced burnout", *Journal of Occupational Behavior*, 2, 2, 99-113.
24. McDonald, J. (2002), "This place makes me sick", *Employee Relations Law Journal*, 28: 1, 101-113.
25. Mikkelsen, A. and Gundersen, M. (2003), "The effect of a participatory organizational intervention on work environment, job stress, and subjective health complaints", *International Journal of Stress Management*, 10, pp. 91 - 110.
26. Moss, S. E., & Sanchez, J. I. (2004), "Are your employees avoiding you? Managerial strategies for closing the feedback gap", *Academy of Management Executive*, 18, 32 - 44.
27. Omer Bin Sayeed, (2001), "Organizational commitment and Conflict- Studies in Healthy organizational processes", Sage Publications.
28. Parker, S. and Wall, T. 1998, "Job and Work Design: Organizing Work to Promote Well-being and Effectiveness", London: Sage.
29. Peter Cotton & Peter M. Hart (2003). "Occupational Wellbeing and Performance: A Review of Organizational Health Research", *Australian Psychologist*, Vol. 38, No 2, pp 118-127
30. Philip Sadler, (2003), "The Seamless organization", Sage publications, New Delhi.
31. Ramnik Ahuja & Debasis Bhattacharya, (2007), "Healthy Workplace in Corporate Sector- India, An Operational research", Confederation of Indian Industries (CII), supported by WHO India Country Office, February 2007
32. Renee L. Miller, Mark A. Griffin and Peter M. Hart, "Personality and organizational health: The role of conscientiousness", *Work & Stress*, 13, 1, pp. 7-19.
33. Robert MacIntosh, Donald MacLean and Harry Burns (2007), "Health in Organization: Towards a Process Based View", *Journal of Management Studies*, 44:2 March 2007, pp 206-221
34. Saunders, Ian and Barker, Steve (2001), "Organizational health: A framework for checking your organization's fitness for success", *Journal of Change Management*, 2, 2, pp.173-183.
35. Sauter, S. L., Lim, S., & Murphy, L. R. (1996), "Organizational health: A new paradigm for occupational stress research", *NIOSH, Occupational Mental Health*, 4(4), 248-254.
36. Shirom, A., Melamed, S., Toker, S., Berliner, S., & Shapira, I. (2005), "Burnout and health review: Current knowledge and future research directions", In G. P. Hodgkinson, & J. K. Ford (Eds.), *International review of industrial and organizational psychology*, Vol. 20, pp. 269-309.
37. Sparks K.; Faragher B.; Cooper C. L. (2001), "Well-being and occupational health in the 21st century workplace", *Journal of Occupational and Organizational Psychology*, Vol. 74, No. 4, pp. 489-509.
38. Tom Cox, (1997), "Workplace health promotion", *Work & Stress*, 11, 1, pp. 1-5.
39. Van Dierendonck, D., Haynes, C., Borrill, C., & Stride, C. (2004), "Leadership behavior and subordinate well-being", *Journal of Occupational Health Psychology*, 9, 165 - 175.
40. Warr, P. (1990), "The measurement of well-being and other aspects of mental health", *Journal of Occupational Psychology*, 63, 193 - 210.
41. Warr, P. (1999), "Well-being at the workplace", In D. Kahneman, E. Diener, & N. Schwarz (Eds.), *Well-being: The foundations of hedonic psychology* (pp. 329 - 412). New York: Russell Sage Foundation.
42. www.bitc.org.uk/healthyworkplaces

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