IMPACT: International Journal of Research in Business Management (IMPACT: IJRBM) ISSN(E): 2321-886X; ISSN(P): 2347-4572

Vol. 3, Issue 7, Jul 2015, 29 42

© Impact Journals



# MEDIATING EFFECT OF OCCUPATIONAL HEALTH AND EMPLOYEES WELL BEING ON ORGANIZATIONAL PERFORMANCE

## BENTOLHODA KARBALAEI 1 & Prof. N. U. K. SHIRVANI2

<sup>1</sup>Research Scholar, Department of Commerce & Business Studies, Faculty of Social Science,

Jamia Millia Islamia University, India

<sup>2</sup>Head, Department of Commerce & Business Studies, Faculty of Social Science,

Jamia Millia Islamia University, India

# **ABSTRACT**

Health and well-being in the workplace has become recent mega-trend impacting businesses environment. Organizations are integrating wellness strategies to create an overall health enhancing work experience, as well as incentive programs to increase employee's participation and awareness in organizational wellness. With today's changing business environment, considering the importance of workplace health & wellbeing causes easier adaptation to internal and external circumstances changing more effectively than their competitors. Staff well-being is an increasingly relevant and necessary consideration in the modern workplace. Occupational well-being is construed as a positive evaluation of various aspects of one's job, including affective, motivational, behavioral, cognitive and psychosomatic dimensions. The wellbeing of employees influences their organizations productivity and performance. Improving wellbeing increases employee performance and decreases uncertified sick leave, turnover and stress-related compensation claims. The purpose of this paper is to highlight the increased focus on occupational well being for managing employees' psychological health, and to present an argument for a systemic approach to decrease occupational stress & higher level of organizational performance.

KEYWORDS: Occupational Health, Employees Well Being, Organizational Performance, Healthy, Work Place

#### **INTRODUCTION**

Workplace well-being & Employees health are recognized as increasingly significant and global issue in terms of positive economic and social outcome. Occupational health & employee psychological well being is relevant to an organization policy to the extent that it concerns organizational effectiveness as well as ethical, moral, legal & financial aspects of responsibility for human resources. Organizations are integrating wellness strategies to create an overall health enhancing work experience, as well as incentive programs to increase employee's participation and awareness in organizational wellness.

Some obstacles like stress that diverse consequence for employees, however should not deter decision makers from exploring this important issue, but attempting to identify the underlying casual factors under their control& creativity tackling through evidence-base interventions programs. The organizations that find a way to generate healthy profits without creating risks to mental health of their employees are likely to benefit from wellbeing of their employees& their enhanced ethical reputation. Fostering a positive work environment that promotes mental health and wellbeing is fundamental to building organizational health and makes good business sense. It is clear that workplaces that protect

employee health and provide flexibility to take account of an employee's health status are among the most successful over time. Long term sickness absence or resulting unemployment on the other hand, can have a negative impact on health and wellbeing. Good work is an effective means to improve the wellbeing of workers, their families and communities. Work plays an important role in one's life. Work is essential to the well-being of the individual and his/her dependents as it enables him/her to meet their many needs, including financial and psychosocial. It provides individuals with improved chances of experiencing health, financial, and social advantages in life. While acknowledging the importance of work and its contribution to well-being, it is equally significant to recognize the negative impact of the working environment on the health and well-being of individuals in general. This is because; work is becoming more fluid and less bound by space and time because of globalization, economic liberalization, and technology diffusion. The organization of work has been changing in response to an array of economic, technological, legal, political, and socio-cultural forces across the globe, thereby creating a complex effect on markets, on organizations and on individuals. Work today is predominantly knowledge-based, offers increased responsibility, better compensation, and higher learning opportunities; the concern, however, is about the potential negative effects of these work organization changes that prompt action. Fast-paced work, continuous demand to learn and use newer technologies, and reduced people interaction are all causing significant stress on employees, placing higher demands on employees' well-being, and in turn, on the health and efficacy of organizations. This is especially true for people working in knowledge intensive work environment today. To add to this complexity, employees today are highly market-oriented and they no longer look at jobs for life. As a result, issues such as employee turnover, sickness absenteeism, high stress levels, and low performance, interpersonal conflicts at work, and so on, are becoming more common, which suggest that the organization of work in the knowledge economy is not as positive as it should be. Hence, the call for managing the people-side of organizations such as "healthy organization" does not come as a surprise. This paper explores literature on this area and gives a detailed account on the works of earlier researchers to delineate how healthy organizations have been described and explore effect of Occupational Health and Employees well being in the development of an organization and presents an agenda for future research.

# **OBJECTIVES**

- To determine factors that influence employee wellbeing, productivity and Organization performance.
- To explore the concepts of occupation, health and well-being
- To develop the relationship between employee wellbeing, occupational health and successful performance of an organization

## REVIEW OF THE LITERATURE

The term of organizational psychological capital is based on the theory of positive organizational behavior as Luthans (2002b) states "the study and application of positively oriented human resource strengths and psychological capacities that can be measured, developed, and effectively managed for performance improvement in today's workplace." Nowadays the roles of the social capital that describes the interpersonal relations and organizational networking, and human capital that refers the knowledge, capabilities and experiences of the employees are getting important in the organizational field. Paralleled with these development another term as organizational psychological capital that is discussed in terms of valuing and evaluating the human resources is becoming subject of different researches (Wright,

2003; Luthans, 2002b; Nelson and Cooper, 2007; Luthans et al, 2006). This new approach explores the psychological capacities and strengths of the positively oriented human resource for improving the organizational and personal performance and achieving the organizational success (Turner et al, 2002). Organizational psychological capital may regarded as a strength that should be retain and manage in promoting the personal development and performance at personal level and in increasing the leverage, performance, income and competitive advantage at the organizational level (Luthans vd., 2007; Wright, 2003). The attitudes of employees as organizational commitment and job satisfaction are known to be leading to important consequences for the organization behaviors such as performance, turnover, absenteeism, burnout, productivity, and customer satisfaction (Judge et al, 2001; Saari and Judge, 2004; Wegge et al, 2007; Meyer and Becker, 2004; Meydan et al, in press). Committed and satisfied employees who identify with organizational goals and values may be seen as a human resource for European Journal of Social Sciences - Volume 21, Number 3 (2011) improving the organizational performance and for achieving the organizational success in catching the competitive advantage. Form this point, because organizational commitment and job satisfaction attitudes have been relate to organizational performance, ultimately the components of organizational psychological capital may relate to these work attitudes. We suggest that employees who have high levels of self-efficacy, hope, optimism, and resiliency as components of organizational psychological capital may be more satisfied with their job and committed to their organization by the virtue of their cognitions, motivations and behaviors. This understanding may associate with the role of the core psychological states of organizational psychological capital in predicting employee's desirable attitudes in improving organizational performance. Specifically, the aim of the present study is to explore the effects of the organizational psychological capital on the attitudes of commitment and satisfaction. Employees' constant exposure to stress, if not handled effectively, can be destructive both for them in terms of the quality of their work and their physical and mental state and for the organization where they work (Maslach, 2003). Occupational stress inadvertently consequences low organizational performance (Elovainio et al. 2002), Job stress although has belittling impact on any organization and individual's performance but can shape dire consequences when related to health care. (Mimura e.t al. 2003). Job stress is considered rising and has become challenge for the employer and because high level stress is results in low productivity, increased absenteeism and collection to other employee problems like alcoholism, drug abuse, hypertension and host of cardiovascular problems (Meneze 2005). It is therefore important to know how occupational stress can be identified.

# WHO (WORLD HEALTH ORGANIZATION)

WHO is the directing and coordinating authority for health within the United Nations system. It is responsible for providing leadership on global health matters, shaping the health research agenda, setting norms and standards, articulating evidence-based policy options, providing technical support to countries and monitoring and assessing health trends. In the 21st century, health is a shared responsibility, involving equitable access to essential care and collective defense against transnational threats. WHO has had a special programme for occupational health since 1950 and close coordination and collaboration has taken place with ILO (International Labour Organization). In 1979 a new strategy for the further development of occupational health was launched when the World Health Assembly adopted Resolution WHA32.14 on the Comprehensive Workers' Health Programme. The WHO VIII General Programme of Work for the Years 1990-1995 recognized the seriousness of the health problems of working populations, of particularly the underserved in developing countries. The ambitious target of having at least 70% of countries develop occupational health programmes was set by the

VIII General Programme of Work. To achieve this target, the WHO Workers' Health Programme in collaboration with ILO and countries called for identification and control of health hazards at work, identification of national priorities, evaluation of occupational health measures, provision of information to employers and workers, and efforts to meet the needs of high-risk groups, child workers, agricultural workers, mining and small-scale industry workers, and those working in construction and home industries. Training of both occupational health personnel and primary health care workers in issues of occupational health was also encouraged. In 1980, Resolution WHA33.31 encouraged countries to integrate occupational health and primary health care services to cover underserved populations, particularly in developing countries. In the same resolution a need for further development of occupational health services, training and research was emphasized.

## WHO's Principles of Occupational Health and Safety

Occupational health is considered to be multidisciplinary activity aiming at:

- Protection and promotion of the health of workers by preventing and controlling occupational diseases and accidents and by eliminating occupational factors and conditions hazardous to health and safety at work
- Development and promotion of healthy and safe work, work environments and work organizations.
- Enhancement of physical, mental and social well-being of workers and support for the development and maintenance of their working capacity, as well as professional and social development at work
- Enablement of workers to conduct socially and economically productive lives and to contribute positively to sustainable development.

## WHAT IS AN OCCUPATION?

The basic premise of an occupation is a type of work or job that may be found in a number of different types of work or industries. Occupations focus on positions that require skills that may be used in a number of different work settings, allowing the individual with that skill set to move with relative ease from one industry to another as the need arises. Here are some examples of how occupations cover a great deal of employment ground, both with hourly jobs and with salaried careers. 'Chunks of activity within the ongoing stream of human behavior which are named in the lexicon of the culture' (Yerxa, 1989, p5). 'An activity or group of activities that engages a person in everyday life, has personal meaning and provides structure to time. Occupations are seen by the individual as part of his / her identity and may be categorized as self care, productivity and / or leisure.' (Creek, 2006, p205). Doing, being, becoming and belonging (Wilcock, 2006)

## WHAT IS HEALTH (WHO DEFINITION)

During the Ottawa Charter for Health Promotion in 1986, the WHO said that health is: "a resource for everyday life, not the objective of living. Health is a positive concept emphasizing social and personal resources, as well as physical capacities. But " The most commonly quoted definition of health is that formalized by the World Health Organization (WHO) over half a century ago; ""Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity."

## **OCCUPATIONAL HEALTH**

The research and regulation of occupational safety and health are a relatively recent phenomenon. As labor movements arose in response to worker concerns in the wake of the industrial revolution, worker's health entered consideration as a labor-related issue. In 1833, HM Factory Inspectorate was formed in the United Kingdom with a remit to inspect factories and ensure the prevention of injury to child textile workers. Since 1950, the International Labor Organization (ILO) and the World Health Organization (WHO) have shared a common definition of occupational health. It was adopted by the Joint ILO/WHO Committee on Occupational Health at its first session in 1950 and revised at its twelfth session in 1995. However, over the past decades several broader conceptualizations of well-being have been proposed, including not only affect, but also behavior and motivation (Ryff, 1989; Ryff & Keyes, 1995; Warr, 1987, 1994). This raises the question how subjective well-being should be understood: Does workplace health has really impact on organizational performance. This issue seems especially relevant in the context of occupational well-being. Some of the key outcome variables in work and occupational psychology tap aspects of affective well-being (e.g. job satisfaction, commitment and depression), whereas other outcomes measure aspects of these broader conceptualizations of wellbeing(e.g. motivation, competence and efficacy). The International Labour Organization (ILO) and the World Health Organization (WHO) define occupational health as 'the promotion and maintenance of the highest degree of physical, mental and social well-being of workers in all occupations by preventing departures from health, controlling risks, and adapting work to people and people to their jobs'. "A complete state of physical mental and social wellbeing at work - not merely the absence of disease and disability, that is influenced by factors within and outside the workplace" (Adaptation of WHO 1996 definition of health). Occupational health should aim at the promotion and maintenance of the highest degree of physical, mental and social well-being of workers in all occupations; the prevention amongst workers of departures from health caused by their working conditions; the protection of workers in their employment from risks resulting from factors adverse to health; the placing and maintenance of the worker in an occupational environment adapted to his physiological and psychological capabilities and, to summarize: the adaptation of work to man and of each man to his job. (Guidotti 2011, 5).

# Main Objectives of Occupational Health Programs

- The maintenance and promotion of workers' health and working capacity;
- The improvement of working environment and work to become conducive to safety and health
- Development of work organizations and working cultures in a direction which supports health and safety at work
  and in doing so also promotes a positive social climate and smooth operation and may enhance productivity of the
  undertakings.

# WHO's Occupational Health Programs

WHO's work on occupational health is governed by the Global Plan of Action on Workers' Health 2008-2017, endorsed by the World Health Assembly in 2007.

Recognizing that occupational health is closely linked to public health and health systems development, WHO is addressing all determinants of workers' health, including risks for disease and injury in the occupational environment,

social and individual factors, and access to health services.

WHO's work on occupational health objectives follow as:

- Devising and implementing policy instruments on workers' health;
- Protecting and promoting health at the workplace;
- Improving the performance of and access to occupational health services;
- Providing and communicating evidence for action and practice; and
- Incorporating workers' health into other policies.

## WELL BEING

Well-being has been defined as "optimal psychological functioning and experience" (Ryan & Deci, 2001, p. 142). Orem (1985) has emphasized well-being as a term that is used to describe an individual's perception of their condition. Well - being refers to the integration of a person's physical, mental, emotional, spiritual and social characteristics. Wellbeing is an internal construct which may be independent of external conditions (Hartweg, 1990; Orem, 1985). For example, it is possible to be ill or not healthy and still have a sense of well-being. For the purposes of this re v i ew, wellbeing has been defined as an internal construct made up of reflective and spontaneous dimensions. Well-being is a perceived state of harmony in all aspects of one's life. It is a state characterized by experiences of contentment, pleasure, by spiritual experiences, and a sense of happiness (Orem, 1985).

Well being dimensions are as follows:

- Physical- In spite of all the advances in modern medicine we seem to see more people than ever suffering some aspect of diminished quality of life due to chronic health issues of one kind or another. There is nothing quite like the joy of being set free from a debilitating chronic condition, or allergy, or seeing someone we love set free.
- Psychological- Psychological well-being is not just feeling "like ourselves again." When we are severely
  depressed, it's easy to idealize what our "normal" self was like. We believe that if we can stop feeling so down
  and worthless, you'll be fine. Well-Being Therapy is one of the newer treatments that frame recovery in this way.
  Instead of starting with everything that's wrong, it starts with everything that's right.

The therapy tries to strengthen six closely interwoven dimensions of a capable self: a sense of mastery of your environment, personal growth, purpose if life, autonomy, self-acceptance and personal relationships

- Social Social well-being is an end state in which basic human needs are met and people are able to coexist peacefully in communities with opportunities for advancement. This end state is characterized by equal access to and delivery of basic needs services (water, food, shelter, and health services), the provision of primary and secondary education, the return or resettlement of those displaced by violent conflict, and the restoration of social fabric and community life.
- Economic/Financial- It is discovered that financial well being is not normally achieved by just working harder or
  working longer hours, as that only tends to add significant stress to your current lifestyle. Rather financial well

being is more easily achieved by doing things in a better, smarter way. Often it's about simply taking what you already know, and are already doing, and learning to do it in a different, more effective way. Discover how to use technology to leverage your time to create additional income, and how co-operating with other people to harness the benefits of synergistic relationships can leverage your skill, knowledge and resources. Discovering how to use technology to leverage your time to create additional income, and how co-operating with other people to harness the benefits of synergistic relationships can leverage our skill, knowledge and resources.

• Environmental- We are all impacted by the environment we live in, particularly the immediate environment in and around our home. It makes good sense therefore, to ensure that our environment is both safe for us to live in and cared for to ensure it is sustained. living in harmony with the natural world, while at the same time recognizing the value of science and the rich heritage of knowledge we have. This then enables us to manage and care for our environment so as to ensure it is protected and sustained, as well as living life to the fullest so we can enjoy, and benefit from all that science and nature have to offer. Combining the best of science with the best of nature allows us to maximize these benefits.



Source: Dr Smith's, health and wellbeing uk, <a href="http://www.healthandwellbeinguk.com/">http://www.healthandwellbeinguk.com/</a>

**Figure 1: Well Being Dimensions** 

# **Employee Wellbeing**

Employee wellbeing is associated with lower withdrawal and greater voluntary performance. Withdrawal refers to uncertified sick leave, lateness, stress-related compensation claims and turnover. Voluntary performance includes effort and commitment, offering help and promoting the organization. The overall climate of the workplace is a stronger influence on workers wellbeing than individual 'stressors' like traumatic events or arguments. Stressful situations can't be avoided altogether; improving overall morale and support in the workplace is more likely to reduce sick leave and compensation costs. Effective strategies include improving leadership skills, reviewing standard practices and procedures and offering counseling services. (When a person is in distress, however, specific psychological treatments are more effective than general counseling.). Assessing Employee well-being is based on the effects of the work environment on employee satisfaction and health (wellness). How employees are affected impacts on organizational performance (think of the impact of employee commitment and presenteeism can have). So how employee well-being is supported either contributes to workplace productivity or saps an organization's health in compensation costs, effort, and damaging consequences.

## **Factors That Influence Employee Wellbeing**

The most important factors that influence employee well-being are

- The 'organizational climate' in the workplace
- Personality factors
- Positive or negative experiences at work

Organisational climate' was the most important influence. This term refers to the employees overall impression of how the organisation is run, the leadership practices, standard procedures, workplace culture etc. The organisational climate has been shown to be more important than individual difficulties or stressors in determining an employee's wellbeing. The study also found that improving management styles and overall workplace practices reduces stress more effectively than teaching employees individual coping skills. Individual characteristics are also an important influence on wellbeing. This study found that an emotional personality is the strongest influence on how much distress a person will experience. In these cases, individual psychological treatments are believed to be more effective than generic stressmanagement or supportive counselling services. Counsellors can vary in their level of training and experience, and the authors of this study suggested that clinical treatment should be available where necessary. However, employees who see workplace counsellors tend to be highly satisfied with the service provided. These services may be good for improving the support and increasing morale, but may be inadequate for dealing with severe distress.

#### ORGANISATION HEALTH AND ORGANIZATION'S PERFORMANCE

# The Concept of Organizational Health

Health is often considered as the absence of disease. According to the World Health Organization (1998), "health is a state of complete physical, mental, spiritual and social well-being and not merely the absence of disease or infirmity." Healthy people respond to various challenges and tend to lead a happy and productive life. As with healthy people who characterize vigour, flourishing, robust, thriving, resilient, and fit, so do healthy organizations. From an exclusive focus of examining health in organizations as a absence of disease (biomedical approach), work in this area has been evolving to explore positive work environment factors (humanistic approach) for employee health, well-being and performance. According to De Smet and his colleagues (2007), conceptualizing health of organizations emerges out of a metaphor "performance and health," which improves when cared for and deteriorates when ignored, thus signifying the importance of employees' well-being for business profitability, [19] the central notion of healthy organization approach. As such, humanistic psychologists (for example, Vroom, 1964; Herzberg, 1974), medical professionals, management scholars, and so on have played the central role in the development of this concept and provide backdrop to the current focus. This new thinking has also been reinforced by recent advances in the management of human resources (HR), making it imperative that employees' well-being and organizational performance draw on each other strengths. Empirical studies on healthy organization have been significant in at least two disciplines, educational settings with the development of a valid OHI by Hoy and Feldman (1987) and not for profit institutions. These studies examined the context of school environment, teacher's functioning, work quality, efficacy of schools, and indicator of its socio-psychological status. Among studies in business organizations, Adkins (1999) proposed organizational health concept as an extension of occupational health psychology with a clear organizational focus, and Danna and Griffin (1999) review-related employee well-being to

organizational effectiveness and functioning. Most recently, some researchers have recommended for a process-based model of 'healthy organization', as they considered organizations as having system properties. According to Lowe (2003, 2010) defines a healthy organization as "one whose culture, climate and practices create an environment that promotes employee health and safety as well as organizational effectiveness

## **Organization's Performance**

A healthy organization: "achieves its goals based on an environment that places importance on both improving organizational performance and supporting employee well being". The health of an Organization's Performance is not difficult to see. Even a visitor notices an organization's performance through employee responses, management attitudes, and the "feel" of the workplace. So assessing organizational performance can be formal and also informal and personal. But in one way or another it looks at stakeholder satisfaction in the value of organisational performance, such as:

- Shareholder satisfaction in the value of financial performance;
- Customer satisfaction in the value of products and services;
- Community or regulator satisfaction in the value of environmental management;
- Management and employee satisfaction in HR and IT services;
- Employee satisfaction in the value of employment conditions, work relations, and the way they are managed.
- Organizational Health is an evolving concept providing users with ways to understand and take action to improve performance and well-being.

# THE EFFECT OF WELLBEING ON ORGANIZATIONAL PERFORMANCE

Increasing employee wellbeing reduces their rate of withdrawal. 'Withdrawal' refers to missed work, turnover, uncertified sick leave and stress-related compensation claims, all of which are costly for organisations. The researchers found that the strongest influences on withdrawal were personality, organisational climate, work experiences and emotions. Wellbeing also influences employees voluntary performance – that is, the work they do that supports the organisation, but isn't part of their main responsibilities. Some examples are: dedication and making an effort, volunteering to do tasks, helping others in the workplace and promoting the organisation to other people. Voluntary performance is increased by improving wellbeing.

## Technology and Wellbeing & Occupational Health

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 worktime scheduling have radically transformed the nature of work in many organizations. The workforce itself is also diversifying, with an increase in female participation, a growing number of dual-earner couples and older workers. Asif (2009) attributes the high levels of occupational stress to new technology. He argues that technology was supposed to shorten our working week and give us more leisure time, but the reverse seems to be happening, we're all working longer hours and spending less time on family & leisure activities. Rapid changes in working environment and working practices often lead to increased job related stress levels. Subha & Shakil (2010) write that many people in many different types of

jobs and occupations are finding themselves struggling to keep up with the pace of change of modern technology. Now days, workers often feel like they are just part of the machine, rather than individuals. More people than ever before work alone or in isolation from their colleagues. In a study conducted in Austrian universities by Gillespie et al (2001), it wasfound out that a third of all groups reported that the introduction of new technologies (e.g. internet communication, web-based and on-line teaching) and software packages, increased their workload and contributed to stress. University staff commonly referred to a lack of adequate training and time allocated to developing the required skills and knowledge to use these systems efficiently which creates unrealistic pressure and much more occupational stress. Asif further attributes stress to other factors such as; shift of work, deadlines, longer working hours, distance to workplaces or commuting to workplaces, unfavorable working conditions, workmates and colleges, boredom, and job security.

## HEALTHY WORKPLACE FRAMEWORK DEVELOPMENT

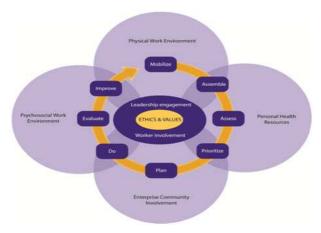
In recent years, more attention has been paid to organizational ethics because The most basic of ethical principles deals with avoiding doing harm to others. The United Nations Global Compact is an international leadership platform for businesses that recognizes the existence of universal principles related to human rights, labor standards, the environment, and anti-corruption. At present there are over 7700 businesses from over 130 countries that have participated, to advance their commitment to sustainability and corporate citizenship. At the XVIII World Congress on Safety and Health at Work held in Seoul, Korea in 2008, participants signed the Seoul Declaration on Safety and Health at Work, which specifically asserts that entitlement to a safe and healthy work environment is a fundamental human right. Employers are recognizing the competitive advantage that healthy workplace can provide to them, in contrast to their competition, who would feel that a healthy and safe workplace is just a necessary cost of doing business."

## WHO Healthy Workplace Model

Due to mounting social and public pressure and rising consumer expectations, enterprises are increasingly being expected to go beyond their legal requirements and act more responsibly. Creating workplaces that are healthy for their employees and that prevent illness and disease, is one way in which companies can meet these rising expectations, while also improving productivity and competitiveness. While there are a number of tools available for creating healthy workplaces at the enterprise level, most focus on specific occupational hazards, industries or sectors but no comprehensive scheme for good practice exists. To provide companies with such a scheme, the World Health Organization (WHO), on the basis of the WHO Global Plan of Action on Workers' Health, 2008-2017, launched the Global Framework for Healthy Workplaces in April 2010. Good practices and tools that fit the Framework are being collected for practical implementation.

- Physical Work Environment- It's an environment in which the health & safety concerns. The hazards are chemical, ergonomic, biological, driving, etc
- Psychosocial Work Environment- It's an environment in which includes health, safety & well-being of
  organization of work & workplace culture. The hazards are poor work organization, organizational culture, shift
  work issues, fear of job loss, etc
- Personal Health Resources -It's supporting & encouraging of employer healthy lifestyle. The hazards are
  physical activity, poor diet, alcohol/drug abuse

• Enterprise Community Environment It's ways of participating in the community to improve the health of workers, their families & members of a community. The hazards are poor air quality, polluted water, lack of literacy, lack of access to primary health care, etc.



Source: World Health Organization's, <a href="http://www.healthatworkpeterborough.ca">http://www.healthatworkpeterborough.ca</a>

Figure 2: Healthy Workplaces A Model for Action

#### PROMOTING WELL BEING & HEALTH STRATEGIES

Improved wellbeing means higher morale (more positive emotions), less distress and higher job satisfaction that can weigh up employees positive and negative experiences.

Employees' positive and negative experiences need to be considered separately. When it comes to preventing withdrawal from work (including absence and stress-related compensation claims), increasing morale in the workplace is more effective than decreasing distress. Individual cases of low wellbeing might be caused by high distress or by low morale. These two problems need to be managed in different ways. Withdrawal behaviors, including stress-related compensation claims, are often caused by low morale.

To improve wellbeing in the workplace it is necessary to reduce distressing situations, but it is more important to increase positive experiences and foster overall positive feelings towards work. Improved employee wellbeing improves the productivity of the organization they work for by increasing performance and reducing withdrawal behaviors such as unexplained absence, stress leave and turnover. Stress is more likely to be caused by overall organizational problems than by individual negative experiences. The most effective way to increase morale and decrease distress in the workplace is to improve leadership styles and employee recognition, and make employees responsibilities clear. This is likely to increase productivity and reduce compensation premiums. Organizational climate is also the strongest influence, apart from an emotional personality, on an employee's level of distress. The 'organizational climate' - the overall conditions and culture in the workplace - has the strongest influence on positive emotions. Workplace counseling services may increase support and morale in the workplace. However in cases of severe distress, clinical treatment might be necessary.

# **CONCLUTIONS**

Occupational health and safety continues to be one of the most critical but highly criticized issues within the

discipline of human resource management. The purpose of this study was to investigate the influence of Occupational Health and Employees well being on Organizational performance. Improving wellbeing that is higher morale (more positive emotions), less distress leads to higher job satisfaction that is judgment of employees about their work by weighing up their positive and negative experiences. Improved employee wellbeing improves the productivity of the organization they work for by increasing performance and reducing withdrawal behaviors such as unexplained absence; stress leave and turnover. Many employers are now recognizing their social obligation to their workforce and are becoming increasingly engaged in assisting workers manage their health and wellbeing. Therefore, an organization itself plays an important role by increasing the employer's awareness & providing healthy & safe work place.

## REFERENCES

- 1. Adkins JA. (1999). Promoting organizational health: The evolving practice of occupational health psychology. Professional Psychology: Research and Practice. 30:129-37.
- 2. Asif Kamboh (2009): Factors That Affect Employee Performance in a Organization eHow.comhttp://www.ehow.com/list\_5923847\_fact ors-affect-employee-performance-organization.html
- 3. Danna, K. and Griffin, R. W. 'Health and Wellbeing in the Workplace: A Review and Synthesis of the Literature,' Journal of Management, Vol. 25, No. 3, 1999, pp. 357–384.
- 4. De Smet A, Loch M, Schaninger.B. (2007). Anatomy of a healthy corporation. The Mckinsey Quarterly, 1-11.
- 5. Elovainio, M, Kivimaki, M and Vahtera, J (2002). 'Organizational justice: evidence of a new psychosocial predictor of health' American Journal of Public Health, Volume 92, Issue 1, 105-108
- 6. Gillespie et al (2001): Stress Management in the Process of Occupational Stress Reduction; Journal of Managerial Psychology Volume: 2 Issue: 1
- 7. Hartweg, D.L. (1990). Health promotion self-care within Ore mÕs gener- al theory of nursing. Journal of Advanced Nursing, 15, 3 5 4 1.
- 8. Herzberg F. (1974). Motivation- Hygiene profiles. Organ Dyn;3:18-29
- 9. Hoy, W. K., & Feldman, J. A. (1987). Organizational health: The concept and its measure. Journal of Research and Development in Education, 20, 20-38.
- 10. Judge, T. A., & Bono, J. E. (2001). Relationship of core self-evaluation traits—self-esteem, generalized self efficacy, locus of control, and emotional stability—with job-satisfaction and performance: A meta-analysis. Journal of Applied Psychology, 86: 80 –92.
- 11. Lowe G. (2010). Healthy Organizations: How vibrant workplaces inspire employees to achieve sustainable success. Ontario, Canada: University of Toronto Press.
- 12. Luthans, F. (2002b). Positive organizational behavior: Developing and managing psychological strengths. Academy of Management Executive, 16, 57–72.
- 13. Luthans, F., & Avolio, B. J., Avey, J. B., & Norman, S. M. 2007. Psychological capital: Measurement and relationship with performance and satisfaction. Personnel Psychology, 60: 541–572.

- 14. Luthans, F., & Youssef, C. M. (2007). Emerging positive organizational behavior. Journal of Management, 33: 321–349.
- 15. Luthans, F., Avey, J. B., Avolio, B. J., Norman, S. M., & Combs, G. J. (2006). Psychological capital development: Toward a microintervention. Journal of Organizational Behavior, 27: 387–393.
- 16. Luthans, F., Avolio, B. J., Avey, J. B., & Norman, S. M.(2007). Positive psychological capital: Measurement and relationship with performance and satisfaction. Personnel Psychology, 60, 541–572.
- 17. Luthans, F., Youssef, C. M., & Avolio, B. J. (2007). Psychological capital: Developing the human competitive edge. New York, NY: Oxford University Press.
- 18. Luthans, F., Youssef, C. M., & Avolio, B. J. (2007). Psychological capital: Developing the human competitive edge. Oxford, UK: Oxford University Press.
- 19. Maslach, C. (2003). Job burnout: New directions in research and intervention. Current Directions in Psychological Science, 12, 189\_192.
- 20. Meneze M. M, (2005), The Impact of Stress on productivity at Education Training & Development Practices: Sector Education and Training Authority.
- 21. Meydan, C.H., H.N., Basım, and F., Çetin, (2011). "The Effect of Organizational Justice
- 22. Meyer, J.P., and T.E., Becker, 2004. 'Employee Commitment and Motivation: A Conceptual Analysis and Integrative Model', Journal of Applied Psychology 89(6), pp. 991-1007.
- 23. Mimura, C and Griffiths, (2003). 'The effectiveness of current approaches to workplace stress management in the nursing profession: an evidence based literature review', Occupational and Environmental Medicine, Volume 60,Pages 10-15
- 24. Nelson, D., & Cooper, C. L. (Eds.). (2007). Positive organizational behavior. Thousand Oaks, CA: Sage.
- 25. Orem, D.E. (1985). A concept of self-care for the rehabilitation client. Rehabilitation Nursing, 10, 3 3 3 6 Perception and Organizational Commitment on Burnout: An Investigation on Turkish Public Sector", Bilig, in press.Resource Management 43, pp. 395-407.
- 26. Ryan, R. M., & Deci, E. L. (2001). On happiness and human potentials: A review of research on hedonic and eudaimonic well-being. Annual Review of Psychology, 52, 141–166.
- 27. Ryff, C. D. (1989). Happiness is everything, or is it? Explorations on the meaning of psychological well-being. Journal of Personality and Social Psychology, 57, 1069–1081.
- 28. Ryff, C. D., & Keyes, C. L. M. (1995). The structure of psychological well-being revisited. Journal of Personality and Social Psychology, 69, 719–727.
- 29. Saari, L.M. and T.A., Judge, (2004). "Employee Attitudes and Job Satisfaction", Human
- 30. Turner, N., Barling, J., & Zacharatos, A. (2002). Positive psychology at work. In C. R. Snyder & S. J. Lopez

- (Eds.), Handbook of positive psychology: 715–728. Oxford, UK: Oxford University Press.
- 31. Vroom VH. (1964), (Work and motivation. New York: John Wiley and Sons.
- 32. Warr, P. (1987). Work, Unemployment, and Mental Health, Clarendon Press, Oxford
- 33. Warr, P. (1994). `A conceptual framework for the study of work and mental health', Work and Stress, 8(2), 84±97.
- 34. Wegge, J., K., Schmidt, C., Parkes, and K. Van Dick, (2007). "Taking a Sickie': Job Satisfaction and Job Involvement as Interactive Predictors of Absenteeism in a Public Organization", Journal of Occupational and Organizational Psychology 80, pp. 77-89.
- 35. Wilcock, A. A. (2006). An occupational perspective of health. Thorofare, NJ: Slack Incorporated.
- 36. Wright, T. A. (2003). Positive organizational behavior: An idea whose time has truly come. Journal of Organizational Behavior, 24: 437–442.
- 37. Yerxa, E. J., Clark, F., Frank, G., Jackson, J., Parham, D., Pierce, D., Stein, C., & Zemke, R. (1989). An introduction to occupational science, a foundation for occupational therapy in the 21st century. In J. A. Johnson & E. J. Yerxa (Eds.), Occupational science: The foundation for new models of practice. (pp. 1-17). New York: The Haworth Press.