Prevention Research Collaboration

EMPLOYER PERSPECTIVES OF WORKPLACE HEALTH PROMOTION

- KEY FINDINGS FROM QUALITATIVE INTERVIEWS

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Contents

EXECUTIVE SUMMARY

Workplaces are an important setting for health promotion and provide an avenue to reach large numbers of adults. Little is known, however, about employers' views of workplace health promotion (WHP), particularly in Australia. This qualitative study aimed to explore the views of employers about WHP, in particular the value and priority placed on promoting employee health, who should be responsible, as well as key barriers and facilitators. Interviews also aimed to gain an understanding of how workplace health programs and activities are currently being implemented by workplaces. Participants (n=25) comprised employers who expressed interest in participating in a semi-structured interview, as part of a survey on WHP conducted amongst businesses in the Parramatta LGA. Interviews lasted on average 30 minutes (SD: 11, range 13 to 52 minutes), were tape recorded and transcribed with participants' permission, and analysed for key themes emerging in relation to the research aims.

The majority of businesses (15/25) discussed the promotion of employee health in some form. Most businesses discussed planning activities and programs in consultation with employees, and using a range of promotional strategies to engage employees; however, few formally evaluated their programs.

While employers generally had an holistic view of health, their understanding of workplace health promotion was limited, with few mentioning the importance of a health promoting work environment or the role of workplace policies in promoting health. The main benefits or value placed on WHP by employers related to the broader social benefits of creating a 'caring culture', with a positive team climate considered important in attracting and retaining staff and maximising productivity. Key barriers to WHP discussed by employers included financial costs, time constraints, lack of employee interest and management support. Support for businesses in the form of a website and/or tool kit providing information on low cost activities, policy options, micro environmental changes, as well as sharing ideas by networking with other local businesses, may be a useful starting point to encourage WHP. Employers considered the government to have an important support role, which could include the provision of funding in the form of small grants, financial incentives and subsidises, and coordination of activities to allow engagement of small workplaces.

This was a small qualitative sub-study conducted amongst a purposeful sample of employers who participated in a survey of WHP in one LGA (Parramatta). It is likely that participants were more interested in WHP, as they agreed to participate in an interview on the topic. The results are thus not intended to be generalisable to all Australian employers but to provide some new insights into the views of an interested group of employers.

BACKGROUND

Workplaces are well recognized as an important setting for health promotion and chronic disease prevention [1, 2], and provide an avenue to reach large numbers of adults, many of whom have chronic disease risk factors. In Australia, approximately 60% of the population is employed, with over 40% of this workforce having three or more behavioural risk factors for chronic disease, including smoking (22%), physical inactivity (70.1%), overweight or obesity (59.9%), and excessive alcohol intake (24.3%) [3]. Workplace health promotion (WHP) interventions have been shown to be effective in improving behavioural risk factors for chronic disease and obesity [4-6]. In Australia however, WHP is in the early stages of development and little is known about how to promote the uptake of WHP programs and activities.

 WHP can be considered an innovation within a business or organization, with certain types of organizations more predisposed to adopt such innovations [7]. Employers' beliefs and attitudes form the foundation for any willingness to engage with and implement WHP; in particular, employers' beliefs about the value and benefits of WHP, the priority placed on this within the organization, and perceptions about who should be responsible for funding and implementing such programs and activities [8-10]. Attitudes therefore are critical to building the health promotion capacity of businesses and organizations.

Little is known about the attitudes of employers towards WHP in the Australian context or internationally. Only two unpublished studies of Australian employer attitudes [11, 12], and only a small number of overseas studies [13, 14] were located. Studies conducted to date have been predominantly quantitative and focused on large businesses, and there has been little qualitative research to explore employer attitudes towards WHP in depth, particularly amongst small and medium size businesses.

This qualitative study is part of a larger study on workplace health promotion in the Parramatta LGA.

AIMS

1) To gain an understanding of how workplace health promotion programs and activities are currently being implemented by businesses; AND
2) To explore employer views regarding workplace health promotion, in particular the value and priority placed on the promotion of employee health, who should be responsible, as well as key barriers and facilitators.

METHODS

Recruitment

Ethics approval for the interviews was obtained from The University of Sydney Human Ethics Committee. All businesses (n=54) who expressed interest in participating in an interview with a researcher, as part of a workplace survey conducted in the Parramatta Local Government Area (LGA), were invited to participate in a semi-structured interview. An initial email invitation was sent

and non responders were followed up with a telephone call (up to three attempts were made to contact potential participants on different days and at different times).

Data Collection - Qualitative

Businesses were offered the option of either a 'face to face' or telephone interview, depending on their preference. Key topics covered in the interview (Table 1) were informed by the existing literature on issues identified to be important in influencing the implementation of workplace health promotion programs/activities. Interviews were conducted by three researchers (RL,CP,ASG) and were tape recorded with participants' permission.

Data Collection – Quantitative

A total of 1693 businesses from Parramatta LGA were invited to participate in an employer survey. The survey was implemented in partnership with a NSW local health district (Sydney West) and the local city council. The council endorsed and supported the implementation of the survey and provided a database of businesses in the LGA. The majority of businesses (n=1635) was mailed the survey, a random sample was contacted by telephone (n=34) and invited to participate, and the survey was emailed to a further 24 businesses. The survey contained questions on employers' attitudes towards WHP, barriers and types of assistance sought by employers, as well as items on the current WHP activities and characteristics of the workplace. The survey questionnaire is available from http://hdl.handle.net/2123/8734

Data Analysis

Interviews were transcribed verbatim and interview transcripts coded using Nvivo (9th edition) qualitative software program (QRS International 2009). Data analysis involved three main steps: 1) each segment of data was initially coded by one researcher (RL) under broad categories related to each of the interview topics (eg value of workplace health promotion); 2) all data for each category was then reviewed by the same researcher and coded further into sub-categories (eg 'creating a caring culture' was a sub-category of the broad category 'value of workplace health promotion'). All sub-codes were reviewed to identify divergent and convergent themes using constant comparison technique (Patton 2002) with attention paid to important contextual factors such as business size, position of the interviewee (general manager/owner versus human resource officer), sector (public, private, not for profit) and industry type . For more complex categories visual models were then created to illustrate the link between sub-categories and relationship with contextual factors which aided in the interpretation and presentation of findings. Key categories and sub-categories were reviewed by one other researcher (ASG or CP) and checked against the presentation of findings to ensure accurate and full representation of participant views.

Table 1. Interview topics

- Perception of workplace health promotion
- Existing activities, programs, policies or aspects of the workplace environment that support employee health and well being
- For businesses with existing activities or programs the following issues were explored:
  - The planning process (rationale for choosing particular activities, employee involvement with planning, workplace health promotion goals)
  - Implementation (promotion of activities, factors assisting with initiation and maintenance of activities, extent of management support)
  - Experience of using workplace health provider (if applicable)
  - Employee engagement (extent of engagement, barriers and strategies for enhancing engagement)
  - Evaluation (how success is determined)
- For businesses with no existing programs/activities the following issues were explored:
  - Interest in providing future activities / programs
  - Key requirements to implement future activities/ programs
- Value and perceived priority of workplace health promotion
- Responsibility for workplace health promotion (employer, employee, government)
- Barriers to workplace health promotion
- Enablers/assistance required to support workplace health promotion
- Any additional issues participants wished to discuss in relation to workplace health promotion

RESULTS

Participant Characteristics

A total of 54 businesses expressed interest in participating in an interview. Of these, 28 businesses (52%) initially agreed to participate but three were unable to complete the interview within the required timeframe, resulting in 25 completed interviews. Seventeen businesses were not contactable after three phone call attempts, whilst eight businesses declined. Reasons for declining included a lack of interest (n=3), time constraints (n=3), no existing health promotion programs/activities (n=1), and inadequate English (n=1). Around half of the participating businesses were small (<20 employees), the majority were from the private sector with a broad range of industries represented (Table 2). Businesses were at various stages of readiness to implement workplace health promotion activities and few had an allocated budget or a structured program. While the priority businesses currently placed on workplace health promotion was mixed, most felt that this should be of a high or very high priority for their business (Table 2). Interviews lasted on average 30 minutes (SD: 11) but ranged from 13 to 52 minutes.

Table 2. Characteristics of Participating Businesses

Business Characteristics (n=25)	number
Size	
small (<20 employees)	11
medium (20-199 employees)	8
large (200+ employees)	6
Sector	
Private	17
Not for profit sector	7
Government sector	1
Industry type	
Health care and social assistance	8
Professional, Scientific and technical services	5
Accommodation and food services	3
Education and training	4
Financial and insurance services	1
Manufacturing	2
Retail trade	2
Rental, hiring and real estate services	0
Construction	0
Other services	0
Role of Interviewee	
Human Resource Manager or Equivalent	8
Business Owner/Manager	15
Other (office manager)	1
Readiness to implement workplace Health Promotion	
Pre-contemplation	5
Contemplation / preparation	9
Action / Maintenance	10
Missing data	1
Existing Health Promotion Program	
Structured program	4
Allocated budget	3
Employee responsible for workplace HP	10
Priority currently placed on promoting health and well being of employees	
Very high/high	7
Moderate	10
Low/none	8
Priority the business should place on promoting health and well being of employees	
Very high/high	18
Moderate	7
Low/none	0

Health and Wellness Activities/ Programs Undertaken by Businesses

When asked about what workplaces currently do to promote employee health, three main categories emerged (Table 3):

1) Workplace policies to promote health (informal and formal)
2) Workplace facilities and environmental factors (basic and health related)
3) Health and wellness activities/programs (informal and planned / structured)

Table 3. WHP activities and programs undertaken in employer business/organisation

	Small (n=11)	Medium (n=8)	Large (n=6)	Total
Workplace policies to promote health				
Flexible work arrangements	4	1	1	6
Managing employee workloads	3	0	0	3
Preserving employees lunch hour (1/8)	0	1	0	1
No smoking policy	1	1	0	2
Facilities and environmental factors				
Basic facilities (fridge, microwave, kettle)	11	8	6	25
Free fruit provided	2	2	3	7
Free healthy snacks provided	0	1	0	1
Free biscuits, snacks, soft drinks, juices	0	1	0	1
Vending machines onsite	0	1	0	1
Healthy meals provided at training events	0	1	0	1
Free staff canteen with healthy options	0	0	2	2
Access to free to subsidized gym	0	0	4	4
Onsite pharmacy with discounted medications	0	1	1	2
Onsite health clinic with access to nurse and Dr	0	0	1	1
Infection control equipment available (masks/sanitiser)	1	1	0	2
Injury prevention equipment provided	3	0	0	3
Health and Wellness activities/ program				
informal conservations and activities around health between colleagues (eg sharing of 'diets', colleagues walking in lunch hour)	3	2	0	5
Flyers, posters or brochures on health topics made available (often linked to 'health weeks)'	2	1	2	5
Health information and links to additional resources made available on intranet	0	0	3	3
Seminars on health topics (mental well being predominantly but also nutrition, physical activity injury prevention, infection control)	3	1	4	8
Organised sports	1	1	3	5
Physical activity sessions provided (yoga, pilates, exercise DVDs)	0	1	1	2
Free pedometers provided as part of formalised program	0	0	2	2
Free flu vaccinations	1	3	4	8
Access to employee assistance programs (for counselling)	0	1	1	2
Health risk assessments	1	0	2	3
Discounted health insurance made available	0	1	1	2
no structured activities/programs with the exception of basic facilities	7	3	0	10

Small Businesses:

Small businesses / organisations predominantly discussed promoting employee health through offering flexible work arrangements, managing employee workloads and through informal conversation and activities between colleagues related to health, such as sharing 'diets', and walking together at lunch time.

"I'm trying to control the case loads so people don't feel like they're exhausted. We have flexible working arrangements. People can work from home if they have lots of paperwork so they don't have to travel in" (Participant 14, manager small private business).

The majority (7/11) did not offer any structured activities, information or programs related to health and just provided basic facilities, as discussed by this participant:

"… water cooler. That's probably about it, really. There is, obviously ,a … facility for a tea room, a staff room I guess you could call it with the normal accoutrements, the microwave and a fridge and all those sorts of things. But other than that, nothing really" (Participant 6, small business owner).

Medium Businesses:

In contrast, medium size businesses were less likely to discuss workplace policies to promote employee health but more likely to discuss providing some structured activities and programs, such as flu vaccinations, which were organised directly with health clinics or through external providers.

"Last year we were very keen for staff to have flu vaccinations and so we organised with the local medical practice that we would - because flu is standard Medicare and they could go down there any time" (Participant 10, medium size private business).

Only 3 of the 8 medium size businesses did not offer any structured activities, information or programs related to health apart from basic facilities.

"I don't know that we actually do much in relation to workplace health promotion ... I guess my role should be to encourage people, but probably I don't do very much. If I'm going to be honest" (Participant 22, manager medium size not for profit organisation).

Large Businesses:

All of the large businesses interviewed discussed providing some health and well being activities, programs or facilities to promote health. Most commonly mentioned were providing access to subsidized gym membership (with two offering onsite gym facilities), organised sports during work time, free flu vaccinations and seminars on health topics.

"We have a number of programs that we roll out to our staff ... We've got a 10,000 steps program ... We have a BUPA corporate program where we provide discounted private health insurance services for all our employees. Also have a similar program with Fitness First where, obviously there's incentives to join up with corporate discounts. We also have an intranet system where employees can access the Fitness First link and download healthy recipes and whatnot ... We're also promoting the City To Surf coming up ... Ride to Work Week, I think we've got that coming up where we're

encouraging people who can – obviously who are local – to ride their bikes or walk to work rather than using public transport or their vehicles. We also have an EAP program ... employee assistance programs – to deal with the workplace stress and if things aren't going too well for a particular person they can ring up this service free of charge and speak with one of the members of the counselling team. We also have yoga and Pilates programs where people can put their names down to join in during work hours, so we don't charge anyone for these and it doesn't come out of their own time, so we encourage these sort of physical activities within working hours, which I guess is promoting the health and wellbeing of our staff ... And as I mentioned I just noted here, free fruit bowls, cold filtered water is available" (Participant 17, HR manager, large not for profit organisation).

Two large businesses offered health risk assessments for staff. One of these businesses offered a one to one consultation with the OH&S manager (a nurse) who undertook a cardiac health risk assessment (including blood pressure, anthropometric measures, and lifestyle assessment) followed by brief advice, information and referral onwards. The other large business offered a computerised health risk assessment to be self completed by staff. Participating staff members received personalised feedback and the information was used collectively by the business to inform the development of the health and wellness program.

"One of the tools that we use, it's called like a personal wellness ... we encourage our employees to once a year go in and punch in their details. That takes into account weight, where they are at the moment with their health, cholesterol, diabetes, anything like that, whether they're at risk of it. Once you put in all of your details ... then it generates a report for you and it sort of tracks where you're sitting with your health. Once employees have put that through, the program can actually come up with issues that, for example, if diabetes is a problem within our site, it will generate a report saying that 80 per cent of your employees are at risk of having diabetes" (Participant 15, HR manager, large private business).

Only one large business mentioned having policies related to employee (offering flexible work hours).

The Planning Process

For most businesses the decision to implement particular health promotion programs or activities was largely driven by employees through a range of consultation processes. This ranged from informal discussion in smaller businesses, for example in staff meetings, to more formal consultation processes in some larger businesses, for example staff feedback surveys. Some businesses discussed that the ideas put forward are then considered by management or an OHS Committee who gave final approval for activities/program.

"We have a fortnightly staff meeting and we will raise those sorts of issues at staff meetings. Quite often the staff will raise those sorts of issues and so that's really good" (Participant 20, manager small organisation)

"We did collect some surveys ... we would list a range of topics for them to nominate that they would like to see .... we came up with, I guess, a handful of topics ... which we ... proposed to the exec (executive) some of the topics that we thought would be beneficial" (Participant 24, HR manager, large organisation).

In contrast, a small number of businesses (n=3, 2 large and 1 medium) indicated that the choice and decision to implement various activities came largely from management and involvement of employees was minimal. One business discussed that it was difficult to engage employees because of a lack of interest in health issues.

"I mean it's really something that I guess management's gone 'oh look, this would be a very good idea and let's go and do it …' I mean it's hard enough for me to try to get an OH&S committee together; people just don't want to attend" (Participant 11, HR manager, large business).

Another business indicated that their choice of activities was largely driven by the results of employee health risk appraisals undertaken annually, with OH&S team and supervisors responsible for planning an annual program of activities.

"It's called like a personal wellness profile … we encourage our employees to once a year go in and punch in their details. That takes into account weight, where they are at the moment with their health, cholesterol, diabetes, anything like that, whether they're at risk of it … When we have that sort of data then what we do is we work with that and we try and put programs in place" (Participant 15, HR manager, large business).

Two businesses also discussed that, in addition to employee suggestions, the choice of activities was also guided by key health issues arising in the workplace or particular industry, for example depression, anxiety and stress.

"Well, the [X] industry is quite well known for mental illness and depression, so, I guess, just being aware that we are in that industry and our employees are susceptible to that. So that's what's triggered it [choice of program] in the past and it's still a current topic so we just run something every year" (Participant 8, HR manager, medium size business).

A few businesses (n=4) also aligned workplace health activities with existing events such fun runs, and state and national events such as heart week, ride to work day, etc.

Employee Participation
Promotional Strategies Used

Small businesses reported promoting workplace health activities informally through word of mouth and during general staff meetings.

"Pretty much just word of mouth and peer encouragement" (Participant 14, manager small business).

Medium to large businesses more often discussed using email, printed information on noticeboards and promoting activities on their intranet site. Two HR managers from large businesses discussed the importance of personally engaging middle managers and supervisors in promoting activities.

"I sent an email out and at the bottom in big bold letters we always say, managers please print this off … for staff who don't have emails … But then I do my rounds. I go for my walkabouts (to discuss with the managers)" (Participant 13, HR manager, large business)

Specific Strategies Used to Engage Employees in Health and Wellness Activities

Participants discussed using a wide range of strategies to help encourage employees to participate in health and wellness activities at work. These included:

- verbal encouragement from employees already participating
- recruiting an employee champion
- engaging employees in the planning process
- promoting the health benefits of activities
- endorsement by management
- offering sessions on different times/days of week in negotiation with key managers
- offering a range of different types of activities
- offering activities in work time
- providing free or subsidised activities
- promoting widely (posters, emails, flyers, payslips, etc)
- in-house competitions with prizes.

"Word of mouth I think. You know a lot of the times you hear, such and such told me about this and so I am coming along, that's from the conversations that you have with people that attend the sessions" (Participant 24, HR manager, large organisation)

"I guess the financial incentive's there, so for programs like our private health insurance and Fitness First programs are heavily discounted ... We also will discuss actual physical advantages of being healthy and make you feel better" (Participant 17, HR manager, large organisation.

"We have to get buy-in from production about the time when we're going to run them ... but because we run about 12 sessions per day we do get very good numbers. We aim to get about 90 per cent participation. It's allocated into production time so they do actually stop the lines for employees to come and do the seminar (Participant 15, HR manager, large business)

"So if you're going to say 'Look, we've got a nurse and a doctor are going to come and check your blood pressure and your sugar,' if that was to come from me, that's one thing, but if the managing partner sent it out and said all the partners are going to have this as well, I think that – if they see that they're doing it, I think that's what it is, a lot of that stuff is led from the top really" (Participant 16, HR manager, medium size business)

Evaluation

Few businesses discussed formally evaluating their health and wellness activities and programs. The success or otherwise of activities was largely based on attendance numbers and informal feedback from employees.

"Take up rate is one but I'd also receive feedback from the participants" (Participant 6, HR manager, medium size business).

"I've asked people just informally to give me some feedback because I didn't necessarily want to bog them down with paper. 'What did you think? Were you happy?" (Participant 13, HR manager, large business)

Three businesses discussed undertaking more formal evaluation of activities and programs, through feedback surveys immediately following particular activities or as part of a broader employee satisfaction survey. Only two businesses discussed using this information to inform the planning of future activities:

"We did staff feedback forms and on average the feedback was very good to excellent from the average population. Time constraint was the most negative sort of rated, and then we looked at the topics that they wanted to see for future sessions" (Participant 24, HR manager, large organisation)

Why Some Businesses did not have any WHP Activities or Programs

Businesses not currently undertaking any structured health promotion activities or programs all expressed an interest in implementing activities in the future; however, some acknowledged that cost and time limitations remained a significant barrier.

"The simple answer, from a purely business perspective, is if one can see measurable improvements, benefits to the business then the answer would be yes ... as long as it doesn't add to my already ridiculous hours then it will work. But if it imposes another hour or two to my week, well, then it's not going to happen because my own health will suffer" (Participant 7, small business owner).

Many of these small to medium size businesses struggled to identify activities or programs that they could implement and were open to ideas or suggestions that might work for their business.

"Look, I'm very anxious to keep the staff and to do that I've got to make them happy as possible ... So I'm open to suggestions ... I'm sure there are millions of things that I should be doing, but I'm just not aware of them. I would be grateful if there is a bit of a brochure or something that could help me in ways that I can help the staff, I would be very grateful to receive it" (Participant 5, small business owner).

"Maybe we can get some more practical tips, in relation to improving physical wellbeing, mental wellbeing, taking care of yourself, keeping the workplace safe, more practical tips would be good" (Participant 19, manager small not for profit organisation).

Other businesses discussed organising walks with colleagues and exploring options for subsidised gym membership, or providing educational brochures and information rather than structured activities.

"I think walking's a good idea. There is a gym across the road ... maybe we could go halves with people in their gym fees or something" (Participant 22, manager medium size not for profit organisation).

Perceptions of what Constitutes a Healthy Workplace

When asked their views about what constitutes a healthy workplace, employers expressed a range of views, including:

- the absence of harm in the workplace
- a healthy and happy workplace that promotes the physical, mental and social well being of employees
- achieving a good 'work-life' balance
- having access to health promoting activities, programs or resources at work
- health promoting work environment.

Only two employers interviewed focused on the absence of harm, with most taking an holistic view of health, emphasising the importance of a happy and comfortable work environment that minimised stress and conflict.

"A healthy workplace to me, is where everybody feels happy and comfortable" (Participant 21, manager, medium size not for profit organization).

Only a minority of employers interviewed mentioned the importance of a health promoting work environment, and none discussed the role of workplace policies in promoting health.

Perceived Value of Workplace Health Promotion

All participants agreed that promoting health and well being amongst employees theoretically made 'good business sense'. The main reasons articulated for this are presented in Figure 1 and described below.

Creating a Caring Culture and Promoting a Positive Team Climate

Promoting health and well being in the workplace was considered important by some interview participants (n=10) in creating a 'caring culture', where employees feel valued, thus contributing to employee satisfaction.

"To make sure that people feel like they are being valued here. I think that it would be a very valuable thing to offer and to make people understand that we want them to stay for a long period of time, to be healthy, to have a good balance in their lives and ... take care of them" (Participant 14, manager small business, private sector).

A culture of 'caring' was also seen to promote a positive harmonised team climate, a 'happy' place to work, which ultimately was considered important in engaging and retaining staff. Participating in health and wellness activities together was also seen as a good opportunity for team building.

"I am quite passionate about staff wellbeing ... it would be nice to be able to give them something as a token of appreciation ... that will improve culture, that will improve harmony, that would improve teamwork" (Participant 24, large government organisation).
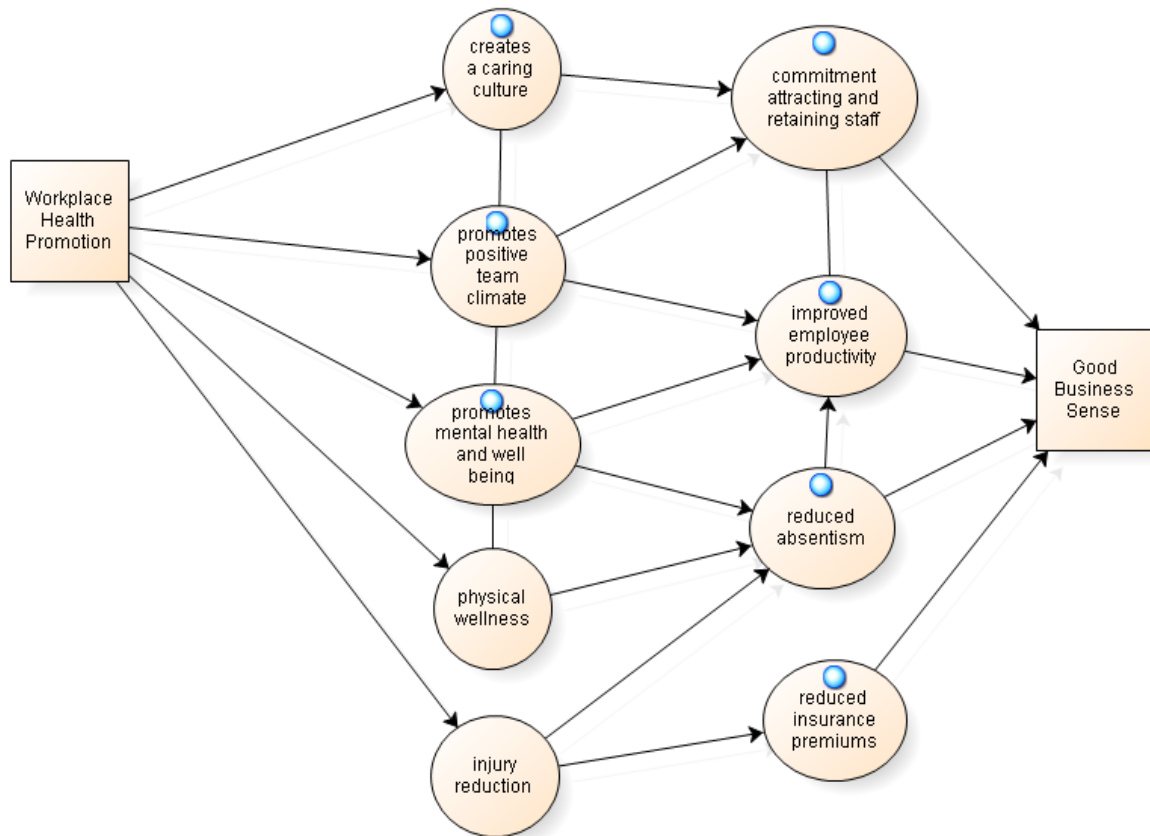
Figure 1. The perceived value of workplace health promotion amongst participating employers/managers

Commitment - Attracting and Retaining Staff

Human resource managers in particular discussed the value of health and wellness activities in attracting new staff in a tight recruitment market; that is, becoming the employer of choice for prospective employees, as well as increasing employee commitment to the workplace and ultimately retaining staff.

"It just adds that extra flavour ... especially in a tight recruitment market, if you've got something else to promote ... [providing] the fruit and the flu shots ... there's not a lot of organisations that do that ..." (Participant 16, HR manager, medium size private business).

Promoting mental health and well being

In line with an holistic view of health, a number of participants (n=7) from a range of business types also discussed the value of workplace health promotion activities/programs in promoting mental well being. Health promotion activities were seen to provide a break away from work, encouraged social interaction and were considered 'uplifting'. This was deemed important in promoting a happy workplace, reducing stress and depression, promoting better stamina, concentration and productivity and reduced absenteeism.

"Not having healthy lifestyle habits or an opportunity to take a break from work, doesn't release the right chemicals in your brain and it does lead to mental illness and depression. So taking basic steps like encouraging lunchtime breaks or quick stretches at your desk, I think in the long term will make a very, very big changes ... physically and mentally, long term" (Participant 8, HR manager, private sector).

Improving Employee Productivity and Reducing Absenteeism

Around half of all businesses interviewed (n=13) discussed the value of workplace health promotion in improving employee productivity and reduced absenteesim. This was linked to the view that health and wellness activities promoted mental well being and created greater employee commitment where employees were willing to 'work harder' and were fully functional.

"Sure, there is definitely value for it because if the staff are more healthy, then that means they can work more efficiently at work and then they don't call in sick so often" (Participant 1, small business owner, private sector).

Reducing absenteeism was particularly important for small businesses that mentioned having one or two people off sick could have a major impact on business outputs.

Injury Prevention versus Wellness Promotion

The tangible benefits of preventing injuries in terms of reducing workers' compensation insurance premiums were also acknowledged, and this was generally considered to work 'hand in hand' with promoting wellness.

"If an employee does get hurt or injured or anything like that, it impacts on, say, our workers' compensation. We've managed to bring down our workers' comp premiums significantly with the processes that we have in place. I guess it works hand-in-hand, providing these things (wellness activities) to employees, even the massages, they appreciate that and they can see that we care about them" (Participant 15, HR manager, private sector).

Priority Placed on Workplace Health Promotion

Eight of the participants interviewed rated workplace health promotion as a low priority in their business/organisation, 10 felt it was a moderate priority and the remaining seven rated it as a high priority.

The main reason given for the low priority placed on workplace health promotion was the lack of management support and interest in the area. For one business owner, it was not a priority as there were no apparent health issues or problems amongst employees.

"It was probably because I didn't see a problem. We're all working away and there's no great issue" (Participant 5, small business owner).

An HR manager discussed that health promotion was a low management priority because

"it's not necessarily something that is going to increase revenue or productivity at the end of the day" (Participant 24, HR manager).

The lack of health promotion activities and programs was considered to be a reflection of the low priority placed on the issue by others.

"I don't think we're doing enough" (Participant 6, small business owner).

In contrast other participants rated workplace health promotion as a moderate to high priority in their workplace as it was considered a core value of their organisation and there were existing activities or programs in place.

What is required to make workplace health promotion a higher priority?

Many HR managers from medium to large businesses felt that greater 'buy in' from senior management, and to a less extent employees, was needed to raise the profile and priority of health promotion in their workplace. This would require providing evidence of cost benefits of such activities and for managers to 'experience' the benefits personally for themselves.

"Definitive benefits or absolute benefits ... it's more about the numbers and what the outcomes were ... and how much it's going to cost" (Participant 12, HR manager, large organisation).

While one HR manager from a medium private sector business felt that managers were committed to workplace health promotion, additional guidance was needed about how best to implement various activities and programs.

The importance of integrating workplace health promotion into corporate governance and governance requirements was also mentioned for raising the profile of employee health promotion in government and not for profit organisations.

"I think what really actually works, too, is once you link it in with legal and corporate governance requirements, well people have to think about it, don't they" (Participant 23, not for profit

organisation).

In contrast a number of small business owners discussed that, in order to make health promotion a higher priority, they would need to have access to structured programs or activities, preferably facilitated by a third party at minimal cost.

"If we actually have like an official program or ... something that we all can follow" (Participant 6, small business owner).

While one small business owner discussed that due to tough economic conditions small businesses were not able to make employee health promotion a priority because

"we are removing anything that is not necessary. Stripping back anything that costs money that isn't deemed to be totally and utterly crucial to the business" (Participant 7, small business owner).

Who should be Responsible for Promoting Employee Health and Well Being?

The opinion of participants about who should be responsible for promoting employee health and well being was divided. Some participants, predominantly small business owners, thought employees were mainly responsible for their own health and well being at work as achieving good health was considered to be a result of individual choices and not something that could be regulated, only encouraged through education. Furthermore, for some businesses the cost of the employer taking a more proactive role in this area was prohibitive.

"I guess, it's likely the employer but by the same token, I'm not their parents and it's up to each individual, as far as I'm concerned, to promote their own health and to look after their own health and safety. There are enough ... imposition, enough cost in running a small business that we just can't add any more to it" (Participant 7, small business owner).

However, most of these participants agreed that the workplace should be supportive and not a barrier for employees in achieving their health goals.

"I mean everybody has to take responsibility for their health, that goes without saying. But in terms of trying to facilitate that in providing some motivation for that, the employer can do something" (Participant 18, manager of small not for profit organisation).

In contrast some participants, predominantly human resource managers, considered employers to be mainly responsible for promoting employee health and well being. Reasons given for this included that it was up to employers to initiate workplace health programs and activities, it was part of their 'duty of care', it fitted with the core values of the organisation and ultimately it made good business sense in terms of creating an engaged and productive workforce.

"If the employer doesn't act then nothing happens. So I guess because of that reason the employer has most of the responsibility I guess, because they're the ones that actually implement and roll out the systems" (Participant 17, HR manager, large not for profit organisation).

Interestingly, other participants felt that it was a dual responsibility between the employer and employee, with the employer responsible for providing access to programs, resources and a health promoting environment and employees responsible for seeking assistance and taking up programs.

"It's got to work both ways; that's what I think ... it's up to the employer to give their employees that channel and then I think it's up to the employee to say oh yeah ... I am going to do that" (Participant 9, office manager, medium size private business).

A small number of participants (n=4) discussed that promoting employee health was a three way responsibility between employees, employers and government. These participants discussed that government could be involved in supporting businesses through employer training on health and wellness, providing structured programs, funding and supporting population health approaches.

"But I would suggest maybe government can spend money to educate employers to manage the shifts better or maybe rosters better or maybe even education grants. They can send the employees for a short course or maybe subsidise some of the expenses which may...improve ...lifestyles of the workers" (Participant 1, small business owner).

What Role Should Government Play?

Participants, when directly asked what kind of support they would like to see from government in the area of workplace health promotion, suggested a number of things (Table 4). These included direct support for businesses, with funding most commonly mentioned as well as more generally promoting awareness of health issues through education and social marketing campaigns. Only two businesses mentioned promoting a stable political and economic climate as being important.

Local government was mentioned by a number of participants as the preferred point of contact with businesses for government led workplace health programs/initiatives. Local councils were perceived to be well connected with local businesses and could play an important role in linking businesses to state and federal initiatives, promoting locally run programs, activities or facilities as well as providing a point of contact to share information and ideas with other businesses in the local community.

"I know that if our local government was to promote an initiative, our companies would like to have those relationships anyway. So they would more likely be involved" (Participant 12, HR manager, large business, private sector).

A number of businesses (n=4) were uncertain about the role of government as they felt health was an individual responsibility, that government already did a lot in the area of promoting awareness of health issues such as smoking or that provision of government funding in the area was probably unrealistic.

"I mean when it comes to the government side of things ... I think they do a pretty good job in promoting the smoking and the new ads on the telly about the alcohol. I mean I don't believe it's their job; I mean we're all individuals" (Participant 12, HR manager large private business).

Table 4. Suggestions for Government Support

Role
Direct support for businesses
• *Contribute funding for businesses to support workplace health* through co-funding initiatives with businesses or through incentives such as reduction in payroll tax (n=10)   • *Workplace health tools and resources* such as health education materials for employees, ideas on low cost activities (n=6)   • *Workplace health programs and services* such as a yearly health check for employees (n=3)   • *Subsidies and incentives for employees* such as subsidized gym memberships with joint funding by employer and government (n=3)   • *Training and support for employers* on workplace health and wellness (n=2)
Population Health Programs and Initiatives
• *Social marketing campaigns* to raise awareness of health issues and promote uptake of health programs (n=6)   • *Population Health Programs* such as get healthy services, beyond blue program (n=1)   • *Promoting healthy environment* such as providing parks with exercise facilities (n=1)
Promoting Stable Political and Economic Climate
• *Build sustainable economic climate* that supports businesses (n=1)   • *Political stability* to promote consistency of funding for workplace health (n=1)

Who Should Fund Workplace Health Promotion?

In line with the mixed views about who is responsible for workplace health promotion, participants were also divided on the issue of who should fund employee health and well being programs. Only two participants believed that workplace health promotion should be funded solely by the business/organisation itself, with the majority considering that there should be some joint funding between employers and government. This could take the form of small grants to establish programs, financial incentives (such as reduced payroll tax) for businesses who provide health and wellness and financial incentives for employees to participate in programs (such as subsidized gym memberships). This would reduce the financial burden on business as explained by this participant:

"If money's coming from an external source like the government – we're not talking massive amounts of money but enough to initiate programs maybe every quarter – certain companies won't have that financial burden and they can take on board these programs. And I guess the incentive would be to prove that you are promoting or putting in place certain programs with the money spent from the government (HR manager, large not for profit organisation).

Two businesses discussed some contribution of employees to workplace health programs that were already subsidized by government or employer funding (such as gym memberships)

"Well, maybe it should be a joint thing between the - the employer and the employee ...subsidising An exercise program for people is a way to make it easier for them, but they still have to make that commitment themselves" (Participant 22, manager medium size not for profit organisation).

Key Barriers to Workplace Health Promotion

The most commonly discussed barriers to WHP were time constraints, financial costs and lack of employee interest (Table 5).

Table 5. Barriers to workplace health promotion- key qualitative findings and illustrative quotes

Key Barriers	Illustrative Quotes
Time constraints and working hours	
• Concerns about time constraints reflect the perception that WHP involves attending structured activities • Having staff off at the same time to attend WHP activities presents difficulties in small businesses, while some medium and large businesses found it difficult to schedule activities around employees doing shift work	*"We are relatively small and time is of the essence and any instruction or seminar type activity I'm sure would have to be during business hours, and it's hard for a small business like us to shut down or have people away ..."* *(Participant 5, small business owner).*
Financial constraints	
• Cost an issue for small businesses due to perceived opportunity costs for managers to take time to organise activities and for employees to attend • Cost also an issue for medium and large businesses, however some HR managers were able to justify the costs through the savings incurred from reduced insurance premiums and achieved through tight safety measures and reduced workers' compensation claims • Funding structures in some not for profit organisations did not allow for funds to be allocated to WHP.	*"Everybody is cutting ... We are ... stripping back anything that costs money that isn't deemed to be totally and utterly crucial to the business"* *(Participant 7, small business owner).* *"He (CEO) was very happy with the reduced workers' comp premium. So I think he's happy now and he likes the idea of the well-being"* *(HR manager, large private business).*

Lack of Employee Interest	
The main barrier to engaging employees identified by those with existing WHP programs were: • Work pressures and lack of time to attend • Employees working shifts, part time, casual and employees paid commission less likely to attend • The need in large businesses for middle management approval for employees to attend activities • Activities (eg pilates classes) often only appeal to a limited number of employees • Employee attitudes: health is personal and should be addressed outside of work	*"... so you are very close and there are some things, well, I don't mess with your business, you don't mess with mine, and that's separate, that's our private property, but collectively our work is unrelated to health, so therefore it's got nothing to do with us" (Participant 4, small business owner).*
Management Support	
• Higher level management support crucial for securing funds for WHP • Middle management support important for release of staff to attend WHP activities	*"It has to come from the top. If our ... senior team leaders adopt it, and their subordinates see it and see them taking part in it or recognising it's a good thing– it's done a lot of the groundwork" (Participant 8, HR manager, medium sized private business).*
Workplace Environment and Structure	
• Lack of on-site facilities • Lack of channels for communicating with employees (ie no face to face or email contact between HR managers and employees)	*" and you could really start to get into a good exercise regime, you'd probably have to have showers and all those sorts of things. So facilities for those sorts of things would have to be provided, and there's just not the facilities to be able to do that" (Participant 2, small business owner).*
Lack of information about types of activities	
• A number of businesses (n=8) found it difficult to access information on WHP, particularly ideas about types of activities they could provide or access that would appeal to a broad range of ages, interests and ability levels.	*"Now, the information might be there, but it's perhaps at times too hard to find it" (Participant 2,small business owner).*

Employers discussed a wide range of ideas (hypothetical) or actual strategies used to overcome perceived barriers to WHP (Table 6). Most of these were strategies that businesses could implement themselves without external support, with the exception of the provision of government subsidies and information on types of activities businesses could provide at low cost.

Table 6. Employer suggestions for overcoming common barriers to undertaking workplace health promotion programs/activities

Suggestions for Overcoming Barriers	Supportive Quotes
Financial Costs	
Ideas for simple no or low cost activities that can be easily integrated into the running of the business	*"I suppose if people could go and pick up a kit (on low cost workplace health activities) ... if it becomes part of their daily activities and just integrating business no, there's no cost" (Participant 2, small business owner).*
Government subsidies to support businesses and provide an incentive for investment in this area	*"So unless there's a real drive, that the government is going to be funding this from payroll tax reduction ... then that won't be the first thing to go ... so I think the government could subsidise a lot more of those things" (Participant 16, HR manager, medium size private business).*
Time Constraints	
Scheduling of activities on different days and times to allow more people to attend (medium/large businesses)	*"Try and offer it (health and wellness activities) at various times" (Participant 15, HR manager, large private business)*
Securing support of management for release of staff (medium/large businesses)	*"Our CE sent the all user email so it came from her email effectively, so there was some indication that she was supporting the staff wellbeing program" (Participant 24, HR manager, large government organisation).*
Employee responsible for coordinating health and wellness activities as part of their role	*"Well I would really be looking for somebody who would maybe take that on in their role if it was somebody who I employed as an education and healthy lifestyle person basically. So I could just say, 'Here you go. This is your brief. You do it.'" Participant 8, HR manager, medium sized private business*
Lack of Management Support	
Making a business case of benefits of the benefits of health and wellness activities	*" So if they were told that you are really going to benefit from this and these are the numbers and blah, blah, blah, then that's when they'll listen" (Participant 12, HR manager large private business).*

Managers need to 'experience' the benefits personally for themselves	**"***Managers themselves seeing the benefit if they themselves attended" (Participant 24, HR manager large government organisation)*
Reducing workers' compensation premiums through tight safety measures and 'reinvesting' some of this into wellness activities/program	*"He (CEO) was very happy with the reduced worker's comp premium. So I think he's happy now and he likes the idea of the well-being" (Participant 12HR manager, large private business).*
Lack of Information about Types of Activities	
Resource providing ideas about activities that may be suitable for a range of ages, interests and abilities including structured programs run by a third party, and those available in the local area	*" I would be grateful if there is a bit of a brochure or something that could help me in ways that I can help the staff, I would be very grateful to receive it" (Participant 5, small business owner).*
Lack of interest amongst employees	
Offering different types of activities to appeal to a range of people	*" If I'm not a person that likes going to the gym and that's all that's on offer, I'm not going to be interested in it. So I think interest levels probably increase with the rate of things that you offer employees" (Participant 8, HR manager medium size private business).*

Enablers/Facilitators for Workplace Health Promotion

 When employers were asked what would be useful to support WHP, the most commonly mentioned facilitators were financial incentives, practical information and support for businesses, and the opportunity to network with other local businesses.

Financial Incentives and Support

The majority of participants discussed the importance of financial incentives in supporting businesses to undertake workplace health promotion programs (see section on "Who should fund workplace health promotion and suggestions for government support", Table 3).

Website with Information for Employers

All of the participants interviewed considered a website for employers to be useful in providing the following:

- guidelines on how to implement workplace health programs/activities

- information on government endorsed programs and workplace health providers

- ideas for simple low cost activities for businesses (particularly small businesses)

- information on specific health conditions (such as depression and anxiety) and how employees with these conditions can be best supported within the workplace

- a mechanism for sharing of ideas and strategies between businesses

- employee access to health education materials and resources.

"Certainly, if there was a website that had suggestions on cost-free activities that maybe we could organise for an hour or two a week or something like that well then perhaps that might be - - might be useful ... I'm not particularly up on that sort of stuff and I'm sure there's 90% of small business people aren't" (Participant 7, small business owner).

A Network with Other Local Businesses

A number of businesses (n=10) discussed that a network with other local businesses would be a useful way of sharing ideas about workplace health promotion and perhaps facilities. Participants expressed a preference for such a network to be coordinated by the local council. Local councils were perceived to understand the local community context, be well connected with local businesses and be able to play an important role in linking businesses to state and federal initiatives, in addition to promoting locally run programs, activities and facilities.

"... connecting with other businesses, sharing ideas, potentially even sharing facilities ... having someone that you can actually go to personally ... you can ask questions of, or bounce ideas off or provide information to or from, would be great" (Participant 8, HR manager medium size private business).

Workplace Health Toolkit

A workplace health toolkit for employers was considered to be useful for some (n=6) if it provided practical information about how to implement a workplace health program, ideas about specific activities and where to get started. It was considered to be a complementary resource to the website and telephone service for employers.

"Well again because I just think for people that don't know and have – haven't really got an idea about how to implement healthy workplace environment, that would be fantastic because it gives you an idea. It gives you a bit of structure and then with that then you could possible go forth and implement other things or add other things to that ... but just starting from scratch sometimes it's very overwhelming for people" (Participant 9, office manager, medium size private business).

One HR manager also discussed that a toolkit for employers could provide useful information about the benefits of workplace health programs and activities, which would assist in communicating them to both managers and employees.

"Yeah, (the tool kit should contain) both factual information or supporting documents or supporting tools, but I'm not suggesting anything extensive, just a stock standard suggested points and the benefit that you would gain, I guess. So therefore it's clear cut when I, in particular, if I was trying to

roll this out, I understand the benefit, but am I communicating it well enough. If I had a supporting document that was written well, I'd probably be reading it over and over and over and then have the right message" (Participant 12, HR manager, large private business).

Telephone Service Providing Advice to Employers

Only four participants specifically discussed that a telephone service providing advice to employers on workplace health promotion would be useful. A telephone service, where employers could ring with specific questions, was considered to be a useful complementary service to a website.

"If you've just got a specific question and you need to ring someone that can answer your question straight away, that's brilliant" (Participant 23, Manager medium size not for profit organisation).

However, some other participants expressed reservations about a phone service for employers. They questioned how accessible the service would be for businesses operating outside of standard business hours, that a phone service would not be able to provide personalised advice matched to the needs of the business and one participant expressed a preference for speaking with someone with an understanding of the local community context, for example, someone from the local council.

"I just don't know what sort of advice they would give. If you had a consultant come into your businesses and sit here for a week or two, and work out the dynamics ... I don't think that (telephone service) would be helpful to us" (Participant 4, small business owner).

Service Provider Facilitating Activities for Employees

The use of an external service provider to facilitate workplace health promotion programs and activities was considered to be useful by a small number (n=4) of participants. These participants discussed that the use of an external service provider reduced the burden on the workplace to organise the activities, it helped to provide a structured approach and was seen to encourage commitment by both the employer and employee.

"Again, I thought that was good because then the hard work's done for you. Then they come in and they can say – it just gives you ideas, it gives you that – that structure, it gives you that guide – the guideline so that's why I thought that would be very useful because it just encourages people and it keeps people on track" (Participant 9, Medium size private business).

However, the cost of such services remained a significant barrier.

"I would support the service provider facilitating activities, that would be great, but again who is going to pay for that? ..." (Participant 24, large government organisation).

Telephone Health Coaching Service for Employees (Get Health Information and Coaching Service)

There was good overall support for the concept of offering a free telephone health coaching service

to employees through the workplace, with it being discussed by around half of participants (n=14). It was seen as an additional support that could be offered to employees and in line with other counselling services offered in the workplace, with the potential for good reach and uptake, particularly if supported by management.

"Yeah, I mean, why not? If people want to take it up then, you know, all for it. I mean, we support our employees in lots of other ways, you know, offering them counselling and for other issues that they've got going on so I can't see why – yeah, this is just as important" (Participant 25, HR manager, medium private business).

In contrast one business owner felt that promotion of the service was not the role of the business and employee use of the service would need to be during the lunch hour or outside of work hours.

"But we'd say, what's that really got to do with us? If they want to do that in their lunch hour they can do that in their lunch hour. They've got free access to the phone" (Participant 10, medium size business owner).

Others expressed some reservation about employee uptake of the service and that it should be promoted as part of an overall suite of health promotion resources to cater for those who may not want to use the service but could access other types of assistance (such as printed education materials).

"It would be useful if it was implemented with the website ... or a toolkit or something as part of something bigger because, again, I think that a coach line, you're going to only use it if you really, really want to do it and again you've got to go off on your own accord ... but if you need a bit of a hand I think you need all the other tools. I think it needs to be an overall process" (Participant 9, office manager, medium size private business).

While others indicated that they would be happy to promote the service to employees, but employee use of the service was a matter of personal choice.

"And I think that's a good idea ... but I mean in terms of whether people take part in an online – telephone coaching thing, I guess what I can do is let them know about it, but I can't really get involved in that kind of thing" (Participant 22 manager, medium size not for profit organisation).

One small business from the retail sector pointed out that it would not be possible for employees to use the service during work hours because of the need to be serving customers.

"They're not always ready to be 10- 15 minutes on the phone because they're always serving" (Participant 6, small business owner).

DISCUSSION

This was a small qualitative sub-study conducted amongst a purposeful sample of employers participating in a survey of WHP in one LGA (Parramatta). It is likely that participants were more interested in WHP as they agreed to participate in an interview on the topic. The results are thus not intended to be generalisable to all Australian employers but do provide some new insights into the views of an interested group of employers.

While employers interviewed generally had an holistic view of health, their understanding of workplace health promotion was limited, with few mentioning the importance of a health promoting work environment or the role of workplace policies in promoting health. Some employers also took a very individualistic view of health, demonstrating a limited understanding of the broader socio-economic and environmental determinants. Some respondents also appeared to have the view that health promotion was simply a structured group learning session during work, which may have contributed to their views about time and cost being a barrier. This suggests scope for increasing employers' understanding of health and the role of WHP.

The main benefits or value placed on WHP by employers related to the broader social benefits of creating a 'caring culture', with a positive team climate considered important in attracting and retaining staff and maximising productivity. These broader benefits should be emphasised when promoting WHP activities/programs to employers to increase engagement and uptake.

Significant barriers remain however to engaging businesses, primarily concern regarding financial costs, time constraints, lack of employee interest and management support. Our findings suggest that if there is to be greater expectations of workplace health in the long term, governments need to communicate and disseminate more information, and provide practical support and incentives. Support for businesses in the form of a website and/or tool kit providing information on low cost activities, policy options, micro environmental changes, as well as sharing ideas by networking with other local businesses, may be a useful starting point to encourage WHP. The role for government could include providing funding in the form of small grants, financial incentives and subsidies, coordination of activities and coordinating infrastructure to allow engagement of small workplaces.

It is likely that some employers or employees would like to talk to 'experts' to get health promotion advice. Existing services, such as the NSW Get Healthy Information and Telephone Coaching Service, may need to be better promoted to small businesses. There may also be a role for local council or officers in local health districts to act as a key point of contact for businesses and a potential 'delivery agent' for WHP support.

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