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Demographic Factor That Affect Employees Participation in Wellbeing Program in Bahrain

Mohamed Bakhsh Baloshi

I Coach Training Academy, Bahrain

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Abstracts

The purpose of the study is to investigate the demographic factors as age, gender, education, ethnicity, experience, and position that affect the participation of employees in wellness programs. The study involves N=307 participants from group of companies in Bahrain to investigate their response towards the employee wellness programs. The study used an adopted and self-constructed scale that involved demographic information of the participants along with the record of their participation in wellness programs. The results indicated that there is positive correlation between level of education and employees' position in the company while there is a negative correlation between age and years of experiences of employees in the current company. The results of the study rejected the null hypotheses regarding Age, Level of Education, Years of Experience and Position in the company since the results showed that there is correlation between participation of employees in wellbeing programs these variables. While the study accepted the null hypothesis regarding Gender and Ethnicity since these two variables are not correlated to participation of employees in wellbeing programs these variables.

Keywords: Wellbeing, Wellbeing Program, Employees Benefits, Bahrain.

1 Introduction

It is reported by (Hendrickson, 2013) that the wellness programs for employees have proved to be very positive and beneficial for both the employees and the employers of organizations. The employee wellness programs today include productive memberships such as gym membership, personal therapy programs and smoking cessation awareness campaigns in companies. These programs are well structures and planned in such a manner that all employees and members can set their targets, track their progress and achieve those targets for a positive change. The coaching system for both physical and mental health provides the required assistance for productivity and efficiency to its members. Both metal and physical exercise adds into stamina for work which is also good for the general behaviour and mood.

Knowledge, skills, education and positive attitude when combined with good health, results in increased level of productivity. The trend of employee wellness programs has been increased as it is followed by increased level of employee health and increased focus on

*Corresponding author e-mail: bakhsh1314@hotmail.com

work. In today's world of hustling business day-by-day increasing rush of work to catch on, the employee wellbeing and health is as important to employers of all organizations as it is important to employees themselves.

2 Literature Review

2.1 Defining Wellness and Wellness Programs

In this paper wellness is defined as "an active process of becoming aware of and learning to make choices" (Hendrickson, 2013). While wellness programs are defined as "any program implemented by an employer to improve the health of its labour force. A good wellness program also helps individual employees overcome specific health-related issues" (Joslin, Lowe, & Peterson, 2006).

2.2 Employee Wellness at the Workplace

Employee wellness at workplace is a topic which is recently under a lot of attention due to its importance for employee engagement and job efficiency. This includes a number of aspects as such as; "Workplace Health and Safety (WHS), lifestyle management programs and workplace stress management." Thus the wellness at workplace is commonly started from encouraging employee by the employer to follow the guideline to a healthy life and to implement healthy changes in life routine. It simply takes certain changes in eating habits, physical activity, general routine and simply doing things in a certain pattern (Goetzel, Hawkins, Ozminkowski, & Wang, 2003). The wellness programs and their aspects mentioned above involve multi-discipline training that focus on making the work environment safe. These are also designed for promoting positive changes in uniformed routine. Therapies and techniques are also used to reduce stress both in personal and professional life.

2.3 Employees Wellness Benefits

It has been realized by the employers that the perks of healthy employees are much more than investing on robotics to replace human force with mechanical force to eliminate the factor of human fatigue, error and healthy issues. Besides these weaknesses, the benefits that come with using human force are more than using robotic force (Greenhaus & Parasuraman, 1999). Different benefits are being offered by the companies these days to make sure that everyone gets some extra help such as 24 hours help lines to doctors, nutritionists and nurses; agile hours of work which is flexible timing of work and also working from home being affiliated with an organization. These services also involve membership to gym, maternity and paternity leaves and crèches at workplace.

These benefits are reported to be followed by happier and healthier employees with higher level of productivity at work with decreased level of absenteeism and more job commitment. In turn, profitability increases for the organization which is an ultimate aim of any organization and business (Sears, Shi, Coberley, & Pope, 2013).

2.4 Value of Wellbeing Programs

It is stated by (Takala, Hämäläinen, & Saarela, 2014) that "worldwide, non-Communicable Diseases (NCDs) will cost $47 trillion over the next 20 years". Thus productivity of the staff is measures by many organizations with reference to NDC. Moreover, the correlation between illness and decreases productivity was also stated by a study from (Long & Sheehan,

2010) "Integrated Benefits Institute (IBI)" in 2007. The Institute conducted a survey by using "Health and Work Performance Questionnaire (HPQ)". The results of the survey show that on average, 8 days per year are lost by an employee related to health related level of productivity. On the basis of labor costs of United States, this is equal to a cost of $2600 per person annually (Schultz & Edington, 2007). A company is Saudia Arabia named Aramco which has large size of employee unit with 57000 employees has been recorded to lose $150 million revenue in a year due to employee productivity loss (Hayman, 2016).

A huge number of companies are facing the burden of non-Communicable Diseases which are now considered one of the biggest challenges to development of an organization and its business. The business cases in The Middle East are not different from this. Particularly in Bahrain and countries form "Gulf Cooperation Council (GCC)" there has been a reported shortage of datum regarding citizens' lifestyle and routine. One of the reasons behind this gap of data is the lack of healthy physical activity such as exercise and yoga. Consistently declining eating habits, unhealthy eating routine, increasing trend of junk and fast food, use of alcohol, tobacco and other addictive's have added to the reasons behind poor life styles in Gulf countries. The correlation between unhealthy eating habits, genetics and diseases are regularly under investigation with their links to social, economic, personal factors which contribute to level of productivity. The non-Communicable Diseases are unique to every continent. The Middle East too has its own list of non-Communicable Diseases. These diseases are related to standards of living, culture and transport access etc (Henke, Goetzel, McHugh, & Isaac, 2011).

Multiple aspects related to employee lifestyles such as Body Mass Index, eating pattern and physical activity have been investigated by many researches. (Holden, Abatzoglou, Luce, & Baggett, 2011).

2.5 Importance of Demography in Wellbeing Studies

The background of the problems related to Demographic Factor of employees with relation to employees' participation in wellbeing program has to be investigated intensively in order to fully understand the issue. In addition to this, the theoretical framework also has to be considered to understand the assumptions and significance of the studies which were previously done. In this study, a comprehensive literature review is also discussed in which the previous researches studying these problems are addressed. The literature will also include identifying gaps in literature and empirical data.

2.6 Demographics/Factors Affecting Employee's participation

It is scrutinized by the researchers (Haynes & Helms, 2001) that there is significant difference of demographic (age ,gender, education, ethnicity, experience, and position) between non-participants and participants of employee wellness program. The researchers have also investigated the ways to give motivation to participation. The participants involved in the research were from Georgia, Alabama and Tennessee and they were selected from members of 12 Wellness Consulting organizations. Groups of participants were made with 250 contributors being divided into non-participants, participants and unaware. The majority of participant of the research were female in three groups of sample.

Researchers (Haynes & Helms, 2001) also concluded that the groups of the participants are more likely to work for service, manufacturing and non-profit areas of organizations while holding to management roles. The results of different researches show statistics related to different patterns of activities. Related to exercise, 80% of participants from two groups unaware and participants whereas there are 65% of respondent from non-participants' groups who reported to take exercise. The benefits of employee wellbeing programs have been viewed differently by participants of each group. The respondents from participant groups identified healthy eating habits as the most contributing factor of wellness while the non-participant group identified stress management as the basic benefit.

The participants of the study also identified monetary incentives as the most encouraging factor for employees to participate in the wellness program. It is also reported that the profitability and productivity also increases with wellness programs. The participants and non-participants' groups are familiar with the programs of organizational wellness. It was found by the researchers that out of all the participants 34% were involved in organizational wellbeing program while 57.7% were not involved in wellness program due to lack of time. Most of the participants' report that lack of time is the biggest barrier for people who cannot give considerable time to exercise. This could not be solved by providing time for exercise from working hours since the participants did not give time to exercise even when they were given extra time for exercise from within their working hours.

The researchers (Dembe, Erickson, Delbos, & Banks, 2005) also found that the lack of communication is another factor behind lack of participation is wellness programs. A proper motivation should be given to the participants of wellness programs so that their participation is not merely for the sake of marking a box done. The employers must understand the need of wellness programs and must be clear about the individual need of exercise and other lifestyle interventions. The programs and its purposes should also be communicated to all employees in a way that should motivate the employees to participate in the program. As a result, the program can increase the level of participation resulting in better health, weight loss and decreased level of stress (Middlestadt, Sheats, & Geshnizjani, 2011). The participation of employees was examined by (Joslin, Lowe, & Peterson, 2006) from "Midwestern United States county government workplace". The study involved 330 government employees who were selected through emails. Out of these 330 participants 195 were in non-participant group and 135 were from participants group. From these 330 participants, only 145 filled out the surveys.

Their research also focused to find correlation between quality of life and demographic data. The characteristics of employees were also considered as main variable in the study. The aim of this research was to investigate the participation of employees in wellness programs that were at high risks of health. There were some interesting facts found out from the research which showed that there is significant correlation between employees' demographics and quality of life with the value of significance $p = < .001$ and the participation in employee wellness programs. The results of various studies also showed the following results: "Respondents tended to be older ($p < .001$), work full time, and female ($p < .05$). Health educational offering participants were more likely to be female, married, >44 years old, and have lower QOL functioning; Non-participants were likely to be male, <44 years old, unmarried, and have higher QOL functioning. Medical screenings & vaccinations participants were more likely to be female, chronically ill, not satisfied at work, income

<$60,000, and have lower QOL functioning. Non-participants were male, satisfied with their job, free from chronic illness, income >$60,000, and have higher QOL functioning".

2.7 Cost Benefit Analysis

The wellbeing programs for employees should not be complicated and expensive. They are supposed to be more cost friendly, easy to deliver and less time taking. This way there will be more willingness among the employees to take time and join the wellness programs amid their busy lives.

Johnson & Johnson investigated the effect of wellness programs and consequent good health on expenditures of the company. (Goetzel R. Z., 2014) found out in their study that a program "Live for Life" was successful to improve employees' health that were at risk. The program also included a follow up of 5 years before the program and 4 years after the implementation of program. The utilization was decreased to reduce the cost of health care. The increases of small values were offset by the large savings that came with other care routines with an average benefit of $225.63 annually per employee. This payback happened due to reduction in inpatient admittance in hospitals with fewer cases of outpatients as well who recorded higher rate of hospital visits before the implementation of wellness program. The overall benefit got increases annually and most of the benefits were received after 4 years of becoming the part of the program.

A health care group in America named "Blue Cross and Blue Shield" created a comprehensive wellbeing program that offered wellness activities to around 10000 employees from 15 organizations. Those organizations were from USA that included legal firms, manufacturers, insurance companies, schools and municipalities and statistics of 3 years were collected from those organizations (Hochart & Lang, 2011).

Another program named "A Healthier You (AHY)" involved an assessment called HRA (health risk assessment) included biometric records and other records of the participants. The participants experienced a high level of prominent improvement and even those who had high health risks. The participants also enjoyed monetary benefits as they experienced a positive statistical difference in their healthcare expenditures.

In conclusion, the studies report that wellbeing programs actually work but not primarily. Retentions, recruitment and productivity is a part of evaluation of business and the effectively of monetary benefits. To the perspective of cost saving, promoting positive behaviour in employees and giving better management of illnesses are followed by low cost by the time and improvement in health.

3 The Conceptual Model Proposed

Based on the literature reviewed. The variables related to demographic information are "age, gender, education, ethnicity, experience, and position". These variables were considered as baseline and were used to find out the correlation between these demographic variables and participation in the employee wellness programs.

4 Research Problem

There are some demographic factors such as age, gender, education, ethnicity, experience, and position. That affect the participation of employees in wellness programs in both negative and positive direction. The purpose of this study is to explore those factors and

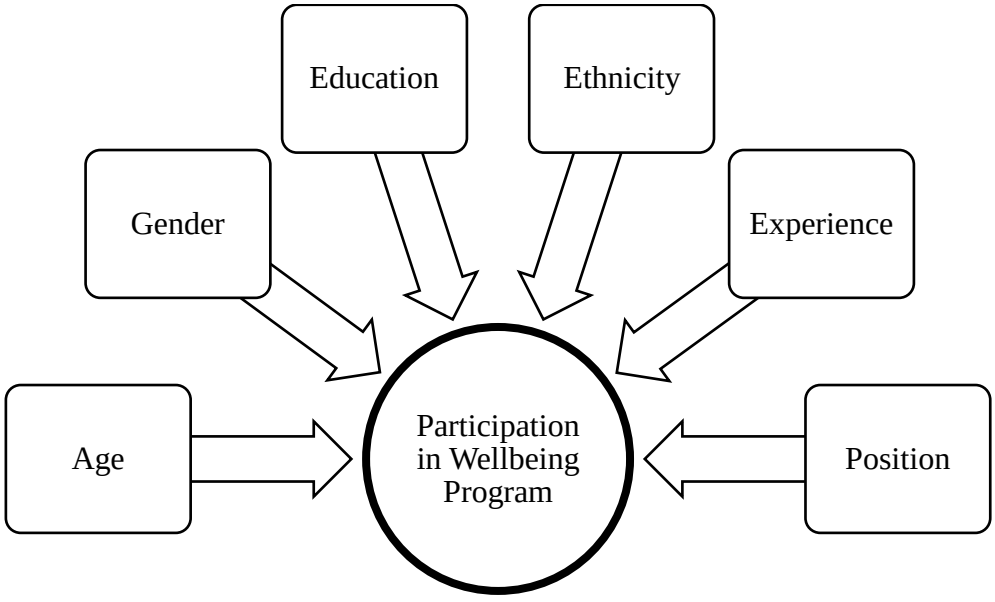

Figure 1: Conceptual Model for Participation in Welling Program.

suggest the ways to eliminate the negative predictors and promote the positive predictors which is ultimate goal to increase participation of employees in wellness programs.

5 Research Aim, Objectives and Hypothesis

The aim of the study is to investigate the demographic factors (age, gender, education, ethnicity, experience, and position). That affect the participation of employees in wellness programs. The study will also help the organizational Human Resource Management and employers to focus on both groups of employees and individuals regarding their wellbeing in order to reduce effort, cost and time to increase workplace efficiency. The study will also suggest the ways through which other companies can deal with demographic differences and their effect on profitability and productivity.

The objectives of this research are:

1. To find out the correlation between age and employees participation in wellbeing programs.

2. To find out the correlation between gender and employees participation in wellbeing programs.

3. To find out the correlation between education and employees' participation in wellbeing programs.

4. To find out the correlation between ethnicity and employees' participation in wellbeing programs.

5. To find out the correlation between experience and employees' participation in wellbeing programs.

6. To find out the correlation between position and employees' participation in wellbeing programs.

The study was based on following statistical hypothesis which hypothesized correlation between employees' participation in wellness programs and demographic factors (age, gender, education, ethnicity, experience, and position):

1. There is significant correlation between age and employees' participation in wellbeing programs.

2. There is significant correlation between gender and employees' participation in wellbeing programs.

3. There is significant correlation between education and employees' participation in wellbeing programs.

4. There is significant correlation between ethnicity and employees' participation in wellbeing programs.

5. There is significant correlation between experience and employees' participation in wellbeing programs.

6. There is significant correlation between position and employees' participation in wellbeing programs.

6 Research Methodology

The aim of the research, as illustrated in Figure (2) is to investigate the factors that affect the participation of employees in wellness programs. The research was based on the following process:

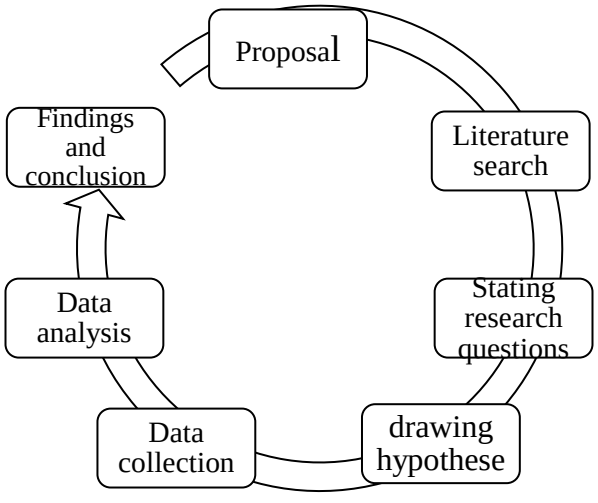

Figure 2: Research Process.

6.1 Research Tool

The study used adopted and self-constructed tool to collect data from participants of the study. The tool was scale inquiring demographic information of participants. The participants were asked six questions about their demographic and the Reponses to the

questions were categorized into certain groups. The demographic questions were inquiring about Age, Gender, Level of Education, Ethnicity, and Years of Experience in the current company, position in the company and the record of their participation in employee wellbeing program.

6.2 Data Collection/ Procedure

An authority letter was obtained from researchers' institute which explained nature of research study and requested for permission to collect data. The permission letter was given to the concerned authorities with reference to whom the data was collected. The exclusion and inclusion criterion was identified by the researcher. The full confidentiality of all the information was assured to the authorities and the participants, obtained solely for the purpose of this study. A consent form was also given to participants before questionnaires. It was made clear to the participants that there is no right or wrong answer to this and they should fill the questionnaires with their genuine responses. After the consent form, the participants were given demographic information questionnaires. Queries were also resolved during whole data collection. The participants were thanked after the completion of data collection. The administrations of the companies from where the participants were approached were also thanked by the researcher. All the ethical issues were kept in consideration while conducting data collection.

Statistical Methods

The collected data was statistically analysed with the used of SPSS 24.0 and 23.0 software. Both descriptive and inferential statistical methods were used to analyse the collected responses from the filed survey conducted in this study.

To analyse the data statistically, Statistical Package for Social Sciences was used. To test the hypotheses, the Chi Square test was used. The Chi test is used to assess the correlation between two qualitative variables and tests the null hypothesis. All the variables used and investigated in this study are of nominal level and are answered with Yes and No responses. The Chi Square test is most suitable to apply since both the main variables and their subscales are on nominal level.

Based on the data collection the demographic of the participants are as follows in Table (1).

Table 2 shows the demographic information of the participants. Following are the statistics based on demographic information: "majority (44.6%) of the respondents belonged to the 31 – 44 age range. The 18 to30 year old group comprised 27.4 % of the total respondents. The lowest percentage was the 51-year old and above which only comprised only 17%. Out of the 307 respondents surveyed, majority were males, with a frequency of 185 or a 60.3%; while the female respondents comprised a frequency of 117 or 38.1%". Regarding the level of education, most of the participants were undergraduates with the percentage of 38.1% with BA degree. Other than that, 24.4% were Diploma holders which are the second largest group in terms of education. The least number of participants had a degree of PhD who was only 1.6% of the whole sample.

In terms of ethnic background, most of the participants were from Bahrain with the percentage of 55%. The second largest group was of Asians which was composed of 19.5% of

TABLE 1 DEMOGRAPHICS OF THE PARTICIPANTS.

Demographic characteristics | categories		Count	%
Age (years)	18- 30	84	27.40%
	31-40	137	44.60%
	41-50	69	22.50%
	51 and above	17	5.50%
	Total	**307**	**100.00%**
Gender	Female	117	38.10%
	Male	185	60.30%
	Prefer not to say	5	1.60%
	Total	**307**	**100.00%**
Education level	High school	66	21.50%
	Diploma	75	24.40%
	BA (under graduation)	117	38.10%
	Master(post-graduation)	44	14.30%
	PhD	5	1.60%
	Total	**307**	**100.00%**
Respondents' ethnicity	Bahraini	169	55.00%
	GCC	27	8.80%
	Asian	60	19.50%
	African	12	3.90%
	American	7	2.30%
	European	24	7.80%
	Other	8	2.60%
	Total	**307**	**100.00%**
Years of experience in XYZ Company	0 - 5	102	33.20%
	6 - 10	108	35.20%
	11 - 15	59	19.20%
	16 and above	38	12.40%
	Total	**307**	**100.00%**
What position do you hold at XYZ Company?	Top managerial level	27	8.80%
	Managerial level	76	24.80%
	Supervisory level	90	29.30%
	First line	109	35.50%
	Other	5	1.60%
	Total	**307**	**100.00%**
Did you participate in a wellbeing program in the past 6 months?	Yes	107	34.90%
	No	184	59.90%
	Maybe	16	5.20%
	Total	**307**	**100.00%**

The total sample. Other groups such as GCC nationals were in the next majority with percentage of 8.8%. The least number of respondents were the American nationals who were comprised of 7% of the whole study sample. Regarding the number of years of experience in the current job, 35% of the participants had experience of 6 to 10 years working in the current organization that they are working in. The second largest group was of 33.2% with

years of experience 0 to five years in the current company. The next group was comprised of the participants who had spent 11 to 15 years of job with the organization that made up 19.2% of the total sample. The smallest group in terms of years of experience was of employees who had spent 16 years with the company and were 12.4% of the total research sample.

Regarding the position in the current organization that the participants are working in, the largest group was comprised of 35.5% of the sample and they were first line employees. The next group was of supervisors who help 29.3% part of the entire research sample. The managerial positions were held by 24.8% participants of the organization and the smallest group was of top management position holders with 8.8% of total sample. The table also showed that out of the entire sample, "184 or 59.9% of participants said that they had not participated in any wellness program in the last 6 months; while a frequency of 107 or 34.9%" reported that they have been a part of employee wellness programs.

7 Data Analysis and Results

The data was analysed using Statistical Package for Social Sciences and following tests were conducted to test the hypotheses: To test the hypotheses, Chi square test was used. The Chi test is used to assess the correlation between two qualitative variables and tests the null hypothesis. To conclude the test of null hypothesis, P-value rules will be used. The P-value rules are defined as follows: "If p-value was less than the pre-defined maximum level of error of 0.05, then the null hypothesis would have been rejected, and the research hypothesis will be concluded. This provides a 95% confidence level. If p-value was less than the pre-defined maximum level of error of 0.01, then the null hypothesis would have been rejected, and the research hypothesis will be concluded. This provides a 99% confidence level. If p-value was equal or greater than 0.05, then the null hypothesis will not be rejected with a 95% confidence level. Chi square result reported using APA style (X2(df)=value, P < .05)". These P-value rules are used to interpret the Chi square which is applied to test the null hypotheses.

TABLE 2 CASE PROCESSING SUMMARY.

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
What is your age? (years) * 7- Did you participate in wellbeing program in the past 6 month?	307	100.00%	0	0.00%	307	100.00%

TABLE 3 Q1. WHAT IS YOUR AGE? (YEARS) * Q7. DID YOU PARTICIPATE IN A WELLBEING PROGRAM IN THE PAST 6 MONTHS? CROSS TABULATION IN.

			7- Did you participate in wellbeing program in the past 6 months?			Total
			Yes	No	Maybe	
1. What is your age? (years)	1) 18- 30	Count	43	38	3	84
		% within 7- Did you participate in wellbeing program in the past 6 month?	40.20%	20.70%	18.80%	27.40%
	2) 31-40	Count	39	90	8	137
		% within 7- Did you participate in wellbeing program in the past 6 month?	36.40%	48.90%	50.00%	44.60%
	3) 41-50	Count	19	45	5	69
		% within 7- Did you participate in wellbeing program in the past 6 month?	17.80%	24.50%	31.30%	22.50%
	4) 51 and above	Count	6	11	0	17
		% within 7- Did you participate in wellbeing program in the past 6 month?	5.60%	6.00%	0.00%	5.50%
Total		Count	107	184	16	307
		% within 7- Did you participate in wellbeing program in the past 6 month?	100.00%	100.00%	100.00%	100.00%

TABLE 4 CHI-SQUARE TEST.

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	15.239[a]	6	0.018
Likelihood Ratio	15.736	6	0.015
N of Valid Cases	307		
$X^2(6) = 15.239^a, .018 < .05)$			
* significant at 5%			
** significant at 1%			

Since p-value of Alpha of 0.018 is less than 0.05, then the null hypothesis is rejected. Therefore, there is statistical evidence that supports a relationship between age and participation in wellbeing program, in Bahrain, as per the survey.

TABLE 5 CASE PROCESSING SUMMARY.

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
2. What is your gender? * 7- Did you participate in wellbeing program in the past 6 month?	307	100.00%	0	0.00%	307	100.00%

TABLE 6 Q2. WHAT IS YOUR GENDER? * Q7. DID YOU PARTICIPATE IN WELLBEING PROGRAM IN THE PAST 6 MONTHS? CROSS TABULATION.

			7- Did you participate in wellbeing program in the past 6 months?			Total
			YES	NO	MAYBE	
2. What is your gender?	1. Female	Count	37	73	7	117
		% within 7- Did you participate in wellbeing program in the past 6 months?	34.60%	39.70%	43.80%	38.10%
	2. Male	Count	67	109	9	185
		% within 7- Did you participate in wellbeing program in the past 6 months?	62.60%	59.20%	56.30%	60.30%
	3. Prefer not to say	Count	3	2	0	5
		% within 7- Did you participate in wellbeing program in the past 6 months?	2.80%	1.10%	0.00%	1.60%
Total		Count	107	184	16	307
		% within 7- Did you participate in wellbeing program in the past 6 month?	100.00%	100.00%	100.00%	100.00%

TABLE 7 CHI-SQUARE TEST.

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	2.274[a]	4	0.686
Likelihood Ratio	2.42	4	0.659
N of Valid Cases	307		
$X^2(4) = 2.274^a, .686 > .05)$			
* significant at 5%			
** significant at 1%			

Since p-value is 0.686 is greater than 0.05, then the null hypothesis is not rejected. Therefore, there is no statistical evidence that supports a relationship between gender and participation in wellbeing program, in Bahrain, as per the survey.

TABLE 8 CASE PROCESSING SUMMARY.

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
3. Education level ? * 7- Did you participate in wellbeing program in the past 6 month?	307	100.00%	0	0.00%	307	100.00%

TABLE 9 Q3. EDUCATION LEVEL? * Q7. DID YOU PARTICIPATE IN WELLBEING PROGRAM IN THE PAST 6 MONTHS? CROSS TABULATION.

			7- Did you participate in wellbeing program in the past 6 months?			Total
			YES	NO	MAYBE	
3. Education level?	1. High school	Count	33	31	2	66
		% within 7- Did you participate in wellbeing program in the past 6 months?	30.80%	16.80%	12.50%	21.50%
	2. Diploma	Count	18	55	2	75
		% within 7- Did you participate in wellbeing program in the past 6 months?	16.80%	29.90%	12.50%	24.40%
	3. BA(under graduation)	Count	35	75	7	117
		% within 7- Did you participate in wellbeing program in the past 6 months?	32.70%	40.80%	43.80%	38.10%
	4. Master (post-graduation)	Count	19	21	4	44
		% within 7- Did you participate in wellbeing program in the past 6 months?	17.80%	11.40%	25.00%	14.30%
	5. PHD	Count	2	2	1	5
		% within 7- Did you participate in wellbeing program in the past 6 months?	1.90%	1.10%	6.30%	1.60%
Total		Count	107	184	16	307
		% within 7- Did you participate in wellbeing program in the past 6 months?	100.00%	100.00%	100.00%	100.00%

Table 10 Chi-Square Test.

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	19.511[a]	8	0.012
Likelihood Ratio	18.587	8	0.017
N of Valid Cases	307		
$X^2(8) = 19.511^a, .012 < .05)$			
* significant at 5%			
** significant at 1%			

The above table shows that the p-value 0.012 which is less than 0.05. Thus this test rejects the null hypothesis and proves that there is significant correlation between employees' participation in wellbeing program and their age in Bahrain. This also indicates that age is a negative predictor of employees' participation in wellbeing program.

Table 11 Case Processing Summary.

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
4. Please specify your ethnicity? * 7- Did you participate in wellbeing program in the past 6 month?	307	100.00%	0	0.00%	307	100.00%

Table 12 Q4. Please specify your ethnicity? * Q7- Did you participate in wellbeing program in the past 6 months? Cross Tabulation.

			7- Did you participate in wellbeing program in the past 6 months?			Total
			YES	NO	MAYBE	
4. Please specify your ethnicity?	1. Bahraini	Count	63	94	12	169
		% within 7- Did you participate in wellbeing program in the past 6 months?	58.90%	51.10%	75.00%	55.00%
	2. GCC	Count	8	17	2	27
		% within 7- Did you participate in wellbeing program in the past 6 months?	7.50%	9.20%	12.50%	8.80%
	3. Asian	Count	17	43	0	60
		% within 7- Did you participate in wellbeing program in the past 6 month?	15.90%	23.40%	0.00%	19.50%
	4. African	Count	4	8	0	12
		% within 7- Did you participate in wellbeing program in the past 6 month?	3.70%	4.30%	0.00%	3.90%
	5. American	Count	2	4	1	7
		% within 7- Did you participate in wellbeing program in the past 6 months?	1.90%	2.20%	6.30%	2.30%
	6.European	Count	11	12	1	24
		% within 7- Did you participate in wellbeing program in the past 6 months?	10.30%	6.50%	6.30%	7.80%
	7. Others	Count	2	6	0	8
		% within 7- Did you participate in wellbeing program in the past 6 months?	1.90%	3.30%	0.00%	2.60%
Total		Count	107	184	16	307
		% within 7- Did you participate in wellbeing program in the past 6 months?	100.00%	100.00%	100.00%	100.00%

TABLE 13 CHI-SQUARE TESTS.

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	11.843[a]	12	0.458
Likelihood Ratio	15.447	12	0.218
N of Valid Cases	307		
$X^2(12) = 11.843^a, .458 > .05)$ * significant at 5% ** significant at 1			

Since p-value of 0.458 is greater than alpha value 0.05, then the null hypothesis is not rejected. Therefore, there is no statistical evidence that supports a relationship between ethnicity and participation in wellbeing program, in Bahrain, as per the survey.

TABLE 14 CASE PROCESSING SUMMARY.

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
5. Years of experience in XYZ Company? * 7- Did you participate in wellbeing program in the past 6 months?	307	100.00%	0	0.00%	307	100.00%

TABLE 15 Q5. YEARS OF EXPERIENCE IN XYZ COMPANY? * Q7- DID YOU PARTICIPATE IN WELLBEING PROGRAM IN THE PAST 6 MONTHS?.

			7- Did you participate in wellbeing program in the past 6 months?			Total
			YES	NO	MAYBE	
5. Years of experience in XYZ corporation?	1) 0-5	Count	48	48	6	102
		% within 7- Did you participate in wellbeing program in the past 6 months?	44.90%	26.10%	37.50%	33.20%
	2) 6-10	Count	33	70	5	108
		% within 7- Did you participate in wellbeing program in the past 6 months?	30.80%	38.00%	31.30%	35.20%
	3) 11-15	Count	13	43	3	59
		% within 7- Did you participate in wellbeing program in the past 6 months?	12.10%	23.40%	18.80%	19.20%
	4) above 16	Count	13	23	2	38
		% within 7- Did you participate in wellbeing program in the past 6 months?	12.10%	12.50%	12.50%	12.40%
Total		Count	107	184	16	307
		% within 7- Did you participate in wellbeing program in the past 6 months?	100.00%	100.00%	100.00%	100.00%

TABLE 16 CHI-SQUARE TESTS.

Table 4.26 Chi-Square Tests			
	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	12.782[a]	6	0.047
Likelihood Ratio	12.902	6	0.045
N of Valid Cases	307		
$X^2(6) = 12.782^a, .047 < .05)$			
* significant at 5%			
** significant at 1%			

TABLE 17 CASE PROCESSING SUMMARY.

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
6. What position do you hold at XYZ Company? * 7- Did you participate in wellbeing program in the past 6 months?	307	100.00%	0	0.00%	307	100.00%

TABLE 18 Q6. WHAT POSITION DO YOU HOLD AT XYZ COMPANY? * Q7. DID YOU PARTICIPATE IN WELLBEING PROGRAM IN THE PAST 6 MONTHS?.

			7- Did you participate in wellbeing program in the past 6 months?			Total
			YES	NO	MAYBE	
6. What position do you hold at XYZ Company?	Top managerial level	Count	13	14	0	27
		% within 7- Did you participate in wellbeing program in the past 6 months?	12.10%	7.60%	0.00%	8.80%
	Managerial level	Count	26	45	5	76
		% within 7- Did you participate in wellbeing program in the past 6 months?	24.30%	24.50%	31.30%	24.80%
	Supervisory level	Count	21	61	8	90
		% within 7- Did you participate in wellbeing program in the past 6 months?	19.60%	33.20%	50.00%	29.30%
	First line	Count	47	60	2	109
		% within 7- Did you participate in wellbeing program in the past 6 months?	43.90%	32.60%	12.50%	35.50%
	Back line	Count	0	0	1	1
		% within 7- Did you participate in wellbeing program in the past 6 months?	0.00%	0.00%	6.30%	0.30%
	I don't work at XYZ Corporation	Count	0	1	0	1
		% within 7- Did you participate in wellbeing program in the past 6 months?	0.00%	0.50%	0.00%	0.30%
	I don't work for XYZ Corporation	Count	0	1	0	1
		% within 7- Did you participate in wellbeing program in the past 6 months?	0.00%	0.50%	0.00%	0.30%
	I don't work for XYZ Corporation	Count	0	1	0	1
		% within 7- Did you participate in wellbeing program in the past 6 months?	0.00%	0.50%	0.00%	0.30%
	I don't now	Count	0	1	0	1
		% within 7- Did you participate in wellbeing program in the past 6 months?	0.00%	0.50%	0.00%	0.30%
Total		Count	107	184	16	307
		% within 7- Did you participate in wellbeing program in the past 6 months?	100.00%	100.00%	100.00%	100.00%

TABLE 19 CHI-SQUARE TESTS.

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	35.862[a]	16	0.003
Likelihood Ratio	26.926	16	0.042
N of Valid Cases	307		
$X^2(16) = 35.862^a, .003 < .05)$			
* significant at 5%			
** significant at 1%			

Since p-value or Alpha is 0.003 is less than alpha value 0.05, then the null hypothesis is rejected. Therefore, there is significant relationship between position and participation in wellbeing program, in Bahrain, as per the survey. In other words, both variables are depended.

8 Discussions

In the current study, the demographics of the participants focus to encourage the employees to increase their participation in employee wellness promotion program. The survey involved in the study also inquires asking particular questions that explained that characteristics of individual that differ among the participants such as "age, gender, education level, ethnicity, years of experience and position in the workplace". These questions also provide an insight to the possible correlation between demographic factors and the participation of employees in wellbeing programs.

Hypotheses were also constructed to depict the significance and direction of correlation between engagement factors, demographic variables and employee wellness programs in supposed companies. The statement of research was constructed using four basic questions with each hypothesis giving a direction. The hypotheses statements have helped in determining the existence of correlation and its direction between engagement factors, demographic variables and employee wellness programs.

As expected, the majority of participants which was 64% of the sample approached have not participated in any employee wellness program since the last 6 months. The participants who even took the part in employee wellness programs only took the part in physical activity programs with the percentage of 60% of the sample. Likewise, the majority of the participants, reported to prefer having a fitness area in their workplace to save time and energy.

TABLE 20 DEMOGRAPHIC CHARACTERISTICS OF THE SAMPLE.

Demographic	Chi square	Value	Df	P-value	Decision
Age		15.239[a]	6	0.018	Reject H0
Gender		2.274[a]	4	0.686	Accepted
Education		19.511[a]	8	0.012	Reject H0
Ethnicity		11.843[a]	12	0.458	Accepted
Years of experience		12.782[a]	6	0.047	Reject H0
position		35.862[a]	16	0.003	Reject H0

The chi-square test was used to investigate whether there is a correlation between participation in employee programs and demographic factors which were; “age, education, experience, and position” and also to assess whether there is some significance of that correlation or not. The results rejected the null hypothesis.

It turned out that age of participants is a significant factor that influences the employees’ decision to take part in employee wellbeing programs. The results of the analysis show that with the increase in age, there are fewer chances of employees’ participation in such programs because with declining age, people are more inclined towards taking free hours and enjoying them doing nothing instead of choosing to go out and take exercise or take part in any physical activity than takes up too much of their energy. This is also attributed to the difference between the cultural preferences of different generation and it is more possible that millennial are more into physical fitness than the older generation due to their consciousness and awareness towards healthy lifestyles and physical fitness as body image is a huge concern among the millennial generation. Although the general idea tends to give a direction that as the person gets older, the more concerns he or she should be regarding the health and physical fitness as diseases start to come in. But the results of the study present the different idea and state that physical fitness is more prioritized by younger individual as compared to the older one.

It is also important to notice that the factor of age has a significance effect the study overall as the age of most of the participants of the study was above 31 years which was 72% of the whole sample. The study involves 50% of the participants who were less than or equal to 30-year-old.

Regarding the gender of the participants, 60% were male and 40% were female participants. Considering their responses related to past 6 months, 31% of the female participants reported to take part in the employee wellbeing programs while 36% of the males took part in employee wellbeing programs. This demographic variable however was not proved significant according to the Chi Square test which show that it is not big enough to direct any conclusion or doesn’t given any statement related to gender differences regarding participation of male and female participants in employee wellbeing programs.

The other demographic variable; level of education showed that there is significant effect of level of education on employee’s decision to participate in wellness programs. The results also indicate that the effect of level of education on participation in wellness programs is positive which indicates that as the level of education increases, the chances of participation in wellness programs also increase. The results showed that the participants with Masters and PhD degrees have more participation in wellness programs as they are more aware of the bodily needs and necessity of healthy lifestyles. The participation of employees of equal below the graduation or diploma level was less than 50%. It is also noteworthy that the participants with higher level of education only make 37% of the total sample. This could be the reason why the overall results showed lower participation of the employees in wellness programs. The more the employees are educated, the higher are the chances of their participation of the employees in wellness programs. This also well depicts the population of Bahrain.

To interpret the results more accurately, the higher level of education results in higher positions in the company. From this correlation, it can be stated that the higher positions in

the company also direct to higher level of participation in employee wellness programs as it is consequent of higher level of education which is a positive indicator of participation. So it can be stated that high managerial positions are more likely to participate in the employees in wellness programs as compared to lower management or blue collar positions.

Besides this, the employees from middle level positions of management are more likely to face high stress, unfriendly working conditions and counter productivity due to heavy work load. Thus it is suggested by this study that the middle managerial employees should be given awareness and should be motivated to take part in wellbeing programs as they are the employees who need these programs the most given their work conditions.

Regarding the nationality and ethnicity, the results show that the majority of the participants were from Bahrain and others were from Asia and GCC. It is shown by the results that the ethnicity or nationality of the participants is not significant predictor of their participation of the employees in wellness programs and there was no correlation between the two variables.

The results also considered years of experiences in the current job to investigate its effect and correlation with employees' participation. It was shown by the results that majority of the sample had years of experiences six to ten years in the current job which is also related to the age of the participants as the younger the participants, the less is their experience with the company and as discusses earlier, the younger participants are more likely to participate in wellness programs. This is possibly the reason why the results show 50% participation of employees with respect of their age. This indicates that the years of experience is a negative predictor of participation of the employees in wellness programs and as the years of experience increase, the participation decreases and vice versa.

9 Conclusions

In conclusion, it is stated that level of education, age, position in the company and years of experiences are the significant predictors of participation of the employees in wellness programs. These factors are not only correlated to the participation but are also linked to one another in positive or negative directions. The study concludes that the employees with higher managerial position less interested than new blood, higher level of education and younger employees with fewer years of experiences are more likely to participate in employee wellbeing program.

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