The Efficacy of Wellness Programmes as Work-Life Balance Strategies in the South African Public Service

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Abstract: This paper aimed to evaluate the wellness programs adopted by the South African Public Service to ascertain their efficacy at addressing work-family challenges and aiding employees to achieve work-life balance. Understanding the effectiveness of wellness programmes as work-life balance strategies is necessary especially when the cost of implementing such strategies is considered exorbitant. Many institutions have put in place work-life balance strategies, but discrepancies concerning definitions, formulation and implementation could make it impossible for them to fully reduce work-family challenges and assist employees in achieving the envisaged work-life balance. A sequential transformative mixed-methods study design was adopted. Data was collected using self-report questionnaire administered to 307 individual managers. Additionally, 11 top management members were interviewed. The major findings are as follows; (a) significant relationship exists between the wellness programmes and work-life balance strategies (b) wellness programmes qualified to be addressed only as life strategies because they did not address work challenges faced by employees. (c) work-life balance strategies predicted only 7.1% of the variations in wellness programmes in the South African Public Service. The peculiarity and value of this article lies in the discovery that work and life balance strategies adopted by organisations may not address employee work and life challenges and assist them in achieving work-life balance. Summarily, wellness programmes are not work-life balance strategies, and the South African Public Service should endeavour to adopt strategies that could assist employees in balancing work and family needs.

Keywords: *Wellness Programmes, Work-Life Balance Strategies, Work-family challenges, Employee Assistance Programmes (EAPs)*

1. Introduction

Contemporary organisations face the growing need to increase efficiency in product and service delivery globally. To achieve this, organisations must attract and retain the benefits of international, diverse and very technologically sound and high performing employees. Where these quality of employees are available, it is reported that they struggle to achieve balance between work and family challenges (Newaz & Zaman, 2012). Work-life balance (WLB) could be viewed as the simultaneous satisfaction that an individual employee has about his/her work and family situations; achieved through the use of work-life balance strategies (WLBS) implemented at a workplace. In this context, employment may no longer be satisfactory to an employee because it pays more or provides job security and prospects for rapid growth in the organisation. Rather, employments decisions could be made based on the ability of the present or potential employer to implement policies that are supportive in assisting employees achieve balance between work and family. Dunne (2007) reports that organisations that are unable to put in place work-life balance strategies such as flexible work arrangements have begun to lose very skilled and talented employees especially at the management level to the workplaces considered more family supportive and flexible. But in the public sector, WLBS are seen as arrangements made in order to conform to legislative requirements to provide for dual-earner families and address gender issues. However, the arrangements made by organisations towards employee wellbeing could possess WLB elements but may be unable to assist workers in achieving WLB regularly and consistently (Kossek, Lautsch & Eaton, 2006). The South African Public Service adopted the wellness programmes to assist her employees in managing work and family-related challenges. The key objective of this paper was to determine if the wellness programmes were able to assist employees to satisfactorily manage their work and family challenges and achieve WLB.

2. Literature Review

In this section, the literature on various variables that was relevant to the research on the efficacy of the wellness programmes as WLBS adopted by a municipality in South Africa are reviewed. The aim of

conducting a literature review was to assist in proffering appropriate examination, analysis and interpretation of the subject towards the conceptualisation of suitable strategies for assisting employees in addressing their work-life challenges. Hence, the expected result could be the achievement of meaningful WLB by the employees investigated. Research has revealed that family and work are interconnected, in the light of this, interest in the development of approaches to advance understanding into the interface among them has grown among scholars and practitioners (Voydanoff, 2005b).

Theoretical foundations: The segmentation theory (O'Driscoll, Ilgen, & Hildreth, 1992; Zedeck & Mosier, 1990; Zedeck, 1992), person-environment fit theory (Edwards, Caplan, & Harrison, 1998; Edwards & Cooper, 2013), conservation of resources (COR) theory (Hobfoll, 2001, 2011; Hobfoll & Lilly, 1993) and the demands, resources and strategies model (Voydanoff, 2005a, 2005b) helped in providing useful conceptualisations. Segmentation theory proposes that work and life are two mutual but exclusive spheres that do not influence each other (Guest, 2002; Sumer & Knight, 2001). Based on this theory, the strategies crafted to address each sphere's challenges could be suitably designed to address the challenges existing in the domain. The person-environment fit theory is a double–barrel approach that focuses on the individual and environment in the study of stress to ascertain the features and influence of stress (Edwards et al., 1998; Endler & Magnusson, 1977; Pervin, 1989). It suggests that wellness, mannerisms and conduct are jointly influenced by the environment and the individual. The theory is core to studies in workplace behaviour, industrial psychology and management of human resources (Edwards, Cable, Williamson, Lambert, & Shipp, 2006; Edwards et al., 1998; Holland, 1997; Kristof, 1996; Walsh, Craik, & Price, 2000). It is useful to the present paper in providing clarity to the stress-environment interface and its implication on strategies.

COR theory predicts that the major determinant variable in stress development is the loss of resources (Hobfoll, 2001). Hobfoll (2001, p. 337) states that such resources 'are those objects, personal characteristics, conditions, or energies that are valued in their own right, or that are valued because they act as conduits to the achievement or protection of valued resources' The prediction of this theory is that stress is inevitable where resources are perceived to be vulnerable, lost, forfeited, and uneven; or if people as individuals or groups are unable to see the way of enhancing and securing their resources either by personal or collaborative efforts (Hobfoll, 2001). Since people try to receive, keep, enhance and secure everything that is maximally valuable (Hobfoll, 2001), the implication is that they will use important resources to manage themselves, their engagements in social relationships as well as the way in which they arrange themselves to behave and align with the larger society (Hobfoll, 2011). This paper engaged the COR theory in investigating how individual employees used the adopted strategies at the municipality in South Africa.

The demands, resources and strategies model considers the fact that employees nowadays face numerous unavoidable challenges regarding WLB (Campione, 2008; Delgado & Canabal, 2006; Mauno & Rantanen, 2013; Minnotte, 2012; Voydanoff, 2005a). Therefore, employees look for ways and means of managing the demands at work and at home. It was assumed in the study that resources present at work – such as wellness programmes – could assist employees in managing work and family demands and achieve WLB.
When people perceive that the challenges in the environment are more than the resources available to manage them, the situation is appraised as being stressful (Crawford, LePine, & Rich, 2010). Therefore, WLB could be derived from evaluating the relative challenges and resources pertaining to family and work responsibilities. Demands include those designed or mental claims that playing a particular role makes on an individual. Examples of demands are norms and expectations that a person is required to conform to in the course of performing a mental or physical task. Resources comprise those organised or mental assets which could be used in improving performance, reducing challenges or developing more resources (Voydanoff, 2004). The research on which this article is based aimed to ascertain if employees perceived that they achieved WLB by using the WLBS (in this case wellness programmes) in place at the municipality.

Work-life balance strategies: According to Kelly, Kossek, Hammer, Durham, Bray, Chermack (2008), WLBS are those intentional policies that organisations adopt to effect changes in practices, guidelines and/or culture so as to lessen the effect of work and family demands on the employees, as well as to support workers outside the workplace. Casper and Harris (2008) suggest that although workplaces usually offer WLBS with the aim of promoting positive outcomes (Osterman, 1995), an understanding of the actual achievement of this goal is of paramount importance. Echoing this view, Kelly et al. (2008) report that notwithstanding the spread

of these strategies, abundance of literary work done on work- and family-related matters (Pitt-Catsouphes, Kossek, & Sweet, 2006), as well as the publicity that the subject is receiving from the media, organisations do not know which strategies to adopt in order to assist employees in managing their work and family demands. WLBS can be classified into three groups: flexible working programmes (FWPs), family-friendly programmes, and health and wellness programmes. According to Caillier (2013), FWPs are those that offer workers the required flexibility to achieve WLB, for example, telecommuting, a compressed workweek and flexi start and finish. Flexitime is the most commonly FWP adopted by organisations for reasons ranging from job satisfaction to performance (Baltes, Briggs, Huff, Wright, & Neuman, 1999). Caillier (2013), reports that workplaces using FWPs could have their employees put in additional time at work including delivering services to citizens outside normal workday time. This suggests that flexitime would be appropriate to the needs of employees in the public service, especially municipalities. In a compressed workweek job schedules are compacted to permit employees to work fewer than 10 days every fortnight and particularly exceed eight hours per workday. It is different from flexible start and finish because time of work is aligned to the routine of starting and finishing times for all employees that participate in the arrangement (Caillier, 2013). Telecommuting refers to the arrangement where employees carry out some of their functions outside the contemporary office setting by using information and communication technology (ICT). This approach could result in work being done from home, at specific outposts in a region or any place where the employee has access to ICT (Baruch, 2001). Job sharing, part-time work, and maternal and paternal leave arrangements are other arrangements related to flexible time (Gunavathy, 2011).

The next group of WLBS, family-friendly benefits, include child and dependent-elderly relative care. In government organisations, child care in particular consists of assistance with on-site services, resource and referral services, and subsidies. The last group of WLBS is health and wellness programmes. Health and wellness programmes include health carnivals, bulletins, preventive programmes, gymnasium, weight loss facilities, counselling, and stress management programmes (SHRM, 2009). Fleetwood (2007), citing Gambles, Lewis, and Rapoport (2006), reaffirms that even though various adaptable work programmes seem to have the potential to assist individuals in achieving WLB, a number of these practices restrain the successful achievement of WLB. The South African public service adopted wellness programmes as WLBS to assist the employees in managing their work-life challenges and possibly achieve WLB. This article examines the efficacy of the wellness programmes among professional level employees at a municipality in the South African Public Service.

The South African Public Service inherited an institutional legacy from the apartheid government and a responsibility to help the government of the day to right the many wrongs of the apartheid era. As reported by May and Govender (1998), Miraftab (2004) and Özler (2007), the apartheid regime had a discriminatory structure of labour which largely segregated the black and the coloured population of South Africa. The poverty rate during the apartheid era was approximately 68% among blacks (May & Govender, 1998; Özler, 2007). Children were unshielded from the violence of those days both at home and in the larger community; they were equally exposed to hunger, irregular nurturing and education (May & Govender, 1998). Most of the professional-level employees surveyed at the municipality seem to have been children raised during the apartheid years, as demonstrated by the demographic data collected for this article. Approximately 62.2% of respondents were aged between 36 and 55 years. By 1994, the emergent South African nation with its municipal administration was saddled with the responsibility of administering the local governments which formerly served a segmented (small) portion of the populace. With the transformation into a democratised era where metropolitan governments were the leading creation (Cameron, 2005; Miraftab, 2004), most employees are confronted with the effects of the HIV/AIDS pandemic, chronic diseases, dependent-elderly relative and child care, alcohol/substance abuse and debt-related challenges (life stressors) as well as too much work, absence of autonomy, job stress, and role ambiguity/function clash (work stressors). In order to cope with these challenges, resources in the workplace addressing both work- and family-related challenges are needed. To support employees and assist them in managing these challenges, the municipality adopted the wellness programmes as prescribed by the Department of Public Service and Administration (2008). Although a number of studies discovered that notable negative association exists between WLB and WLBS (Ezra & Deckman, 1996; Hill, 2005; Hill, Ferris, & Märtinson, 2003; Hill, Märtinson, Ferris, & Baker, 2004), some studies report that there were either non-existent or weak linkages among WLBS adopted by organisations and work-family clash (Anderson, Coffey, & Byerly, 2002; Batt & Valcour, 2003; Haar & Spell,

2004) or satisfaction with work (Shinn, Wong, Simko, & Ortiz-Torres, 1989). Thompson, Jahn, Kopelman, and Prottas (2004), found that aspects of WLBS associated positively with workers' emotional obligation to the organisation, but had no effect on family-work challenges. The discussion of wellness programmes as WLBS is presented below.

The wellness programmes: There are fundamental assumptions underpinning the adoption of WLBS. Felstead, Jewson, Phizacklea, and Walters (2002) Concur on four theories that describe the elements underlying an organisation's adoption of WLBS. These are institutional theory, organisational adaptation theory, high commitment theory and situational theory (Wood, 1999). Institutional theory postulates that organisations mirror and adapt to the influence of societal norms, though to differing levels (DiMaggio & Powell, 1983; Oliver, 1991; Powell & DiMaggio, 2012). The need to sustain compliance with societal norms fuels the differences in the levels of adaptations. Large corporate sector organisations and the public sector institutions usually easily conform to regulations due to their visibility resulting from size, and accountability to their constituencies. Situational theory is considered more practical in its method because it submits that workplaces merely respond and try to counter issues of stress as they emerge in their WLBS use. To Osterman (1995) this is known as the pragmatic reaction theory. This perspective views the adoption of WLBS by an organisation as emanating from neither variation in the national value structures as recommended in the institutional and organisational adaptation theories, nor the beginning of the ground-breaking human resources strategies as suggested by high commitment theory. Instead, it is founded on the establishment of defined challenges that threaten organisational performance and profit (Felstead et al., 2002).

The municipality under study adopted wellness programmes in line with the Employee Health and Wellness Strategic Framework for the public service which was based on the World Health Organisation (WHO) Global Plan of Action on Workers' Health 2008-2017, the International Labour Organisation's (I L O) Decent Work Agenda in Africa and the recommendations of the report of the WHO's Commission on Social Determinants of Health (DPSA, 2008). The objective was to enable the formulation of strategies to manage HIV/AIDS, tuberculosis (TB), and wellness in the public service. The adoption of this programme as a WLB strategy may be attributed to the institutional and situational theories described above. Sieberhagen, Pienaar, and Els (2011) report that organisations are increasingly recognising the challenges relating to workers' wellbeing (Hooper, 2004) and that there is heightened public interest in the integration of wellness events and the responsibilities of the employers (Hillier, Fewell, Cann, & Shephard, 2005). Consequently, programmes such as Employee Assistance Programmes (EAPs) and Employee Wellness programmes (EWPs) have been established to investigate matters regarding wellness of employees in the workplace (Frey, Osteen, Berglund, Jinnett, & Ko, 2015; Sieberhagen et al., 2011). These scholars confirm that both EAPs and EWPs address wellness issues.

Traditionally, the reason for establishing EAPs was to assist employees with their domestic problems that had the potential to undermine their work performance. The initial EAPs concentrated on addressing alcohol and substance misuse which negatively affected workers' performance. For example, a number of the first EAPs focused on addressing issues emanating from abuses relating to alcohol and substance which undermine employees' productivity. But in contemporary times, a number of EAPs integrated dependent-elderly relative care, domestic relationship counselling, stress management, legal advice, financial/debt counselling, HIV/AIDS counselling, and substance/alcohol abuse counselling (these are life strategies) to help workers address their personal life challenges (Benavides & David, 2010). The scholars are of the view that these interventions are formulated to detect, remedy and rehabilitate workers whose individual challenges are meddling with productivity at work. They further reported that employees perceived the programmes as having the objective of treating workers' personal problems so that they do not degenerate to the point of permanently affecting the employees' performance at work. EAPs are reactionary programmes intended to alleviate prevailing adverse situations by attending to core issues (subjective, psychological and medical) in the way they affect an employee's performance at work (Benavides & David, 2010).

Likewise, wellness programmes are designed to promote employees' awareness of their wellness needs as well as to facilitate personal psychological and physiological change towards promoting individual health and a supportive workplace. Leiter and Durup (1996) reported that EWP activities are particularly targeted

towards providing relief to employees from stress emanating from substance/alcohol abuse, finance/debt issues, medical and chronic diseases, career crises and job demands (Tuwai, Kamau, & Kuria, 2015). Basically, most of the strategies adopted by EWPs are counselling-based and their use is voluntary. By their formulation and design, EWPs are not structured to address work-related issues (Reynolds & Bennett, 2015) such as job stress, function vagueness or role clash, and/or absence of autonomy and their outcomes on employees' stress levels. In addition, the services rendered through wellness programmes to employees are targeted towards personal and health-related matters rather than work-related issues. Participation in wellness programmes is limited by factors such as stigmatisation (Gerber, 1995; Naidoo, & Jano, 2003) as well as trust and confidentiality-related issues (Sieberhagen et al., 2011). Also, according to Gunavathy (2011), although corresponding interventions appear to be under the umbrella of WLBS, sound knowledge of the concept *per se* is still grey. The municipality (which, for the purpose of confidentiality, will not be named) in the South African Public Service investigated in this article adopted the wellness programmes as WLBS to assist employees in addressing their work- and family-related challenges.

Shamian and El-Jardali's (2007) examination of the implementation of wellness programmes in the healthcare sector showed that the work environment had improved significantly due to legislation and governmental policy which combined empirical information and inculcated information from literature. Edries, Jelsma, and Maart (2013) found wellness useful in enhancing health-related manners and employees' perception of quality of life. Brown, Gilson, Burton, and Brown (2011) and Ho (1997) reported that employees who participated in the wellness events showed greater levels of satisfaction with their jobs than those that did not participate. Després, Alméras, and Gauvin (2014) suggested that a new breed of studies on the assessment and development in practices regarding employee health and wellness is needed. In the context sketched above, this paper was significant in assessing the work-life practices at the municipality and guiding the development of an effective WLB strategy that could address employees' work-life challenges and assist in the achievement of WLB. To achieve this objective, individual benefits were assessed in order to ascertain their efficacy. According to Casper and Buffardi (2004), the examination of the various strategies may have distinctive results on workplace outcomes and possibly relate in predicting outcomes. The expected outcome of the paper is that the adoption of WLBS could lead to reduction in work and family stress and the achievement of WLB by employees.

Work-life balance: The concept of balance has been seen and defined from numerous perspectives. While a number of scholars have written on WLB from the context of role conflict (Akanji, 2012; Carlson & Kacmar, 2000; Eagle, Icenogle, Maes, & Miles, 1998; Eagle, Miles, & Icenogle, 1997; Hobson, 2011; Jones, Burke, & Westman, 2013; Kossek, Pichler, Bodner, & Hammer, 2011; Netemeyer, Boles, & McMurrian, 1996), others like Staines (1980), Cushing (2004) and MacInnes (2005) have carried out the review of the literature in the area of connection amidst work and non-work (Wong & Ko, 2009). Their findings contribute to the debate on WLB; yet not much has been written on how WLB connects to other variables that could affect its achievement. Darcy, McCarthy, Hill, and Grady (2012), report that WLB is not a "one size fits all" concept; rather, it is a subjective concept that should be designed by the individual to suit his/her objectives of achieving satisfaction, involvement and time balance. In line with Darcy et al. (2012), this article suggests that the peculiarity and dynamism of each individual's person and situation at work and home define their satisfaction at any given time. An individual's subjective feeling of satisfaction concerning personal time and involvement with work and family could be contrary to the satisfaction of his/her family members and employer and colleagues or possibly his/her health. Burke (2009) is of the opinion that most workers would rather work for shorter periods of time, even though only a few of them really understand what they prefer. Although this paper did not examine the details of the effect of long hours of work and work addiction on employees' work and/or family domain, it was concerned with the satisfaction that the individual derives from distributing his/her time and energy, highlighted by the level of involvement among the various work and family demands and roles. Though the concept of WLB has been a subject of scholarly and political discussion (Felstead et al., 2002) in Europe and America since the 1960s, it is comparatively new in the African context. However, Kalliath and Brough (2008) report that even though many conceptualisations of WLB exist in the literature, there is a scarceness of direct, properly established measures of the concept. In addition, the scholars suggest that, in the absence of direct assessment of WLB, it is tedious to evaluate the efficacy of WLBS on basic organisational and individual outcomes. Hence, there is worth in examining WLB by

assessing the strategies in place at a workplace. The research on which this article is based examined the efficacy of wellness programmes as WLBS at a municipality in South Africa.

3. Methodology

Being an exploratory study, a sequential transformative mixed methods study design was adopted. Both the quantitative and qualitative data collected concurrently (through the survey questionnaire) and sequentially (by in-depth interviews) were equally prioritised (Creswell & Garrett, 2008; Hanson, Creswell, Clark, Petska, & Creswell, 2005; Morgan, 2007). This is because the data collected from one-on-one interviews and open-ended questions were expected to disprove, validate or augment the data collected from the survey questionnaires. Therefore, the data collected and analysed in the paper are based on the assumptions of Hanson et al. (2005) sequential transformative mixed methods.

Sample selection and questionnaire administration: The target population for this study was 7 000 professional-level employees and the sample of participants in the study was 307 professional-level employees and 11 other members of the municipal top management that were interviewed. The sample respondents were drawn from the Safety and Social Services, Infrastructure, Human Settlement, HR, Governance, Finance and Procurement and Economic Development clusters of the municipality. Primary data were gathered from a survey of heads of units, senior managers, managers, co-ordinators, and supervisors. Data were collected over a six-month period and the study recorded a response rate of approximately 84%. A factor analysis method was engaged in classifying the WLBS while descriptive and inferential statistics were used in analysing the extent to which WLBS contributed to the wellness programmes. To establish the strategies that made up the wellness programmes, 10 different WLBS were described in the survey instrument. Respondents marked 'yes' to concur with the adoption of a strategy and 'no' to signify that it was not adopted by the municipality. Through exploratory factor analysis, the 10 selected strategies were classified into two, namely life strategies (for strategies addressing life challenges) and work strategies (for strategies addressing work demands). Descriptive statistics was employed in determining the frequencies of the responses to items relating to the WLBS scale that was adopted.

Measures: The variables in this paper were measured using responses from scales adapted to the study from validated measures that had been used previously. To measure WLBS, participants were asked to respond on a dual response 'Yes' and 'No' WLBS scale in order to establish the strategies in place at the municipality. A factor analysis was subsequently utilised to group the strategies according to their effectual patterns into two groups, namely life strategies and work strategies. The pattern that emerged categorically placed the WLBS into two distinct domains: work and life strategies. The wellness programmes were assessed by using the work-life wellness scale tested and adapted to the study. Respondents were asked to rank on a 5-point scale ranging from (1) strongly disagree to (5) strongly agree; the effect of the wellness programmes in assisting them to cope with various work and family-related challenges. Some of the items on this scale were 'The work-life balance strategies in place at the municipality help me cope with work-related issues like function vagueness' and 'The work-life balance strategies in place at the municipality help me cope with my family related issues of parenting.' The researcher appraised all aspects of work- and family-related challenges examined in this paper and included them as items in the scale so as to collect meaningful data.

WLB was measured as an outcome variable on a two-dimensional scale assessing job satisfaction and job involvement. The job satisfaction scale used in this paper emerged from the factor analysis of the function vagueness/role conflict scale. Four scales were initially used to assess WLB, but after exploratory factor analysis, three scales, namely family involvement, satisfaction balance and time balance scales were discarded because they cross-loaded on other factors in the study. But the job satisfaction and job involvement scales used to assess WLB in this paper exhibited high internal consistency and Cronbach's alpha coefficient (α) were 0.938 and 0.794 respectively. Analysis relied fundamentally on individual self-reports to examine organisational and individual resources. Prior studies suggest that valid data providing useful insight into organisational properties could be collected from such data (Lincoln & Zeitz, 1980, cited in Pandey & Wright, 2006).

4. Results

Exploratory factor analysis was conducted using the IBM SPSS version 22 to ascertain the validity of the instruments, correlation coefficient and regression analysis of the quantitative data. IBM NVivo was used in organising and analysing qualitative data. The results from the various variables are presented below.
Work-life balance strategies at the municipality. Table 1 presents an assessment of WLBS in place at the municipality by highlighting 10 distinct strategies and respondents' views on their availability at the municipality.

Table 1: Frequencies and percentages of responses to items on the work-life balance strategies

Description	Frequency		Percentage	
	Yes	No	Yes	No
Stress management	223	84	72.63%	27.36%
Domestic relationship counselling	203	104	66.12%	33.88%
Substance/alcohol abuse counselling	271	36	88.27%	11.73%
HIV/AIDS counselling	278	29	90.55%	9.45%
Financial/debt counselling	235	72	76.55%	23.45%
Work from home on *ad hoc* basis	31	276	10.10%	89.90%
Job sharing	76	231	24.76%	75.24%
Compressed workweek	54	253	17.59%	82.41%
Telecommuting	91	216	29.64%	70.36%
Career break	67	240	21.82%	78.18%

The respondents that marked 'Yes' to the question eliciting information as to the availability of various strategies at the municipality, such as stress management, domestic relationship counselling, substance/alcohol abuse counselling, HIV/AIDS counselling and financial/debt counselling, were 72.6%, 66.1%, 88.3%, 90.6% and 76.5% respectively. These results confirm that most respondents were of the opinion that the municipality had adopted stress management, domestic relationship counselling, substance/alcohol abuse counselling, HIV/AIDS counselling and financial/debt counselling as WLBS. However, concerning work from home on an *ad hoc* basis, job share, compressed workweek, telecommuting and career break, the results indicate 89.9%, 75.2%, 82.4%, 70.4% and 78.2% respectively. These results show that most employees were of the opinion that these strategies were not adopted by the municipality. In summary, the municipality adopted stress management, domestic relationship counselling, substance/alcohol abuse counselling, HIV/AIDS counselling and financial/debt counselling. These strategies have been identified in the WLBS literature as health and wellness programmes (Caillier, 2013). Hence, the municipality's wellness programmes particularly addressed health and wellness issues [issues relating to life (family)]. However, work from home on an *ad hoc* basis, job share, compressed workweek, telecommuting and career break (Caillier, 2013) had not been adopted by the municipality in the South African Public Service as strategies to assist employees in coping with their work and family-related challenges.

Table 2: Wellness programmes address work-related issues

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly disagree	67	21.82	21.82	21.82
	Disagree	64	20.85	20.85	42.67
	Neutral	99	32.25	32.25	74.92
	Agree	66	21.50	21.50	96.42
	Strongly agree	11	3.58	3.58	100.00
	Total	307	100.00	100.00	

Use of wellness as a work-life balance strategy to address work-related challenges: From the results presented in Table 2 below, it is evident that the majority of the respondents represented by 32.2% (99 respondents) took a neutral stand with respect to the question, while 67 respondents representing 21.8% of the participants disagreed strongly and 64 others (20.8) also disagreed that the wellness programmes assisted them in managing their work-related challenges. Sixty-six participants (21.5%) agreed that the wellness programmes helped them in managing their work-related issues and the remaining 3.6% strongly agreed with the statement. The feedback on the item yielded a mean of 2.64 and a standard deviation of 1.147. The results indicate that over 42% of the participants expressed the view that the wellness programmes did not assist them in coping with their work-related challenges, while 37% others agreed with the statement.

Use of wellness programmes as a work-life balance strategy to address family-related issues: The outcome presented in Table 3 indicate that 23.8% of the respondents strongly disagreed that the wellness programmes helped them in coping with their relational issues and 20.5% others also disagreed with the statement. By taking a neutral stand a total of 104 respondents representing 33.9% did not express any view on the statement while 19.2% and 2.6% strongly agreed and agreed respectively that the wellness programmes helped them in coping with their relational challenges. The mean and standard deviation derived from this item were 2.56 and 1.125 respectively. This result shows that 44.3% of the total respondents disagreed with the statement while 21.8% agreed that the wellness programmes assisted them in managing their relational challenges. Table 3 presents the outcomes of the responses to this item.

Table 3: Wellness programmes address family-related issues

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly disagree	73	23.78	23.78	23.78
	Disagree	63	20.52	20.52	44.30
	Neutral	104	33.88	33.88	78.18
	Agree	59	19.22	19.22	97.40
	Strongly agree	8	2.60	2.60	100.00
	Total	307	100.00	100.00	

This is an unexpected result because the majority of the respondents were married and according to the literature, wellness programmes are designed to address family-related demands. The reason for this result could be linked to the findings of the qualitative data analysis. Some of the findings are unawareness of the programme, inaccessibility to the programme, stigmatisation, confidentiality and trust issues, as well as cultural beliefs. These findings of the qualitative data analysis are substantiated in the literature by various scholars (Gunavathy, 2011; Naidoo & Jano, 2003; Sieberhagen et al., 2011). This result could also be linked to the fact that the programme was an EAP, which the literature has shown to be a reactive strategy (Benavides & David, 2010). It is also corroborated by Kelly et al. (2008) supposition that workplaces that have adopted WLBS may be reacting to emerging viewpoints that suggest that good employers are those that adopt initiatives that are family-friendly.

Contribution of work-life balance strategies to the wellness programmes: Although the descriptive statistics presented in Tables 1, 2 and 3 showed that half of the number of WLBS adopted by the municipality identified more with life strategies addressing personal and family challenges, the inferential statistics results provide more clarity on the situation, as shown in Table 4. The regression model presents an R square of 0.077 and adjusted R square of 0.071. This implies that the model (WLBS) predicts 7.1% of the variations in wellness programmes at a municipality in the South African Public Service. It is significant at $p < 0.01$ indicating that there is a substantial association between the independent variables at the two dimensions of WLBS and the wellness programmes (dependent variable). These results led to the finding that WLBS contribute to wellness at the municipality in the South African public service. The standardised Beta and matching P values for life strategies and work strategies ($\beta = 150$, $p < .01$) and ($\beta = 235$, $p < .001$) respectively, indicate that work strategies made the most meaningful contributions to the model in comparison to life strategies. In addition, this confirms the descriptive statistics results that, although the wellness programmes adopted at the municipality was more of an EAP (addressing life-related issues) than a holistic WLB strategy; its efficacy in addressing the employees' relational issues was negligible. The wellness programmes would have made meaningful contribution to assisting employees in addressing their work-life issues if the work strategies

tested in the study were integrated into it. This is supported by Voydanoff's (2005a) border theory which postulates that work and family are inseparable spheres, therefore activities and resources need to be tailored to address them simultaneously.

Table 4: Work-life balance strategies as predictor of wellness programmes

Independent variable	R	R square	Adjusted R square	F	Beta	T	P
	.28	0.08	0.07	12.73			
Life strategies					150	2.73	.00
Work strategies					235	4.27	.00
Constant					-	12.01	.00

Having established that there is a significant relationship between the wellness programmes and WLBS, it is necessary to ascertain if the WLBS assisted employees in achieving meaningful WLB.

Work-life balance: The outcome variable in this paper is WLB indicated by satisfaction with work and family situations. The result of the effect of the WLBS on WLB is presented in the regression model below (Table 5). Consider the result of the R square at 0.003 and adjusted R square of 0.004. This shows that work and family strategies predict only 0.30% of the variations in WLB at a municipality in the South African Public Service. This is insignificant at $p > 0.05$ confirming that there is no significant relationship between WLBS and WLB. The standardised Beta and corresponding P values for work strategies and family strategies ($\beta = 0.053$, $p > 0.05$) and ($\beta = 0.005$, $p > 0.05$) respectively. Although none of the independent variables (family and work strategies) contributed significantly to the model, family strategies were most insignificant.

Table 5: Effect of work-life balance strategies on work-life balance

Independent variables	R	R square	Adjusted R square	F	Beta	T	P-value
	.05	.00	.00	.43	-	-	.65
Work strategies					.05	.93	.36
Family strategies					.00	.09	.93
Constant						23.08	.00

Qualitative data analysis: The qualitative data was gathered from 11 selected interviewees among top management employees at the municipality and responses from open-ended questions included in the questionnaire. There were no restrictions as to choice of alternative answers in closed-ended form to participants. The qualitative responses highlighted participants' perspective on the WLBS implemented by the municipality and ways of improving them. Most respondents were of the opinion that domestic relationship counselling, substance/alcohol abuse counselling, HIV/AIDS counselling, stress management and financial/debt counselling were implemented by the municipality. They further suggested the WLBS that were not in place at the municipality. Below in Figure 1 is the presentation of the responses from participants with respect to the WLBS including those adopted and not adopted by the municipality. The word *"parent"* in the figure below does not constitute any significant implication to the study but are NVivo generated labels for sources of data flow. Parent node is the main container of topics or themes in a particular factor. It aggregates the coding references from *child* nodes. Opening a parent node reveals the information coded directly to it and those coded at the first-level child nodes.

Figure 1: Work-life balance strategies (WLBS) at the municipality
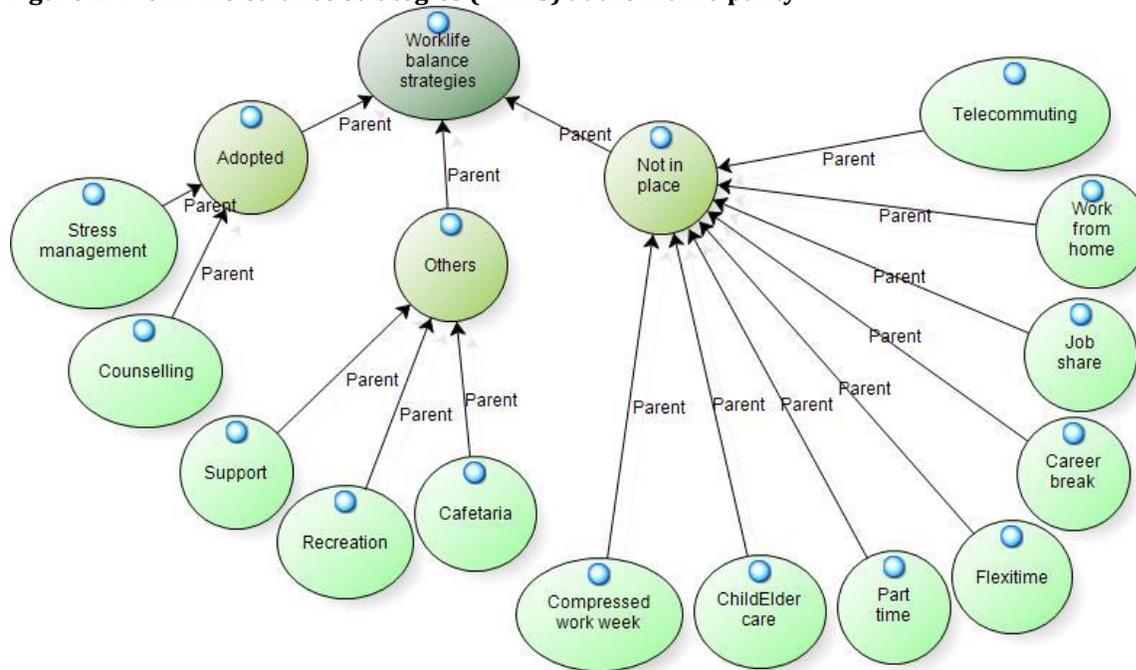
Discussion of findings: The research reported in this article was designed to examine the efficacy of wellness programmes in addressing employee work-life challenges and achievement of WLB at a municipality in South Africa. The paper combined 10 major work-life balance strategies [(1) life strategies: domestic relationship counselling, stress management, substance/alcohol abuse counselling, HIV/AIDS counselling, financial/debt counselling and (2) work strategies: work from home on an *ad hoc* basis, job share, compressed workweek, telecommuting and career break)] by integrating the segmentation theory (Zedeck, 1992) and the demands, resources and strategies model (Voydanoff, 2005a, 2005b) in assessing the wellness programme as a WLBS. This result (categorisation) is supported in the literature by Zheng, Kashi, Fan, Molineux, and Ee (2015, p. 11). The outcome demonstrates that the wellness programme adopted as WLBS categorically addressed family-related demands; hence work strategies were not in place at the municipality in the South African Public Service. This result aligns to the segmentation theory's (Guest, 2002; Lambert, 1990; O'Driscoll et al., 1992; Staines, 1980; Sumer & Knight, 2001; Zedeck, 1992) assumptions that work and the non-work domain are dissimilar and have no relationship with one another; therefore, strategies addressing both domains could be distinctly formulated and implemented.

This finding is in line with conventional study on HR policies in explaining the characteristics of WLBS in place in the South African Public Service (De Cieri, Holmes, Abbott, & Pettit, 2005; Kossek et al., 2006; Kossek & Ozeki, 1999). Additionally, it confirms that the wellness programmes adopted by the public service are clearly health and wellness programmes (Caillier, 2013). Health and wellness, according to S. E. Hobfoll (2011) conservation of resources theory are of primary value to the individual. Therefore this result supports the use of salience as moderator in person-environment and stress studies of satisfaction and wellness (Judge, Locke, Durham, & Kluger, 1998; Locke, 1976; Rice, McFarlin, Hunt, & Near, 1985). The non-adoption of work strategies by the municipality corroborates Ngo, Foley, and Loi (2009) citation of Poelman and Saibzada (2004) and confirms that wellness programmes were not holistic WLBS since only life-related issues and not work-related demands (Kim & Wiggins, 2011) were addressed. This result is consistent with the literature and qualifies the wellness programme as an EAP (Benavides & David, 2010). However, Zheng, Molineux, Mirshekary, and Scarparo (2015) reported that flexible work practices were more beneficial in aiding employees to develop their coping strategies than health and wellness programmes. Yet, these strategies were not adopted by the municipality. Therefore, employees did not achieve WLB at the municipality by using wellness programmes.

Qualitative data provided more substantive information on the effect of the non-adoption of work strategies by the public service. The data confirmed that employees wished that strategies like telecommuting, job share, work from home on ad hoc basis and part-time work could be implemented at the municipal workplace. Additionally, the qualitative data supported the claim that wellness programmes at the municipality could not be addressed as holistic WLBS because they did not enhance employees' experiences with work and family domains as supported in the literature (Felstead et al., 2002; McCarthy, Darcy, & Grady, 2010; Thompson, Beauvais, & Lyness, 1999). The findings of this paper also support the claims of Batt and Valcour (2003) that the challenges of work and life domains could not be solely tackled through initiatives that are crafted to give flexibility and restrict general work demands. This result is beneficial in predicting outcomes and this is supported in the literature (Arthur, 2003; Casper & Buffardi, 2004; Grover & Crooker, 1995; Kossek, Baltes, & Matthews, 2011). It also furthers knowledge in the study of wellness programmes by ascertaining that wellness programmes are life strategies. This highlights the need to formulate domain-based WLBS to address pertinent workplace and family-related challenges.

For the purpose of advising prospective practices to improve employees' work-life experiences in the South African public sector, the following discussion provides the appraisal of the findings regarding wellness and WLBS. To find the extent to which work-life strategies (work strategies and life strategies in this paper) predicted wellness programmes at the municipality in the South African public service, the strategies (work and life strategies) were subjected to a regression model. The adjusted R square showed that the WLBS were responsible for 7.1% of the variations in wellness programme at the municipality. This is not surprising because, in line with Caillier (2013) categorisation of WLBS, wellness programme as one of the sub-categories of the construct is designed to assist employees with health and wellness issues. Incidentally, in this paper, work strategies made a more important contribution to the model than life (family) strategies, indicating that if work strategies were integrated into the wellness programmes, employees' achievement of WLB could be influenced in a more meaningful way (Guest, 2002; Voydanoff, 2005b). Furthermore, Zheng, Kashi et al. (2015) submission in the literature was also corroborated by the findings of this paper.

5. Conclusion

The idea behind this paper is that the investment in the human capital of an organisation should not only be justifiable but must result in higher employee satisfaction, health and better services. This paper revealed that work strategies and family strategies jointly predicted wellness programmes at the municipality, therefore the finding is useful in bridging the gap in the literature, as suggested by Skinner and Chapman (2013), by evaluating the practice at the municipality in the South African Public Service. This result, therefore, has satisfied the second objective of this paper. The result confirms the novelty of this paper in classifying WLBS into two distinct and practical categories (work strategies and life strategies) and furthers knowledge on the efficacy of wellness programmes as WLBS.

Limitations and recommendations: The study reported in this article examined the efficacy of the wellness programmes as WLBS in a municipality at the South African Public Service. The results are limited to the municipality in the South African Public Service, but comparable studies could be conducted at the provincial and the national levels of the South African Public Service for triangulation. In agreement with Després *et al*. (2014), further study is recommended into the effect of wellness programmes for the purpose of improving workplace environments. The primary data collected are the result of personal responses from participants. A further limitation is that the paper did not investigate the mechanisms underpinning the linkages between the uses of wellness programmes and achievement of satisfaction with the family situation. It is suggested that future studies could address this gap by investigating the intervening processes. Researchers could possibly examine how to align work and family strategies to address the work and family needs of employees towards assisting them in achieving meaningful balance. Although several scholars have written on the achievement of WLB and the use of various WLBS (Darcy et al., 2012; De Cieri et al., 2005; Greenhaus, Ziegert, & Allen, 2012), the concept of alignment of strategies is new to the field of study and needs to be studied further. Such study may identify practical characteristics of work and life strategies that provide further evidence of peculiarity in addressing effectively work and family challenges and assisting employees in achieving WLB. Also, this study was of a cross-sectional design, therefore the results may not be construed to be directly supporting Jeffrey R Edwards and Rothbard (2000) 'cross-domain processes that include resource

drain, resource generation, and positive and negative spillover' cause and effect rendition. Although there may be certain theoretical assumptions that support the supposed cause and effect relationship, experimental study (wherein resource drain and resource generation are manipulated) may be needed to make such strong inferences about causality.

The main aim of WLBS should be to reduce stressors that reduce employee satisfaction with work and family situations. Due to the significant effect that work and family –related challenges have on employees, work-life balance strategists need to be pragmatic in formulating and designing work-life balance strategies that address domain-specific needs. This could be achieved through proper investigation of the major work-related stressors and family-related stressors in order to match strategy to stressor. For instance, an employee facing absence of autonomy at work may be unable to overcome the stressor by using the wellness programmes. Therefore, it is recommended that management lead in championing the formulation, implementation (building WLBS portfolio) and promotion of WLBS at the municipality. This way, the strategies best suited to workplace stressors and employees' work and family demands will be formulated and implemented. Effectively crafting a WLBS portfolio demands various skills, including aspects of management (change, project, communication), as well as strategic planning, implementation, monitoring and evaluation of the outcomes. Management need to be seen (not just heard) as being supportive of WLBS. When management endorsement is seen in the promotion of the policies (by way of campaigns, slogans, publicity and support), use by employees will be encouraged and possibly sustained.

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