



**Evaluating the effectiveness of the employee wellness programme
in the Department of Home Affairs at eThekweni district**

by

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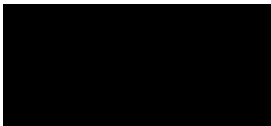
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ABSTRACT

Employee wellness has become an increasingly strategic priority in the South African public sector, amid ongoing challenges such as high absenteeism, burnout, declining productivity, and workplace stress. The Department of Home Affairs (DHA) remains under strain due to service-delivery pressures stemming from high workloads, constrained resources, corruption risks, and shifting employee expectations. The aim of this study was to investigate the impact of the Employee Wellness Programme (EWP) on employee wellbeing, work performance, and organisational efficiency within the DHA eThekwin District. A qualitative research design, incorporating semi-structured one-on-one interviews with management and frontline employees, was adopted for the study. The target population for a purposive sample was selected based on their relevance and accessibility regarding knowledge of wellness-related experiences. The primary sources were complemented by secondary data, including policy frameworks, departmental reports, academic literature, and legislative documents. Thematic analysis was used, manually, for both sets of primary and secondary data to identify major patterns or themes that may emerge from participants' narratives.

The findings showed that although the EWP was well conceptualised and aligned with DPSA guidelines, its implementation was inconsistent and hampered by a general lack of awareness, under-resourcing, inadequate communication, and poorly developed monitoring mechanisms. A multidimensional approach to strengthening the EWP has been suggested, including leadership commitment, better resourcing, continuous improvement, and the integration of wellness into core HR and performance systems. The study contributes to public management scholarship by highlighting employees' lived experiences and the contextual challenges of implementing wellness programmes in high-pressure public service environments. Recommendations are made to improve EWP effectiveness and further support a resilient, healthy, and productive workforce within the DHA eThekwin District.

Keywords: Employee Wellness Programme; employee wellbeing; work performance; organisational efficiency; Department of Home Affairs.

LIST OF ABBREVIATIONS AND ACRONYMS

AIDS	– Acquired Immunodeficiency Syndrome
ASD	– Assistant Director
COGTA	– Cooperative Governance and Traditional Affairs
DCS	– Department of Correctional Services
DDG	– Deputy Director-General
DHA	– Department of Home Affairs
DOH	– Department of Health
DPHRU	– Developmental Pathways for Health Research Unit
DPSA	– Department of Public Service and Administration
EAP	– Employee Assistance Programme
EAPASA	– Employee Assistance Professional Association of South Africa
EHWP	– Employee Health and Wellness Programme
EHWSF	– Employee Health and Wellness Strategic Framework
EOP	– Employee Occupational Programmes
EWP	– Employee Wellness Programme
GRR	– Generalized Resistance Resources
HR	– Human Resource
HRD	– Human Resource Development
HRM	– Human Resource Management
HIV	– Human Immunodeficiency Virus
HIV/AIDS	– Human Immunodeficiency Virus / Acquired Immunodeficiency Syndrome
HWF	– Healthy Workplace Framework
IDP	– Integrated Development Plan
ILO	– International Labour Organization
JD-R Theory	– Job Demands-Resource Theory
KPI	– Key Performance Indicators
KZN	– KwaZulu-Natal
NDP	– National Development Plan

NHS – National Health Service
NPM – New Public Management
NPM – Appears twice; kept as one entry
SADC – Southern African Development Community
OAP – Occupational Alcoholism Programmes
OHS Act – Occupational Health and Safety Act
PCC – Parliament's Portfolio Committee
PMG – Parliamentary Monitoring Group
PA – Public Administration
PMDS – Performance Management and Development System
POS – Perceived Organisational Support
POPIA – Protection of Personal Information Act
PSC – Public Service Commission
PVF – Public Value Framework
SA – South Africa
SADC – Southern African Development Community
SANDF – South African National Defence Force
SAPS – South African Police Service
SDT – Self-Determination Theory
SET – Social Exchange Theory
SHERQ – Safety, Health, Environment, Risk and Quality
SMS – Senior Management Service (appears twice; kept as one entry)
SOC – Sense of Coherence
STIs – Sexually Transmitted Infections
UKZN – University of KwaZulu-Natal
UK – United Kingdom
USA – United States of America
WHO – World Health Organisation

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CHAPTER ONE

INTRODUCTION AND OVERVIEW OF THE STUDY

1.1 Introduction

Public service delivery is one of the persistent challenges of the democratic era, in which citizens continue to expect improved access to effective, efficient services. In most communities, however, failures in service delivery persist often due to a lack of access to basic services, including electricity, sanitation, and healthcare. The challenges reflect systemic gaps that have continued to affect both residents and public officials. As frontline workers and public servants, we must deliver services under challenging circumstances while facing similar socio-economic challenges that affect the broader population. Their work environment, stress levels, and overall well-being are thus crucial to their performance and productivity.

Against this background, employee support in the public sector has become a dire necessity. The Department of Public Service and Administration (2019) posits that employee wellness should be approached holistically, recognising that personal, social, and work-related pressures negatively affect attendance, morale, productivity, and ethical conduct. In addition, unfavourable working conditions, limited resources, and high work pressure may lead employees to experience immense emotional stress, which can manifest as burnout, unprofessional conduct, substance abuse, and increased vulnerability to corruption, ultimately compromising effective service delivery. Therefore, in general, EWPs have been developed as an important intervention to support employees, improve workplace functioning, and enhance service delivery in various government departments.

1.2 Background of the Study

Since 1994, the government has prioritised transformation, resulting in numerous programmes and initiatives to improve service delivery. The Employee Health and Wellness Strategic Framework was released by the Department of Public Service Administration (2019) to take a more holistic approach to addressing the everyday issues encountered in the public sector.

Traditionally, alcoholism in the workplace has been addressed via the employment of traditional employee support programmes (Dickman, 2009:53). According to Bophela and Govender

(2015:506), this approach has proven ineffective because it has frequently failed to address a variety of issues that can result in substance abuse and low workplace productivity. As a result, the introduction of a more holistic approach has helped reform the old model to address challenges that may also be psychosocial, such as a hostile work environment and other issues that negatively impact employees' productivity. Badul and Subban (2022) examine the concept of employee wellness programmes as ways employees use to address workplace challenges, including maintaining a balance in their personal lives, which may impact their productivity.

The Employee Wellness Programme (EWP), initiated by the Department of Home Affairs (DHA) in 2001, aims to enhance employee performance and well-being. This research focuses on the impact of employee wellness programmes on combating absenteeism, improving service delivery, enhancing employee performance, reducing corruption, and overcoming financial constraints in the KwaZulu-Natal Department of Home Affairs (DHA) that falls under the eThekweni District.

This would enable one to examine factors such as workplace stress prevalence, mental health awareness, HIV/AIDS management, and other efforts to address the various socio-economic issues confronting the areas where service delivery must take place. The research should determine whether the EWP has successfully accelerated productivity, creating a healthy workplace environment where employees can perform their duties efficiently to meet the public's needs, while also having their own needs catered to.

1.3 Research Problem

The Department of Home Affairs is known for long queues for a range of services. The long queues that have always characterised the Department of Home Affairs offices reflect not only the challenges of service delivery but also point to less desirable working conditions for employees. According to the Parliamentary Monitoring Group (2019), long queues result from high client volumes, limited office space, and inefficient workflow processes that strain the workforce. Such working conditions create stressful, overwhelming environments that negatively impact employee morale, performance, and attendance. Research has shown that employees operating in resource-constrained, highly pressurised settings are likely to experience burnout, frustration, and absenteeism (Ganiyu, Fields & Atiku, 2017; Badul & Subban, 2022). Thus, long

queues are related to unsatisfactory working conditions, making these two issues interrelated and calling for effective Employee Wellness Programmes within DHA.

According to Ganiyu, Fields and Atiku (2017: 446), absenteeism is a major challenge in the South African public sector. As absenteeism and lack of employee performance in government departments are significant issues, with numerous cases of nonattendance resulting from various causes such as personal issues, financial problems, and emotional abuse within and/or outside of the workplace. The study will demonstrate the importance of wellness management programmes in enhancing service delivery and employee performance in the Department of Home Affairs, KwaZulu-Natal.

1.4 Aim of the Study

The aim is to evaluate the effectiveness of the Employee Wellness Programme within the Department of Home Affairs in the eThekweni District, with a focus on employees' health and well-being.

1.5 Research Questions

The study attempted to answer the following key questions:

- How does the Employee Wellness Programme improve employee health and well-being, productivity, job satisfaction and service delivery in the Department of Home Affairs at eThekweni District?
- What are the processes, resources and strategies utilised by the Department of Home Affairs in implementing the Employee Wellness Programme?
- How do the employees perceive the strengths, weaknesses, accessibility and overall functionality of the Employee Wellness Programme?
- What are the barriers to effective implementation of the Employee Wellness Programme, and how could the Department of Home Affairs make improvements to the programme in order to enhance organisational effectiveness?

1.6 Research Objectives

The objectives of the study were to:

- Evaluate the effectiveness and overall impact of the Employee Wellness Programme on employee health and well-being, productivity, job satisfaction, absenteeism and service delivery.
- Explore the strategies, processes, and delivery mechanisms that the Employee Wellness Programme utilises in its implementation at the Department of Home Affairs, eThekweni District.
- Examine employees' perceptions of the strengths, weaknesses, accessibility, and functionality of the Employee Wellness Programme.
- Identify barriers that affect the successful application of the Employee Wellness Programme and provide recommendations for increasing its effectiveness and organisational impact.

1.7 Literature Review

Employee Wellness Programmes have gained popularity worldwide, aiming to improve employee health, well-being, and overall job satisfaction (Magqadiyane, 2016). The research emanating from the scholarly literature review conducted focuses on critically articulating the potential impact of EWPs within the Department of Home Affairs (DHA) in the eThekweni District, South Africa. This section provides an in-depth discussion of what an EWP is, what it seeks to achieve, and where the concept originated, to advance the theoretical underpinnings of EWPs in the public sector, particularly within the Department of Home Affairs (DHA).

1.7.1 Understanding the Employee Wellness Programme (EWP)

The Employee Wellness Programme is a structured set of interventions intended to promote and support the physical, psychological, emotional, social and financial well-being of employees within an organisation. In the South African public sector, the EWP is an integral part of human resource development, addressing both personal and work-related challenges that may impact performance, morale, and productivity. According to scholars such as Badul and Subban (2022), EWP goes beyond conventional employee assistance by offering holistic, preventative, and developmental supportive services. Bophela and Govender (2015) describe EWP as an

important tool in enhancing the quality of work life through, among other things, counselling, trauma debriefing, health promotion, HIV/AIDS support, stress management, and personal development interventions.

In the Department of Home Affairs, EWPs are crucial because employees frequently work in constrained environments with long queues, limited resources, and demanding client interactions (Thusi, 2023). The pressures at work underscore the importance of wellness initiatives for enhancing psychological resilience and workplace functioning.

1.7.2 The aim of the Employee Wellness Programme

EWP aims to improve individual employee well-being and organisational performance by promoting physical and mental health through counselling, health screenings, chronic illness support, and psychosocial interventions (Maletzky, 2017). Reduction in stress, burnout, and absenteeism, which are common in resource-constrained public service environments (Ganiyu, Fields & Atiku, 2017). Improved morale, engagement, and productivity are ensured, as supported employees tend to show greater job satisfaction and performance (Badul & Subban, 2022). Improving service delivery, because employee well-being is directly linked to organisational efficiency and client satisfaction (Osilla et al., 2012). In the DHA context, enhanced well-being will directly support employees in managing heavy workloads and meeting public expectations despite operational constraints.

1.7.3 Emanation of Employee Wellness Programme - Emanation of Employee Wellness Programme

1.7.3.1 International Origins

Globally, employee wellness initiatives emerged from early employee assistance programmes developed to address alcoholism, stress, and workplace performance issues (Dickman, 2009). Over time, these have expanded into comprehensive wellness programmes encompassing mental, physical and emotional health promotion. South African Public Sector. The institutionalisation of EWPs in South Africa is related to several legislative and policy frameworks.

1.7.3.2 Employee Wellness Programme in the South African Public Sector

The institutionalisation of EWPs in South Africa is related to several legislative and policy frameworks.

Public Service Act (1994) - Established structured human resource management systems that incorporated mechanisms for supporting employees.

National Development Plan (2012) - Emphasises the importance of a capable and healthy public service workforce.

Employee Health and Wellness Strategic Framework (DPSA, 2019) - Provides a comprehensive framework comprising physical, mental, social, and occupational wellness pillars.

HIV/AIDS workplace policies - Early workplace responses expanded into broader health and wellness frameworks.

The public sector is often faced with a range of challenges that span both internal and external environments within the workplace. Ganiyu et al. (2017) examine work-life balance as a means to help employees navigate the workplace, minimising the stress they face from both superiors and their families. The author further argues that this stress arises from these two demands, with Saleem (2015) concurring that work and family are of paramount importance because they are closely correlated. Factors such as income also play a role for employees who have dependents who rely on them to sustain their livelihoods.

Ganiyu, Fields, and Atiku (2017) state that one of the common effects that warrant an efficient and effective work-life balance is dealing with employee dissatisfaction and the adversity brought about by turnover. Absenteeism remains a significant concern within the public sector of South Africa, and Ganiyu et al. (2017) use Nigeria as a case study in their comparative approach.

Globally, this is evidence of the fact that in a globalised world, employees are often expected to meet certain expectations which may prove to be a challenge and may result in an imbalance in an employee's life because work and family lives are in constant conflict as a result thereof (Ganiyu et al, 2017). Arising from these dynamics, it can be said that the majority of those in the workforce are subject to external environmental factors that may disrupt their morale or

productivity in the workplace, thereby creating stress, demotivation, and, in some cases, absenteeism. Akanji (2015) states that factors such as corruption, high unemployment rates, and inflation significantly affect the effectiveness of the workplace environment and employees' personal lives, including their overall well-being.

Badul and Subban (2022) suggest that EWPs can enhance employee productivity and engagement. By promoting healthy lifestyles and addressing burnout, employees may experience increased focus and motivation, ultimately benefiting the organisation through a positive work environment. The EWP can positively impact employee morale and absenteeism. Maletzky (2017) highlights how EWPs can address work-life balance and well-being, thereby improving employee morale and reducing absenteeism rates.

1.7.4 Contextualising Employee Wellness Programmes in the Department of Home Affairs

The DHA introduced the Employee Wellness Programme in 2001 as a response to increasing workplace pressures, including high workloads, public demand, burnout, absenteeism, and psychosocial stressors. Thusi (2023) points out that those employees often face inadequate support and health-related difficulties; hence, there is a dire need for formalised wellness interventions which promote performance and morale.

The Employee Wellness Programmes are essential for promoting the physical and mental health of workers in demanding workplaces, such as the DHA. The DHA's responsibility to manage immigration procedures and issue identity cards, among other critical public services, places a significant burden on its staff (Bessinger, 2006). The demand for services can be excessive in areas like eThekweni due to the high population density, which increases work stress and burnout (Thusi, 2023).

The DHA is a crucial government department responsible for various services that may expose employees to stressful situations (Thusi, 2023). Considering the specific context of the eThekweni District, factors such as high population density and heavy workload could further contribute to employee stress (Thusi, 2023). Implementing EWPs tailored to these challenges could have a particularly significant impact (Maletzky, 2017). Evaluating the implementation of EWPs

specifically within the DHA in the eThekweni District could provide valuable insights into improving employee health and overall departmental effectiveness (Bessinger, 2006).

The research conducted by Thusi (2023) indicates that employees in this department are not well recognised within the Performance Management Development System (PMDS), whilst there is a lack of training and health issues are often neglected. This study believes that such conduct by the Department strains employees, leading to dissatisfaction.

1.8 Theoretical Framework on Employee Wellness

According to Maslow (1943), human actions are motivated by the desire to attain certain ends. In the workplace, motivation enables employees to experience greater satisfaction when their demands are met. Maslow's Hierarchy of Needs is a theory of motivation that states a hierarchy of psychological needs guides human decision-making.

The Job Demand-Resource Model examines how job demands and the resources at employees' disposal affect their well-being and performance (Bakker, Demerouti, & Sanz-Vergel, 2023). According to Bakker, Demerouti, and Sanz-Vergel (2023), the demands faced by employees often encompass physical, psychological, emotional, and social aspects. In which employees work with people from different backgrounds, the way they communicate with each other, work together as a team, and handle pressure and resolve conflicts effectively, all contribute immensely to workload management and ergonomics.

According to Herzberg's Motivation and Hygiene Theory (1943), the scholar in his findings identified that the factors that lead to job satisfaction are different from those that lead to job dissatisfaction, hence he introduced the two-factor model, which includes the work done by the employee, and what has been achieved by the employee. He further explained that the recognition given for outstanding performance, moreover, with the growing responsibilities within the workplace, would afford employees the opportunity for career advancement and growth. These factors contribute to defining their job content and their feelings about the work they are expected to do as part of their responsibilities. Smit, Cronje, Brevis, and Vrba (2011) illustrate that hygiene factors form part of the dissatisfaction areas within an organisation, which include

organisational policy, supervision, salary, working conditions, and interpersonal relationships, which do not contribute to the employee.

This research is grounded in the New Public Management (NPM) theory, which holds that public sector organisations should adopt private sector management strategies to improve efficiency, accountability, and service delivery (Hood, 1991). In the context of wellness programmes, this means recognising that a healthy, supported workforce directly contributes to the effectiveness of public services

1.9 Significance and Contribution

Due to economic growth, many people are facing a range of challenges that influence their families, communities, and workplaces. These challenges include financial strain, job insecurity, rising living costs and societal pressures, which together create a stressful environment that makes it difficult for individuals to maintain a healthy work-life balance. According to the Medical Research Council's Developmental Pathways for Health Research Unit (DPHRU), about 25.7% of people in South Africa are currently struggling with depression. Many of these individuals are also employees, and the stresses they face can significantly affect their performance and well-being at work.

Employee Wellness Programme (EWP) is designed to help employees manage these challenges. They provide support for issues such as HIV & AIDS, substance abuse, stress, depression, domestic violence, physical health, and financial difficulties—all of which can negatively influence an employee's ability to perform at their best. The primary mission of an EWP is clear: to improve employee well-being, which in turn boosts productivity and enhances service delivery in the workplace.

The Department of Home Affairs (DHA) is a government department often at the centre of complaints due to service delivery issues. This study, therefore, aims to evaluate whether DHA adequately supports its employees mentally, physically, and psychologically. By evaluating the effectiveness of the Employee Wellness Programme, the research will explore whether

employees at the DHA are being provided with the necessary support to cope with the stress of their demanding roles.

The significance of this study lies in its potential to shed light on how well-being programs are currently being implemented in the DHA and their impact on employee satisfaction and retention. By measuring these factors, this research can help identify gaps in existing wellness programmes and pinpoint opportunities for improvement. The study will also provide valuable insights that help the DHA better understand its employees' needs and implement necessary interventions to create a healthier, more productive workplace. This study is important because it will allow the DHA and other similar public sector organisations to assess their wellness initiatives. Measuring the success of these programmes can contribute to improving key performance indicators (KPIs), enabling the evaluation of the EWP's effectiveness in enhancing both employee well-being and service delivery. Ultimately, this research will provide recommendations to enhance employee engagement, morale, and productivity, thereby improving public service.

1.10 Rationale

Focusing on employee wellness has always been a crucial part of public sector strategy, as it is one of the most significant resources. Since the post-pandemic era, employee wellness has been repurposed and re-emphasised, highlighting its significance with greater immediacy. The issues that employees have faced mentally, physically, psychologically, and emotionally have been exacerbated during the pandemic and the post-pandemic era in the new world of work, as they reintegrate into the workplace. According to Mabindisa (2014), a defined gap exists in the current employee wellness programme within the DHA, and employee wellness is a key aspect of the Human Resource Development (HRD) strategy within organisational structures. Research is required to explore the most effective EWP strategy. Lastly, it can assist the organisation in staying up to date with current trends, which can be useful in achieving the government's goal of delivering excellent service to the public.

1.11 Research Methodology

1.11.1 Research design

The research would be conducted using a case study research design. Maree et al. (2012) define a case study as a qualitative research approach used to examine a set of events and research phenomena, providing a concise context for real-life situations. The case study of the Department of Home Affairs in eThekweni District will be evaluated alongside other case studies, examining the effectiveness of these programmes in the public sector and, most importantly, based on findings regarding how employees perceive wellness programmes. The motive behind choosing this government department is due to the long turnaround time after applying for such services, the quality of the services, long queues, and concerns about fraud and corruption. These issues might be caused by various factors, but the main role player in any work environment for effective day-to-day activities is employees.

Empirical research is applicable to this study. Empirical research is regarded as one of the ways of gaining information through observation or lived experiences that can be direct or indirect. This could assist the researcher in answering empirical questions using evidence collected (Wikipedia, 2023).

1.11.2 Research approach

This study would be conducted using a qualitative approach. According to Bloomberg and Volpe (2016), qualitative research seeks to answer questions such as why, how, what, where or when. It focuses on an interpretive, naturalistic approach that examines the study of human beings and their natural environments. This approach would answer questions such as: what is the impact of EWP on DHA eThekweni service delivery, whilst gauging participants' lived experiences? This includes all other research questions that are useful in giving a comprehensive discussion supported by numerical data.

1.11.3 Study site

This research will be conducted using a case study of DHA within the eThekweni Municipality. This District is situated on the east coast of South Africa within the province of KwaZulu-Natal. According to the COGTA report (2019), this district is the third-largest metropolitan area in South Africa, with a population of 3.9 million, accounting for approximately 34.7% of KZN's total

population. The Department of Home Affairs has seven branches: Umgeni, Hammersdale, Pinetown, Tongaat, Pavilion, Prospection, and the Commercial Road branch (DHA, 2024).

1.11.4 Target population and sample size

Conducting one-on-one interviews enables an in-depth exploration of employees' experiences with the EWP and the collection of qualitative data on efficacy and areas for improvement. According to Bryman (2012), a population is the universe of units from which a sample can be drawn. The study will target all DHA employees appointed under the Public Service Act of 1994 for primary data collection. The secondary data will be sourced from all information related to the Employee Wellness Programme within the DHA, as well as from the public and private sectors, both locally and globally.

According to Lopez and Whitehead (2013), the main purpose of sampling is to select an appropriate population for the study. The non-probability sampling is utilised in a qualitative approach. This study will employ purposive sampling, a method suitable for qualitative research, as it enables the researcher to deliberately select participants with relevant knowledge, experience, or exposure to the phenomenon under study (Rai & Thapa, 2015).

The number of DHA employees would be sampled from levels 3-6, levels 7-11 (non-SMS members, but supervisors/management), and lastly, levels 12-14 (SMS members). This would allow the researcher to receive responses from different perspectives. A proposed sample size of 17 participants is anticipated. The study would include one District Manager, two Office Managers, one District Coordinator, four Supervisors, four Administrative Clerks, three DHA Clerks assigned to hospitals to capture births and death certificates, and two Cleaners within the Department of Home Affairs in the eThekweni District. One-on-one interviews provide a private and confidential setting where participants can express their honest views without fear of judgment or exposure. In this respect, this research adheres to the principles of qualitative research by ensuring depth, flexibility, and clarity in responses to the EWP's effectiveness and challenges within the DHA.

1.11.5 Data collection

Data can be collected using both primary and secondary methods. According to Mazhar, Anjum, Anwar, and Khan (2021), primary data is data collected from a particular person or for the first

time. This data can be collected through face-to-face interviews conducted by the researcher; recordings of participants' concerns will also be utilised. Primary data is related to empirical investigation, whereas secondary data is gathered from existing documents and previous research to explore information about a particular phenomenon.

This study would utilise both primary and secondary data collection. This study would utilise the interview method as the primary data collection method. According to Hopf (2004), this method enables individuals to express themselves by observing their diversity. The researcher would utilise semi-structured interview questions for all participants. Furthermore, the researcher would use secondary data, whereby data is explored from existing documents such as academic publications, theses, news transmitted from TV and radio, books, journals, government reports, articles and other information available on-site for scholarly purposes, laws and regulations related to Employee Wellness Programmes in South Africa and across the world.

1.12 Data Analysis

The study would use thematic analysis for analysing the primary data. Thematic analysis is a valuable methodology in qualitative research that enables the uncovering, analysis, and summarisation of patterns (themes) within data (Labra, Castro, Wright, & Chamblas, 2020). Naeem Ozuem and Ranfagni (2023) state that to effectively utilise this method of data analysis, the researcher should follow these six important steps in thematic analysis: familiarise oneself with the data, generate initial codes, search for them, review themes, define and name themes, and produce the report.

The research would inform policy decisions, law enforcement strategies, public awareness campaigns, and future research efforts aimed at enhancing employee wellness and service delivery. This would be done by analysing the gaps between these frameworks and the extent to which they are implemented.

1.12.1 Data analysis techniques

Thematic analysis would be employed to identify recurring themes and patterns in employee experiences with the Employee Wellness Programme (EWP) and to understand its strengths and weaknesses (Bessinger, 2006).

1.13 Structure of the dissertation

Chapter 1: Introduction and study overview

The first chapter presents an overview of the study, including the background, research problem, aim, research questions and objectives, scope of the study, significance, justification, limitations, and ethical considerations.

Chapter 2: Theoretical framework

This chapter discusses the legislative and theoretical aspects of EWP.

Chapter 3: Literature review

This chapter presents literature reviews from an international and regional perspective, as well as within the Department of Home Affairs, eThekwin, with a focus on EHW.

Chapter 4: Research methodology

The first part of this chapter presents the research methodology and design, including the data collection instruments used in this study.

Chapter 5: Presentation, analysis and interpretation of finds

This section presents data analysis and discusses the findings.

Chapter 6: Summary, conclusion and recommendations

The final chapter focuses on the summary, conclusion, and recommendations based on the analysis of the overall study.

1.14 Ethical Consideration

The research will be conducted in consideration of South African legislation, such as the POPIA Act no 4 of 2013. The study subjects will be respected in recognition of their human rights and dignity by ensuring that all participants sign an informed written consent that ensures their privacy and confidentiality. The research would adhere to the DHA's rules and regulations, as outlined in an approved gatekeeper's permission letter. The research will be conducted in a fair and transparent manner, adhering to all ethical considerations for research as outlined by the University of KwaZulu-Natal.

1.15 Limitations

Employees may be uncomfortable sharing their personal views due to the research's confidentiality requirements. The targeted number of participants can be limited by factors such as leave, unwillingness to participate, Departmental commitments, and overall staff shortages, despite the literature suggesting positive outcomes. Participants may hesitate to share information that affects them in the workplace, particularly regarding mental health and wellness aspects.

1.16 Conclusion

It is hoped that the wellness programme will be effective and that gaps in current policies will be identified and addressed, with the aim of encouraging employers to prioritise employees' needs and foster a positive work environment, while carefully considering employees' health and wellbeing.

CHAPTER TWO

THEORETICAL FRAMEWORK UNDERPINNING EMPLOYEE WELLNESS PROGRAMMES AND PUBLIC MANAGEMENT

2.1 Introduction

One of the central themes in the Human Resource Management (HRM) and organisational psychology contexts is the relevance and effectiveness of the Employee Wellness Programme (EWP) in promoting employee wellbeing and enhancing organisational performance. In organisations such as the Department of Home Affairs (DHA) under the eThekweni District, which is regarded as a high-pressure work environment, the utilisation of wellness programmes serves not only legal and ethical obligations, but also as a strategy for effective service delivery. The successful implementation of the EWP can directly influence service delivery, employee morale, job satisfaction and overall organisation efficiency.

This chapter presents the theoretical framework that underpins this study, offering a structured basis for analysing and evaluating EWPs within the public sector. This chapter discusses various psychological and organisational theories, including Maslow's Hierarchy of Needs, Job Demand-Resource theory, Herzberg's Two-Factor Theory, and Salutogenic Theory. These theories explain how workplace motivation, organisational relationships, and employees' needs are integrated. This includes the New Public Administration and the integration of theories like the Public Value Framework and the Human Capital Theory.

2.2 The role of the Theoretical Framework in Public Management

Ostrom (2005) provides a theoretical framework that plays a vital role in directing research in public management. It provides a platform for understanding the key concept, public sector issues and the relationship between these two. According to Badul (2018), public management requires a comprehensive understanding of various theories that connect management and administration. These theories serve as evidence or truth on particular phenomena or occurrences. The theoretical framework (Creswell, 2014) guides the formulation of research questions, the choice of methodology, and the analysis of findings.

Furthermore, Ostrom's (2005) theoretical framework provides researchers with a structured way to analyse problems within the public sector, such as service delivery issues and organisational culture. Bovens (2007) notes that the initiative of evaluating public programmes is supported through theoretical frameworks. The theoretical framework provides a benchmark for assessing the effectiveness of the programme, allowing managers and researchers to identify gaps in workplace programmes.

Overall, the utilisation of theoretical frameworks enhances the relevance of the research while having an impact on research and public management. The theoretical framework connects theory to the real-world challenges of government. It further ensures that interventions are not only evidence-based but also theoretically sound.

2.3 Theoretical Models of Employee Wellness

2.3.1 Maslow's Hierarchy of Needs Models

Abraham Maslow's Hierarchy of Needs, introduced in 1943, posits that a series of hierarchical needs can drive human motivation. This progression can be influenced by basic needs of survival, such as essential necessities (water, food, shelter, etc.), to a level of personal growth where one reaches self-actualisation. According to Maslow (1943), the demonstration of these needs differs in a workplace, which influences employees' satisfaction and performance. There are different needs under Maslow's Hierarchy, which will be discussed below.

❖ Physiological and Safety Needs

Typically, employees require basic necessities such as food, water, a break to rest, and a safe working environment. By addressing these needs through employee wellness, it automatically reduces stress, prevents overwork, reduces absenteeism, and enhances productivity in the DHA (Makhanda, 2021). Although ensuring that these basic needs are met, organisations create a stable environment that promotes mental and physical well-being, which is crucial for employee performance (Makhanda, 2021).

❖ **Social and Esteem Needs**

Employees seek social connections and recognition within their workplace. The intervention of EWP team-building activities and recognition of each employee's individual achievements boosts employees' morale and self-esteem. It provides them with a sense of belonging and ownership. This leads to high job satisfaction and increased dedication, as employees feel valued both personally and in the workplace (Sieberhagen et al., 2011). These initiatives are important in promoting employees' engagement and contributing positively in the workplace (Sieberhagen et al., 2011).

❖ **Self-Actualisation**

This theory regards self-actualisation as a point where one realises their full potential. However, EWR interventions that create a platform for personal and professional development, allowing employees to achieve a certain level in their lives, contribute to effective employee performance. Such programmes allow employees' personal goals to be aligned with organisational vision and mission; in return, it improves the employee's motivation and job satisfaction (Harry & Gallie, 2019). The continuity of these developments empowers employees to reach their full potential, both personally and professionally (Harry & Gallie, 2019).

2.3.2 Job Demands-Resource Theory

Demerouti, Bakker, Nachreiner and Schaufeli (2001), as one of the models within occupational health psychology, introduced the Job Demands-Resource (JD-R) model. This model is used as a tool to understand employee well-being, motivation, performance and stress in the workplace. According to this theory, every workplace has its own unique set of job demands and job resources. Bakker and Demerouti (2007) regard job demands as all aspects that assist the organisation in achieving its goals and decreasing job demands. Demerouti et al. (2001) describe job demands as psychological, social, and physical workplace aspects that require skills and are more closely associated with psychological and physical costs.

The JD-R model has two processes: the health impairment process and the motivational process. According to the health impairment process, extreme job demands can lead to

problems such as health issues, burnout and low productivity (Demerouti et al., 2001). The motivational process, as described by Bakker and Demerouti (2007), suggests that the availability of resources in the workplace motivates employees to perform effectively and achieve organisational goals. Numerous organisations utilise JD-R as an intervention for reducing burnout and improving employee engagement by increasing resources while reducing job demands (Schaufeli & Taris, 2014).

2.3.3 Herzberg's Two-Factor Theory

Incorporating Herzberg's Two-Factor Theory (1959) helps refine the design of wellness programmes by distinguishing between hygiene factors and motivators. Hygiene factors, such as salary, safe working conditions, and job security, are essential in a workplace, but they cannot prevent job dissatisfaction or enhance motivation. On the other hand, motivators such as career development opportunities, recognition, and personal growth are intrinsic elements that drive employee engagement and performance. By addressing both sets of factors, organisations can ensure that wellness programmes not only reduce dissatisfaction but also actively promote motivation, leading to improved job performance and greater employee retention (Harry & Gallie, 2019).

2.3.4 Salutogenic Theory

Aaron Antonovsky developed the Salutogenic theory with the intention of focusing on health rather than the causes of diseases. This theory emphasises resources and factors that support employees' health and their well-being (Mittelmark, Bauer, Vaandrager, Pelikan, Sagy, Eriksson, Lindström, & Meier Magistretti, 2022). According to Antonovsky (1987), the core of Antonovsky's theory is the concept of Sense of Coherence (SOC). The SOC explains why some individuals remain healthy despite experiencing significant stress. There are three components of SOC, which are comprehensibility, the view that life events are predictable and structured, manageability, which believes that one requires resources to meet demands and meaningfulness (Eriksson, 2022, in Mittelmark et al., 2022).

Salutogenic theory also introduced the concept of Generalized Resistance Resources (GRRs), such as social support, education, cultural stability, and self-esteem, which help individuals perceive stressors as manageable and meaningful, contributing to a strong SOC (Idan, Eriksson,

& Al-Yagon, 2022) in Mittelmark et al. (2022). Instead of viewing health and illness as twins, Antonovsky proposed shifting from total ill health (dis-ease) to total well-being (ease) (Mittelmark & Bauer, 2022; Mittelmark et al., 2022).

2.4 Employee engagement and organisational performance

The following chapter presents two theories, Social Exchange Theory (SET) and Self-Determination Theory (SDT), that form part of employee engagement and organisational performance.

2.4.1 Social Exchange Theory and Employee Wellness

Blau (1964) initially proposed Social Exchange Theory (SET) with the belief that workplace relationship is built on a mutual exchange basis. According to this theory, employees who regard themselves as being valued and recognised in their workplace are more likely to have a positive attitude, improved performance, and be satisfied in the workplace. All these can positively affect the organisation by reducing absenteeism, enhancing service delivery and increasing employee engagement (Blau, 1964).

SET, though employees view the EWP, when the organisation invest in employees' wellbeing, this is an investment and forms part of the exchange. Mostly, employees respond in kindness when the organisation supports them physically, mentally, and emotionally. Their kind response positively contributes to the organisation's objectives. Complementary behaviour could contribute to productivity, commitment to the organisational mission and goals, and overall improved organisational outcomes.

Perceived Organisational Support (POS) is an element of SET that describes how much employees feel that the organisation appreciates their efforts and cares about their well-being (Eisenberger, Huntington, Hutchison, & Sowa, 1986). According to the research conducted by Marange (2022), high job satisfaction, low stress levels, and increased performance are strongly associated with POS. Where employees are more supported by wellness initiatives, they are likely to have a positive attitude.

2.4.2 Self-Determination Theory (SDT)

Self-Determination Theory (SDT) is a theory that was developed by Deci and Ryan. This theory differentiates between autonomous and controlled motivation, proposing that people are most engaged and productive when their behaviour is self-determined and aligned with personal values and interests (Gagné & Deci, 2005). According to SDT, there are three basic psychological needs that should be satisfied for optimal motivation, which are autonomy (feeling of volition and self-endorsement), competence (feeling effective and capable) and relatedness (feeling connected and supported by others) (Gagné & Deci, 2005). Autonomous motivation in the workplace leads to a high level of employee engagement, job satisfaction, performance, and overall well-being.

2.5 Theoretical Framework in Public Administration

The section below will present the theoretical perspective of New Public Management.

2.5.1 New Public Management

Global administrative reforms have led to drastic structural changes in government as a whole and public administration. These include inquiries by scholars and debates over the past three decades (Farazmand, 2010). Public administration (PA) and public management are often used as complementary terms, but they differ in their emphases. Public administration emphasises serving the public by ensuring that policies and procedures are implemented accordingly (Hughes, 2003). *“Public administration (PA) is mostly about old-fashioned, traditional, introverted static hierarchies and procedures. It also focuses on following rules (compliance and accountability), and on the machinery of government”* Tshiyoyo (2018; 84).

Lane (2000) notes that New Public Management (NPM) was formulated in the 1980s and 1990s with the intention of transforming public administration to adopt a business approach in response to bureaucratic systems. The key principles of NPM are to increase productivity and deliver effective and efficient service to the community at large by adopting a business approach in the public sector. Peters and Pierre (1998) note that the adoption of public-private partnerships, along with diverse policy tools, illustrates a shift in government towards more innovative strategies beyond traditional bureaucratic models.

Public management encourages performance, innovation, efficiency and achieving results (Hughes, 2003). According to Tshiyoyo (2018; 85), *“Public management can be described as an approach which uses managerial techniques (often originating in the private sector) to increase the value for money”*.

Mullins' (1996) administration is regarded as a concept that draws more attention to services, while management implies control and a result-oriented approach. These differentiate the roles of public management and administrative management. Public service has played a major role in the history of South Africa in shaping civilisation and advancing the welfare of society. Public administration has been influenced by the rise of modern nation-states, economic progress, and education over the past two centuries, which have contributed to improving the living conditions of citizens (Farazmand, 2010).

According to Vigoda (2002), the primary challenge in modern public administration is striking a balance between responsiveness and collaboration. Responsiveness views citizens as clients, focusing on efficient service delivery, while collaboration emphasises mutual engagement between citizens and governments. *“One can stress that the relevance of public administration in the governance era is demonstrated throughout the use of collaborative citizenship whereby public administrators approach the public, not from a perspective of experts with privileged answers, but as people charged with the responsibility of rolling-out processes which would help deliberate and discuss citizens’ priorities, and above all, devise possible courses of action in order to implement available alternatives in partnership with relevant stakeholders and actors* (Tshiyoyo, 2018: 85) ”

NPM is regarded as a strategy to reduce absenteeism, increase the efficiency and effectiveness of employees in ensuring service delivery. The human resource capacity views employee programmes as one of the strategic tools implemented by the government in improving human resource capacity and effectiveness within the workplace (Hood, 1991).

2.5.2 Public Value Framework

The Public Value Framework is constructed on the belief that the existence of public institutions is based on value for society, which is not about making a profit, but about earning public trust, taking accountability, and providing quality service delivery (Moore, 1995). Although the

effectiveness of EWP contributions in DHA is unclear, it can directly improve citizens' satisfaction, increase staff productivity, and enhance service delivery. According to Benington and Moore (2011), Public value is achieved when government managers use the organisation's resources wisely by taking care of employees and meeting the needs of citizens, all working together to benefit society as a whole.

The Public Value Framework highlights three key aspects: public outcomes, trust, legitimacy, and service capacity (Talbot, 2011). EWP affects these areas by ensuring that workers are physically and mentally healthy, so they can perform their duties accordingly. When wellness programmes are well-planned and managed, they help improve service delivery, build public trust in the organisation, and strengthen the institution in providing essential public services (Alford & O'Flynn, 2009).

In this regard, public value is not only measured by the number of citizens served but also by the quality of services provided and the morale of employees delivering those services. A motivated and healthy workplace in DHA is a key part of its success, because employee wellness affects productivity, attendance, and ethical behaviour, which are important for building trust and accountability in public service (Bryson, Crosby, & Bloomberg, 2014). Therefore, EWP serve as a mechanism through which the department realises its constitutional and administrative mandate to deliver efficient and people-centred public services (DPSA, 2019).

2.5.3 Human Capital Theory

The Human Capital Theory, as developed by Becker (1964) and later expanded by Schultz (1981), suggests that investing in employees by providing them with education, training, health, and wellness support leads to better work performance and greater overall benefits for the organisation or the country's economy. In the public sector, employees are the government's most important resource, and their well-being directly affects how efficiently public services are delivered (Lefakane, 2017).

This theoretical perspective views the DHA's EWP as an investment in employees, aiming to improve job performance, reduce absenteeism, and enhance employee engagement. The programmes of EWP, such as stress management, financial management, mental health support, and work-life balance, serve as strategic tools to help employees address their mental,

physical, and psychological issues that can hinder service delivery. Such EWP services help employees to perform better in their daily duties (Khumalo & Nkomo, 2020).

In the public sector in South Africa, the Human Capital Theory underlined that it is important to align the EWPs with organisational goals to support public employees. As Pillay (2017) argues, a healthy and motivated workplace enables the government to fulfil its duty to deliver quality services to the community. That is why EWPs are regarded as a smart long-term investment that builds resilience, flexibility, and creativity in public servants, which improves the performance of government institutions and strengthens public trust.

In essence, the DHA's capacity to deliver efficient services depends on the well-being and competence of its employees. Wellness initiatives, therefore, not only strengthen individual employees' performance but also enhance the institution's legitimacy and value to the public (Moore, 1995; Benington & Moore, 2011). When employees are supported through effective wellness programmes, they are better positioned to fulfil the department's mission, thereby creating both organisational and societal value.

2.6 Inter-relationship between Employee Wellness and Public Management

This section will present an interrelation between public administration and employee wellness programmes.

Public managers rely on the health and well-being of their employees to meet or deliver according to the government's mandate (Munzhedzi, 2017). According to Pillay (2017), EWP is well known as one of the strategies of organisations to improve the well-being of employees by taking care of their health and well-being. Job satisfaction and retention are influenced by effective wellness strategies in the public sector, where turnover can be unmanageable (Dhanpat, Mashau and Mathonsi, 2020). The public sector views this programme as one of the key requirements for effective public management, aiming to ensure effective service delivery, performance management, and reduce absenteeism in the public sector (Munzhedzi, 2017). Motivated employees are highly likely to deliver effective results, which improves clients' trust and service outcomes (Dhanpat, Mashau, & Mathonsi, 2020).

Pillay (2017) notes that wellness programmes are part of Human Resource Management (HRM) in the public sector, ensuring that employee well-being aligns with organisational goals and objectives. Wellness programmes include assistance in stress reduction, mental health issues and occupational diseases. This reduces absenteeism in the workplace, and the financial relief could be redirected to other critical service delivery needs (World Health Organisation, 2010).

Public Management and employee wellness face several challenges in integration, including budget constraints, lack of support, cultural stigma, and inadequate monitoring and evaluation. The budget allocation for EWP may be deprioritised in order to ensure the prioritisation of core service delivery (Pillay, 2017). Public managers view wellness programs as additional initiatives that supplement the core functions of the organisation, which limits their support for this initiative (Dhanpat, Mashau & Mathonsi, 2020).

2.7 Conclusion

This chapter has addressed the theoretical framework underlying the study of evaluating Employee Wellness Programmes within the public management context, focusing on the Department of Home Affairs, specifically the eThekweni District. The application and integration of different psychological and organisational theories, including Maslow's Hierarchy of Needs, Herzberg's Two-Factor Theory, Social Exchange Theory, the JD-R Theory, Salutogenic Theory, and Self-Determination Theory, establish a multifaceted conceptualisation of the drivers for employee well-being, motivation, and performance.

These different theoretical models collectively highlight that employee wellness is influenced both by individual needs and organisational environments. The theories emphasise the importance of basic psychological and physical need satisfaction, intrinsic motivation, autonomy-supportive relationships, and quality organisational relationships. Furthermore, the application of New Public Management principles offers a governance-oriented perspective to ensure that wellness initiatives align with broader public service objectives, such as efficiency, accountability, and citizen-centred service delivery.

These theoretical insights serve as a precursor to the analysis of how EWPs contribute to employee engagement, reduce absenteeism, improve job satisfaction, and enhance

organisational performance. They develop a structured framework through which gaps can be identified, empirical inquiry guided, and policy recommendations made to enhance the effectiveness of wellness interventions in the public sector.

CHAPTER THREE

LITERATURE REVIEW ON EMPLOYEE WELLNESS PROGRAMME

3.1 Introduction

Employee Wellness Programme (EWP) has become one of the strategic requirements in both the private and public sectors globally, especially as organisations strive to maintain a high level of productivity, reduce absenteeism and enhance employee morale in these rising workplace stressors (Matjabe & Civico, 2013; Backer, Cutler & Song, 2010). In the South African public sector, EWPs are placed within broader policy frameworks that aim to create safe, supportive and productive working environments. These programmes are designed to support employees holistically, addressing not only physical and mental health needs but also psychosocial and occupational challenges that may affect performance (DPSA, 2019; Grobler, Wörnich, Carrell, Elbert, & Hatfield, 2011).

This chapter reviews the progress, legislative underpinnings, and international perspectives on EWPs, providing a global and local context for their implementation and impact. It further explores how these programmes are conceptualised and implemented within the South African public sector, with a focus on their strategic relevance, benefits and challenges. Attention is given to how EWPs influence organisational outcomes such as absenteeism, service delivery and employee engagement, which are critical in high-pressure environments like the Department of Home Affairs.

In the context of the Department of Home Affairs in the eThekweni District, EWPs are increasingly viewed as essential tools to address numerous workplace challenges, including staff burnout, high client volumes, and congestion in service delivery. As this literature review will display, the effectiveness of these programmes depends not only on their design but also on leadership support, employee participation, resource availability and continuous monitoring and evaluation. Understanding this aspect is crucial for assessing whether current wellness interventions are capable of meeting the complex needs of DHA employees and enhancing operational performance in one of the busiest metropolitan areas of KwaZulu-Natal.

3.2 History of Employee Wellness/ Employee Assistance Programme

Rain (2012). Occupational Alcoholism Programmes (OAP) were formulated in the United States of America with the intention of providing support to all employees with drug/ alcohol abuse-related matters. Employee Occupational Programmes (EOPs) originated from OAP in 1940, when the number of programmes catering to alcohol abuse increased. The EOPs then shifted by adding services to assist employees with other personal problems that were work-related. They focused on performance that could be affected by such issues. Management, including supervisors, had a duty to monitor any behaviour that could have a negative impact on performance. In 1960, they introduced social workers to increase professionalism within the field. Then in 1970, the EOP expanded throughout the world; they even introduced counselling for other issues like relationship matters, financial issues, stress and depression, and drug and alcohol abuse (Bridge & Cooper, 1994; Roman & Blum, 1985). Due to the wide range of services offered by EOPs, employees began to accept them as they responded to the nature of their workplaces (Buon & Taylor, 2007).

According to Rajin (2012), the EOPs were introduced in South Africa during the year 1980. Private companies in South Africa initiated these services. EOPs were introduced in South Africa by social workers and psychologists through adaptation in the United States of America. According to Grobler et al. (2011), the public sector in South Africa was amongst the first to implement the EAP prior to the HIV/AIDS outbreak. In addition, to align their strategies with millennial goals set in the global arena, such factors would include eliminating substance abuse, addressing toxic workplace environments, and other external factors, which encompass family life, as well as the physical health and emotional well-being of employees. Growler et al. (2011) state that the increasing popularity of EAPs has led to a reduction in occupational ill health and absenteeism.

Newton, Heyday, and Bank (2005) define EAP as worksite programmes that intend to identify problems affecting individual employee performance. These types of interventions are put in place to enable conducive working conditions that facilitate a holistic approach, looking beyond employees to their families as well.

The need to transform the workplace environment often requires the introduction of different roles that employees are expected to play in increasing productivity, and setting a proper benchmark is important. It ensures that there are individuals competent enough to manage the programme by equipping Employee Assistance Programmes with essential components that represent what should be considered when measuring the effectiveness of a programme put in place (Bhoodram, 2010). Furthermore, the afore-mentioned author refers to a case study of the Department of Correctional Services to explain how it had to be demilitarised as a first step to create an EAP that is in line with the provisions set out to create a benchmark for the Department. Burke (2004:24) states that employers from around the world increasingly realise how EAPs contribute to the success of the business and the ability to address issues that affect human capital within the organisation.

Mtapuri (2014) also considered that another factor that could help increase awareness and, most importantly, utilisation would be for the workplace to develop strategies that market and make the programme more innovative. Furthermore, Kleyhans et al. (2006) emphasise the EAPs, which are designed to help employees with a wide range of problems aimed at increasing productivity. It also requires internal stakeholders, such as management, to assess employees' needs, especially where complex factors, such as literacy level, play a role in how they view the EAP, which may determine how often it is utilised, especially in intensive interventions like counselling.

Dipela (2016) provides an overview of how Employee Assistance programmes were designed to aid Human Resources in the workplace, as per the Employee Assistance Professional Association of South Africa (EAPASA). According to him, the concept of Employee Wellness Programmes examines ways to support employees who face professional or personal challenges within the workplace. This assistance requires the involvement of internal and external stakeholders, such as trade unions, which are intended to represent the needs and overall well-being of employees within the workplace. There have been certain instances where the Basic Conditions of Employees have not been adhered to, and the working relationship in

the public sector between employer and employee is often strained due to expectations that both parties have.

3.3 Legislative mandate that governs EWP

An Employee Wellness Programme cannot be formulated, defined or implemented without policy consideration to be utilised by employers and employees. One of the legislative frameworks that must be adhered to at the international level is the International Labour Organisation's Convention No. 155 of 1981, which addresses areas related to Occupational Health and Safety within the workplace. For work productivity to increase, a workplace must be proper, safe, and conducive, with fewer health and safety hazards that pose an imminent threat to employee well-being. Concerning physical health, psychological well-being may also be impacted by possible injuries in the workplace. The legislations discussed below highlight the necessity for specific policies that cover Occupational Health and Safety, as well as the Basic Employment Conditions that workplaces must adhere to in observance of the law.

3.3.1 Occupational Health and Safety Act 85 of 1993

The Occupational Health and Safety Act 85 of 1993 aims to ensure the health and safety of employees in a workplace and the safe utilisation of equipment. This act also protects employees from health and safety hazards in connection with workplace activities. Both the OHSA 85 of 1993 and Employee Wellness Programmes aim to promote, as well as protect, employee health, safety and well-being in the workplace. While OHSA establishes the legal framework for physical health and safety, the EWP provides practical and supportive measures to enhance physical and psychological well-being.

3.3.2 The Labour Relations Act 66 of 1995

The Labour Relations Act 66 of 1995 aimed to change the laws that were in use regarding labour relations. It also gives effect to section 27 of the Constitution, which allows for access to proper healthcare facilities. Sieberhagen et al. (2011), in the context of EHWP, state that Section 23 makes provision for fair labour practices, including the right to join or form a trade union. Meaning

that trade unions should be more proactive in increasing employee utilisation of programmes that are available to help them cope with personal matters and workplace stress. To help address the issue of fair labour practices, the work environment itself, as well as Section 24, makes provision for the workplace to implement a programme that is sustainable on a long-term basis.

3.3.3 The Constitution of the Republic of South Africa of 1996

The Constitution of the Republic of South Africa, adopted in 1996, is the supreme law of South Africa. Under sections 10, 11 and 24 of the Constitution, the views of an employee on wellness and safety within a workplace. Section 10 provides for respecting and protecting human dignity in a workplace. Sieberhagen et al. (2011) briefly highlight that the Constitution, as the law in general, is applicable for providing rise to specific policies. Section 11 protects employees' well-being by ensuring the prevention of anything that may harm or threaten their lives. Section 24 guarantees the right to an environment that is not harmful to employees' health and well-being

3.3.4 The Basic Conditions of Employment Act no 75 of 1997

The Basic Conditions of Employment Act, No. 75 of 1997, regulates general activities in the workplace and ensures that the workplace complies with all legislative requirements for fair working conditions and wage payment. It addresses matters such as ensuring that employees are given reasonable breaks or leave that will not affect their pay. It is easy to draw parallels between the afore-mentioned legislative framework and issues such as high absenteeism. The level of compliance determines the circumstances under which employees are likely to work, whether they are demotivated by the expectations set by the employer that must be fulfilled by employees who require adequate resources and reasonable remuneration to work effectively and efficiently (Venture & Levy, 2014).

3.3.5 Department of Public Service and Administration Employee Health and Wellness Framework

The Department of Public Service and Administration (DPSA) developed the Employee Health and Wellness Framework (EHWF) in 2008. This framework was created to provide a strategic approach to managing health and wellness issues in the public sector. The aim is to enhance

employees' productivity, improve service delivery and create a conducive workplace for public servants. According to the Department of Public Service and Administration (2008), employee wellness is a critical aspect that should be managed accordingly, addressing both physical and psychosocial needs.

3.3.6 The Compensation of Occupational Injuries and Diseases Act no 10 of 1996

The Compensation for Occupational Injuries and Diseases Act stipulates that workers who are injured or fall ill due to working conditions have the right to compensation and medical treatment (Republic of South Africa, 1996). This act applies to all employees and employers in the Republic of South Africa, excluding members of the South African National Defence Force (SANDF) and the South African Police Service.

3.4 Global Perspectives on Employee Wellness Programmes

EWPs are increasingly recognised worldwide for their role in reducing healthcare costs, improving employee health, and boosting workplace productivity. This section will introduce the key trends and practices internationally.

Workplace wellness programs significantly reduce medical costs and absenteeism, resulting in a return of more than three dollars for every dollar invested. These programmes are increasingly gaining attention worldwide due to increased healthcare costs and deteriorating health status among employees in recent years. According to a meta-analysis by Baicker, Cutler and Song (2010), such workplace wellness programs are yielding significant benefits in terms of both health improvement and overall returns on investment.

Effective wellness programs address various dimensions of health: physical, emotional, social, professional, and spiritual. It helps provide a comprehensive approach to health for sustainable well-being improvement and ensuring employee satisfaction.

3.4.1 United States of America

In the United States of America (US), employers have embraced wellness programmes due to rising healthcare costs, obesity rates and chronic diseases such as diabetes and hypertension. Many companies have incentives for health through rewards, “carrot” and penalty “, stick”

approaches. These programmes include gym memberships, health screenings, counselling, and initiatives encouraging smoking cessation (Mujtaba & Cavico, 2013).

Some companies, such as IBM and Safeway, offer discounts for healthy behaviours, while others, like Wal-Mart and CVS, impose payment on employees who smoke or do not meet the company's health benchmarks (Kwoh, 2013; Abelson, 2011). According to Mujtaba and Cavico (2013), these programmes often aim to reduce absenteeism and improve productivity, but also face legal scrutiny under laws like the Americans with Disabilities Act. The lack of a universally accepted definition of "wellness programme" poses challenges. Programmes must strike a balance between promoting health and protecting employee rights and privacy. Making wellness screenings mandatory results in early disease detection and lifestyle changes among employees (Mathews, 2009). Baptist Health South Florida utilises a reward system, including gym access and discounted meals, to encourage participation (Dorschner, 2011).

Creating a culture of wellness is essential in the United States. Leadership commitment, internal marketing, programme evaluation, and alignment with organisational values are critical for the long-term success of employees and employers (Mattke, Schnyer and Van Busum, 2012).

3.4.2 United Kingdom

The Employee Wellness Programmes in the United Kingdom (UK) have grown in both the private and public sectors. This growth is focusing on an increase in the cost of mental illness, workplace stress and chronic diseases that affect the workplace (Black, 2008). National Health Service (NHS) staff reported having higher levels of sickness and absence compared to other public sector employees. An average of 10.7 days per year was reported, which seriously affected workplace productivity and service delivery. Poor staff health and well-being have been found to negatively affect patient outcomes, employee performance, and organisational turnover (Boorman, 2009).

The report by Hassan, Austin, Celia, Disley, Hunt, Marjanovic, Shehabi, Villalba-Van-Dijk, and Van Stolk (2009), prepared for the Department of Health (DOH), provides a broader review of the state of employee health and wellbeing in the British workplace, with particular attention to the NHS. It examines the effectiveness of workplace interventions and the cost implications of poor health in the workplace. According to this report, workplace, health, and well-being

challenges in the UK, particularly within the NHS, result in significant economic and productivity costs; however, targeted interventions (EWP) show promise in improving outcomes.

The Boorman (2009) review highlighted that investing in employee wellness in the NHS is not only a moral imperative but also an economic and operational necessity. It positioned staff well-being as vital to delivering high-quality healthcare.

3.4.3 Canada

Wellness programmes can be economically viable and effective in the Canadian context, particularly when integrated into broader workplace health strategies (Jacobs, Yaquian, Burke, Rouse and Zaric, 2017). According to Passey, Brown, Hammerback, Harris, and Hannon (2018), managers' participation is a key factor in the success of wellness programmes. For wellness initiatives to succeed, organisations should train, equip and provide funding for managers to support health and promote well-being in the workplace. Canadian employers have increasingly adopted wellness initiatives aimed at preventing chronic diseases, especially cardiovascular disease. While many wellness programmes demonstrate positive health outcomes, their long-term sustainability and economic impact remain inconsistently evaluated (Després, Alméras & Gauvin, 2014).

Lowensteyn, Berberian, Belisle, DaCosta, Joseph and Grover (2018) conducted a one-year evaluation of a workplace wellness programme implemented in a large Canadian company to assess its impact on employee health risks and behaviours. Employees who participated in the programme showed a significant reduction in health risk factors such as stress, smoking, hypertension and inactive behaviour. This study indicates that even within one year, a well-structured workplace wellness programme can produce measurable and meaningful health benefits, potentially reducing long-term healthcare costs and enhancing employees' productivity.

A major challenge is expanding participation and engagement across all employee groups, particularly in diverse or lower-income populations (Després, Alméras and Gauvin, 2014).

3.4.4 Scandinavian Countries

Scandinavian countries, such as Sweden, Norway, Finland, and Denmark, are regarded as the most effective and progressive countries in EWP based on their holistic and government-

supported approaches. These programmes encompass the physical, mental, and social well-being of the core organisation and public policies (Eurofound, 2021). The study conducted by Jensen and Jensen (2020) demonstrates how Danish organisations incorporate employee participation and prevention strategies into their wellness programmes. These strategies integrate physical activities, mental health support, and improvement in organisational culture. This holistic model promotes sustainable employee well-being and reduces absenteeism, thereby positioning Denmark as a leader in workplace health within Scandinavia.

According to Trygstad, Andersen, and Lismoen (2011), Norway's Inclusive Working Life (IA) Agreement is a collaborative framework between the government, employers, and employees. The study prioritises this agreement's role in enhancing employee well-being through early follow-up, workplace adaptations and psychosocial support. This approach demonstrates how national policy and workplace practices can be effectively aligned to improve employees' health outcomes and reduce absenteeism.

3.5 Regional and National Context of Wellness Programmes in South Africa

Nationally, legislative policies, including the Public Service Regulations (2001, amended) and the Employee Health and Wellness Strategic Framework (DPSA, 2019), have driven the development of EWPs. The framework outlines the following four pillars:

1. Health and Productivity Management,
2. HIV/AIDS and TB Management,
3. Wellness Management and
4. SHERQ - Safety, Health, Environment, Risk and Quality.

These pillars are part of the programme design, resource allocation and monitoring mechanisms across departments.

At the regional level, efforts to formalise wellness in public sector institutions have emerged through policy dialogues within the Southern African Development Community (SADC), although

implementation remains unbalanced. Countries such as Namibia and Botswana have adopted national wellness policies for public servants to different extents of support (Govender, 2009).

South Africa is regarded as a developing country. In South Africa, the Department of Public Service and Administration (DPSA) introduced the Employee Health and Wellness Framework with the aim of reducing absenteeism and improving workplace productivity by addressing issues related to HIV/AIDS, mental health, and lifestyle-related concerns (DPSA, 2016). The notion of EWP is strongly influenced by global models such as the World Health Organization's (WHO) Healthy Workplace Framework (HWF) and the International Labour Organization's (ILO), which advocate for an integrated approach to physical, mental and social wellness in the workplace (WHO, 2010; ILO, 2016).

The statistics indicate that EWP, which focuses on physical health, stress management and work-life balance, had a positive outcome on employee performance (Grawitch, Gottschalk, & Munz, 2006). These programmes led to reduced absenteeism, increased job satisfaction, and improved morale, also contributing to high productivity (Mwaniki & Gathenya, 2015). Public-private partnerships and non-governmental organisations often support EWPs in developing countries due to inadequate private sector investment (Gantsho, 2008).

Developing countries face challenges such as insufficient funding, a lack of trained wellness practitioners, and low awareness of wellness benefits among both employees and employers. These challenges limited the scope and impact of wellness programmes (Mwaniki & Gathenya, 2015). Cultural barriers and stigma are another challenge in developing countries in addressing mental health and sexual health issues (Gantsho, 2008). According to Badul and Subban (2018), many departments implement wellness programmes solely for compliance purposes without being integrated into organisational goals and performance management systems. This results in activities, such as awareness campaigns, that lack effective monitoring and evaluation.

3.6 Employee Wellness in the Public Sector

This section highlights the challenges, benefits and strategic importance of Employee Wellness Programmes in government settings.

The budget in the public sector is often prioritised for core service delivery functions rather than other programmes, such as EWP. The budget constraint then remains a great challenge for initiatives like wellness programmes (Khumalo & Nkomo, 2020). Resistance to change in the public sector also poses a challenge for both employees and employers, as they regard these programmes as additional duties that create more workload (Naidoo, 2021). Rules and regulations create red tape that hinders the introduction and adoption of wellness programmes (Mahlangu, 2019). The roles and functions of the public sector often involve one-size-fits-all wellness programmes that overlook individual needs (Smith & Nkosi, 2018). Most employees hesitate to openly participate in wellness activities due to fear of being judged (Moyo et al., 2022).

EWP's form part of strategic developments of the public sector that support recruitment; this initiative faces a lack of talent required for that particular position and tends to have a high number of applicants (Mkhize & Zulu, 2020). EWP is effective in improving employees' health outcomes, reducing absenteeism and increasing productivity (Govender & Pillay, 2021). These programmes mostly have a higher level of job satisfaction and boost staff morale, which are crucial in public service environments (Dlamini, 2020).

3.7 Key elements of effective Employee Wellness Programmes

Employee Wellness Programmes are most effective when they are comprehensive and responsive to the real conditions under which employees work. In the public sector, particularly within resource-strained environments like the Department of Home Affairs (DHA), wellness cannot be addressed through isolated interventions. Rather, effective programmes must tackle structural and psychological challenges holistically. This section explores three essential elements that are widely recognised in literature as foundational to a successful employee wellness strategy: work-life balance, stress management, and mental health support.

3.7.1 Work-life balance

The concept of work-life balance involves a situation in which a person can devote sufficient time and energy to both their personal and professional duties without compromising either. In the public sector, this balance is often disrupted due to systemic inefficiencies, including resource shortages, excessive workload, and inflexible personnel scheduling, particularly in high-demand

services such as the DHA. According to Grobler and Joubert (2012), the "total person approach" emphasises the need for integrated support across all levels of the organisation, encompassing employees' psychological, family, social, and physical well-being.

While policies promoting work-life balance do exist within South Africa's public service framework, including the Employee Health and Wellness Strategic Framework (DPSA, 2019), evidence suggests that implementation remains inconsistent. Dipela (2016) reports that despite provisions for leave and flexible work arrangements, many public servants refrain from utilising them due to perceived organisational pressure and the fear of being viewed as unproductive. The Public Service Commission (2018) confirms this tendency by linking limited work-life balance with increased absenteeism and long-term burnout.

Attridge (2015) further argues that wellness strategies that focus solely on promoting individual behaviour, such as encouraging taking leave, without addressing structural issues like understaffing or unrealistic performance targets, are likely to yield limited success. Therefore, a genuinely effective wellness approach must include operational adjustments that enable employees to work efficiently while maintaining a healthy personal life.

3.7.2 Stress management

Stress levels are considerably elevated in the public sector due to ongoing exposure to high volumes of clients and demanding performance expectations. According to Harvey, Modini and Joyce (2017), continuous exposure to work-related stress without sufficient assistance can lead to a reduction in mental health and a rise in absenteeism rate. Makhanya (2021) suggests wellness strategies that focus on managing stress with individual employees who have minimal workplace challenges. Winwood and Beer (2008) suggest that proactive interventions, such as employee wellness workshops, counselling, and management support, can prevent and restore implemented programmes.

3.7.3 Mental Health

According to SADAG (2021), over 60% of South African public servants experiencing anxiety or depression avoid seeking support due to fear of stigma and lack of trust in employer-sponsored services. LaMontagne, Shaw, and Milanovic (2014) similarly report that effective mental health

interventions must involve leadership support, peer engagement and visible managerial advocacy in order to reduce stigma and normalise help-seeking behaviour.

3.8 Pillars of EAP in South Africa

According to the Employee Health and Wellness Strategic Framework for the Public Service of 2019, the South African government has four functional pillars. The Strategic Framework for Public Service (2019) seeks to take further steps in realising the objective of the 2008 document by prioritising areas such as HIV, TB, and STI Management; health and Productivity Management; Safety, Health, Environment, Risk, and quality management; and, lastly, wellness management. These pillars are divided into two categories: Occupational Health, which encompasses pillars one and two, and Quality of Work Life, which addresses pillars three and four. These pillars are in place to ensure that the vision for creating healthy and safe working conditions is implemented accordingly.

3.8.1 HIV, TB and STIs Management pillar

According to this framework, it assists employees through Employee Wellness by providing them with information about chronic diseases, such as HIV, TB, and STIs. This allows employees to prevent or take medication before they actually become physically unfit.

3.8.2 Health and Productivity Management

According to the Employee Health and Wellness Strategic Framework, the second pillar, Health and Productivity Management, is responsible for promoting mental health, providing health education, managing ill health, retirement, incapacity leaves, and non-communicable and communicable diseases.

3.8.3 SHERQ Management

According to the Employee Health and Wellness Strategic Framework of 2019, SHERQ Management is responsible for Quality Management, Risk Management, Environmental Management and Occupational Health and Safety Management.

3.8.4 Wellness Management

Wellness Management is most concerned about the psychological well-being of employees. It's essential to examine whether the relevant actors are proactive in encouraging the utilisation of these programmes, the extent to which employees are willing to utilise their resources to perform better in their duties as public servants, and, most importantly, to what degree public services are offered efficiently and effectively.

3.9 Services provided by Employee Wellness Programmes

Winwood and Beer (2008:190) acknowledge that the workplace has undergone drastic changes, and ensuring that employers adapt in such circumstances requires finding cost-effective solutions. This solution can be resourceful in alleviating the pressures that accompany these changes and in demonstrating the duty to provide care and support for employees or public servants experiencing difficulties within the workplace. Bhadul and Subban (2022) state that the South African workforce has presented supervisors with a challenge of devising strategic measures and viable solutions to accommodate the diversity among employees and potentially introduce a transformative programme to address these issues.

3.9.1 Counselling

Counselling is one of the services that are offered by EWP in South Africa within the workplace. According to Rajin (2012), counselling is a therapeutic process that can be conducted in the form of an interview. The Wellness Practitioner can offer these services to an employee or a family member of an employee. The WP can even refer the matter to a specialist if necessary. However, for this service to be a success, a permissive relationship between WP and the employee needs to develop. Dipela (2016) has found that there is a need to improve the operation and strategies used to implement the programme within the South African governance, especially where there is a demand for working hours and the scope of work requires employees to get assistance, such as counselling when handling sensitive cases and offer support to the dependents of the employee.

3.9.2 Alcohol dependency in a workplace

The traditional EAPs were primarily focused on alcoholism as the primary cause of high absenteeism; however, the widening of the EAP scope helped uncover the various problems that employees are often confronted with so which yields a positive effect of a productive and diverse environment that caters for the general populace segment appointed as public servants (Bophela & Govender, 2015).

In Yende (2005), utilising EAP in the workplace, the author specifically highlights the fact that, though substance abuse is an individual choice, the social environment also plays a role in the emotional well-being of an employee. Meaning that there is a likelihood of employed people acquiring substances such as alcohol and drugs, which affect their spending habits and can perpetuate unprofessionalism, such as not pitching for work. Others may be reporting to the workplace with high intake of alcohol. This highlights the importance of ensuring that the progress made by these programmes is properly monitored. With any identified gaps, recommendations can be made to ensure a better rollout, enabling proper service delivery. The factors that have negatively contributed to the effectiveness of the EHWP are absenteeism and substance abuse, which correlate with each other in explaining how substance abuse hinders the level of attendance and punctuality amongst employees (Ally, 2009).

3.9.3 Financial management

Financial management is a service that is offered by EWP. In Govender's (2009) SAPS case study, there are instances in which SAPS employees have borrowed money and failed to repay it as agreed. Therefore, this creates financial stress, which might lead to other issues such as relationship problems, poor performance, and even suicidal or alcohol abuse. The EWP is also there to assist in such instances.

3.9.4 Physical health workplace management programme

The Employee Wellness Programme (2008) examined ways to enhance the workplace environment. To fulfil this objective, policymakers recognised that ensuring efficient service delivery would require prioritising employees' physical health. By mainstreaming HIV/AIDS in the core mandate of Occupational Health and Safety, to ensure that they are protected from ill health

caused by disability and chronic illnesses such as Tuberculosis (TB) and the risk of contracting sexually transmitted diseases. These may stem from the organisation's failure to implement measures that prevent employees from engaging in conduct that results in them contracting these illnesses and taking multiple days off due to being unable to complete their work. It is within the duties of a Wellness Practitioner to offer this service.

3.9.5 Disability management programme

The disability management programme supports employees living with disabilities by offering assistance through monitoring performance, creating programmes that cater to everyone, facilitating building accessibility, educating other employees about disability, and forming a disability committee, among other initiatives (Govender, 2009).

3.9 6. Trauma management

According to Govender (2009), the Lephalale EWP practitioner offers services related to trauma management, including effective parenting, dealing with death, relationship programmes, stress management, ethical and unethical awareness, pre-retirement, suicidal prevention, and other programmes conducted through supporting functions for employees.

3.10 Role of supervisors in EWP

The introduction of the strategic frameworks, such as the Department of Service and Public Administration (2019), highlights the fact that Employee Health and Wellness Programs are important to put in place within an organisation to accelerate productivity and proper service delivery, which will result in being able to address the hindrance to proper service. This may include social issues such as substance abuse, which results in absenteeism that has a snowball effect of low productivity, unprofessionalism and poor service delivery. These factors have plagued the workplace due to a negative response from management in terms of implementing these programmes.

Lefakane (2017) suggests that, in measuring human capital, supervisors need to understand the workplace factors that drive employee engagement. Such as employees being actively involved in workplace initiatives, being at the forefront of decision-making and development. An effective

programme should provide a balance for employees' work duties and managing their personal life, which should overall produce the desirable outcomes of a high employee retention rate, optimised production and quality service delivery to the public community.

Govender (2009) states that there are three steps that supervisors can take to assist with EWP. The first step is to identify employees who are troublesome. The second step is to document the performance trend that could be affected by personal or work-related issues. The third step is to confront an employee accordingly through three interviews. If there is no change, then the referral process occurs through self-referral, where an employee acknowledges the problems and seeks assistance. In a matter where an employee does not acknowledge the problem, a supervisor can make a formal or management referral.

Therefore, it also goes further to prove that supervisors within the workplace play a vital role in ensuring that public services are provided efficiently and effectively by those employed as public servants in these institutions. Badul and Subban (2022) emphasise that supervisors must consider several critical aspects, including employee health conditions and professional development within the workplace. The manner in which supervisors identify performance-related issues is determined by whether measures such as an EHWP are effective enough in addressing issues faced by employees within the workplace and the scope of their performance.

3.11 Role of employees in EWP

Employee perception also plays a crucial role in helping to address the gaps that exist between employers and employees. Employee participation is crucial because workplace policies directly affect them. Maletzky (2017), in his abstract on Employee participation in workplace wellness programmes in the Namibian public service, does not hesitate to point out that there could be either motivational factors or barriers that influence the effectiveness of the workplace if there is no participation or gaps between employees and employers. Myende (2005), utilising EWP in the workplace, further states that the EWP can be used to accelerate business activities by ensuring that a conducive workplace is created, with the purpose of developing its staff members with the purpose of maintaining a high retention rate that will help curb absenteeism as a behaviour which plagues most public service institutions.

Employees, also known as human capital, are the biggest asset in the workplace. They play an important role in the improvement of services rendered by an organisation, and it is often the responsibility of the employer to understand the various challenges faced by employees in order to take appropriate measures concerning their well-being. However, to help devise efficient and effective strategies, employees must participate voluntarily.

3.12 Principles of EWPs

Employee Wellness Practitioners, as cited by Bhoddram (2010) and Masi (2003), must provide workers with written material outlining the EAP's confidentiality policy and have them sign a declaration attesting to their comprehension of confidentiality, rights, and restrictions. Employees will feel more at ease and be able to share more information with the practitioner if confidentiality is assured to them. Emener and Hutchison (2003) recommend that, to ensure professional conduct and offer consumer protection, Employee Wellness Practitioners should adhere to the code of ethics established by their professional associations and the proper licensing and certifying agencies. Access should be restricted and monitored, files should be protected, and identifying information should be kept to a minimum. To safeguard the data, a system of record-keeping should be developed.

According to Grobler and Joubert (2012), the total person principle is one that follows a more holistic approach, integrating interventions necessary when dealing with workplace issues involving the employee in question. SAPS (2009), as cited in the case study, an author looked at these interventions as an aim to enhance the total well-being of the employee by looking at four broad spheres that look at interventions available in the workplace, which are listed as follows: organisational, interpersonal, health and wellness, as well as intrapersonal interventions. Therefore, these kinds of interventions examine the factors that managers must consider when addressing employee-related matters.

A key component of any EAP is to recognise that when personal concerns affect an individual's work performance, counselling is usually the first step in tackling the problem once it is identified. However, due to trust issues and concerns about workplace secrecy or confidentiality, it is often

difficult to facilitate EAP counselling, as most employees do not utilise it. Bhoodran (2010) conducted data on ongoing consultation with Employee Assistance professionals. His findings were as follows: Eighty-five respondents (61.6%) stated that the DCS did not offer continuing consultation to EAP specialists, while 18 respondents (13.0%) did not respond to this question. Craig (1997) addresses in-house standards for EAP in SA and their development. According to her, there is an increasing need for efficient operations, and the capacity of professional counselling is advantageous to a company both financially and professionally. Craig further explains that the primary objective of clinical supervision is to develop and enhance counselling skills, plan professional practice, facilitate prioritisation of attention, and ensure ethical accountability in the profession's practice. Therefore, counselling often becomes a way to measure the effectiveness of a programme because it is easier to gather employee views, understand what is expected from employers, and easily bridge those gaps.

Management often implements strategies to increase productivity, which differ depending on the type of situation the organisation encounters. Hence, whether it warrants reactive and proactive strategies depends on the nature of the issue identified by either the supervisor or personnel responsible for establishing communication between the employer and employee. These points highlight the importance of stakeholders, such as trade unions, in the workplace in helping to find ways that will move the business forward, while also not overlooking the need to address employee-related matters.

Badul and Subban (2022) emphasise that supervisors must consider several critical aspects, including health conditions and professional development within the workplace. How supervisors identify performance-related issues is determined by whether measures such as an Employee Health and Wellness Programme are effective enough in addressing the issues faced by employees within the workplace and within the scope of their performance.

Reactive interventions are designed to provide individuals experiencing personal difficulties with the tools they need to address their problems in a healthy manner. The processing and healing of past and present trauma or suffering can be aided by these treatments, which can take the

form of therapy and counselling. When an EWP expert is required at the site of a big incident, a suicide or attempted suicide, a sudden maladjustment in the workplace, a conflict scenario, or a death, crisis interventions are used. The EAS professional tries to methodically handle these already-occurring crises (Growler & J'ouvert, 2012).

Proactive interventions are the main goal of the EWP. They are designed to strengthen people's capacity for dealing with obstacles, which will ultimately lead to an enhancement in their ability to overcome them, ultimately improving their quality of life. Numerous therapies that promote resilience centre on the ability to adapt successfully in the face of adversity, trauma, tragedy, danger, or even significant sources of stress, such as issues with family and relationships, serious health problems, or difficulties at work and at home. The spiritual and value-driven programs offered by EWP are designed to instil ideals in staff members so they may do moral policing. These interventions aim to raise awareness and foster a sense of group engagement in the fight against corruption by rigorously applying ethical standards (Grobler & Joubert, 2012).

3.13 Models of EAP

In the Development of a model for an EAP for a fast-moving consumer goods organisation, the author describes employees as being at the centre of the choices they make and form the basis for the extent to which these choices affect their work performance (Bessinger, 2006). The modern workplace is a constantly evolving environment in response to shifts in national and international economies, as well as social and political conditions (Cunningham, 1994). EAP must be dynamic and individually tailored to meet the needs of the modern work organisation that it serves. There is more than one EAP model that can be used in all organisations because they are all different and have different interests. As a result, there has been significant discussion over the most complete model that can be used by the majority of businesses. This model is composed of a mixture of popular models. We will discuss the in-house model, out-of-house model, consortium model and affiliate model that can be utilised in the workplace.

3.13.1 The in-house model of EAP is one in which a facility administers both diagnostic and therapy. In this type of strategy, the employer maintains a full-service facility and hires EA

practitioners on a full-time basis (Rajin, 2012). Additionally, the internal architecture fosters connections with other divisions of the company, which contributes to the development of a distinctive strength for the EAP. In comparison to an external provider, internal EAPs are better positioned to provide high-quality organisational services and may be more integrated within the company. While focusing on its essential elements, the internal EAP also facilitates more effective management of EAP specialists. This model's drawback might be that other employees could be unwilling to utilise it due to personal reasons.

3.13.2 Out-of-house model: This model entails the use of an external service provider or contractor where the workplace finds it costly to hire an in-house professional to oversee the implementation of an employee assistance programme. Hence, some organisations often hold health awareness and periodical campaigns in a bid to offer assistance from stakeholders. Usually, this type of model is positively received in an environment where trust has been established for receiving counselling, as some employees are more comfortable being counselled by a third party compared to someone they know (Rajin, 2012). The Department of Home Affairs has also appointed service providers to offer these services; the KwaZulu-Natal province utilises services from the ICAS company (DHA, 2023).

3.13.3 Consortium model

According to Csiernik (2003), several institutions pool all of their resources to create an EAP in the consortium model. Smaller colleges frequently use this type of model. These organisations frequently collaborate to create a consortium that will offer employee support services to its staff. In this paradigm, employers who are EAP consortium members establish EAPs. The institutions' staff members split the cost of providing such services. The benefit of this strategy is that it enables small institutions to fund employee support programs that they would otherwise be unable to afford, making it a cost-effective approach. This model's drawback might be that some employees feel left out if they do not make any material contributions to it.

3.13.4 The affiliate model, also known as a union-based model, uses co-workers to provide EAP services. Labour unions, employee organisations, or joint labour management groups frequently operate it. Depending on the programme's design, the degree of training and

supervision, and their availability. Co-workers are taught how to offer a variety of support forms. Peers are trusted by their coworkers to provide effective outreach, referral, and follow-up support services (Csiernik, 2003). The advantage of this approach is that employees may feel free to consult without fear of persecution, as they often assume that unions will protect them. However, this approach also has a drawback: it may be linked to a specific set of employees, thereby causing division within the workplace.

3.14 Evaluation of EAP

A report released by the Public Services Commission in 2006 concluded that, upon evaluating Employee Wellness Programmes in the public service, various issues affecting employees needed to be addressed. Among these issues, there's substance abuse and dependency, adaptation problems in the public service workplace, mental, physical and personal relationship problems, health conditions, financial issues and providing counselling (PSC 2006: xii). A lack of training among wellness practitioners in the workplace can create a challenge. There are two factors that determine the effectiveness of the EAP: the utilisation of the programme and the level of awareness in the workplace about EAP or EWPs (Dipela, 2016).

Subsequently, every significant programme has to be monitored and evaluated; therefore, this research focuses on the impact evaluation of wellness programmes in combating absenteeism, enhancing performance, and other related aspects in KwaZulu-Natal, specifically within the Department of Home Affairs. Absenteeism and lack of employee performance in most government departments are another pandemic that has an adverse effect on service delivery.

3.15 Reason for evaluation

It is essential to note that public service institutions are under constant pressure to perform and deliver effective and efficient services to the public, which, in the research case study, includes the mandate to offer civic and immigration services to the general population. Attridge (2015:7), in "Absenteeism in the Workplace: A Review of the Public Sector," advocates for an approach that can help reduce high absenteeism within the public sector. Hence, this includes a greater need for more dedicated and proactive programmes that will deal with absenteeism and underlying factors that may cause a decline in performance. Instead of taking punitive measures

that will be ineffective in addressing the high absenteeism plaguing the public service institution, such as Policing, and in this case study, the Department of Home Affairs within a selected District-level. Therefore, it is also important to review how much information is available to employees and whether they understand the purpose it serves for them. In attempting to do this, we need to ensure that management buys into the programme and finds a way to coordinate it. We also need to ensure that management finds a way to coordinate programmes that will help avoid a breaking point within public systems. They also need to address matters concerning the dissatisfaction caused by the frustration faced by employees tasked with clearing backlogs in an understaffed and inadequately resourced work environment.

De Winnaar and Tate (2008:265), “in *the role of supervisors in the South African Police Service in the successful utilisation of the Employee Assistance Programme*”. The authors note that while the Department of Public Service and Administration introduced a strategic framework that covers workplace interventions, such as the Employee Wellness Programme, failing to implement it amounts to policy-making being ineffective. Occupational ill health remains the root cause of a high absenteeism rate, which affects work performance. Supervisors need to identify such cases and take proactive steps in addressing these matters. This study aims to determine the need for both employees and employers to become active participants in EWP to prevent such problems.

When evaluating the effectiveness of any EWP, it is necessary to consider whether there is sufficient infrastructure in place to create a conducive workplace. In cases where a lack of resources is cited, demotivation is an inevitable consequence. It decreases the culture of seeking to learn new skills in the workplace, for example, the ICT modernisation of services that includes online bookings, where some employees are unable to adapt to the utilisation of the improved installed system, which can make their work easier and more efficient. Technical errors and continuous load reduction appear to be among the reasons for the slowdown in productivity. The Medium-Term Strategic Framework need to have a clear indication of how these challenges that affect productivity can be resolved. In ensuring that tasks in DHA, which involve securing identity and providing intervention, especially in the case of uMgungundlovu.

3.16 Types of evaluations

The evaluation of Employee Assistance Programmes (EAPs) requires a multidimensional approach to determine their necessity, effectiveness, equity, and overall utility. Evaluation tools not only measure outcomes but also guide decision-making and programme improvement. According to De Vos et al. (2011), effective programme evaluation can take various forms, each offering unique insights into different aspects of service delivery. The following subsections discuss the most common types of evaluations relevant to EAPs and wellness programmes in the public sector.

3.16.1 Service needs assessment

As defined by Monette (2008) as quoted in De Vos et al. (2011), Service needs assessment is the process of gathering information to ascertain how many individuals in a certain community (geographic or otherwise) require a specific service and evaluating what level of demand these resources or services at the necessary level already exist to meet the requirements. The goal of a needs assessment is to determine, using impartial criteria, whether a program being evaluated is indeed necessary or whether an existing program is still required.

The current programme's future decisions may benefit from the impartiality that the needs assessment may bring. Needs evaluations of current programmes are more likely to take place when modifications to the programme's initial design or planning affect the need or its efficacy, according to Weinbach (2005), as referenced in De Vos et al. (2011). Identifying the prospective workforce in need of various EAP services is one of the main goals of service needs assessment. In needs assessment studies, there are four main parts: determining the gravity or relevance of the employees' problems, defining specific issues and service requirements, determining service gaps in the workplace, and developing or modifying solutions. Some service requirements assessments can be carried out based on a company-wide analysis of the entire employee population, on assessments of supervisory and administrative staff, or on key incidents, such as workplace accidents, absenteeism, and employees on last-chance letters. The critical events evaluation may help identify major personal issues that could be contributing to significant business expenditures.

3.16.2 Benefit equity

Benefit equity assesses whether service benefits are distributed equally across demographic groups in the population. This is the primary question to consider when evaluating a programme's equity. In this scenario, elements including demographic characteristics such as gender, age, and race, as well as personal issues among EAP service users and non-users who can benefit from EAP treatments, are discussed. The fundamental presumption is that variations in client recruitment, retention, and treatment outcomes should not be primarily predicted by an individual's demographic characteristics (Yamatani, 1993).

3.16.3 Client satisfaction

Client satisfaction is evaluated based on the customer's perceptions of their level of satisfaction with EAP services. The clients' attitudes, contentment, and discontent with the program's aims and objectives, appropriateness, efficacy, and their level of interest, may be gauged through surveys. Customers' comments about the sufficiency and quality of the services they received, as well as their suggestions for programme development, are sought during the assessment process. The client's comments on the program's general strengths and/or weaknesses, any areas in need of adjustment, and changes. Thus, when the EAP identifies the root causes of client unhappiness and adjusts its operations accordingly, client satisfaction evaluation is more beneficial for programme changes (Yamatani 1993 and Ligon).

3.16.4 External resource assessments

In instances where an EAP uses community-based private counsellors, they must ensure that these are qualified professionals who will not compromise the standard of the EAP's initial goals and objectives. External resource assessments should be based on the program's standard that should have been generated by the EAP initially (Yamatani, 1993).

3.16.5 Programme adequacy assessment

“The programme adequacy assessment examines the appropriateness of the EAP services, their availability and usage, as well as penetration rates.” (Dipela, 2016:43). Furthermore, this type of evaluation involves looking at multi-faceted approach to determine the importance of

necessity of an Employee Assistance Programme meant to provide support services to human capital, which is in the form of employees in the workplace. Therefore, to measure such it is crucial to question whether management has done enough to deal with the issue and if there are sufficient sources to ensure that there are proper interventions taking place (Dipole, 2016).

3.16.5 Programme monitoring

“Programme monitoring is an on-going activity, and responses to this assessment allows problems to be addressed as they are identified. Actions related to this can ensure that a successful programme is maintained, timely modifications made, or unworkable or unsuccessful programme scrapped” (Dipela, 2016:46). Therefore, as a way to evaluate the work done monitoring the progress of a programme whilst in implementation helps identify loopholes within the programme and know whether to do with the issue in a reactive or proactive manner.

3.16.6 Outcome or Impact evaluation

Communication of best practices to those participating in a comparable invention is made possible through **outcome or impact evaluation**. The phrase "impact evaluation" refers to the process of determining a program's immediate effects as opposed to its long-term effects. Impact or outcome evaluation is the process of identifying the good or negative, intentional or unexpected, short-term or long-term results of the program, according to De Vos et al. (2010).

3.16.7 Programme utilisation evaluation

Programme utilisation evaluation, according to Ligon and Yegidis (in Emener, Hutchison, and Richard, 2003), provides programmes with information on who uses what services and how much. According to these authors, the rate of EAP usage has been observed to increase with the addition of employees, outreach initiatives, and an off-site location. The usage evaluation of an EAP helps identify whether the program's target audience has been reached and whether various EAP components are being utilised to their full potential.

3.17 Methods of evaluation

At the conclusion of an operating cycle, programmes are evaluated, and the results are often used to determine if a program should be adopted, continued, or improved.

3.17.1 Summative evaluation

Summative evaluations and assessments help determine the impact, results, or value of the program. Summative assessments concentrate on assessing goal and target accomplishment, or determining if the programme "works" or is efficient. The evaluator may also want to decide during summative review whether a planned program should ever be started. The available funds can be utilised in a timely manner in areas where a need does exist, provided the results of the needs assessments indicate that there is no interest in or need for anything. Summative assessment aids in deciding whether the programme should continue or not (De Vos et al, 2010).

3.17.2 Formative evaluation

In contrast to process evaluation, which aims to improve a programme, Fouché (2011) defines formative evaluation as the actions taken to ensure that a programme is well-designed. **Formative evaluation** provides information on the programme's activities, and it is intended to determine whether the programme is meeting the needs. It provides feedback on the effectiveness of a program or set of treatments and the extent to which desired outcomes are being achieved. This input enables early detection of delivery issues and ensuing improvement. Programme improvement is the goal of formative evaluation. The creation and/or early implementation of the programme may be evaluated through formative evaluations, and this information can be used to determine how the programme could be improved or updated. This approach helped the researchers understand what program accomplishments and obstacles employees perceived, as well as how the program could be improved.

3.18 Impact of EWPs on organisational performance

Employee wellness programmes have increasingly been recognised as a critical factor influencing various dimensions of organisational performance. In pursuit of healthy, engaged employees, EWPs enhance attendance, productivity, morale, and, consequently, service delivery, particularly crucial in public sector institutions such as the Department of Home Affairs.

3.18.1 Absenteeism

EWPs are shown to reduce absenteeism by addressing underlying health problems, improving mental well-being, and promoting healthier lifestyles. According to Goetzel et al. (2014), wellness programmes can reduce absenteeism by approximately 25%, largely through the prevention and management of chronic illnesses and stress-related conditions. This reduction contributes to significant cost savings and operational continuity.

3.18.2 Productivity

Healthy employees are more productive. As reported by Berry, Mirabito and Baun (2010), wellness programmes enhance productivity by increasing employees' energy, focus, and engagement. The RAND Corporation (2013) found that employers experienced a return of \$1.50 to \$3.00 for every dollar spent on wellness programmes due to gains in productivity and reduced health-related expenses.

3.18.3 Staff morale

Wellness initiatives foster a positive organisational culture, improving employee morale and job satisfaction. Kuoppala, Lamminpää, Liira, and Vainio (2008) concluded that workplace health promotion has a positive influence on job satisfaction and organisational commitment, reducing turnover intentions and enhancing team cohesion.

3.18.4 Service delivery

Enhanced employee wellness in the public sector leads to improved service delivery. Healthier, motivated workers perform their jobs more effectively, and the quality and responsiveness of service improve accordingly. This has broader implications for citizen trust and institutional legitimacy.

3.19 Challenges to Implementation and Participation in EWPs

Despite the recognised benefits of Employee Wellness Programmes, various challenges hinder their effective implementation and employee participation, particularly in public sector organisations such as the Department of Home Affairs.

3.19.1 Funding

Adequate funding is critical for the sustainability and comprehensiveness of EWPs. Public sector organisations often operate under budgetary pressures that limit investment in wellness

initiatives, resulting in constrained programme scope and insufficient resources for effective delivery (Aldana, 2001; Goetzel & Ozminkowski, 2008). Inadequate funding may lead to compromised quality, limited access to wellness services, and reduced employee engagement.

3.19.2 Barriers in uptake

Various factors, such as a lack of awareness, time constraints, and perceptions of programme relevance, generally impede employee participation. Makhanya (2021) further points out hindrances in a KwaZulu-Natal municipality, such as fear of being judged and a lack of assurance regarding confidentiality, which lead employees not to utilise the wellness services available to them. In addition, a high workload and a lack of schedule flexibility further contribute to low uptake (Mattke et al., 2013), underscoring the need for programmes that are well-tailored to be accessible.

3.19.3 Leadership support

Leadership commitment is a key determinant of EWP success. Visible endorsement and active involvement by senior management create a supportive environment that encourages participation (Goetzel et al., 2014; Diaz-Serrano & Cabasés, 2014). Makhanya (2021) further illustrates those line managers, who act as direct supervisors, significantly influence employee engagement with wellness programmes. However, operational priorities frequently conflict, and managerial training in support of EWPs is often lacking. Stigma remains a basic impediment to participation in mental health and wellness.

3.19.4 Stigma

Stigma about mental health and wellness participation still prevails everywhere. Employees may fear discrimination or negative career consequences if they seek help, particularly in organisational cultures where discussing personal health is taboo (Corrigan, 2004; Henderson et al., 2013). The KwaZulu-Natal case study by Makhanya (2021) reveals cultural beliefs and mistrust of wellness officers as additional challenges related to stigma. Overcoming stigma requires intentional efforts to foster confidentiality, normalise wellness engagement, and educate both employees and management.

3.20 Case study of DHA eThekwini District

This case study explores some of the dynamics that significantly influence the DHA in eThekwini: the mismatch between rapid growth and employee resources; a gap between employer and employee expectations; continuing fraud and corruption threats; and demographic stressors affecting EWP. Furthermore, it probes the state of wellness practices within the DHA, the pervasive issue of absenteeism, and how these factors collectively drive service delivery outcomes.

Understanding such interlinked challenges provides valuable insight into the critical need for strong leadership, sufficient resources, and strategically aligned wellness programs to support DHA employees. Such programmes are important for maintaining staff well-being, enhancing the department's performance and ensuring effective service delivery in a demanding public sector environment.

3.20.1 Human capital versus number of employees versus population growth

The KwaZulu-Natal Province is one of the provinces within South Africa and serves as the province's primary economic and administrative centre. According to the eThekwini Integrated Development Plan (IDP) 2024/2025, the district has a total population of approximately 3,702,231, making it the most populated district in KwaZulu-Natal. Covering a geographic area of 2,556 square kilometres, eThekwini is a single-tier metropolitan municipality, meaning it is not divided into smaller local municipalities like other district municipalities in the province. This municipality has a total of 111 wards. The demographic composition of eThekwini is diverse, with the Black African population comprising 73.8%, followed by Indian/Asian residents at 16.7%, White residents at 6.6%, and Coloured residents at 2.5% (eThekwini Municipality, 2024).

The DHA is an essential government agency that provides civil services not available from any other entity, whether private or public. Concerning this, the DHA does not target a specific market for its operations but strives to serve all the citizens and residents of South Africa. According to the Department of Home Affairs' 2023 report, KwaZulu-Natal Province has 144 offices of the DHA, with 13 of them located within the eThekwini District.

In eThekweni, the Department of Home Affairs operates with one large office on Umngeni Road, as well as six medium-sized offices in Chatsworth, Pinetown, Pavilion Mall, Commercial, Prospecton, and Tongaat. There are also several smaller service points in areas such as Umlazi and Hammersdale. DHA in eThekweni has three branches in banks, namely Kingsmead, Nedbank (Durban North), and Cornubia Bank. Large offices typically offer comprehensive services, including ID applications, passport processing, birth and death registration, and immigration services, with a staff of 50 or more. Medium-sized offices offer comprehensive services with a workforce of around 10 to 20 staff members, while service points and banks typically provide limited services with 2 to 4 staff members, often located in high-demand community areas (Department of Home Affairs, 2023).

The comparison between the population size of the eThekweni District and the number of DHA employees servicing the area is imbalanced. eThekweni, the most populous district in KwaZulu-Natal, with over 3.7 million residents, places pressure on a few DHA employees serving the area, which adds to the already stressful work environment and underscores the dire need for EHWP to support staff (eThekweni Municipality, 2024).

According to Becker (1993), the concept of human capital refers to the knowledge, skills, and experiences that an individual should have in the workplace as central to effective service delivery. However, in eThekweni, this capital appears overstretched, as the number of employees fails to keep pace with the high population growth, internal migration, and the increasing demand for civil registration, immigration services, and documentation. Stats SA, 2022.

This imbalance undermines not only employee well-being but also organisational performance, and it requires interventions such as capacity building, improved Employee Wellness Programmes (EWPs) and strategic workplace planning. As the population grows, aligning human capital with service needs is critical to sustaining public confidence and achieving operational efficiency (Maletzky, 2017). Therefore, a comparative, multi-case approach helps illustrate the importance of holistic, extraordinary wellness strategies.

3.20.2 Gaps between employer and employee expectations

Gaps exist between DHA employees' expectations and the support provided by the DHA, particularly in high-demand areas such as the eThekweni Metro. Employees expect development

opportunities, such as promotions, a fair workload, conducive working conditions, and management/ wellness support. Nevertheless, due to limited resources and high pressure on services, such expectations are often not met (PSC, 2010). As a result, the research indicates that employees become frustrated and lack morale or interest in their work (Maletzky, 2017). At the same time, the DHA, as the employer, may perceive that providing minimum staffing, infrastructure, and an Employee and Wellness Programme is sufficient, creating a disconnection between policy intention and lived experience (Bessinger, 2006).

According to a study conducted by Biyase (2014), a disconnect between DHA's national strategy and provincial execution led to continued service bottlenecks and employee dissatisfaction. Biyase argues that for successful transformation to occur, DHA must adopt inclusive leadership, enhance internal communication, and invest in human capital development to foster a culture of accountability and responsiveness.

This misalignment often leads to low staff morale, poor service delivery and high absenteeism. Closing this gap requires inclusive management practices, ongoing communication, and a re-examined focus on aligning employees' needs with departmental goals through the effective implementation of EWP, the Performance Management and Development System (PMDS), and human resource development strategies.

3.20.3 Fraud and corruption in the Department of Home Affairs

The Department, through the DHA Annual Report 2023/2024, has indicated that it continues to entrench its fraud prevention and anti-corruption framework. It outlines the Fraud Prevention Plan, which is updated annually during the Fraud and Corruption Risk Assessment, with the aim of gaining insight into departmental vulnerabilities and mitigating them (Department of Home Affairs, 2024). According to the report, the CCSS ensures that an internal investigative capacity is maintained to fully investigate incidents of fraud, theft, corruption, and abuse of official documents (Department of Home Affairs 2024).

Additionally, the DHA describes established procedures for disciplinary action, criminal referrals to the SAPS, and mechanisms for asset recovery. The Department also emphasises the continuous review of internal controls and capacity building to entrench anti-fraud infrastructure.

The DHA has in place a solid Fraud and Corruption Prevention Strategy based on four cornerstones: prevention, detection, investigation, and resolution. These, respectively, reflect a comprehensive, risk-based approach to safeguarding public trust in the department's operations.

- ✧ Prevention: to educate officials in anti-fraud and ethical conduct within the workplace.
- ✧ Detection: An Internal review process that identifies loopholes leading to corruption.
- ✧ Investigation: Handling cases with swift disciplinary procedures and, when necessary, referrals for criminal prosecution.
- ✧ Resolution: This involves supporting legal processes through court-based interventions and pursuing the recovery of assets.

In the 2023-24 cycle, the DHA, together with the Hawks, SIU, and BMA, dismissed 33 staff members for fraud and corruption offences since July 2024. Of these, 19 are under criminal prosecution, while eight have been sentenced to prison terms ranging from four to eighteen years (Department of Home Affairs, 2024).

The Parliament's Portfolio Committee (PPC) further expressed that DHA carried out 476 lifestyle audits to detect financial irregularities, as also mentioned in the report that the Counter-Corruption Unit was operating at only 28% of its approved capacity, calling for expanded recruitment to support investigative demands (Portfolio Committee on Home Affairs, 2025). These developments represent a significant increase compared with the 2021-22 period. In contrast to the 28 arrests at Krugersdorp and Lebombo, the dismissals and convictions in the current wave demonstrate the DHA's strategic shift from ad hoc reactions to a systematic clean-up, supported by enforcement, deeper inter-agency cooperation, and stronger internal controls.

The Government Communication and Information System report that was released on 02 October 2023 indicated that the former Minister of DHA (Dr. Aaron Motsoaledi welcomed two Pakistani nationals and two officials from the DHA. There were also cases involving approximately 18 DHA officials who were dismissed for fraud and corruption; these officials formed a network that spanned Gauteng, Limpopo, KwaZulu-Natal, the Eastern Cape, Western Cape, and Mpumalanga. They have been working together in selling passports. The alliance of DHA officials has also been reported, whereby officials from the Eastern Cape reportedly travelled approximately 650km every day to open the DHA office after hours on Durban

Commercial Road for the purpose of fraud and corruption. According to this report, Anda Ngozi and Nomathandazo Mboyane were sentenced to 26 and 24 years in prison. These officials were paid R3000.00- R5000.00 for each passport. While SA citizens who sold their identity were paid R500.00 by the foreigners.

Aaron O'Neill (2023). Unemployment rate in SA 2021. The author presents a quantitative analysis of how a 4.4% increase in unemployment led to a peak rate of 28.77%, which suggests that job scarcity contributes to fraud and corruption. The SA citizen sold their identity for only R500.00; this shows that the poverty is on another level in South Africa. This also highlights that DHA officials might have financial issues. The utilisation of EWP in such cases is highly required to prevent being faced with 24 years in jail.

Corruption is also one of the issues negatively affecting the workplace. The effectiveness of an EWP is determined by the roles that both the employer and employee should play in participating in the implementation of these programmes. This involves a project-based approach where service delivery providers can be trained efficiently to address issues concerning both the workplace and the external environment (Percy, 2016). Financial maladministration, often linked to fraud and corruption, results in funds budgeted for operational costs being diverted to personal gains, leading to a lack of accountability and transparency in how money is spent within government spheres, as noted by Mbandlwa (2015).

Regarding the issue of corruption and unethical practices in public sector institutions, Mbandlwa (2021) briefly examines ethical leadership as one of the necessary skills that supervisors should demonstrate and encourage to achieve effective and efficient service delivery.

3.20.4 Challenges and demographic stressors affecting Employee Wellness Programmes

The Department of Home Affairs in the eThekweni District operates under high pressure, due to both demographic and institutional factors. One of the fundamental issues is the disproportionate ratio of employees to population size, which increases individual workloads and leads to chronic stress among line staff. As indicated earlier, the population of eThekweni has exceeded 3.7 million, with only 13 DHA offices of varying capacities expected to cater to the population's needs (eThekweni Municipality, 2024; DHA, 2023). This situation results in long queues, service delays,

and employee burnout—factors that necessitate the urgent reinforcement of Employee Wellness Programmes (EWPs).

Demographic stressors that introduce another layer of complexity:

- ✧ Rapid population growth (including urbanisation and internal migration)
- ✧ High unemployment and poverty levels, which increase the demand for identity documents and social grant registrations
- ✧ Diverse linguistic and cultural demographics, requiring multilingual and culturally sensitive services

According to Stats SA (2022), the continued increase in migrants from rural to urban areas within KwaZulu-Natal has led to an increase in administrative demand on immigration and civil services departments, such as the DHA. These pressures can impact employee mental health, emotional exhaustion, and job satisfaction, particularly in offices with limited resources.

3.20.5 Current wellness practices in DHA

The DHA has adopted the Employee Wellness Programmes under the framework provided by the Department of Public Service and Administration (DPSA). The EWP is designed to address physical, mental, emotional, and social wellness in the workplace through health screenings and awareness campaigns, psychosocial support services (e.g., counselling and trauma debriefing), occupational health services, HIV/AIDS management, and support for employees with chronic illnesses.

Despite these initiatives, implementation gaps remain. Some of the issues, as identified by DPSA in 2019, are an inadequate number of wellness personnel, low participation rates, and poor communication regarding available services. Wellness services, in most instances, are merely reactive, and outreach is often limited to isolated wellness days without follow-through.

Maletzky (2017) and Biyase (2014) point out that although the policy framework for employee wellness is in place, the DHA lacks an operational capacity and strategic alignment needed to make wellness programmes truly effective. Furthermore, managers are often not trained or

motivated to promote a culture of wellness and wellness services are not adequately integrated into performance management or Human Resource Development strategies.

3.20.6 Absenteeism and service delivery

One of the standing challenges in the South African public sector is absenteeism, as well as a lack of or poor service delivery. The Department of Home Affairs is among those government departments with a high number of clients who require services. According to eThekweni Municipality (2024), the eThekweni District is one of the busiest urban areas in KwaZulu-Natal, suggesting that the DHA in eThekweni could be the busiest branch within KZN.

The DHA is responsible for processing documentation related to civic, immigration, and border management services. DHA often has long queues, poor service delivery, and unsatisfied clients; these issues are associated with unplanned employee absenteeism and understaffed offices (Public Service Commission, 2009; DPSA, 2020). The user feedback and media reports by Reddit (2024) and News24 (2021) complain about the Department of Home Affairs branches in eThekweni (Umgeni Road, Tongaat, and Commercial Road). Common concerns included long queues, unbearable waiting period, frequent system offline and unavailability of staff. Many clients expressed frustration of arriving early only to be told that systems were offline or that essential staff members were absent, forcing them to return multiple times without receiving the services they needed. *“Came back three times just to collect a passport. Every time, either the system was down or someone's key wasn't at work.”*

Poor service delivery, exacerbated by absenteeism, has a negative organisational impact and increases issues of burnout, low staff morale, a lack of internal monitoring systems, and insufficient wellness support (DPSA, 2020). Even though there are existing EWPs in DHA, their lack of monitoring and limited implementation of such programmes in eThekweni offices create constraints in limiting absenteeism (Naidoo, 2021). Due to a lack of support, staff are at risk of emotional and physical stress that leads to an increase in sick leave and unproductive employees who neglect service delivery. In this context, absenteeism is a significant contributor to poor service delivery in the eThekweni DHA offices. This can be addressed by different approaches, such as providing support to employees (EWP) initiative, improving organisational culture and service delivery monitoring frameworks.

3.21 Summary of key insights

The aim of this chapter was to undertake a comprehensive review of the literature on Employee Wellness Programmes globally and within the South African public service, with a focus on the Department of Home Affairs within the eThekweni District. Such an analysis revealed that over time, the nature of EWPs has grown from substance abuse problems to encompass support services for the physical, mental, emotional, and financial well-being of workers. Many countries around the world, such as the USA, Canada, and Scandinavian countries, have implemented EWPs into public and private organisations and have noted significant advantages associated with these initiatives, including reduced absenteeism, higher productivity, and improved morale.

The foundation of EWPs in the South African context is deeply rooted in a great legislative and policy framework, among others: the Constitution of South Africa, the Occupational Health and Safety Act, and the DPSA Employee Health and Wellness Strategic Framework; however, EWPs still face challenges in implementation, participation, and resource allocation. Furthermore, within the DHA, particularly in high-demand districts such as eThekweni, general challenges related to wellness include staff shortages, high population pressure, absenteeism, and inadequate wellness infrastructure.

Key themes that emerged included the importance of leadership support, employee participation, reducing stigma, and continuous monitoring and evaluation, as these are crucial to ensuring that EWPs are not just policy compliance tools but transformative interventions that will significantly improve workplace conditions and, by extension, service delivery. The case study of DHA eThekweni has demonstrated how demographic stressors, employee dissatisfaction, fraud and corruption, and absenteeism directly impact service delivery, highlighting the imperative need for a functional EWP.

The findings from the literature emphasise the need for the design of context-specific, employee-centred, and adequately resourced wellness programmes that are fully integrated into organisational goals. These insights provide a critical foundation for the empirical component of this study, which will assess the actual effectiveness of EWPs in improving employee well-being and service delivery within the Department of Home Affairs in the eThekweni District.

CHAPTER FOUR

RESEARCH METHODOLOGY

4.1 Introduction

This chapter presents the research methodology used to evaluate the effectiveness of Employee Wellness Programmes (EWP) in the Department of Home Affairs (DHA) under eThekweni Municipality. The methodology chapter will outline the justification for the selected research design, data collection, paradigm, sampling, and analysis methods used in the study. The main purpose of the research methodology chapter is to briefly explain the procedures and strategies utilised to ensure that the data is collected in a credible and trustworthy manner. The chapter begins by introducing the qualitative research design, which employs a case study approach. This is followed by a discussion of the interpretivist paradigm that underpins the research, which seeks to understand the lived experiences and perceptions of DHA employees regarding the wellness programme.

The study utilised semi-structured interviews as the primary method of data collection, supported by document analysis for cross-validation purposes. Participants were selected using purposive sampling across different levels of the hierarchy to ensure diverse perspectives. The data were analysed through the utilisation of thematic analysis, which allowed the researcher to identify patterns and themes relevant to employee wellness initiatives. This chapter also highlights the ethical considerations, trustworthiness, limitations, and delimitations, which ensure that the research is conducted in adherence to the standards required for academic ethics and the protection of human or participant rights.

4.2 Research Design

The study employed a qualitative approach in a case study of DHA within the eThekweni District. The case study is suitable when the topic and its context are closely connected (Creswell, 2014). Since the EWP is closely linked to workplace culture and employee experiences, this design enables a detailed and comprehensive understanding.

Qualitative research enables the collection of rich, descriptive data that captures participants' lived experiences and perceptions, rather than relying only on numerical measures (Maree, 2016). This approach provides insight into how employees understand and respond to wellness initiatives within the public sector.

Semi-structured interviews were used to collect primary data. This method provides participants with a chance to freely share their experiences while following a set of questions that guide the progress of the interviews. According to Adeoye-Olatunde and Olenik (2021), semi-structured interviews are useful for exploring personal views in depth and for asking follow-up questions to gain deeper insights.

The study also employed document analysis to support the case study, enabling data to be cross-checked and providing a broader view of the organisation. This combination of methods enhanced the reliability of the findings by comparing interviews with official records and reports. The design is well-suited to the public sector, where workplace culture, confidentiality, and resources significantly impact how wellness programmes are conducted. Focusing on a single case gives a detailed context with a specific understanding of how the EWP helps address stress, burnout and productivity in the DHA.

4.3 Research Paradigm

The study is conducted in an interpretative paradigm that supports research by emphasising the subjective meanings of individuals attached to their lived experiences. According to Creswell (2014), since people create reality, interpretivists are there to view the experiences of those who have created it. It focuses on understanding meaning and details rather than seeking the universal truth.

The selected approach is suitable because it examines the employee's previous experience and views on the EWP. Since wellness is influenced by personal, cultural, and workplace factors, using an interpretivist approach helps the researcher understand how employees perceive and experience the programme within their work environment.

The interpretivist approach is also utilised in shaping the use of semi-structured interviews, which grant the opportunity for more thoughtful responses and open conversations. Thematic analysis is also guided, which helps identify patterns and themes from what participants shared with the researcher. The direct communication with employees helps in building knowledge, recognising that both employee experiences and the researcher's interpretations shaped the findings accordingly.

In practice, the interpretivist approach influenced the use of semi-structured interviews, which facilitated open conversations and thoughtful responses. It also guided the use of thematic analysis, which helped identify key patterns and themes in the information shared by participants. By speaking directly with employees, the researcher and participants worked together to build knowledge, recognising that both employee experiences and the researcher's interpretations shaped the findings.

Using this approach ensures that the study produces detailed, reliable, and meaningful results that show how employee wellness is experienced and managed in a complex public sector organisation.

4.4 Study Site

The eThekwin Metro Municipality is the site where the research was conducted. According to the Integrated Development Plan (IDP) 2024/2025 of eThekwin Municipality, the district has a population of approximately 3.7 million people, making it the most heavily populated area in the province.

Fig 4.1: Map of eThekweni Metropolitan Municipality



Source: Available at: <https://municipalities.co.za> .

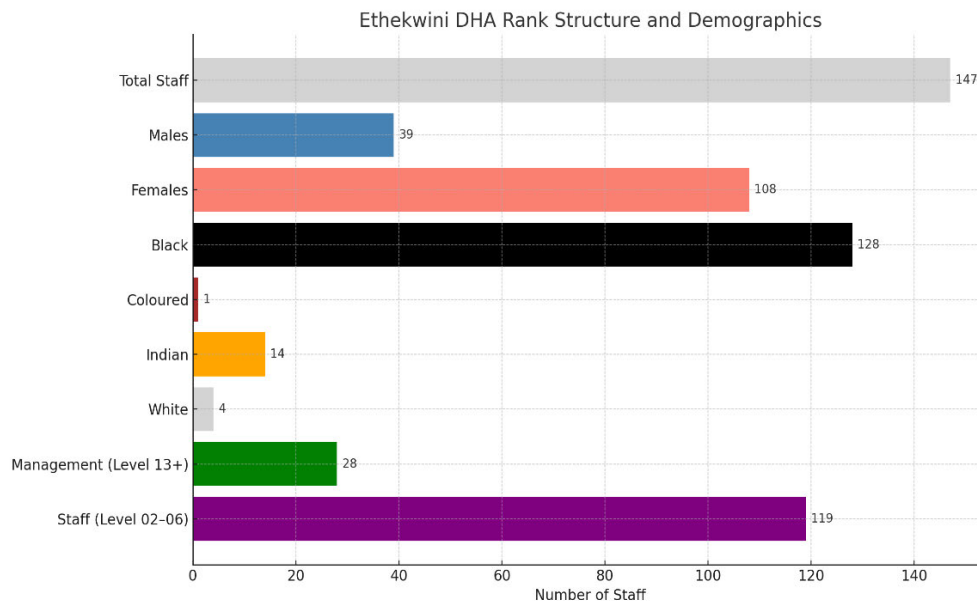
The DHA is a national department, meaning that most services are centralised in Pretoria. All districts in the KwaZulu-Natal Province report to the Provincial Office, located in Pietermaritzburg, under the leadership of the Provincial Manager (DHA, 2024). The eThekweni District has eight offices located in Umgeni, Tongaat, Pinetown, Pavilion, Chatsworth, Hammarisdale, Prospecton, and Commercial Road (DHA, 2024). The Department of Home Affairs in the eThekweni District is responsible for serving the entire eThekweni population, which is approximately 3.7 million people. According to South African Tourism, the eThekweni District is the most popular tourist destination, and the Golden Mile beachfront is attracting both domestic and international tourists due to its entertainment and cultural diversity (South African Tourism, 2024). The eThekweni District has a complement of 147 employees.

4.4.1 Structural composition and number of employees

According to DHA (2025), this district has one district manager, level 13, deputy director (large office manager), level 12, assistant directors, district information technology officer, district coordinator, state accountant, immigration control officers, senior administration officers, civic

services supervisors, mobile officers, immigration officers, civic services clerks, DHA hospital clerks and cleaners.

4.4.2 Rank structure



Source: (Department of Home Affairs, 2025)

Here is a horizontal bar graph showing the eThekweni DHA rank structure and demographic composition:

- It visually represents total staff, gender split, racial breakdown, and staff levels.
- Most staff fall within the operational levels (02–06), and the majority are Black and female.

4.5 Types of sampling

There are various sampling methods, which include the target population and the sampling method, as discussed further in the next section.

4.5.1 Target Population

The study targeted employees of the DHA eThekweni District who are appointed under the Public Service Act of 1994 and are responsible for various categories, encompassing all levels within the district. The targeted population is stationed in various offices within eThekweni, including Umgeni, Tongaat, Pinetown, Pavilion, Chatsworth, Hammersdale, Prospecton, and Commercial Road (DHA, 2024). These employees are relevant to the study because they are directly affected

by the EWP and well-suited to address challenges such as absenteeism, burnout, and productivity issues.

4.5.2 Sampling Method

This study adopted purposive sampling. This method is part of non-probability sampling, which is mostly utilised in a qualitative approach. This type of sampling enables the researcher to select participants based on specific requirements or characteristics that are relevant to the research study, such as their knowledge within the department, title, and exposure to the wellness programme (Rai & Thapa, 2015). Using this method, data will be collected from participants with the most relevant knowledge and experience in the research study (Lopez & Whitehead, 2013).

4.6 Sample Size and Rationale

The sampling is from a broad range or a different range. Below is a sample structure with seventeen participants from different offices, races, ranks, genders, ages, etc.

No	Designation	Participant Category	Number of participants
01	District Manager	Level 12-14 (SMS)	01
02	District Coordinator	Level 09	01
03	Office Manager	Level 10	01
04	ASD Immigration	Level 10	01
05	Supervisor	Level 8	01
06	Supervisor	Level 7	01
07	Supervisor	Level 8	01
08	Supervisor	Level 7	01
09	Administration Clerk	Level 6	01
10	Administration Clerk	Level 6	01

11	Administration Clerk	Level 6	01
12	Administration Clerk	Level 6	01
13	Hospital Clerk	Level 5	01
14	Hospital Clerk	Level 5	01
15	Hospital Clerk	Level 5	01
16	Cleaner	Level 3	01
17	Cleaner	Level 3	01

Table 4.1: Structure with seventeen participants

This composition ensures diversity in terms of operational roles, management perspectives and front-line service experience. The sample size is guided by the principle of data saturation, where sufficient participants are engaged to provide rich and meaningful insights (Bloomberg & Volpe, 2016).

4.7 Data Collection Methods

This study utilised both primary and secondary data collection methods to evaluate the effectiveness of the Employee Wellness Programme (EWP) within the Department of Home Affairs (DHA) in the eThekweni District.

4.7.1 Primary Data Collection

Semi-structured interviews were used to gather primary data. To cover key themes related to stress, employee motivation, support structures, and challenges, the open-ended interview questions were utilised. The data was collected from seventeen participants from different job categories and hierarchy levels to ensure diversity in perspectives. All interviews were conducted

face-to-face within different DHA offices across the eThekweni District. Some interviews were recorded with participants' consent and later transcribed for analysis.

4.7.2 Secondary Data Collection

In support of the interviews, secondary data was collected, and the study utilised document analysis to review relevant organisational materials, including internal policy documents, programme reports, employee feedback reports, and the Integrated Development Plan (IDP) of eThekweni Municipality. These documents provided a deeper understanding and complemented the interview data, thereby enhancing the trustworthiness of the findings (Bloomberg & Volpe, 2016). Document review involved examining DHA policy guidelines and wellness programme materials to identify programme objectives, implementation frameworks, and evaluation tools.

4.8 Data Analysis

The study will analyse the qualitative information gathered from participants using thematic analysis. Thematic analysis, according to Creswell (2014), is a technique for locating, examining, and summarising patterns (themes) categorised by employee perception and response. The groups include matters of stress, support, and motivation, as well as occasional resource constraints. All these factors directly affect employees' happiness and retention rates. These can be described as themes that assess the effectiveness of the Employee Wellness Programmes (EWP). Therefore, the researcher interprets the significance of these themes in relation to their goals, offering insight into how the employees understand their roles and experiences.

4.9 Trustworthiness and Validity

In qualitative research, trustworthiness refers to the extent to which the findings accurately represent the participants' experiences and perspectives (Alexandra, 2019). Lincoln and Guba (1985) proposed four criteria for determining trustworthiness: transferability, confirmability, believability, and dependability. Credibility is the primary criterion used in this study to evaluate the character and rigour of the research. Credibility is the main standard used in this study to assess the quality and reliability of the research.

Credibility refers to the extent to which findings are perceived as truthful and believable from both participant and external stakeholder perspectives (Lincoln & Guba, 1985). Alexandra (2019)

highlights that credibility is a core component of many qualitative quality frameworks. Spending more time with study participants could increase the credibility of this study. Such engagement helps uncover participants' perspectives, build trust, and gain a broader understanding (Emworo, 2023).

A potential challenge to this study's credibility is that participants may provide socially acceptable answers or withhold information due to a lack of trust, confidentiality concerns, or fear of the unknown. Zerbe and Paulhus (1987) describe social desirability bias as a tendency for employees to be reluctant to provide honest feedback during interviews about their workplace programmes.

To manage this challenge, the study will employ strategies such as ensuring confidentiality and anonymity during recruitment and data collection, fostering bonds through extended engagements, and using probing interview questions to encourage more thoughtful and honest responses. These steps are designed to enhance data reliability and bolster the credibility and trustworthiness of the research.

4.10 Ethical Considerations

The study adheres to ethical considerations to ensure the protection of participants' rights, dignity and well-being. The gatekeeper's letter seeking permission to conduct the research has been granted by DHA. Ethical clearance has been obtained from the University of KwaZulu-Natal's Human and Social Sciences Research Ethics Committee, and the study will comply with both institutional and national or departmental ethical standards, including the Protection of Personal Information Act (POPIA) No. 4 of 2013 (Republic of South Africa, 2013).

4.10.1 Informed Consent

All participants will be required to sign a written informed consent form before participating in the study. This consent form outlines the study's purpose, procedures and the voluntary nature of participation.

4.10.2 Anonymity and Confidentiality

To protect participant identity, anonymity will be guaranteed by using codes instead of names, and confidentiality will be ensured through secure data storage. Only the researcher will have access to the raw data, which will be stored in encrypted digital files and locked cabinets, as applicable. No personal identifiers will appear in the final report or any publications arising from the study.

4.10.3 Voluntary Participation and Right to Withdraw

Participants were informed that their participation was voluntary and that they had the right to withdraw at any time during the research without consequences. This aligns with the ethical principle of independence to avoid any form of coercion of participants (De Vos et al., 2011).

4.10.4 Respect for Participants

Interviews will be conducted in a manner that is respectful and sensitive to the work-related environment in which the research takes place (Hopf, 2004). This study recognises and respects participants' rights, dignity, and cultural values, which align with the ethical codes of conduct for research.

4.10.5 Gatekeeper Permission

Permission to conduct the research has been obtained from the Deputy Director-General: Operations, of the DHA. A gatekeeper's letter has been secured to authorise access to participants and relevant workplace documents.

4.10.6 Data Protection and Storage

After the study is completed, the data will be securely stored and destroyed after 5 years, in accordance with POPIA, government, and university regulations. All audio recordings and transcripts will be stored in documents and maintained to ensure anonymity within those documents.

4.11 Limitations and Delimitations of the Methodology

Due to workplace dynamics, participants may provide answers that do not accurately reflect their true thoughts. Differences in employees' knowledge and willingness to participate may yield inconsistent responses. A limited geographical area restricts access to other areas to a great

extent. Due to priority operations, the time spent with each employee was limited. This is important for gaining deeper insights and reducing bias (Emworo, 2023). Lastly, combining information from the existing literature can pose risks to academic integrity if not handled carefully.

To address these issues, the study maintains confidentiality to encourage honest responses, employs follow-up questions, and, where possible, conducts multiple interactions with participants to enhance data quality. It also compares interview data with organisational documents to strengthen credibility and reliability. Furthermore, the careful use of citation guidelines ensures the research protects academic integrity.

4.12 Summary

This chapter outlined the methodology utilised for the study. It highlighted the research design, paradigm, qualitative approach, purposive sampling and means of data collection and analysis used. Additionally, it was in contact regarding the study's trustworthiness, ethical considerations, limitations, and delimitations. The methodology provided a foundation for the findings presented in the next chapter.

CHAPTER FIVE

DATA ANALYSIS AND INTERPRETATION

5.1 Introduction

This chapter is an in-depth analysis and interpretation of the data collected through semi-structured interviews conducted with management and non-management employees of the Department of Home Affairs (DHA) within the eThekweni District on the effectiveness of the EWP, how it is perceived, shortfalls in its implementation, and the impact of the programme on service delivery. The data are presented thematically, allowing integration of direct quotes from participants with broader literature and theoretical interpretations aligned with public administration and wellness frameworks.

Material analysis was conducted using a qualitative thematic approach based on Braun and Clarke's (2006) method, which involves data familiarisation, generation of initial codes, theme searching, theme review, theme definition and naming, and production of the final report. The Public Value Framework and Human Capital Theory, which support public institutions in creating value for their employees through purposeful investment in their welfare, resulting in effective organisational performance (Moore, 1995; Schultz, 1961), also inform the analysis.

5.2 Overview of Data Sources

This section highlights the primary and secondary sources of data used to inform this analysis.

Interviews with Management - Primary source: Eight managers, from Level 7 to Level 13, who are responsible for implementing and overseeing the wellness programme, were interviewed. These interviews explored strategic implementation, policy effectiveness and organisational challenges.

Interviews with staff members (primary sources): A diverse group of staff members (levels 2–6) shared insights into their lived experiences and perceptions of the wellness programmes. Their responses highlighted participation levels, accessibility and personal outcomes.

Desktop (secondary data): Existing reports, policies, statistical data and previous evaluation documentation provided supplementary insights, validating or contrasting with primary data.

5.3 Thematic Analysis from Management Interviews

5.3.1 Theme 1: Strategic Importance of EWP in Public Service

Management interviewees consistently emphasised that EWPs are essential for sustaining employees' productivity and service delivery. One manager remarked:

"A healthy workforce directly translates into improved service delivery to citizens. The wellness programme is not a luxury but a necessity in our line of work."

This aligns with international and national literature indicating that wellness initiatives enhance organisational effectiveness when their planning is fully integrated into strategic plans (De Meneses, 2021).

5.3.2 Theme 2: Programme Implementation Challenges

A dominant theme was the challenge of implementing wellness programmes amid budgetary and human resource constraints. Managers reported irregularity in programme delivery due to financial limitations:

"Wellness activities are planned annually, but often they don't happen as scheduled due to lack of funding or last-minute operational demands."

This inconsistency significantly undermines the program's effectiveness; repeated studies by Moyo, Mavunga, and Sibanda (2022) caution that poorly executed EWPs may have further negative impacts on staff morale.

5.3.3 Theme 3: Lack of Monitoring and Evaluation Mechanisms

Another concern highlighted was the lack of clear performance indicators or a feedback mechanism.

"We implement, but we don't evaluate enough. There's little data to show the actual impact."

This gap limits the Department's ability to measure the return on investment or adjust the programme based on evidence-based outcomes.

5.4 Thematic Analysis from Staff Interviews

5.4.1 Theme 1: Limited Access and Participation

Most staff indicated that while they are aware of the wellness programme, access is limited and participation remains low:

"Sometimes we hear of a wellness day happening, but it's only for head office or those in PM's office. We are rarely included."

This demonstrates geographic and departmental inequity, a challenge noted in public administration research regarding decentralised implementation of policy (Van der Waladt, 2014).

5.4.2 Theme 2: Wellness Programme Components Valued by Staff

International trends are showing a shift in EWP focus toward holistic well-being (McCleary, Goetzel, Roemer, Berko, & Torre, 2017). Despite limited access, staff reported valuing certain aspects of the programmes, especially those relating to mental health and stress relief:

"I had a session with psychologists once and that helped a lot. Work stress is real."

Mental wellness support was cited as the most beneficial component.

5.4.3 Theme 3: Perceptions of EWP as Tokenistic

Some staff expressed scepticism about the authenticity and depth of the EWP:

"It feels like a checkbox activity. There's no follow-up, no commitment to real change."

This perception raises concerns about the credibility and sustainability of the initiative, underscoring the need for genuine, ongoing engagement with staff.

5.5 Desktop Data Insights

Desktop data, including internal departmental reports, EWP policy documents and HR statistics, corroborated much of the primary data.

- ❖ **Wellness Budget Allocation:** Budget records showed minimal and inconsistent allocation toward wellness over the past three years.

- ❖ Sick Leave Trends: There was an upward trend of sick leaves related to stress, especially during and after the COVID-19 pandemic.
- ❖ Policy Compliance Reports: The reports showed that only 63% of the intended wellness activities were done during the financial year 2022/23.

5.6 Understanding of the Employee Wellness Programme

Both management and staff acknowledged that the EWP exists within the DHA. However, there was a significant inconsistency in the level of understanding between the two groups. Management participants generally defined the EWP in strategic and policy-oriented terms, referring to it as a mechanism to *“address psycho-social challenges and improve productivity.”* One manager described it as *“a strategic support system to promote wellness, reduce absenteeism and enhance job satisfaction.”*

On the other side, staff members associated EWP more with personal emotional and mental health support. Many respondents linked it to *“help with stress, work-life balance and dealing with personal problems.”* Several non-management staff expressed limited awareness and, in some cases, total unfamiliarity with the programme's existence prior to the research interviews. For example, one respondent stated:

“I didn’t know at all about such a programme, apart from sports, nothing has been done.”

This finding highlights a critical gap in communication and orientation efforts regarding EWP, particularly for new or lower-level employees. The Human Capital Theory underscores the importance of employee understanding and engagement in the programme, which was intended to enhance individual and organisational productivity (Becker, 1993).

5.7 Accessibility and Visibility of the EWP

A recurring theme among staff was the lack of visibility and accessibility of the EWP services. Despite management’s assertion that EWP services were available through provincial support channels, many staff indicated that they had never seen or engaged with the Employee Wellness Practitioner. *“I’ve been working here for seven years and I only heard about the programme last week from you.”*

The staff members often expressed confusion about who the wellness practitioner was and how to access services, which suggests a breakdown in operationalise and decentralisation of the programme. While some management interviewees admitted that the EWP was not physically present at the district level, they pointed out that it is due to “*resource and staff constraints*” as a barrier to more regular visibility. “*There is only one practitioner responsible for the whole province; it’s simply not feasible for her to visit every office regularly.*”

This lack of visibility undermines the objectives of the EWP, as physical absence is interpreted as organisational neglect. Scholars such as Rothmann and Cooper (2008) argue that the availability and visibility of wellness resources are critical to employee participation and trust in wellness initiatives.

5.8 Participation and Engagement

Staff participation in the programme was notably low. Only a few staff members among the interviewees had ever accessed EWP services. The reasons cited for poor participation included:

- Lack of trust in confidentiality
- Lack of knowledge about EWP
- Perceived irrelevance of the programme
- Absence of proactive outreach by EWP personnel

One respondent was quoted:

“We don’t talk about our problems because there’s no trust, people are afraid of being judged.”

Even those who expressed interest in attending also indicated that they were discouraged by logistical issues, such as a lack of posters, brochures, or scheduled sessions. These point to a critical implementation failure of the programme. As noted by Kapp (2012), effective EWPs require not only structures but also consistent and culturally sensitive communication, especially in diverse public service environments.

5.9 Communication about EWP and its Benefits

Both management and staff highlighted a lack of effective communication as a major barrier. While management claimed that information was available via circulars and online platforms, the staff felt left out.

“There’s not even a single poster about these programmes.”

“EWP needs to be communicated like PMDS, regularly and with emphasis.”

Recommendations from staff included:

- Monthly office briefings on EWP.
- Distribution of printed material and contact details.
- Appointment of district-level wellness representatives.

This finding aligns with the literature by Matlala and Mello (2016), who argue that employee buy-in is directly linked to the visibility and clarity of communication from leadership about wellness initiatives.

5.10 Management Support and Leadership in EWP Implementation

The management support is thus identified as the most important determinant influencing the outcome of success or failure in EWP. In interviews with management, while a commitment is noted at the strategic level, execution within operations is weak due to budgetary and staffing constraints.

“As much as we want to prioritise wellness, it is often overshadowed by service delivery pressures.”

Management acknowledged that wellness initiatives often receive secondary attention, especially during peak workload seasons that demand greater focus on projects such as Early Birth Registration (EBR), smart card, and passport campaigns. Some respondents expressed frustration at the lack of dedicated human resources to manage EWP activities. *“There’s no one permanently stationed for wellness at the district level. Everything is centralised in Pietermaritzburg.”*

From the staff's perspective, this lack of dedicated support translated to the perception that management is not fully committed to their well-being. One staff member noted:

"I feel like no one cares about our mental health, it's always about pushing numbers, targets and servicing the queues."

Cloete and De Coning (2011) argue that for leadership in public institutions to be effective in both policy and practice, it must champion wellness programmes.

5.11 Impact on Employee Well-being and Service Delivery

The intended impact of the EWP, which is to improve employee health, reduce absenteeism and enhance productivity, has not yet been fully realised or achieved at DHA eThekweni. Management interviewees acknowledged that, due to the lack of proper monitoring tools, it is challenging to quantify the impact of wellness activities. As one stated:

"We don't have wellness KPIs; we rely on HR reports, and even those are not very detailed."

On the staff side, there was a strong sentiment that wellness challenges, especially mental health and stress, are directly affecting their service delivery capacity. Frontline workers reported feeling overwhelmed by public demand, staff shortages, and a lack of psychological support. According to Pillay and Govender (2020), sustainable service delivery in the public sector is only possible when wellness is viewed not as an add-on but as integral to employee performance systems. One staff member stated, *"You go through emotional burnout, but no one checks on you. We're expected to push through."* These point to a disconnection between policy objectives and employee experience.

5.12 Cross Comparative Analysis: Management vs. Staff Perspectives

The table below summarises key differences in perspectives between management and staff regarding the EWP:

Theme	Management View	Staff View

Understanding	Strategic tool to enhance productivity	Personal support mechanism (often unknown or misunderstood)
Implementation	Hampered by resources and a centralised structure	Inaccessible and largely absent at the district level
Participation	Poor but seen as employee choice	Low due to lack of visibility, trust, and communication
Support	Acknowledged as important but often deprioritised	Perceived as non-existent or inconsistent
Impact	No formal measurement tools in place	Negative effects of stress and lack of support on performance were noted
Communication	Info shared via internal systems	No communication received; suggestions made for more proactive outreach

Table 5.1: Key differences in perspectives between management and staff regarding the EWP

This comparative analysis reveals that while management may be aware of the programme and resource challenges, staff experience these gaps as a complete absence of support and poor implementation or gaps in public administration.

Gender and Demographic Insights

Female Staff Members: Noted wellness programmes often do not cater to their specific needs (e.g., childcare support, menstrual health, etc.)

Youth Staff: Preferred digital/online wellness tools over in-person events.

Older Staff: Desired more physical health screenings and chronic illness support.

5.13 Interpretation with Theoretical Frameworks

Using the **Public Value Framework**, the findings suggest that DHA's EWP, while strategically sound on paper, fails to generate value for employees due to poor implementation. Moore (1995) argues that for public programmes to be effective, they must be not only authorised by leadership and supported by operational capacity but also valued by citizens or, in this case, employees.

According to **Human Capital Theory** (Schultz, 1961), employees are assets whose well-being contributes directly to organisational output. Failure to support and invest meaningfully in employee wellness negatively impacts overall institutional productivity while simultaneously increasing hidden costs, including absenteeism, low morale, and employee turnover. Furthermore, Dlamini and Makhubu (2019) confirm that in South African public sector institutions, wellness is often underfunded, misunderstood, or miscommunicated, findings that align closely with those of the DHA eThekweni case.

5.14 Key Findings

The analysis has shown that while DHA management recognises the importance of the Employee Wellness Programme, its actual delivery falls short due to structural issues, budgetary and communication limitations. Employees at the operational level experience the programme as either invisible or inaccessible, and many are unaware of its existence or, due to stigma-related challenges, fear participating.

Key insights from the data analysis include:

- ✧ **Policy-Practice Gap:** A notable disconnection exists between wellness policy intentions and on-the-ground implementation. In addition, significant awareness gap among staff regarding EWP services.

- ✧ **Inconsistent participation:** a lack of proactive communication and poor attendance. Due to logistical and communication issues, many staff members are excluded from wellness activities.
- ✧ **High demand for mental health support:** This emerged as the most impactful and appreciated component.
- ✧ **Lack of evaluation tools:** Absence of monitoring and evaluation tools to measure programme effectiveness. There is no clear system in place to track the effectiveness or impact of wellness activities.
- ✧ **Perception of tokenism:** Staff often view wellness activities as superficial rather than substantive.
- ✧ **Need for custom-made programmes:** One-size-fits-all approaches do not meet the diverse needs of staff across ranks and demographics.
- ✧ **Wellness practitioner in offices or District level:** Limited access and physical absence of wellness personnel at district offices.
- ✧ **A discrepancy** exists between management's strategic intentions and staff's lived realities.
- ✧ **Work overload** due to a high population of 4.7 million, a staff shortage of 148, and only ten DHA offices/footprints.

These findings highlight the need for local implementation, sufficient resources, regular communication and strong leadership to improve the EWP in the Department of Home Affairs

5.15 Conclusion

This chapter analysed data from management and staff interviews, supported by desktop research. While the Department of Home Affairs in eThekweni District has implemented employee wellness programmes, the findings show significant areas for improvement. More inclusive, consistently funded, and well-monitored wellness strategies are required. These findings form the basis for the recommendations in Chapter Six.

CHAPTER SIX

CONCLUSION AND RECOMMENDATIONS

6.1 Introduction

This chapter summarises the study's findings and provides recommendations to improve Employee Wellness Programmes (EWPs) in the Department of Home Affairs, eThekweni District. The recommendations are based on the thematic insights drawn from interviews and desktop research presented in chapter five. This chapter also concludes the study by summarising its key contributions, limitations and implications for future research.

6.2 Objectives and Research Questions

The purpose of the study was to evaluate the effectiveness of the Department of Home Affairs' Employee Wellness Programmes within the eThekweni Metro Municipality. The designed objectives were mainly to assess the status of EWP and its implementation in DHA, and to identify factors that may affect employees' participation in this programme. The objectives include determining the impact of the programme on organisational health and culture, and on improved service delivery to the public at large. The research questions were set in a manner that the following can be addressed:

- How does the Employee Wellness Programme improve employee health and well-being, productivity, job satisfaction and service delivery in the Department of Home Affairs at eThekweni District?
- What are the processes, resources and strategies utilised by the Department of Home Affairs in implementing the Employee Wellness Programme?
- How do the employees perceive the strengths, weaknesses, accessibility and overall functionality of the Employee Wellness Programme?
- What are the barriers to effective implementation of the Employee Wellness Programme, and how could the Department of Home Affairs make improvements to the programme in order to enhance organisational effectiveness?

Although the study's results provide more insight into the relationship between employee wellness, service delivery, and performance (Bryman, 2012; Hopf, 2024). The study utilised both primary and secondary data through a qualitative case study.

6.3 Summary of the Chapters

During the presentation of the study in **Chapter One**, the importance of EWP in the public sector was highlighted. The first chapter presented the introduction to the study, background, research questions, objectives, and the problem statement that informed the need for research.

Chapter Two outlined the theoretical frameworks that influenced the study of EWP, including Maslow's Hierarchy of Needs, Herzberg's Two-Factor Theory, Salutogenic Theory, the Job Demand-Resource Model, and the New Public Management Theory. Some of these theories suggest that the interjection of EWP and performance is involved. These theories are there to explain the influence of EWP on organisational performance (Bakker & Demerouti, 2007; Hood, 1991)

Chapter Three, a literature review, examined the history of EWP/EAP, the legislation governing EWP, the South African and international literature on EWP, EWP in the public sector, EWP's elements and pillars, and a case study of the eThekweni District. Badul and Subban (2022) and Grobler and Joubert (2012) indicated that the effectiveness of wellness programmes in improving employee morale, service delivery and employee engagement.

Chapter Four presented the research design, paradigm, study site, data analysis, validity, ethical considerations, limitations and delimitations of the study. While the fifth chapter outlined and discussed the findings of the primary data collected, this chapter indicated that the EWP does exist; however, factors such as limited funds, resistance to employee participation, and a lack of leadership commitment negatively impact this programme.

These findings are closely related to those of De Meneses (2021) and Moyo et al. (2022), who argue that in the public sector there is a significant struggle with sustainability and the evaluation of wellness programmes. Based on these findings, it is evident that the EWP's initiative can be fulfilled only if the government integrates human resources as the custodians of the EWP and service delivery frameworks.

6.4 Summary of findings

The study collected primary data through interviews with management and staff. Secondary data were collected through desktop research. The findings on primary data collected within the DHA eThekweni District are as follows:

Both management and staff acknowledged the programme's existence; however, they understand it differently. Management views the EWP as a strategic tool to enhance employee productivity, thereby ensuring the delivery of effective services. The staff view it as a tool created by an employer to support them with their personal, emotional, and mental health. Some employees were unaware of its existence and purpose within the workplace. These findings displayed a communication gap between management and staff regarding EWP initiatives.

There is only one Employee Practitioner in the province. Participation is reported to be low due to limited access. Staff at the district level do not have the employee practitioner's contact details; most have never even met her in person. There is a high demand from employees for the decentralisation of EWP services. Due to poor communication, lack of trust and organisational culture, participation is then discouraged.

There are challenges in implementing the programme, such as budget constraints, staff shortages, and competing priorities. Service delivery and operations are being prioritised as the core of the organisation. There is no monitoring tool available for the programme, such as KPI's for performance evaluation and monitoring.

Inconsistent communication challenges about the EWP activities. Managers believe that circulars, though internal communication emails, serve as a communication method for everyone. While the staff indicated that they hardly open emails due to workload, they receive no communication regarding the programme. They recommended more communication during staff monthly meetings, displaying posters around the office, and increasing the visibility of wellness practitioners in their offices or through EWP campaigns.

The employees perceive the programme as symbolic instead of impactful due to malicious compliance. There is no continuity or follow-ups after any EWP intervention due to a lack of

resources. This creates a challenge whereby the confidence and trust in management is being compromised when it comes to employees' well-being.

The intended EWP outcomes of promoting employees' well-being, improving service delivery, and reducing workplace absenteeism are not being fully achieved in this department. Due to the increase in stress, related absenteeism, and burnout, the well-being of employees is clearly compromised. The management and staff collectively indicated that wellness challenges negatively impact the department's service delivery and individual performance.

The key gaps identified included a lack of evaluation tools, an insufficient budget, leadership gaps, gaps in the practicality of policies, and a need for customised and digital services. This also includes the great need for additional human resources (Employee Practitioners).

According to Human Capital Theory, underinvestment in EWP can negatively affect staff morale, productivity and increase absenteeism and turnover. While the Public Value Framework indicate that the EWP have a challenge of lacking operational capacity and employee value, which then limits its public impact.

6.5 Recommendations of the Study

Based on the analysis in Chapter Four, the recommendations are proposed as follows:

- Allocate a specific budget for wellness programmes that cover all aspects of the programme, including team building, sport, awareness, and the recruitment of practitioners.
- Improve communication strategies by ensuring that the EWP initiative is communicated effectively across all departmental structures, including emails, staff meetings, offices, districts, regular visits from EWP practitioners, youth structures, management meetings, and displayed pamphlets.
- Implementation of the monitoring and evaluation system. The introduction of a digital system that allows employees to access wellness services online could also enable the assessment of EWP performance indicators.

- Custom-made programmes that accommodate staff needs. The utilisation of survey feedback to design programmes suited to diversity in gender, age, marital status, sex, and rank.
- Engage employees from all levels, ages, genders and races in the planning phase of this initiative to increase the relevance of participation.
- The reporting process is to be regular and accessible to all employees. The published reports are available monthly, quarterly, and yearly, through departmental internal communication, to encourage employee participation and transparency.
- Strengthen management involvement through training them on conflict management, the ability to identify and refer cases accordingly and understanding the EWP initiative. To appoint at least two peer educators in each district who can serve as EWP ambassadors.
- Expansion of EWP coverage to include remote access to those branches that are too far to reach, and due to resource struggles within DHA branches.
- Promote mental health support through support groups. The department can launch various forums, such as men's, women's, widowed, youth, health and lifestyle, and sports. This includes the promotion of easy access to different workshops that address stress management, counselling, alcohol and drug abuse, psychological support, workplace bullying and financial advisory support.

6.6 Contribution of the study

The study contributes to the understanding of the impact of EWP in the government sector. It highlighted how this initiative affects the employee's morale, performance, well-being and service delivery to the public. The study focused on the district with the highest volume in DHA, specifically the eThekweni Metro Municipality. This research provides findings relevant to implementation across all spheres of government by all government departments in South Africa.

6.7 Limitations of the study

The small sample size and geographic focus limited the study, despite its richness in qualitative data. The larger sample size and broader geographic focus, utilising a mixed-methods approach, can provide us with a more comprehensive perspective on the findings.

6.8 Conclusion

The findings revealed that, although the EWP is strategically acknowledged in the department, its implementation is low and under-resourced. The gap between management's policy intentions and employees' experiences is evidenced. These challenges prevented EWP from achieving its goal of reducing workplace absenteeism, improving service delivery, enhancing employee performance, and improving employee well-being. Strengthening monitoring tools, leadership commitment, and the decentralisation of resources, along with an additional budget and effective communication, can help achieve the goal of EWP and its implementation. EWP makes a meaningful contribution to employee wellness and organisational performance.

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APPENDIX 1: Participants' Informed Consent Letter

UKZN HUMANITIES AND SOCIAL SCIENCES RESEARCH ETHICS COMMITTEE (HSSREC)

APPLICATION FOR ETHICS APPROVAL For research with human participants

INFORMED CONSENT RESOURCE TEMPLATE

Note to researchers: Notwithstanding the need for scientific and legal accuracy, every effort should be made to produce a consent document that is as linguistically clear and simple as possible, without omitting important details as outlined below. Certified translated versions will be required once the original version is approved.

There are specific circumstances where witnessed verbal consent might be acceptable and circumstances where individual informed consent may be waived by HSSREC.

Information Sheet and Consent to Participate in Research

Date: 2025

Greeting

My name is Zimbili Khonziwe Shelembe from the University of KwaZulu-Natal, Master of Public Governance student, and research project entitled **“Evaluating the effectiveness of employee wellness programme in the Department of Home Affairs at eThekweni District**

” Contact no; [REDACTED]; email: 209538942@stu.ukzn.ac.za ; Supervisor’s contact no; 031 260 2606; email: Nzimakwetn@ukzn.ac.za

You are being invited to consider participating in a study that involves research in evaluating the effectiveness of the employee wellness programme in Department of Home Affairs, eThekweni District. The aim and purpose of this research is to evaluate the effectiveness of the Employee Wellness Programme within the Department of Home Affairs in the eThekweni District. To identify the gaps between employees and employer’s expectations and to improve the health and well-being of employees. This study is expected to enroll 17 participants 1 District Manager, 2 Office Managers, 1 District Coordinator, 4 Supervisors, 4 Administrative Clerks, 3 Hospital Clerks and 2 Cleaners within Department of Home Affairs in eThekweni District. It will involve the following of procedures semi-structured interviews. The duration of your participation if you choose to enroll and remain in the study is expected to be 2 hours at most. This voluntary study is not funded.

There will be no risks by participating. We hope that the study will create the following benefits to Department of Home Affairs eThekweni to identifying and resolving personal, work related and or health

concerns and challenges that impairs an employee's optimal performance. The study outcome intends to contribute in improving service delivery, minimizing absenteeism, corruption and ensure that the health and wellbeing of employees is prioritised. The researcher must disclose in full any appropriate alternative procedures and treatment that may serve as possible alternate options to study participation.

This study has been ethically reviewed and approved by the UKZN Humanities and Social Sciences Research Ethics Committee (approval number HSSRES/00008852).

In the event of any problems or concerns/questions, you may contact the researcher at contact no; 0[REDACTED]; email: 20953842@Stu.ukzn.ac.za/ [REDACTED]; supervisor's contact no; 031 260 7763: email Nzimakwetn@ukzn.ac.za or the UKZN Humanities & Social Sciences Research Ethics Committee, contact details as follows:

HUMANITIES & SOCIAL SCIENCES RESEARCH ETHICS ADMINISTRATION

Research Office, Westville Campus
Govan Mbeki Building

Private Bag X 54001
Durban
4000

KwaZulu-Natal, SOUTH AFRICA
Tel: 27 31 2604557- Fax: 27 31 2604609
Email: HSSREC@ukzn.ac.za

State clearly that participation in this research is voluntary (and that participants may withdraw participation at any point), and that in the event of refusal/withdrawal of participation the participants will not incur penalty or loss of treatment or other benefit to which they are normally entitled. Describe the potential consequences to the participant for withdrawal from the study and the procedure/s required from the participants for orderly withdrawal. Under what circumstances will the researcher terminate the participant from the study?

Describe in detail the steps that will be taken to protect confidentiality of personal/clinical information, and the limits of confidentiality if applicable. Describe the fate of the data and stored samples.

CONSENT

I (Full names of participants) have been informed about the study entitled "Evaluating the effectiveness of the employee wellness programme in the Department of Home Affairs, eThekweni District". By Miss Zimbili Khonziwe Shelembe.

I understand the purpose and procedures of the study.

I have been given an opportunity to answer questions about the study and have had answers to my satisfaction.

I declare that my participation in this study is voluntary and that I may withdraw at any time without affecting any of the benefits that I usually am entitled to.

If I have any further questions/concerns or queries related to the study, I understand that I may contact the researcher at ([REDACTED] /email: [REDACTED]).

If I have any queries about my rights, I should contact HSSREC office at (031 2604557 / email: HSSREC@ukzn.ac.za).

HUMANITIES & SOCIAL SCIENCES RESEARCH ETHICS ADMINISTRATION

Research Office, Westville Campus

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Durban

4000

KwaZulu-Natal, SOUTH AFRICA

Tel: 27 31 2604557 - Fax: 27 31 2604609

Email: HSSREC@ukzn.ac.za

Additional consent, where applicable

I hereby provide consent to:

Audio-record my interview / focus group discussion YES / NO

Signature of Participant

Date

Signature of Witness
(Where applicable)

Date

Signature of Translator
(Where applicable)

Date

APPENDIX 2: Interview Question for management

INTERVIEW SCHEDULE FOR MANAGEMENT EMPLOYEES IN DEPARTMENT OF HOME AFFAIRS ETHEKWINI DISTRICT

Title: “Evaluating the effectiveness of the employee wellness programme in the Department of Home Affairs at eThekweni District”

Kindly note the following:

- Please provide responses to the questions/statements below as accurately as possible
- Indicate your response in the appropriate box with a cross(X)

Please mark the appropriate box

SECTION 1: BIOGRAPHICAL DATA

1.1 Gender:

Male		Female	
------	--	--------	--

1.2 Age:

20 - 29 years	30 - 39 years	40 - 49 years	50 - 59 years	60 years
				+

1.3 Salary Level:

3 - 5	06 - 07	08- 10	11 - 12	13 -14

1.4 Total number of years in Department of Home Affairs?

0 - 5 years	6 - 10 years	11 - 15years	16 - 20 years	21 years
				+

1.5 How long have you been in your current rank?

0 - 3 years	4 - 6 years	7 - 10 years	More than10

SECTION 2: INTERVIEW QUESTIONS

1. What do you understand about the Employee Wellness Programme within your workplace?

2. Who is responsible for Employee Wellness Programmes within your office?

3. Have you participated in or visited an Employee Wellness Practitioner before?

4. Does management motivate employees to engage in employee wellness programmes?

5. Do you think EWP can be easily accessible within your department?

6. What is your role as a manager in ensuring employees' well-being?

7. Describe the relationship between employees and clients within your organisation?

8. Do you have challenges that require EWP intervention within your office?

9. What procedures are in place for dealing with challenges that employees encounter?

10. In your understanding, what is the link between EWP and service delivery?

11. In your opinion, what changes to the wellness programme would management like to see to motivate them?

12. Do you have any employee recognition culture in your office? If yes, explain in detail.

13. What is your opinion when comparing the number of DHA offices in eThekweni versus the number of employees in DHA eThekweni District versus the population in eThekweni Municipality?

14. In your opinion, what strategies can EWP and management use to assist the department in improving service delivery by enhancing the well-being of employees?

APPENDIX 3: Interview questions for staff

INTERVIEW SCHEDULE FOR NON-MANAGEMENT EMPLOYEES IN DEPARTMENT OF HOME AFFAIRS ETHEKWINI DISTRICT

Title: “Evaluating the effectiveness of the employee wellness programme in the Department of Home Affairs at eThekwinI District”

Kindly note the following:

- Please provide responses to the questions/statements below as accurately as possible
- Indicate your response in the appropriate box with a cross(X)

SECTION 1: BIOGRAPHICAL DATA

Please mark the appropriate box

1.1 Gender:

Male	
------	--

Female	
--------	--

1.2 Age:

20 - 29 years

30 - 39 years

40 - 49 years

50 - 59 years

60 years
+

1.3 Salary Level:

3 - 5

06 - 07

08- 10

11 - 12

13 -14

1.4 Total number of years in Department of Home Affairs?

0 - 5 years

6 - 10 years

11 - 15years

16 - 20 years

21 years
+

1.5 How long have you been in your current rank?

0 - 3 years

4 - 6 years

7 - 10 years

More than10

SECTION 2: INTERVIEW QUESTIONS

1. What do you understand about the Employee Wellness Programme within your workplace?

2. Who is responsible for Employee Wellness Programmes within your District or Province?

3. Have you participated in or visited an Employee Wellness Practitioner before?

4. What could be the reasons for employees not to participate in wellness programmes?

5. Do you think EWP can be easily accessible within your department or office?

6. How could the DHA be more effective in communicating the benefits of participation in the EWP?

7. How can you describe the relationship between employees among themselves and the employer within your workplace?

8. Can you regard yourself as a satisfied or happy employee?

9. What is your role as an employee in EWP and enhancing service delivery?

10. Do you have any challenges that require EWP intervention within your workplace or personally?

11. In your understanding, what role does EWP play in enhancing service delivery?

12. In your opinion, what changes to the wellness program would employees like to see to motivate them?

13. What could be the factors that can contribute to employees engaging in fraud and corruption, absenteeism, poor service delivery and any unethical behaviour within your workplace?

14. What is your opinion when comparing the number of DHA offices in eThekwini versus the number of employees in DHA eThekwini District versus the population in eThekwini Municipality?

15. In your opinion, what strategies can EWP use to assist the department in improving service delivery by enhancing the well-being of employees?

16. What do employees envisage as the major benefits of participating in a wellness programme?

Appendix 4: Ethical Clearance Letter from the University of KwaZulu-Natal



UNIVERSITY OF
KWAZULU-NATAL
INYUVESI
YAKWAZULU-NATALI

24 July 2025

Zimbili Khonziwe Shelembe (209538942)
School of Man Info Tech & Gov
Westville Campus

Dear ZK Shelembe,

Protocol reference number: HSSREC/00008852/2025
Project title: Evaluating effectiveness of employee wellness programmes in the Department of Home Affairs at eThekweni District
Degree: Masters

Approval Notification – Expedited Application

This letter serves to notify you that your application received on 17 June 2025 in connection with the above, was reviewed by the Humanities and Social Sciences Research Ethics Committee (HSSREC) and the protocol has been granted **FULL APPROVAL**.

Any alteration/s to the approved research protocol i.e. Questionnaire/Interview Schedule, Informed Consent Form, Title of the Project, Location of the Study, Research Approach and Methods must be reviewed and approved through the amendment/modification prior to its implementation. In case you have further queries, please quote the above reference number.

PLEASE NOTE: Research data should be securely stored in the discipline/department for a period of 5 years.

Incidents of adverse events and serious adverse events (AEs and SAEs) should be reported in writing to HSSREC, the study sponsors, and any regulatory authority (where appropriate), within 7 working days of the occurrence for local sites and 14 days for all other South African sites.

This approval is valid until 24 July 2026.
To ensure uninterrupted approval of this study beyond the approval expiry date, a progress report must be submitted to the Research Office on the appropriate form 2 - 3 months before the expiry date. A close-out report to be submitted when study is finished.

HSSREC is registered with the South African National Health Research Ethics Council (REC-040414-040).

Yours sincerely,



Doctor Shamila Naidoo (Interim Chair)

/nng

Humanities and Social Sciences Research Ethics Committee
Postal Address: Private Bag X54001, Durban, 4000, South Africa
Telephone: +27 (0)31 260 8350/4557/3587 Email: hssrec@ukzn.ac.za Website: <http://research.ukzn.ac.za/Research-Ethics>

Founding Campuses:  Edgewood  Howland College  Medical School  Pietermaritzburg  Westville

INSPIRING GREATNESS

Department
Home Affairs
REPUBLIC OF SOUTH AFRICA

ENQUIRIES: Ngwenkholo Makalala

Tel: 012-408 7287

Email:

Dear Ms. Shelembe

REQUEST FOR PERMISSION TO CONDUCT RESEARCH IN THE DEPARTMENT TITLED
"EVALUATING THE EFFECTIVENESS OF EMPLOYEE WELLNESS PROGRAMMES IN THE
DEPARTMENT OF HOME AFFAIRS AT ETHEKWINI DISTRICT."

Your request to conduct research in the Department of Home Affairs titled "Evaluating the effectiveness of the employee wellness programmes in the Department of Home Affairs at eThekweni District" has reference.

The Department of Home Affairs, through the Research Management unit in the Chief Directorate: Strategy and Institutional Performance, has approved your request to conduct research in the Department.

The approval is based on the following provisions:

1. That you shall treat all information obtained from the Department in the strictest confidence.
2. Should you wish to publish any part of your dissertation/thesis, a formal written request shall be made to the Department of Home Affairs.
3. Upon completion of the study, you will submit the approved research paper to the Research Management Unit for record keeping.

this opportunity to wish you well in your studies.

MR THULANI MAVUSO
DEPUTY DIRECTOR-GENERAL: OPERATIONS
DATE: 9/7/2025