

SHEENA JOHNSON, IVAN ROBERTSON & CARY L. COOPER



# well-being

productivity & happiness at work

SECOND EDITION

## WELL-BEING

Sheena Johnson · Ivan Robertson  
Cary L. Cooper

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Productivity and Happiness at Work

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*There can be no health without mental health*  
*United Nations Secretary-General Ban Ki-moon:*  
*Message on World Mental Health Day,*  
*10 October 2010*

*We know that mental health is just as important to our overall well-being as our*  
*physical health*

*First Lady of the United States Michelle Obama:*  
*Speech at “Change Direction” Mental Health Event,*  
*4 March 2015*

*There is no escaping the fact that people with mental health problems are still not*  
*treated the same as if they have a physical ailment—or the fact that all of us—*  
*government, employers, schools, charities—need to do more to support all of our*  
*mental wellbeing*

*UK Prime Minister Theresa May:*  
*Charity Commission Speech,*  
*9 January 2017*

# Preface

This is the revised edition of a book first published in 2011 about well-being, productivity and happiness at work, and about ways to preserve and promote such phenomena. This new edition brings the information right up to date by including detail on recent research advances into well-being at work. We also introduce new topics such as what we need to consider about well-being in the context of an aging workforce, and how mindfulness can be used to improve well-being. This edition also includes six new well-being case studies that have been conducted in the last few years to demonstrate how companies are taking the well-being of their employees very seriously. We are very pleased to be able to provide information on the well-being approach of the following case study contributors: BT; John Lewis Partnership; the Civil Service; Network Rail; Rolls-Royce and Tesco Bank.

As with its predecessor, the book is remarkably timely. Globally, the importance of well-being is increasingly being recognized. Not long ago, the then first lady of the USA, Michelle Obama, raised awareness of the importance of mental health and well-being through a number of high-profile speeches and through the launch of initiatives designed to support people to greater well-being. More recently in 2017, the UK Prime Minister Theresa May spoke about the need for everyone, including the government and employers, to do more to support mental well-being.

In spite of these recent references, the basic idea about well-being and quality of life as political goals is not new. Lennart Levi, Emeritus Professor of Psychosocial Medicine (Karolinska Institutet), explored this notion in his introduction to the first edition of this book.

*According to Greek physician Galen, employment is “nature’s physician, essential to human happiness”. Although according to John Stuart Mills “it is possible to do without happiness. It is done involuntarily by nineteen-twentieths of mankind”, William James maintained that “how to gain, how to keep, how to recover happiness is in fact for most men at all times the secret motive of all they do, and of all they are willing to endure”.*

*A prerequisite for all this is that people, indeed, have a job, and that this job is of reasonably good quality. This is nicely summarized in the European Union’s Lisbon strategy “More and Better Jobs”. Unfortunately, countless European workers remain unemployed or have jobs that are patho- rather than salutogenic.*

This book explores the important elements of all these issues.

The book’s first part considers why well-being matters. It begins by telling the story of how individuals can benefit from improved well-being in the workplace before analyzing the demonstrable benefits for organizations, such as lower sickness absence, improved retention of talented people, and more satisfied customers. The first part concludes with a discussion of how well-being relates to employee engagement.

Part 2 considers what is meant by well-being, including both positive emotions and the sense of purpose in life. This Part also explains how well-being can and should be measured.

Part 3 focusses on what influences well-being, and looks both within as well as beyond working life.

Part 4 takes a look at the benefits of well-being, with emphasis on building personal resilience as well as ensuring a healthy workplace as two key objectives.

Part 5 presents six important chapters with highly illustrative and relevant case studies, from BT; John Lewis Partnership; the Civil Service; Network Rail; Rolls-Royce and Tesco Bank.

This book is an essential resource for occupational health practitioners, managers, scholars, and researchers. Indeed anyone who is concerned with health and productivity issues in workplaces can benefit from the information included.

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We would like to say a special thank you to all of the case study authors who have taken the time to present their work on well-being, and to the host organizations of the case studies for allowing the details of their well-being initiatives to be published. We thank all of our postgraduate students over the years who have contributed both to our own personal development and to the field of health and well-being at work. We also thank Nicole and her colleagues at Palgrave Macmillan for their help and patience in preparing the book for publication. Last, but definitely not least, we thank our partners and families for their love, support, encouragement, and patience.

# Contents

## **Part I Why Well-Being Matters**

<b>1</b>	<b>For Individuals</b>	<b>3</b>
<b>2</b>	<b>For Organizations</b>	<b>15</b>
<b>3</b>	<b>Well-Being and Employee Engagement</b>	<b>31</b>

## **Part II What is Well-Being?**

<b>4</b>	<b>Psychological Well-Being</b>	<b>45</b>
<b>5</b>	<b>Measuring Well-Being and Workplace Factors</b>	<b>57</b>

## **Part III What Influences Well-Being?**

<b>6</b>	<b>The Whole Person and Psychological Well-Being</b>	<b>73</b>
<b>7</b>	<b>Work and Well-Being</b>	<b>89</b>

**Part IV    Getting the Benefits**

- 8    Improving Psychological Well-Being: Personal Development and Resilience**      111
- 9    Improving Well-Being: Building a Healthy Workplace**      125

**Part V Case Studies**

- 10   Wellbeing and Resilience at Rolls-Royce**      139  
*David Roomes*
- 11   Mental Health—The BT Journey (So Far)**      149  
*Paul Litchfield*
- 12   Health and Wellbeing in the Civil Service**      161  
*Civil Service Employee Policy*
- 13   On Track for Wellbeing: Everyone Fit for the Future**      173  
*Vikie Buxton-Cope and Brenda Desbonne-Smith*
- 14   Tesco Bank Wellbeing Case Study**      179  
*John Dickinson and Nigel Jones*
- 15   Wellbeing in the John Lewis Partnership**      189  
*Nick Davison*

**Author Index**      199

**Subject Index**      203

# List of Figures

Fig. 1.1	The three components of well-being	4
Fig. 1.2	Hedonic and eudaimonic aspects of PWB	7
Fig. 1.3	The Big Five personality factors	10
Fig. 2.1	The relationship between PWB and productivity	18
Fig. 2.2	The pressure performance curve	23
Fig. 3.1	The benefits of including PWB as well as engagement	40
Fig. 4.1	Mood, personality and PWB	50
Fig. 5.1	The ASSET (2010) model	61
Fig. 5.2	Types of standardized scoring systems	66
Fig. 5.3	Scores from a well-being survey using Stens	67
Fig. 6.1	The impact of underlying personality on behavior	75
Fig. 6.2	Genes and personality	78
Fig. 6.3	Interactions between personality and situations	79
Fig. 6.4	Influences on PWB at work	80
Fig. 6.5	Work and non-work	85
Fig. 7.1	The pressure–performance curve	95
Fig. 8.1	Person, situation and psychological well-being	112
Fig. 8.2	Positive and negative attributional styles	116
Fig. 9.1	A strategic approach to PWB	126
Fig. 9.2	PWB interventions: levels of intervention	133
Fig. 10.1	The web of chronic disease	140
Fig. 11.1	Framework for mental health at work (from Good Work—Good Health)	151
Fig. 11.2	Mental health related sickness absence rate	157
Fig. 11.3	Business in the community workwell model	159
Fig. 12.1	The Civil Service approach to health and wellbeing	164

# List of Tables

Table 2.1	Productivity losses due to sickness presenteeism	19
Table 2.2	The prevalence of presenteeism	20
Table 2.3	Some illustrative factors measured by the ASSET survey tool	21
Table 2.4	Some findings from positive psychology	26
Table 3.1	Benefits for organizations with engaged employees	33
Table 3.2	Some different approaches to engagement	36
Table 5.1	Sample items from the ASSET psychological (ill)health scale	62
Table 5.2	Sample items from the ASSET positive PWB scale	63
Table 5.3	Sample eudaimonic items from ASSET	65
Table 6.1	Items from personality and well-being scales	76
Table 6.2	Returning to work after sickness-absence	82
Table 6.3	Interactions between work and outside work	83
Table 7.1	Four main clusters of workplace factors important for PWB	90
Table 7.2	Examples of challenge and hindrance pressures	93
Table 7.3	Correlations between types of pressure and outcomes	94
Table 7.4	Emotional labor strategies: surface and deep acting	98
Table 7.5	Some flexible working arrangements	100
Table 7.6	The Health and Safety Executive's management standards approach	103
Table 8.1	A resilience prescription	114
Table 8.2	A thought record template	119
Table 9.1	A well-being scorecard	130
Table 10.1	Global health risks, wellbeing goals, and strategic themes	141

# List of Boxes

Box 1.1	Psychological well-being and the biochemical response	8
Box 1.2	Well-being and money	12
Box 2.1	Psychological capital	27
Box 4.1	More on set point theory	48
Box 5.1	Goal-Setting Theory	64
Box 6.1	More on exercise and well-being	83
Box 6.2	Age and Job Attitudes	86
Box 8.1	Thinking errors	120
Box 9.1	The Business Case for Wellness	128
Box 9.2	Suggestions for well-being initiatives for SMEs	131
Box 9.3	Mindfulness	134
Box 15.1	Principle 1	189

# Part I

## Why Well-Being Matters

# 1

## For Individuals

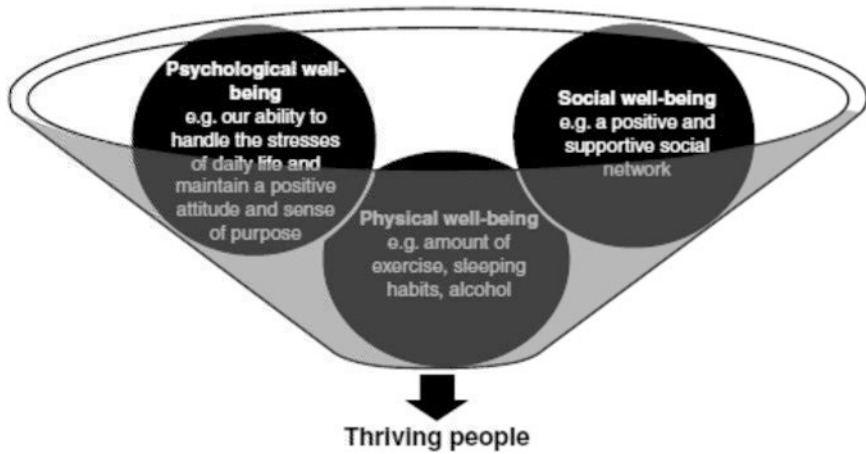
Work can make you sick—and work can make you happy. Which one happens depends on who you are, what you do and how you are treated at work. Work that is rewarding, involving good relationships with colleagues and opportunities to feel a sense of achievement on a regular basis is a key factor in psychological well-being (PWB). Good PWB, as we shall see later in this chapter, is linked to good physical health. Dull and monotonous work, difficult relationships with others and work that is impossibly demanding ‘or lacks meaning’ damages resilience, PWB and physical health. Later chapters will explain how PWB can be damaged or enhanced by work and will also cover the key workplace factors that influence PWB. This chapter sets the scene for what follows by explaining why PWB at work matters and how it is linked to overall sickness and health.

Overall, well-being includes three main parts: physical, social and PWB (Fig. 1.1). This book focuses on psychological (mental) well-being in particular. That does not mean that the other forms of well-being are less important than PWB.

In the workplace however, when industrial accidents and dangerous working conditions are set to one side, PWB is most important—and (apart from accidents, etc.) work has more direct impact on PWB, rather than the physical or social aspects of well-being.

At the most basic level, PWB is quite similar to other terms that refer to positive mental states, such as happiness or satisfaction, and in many ways it is not necessary, or helpful, in a book like this to worry about fine distinctions between such terms. If I say that I’m happy, or very satisfied with





**Fig. 1.1** The three components of well-being

my life you can be pretty sure that my PWB is quite high! It is important though to explain that some other popular terms such as “job satisfaction” or “motivation” are not the same as PWB. Job satisfaction is about how satisfied someone feels with their current job; this is certainly a factor in PWB but, for example, it is perfectly possible for someone to be satisfied with their specific job but be very unhappy about relationships with some colleagues, or the quality of management and supervision that they receive. The same goes for motivation. I could be very energized by a work task and work very hard at it because I feel it’s important and I don’t want to let people down, but the workload involved and lack of resources available could make me frustrated and unhappy. Although we will look more closely at the specific meaning of PWB later in this chapter, for the moment we can say that good PWB is more or less the same as being happy at work. Later in this chapter we will also look at the specific evidence showing how PWB at work has an impact on physical health, job performance and things such as career success. To place the role of work in context we begin by reviewing how PWB is associated with overall success in life, with physical illness and other related factors.

## **PWB Is Linked to Success and Health**

Research studies have shown that higher levels of PWB are linked to higher levels of income, more successful marriages and friendships and better health and, as we shall see later, better work performance. Of course, talking of a

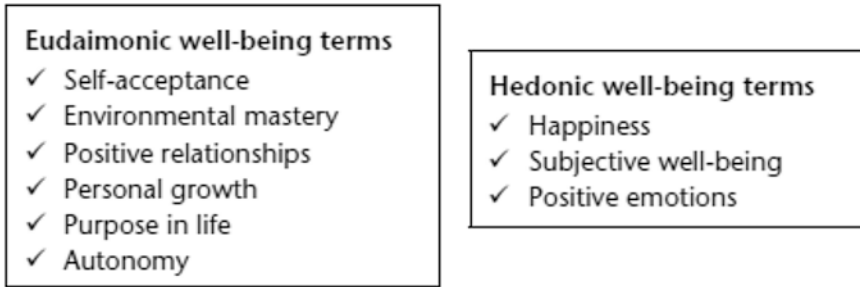
link between PWB and success in life immediately raises an important question—which comes first? In other words, does success come before higher levels of PWB, bringing the (obvious) outcome of increased happiness, or might it be that higher levels of PWB actually lead to successful outcomes? In fact, it seems quite likely that both of these effects happen. It is self-evident that doing well at something that matters to us brings psychological benefits, including increased PWB but it does also seem to be the case that people who develop higher levels of PWB are better equipped to deal with life and are more likely to make a success of things. What is the evidence for this?

Some research on this topic involves looking at happiness scores for a group of people and also looking at how these people fare on the types of life factors that have been mentioned above—marriage, friendships, income and so on. In practice there are quite a lot of studies of this kind (referred to as “cross-sectional” studies) and they generally produce the same conclusion: that greater happiness is associated with better results on the life factors. For example, studies have shown that in three primary life domains (work, relationships and health) people higher on PWB come out better (Lyubomirsky et al. 2005). As well as these primary life domains the cross-sectional research also shows that PWB is linked to many other characteristics that are seen by our culture and society as desirable, such as positive views of self and others, popularity with other people, coping with distress and better immune system functioning.

Although this type of research shows overwhelming support for the link between PWB and life success, it cannot tell us for certain whether PWB leads to success or vice versa. Longitudinal studies are needed to answer this question properly. In longitudinal studies data on PWB are collected at one point in time and then at a later point data on the life factors are collected. These types of studies make it more possible to draw conclusions about cause and effect. Such studies are especially powerful if the effect of the starting position on the life factors is also taken into account. For example, if two groups who are similar in terms of immune system functioning at the beginning, but with different levels of PWB, are compared over time. Sonja Lyubomirsky and her colleagues, Laura King and Ed Diener, looked at all of the longitudinal studies that they could find. Broadly, although the evidence was less extensive, they found the same conclusions as the cross-sectional studies. They found that “Study after study shows that happiness precedes important outcomes and indicators of thriving, including fulfilling and productive work, satisfying relationships and superior mental and physical health and longevity” (Lyubomirsky et al. 2005, p. 834). More recent research has confirmed their findings. Yoichi Chida and Andrew Steptoe

(2008) looked at 35 separate longitudinal studies examining the relationship between PWB and mortality. They found that positive PWB had a protective effect. Overall, the research that they examined showed that positive well-being was associated with reduced mortality rates for healthy people and reduced mortality for patients with specific illnesses, such as immune system viruses and kidney failure. They concluded that "... positive PWB has a favourable effect on survival in both healthy and diseased populations" (Chida and Steptoe 2008, p. 741). Data from the English Longitudinal Study of Ageing also reveals well-being is linked to longer survival (Steptoe et al. 2015). The study found just under thirty percent of people in the lowest well-being quartile died in the follow up period of 8.5 years, compared to just over nine percent of people in the highest well-being quartile. A two way relationship between well-being and health was also reported, with poor health leading to poorer well-being, and high levels of well-being helping to reduce physical health impairments. The direction of the relationship between happiness and poor health was also reported on the following year by Liu et al. (2016). They proposed that poor health can cause unhappiness and poor health is linked to mortality but they did not find a direct link between unhappiness and other measures of PWB and mortality. This study only looked at middle aged women though and so may not be generalizable despite a very large sample of over 700,000 women. Research investigating the links between well-being, health, mortality and other life outcomes continues but it is clear well-being has an important role to play in our lives.

Actually, PWB has two important facets that are reported on in studies on well-being such as Steptoe et al's ageing research described above. The first of these refers to the extent to which people experience positive emotions and feelings of happiness. Sometimes this aspect of PWB is referred to as subjective well-being (Diener 2000). Subjective well-being is a necessary part of overall PWB but on its own it is not enough. To see why this is so, imagine being somewhere that you really enjoy, perhaps sitting on a yacht in the sunshine, with your favorite food and drink and some good company—or alone if that's how you'd prefer it! For most people that would be very enjoyable for a week or two but imagine doing it not just for a week but forever! There are very few people who would find that prospect enjoyable. The old saying may be true, you can have too much of a good thing. What this example brings home is that to really feel good we need to experience purpose and meaning, in addition to positive emotions. So, the two important ingredients in PWB are the subjective happy feelings brought on by something we enjoy AND the feeling that what we are doing with our lives has some



**Fig. 1.2** Hedonic and eudaimonic aspects of PWB

meaning and purpose. The term “Hedonic” well-being is normally used to refer to the subjective feelings of happiness, and the less well-known term “Eudaimonic” well-being is used to refer to the purposeful aspect of PWB, and is the type of well-being Steptoe et al. (2015) found was linked to better survival rates. Psychologist Carol Ryff has developed a very clear model that breaks down eudaimonic well-being into six key parts. Figure 1.2 illustrates both hedonic and eudaimonic PWB.

In further research Ryff and her colleagues (2004) have explored the links between both aspects of PWB and biological indicators of physical health. As with the other research described above they found many relationships between PWB and biological markers of health, such as levels of cortisol (the “stress” hormone), risk of heart problems, immune system functioning and sleep quality. Interestingly in their study they found that hedonic well-being showed relatively few links with the biological markers but eudaimonic PWB was more strongly associated with them. These results may have been influenced by the relatively small sample used in their work (135), or by the nature of the sample (women over 61 years of age). More recently Ryff reviewed the research into eudaimonic wellbeing and reported that the evidence increasingly suggests it has health protective features for length of life and risk of disease (Ryff 2013). She also commented on the increasing emphasis being placed on resilience as a way to maintain or increase PWB which is something we explore more in Chap. 8.

Despite some reservations and the inevitable need for more research, the results of existing research point very strongly to links between PWB and life and health outcomes. So, if the beneficial effects of high PWB are established, a new question arises: how does PWB protect people against illness or lead to life success? It could be that people higher on PWB behave in specific ways that protect them against illness, such as not smoking, taking

exercise, sleeping regularly and complying with instructions when they are given medication. In fact, all these things are associated with PWB but, as Chida and Steptoe showed in their research, the effects of PWB on health remain even when these behavioral differences are fully taken into account. Although the behavior of people with higher levels of PWB does not seem to protect against illness, it certainly does seem that behaviors linked to higher PWB do lead to life success. Lyubomirsky et al. (2005) reviewed a great deal of research and found that higher PWB was associated with a range of behaviors and psychological processes linked to success, including positive self-perceptions, positive judgments of others, performance on complex mental tasks, creativity, flexibility and originality. In addition to the behavioral benefits of PWB the research also suggests biochemical benefits. As the work of Ryff and colleagues, mentioned above, has shown, there are links between certain biochemicals, such as cytokines (e.g. Interleukin 6), which are important for immune system functioning and linked with a range of health outcomes. There are also links with neuroendocrine functions, such as the levels of cortisol (the stress hormone) and PWB (see Box 1.1).

### Box 1.1 Psychological well-being and the biochemical response

Many studies have been conducted demonstrating the link between stress and health. However, there is a growing interest in exploring the positive links between PWB and health. A modest pattern of results has been demonstrated to date, specifically in relation to levels of Cortisol and Interleukin 6. Whilst caution should be exercised in placing too much emphasis on the findings due to the relatively small sample sizes (most have also been conducted with older women), it is thought provoking nonetheless.

**Cortisol**, the “stress hormone”, is secreted in high levels in the body’s fight or flight response, providing us with a quick burst of energy, heightened memory functions and lower sensitivity to pain among others, preparing the body to respond to perceived stressors. Prolonged levels of Cortisol in the blood, as a result of a failure to relax after a sustained period of high pressure or chronic stress, are associated with negative health outcomes such as impaired cognitive functioning, decreased muscle tissue and increased abdominal fat. Fortunately, there are various techniques that people who find it hard to relax can use to lower the level of Cortisol in their bloodstream (e.g. exercise, listening to music or breathing exercises).

Two recent studies have demonstrated the positive effect of eudaimonic PWB on Cortisol levels. Participants with higher levels of purpose in their life started the day with lower Cortisol levels that stayed lower throughout the day than those with lower levels of well-being (and lower levels of purpose and growth), apparently protecting them from the negative effects of high levels in the bloodstream.

**Interleukin 6 (IL-6)** is a cytokine, a messenger protein that regulates the body’s immune response to disease causing inflammation. Overproduction or

inappropriate production of IL-6 is often associated with stress, and in turn high levels of IL-6 are associated with diseases including heart disease, type-II diabetes and some kinds of cancers. This is believed to occur in part because stressed people engage in unhealthy behaviors, e.g. overeating fatty food and smoking which activate the inflammatory response, releasing excess IL-6 into the bloodstream. Studies have also been conducted that demonstrate higher levels of IL-6 in people who have experienced an acute period of psychological stress suggesting it is not just associated with chronic stress.

In relation to the positive impact high levels of well-being might have, there is some early evidence, albeit with a very restricted sample, to suggest that high levels of eudaimonic well-being (purpose in life) are associated with lower levels of the inflammatory response. Quite how this association works is not clear; however, it is an encouraging and developing field of research.

## Causes of PWB

Given the likely benefits of higher levels of PWB, it is interesting and rather important to ask—what are the factors that influence levels of PWB? As with most psychological constructs, at the most general level of analysis, there is a simple answer to this question: it is influenced by a mixture of genetics and environment. The genetic influences on PWB seem to operate through personality factors. In other words our genes help to determine our personalities and, in turn, our personalities help to determine PWB. Research has already established that personality factors are heavily influenced by the genes that people inherit from their parents. Psychologists' views of the key factors involved in describing human personality reached agreement about 15 years ago, and nearly all psychologists recognize the so-called Big Five personality factors. These five factors are outlined in Fig. 1.3. Each person's standing on these factors becomes fairly clear by about 20 years of age and although there are some changes in later life each person's position on each factor remains fairly stable throughout life. The personality factors are continuous—so everyone lies somewhere between two extremes. For example, on Neuroticism, everyone is somewhere between very emotionally stable and laid back and highly neurotic, tense and anxious.

In fact just under 50% of our personality seems to be related to genetic factors. This finding has been established through specific types of research studies—kinship studies. These studies involve people with different degrees of genetic relationship, ranging from twins from a single fertilized egg, who are genetically identical—and usually referred to as identical twins—non-identical twins, born at the same time but two different eggs were fertilized, normal brothers and sisters, through to unrelated people. The studies also