บทความวิจัย (Research Article)

The work-related well-being constituents: A preliminary survey

Boonlue Chimbanrai*

School of Medicine, University of Phayao, Phayao Province 56000

*Correspondence to: boonluechim@gmail.com

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Abstract

The aim of the study was to describe the work-related constituent; level of well-being, occupational illness, and workplace environment among 32 metal product SMEs. Overall, the well-being health status level in workplace was recognized in the above average and average 47.3 and 44.7%. Three most common barriers of physical occupational environment were reported: too hot and cold 40.7%, noise (38.3%), and dust particle (37.3%) followed by narrow space (34.8%), and poor lighting (16.5%), respectively. In conclusion, the early findings suggest that physical employee well-being is one of the obstacles, however other dimension of work-related well-being should be further explored.

Keywords: Worker, Work-related, Health, Well-being

Introduction

As Thailand seeks to take that important step from an upper-middle to a high-income economy, it is necessary not only that the larger firms make the transition in innovation and technology, but also small and medium-sized enterprises (SMEs). Thailand has a high density of SMEs, but they are concentrated in the “small” category, with a much thinner layer of medium-sized enterprises. SMEs are the dominant enterprise size category, accounting for all but about 1% of enterprises in Thailand. [1]

In general, employee well-being implies to an increasingly important performance improvement, and robust investment in workplace health and well-being to be one of multiple practices pursued by high-performance, well-managed companies, [2] as well as building a culture of health by focusing on the well-being and safety of their workplace yield greater revenue per employee. [3] In addition, promoting employee health and well-being are more likely to be rated as high performers, to encourage innovation, and less likely to lose talent. [4,5]

Worker well-being may be a stronger predictor of productivity than disease status, age, sex, or employment tenure, [4] and the companies are looking to employee well-being as a key performance indicator. [2,6] However, there is no single accepted definition of employee well-being and widespread variation in organizational measurement exists. The familiar World Health Organization definition of health identifies ‘‘a state of complete physical, mental, and social wellbeing.’’ Well-being is a broad, subjective construct defined by the individual’s affective and cognitive evaluations of their own life. While the health status is the state of health of a person or population

assessed with reference to morbidity, impairments, anthropological measurements, mortality, and indicators of functional status and quality of life. [8]

The study aimed to preparatory evaluate the work-related constituent; level of well-being, occupational illness, and workplace environment among a number of metal product SMEs.

Material and method

The cross-sectional study and structural in-depth interview with opened end question by trained personnel were conducted among metal product SMEs (employee from 50 to 200) as well as big factory (employee more than 200) during November 2018 to April 2019. Twenty located to the central plain industrial estate, and 12 to the northern industrial estate of Thailand. Approximately, the 20% proportion of informants was covered among the entire workers, who had their work experience for at least 1 year.

The demographic data included age, sex, education, post of skill, work experience, and work earned income. The specific data consisted of workplace well-being (Likert scale of 3 points: above average, average and below average), work environment, workplace health and occupational illness.

The descriptive data were analyzed in term of number, and proportion.

Results

The majority of the subjects (982 workers) were male (54.7%), age range of 41 to 50 (41.1%) with average of 40.2 years, married (73.5), undergraduate (68.8%), skilled worker (46.1%), and 10-year experience up to 10 years (57.8%). Even a number of the workers (53.6%) had worked overtime (extra working time), however about half (54.7%) had the insufficient earned income.

Overall, the well-being/self-report health status level in workplace was recognized in the above average and average 47.3 and 44.7%, respectively. Most of the workers had experienced of taking sick leave of 804 (81.9%) whereas occupational injuries was higher up to 974 (99.2%). Three most common barriers of physical occupational environment included too hot and cold 40.7%, noise (38.3%), and dust particle (37.3%) followed by narrow space (34.8%), and poor lighting (16.5%), respectively. **(Table 1)**

The workers reported their requirement of the qualitative information about work environment included building design and age, workplace layout, workstation set-up, furniture and equipment design and quality, space, temperature, ventilation, lighting, noise, vibration, and air quality.

Table 1 Well-being and associated factor among metal product workers

N = 982	No (%)
Well-being recognition	
Above average	439 (44.7)
Average	464 (47.3)
Below average	79 (8.0)
Health status level	
Above average	148 (15.1)
Average	479 (48.8)
Below average	335 (36.2)
Work environment (more than one answer)	
Too hot and cold	400 (40.7)
Noise (unwanted sound)	377 (38.3)
Dust particle	367 (37.3)
Narrow space	342 (34.8)
Poor lighting	163 (16.5)

Discussion

The main focus of the study was to develop a preliminary survey measure using data from a branch of industrial sector, especially worker well-being and the physical occupational environment. The three composite of measure were associated with physical occupational environment: too hot and cold, noise, dust particle, and so on. Each of the factors identified represents a distinct dimension of positive psychology that can be modified through target intervention. [7,8] The limitations of the preliminary survey are low sample sizes, and confines only two industrial estate, as well as the the analysis only demonstrate the overview but not include the associated factor of the worker' age and gender, and the differentiates between small and medium-sized enterprises.

The further study to cover the relationship between employee wellness, health engagement, and desirable business outcomes should be probed, not only industrial sector but also health care, education, and commercial sectors. [2] In consideration, a number of validated tool assess subjective and objective dimension of well-being including The Gallup-Healthways Well Being Index (WBI), and modified short form Individual Wellbeing Score (IWBS) both measure six broad conceptual domains, including physical health, emotional health, healthy behaviors, work environment, basic access, and life evaluation. [9,10] The various indexes should likely produce consistent on employee well-being and burnout, and were a part of comprehensive model integrating health promotion and protection, it is possible to begin understand the explanatory power of employee well-being.

Besides, It should be noted that the proposed dimensions of affective, work-related well-eing include enthusiasm–depression (measured by engagement and burnout), anxiety–comfort (measured by occupational stress), and pleasure–displeasure (measured by job satisfaction). [11]

In conclusion, the early findings in the present study suggest that employee well-being cannot be summarized as a single factor, but multifactorial approaches.

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