

Workplace health promotion management of non-communicable disease prevention and implementation among organizational leaders and human resource executives in Thailand: A qualitative study

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ABSTRACT

In Thailand, the Cabinet has outlined a national reform plan (public health), which emphasizes the concept of health promotion in alignment with the United Nations' Sustainable Development Goals. The plan focuses on policies and measures within the workplace and setting goals to establish workplace health policies. Workplace health promotion yields positive effects on businesses by enhancing work productivity and reducing costs. However, national policies specifically aimed at promoting good health and well-being in the workplace are still limited in scope and are predominantly implemented by governmental agencies in Thailand. This study aimed to investigate the management and implementation of health promotion policies in the workplace by organizational leaders and human resource (HR) executives. We conducted exploratory research using the inductive approach of conventional content analysis. Data were collected through in-depth interviews with senior-level and HR executives affiliated with influential bodies of the Joint Standing Committee on Commerce, Industry, and Banking (JSCCIB), the Personnel Management Association of Thailand (PMAT), industrial estates, and prominent businesses representing all eight industry groups in Thailand between May and November 2022. In-depth interviews were conducted with all key informants, totalling 35 individuals, representing 27 businesses and organizations.

The findings were categorized into three main themes: 1) Management including organizational policies, and leadership, 2) Operations including budget allocation, activities, and operational tips, and 3) Challenges including operational challenges and individual factors. This study has outlined strategies for more effective management and implementation to enhance workplace health promotion, and refined policies for improvement of health promotion initiatives in Thai workplaces.

Key words:

health promotion; human resource; workplace; workplace health promotion management; qualitative study

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INTRODUCTION

The third goal of the United Nations' Sustainable Development Goals (SDGs) focuses on promoting good health and well-being at all ages. Its primary objective is to establish foundational safeguards to ensure that individuals lead lives characterized by optimal physical and mental health.¹ In Thailand, the Cabinet has formulated the National Reform Plan (Public Health), with the latest version emphasizing transformative activities that will bring about significant health improvements for the population. The goal is to increase health literacy of citizens, especially at-risk populations, in order to reduce preventable diseases. This will be achieved through reform efforts aimed at enhancing the effectiveness of health promotion. It encompasses health literacy and disease prevention with a particular focus on workplace policies and measures.² In January 2022, the National Health Reform Committee, in collaboration with the Ministry of Public Health (MoPH) and the Joint Standing Committee on Commerce, Industry and Banking (JSCIB) consisting of the Federation of Thai Industries, the Thai Chamber of Commerce and Board of Trade of Thailand and the Thai Bankers' Association, formulated plans to sign a joint agreement in support of organizational policies aimed at promoting health and preventing non-communicable diseases (NCDs).

According to the previous literature review, however, there are already government departments and organizations in Thailand focused on health promotion and NCD prevention, such as the Ministry of Public Health which is comprised of the Department of Health and the Department of Disease Control. The Department of Labour Protection and Welfare, the Ministry of Labour, as well as the Thai Health Promotion Foundation (ThaiHealth), are also actively involved in these

endeavors. It can be observed that, up to the present moment, there has yet to be an initiative to promote health specifically tailored for implementation by organizations or businesses in the private sector. This is noteworthy considering the pivotal role played by the private sector in propelling Thailand's economy and society forward.³

Prioritizing the importance of employee health and well-being is crucial for fostering employee involvement and commitment.⁴ The work environment, including various work-related factors, has a significant impact on both physical and mental well-being, thereby influencing work performance.⁵ In this regard, the World Health Organization (WHO) emphasizes the importance of promoting health in the workplace for both ethical reasons and the recognition that health impacts business activity. When employees become ill, employers incur a variety of costs, including decreased productivity, absenteeism, presenteeism, and turnover. In this context, a healthy workplace is comprised of four key components: 1) physical work environment, 2) psychosocial work environment, 3) personal health resources, and 4) enterprise community involvement. These components are implemented through leadership engagement and worker involvement.⁶ The core concept involves incorporating these elements as "values" within the organization. Workplace health promotion activities are commonly spearheaded by the Human Resources (HR) department, which maintains communication with employees within the organization. Presently, employee care within organizations is focused on fostering good well-being, a crucial aspect of generating employee engagement.^{7,8}

According to the 2019 report by the Department of Disease Control, MoPH, the NCDs with the highest levels of mortality are all types of cancer, cerebrovascular disease, and ischemic heart disease. There

was an observed upward trend in the approximate mortality rate from NCDs among the population of working-age Thais aged 15 to 70.⁹ In addition, the majority of this working-age population is covered by national health insurance which has significantly contributed to Thailand's economic development.¹⁰ However, national policies specifically aimed at promoting health among this population group are still limited. Current initiatives typically rely on individual workplaces to fund and organize health promotion activities.

This study aimed to investigate the management and implementation practices of health promotion activities in workplaces both at the organizational and national levels among organizational leaders and HR executives.

METHODS

Ethics

This study obtained research ethics approval from the Institutional Review Board, Faculty of Medicine, Chulalongkorn University (Med Chula IRB No.0096/65). The authors uphold key ethical principles throughout the study. "Respect for Person" was observed through an informed consent process, providing comprehensive details about the research to ensure a clear understanding by key informants. Participants were encouraged to make independent decisions, ask questions, and willingly express their consent to join the study. All pertinent information was documented for participants, and their privacy was strictly maintained, allowing withdrawal even after the interview concluded. "Beneficence and non-maleficence" acknowledged that participants may not have directly benefited from the research, and there may have been a time commitment associated with interviews. Nevertheless, the findings of this study harbor the capacity to be implemented for the betterment of the general populace in the future. "Justice"

governed the research with fairness to all key informants, ensuring equal treatment without overlapping benefits. Inclusion criteria involved key informants who voluntarily chose to participate without receiving financial compensation, while exclusion criteria pertained to those with communication impairments or lacking proficiency in the Thai language.

Design and setting

An exploratory design using conventional content analysis with an inductive approach was performed.¹¹ The primary data collection technique employed in this study was in-depth interviews.

High-level executives and HR managers who participated in the research as key informants were selected using a convenience sampling method. These individuals included all top-level executives and HR managers who had been previously engaged through communication and invitations within the network of the JSCCIB, industrial estates, and the Personnel Management Association of Thailand (PMAT).

A total of 27 organizations from various sectors participated in this research, covering all eight industry groups as categorized by the Stock Exchange of Thailand (SET). These groups include the agro-food industry, consumer products, financials, industrials, property and construction, resources, services, and technology.¹² The industrial estates were also included, with enterprises spanning from medium-sized (50-250 employees) to large companies (≥ 250 employees)¹³ The number of employees in these organizations ranged between 110 and 200,000. The total duration of the organization's existence was between 16 and 144 years.

At least one week prior to the scheduled interview, key informants received the study details and provided their informed consent to participate. Prior to conducting the interviews, a pilot interview was conducted with the HR

manager of a selected organization. The interview questions were open-ended, as follows:

1. Could you elaborate on the policies regarding health promotion in your organization?

- i. Does your establishment/organization have a policy regarding health promotion?
- ii. Who takes the lead in implementing health promotion within the organization? How are these leaders designated or appointed?
- iii. If so, what is the nature of your health promotion policy? What are the origins and objectives of this policy?

2. Could you share information about the allocation of resources, budgeting, and activities related to health promotion in your organization?

- i. Have you allocated resources and/or budget to support health promotion within the organization?
- ii. How do you utilize resources and/or allocate budget for health promotion?

iii. What workplace health promotion initiatives have been implemented thus far?

iv. Do you have tips or criteria for conducting workplace health promotion activities?

3. Could you discuss any obstacles or challenges that impact health promotion in your workplace/organization?

- i. If so, what are the obstacles or challenges associated with these activities?
- ii. How do you have strategies for dealing with the obstacles or challenges mentioned?

The interviews were conducted through face-to-face meetings or online video-based platforms from May to November 2022, until data saturation was reached. Each interview lasted approximately one hour. Permission was acquired to record the audio files during the interview. The interviews were later transcribed verbatim.

The total number of key informants participating in the interviews was 35, comprising 20 males. (Table 1)

Table 1. Overview of key informants

Key informant number	Industrial group/Organization	Position
1	Property and construction	Chief Operating Officer
2	Services	HR Director
3	Services	HR Manager
4	Services TCC & BoT	Executive Vice President Committee
5	Services	HR Director
6	Resources	Senior Vice President
7	Services	Executive Vice President
8	TCC & BoT	Vice Chairman
9	Agro-food industry	Executive Vice President
10	Agro-food industry	Occupational Health and Safety (OHS) Manager
11	Industrial estates	Managing Director
12	Industrial estates	Department Manager

Key informant number	Industrial group/Organization	Position
13	Industrials	HR Manager
14	Services	Advisor to Chief Executive Officer
	TCC & BoT	Committee
15	Consumer products	Chairman
	FTI	Deputy Secretary General
16	Financials	Executive Vice President
17	PMAT	President
18	Services	HR Director
19	Agro-food industry	Executive Vice President
20	Services	Assistant Chief Executive Officer
21	Agro-food industry	Chief People Officer
22	Resources	Senior Vice President
23	Industrials	HR Manager
24	Financials	Senior Executive Vice President
25	Financials	Executive Vice President
26	Services	HR Director
27	Agro-food industry	Group Director
	PMAT	Vice president
28	Agro-food industry	Head of Corporate HR Operation
29	Agro-food industry	Deputy Head of Corporate HR Operation
30	Agro-food industry	HR Manager
31	Agro-food industry	OHS Manager
32	Services	HR Director
33	Services	Senior Manager
34	Technology	Advisor to Chief Executive Officer
35	Technology	HR Director

Data analysis

The analysis of data was initiated with the iterative process of listening to the recorded interviews and familiarizing oneself with the transcribed content. This method allowed the development of a comprehensive understanding of the participant's responses. The first author, holding a doctorate in clinical medicine research, conducted the conventional content analysis.¹⁴ The chosen analysis method utilized an inductive approach.¹¹ The first author thoroughly reviewed the data, considering each line, before proceeding to cross-verify its accuracy through investigator triangulation. This involved consulting with the second author, a professor with a doctorate in public health, and another highly qualified expert, holding a doctorate in Global Health and

Population, who served as a committee member in the national reform plan for public health. This validation process aimed to ensure the dependability and confirmability of the data. The researcher diligently maintained documentation for rigorous scrutiny and verification purposes. The first author then sifted through the content, condensing and structuring it into codes using a manual technique. These codes were subsequently compared and organized to develop an analytical plan, giving rise to subthemes. These subthemes were further classified into main themes, and the findings were expounded upon with detailed descriptions. Key statements were identified to exemplify and elucidate the observed phenomena, spanning from the initial to the final occurrences, and concluding with a comprehensive and in-depth

analysis. The second author completed a subsequent review and re-evaluation of the data.

RESULTS

Based on the interviews with key informants, the content was categorized into three main themes: 1) Management

including organizational policies and leadership; 2) Operations including budget allocation, activities and operational tips; 3) Challenges including operational challenges and individual factors. (Table 2). Below are summaries and key phrases from the interviews that characterize aspects of each of the three main themes.

Table 2. Themes and subthemes

Theme	Subtheme
1) Management	1.1) Organizational policies 1.2) Leadership
2) Operations	2.1) Budget allocation 2.2) Activities 2.3) Operational tips
3) Challenges	3.1) Operational challenges 3.2) Individual factors

1. Management

Organizational policies

Large-scale enterprises typically have employee health-related policies included in the Safety, Occupational Health and Environment (SHE) plans of the organization, particularly among conglomerates and internationally operating companies. These companies have centralized policies within the corporate group that cover employee health care [No.6 and 32]. Publicly-listed companies in the stock market consider organizational health policies as an integral part of their sustainability initiatives. "We have pursued sustainability and sought certification from the Dow Jones Sustainability Index (DJSI), as this policy encompasses social responsibility, well-being, and various environmental aspects in our operations" [No.20]. Business owners in organizations prioritize health and have policies aimed at fostering a healthy work culture or organizational values [No.14, 21, 27, and 35]. This policy may extend to corporate social

responsibility (CSR) activities: "...the health promotion policy is considered a social activity for both employees and surrounding communities" [No.11]. Certain enterprises, particularly those in the healthcare sector, regard it as an integral part of their business direction [No.4, 14, and 24].

The formulation of these policies is derived from both top-down approaches, such as ideas or directives from management, and bottom-up approaches, which involves the input and demands of employees.

Leadership

Leadership, in accordance with the policies of organizations that have health promotion policies, primarily consists of the HR department. Some organizations collaborate with the SHE [No.1, 5, and 6]. The SHE is responsible for overseeing employee health and safety, while the HR department handles various employee activities and welfare [No.6]. In certain organizations, a specialized wellness team or health leaders are assigned specific responsibilities for employee well-being

initiatives [No.10, 16, and 21]. "...We reached out to the Provincial Public Health Office to disseminate information on health promotion, involving the existing site supervisors and the appointment of new site supervisors, predominantly from the HR department, serving as 'health leaders' responsible for executing activities for employees" [No.10]. "...The company has instituted a well-being team operated by HR in each department, proactively collecting feedback from employees. They conscientiously address concerns, enhance working conditions, and coordinate various activities tailored to the staff..." [No.16].

2. Operations

Budget Allocation

Workplaces, particularly large-scale enterprises with health promotion policies, have allocated budgets for carrying out health promotion activities within their organizations that go beyond legal requirements. This includes expenses related to employee health examinations in compliance with the Ministry of Labour (MoL) regulations on standard health examinations for employees working in risk-related occupations.¹⁵ Allocation methods vary, including delineated budget allocations such as the annual employee welfare budget format [No.1, 5, 9, 18, 22, and 27]. "...When there is a new project, we discuss it as a team first and then prepare a presentation plan for the management meeting, calculating expenses multiplied by the number of participants to determine the total budget required for implementation..." [No.18]. "...Our company allocates a budget for employee welfare ranging from 15-20%, in addition to the total employee salary. Health-related activities are included in this allocation" [No.27]. Alternatively, there may be additional budget allocations for proposed activities that are aimed at promoting health [No.23]. Some organizational budgets may vary based on their annual performance [No.20 and 21]. Small and medium-sized

enterprises (SMEs) face resource limitations and financial constraints [No.8].

Activities

Activities promoting employee health within the workplace show similarity across the participation organizations. Almost all industrial factories have campaigns that emphasize smoking cessation and better nutrition. There are also subsidized canteens that prioritize quality nutrition [No.1 and 10]. Most of the participating enterprises focus on providing opportunities for physical activities for employees, such as access to health clubs, weight-loss competitions with rewards, and internal sports competitions.

Enterprises invite speakers, especially from the MoPH, and often from the local area where the enterprise is located. These speakers are typically medical professionals. Large-sized enterprises with sufficient resources often hire fitness instructors for activities like yoga for their employees. During the COVID-19 pandemic, online formats were adopted to organize these activities. Enterprises with a significant proportion of younger workers implemented various wellness activities by developing or acquiring smartphone applications to disseminate information and organize events [No.32].

Sports facilities and on-site fitness centers are provided as employee benefits within the premises of the enterprise, primarily at large-sized enterprises, although these amenities are usually limited to the main office buildings of the enterprise. Some enterprises incorporate flexible benefits and a variety of options, allowing employees to utilize them for fitness, healthy food, or leisure travel. [No.6, 19, 20, 22 and 24].

Some workplaces offer additional health screening programs and analyze the results to provide an overview of their employee health issues. "...For the annual employee health examinations, we analyze the data to identify the common health problems among our employees...This

analysis helps us make informed decisions and plan future health promotion activities..." [No.5].

Operational tips

A common feature among workplaces that have diverse health promotion policies and activities is the emphasis on employee health placed by organizational leaders at various levels. They recognize the significance of employee health promotion, actively participate in various activities themselves, and set a vision accordingly [No.28]. The top management themselves serve as role models for healthy practices. "...How could someone who doesn't care about their own health possibly care for the organization and care for others?" [No.9].

In the realm of operational management, particularly in organizations with multiple sites, there is a significant focus on knowledge sharing. Successful activities in each location are shared as examples within the organization [No. 10 and 16]. This also includes the establishment of Key Performance Indicators (KPIs). Regarding health promotion, systematic collection, management, and analysis of health data occur within the organization. Several units report this information to management through a dashboard. [No.7]. Furthermore, there is recognition and rewards at the organizational level for maintaining good health status to motivate collective action. "...Social incentives are sometimes necessary to drive desired outcomes within teams..." [No.7].

Creating an internal atmosphere within the organization is crucial, starting with internal communication [No.20 and 27], as well as fostering a sense of camaraderie in carrying out operational activities and participation in health promotion initiatives [No.35]. Understanding and gaining approval from supervisors at all levels to allow subordinates to participate in activities is

important. These activities should be enjoyable and meaningful, such as inviting renowned fitness instructors or influencers to lead fitness sessions or organizing popular fitness activities [No.1 and 16]. Employees are more likely to engage in activities when there are incentives, including individual rewards for participating in activities [No.1, 7, 8, and 18]. In workplaces with younger employees who value self-expression and acceptance, events tailored to them are planned, "...young employees nowadays enjoy events, so we need to offer a variety of activity formats to motivate them..." [No.32]. Workplaces prepare physical and virtual spaces, including social media platforms and online activities, to allow younger employees to express themselves in various activities [No.27].

3. Challenges

Operational challenges

A crucial obstacle in health promotion operations is resource limitation, particularly for small businesses with limited funding for operational activities. "...The private sector views investments in health as costs, and often perceives unclear returns on investment..." [No.8] The impact of the COVID-19 pandemic has affected revenue and business outcomes, leading to repercussions on employee welfare [No.14].

In larger enterprises with greater readiness, there are spatial challenges, especially for organizations with multiple locations/branches. It becomes difficult for HR to effectively coordinate activities that can encompass all employees across every location/branch [No.3 and 35]. However, it has been observed that when employees reside within the company premises, such as by having dormitories near the factory which saves commuting time, it enables better management and support for health promotion activities and greater availability

by employees, resulting in higher employee participation [No.19].

The nature of work is another challenging area in workplace health promotion, such as employees working in shifts or those in the transportation and logistics industry [No.3]. Operative employees involved in production or service sectors find it more difficult to participate in activities compared to office workers due to time constraints and location barriers. "...Coordinating group activities for employees, such as exercise, poses a significant challenge. Occasionally, the attendance is satisfactory, but most participants are office staff, typically available after regular working hours. For service staff, particularly those in hotels working in shifts, participation is quite challenging due to the early start of their work shifts..." [No.5].

In some workplaces where activities or exercise facilities are provided for employees, there is a generation gap that affects participation. Older supervisors view participation as work time, while younger employees seek flexibility in time management, work-life balance, and quality of working life [No.17, 20, and 33]. There is also the issue of the sustainability of health promotion activities in the long term. Initially, there is support for organizing activities, but over time, participation often dwindles or the continuity of operations is not maintained [No.15].

Challenges beyond workplace control involve unfavourable external environments. For instance, the lengthy commuting time between home and work and traffic congestion, leave little time for health care activities such as exercise, even though there may be support at workplaces. In addition to these challenges, a lack of healthy food options around workplaces may pose difficulties in accessing nutritional meals that may not be readily available to employees [No.6].

Individual Factors

Personal behaviour modification is difficult for employees in general, making it challenging to bring about changes in health-related behaviors [No.4]. Employees often lack knowledge or awareness of health care [No.10]. Employee participation in various health promotion activities tends to be relatively low, and those who participate are frequently found to be the same people [No.7]. There is a lack of consciousness-building from the beginning of employment, or, if still young and physically fit, employees tend not to realize the importance of maintaining good health practices [No.9 and 11].

Limited time and heavy workloads make employees feel constrained in their working hours. During the outbreak of the COVID-19 pandemic, work-from-home arrangements resulted in employees spending more time on work than before and working irregular hours [No.22 and 35.]

The workplace environment and social dynamics, including industry characteristics, has been shown to have an impact on employees. "...Heavy industries with a predominantly male workforce and a smoking culture make it challenging to campaign against smoking compared to handcraft groups, where women tend to have fewer issues..." [No.12]

DISCUSSION

Study data has been derived from interviews conducted with key informants who discussed the presence or absence of internal policies concerning health promotion within their organizations. Insights and best practices for implementing health promotion activities in workplaces or organizational settings, along with identified barriers and challenges, were explored. These challenges can be categorized into two subtopics: operational challenges within the organization and individual-level barriers.

One intriguing aspect is that in 2005, Thailand hosted the Sixth WHO Global Health Promotion Conference. During this event, "The Bangkok Charter for Health Promotion in a Globalized World" was announced. The charter underscored the fundamental importance of establishing the right to health promotion for all humanity, emphasizing active participation from various sectors, extending beyond the public sector to include private organizations. It specified that health and safety in the workplace, aimed at elevating the well-being of employees, as well as their families and communities, is a crucial component in establishing good corporate practices.¹⁶ For an organization to achieve success, especially in the area of workplace health promotion, it must have a clear management approach, including organizational policies. It should adhere to the principle that work and health are inseparable and mutually supportive.¹⁷

Currently, the HR policy direction emphasizes employee satisfaction. HR also has the responsibility to improve the quality of the work environment in all dimensions including working conditions, work-life balance, and health and safety in collaboration with SHE initiatives.¹⁸ Good health and well-being are directly impacted by work-related factors. The presence of illness and the need for medical care can have a negative effect on the productivity of employees.¹⁹ According to the findings of this study and a review of the pertinent literature, it is evident that the quality of working life is a crucial aspect of HRM, as it is responsible for job satisfaction, advancement opportunities, job stability, and job content. The personal lives of employees and the achievement of a work-life balance play a significant role in promoting general well-being.²⁰ Organizations face challenges in the current environment, particularly in the field of HRM, where they endeavour to retain talented employees

within the organization. Employee engagement plays a crucial role. According to empirical evidence, employees place a high value on maintaining a work-life balance.²¹ The HRM presents significant challenges, particularly in the creation of positive employee experiences. This aspect is considered one of the organizational objectives in HRM, and it falls under the responsibility of managers to foster employee engagement.²²

The active commitment of employees goes beyond their contractual obligations and contributes to a positive perception of the organization. It includes employee satisfaction, as well as promoting dedication to the job and involvement in decision-making processes.²³ Empirical evidence suggests a significant correlation between such factors and improved working performance of employees²⁴, reduced turnover, increased advocacy, and enhanced personal well-being.²⁵ Effective management of workplace health promotion plays a crucial role in fostering employee engagement and should be established as a policy or strategy within the organization. This should also include the development of performance indicators designed to promote well-being of the employees.⁷ Moreover, it has positive effects on the organization's image and business reputation, as well as on the employers.²⁶ It also encompasses CSR as an integral part.²² Conversely, if an organization fails to support health promotion initiatives, it can have detrimental effects both financially, such as increased costs due to frequent employee turnover, and in terms of overall productivity and performance, resulting from employee absenteeism.²⁷

The leadership in implementing workplace health promotion should come from top-level executives who serve as role models and possess decision-making authority within the organization. This commitment to health promotion should then cascade

down through every level of management. Concerning the implementation of activities, the organization should allocate a budget and provide space for these initiatives. In terms of the activity format, it is recommended to align with the organization's characteristics, considering the organizational culture. This includes essential components such as company values, norms, leadership styles, and the characteristics of individuals within the organization. Regardless of differing generations, abilities, skills, and expectations, it is crucial to consider the provision of various rewards and recognition.²⁸

To become a 'healthy workplace', an organization must ensure that its initiatives to promote well-being of its employees are aligned.⁶ A systematic literature review concludes that workplace health promotion involves six levels of factors that need to be considered. These include: 1) contextual level factors, such as economic conditions; 2) organizational level factors, which pertain to work management structures, processes, and organizational frameworks; 3) interventional level factors, such as implementation guidelines, models, and concepts, as well as stakeholder involvement; 4) implementer level factors, focusing on attitudes, resources, and capabilities; 5) participant-level factors, which involve fostering a sense of participation in activities; and 6) methodological and data aspects, emphasizing data collection and evaluation.²⁹

STRENGTHS AND LIMITATIONS

Based on the literature review, this study is the first national-level study in Thailand regarding leaders and high-level human resource managers who have the closest proximity to employees. Prior to this study, there was a lack of systematic research, especially in the private sector, focusing on workplace health promotion. In terms of organizational policies, activities,

and policy recommendations for national policy-makers, Thailand had previously implemented a project called "365 Days, Disease-Free State," which focused on studying the organizational well-being in public sector agencies and implementing health promotion initiatives specifically targeting public sector personnel participating in the project.³⁰ Furthermore, this study represents the first instance of research that encompasses a comprehensive examination of various industries within the business sector, covering all eight industry groups as classified by the SET.¹² This study also includes the participation of the executive boards of the JSCCIB, which serve as the focal point for private sector businesses in Thailand, as well as the PMAT, the primary professional body for HRM in the country. The utilization of conventional content analysis as a research design is deemed appropriate for investigating and elucidating specific phenomena, particularly when the existing knowledge, theories, or frameworks pertaining to the subject matter are limited.³¹

The present study has certain limitations. Firstly, the key informants were mainly volunteers recruited through various channels, reflecting their voluntary participation rather than being representative of the general population. Most key informants came from large-scale enterprises, and the study did not include participants from small-sized workplaces. Large-scale enterprises often possess readiness in multiple aspects, such as policies and resources, which may not be available to all businesses in the country. In practical terms, it is not possible to ascertain whether the reported information, including policies and implemented measures by each individual workplace, has been effectively carried out or yielded tangible outcomes. Additionally, the nature of this qualitative study, utilizing traditional content analysis, inherently carries limitations in terms of validity and reliability, while emphasizing theory development or explaining

phenomena rather than solely deriving conclusions from observed occurrences.¹¹

RECOMMENDATIONS

One suggestion for future research or initiatives related to workplace health promotion at the organizational level is to explore methods to capture the attention of organizational leaders and HR executives to emphasize the importance of employee health. In addition, the development should foster an organizational culture focused on employee health and well-being. This process includes incorporating health check results, physical conditions, and surveys of employee needs. Analyzing and studying health-related issues among employees, understanding the factors involved, and examining the relationship between productivity and organizational costs are crucial components of this process. This data can then be used to plan various activities, such as providing employees with knowledge and practical skills in preventing and addressing health issues precisely. The next step involves studying guidelines to enhance the environment conducive to health promotion. Allocating a budget specifically for health promotion and conducting training for relevant personnel including HR personnel to acquire knowledge and skills related to health promotion within the organization is crucial for building the infrastructure needed for effective workplace health promotion. Furthermore, ongoing evaluation and monitoring of the progress of these activities are essential. Consideration may be given to understanding the return on investment (ROI) to assess the effectiveness of workplace health promotion initiatives.

This study provides empirical evidence regarding workplace health promotion in various workplaces. The findings serve as a reference for formulating effective and impactful measures and initiatives to

enhance health promotion within the workplace context. They can be utilized by different types of businesses in Thailand to inform their strategies and actions aimed at promoting and improving health outcomes within the workplace, ensuring effectiveness.

The findings of this study can be further developed into policies and operational activities that establish standardized criteria for workplace health promotion. The research findings serve as fundamental data, and a reference for future policymaking at the organizational and national levels. They will help address the gaps in previous research, which lacked a systematic design and implementation.

CONCLUSIONS

The participating organizations in this study have implemented health promotion management within their workplaces. These organizations have policies related to various forms of health promotion, with HRM leading the implementation. Budgets allocated for health promotion activities often exceed legal requirements and may be in the form of annual budgets or project-specific allocations. The activities implemented to enhance health promotion encompass a wide range of approaches, including exercise programs, healthy eating initiatives for employees, inviting guest speakers for lectures, providing dedicated spaces for activities, planning employee activities, and analyzing health examination data for health monitoring.

The key success factors in implementing these activities are the commitment and involvement of organizational leaders, the creation of a supportive organizational culture, and the knowledge-sharing of operational guidelines. Challenges identified can be classified into two levels: operational factors such as location, job nature, and the external environment of

the workplace, and individual factors such as personal behaviour adjustment and awareness.

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