

Summer 2023

The Mediating Role of Perceived Organizational Support on the Relationship between Wellness Programs and Job Satisfaction

Andy Tran
San Jose State University

Follow this and additional works at: https://scholarworks.sjsu.edu/etd_theses



Part of the [Psychology Commons](#)

Recommended Citation

Tran, Andy, "The Mediating Role of Perceived Organizational Support on the Relationship between Wellness Programs and Job Satisfaction" (2023). *Master's Theses*. 5483.

DOI: <https://doi.org/10.31979/etd.s5bz-sdag>

https://scholarworks.sjsu.edu/etd_theses/5483

This Thesis is brought to you for free and open access by the Master's Theses and Graduate Research at SJSU ScholarWorks. It has been accepted for inclusion in Master's Theses by an authorized administrator of SJSU ScholarWorks. For more information, please contact scholarworks@sjsu.edu.

THE MEDIATING ROLE OF PERCEIVED ORGANIZATIONAL SUPPORT ON THE
RELATIONSHIP BETWEEN WELLNESS PROGRAMS AND JOB SATISFACTION

A Thesis

Presented to

The Faculty of the Department of Psychology

San José State University

In Partial Fulfillment

of the Requirements for the Degree

Master of Science

by

Andy Tran

August 2023

© 2023

Andy Tran

ALL RIGHTS RESERVED

The Designated Thesis Committee Approves the Thesis Titled
THE MEDIATING ROLE OF PERCEIVED ORGANIZATIONAL SUPPORT ON THE
RELATIONSHIP BETWEEN WELLNESS PROGRAMS AND JOB SATISFACTION

by

Andy Tran

APPROVED FOR THE DEPARTMENT OF PSYCHOLOGY

SAN JOSÉ STATE UNIVERSITY

August 2023

Howard Tokunaga, Ph.D.	Department of Psychology
Megumi Hosoda, Ph.D.	Department of Psychology
Cathy Bui, M.S.	Stepping Stones Preschool

ABSTRACT

THE MEDIATING ROLE OF PERCEIVED ORGANIZATIONAL SUPPORT ON THE RELATIONSHIP BETWEEN WELLNESS PROGRAMS AND JOB SATISFACTION

by Andy Tran

The purpose of the current study was to examine the mediating role of perceived organizational support (POS) on the relationship between wellness programs (participations and availability) and job satisfaction. A total of 83 employees participated in the study, which utilized online survey distribution. Results showed that POS fully mediated the relationship between both participation and availability of wellness programs and job satisfaction. In other words, employees who participated in a wellness program felt more supported by their organization, leading to greater job satisfaction. In addition, the results suggested that when organizations offered more wellness programs, employees were more likely to perceive higher levels of support from their organization, resulting in greater job satisfaction. Given that both participation and availability of wellness programs were positively related to job satisfaction, organizations could use this finding to justify investing more into wellness programs for their employees.

ACKNOWLEDGEMENTS

First and foremost, I would like to thank my thesis chair, Dr. Howard Tokunaga, for his guidance and genuine support throughout the entire thesis process. I appreciate the invaluable advice you have provided and the conversations we have had throughout the development of my thesis. I would also like to thank my second chair, Dr. Megumi Hosoda, for her wisdom and keen eye to detail. Lastly, I am incredibly grateful to Cathy Bui, my third reader, for her insightful guidance and invaluable feedback that have significantly contributed to the improvement of my paper.

Without the love and support from my friends and family, I would not be where I am today. To my girlfriend, Kristy, thank you for believing in me, even when I didn't believe in myself. You make me feel like I can conquer the world and I would not be where I am without you. I would like to also thank my family for all their love and support, and my friends for always being there to cheer me up whenever I felt sad or burnt out. In addition, I would like to thank one of the greatest people I met in this program, Shaina Law. Thank you for being the best partner throughout this program. I am really glad I met you. I do not think I would have survived this program without you. Lastly, to my cohort, thank you for making my grad experience interesting.

TABLE OF CONTENTS

List of Tables	vii
List of Figures	viii
Introduction.....	1
History of Wellness Programs	1
Brief on Employee Physical Health.....	4
Components of Wellness Programs	5
Outcomes of Wellness Programs	7
Wellness Programs and Physical Health.....	7
Wellness Programs and Productivity	9
Wellness Program and Job Satisfaction.....	12
Wellness Program and Perceived Organizational Support	13
POS as a Mediator	16
Purpose of the Current Study	20
Method	23
Participants.....	22
Measures	25
Wellness Programs.....	25
POS	26
Job satisfaction.....	27
Demographic Information.....	27
Procedure	27
Results.....	29
Descriptive Statistics.....	29
Pearson Correlations	30
Test of Hypotheses.....	31
Discussion	36
Summary of Findings.....	36
Theoretical Implications	37
Practical Implications.....	38
Strengths of the Study.....	40
Limitations and Directions for Future Research	40
Conclusion	41
References.....	43
Appendix.....	47

LIST OF TABLES

Table 1.	Demographic Characteristics of Survey Respondents.....	24
Table 2.	Descriptive Statistics and Pearson Correlations	29
Table 3.	The Relationship Between Participation in Wellness Programs and Job Satisfaction as Mediated by Perceived Organizational Support (POS).....	32
Table 4.	The Relationship Between Availability of Wellness Programs and Job Satisfaction as Mediated by Perceived Organizational Support (POS).....	34

LIST OF FIGURES

Figure 1.	POS as a mediator of the relationship between participation in wellness programs and job satisfaction.....	22
Figure 2.	POS as a mediator of the relationship between availability of wellness programs and job satisfaction.....	22
Figure 3.	A simple mediation model with POS as the proposed mediator of the relationship between participation in wellness programs and job satisfaction	33
Figure 4.	A simple mediation model with POS as the proposed mediator of the relationship between availability of wellness programs and job satisfaction.	35

Introduction

Wellness programs are organizational initiatives designed to promote healthy lifestyles and behaviors among employees (Baicker et al. 2010). With the increase in employees with chronic diseases over the years (Mattke et al., 2012) and the added concern for employee health and safety during the pandemic, wellness programs have become increasingly popular in the workplace.

For those who take part in wellness programs, studies have shown positive outcomes such as reduced absenteeism, increased productivity, and greater job satisfaction (Gubler et al., 2018; Losina et al., 2017; Marshall, 2020; Parks & Steelman, 2008). However, much of the research to date on wellness programs and job satisfaction has focused on the direct relationship between these variables without examining the potential influence of mediators. Therefore, this study examined the relationship between two aspects of wellness programs, participation and availability, and job satisfaction while considering the potential mediating role of perceived organizational support (POS).

History of Wellness Programs

Wellness programs are more prevalent in big companies today than they have ever been (Kaiser Family Foundation, 2021). However, according to Reardon (1998), it was not until the mid-1970s that real workplace wellness programs emerged. The first significant corporate wellness program was Johnson & Johnson's Live for Life program, which began in 1979 and is recognized as the prototype for wellness programs. This program consisted of a questionnaire and a physical examination to collect data on each participant's activity level

and body fat percentage. With the program, the organization was able to assist in the control of behaviors such as weight management, nutrition, and stress management (Pencak, 1991).

In 1979, Surgeon General Julius Richmond published a historic report entitled “Healthy People: The Surgeon General’s Report on Health Promotion and Disease Prevention” (Health.gov, n.d), which prompted the Office of Disease Prevention and Health Promotion (ODPHP) to launch Healthy People 1990. This effort had an ambitious, measurable 10-year goal to improve the health and well-being of the nation, with a focus on reducing mortality across the life span and boosting older individuals’ independence. After every decade, a new version of the Healthy People program was created, each building on the previous one.

In the 1980s, wellness programs appeared to focus exclusively on the physical health components of wellness while ignoring the other dimensions. As a result, companies did not consider psychological well-being as part of a more comprehensive workplace wellness strategy until the late 1980s, when the Occupational Safety and Health Administration (OSH) launched a program emphasizing workers’ mental health. The program was designed to address the problem of work-related mental health issues, with a particular emphasis on stress-related illnesses (Reardon, 1998). This was followed in 1991 by the Managing Depression in the Workplace program, an effort developed by the National Institute of Mental Health to prevent employee mental health disorders caused by the workplace, such as depression (Reardon, 1998).

In the 1990s, the ODPHP introduced the second iteration of the Healthy People initiative, Healthy People 2000, which advocated that 75% of businesses with 50 or more employees give health promotion services as an employee benefit (Reardon, 1998). This initiative was

guided by three key goals: to increase healthy life expectancy, to reduce health inequities, and to ensure that everyone has access to preventative care (Health.gov, n.d). Despite the lack of studies supporting the advantages of worksite wellness, the idea that workplace health promotion provides benefits to organizations by having a favorable effect on employees gained popularity among companies, who began to promote such programs more widely (Pencak, 1991).

In 1996, the Pender's Health Promotion Model had a significant role in guiding the development of workplace wellness programs (Reardon, 1998). The Pender Model aimed to assist individuals in achieving greater levels of well-being and went beyond the physical aspect of health by taking a more holistic view of individuals. Specifically, the Pender Model asserted that a person's qualities, demographics, and life experiences substantially impact their actions and decisions about their engagement in health promotion behavior (Reardon, 1998).

In January 2000, the ODPHP launched the third iteration of Healthy People, named Healthy People 2010. Like Healthy People 2000, Healthy People 2010 sought to have 75% of businesses with 50 or more employees implement a health promotion plan with the same three goals in mind (Hughes et al., 2011). However, Healthy People 2010 placed a greater emphasis on enhancing the quality of life, with one of its primary aims being to eliminate health disparities rather than simply diminish them (Health.gov, n.d).

The fourth iteration of the Healthy People initiative, Healthy People 2020, consisted of four primary objectives (Health.gov, n.d). The first objective was to achieve high-quality, longer lives free from preventable disease, disability, damage, and death. The second

objective was to attain health equity, eradicate disparities, and promote the health of all people. The third objective was to develop social and physical conditions that enhance the health of all individuals. The final objective was to increase life quality, healthy growth, and healthy behaviors throughout all stages of life. The fifth and most recent version of Healthy People, Healthy People 2030, builds on the data collected over the past four decades and places a greater emphasis on health equity, social determinants of health, and health literacy, in addition to a new emphasis on well-being (Health.gov, n.d).

Brief on Employee Physical Health

Most health promotion initiatives are based on the idea that the main causes of premature mortality and disease are lifestyle-related and can be prevented (Song & Baicker, 2019). Health promotion initiatives are intended to help people avoid death and illness while also enjoying a good quality of life. However, chronic diseases have become a substantial challenge in the United States as they reduce the quality of life, account for severe impairment in 25 million Americans, and are the leading cause of death, taking 1.7 million lives annually (Mattke et al., 2012). Chronic disease is defined by the World Health Organization (WHO) as noncommunicable diseases that are often long in duration and generally progress slowly (WHO, 2017). The four most prevalent chronic diseases, collectively responsible for almost 70% of all deaths worldwide, are cardiovascular diseases (such as heart attacks and strokes), cancers, chronic lung diseases (such as chronic obstructive pulmonary disease and asthma), and diabetes (WHO, 2017). Inactivity, poor nutrition, tobacco use, and excessive alcohol use are the four key risk factors known to cause chronic illnesses (WHO, 2017). Although it was once believed that workers aged 55 and

older were more susceptible to chronic diseases, in the recent decade the prevalence of chronic diseases has increased by 25% among working-age adults between the ages of 25 and 54 (Mattke et al., 2012).

The rising prevalence of chronic health issues among employees has been demonstrated to have a considerable economic impact. Chronic diseases, for example, have contributed to increases in health-related costs, including both direct medical costs and indirect costs resulting from absenteeism and decreased productivity and engagement (Losina et al., 2017; Parks & Steelman, 2008).

Employers have started wellness program initiatives with the objective of influencing employees' long-term health behaviors in response to the growth in chronic diseases and their associated problems (Mattke et al., 2012). If major causes of chronic disease and early mortality can be avoided, it is widely assumed that some of the expenses involved with treating such diseases can also be avoided or reduced significantly. As a result, wellness programs may have a significant influence on employee health care costs. Wellness programs are also expected to have an influence on employee absenteeism, resulting in additional advantages for organizations who provide comprehensive wellness programs.

Components of Wellness Programs

Wellness programs are offered to employees as a preventative tool to help avoid illnesses and improve or maintain overall health and well-being. As the number of organizations implementing wellness programs continues to rise, it is crucial to understand the various aspects of wellness programs. Comprehensive wellness programs include physical and educational components, oftentimes integrating both (Parks & Steelman, 2008). When

looking at the physical aspect of comprehensive wellness programs, these programs aim to enhance employees' physical health. According to a 2014 poll conducted by Willis Health and Productivity, 90% of companies that provided wellness programs include a physical activity component (Willis Towers Watson, 2014). These programs differ from company to company. For example, some companies may provide on-site fitness centers for their employees, while others may have free or discounted memberships for off-site fitness centers (Sandercook & Andrade, 2018). In addition, as the number of individuals working from home has increased in recent years, many employers now give allowances or reimbursements for employees to purchase their own fitness-related equipment (Homonoff et al., 2020)

Educational wellness programs are another aspect of comprehensive wellness programs that focus on teaching employees how to improve or maintain overall health and avoid illnesses (Aldana et al., 2005; Parks & Steelman, 2008). Because of their scalability and low cost, educational wellness programs are typically the first effort given by organizations. These programs give employees relevant, high-quality, and timely health information through on-site seminars, online webinars, and other media like newsletters. An example of an educational wellness program is a mindfulness-based stress reduction (MBSR) program, an 8-week, patient-centered, evidence-based intervention that teaches mindfulness meditation, breath-work, basic yoga, and other relaxation techniques (Bazazrko et al., 2013). Other examples of educational wellness programs include nutrition education and smoking cessation seminars, both of which attempt to teach participants how to live better lifestyles and overcome addictions.

Comprehensive wellness programs incorporate both physical and educational components to provide programs for health promotion and disease management, with an emphasis on personalized risk reduction for employees. This integrated approach has been shown to be much more successful in avoiding illness and enhancing general health than separate approaches (Person et al., 2010). Although wellness programs may vary across companies, their success will be maximized by incorporating both physical and educational components.

Outcomes of Wellness Programs

Wellness Programs and Physical Health

The prevalence and severity of chronic diseases are a growing concern in the workforce. While it is impossible to eradicate inherent risk factors for chronic disease, wellness programs have been found to lessen the negative effects of other risk factors on employees' health. For example, studies have shown that a tailored wellness program can significantly reduce risk factors such as poor nutrition, physical inactivity, obesity, smoking, and excessive alcohol consumption, and, in turn, reduce chances of chronic disease-related illnesses and early mortality (Anderson et al., 2009; Gånedahl et al., 2015).

A study by Gånedahl et al. (2015) sets out to evaluate the relationship between participation in a work-site wellness program and physical activity. The study revealed that individuals who participated in the workplace wellness program engaged in more physical activity and reported better overall health outcomes compared to those who did not participate. These results suggest that wellness programs can be an effective way to increase

physical activity and improve the health of employees because it provides them with resources, support, and incentives to engage in healthy behaviors (Gånedahl et al., 2015).

In a second study, Lowensteyn et al. (2018) discovered that high participation rates in wellness programs led to substantial improvements in physical activity, with participants increasing their physical activity levels to approximately 90 minutes of moderate activity or 45 minutes of vigorous activity. These increases in physical activity were associated with decreases in physical fatigue, blood pressure, and cholesterol, and increases in muscle gain (Lowensteyn et al., 2018).

Increasing physical activity is crucial for weight loss and better health in general. Anderson et al. (2009) conducted a meta-analysis to examine the efficacy of worksite nutrition and physical activity programs in promoting healthy weight among employees. At six- to 12-month follow-ups, participation in worksite nutrition and physical activity programs resulted in modest improvements in employee weight status. Multiple studies indicated both weight loss and a decrease in body mass index (BMI), and the findings appeared applicable to both male and female employees in a variety of workplace contexts (Anderson et al., 2009).

Although the goal of wellness programs may be clear, there are conflicting findings when examining how they improve employee health. Recent research conducted by Reif et al. (2020) evaluated the impact of a comprehensive workplace wellness program on employee health, health beliefs, and medical use at 24 months among employees of the University of Illinois at Urbana-Champaign. The researchers discovered that a 24-month comprehensive workplace wellness program significantly improved employee perceptions of their personal

health and raised the proportion of employees who reported seeing a primary care physician. However, after 24 months, no significant effects were observed on physical health outcomes, medical diagnosis rates, or the utilization of health care services. These findings indicate a discrepancy between employees' views of their health and actual physical and administrative health measurements when engaging in wellness programs.

In a similar study, Song and Baicker (2019) examined the impact of wellness programs on employee health. However, instead of university personnel, BJ's Wholesale Club employees participated in the study, which lasted 18 months as opposed to 24 months. Although the participants and duration of the intervention varied between the two studies, the outcomes were similar. Song and Baicker (2019) revealed that among employees of the large U.S. warehouse retail organization, a workplace wellness program resulted in considerably greater rates of positive self-reported health behaviors among those who participated than those who did not. However, similar to Reif et al. (2020), there were no statistically significant differences in clinical measures of health, health care cost and utilization, and employment outcomes between the two groups after 18 months.

Wellness Programs and Productivity

Workplace productivity may be described as the efficiency of a company's workforce, which can be measured by the quantity of goods or services produced or delivered in a certain time period (Gubler et al. 2018). Increasing productivity is a goal shared by practically all organizations. However, there are a number of issues that hamper workplace productivity, such as absenteeism, which refers to when an employee habitually misses work without justification, presenteeism, which refers to when an employee continues to work

while feeling ill, and employee turnover (Bergström et al., 2009). When these issues occur in an organization, their effects can negatively impact productivity and ultimately profits.

According to the American Institute of Stress (n.d.), businesses lose around \$300 billion annually due to absenteeism, turnover, workplace stress, and workplace accidents. To combat these losses, companies have resorted to implementing wellness programs (Parks & Steelman, 2008). This assumes that with the implementation of wellness programs, employee health will improve, resulting in fewer rates of absenteeism (Losina et al., 2017; Parks & Steelman, 2008).

A few studies have illustrated the positive effect of wellness programs on decreasing absenteeism. For example, Parks and Steelman (2008) examined the difference in absenteeism between those who participated in wellness programs and those who did not. Their results showed that those who engaged in wellness programs generally had lower rates of absenteeism than those who did not, supporting the idea that employees who participate in wellness programs are healthier and therefore less likely to incur sickness-related absences (Parks & Steelman, 2008). They even suggested that comprehensive wellness programs, which commonly include educational classes that provide knowledge and resources needed to maintain one's physical and mental health, could aid in the prevention of employee health issues and the reduction of employee absences (Parks & Steelman, 2008).

Physical health is another key component to decrease absenteeism. Losina et al. (2017) examined the association between physical activity and unscheduled absences from work due to illness and found that less physically active people (i.e., people who presumably participated less in the physical activity program) and those with various chronic medical

conditions had greater rates of unplanned illness-related absenteeism than those who were more physically active. These findings are consistent with other studies that have found more physical activity leads to fewer absences and future risks of absenteeism (Lahti et al., 2010; Lahti et al., 2012).

Whatever the causes may be, employees missing work due to sickness, stress, family troubles, dissatisfaction with their jobs, or a desire for an extra day off may indicate a bigger workforce satisfaction problem or related issues. Regardless of the cause, organizations may decrease absenteeism while increasing workforce productivity by implementing wellness programs that are aimed at promoting healthy lifestyles and rewarding employees for excellent attendance and working efficiently.

In a study by Gubler et al. (2018), the researchers outlined strategies to help increase productivity by launching wellness programs that helped employees track and improve their health and well-being. The results indicated that implementing a corporate wellness program might considerably impact employee productivity, with even greater productivity increases for those whose health improved because of the program (Gubler et al., 2018). Although the results demonstrated greater benefits for those who improved their health, the researchers argue that firms should not focus only on enabling sick employees to identify and mitigate health issues. Rather, the study suggests that all types of employees can benefit from implementation of wellness programs. In addition, Gubler et al. (2018) found that organizations profited financially from the higher productivity of employees who participated in wellness programs, citing the program's favorable effect on employee productivity as a contributing reason.

The correlation between productivity and profitability suggests that an organization's financial success is dependent on the productivity of its employees. Amid escalating health expenditures and sickness-related absences, there is an increasing interest in workplace illness prevention and wellness programs to enhance employee health and reduce profit loss. In a meta-analysis of literature on costs and savings associated with wellness programs, Baicker et al. (2010) discovered that even in just the first few years after adopting wellness programs, large organizations received significant positive returns. The study found that, for every dollar spent, wellness programs reduced medical expenditures by \$3.27 and absence day costs by \$2.73 (Baicker et al., 2010). While wellness programs are unquestionably advantageous for employees, they are also advantageous for organizations, either through lower replacement costs for absent workers or an advantage in recruiting new talent (Baicker et al., 2010).

Wellness Program and Job Satisfaction

Wellness programs have been found to have a positive impact on job satisfaction, in addition to increasing productivity. Job satisfaction is the extent to which an employee likes or dislikes their job and feels fulfilled by it (Parks & Steelman, 2008), and offering a wellness program is one aspect that can improve it. By voluntarily participating in wellness programs, employees can benefit from increased job satisfaction and overall well-being, which can contribute to greater revenue and profitability. This is because employees who are satisfied with their jobs tend to be more motivated and productive (Westover & Taylor, 2010). Therefore, job satisfaction is a critical variable that was in this study.

In a study, Marshall (2020) evaluated the extent to which a comprehensive wellness program influenced employees' job satisfaction in order to determine what wellness programs could influence besides employees' health. The purpose of the study was to investigate the impact of participation in the wellness program on employees' job satisfaction, including both intrinsic elements (e.g., the characteristics of the job itself) and extrinsic elements (e.g., conditions and circumstances external to the job). The study found that even when organizations devoted resources to develop and implement wellness programs, only those who participated in these programs showed increases in extrinsic and intrinsic job satisfaction (Marshall, 2020). Similarly, in another study by Abdullah and Lee (2012), respondents who participated in a wellness program reported greater job satisfaction than respondents who did not participate. Therefore, organizations and leaders should not only aim to implement wellness programs but also actively encourage employees to participate, while creating a culture that wellness programs is perceived as positive to help increase job satisfaction.

Wellness Program and Perceived Organizational Support

According to the organizational support theory, wellness programs can positively affect not only job satisfaction but also the perceived organizational support (POS) of employees. POS is defined as the degree to which employees believe their organization values their contributions and cares about their well-being (Eisenberger et al., 1986). Referencing social exchange theory (Blau, 1964), organizational support theory asserts that employees feel an inherent need to repay favorable and helpful treatment they receive from their organization by developing positive attitudes toward it and by assisting it in achieving its goals (e.g.,

Eisenberger et al., 1986). Organizational support theory also mentions that POS meets employees' socio-emotional needs such as the need for esteem, resulting in positive attitudes and actions toward the organization as well as improved subjective well-being (Kurtessis et al., 2017).

POS has been shown to be driven by various factors, with some of the most influential factors being supervisor support, fairness, and organizational reward and job conditions (Rhoades & Eisenberger 2002). Because supervisors are representatives of the organization and are responsible for overseeing and evaluating subordinates' performance, employees interpret their supervisor's favorable or unfavorable attitude toward them as a reflection of the organization's support (Eisenberger et al., 1986). Consequently, if employees see that their supervisors support them and their jobs, they will perceive that their organization supports them as well.

Fairness is another factor that influences POS. When employees believe they are treated fairly in comparison to their coworkers, they feel supported, respected, and heard. Rhoades and Eisenberger (2002) state that repeated instances of fairness in resource distribution decisions also have a strong cumulative effect on POS through demonstrating concern for employee well-being.

Another important factor that has a significant influence on POS in the workplace is organizational reward and job conditions. This is a broad factor, but examples that have been examined in relation to POS include recognition, pay and promotions, and autonomy. When looking at recognition and pay and promotions, organizational support theory asserts that favorable opportunities for rewards serve to transmit a positive evaluation of employees'

achievements and hence contribute to POS (Rhoades & Eisenberger 2002). Autonomy is when employees perceive they have control over how they perform their jobs, including scheduling, work procedures, and task diversity. High autonomy should boost POS as it demonstrates the organization's trust in the employee's ability to make informed decisions regarding job performance (Rhoades & Eisenberger 2002). With so many factors that can affect POS, organizations can increase employees' POS in a variety of ways, such as enhancing their employees' working conditions, rewarding those who put in extra effort, conducting management surveys, collecting employee feedback, and cultivating a fair and supportive work environment (Rhoades & Eisenberger 2002; Sun, 2019).

Although there are very limited studies on the relationship between wellness programs and POS, the studies that have tested the relationship have found positive correlations. Muñoz et al. (2022) investigated wellness programs and initiatives through which organizations have attempted to adjust to the new circumstances brought about by COVID-19, and their effect on the POS of employees. The researchers discovered that when wellness and COVID-19 protection programs were properly implemented, employees acknowledged the company's efforts to treat them fairly and provide them with the ability to perform their jobs under reasonably good conditions. The researchers explained that POS is a sequence of emotional, instrumental, and informative transactions that range from sustaining to boosting employee well-being (Giorgi et al., 2016). Therefore, the results of wellness and COVID-19 programs generating positive feelings from employees reflect how employees view POS.

POS as a Mediator

In addition to being an outcome of wellness programs, POS has also been identified as a mediator of the relationship between wellness programs and other outcomes. For instance, a study by Varga et al. (2020) looked into the impact of wellness programs on employee and organizational outcomes in the hospitality industry. In particular, they examined how employee perceptions of wellness programs affected outcomes like job stress and POS, as well as the role of POS as a mediator of the relationship between perception of wellness programs and job stress. According to Guest (2002, as cited in Varga et al., 2020), wellness programs are an example of high-performance human resource practices in which perceptions of the organizational environment are crucial to the practices' outcomes. Therefore, Varga et al. (2020) believed that POS should be considered a mediator when evaluating the relationship between employees' perceptions of wellness programs and outcomes such as workplace stress. In particular, they expected that participation in wellness programs would increase POS, which in turn, ultimately decreases job stress.

The first link in the study's mediation relationship was that perception of wellness programs would lead to increased POS. Varga et al. (2020) explain that POS is the extent to which employees feel their organizations value their contributions and care about their well-being (Eisenberger et al., 1986). Because the goal of implementing wellness programs within an organization is to improve the health and well-being of its employees, it was believed that the more favorably people saw the usefulness of wellness programs, the more they perceived their organization to support them.

The second link in the study's mediation relationship was the relationship between POS and job stress. Studies have shown that job overload, emotional and physical demands, and poor work-life balance do not contribute to burnout when employees report support from peers and superiors (Bakker et al., 2005 as cited in Varga et al., 2020). With studies illustrating that POS can mitigate some of the issues caused from being in a stressful work environment, Varga et al. (2020) believed that employee perceptions of organizational support would have a direct negative correlation with job stress.

Organizational health studies have discovered favorable relationships between POS and employee physical and mental health (Arnold & Dupré, 2012, as cited in Varga et al., 2020), indicating that POS is an important factor in determining the effectiveness of any employee wellness program. Thus, with the studies illustrating the role of POS on employee stress, together with on the relationship between wellness program and POS, Varga et al. (2020) hypothesized that POS would mediate the negative relationship between wellness programs and stress.

The participants in the Varga et al. (2020) study consisted of hospitality employees who were required to have worked at a company that offered wellness programs. In this study, wellness programs included smoking cessation programs, weight reduction programs, preventative health exams, as well as efforts inside the workplace such as providing nutritious snacks and dining alternatives, and ergonomic workplaces. Using scales from prior research, a self-administered survey was designed for data collection to assess job stress and POS. To ensure quality and reduce variance and biases, the researchers implemented an attention-check question that was placed halfway through the questionnaire.

The main goal of the Varga et al. (2020) study was to examine POS as a mediator in the relationship between employee's perceptions of wellness programs and job stress. They first found that perceptions of wellness programs by employees had a significant and negative relationship with their stress levels. Next, in testing their mediated relationship, they found a significant positive correlation between perceptions of employee wellness programs and POS, indicating that wellness programs contributed to a supportive and equitable workplace culture. The study also found that employees who perceived more POS were less likely to experience job stress. This is because when employees experience POS, they feel valued and supported by their organization, which can reduce feelings of uncertainty and insecurity. Therefore, Varga et al. (2020) was able to illustrate that employee wellness programs had a significant indirect relationship with job stress through POS, showing that employees' perceptions of their organization are influenced by their perceptions of wellness programs, which in turn reduced other employee experiences like stress.

Varga et al.'s (2020) finding of a significant mediating role of POS in the relationship between wellness programs and stress demonstrates to organizations that by offering wellness programs to their employees, employees may perceive that their organizations care about them, which will ultimately result in less stress. The findings suggest that wellness programs can help foster a supportive work environment which can be an effective strategy to decrease stress levels of employees. Furthermore, positive feedback and support for these programs may lead to the development and implementation of more new programs. This could provide employees with even more valuable resources to aid in managing stress.

The Varga et al. (2020) study provides a valuable foundation for exploring the impact of wellness programs on employee well-being and the mediating role of POS. However, it is important to acknowledge that the findings of the study may not necessarily be applicable to other industries or settings. Because the participants in this study were employed in areas of the hospitality industry, including lodging, food and beverage, event management, tourism, and entertainment, their findings may be specific to the hospitality industry and not be directly applicable to other work contexts. In order to determine the broader applicability of these findings, further research would need to be conducted in a variety of settings and industries. This would help to establish whether the results of this study are specific to the hospitality industry or if they can be generalized to other work contexts.

Another gap in the study is the focus on employee's perceptions of wellness programs rather than actual participation and availability. The study from Varga et al. (2020) highlights the importance of the perception of wellness programs as a factor in reducing employee stress levels through POS, but it is unclear whether actual participation in these programs would have a similar effect. While employee perceptions of wellness programs are important, they do not necessarily reflect the actual impact of these programs on employee well-being. Looking at participation can provide insights into whether employees are actually engaging with the wellness programs provided by their organizations.

If participation rates are low, it suggests that employees may not be aware of the available programs or may not find them relevant to their needs. Analyzing the availability of wellness programs is also important because it reveals the types and number of resources available to employees to support their well-being. If there are limited wellness programs

available, employees may not have the opportunity to access resources that could benefit their well-being. Therefore, examining both participation and availability of wellness programs is crucial in understanding their impact on employee well-being, as perceptions alone may not accurately reflect the effectiveness of these programs.

Purpose of the Current Study

Wellness programs have become increasingly prevalent in the workplace over the past few years. It has been demonstrated through various studies that not only do wellness programs benefit employees, but they also provide advantages for the organizations that implement them. Specifically, research has demonstrated a positive relationship between wellness programs and several outcomes, including increased mental and physical health, productivity, and job satisfaction, while decreasing absenteeism. Although there has been a growing body of research on wellness program outcomes, there has been an absence of studies on potential mediators.

The study by Varga et al. (2020) contributes to the POS literature by directly tying it to wellness programs and outcomes like job stress in the hospitality industry. This finding paves the way for further investigation into the function of POS as a mediator in the relationship between wellness programs and other outcomes. Specifically, I believe that POS can serve as a mediator of the relationship between wellness programs and employee job satisfaction. Although few studies have been conducted on the relationship between wellness programs and job satisfaction, no studies have examined the role of POS as a mediator in this relationship. One study by Parks and Steelman (2008) found a positive relationship between participation in wellness programs and job satisfaction. Although not evaluated in their study,

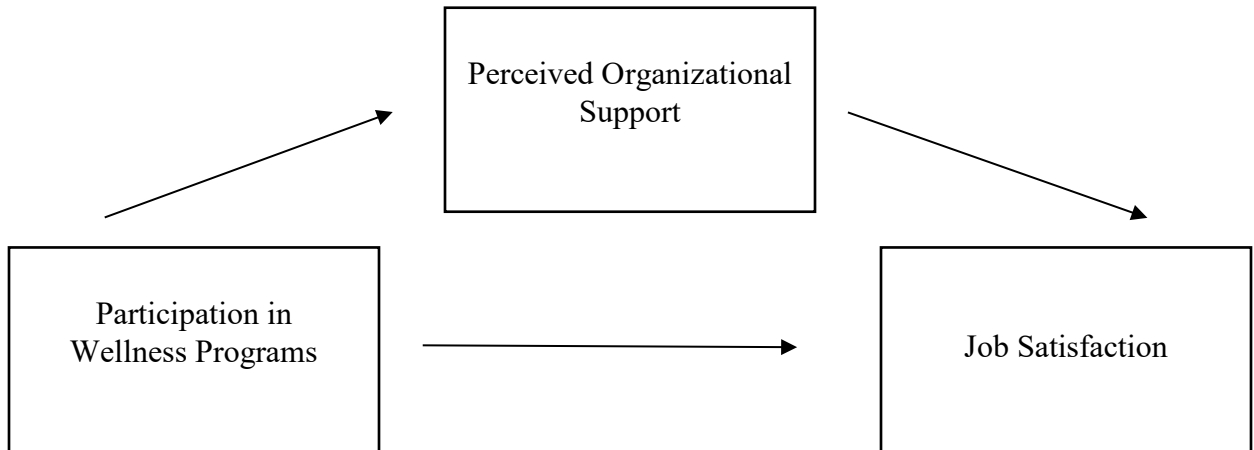
they mentioned that the relationship might exist because the implementation of a wellness program may suggest to employees that their organization values and cares for them, hence influencing employees' POS.

Consistent with Park and Steelman's (2008) assertion, I believe POS is a mediating factor that explains the relationship between wellness programs and job satisfaction. Since many studies have linked POS to increased emotional response to work and job satisfaction (Rhoades & Eisenberger, 2002; Wnuk, 2017), it is possible that POS can influence the relationship between wellness programs and job satisfaction. Additional research is necessary to investigate this notion. And again, it is important to note that examining both participation and availability of wellness programs is crucial in understanding their impact on employee well-being. Therefore, the goal of the current study was to examine the mediating role of POS in the relationship between two aspects of wellness programs (participation and availability) and job satisfaction. The following hypotheses, illustrated in Figures 1 and 2, were tested in the present study:

Hypothesis 1: POS will mediate the relationship between participation in wellness programs and job satisfaction such that employees who participate in a wellness program will feel more supported by their organization, which will ultimately result in higher levels of job satisfaction.

Figure 1

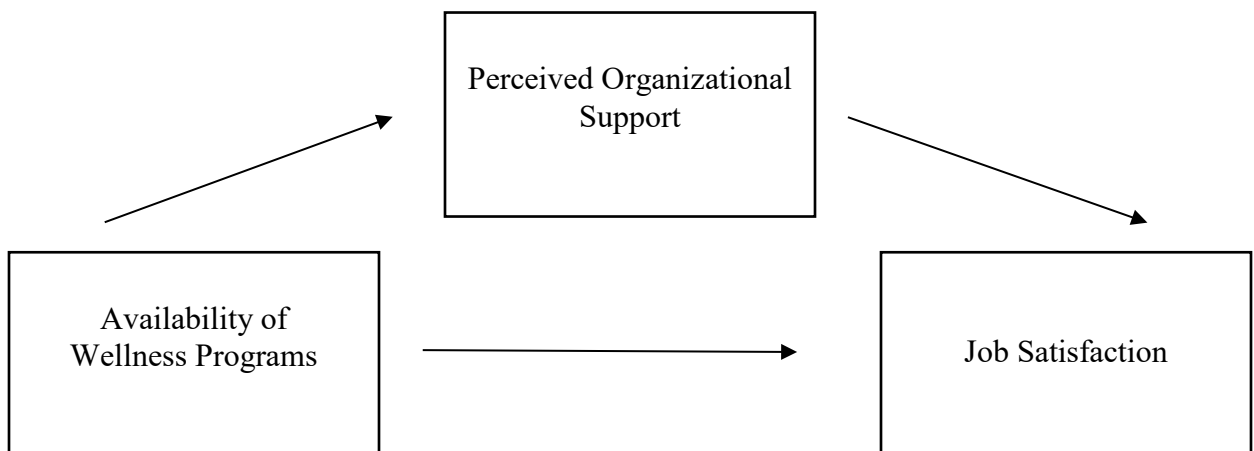
POS as a mediator of the relationship between participation in wellness programs and job satisfaction



Hypothesis 2: POS will mediate the relationship between availability of wellness programs and job satisfaction, meaning as organizations provide more wellness programs, employees are likely to perceive higher levels of support from their organization, leading to increased job satisfaction.

Figure 2

POS as a mediator of the relationship between availability of wellness programs and job satisfaction



Method

Participants

A total of 196 individuals participated in an online survey. The participants were recruited through a combination of my professional and personal networks, such as LinkedIn and Facebook, and the extended networks of the participants themselves. Participants were excluded if they had a large amount of incomplete data, were unemployed at the time of data collection, had a tenure at their current organization of less than three months, or worked for an organization that did not have a wellness program. Upon examination of those who met the exclusion criteria, 113 participants were ruled ineligible for the study. As a result, the final sample consisted of 83 participants.

The demographic characteristics of these participants are reported in Table 1. The sample consisted of 19 males (22.9%), 62 females (74.7%), 1 non-binary (1.2%), and 1 who preferred not to say (1.2%). Participants' age varied widely with 25 to 34 years (31.3%), followed by 18 to 24 years (30.1%), 35 to 44 years (21.7%), 45 to 54 years (13.3%), and 55 and over (3.6%).

Regarding their employment status, the majority of respondents (55.4%) indicated that they worked 40 or more hours per week. In comparison, 22.9% reported working between 30 and 39 hours per week, 9.6% reported working between 20 and 29 hours per week, and 12.0% reported working between 1 and 19 hours per week. The participants' tenure within their current organization varied, with 44.6% reporting working for their organization for 3 months to 1 year, followed by 22.9% for 1 to 3 years, 19.3% for 3 to 6 years, and 7.2% for 6 to 9 years. The remaining participants reported working for their organization for over 9

Table 1*Demographic Characteristics of Survey Respondents (N = 83)*

Variable	<i>n</i>	%
Gender		
Female	62	74.7%
Male	19	22.9%
Non-binary/Prefer not to say	2	2.4%
Age		
18 to 24 years	25	30.1%
25 to 34 years	26	31.3%
35 to 44 years	18	21.7%
45 to 54 years	11	13.3%
55 to 64 years	3	3.6%
Hours		
01 to 19 hours per week	10	12.0%
20 to 29 hours per week	8	9.6%
30 to 39 hours per week	19	22.9%
40 to 49 hours per week	38	45.8%
50 or more hours per week	8	9.6%
Tenure		
3 months to 1 year	37	44.6%
1 to 3 years	19	22.9%
3 to 6 years	16	19.3%
6 to 9 years	6	7.2%
More than 9 years	5	6.0%
Work Arrangement		
Fully remote	13	15.7%
Fully in-person	27	32.5%
Hybrid (both remote and in-person)	43	51.8%
Industry		
Computer software/Technology	22	26.5%
Education	8	9.6%
Engineering/Architecture	3	3.6%
Finance/Insurance	6	7.2%
Food service	4	4.8%
Healthcare/Pharmaceutical	14	16.9%
Sales/Retail	10	12.0%
Other	16	19.3%

years (6.0%). Participants were also asked about their working arrangements. It was found that 15.7% reported working fully remote, 32.5% reported working fully in-person, and the majority of participants (51.8%) reported working in a hybrid arrangement that included both remote and in-person work.

The participants in this study were from various industries, with the highest percentage (26.5%) working in the computer software/electronics industry. The healthcare/pharmaceutical industry had the second highest representation (16.9%), followed by sales/retail (12.0%), education (9.6%), finance/insurance (7.2%), and engineering/architecture (3.6%). Participants who worked in "other" industries represented 19.3 % of the overall sample. Included in these industries were legal, media, manufacturing, consulting, utilities, research, the Department of Energy National Laboratory, the federal government, and civil services.

In summary, the majority of participants in the study were women between the ages of 18 and 34 who worked full-time (40+ hours) and had been employed by their organization for between three months to one year. Many reported working in a hybrid structure that combined remote and in-person employment, predominantly in the technology and healthcare industries.

Measures

Wellness Programs

Wellness programs are initiatives designed to promote healthy lifestyles and behaviors among employees (Baicker et al., 2010). In this study, two aspects of wellness programs were measured: participation and availability. Participation in wellness program was

measured using one item that asked, "How often do you participate in the wellness programs that your organization offers?" This item was rated on a 5-point Likert scale (1 = *Never*, 2 = *Rarely (once a month)*, 3 = *Occasionally (once a week)*, 4 = *Frequently (Multiple times a week)*, 5 = *Always (Daily)*).

Availability of wellness programs was measured using a two-item scale. The first item of the scale was, "Is your organization offering any wellness programs for its employees?" Participants were given the option to answer either "yes" or "no." If the participant selected "yes," they were presented with the next item, "Which of the following wellness programs does your company offer?" The options listed a variety of wellness programs: mental health resources, fitness options, stress management resources, nutrition education, EAP, disease management, smoking cessation, parenting support, and "other" programs. Participants were asked to indicate whether their organization offered each of these types of wellness programs. The selections of the participants were combined to determine the amount of wellness program available to each individual. The score of the item ranged from one to nine, with higher scores illustrating more programs.

POS

POS is defined as the degree to which employees believe their organizations appreciate their contributions and care about their well-being (Eisenberger et al., 1986). POS was measured using a 16-item scale called the Perceived Organizational Support Scale: Survey of Perceived Organizational Support (SPOS) (Eisenberger et al., 1986). Items were rated on a 5-point Likert scale (1 = *Strongly disagree*, 2 = *Disagree*, 3 = *Neither agree nor disagree*, 4 = *Agree*, 5 = *Strongly agree*). Items included "The organization cares about my opinions,"

“The organization values my contribution to its well-being,” and “The organization fails to appreciate any extra effort from me” (reverse coded). The responses of the participants were averaged to get an overall POS score. POS scores ranged from 1.00 to 5.00, with higher scores indicating greater perception of organizational support. Cronbach’s alpha (internal consistency) demonstrated high reliability of the scale ($\alpha = .95$).

Job Satisfaction

Job satisfaction is the extent to which an employee likes or dislikes their job and feels fulfilled by it (Parks & Steelman, 2008). Job satisfaction was measured using a five-item scale called The Brayfield-Rothe Job Satisfaction Index (Brayfield & Rothe, 1955). Items were rated on a 5-point Likert scale (1 = *Strongly disagree*, 2 = *Disagree*, 3 = *Neither agree nor disagree*, 4 = *Agree*, 5 = *Strongly agree*). Items included “I feel satisfied with my present job,” and “Most days I am enthusiastic about my work.” The responses of the participants were averaged to get an overall job satisfaction score. Job satisfaction scores ranged from 1.00 to 5.00, with higher scores indicating greater job satisfaction. Cronbach’s alpha (internal consistency) demonstrated high reliability of the scale ($\alpha = .89$).

Demographic Information

Participants responded to seven questions regarding their demographic backgrounds. The items included gender, age, current employment status, work hours, organizational tenure, employment by industry, and work arrangement.

Procedures

Using the online survey application Qualtrics, a survey was developed and utilized to collect data. Participants were informed about the study through my social and professional

networks (e.g., Facebook, LinkedIn) as well as by word of mouth. Each online post included an introduction of myself, a brief overview of the study, an estimated completion time for the survey, and an anonymous link. Additionally, participants were encouraged to send the survey link to their extended networks.

If participants chose to start the survey and click the link, they were redirected to a webpage featuring the informed consent document. The informed consent document briefly explained the procedures to be followed, potential risk, benefits, and compensation, confidentiality, participants' rights, and contained the contact information if participants had any questions or concerns. The participants who consented to the study were then directed to the survey, where they were asked questions on their demographics, POS, job satisfaction, and organization's wellness programs. Instructions were displayed at the beginning of each section to clarify the nature of the questions and reiterate the confidentiality and anonymity of the survey. Upon completion of the survey, participants were formally acknowledged and thanked for their time and participation. Those who did not consent to the survey were directed to the end of the survey where they were also formally acknowledged and thanked for their time and participation. Data were analyzed using the Statistical Package for the Social Sciences (SPSS) software program Version 28.

Results

Descriptive Statistics

Descriptive statistics for the variables examined are presented in Table 2. Descriptive statistics were calculated with the goal of obtaining an overview of the distribution of participant responses, making preliminary evaluations regarding response patterns, and locating errors, missing data, or outliers within the sample.

Table 2

Descriptive Statistics and Pearson Correlations (N = 83)

Item	M	SD	1	2	3	4
1. Participation in wellness programs	3.52	1.11	--			
2. Availability of wellness programs	3.70	2.26	.50 ***	--		
3. POS	3.40	.76	.52 ***	.40 ***	--	
3. Job satisfaction	3.62	.88	.35 **	.35 **	.74 ***	--

* $p < .05$, ** $p < .01$, *** $p < .001$

Participants reported relatively low availability of wellness programs ($M = 3.70$, $SD = 2.26$), suggesting that their organizations might not have as many wellness programs as the participants would like or expect. Participants reported moderate level of participation in the wellness programs offered by their organization ($M = 3.52$, $SD = 1.11$), suggesting that while there is room for improvement in the availability of wellness programs in the organization, the participants who had access to these programs were participating in them at least once or multiple times a week. Participants also reported moderate levels of POS ($M = 3.40$, $SD = .76$), suggesting that they felt that their organization valued their contributions and cared

about their well-being, but there was still potential for improvement in how the organization communicated and demonstrated its support for employees. Participants reported moderate levels of job satisfaction ($M = 3.62, SD = .88$), indicating that, on average, employees liked their job and found it fulfilling, but there might be some areas where improvements could be made.

Overall, the participants in the study reported a relatively low availability of wellness programs in their organization. However, for those who had access to such programs, they reported participating at a moderate level. Participants also perceived a moderate level of support from their organization and reported moderate levels of job satisfaction.

Pearson Correlations

Pearson correlation coefficients were calculated to identify the relationships among the four variables. Results of the Pearson correlations are presented in Table 2. Results showed that availability of wellness programs was significantly and positively related to participation in wellness program, $r(81) = .50, p < .001$, suggesting that the more wellness programs that were available for employees, the more likely they participated in them. Availability of wellness programs was also significantly and positively related to POS, $r(81) = .40, p < .001$, as well as job satisfaction, $r(81) = .35, p < .01$, suggesting that organizations that provided a variety of wellness programs were more likely to increase their employees' perception of support from the organization as well as their job satisfaction.

Participation in wellness programs was significantly and positively related to POS, $r(81) = .52, p < .001$ and job satisfaction, $r(81) = .35, p < .01$, indicating that individuals who participated more in wellness programs were more likely to perceive greater organizational

support and experienced higher levels of job satisfaction. Finally, POS was significantly and positively related to job satisfaction, $r(81) = .74, p < .001$, suggesting that the more employees perceived their organization to support them, the greater their job satisfaction was. Overall, these variables were positive and significantly related to each other.

Test of Hypotheses

A simple mediation analysis was conducted using the SPSS macro PROCESS (model 4.2) to test the two hypotheses (Hayes & Preacher, 2014). Bootstrapping was used to calculate 95% bias-corrected confidence intervals (CI) to assess the significance of the indirect effect. An indirect effect is significant if zero is not contained in the confidence interval (Hayes & Preacher, 2014). Following the recommendation of Hayes and Preacher (2014), the bootstrap estimates were based on 10,000 bootstrap samples.

Hypothesis 1 stated that POS would mediate the relationship between participation in wellness programs and job satisfaction. Table 3 shows unstandardized regression coefficients (b), standard errors (SE), t -statistic values, and 95% confidence intervals (CI); the different paths of the model are provided in Figure 3. As expected, participation in wellness programs was positively related to job satisfaction (path c : $b = .28, t = 3.37, p < .01$). Participation in wellness programs was positively related to POS (path a : $b = .35, t = 5.42, p < .001$). After controlling for participation in wellness programs, POS was related to job satisfaction (path b : $b = .89, t = 8.66, p < .001$). After controlling for POS, the direct effect of participation in wellness programs on job satisfaction was not uniquely significant (path c' : $b = -.03, t = -.47, p > .05$). According to Baron and Kenny (1986), when path a , b , and c are statistically

significant, and there is no unique relationship between participation in wellness programs and job satisfaction (i.e., path c' is not significant), the finding indicates full mediation.

Table 3

The Relationship between Participation in Wellness Programs and Job Satisfaction as Mediated by Perceived Organizational Support (POS)

Item	$b(SE)$	t	95 % CI	
			LL	UL
Participation in WP - job satisfaction (c)	.28(.08)	3.37 **	.11	.44
Participation in WP - POS (a)	.35(.07)	5.42 ***	.22	.48
POS - job satisfaction (b)	.89(.10)	8.66 ***	.68	1.09
Participation in WP - job satisfaction (c')	-.03(.07)	-.47	-.17	.11
Indirect Effect				
Participation in WP - POS - job satisfaction (ab)	.31(.05)		.21	.40

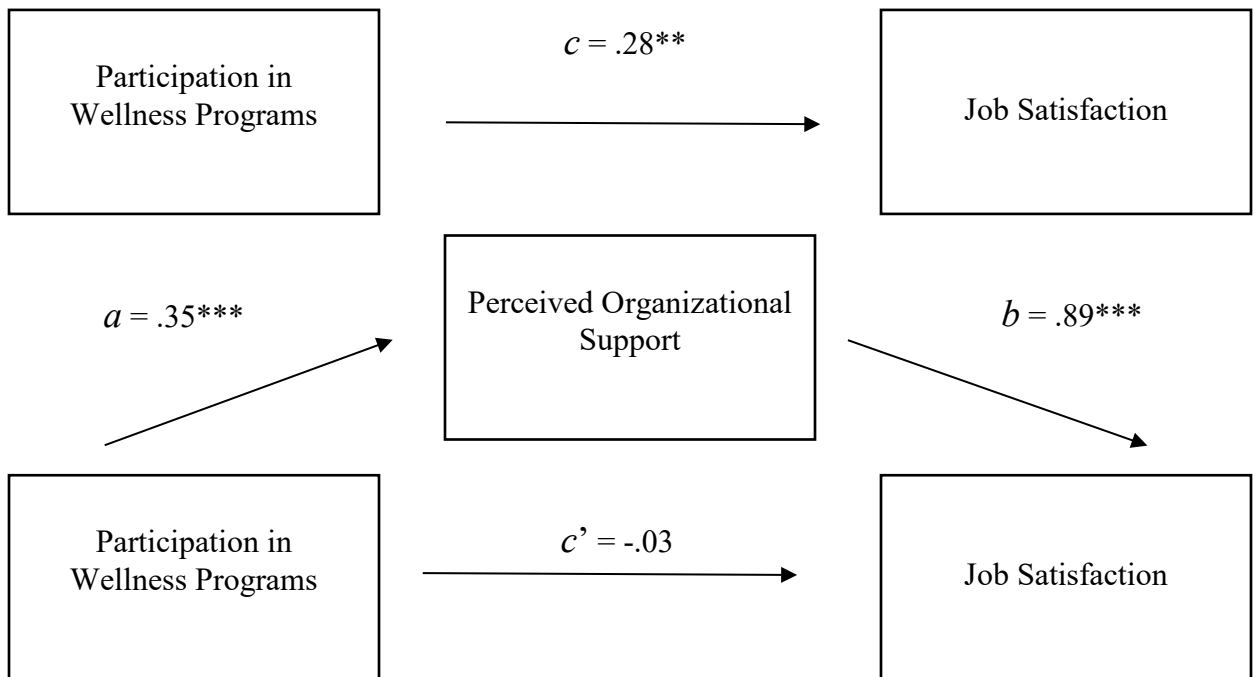
Note: This table shows the path coefficients and indirect effect for the relationship between participation in wellness programs and job satisfaction as mediated by perceived organizational support (POS). ** $p < .01$, *** $p < .001$

In regard to the indirect effect of POS, results showed that the bias-corrected bootstrap confidence interval did not contain zero (path ab : $b = .31$, 95% CI = .21 to .40), suggesting that the indirect effect was statistically significant. These results indicated that the link between job satisfaction and participation in wellness programs was significantly mediated by POS.

The results of the mediation analysis showed that POS fully mediated the relationship between the relationship between participation in wellness programs and job satisfaction, supporting Hypothesis 1. Individuals who engaged in wellness programs perceived greater levels of support from their organization, which then led to an increased sense of fulfillment

Figure 3

A simple mediation model with POS as the proposed mediator of the relationship between participation in wellness programs and job satisfaction.



Note. ** $p < .01$, *** $p < .001$

and enjoyment in their work. In other words, participating in wellness programs fostered POS, which ultimately led to higher levels of job satisfaction.

Hypothesis 2 stated that POS would mediate the relationship between availability of wellness programs and job satisfaction. Table 4 shows unstandardized regression coefficients (b), standard errors (SE), t-statistic values, and 95% confidence intervals (CI); the different paths of the model are provided in Figure 4. As expected, availability of wellness programs was positively related to job satisfaction (path c : $b = .14$, $t = 3.36$, $p < .01$). Availability of wellness programs was positively related to POS (path a : $b = .13$, $t = 3.91$, $p < .001$). After

controlling for availability of wellness programs, POS was related to job satisfaction (path b : $b = .83, t = 8.72, p < .001$). After controlling for POS, the direct effect of availability of wellness programs on job satisfaction was not significant (path c' : $b = .03, t = .80, p > .05$), thereby indicating full mediation.

Table 4

The Relationship between Availability of Wellness Programs and Job Satisfaction as Mediated by Perceived Organizational Support (POS)

Item	$b(SE)$	t	95 % CI	
			LL	UL
Availability of WP - job satisfaction (c)	.14(.04)	3.36 **	.06	.22
Availability of WP - POS (a)	.13(.03)	3.91 ***	.07	.20
POS - job satisfaction (b)	.83(.10)	8.72 ***	.64	1.02
Availability of WP - job satisfaction (c')	.03(.03)	.80	-.04	.09
Indirect Effect				
Availability of WP - POS - job satisfaction (ab)	.11(.03)		.06	.17

Note: This table shows the path coefficients and indirect effect for the relationship between availability of wellness programs and job satisfaction as mediated by perceived organizational support (POS).

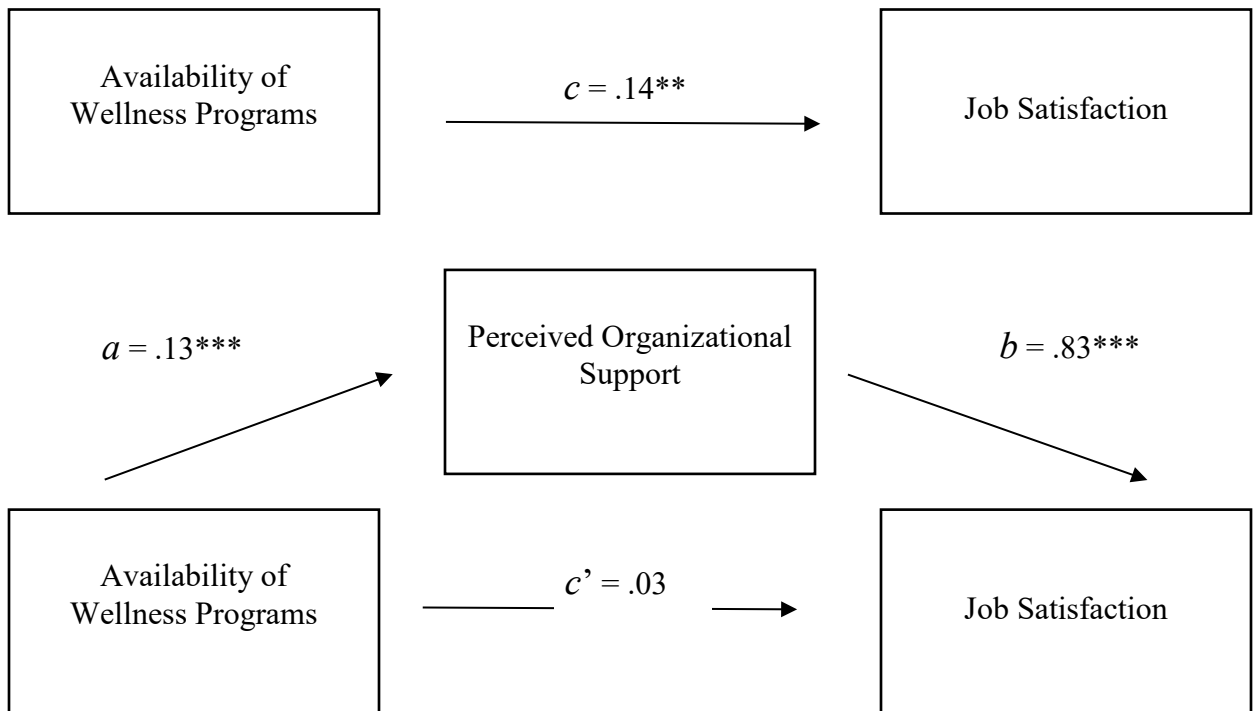
** $p < .01$, *** $p < .001$

In regard to the indirect effect of POS, results showed that the bias-corrected bootstrap confidence interval did not contain zero (path ab : $b = .11, 95\% CI = .06$ to $.17$). This suggests that the indirect effect was statistically significant.

These results indicated that POS fully mediated the relationship between the relationship between availability of wellness programs and job satisfaction, supporting Hypothesis 2. In other words, availability of wellness programs fostered POS, which ultimately led to higher levels of job satisfaction. This suggested that organizations that offered a greater number of

Figure 4

A simple mediation model with POS as the proposed mediator of the relationship between availability of wellness programs and job satisfaction.



Note. $^{**} p < .01$, $^{***} p < .001$

wellness programs to their employees might result in a stronger sense of support among employees, which could enhance the quality of employees' work experience.

Discussion

With the increase in employees with chronic diseases over the years (Mattke et al., 2012) and the added concern for employee health and safety during the pandemic, wellness programs have become increasingly popular in the workplace. This study addressed the role of wellness programs in organizations, especially as it pertains to employee job satisfaction. Previous research has found that wellness programs positively impact employee mental and physical health, productivity, and job satisfaction, while reducing absenteeism (Gubler et al., 2018; Losina et al., 2017; Marshall, 2020; Parks & Steelman, 2008). However, little is known about potential mediators that explain the relationships between wellness programs and outcomes. POS is a construct that has been linked to increased emotional response to work and job satisfaction (Rhoades & Eisenberger, 2002; Wnuk, 2017). Given the positive relationship between participation in wellness programs and job satisfaction found by Parks and Steelman (2008), it is plausible that POS could mediate the relationship between wellness programs and job satisfaction. Therefore, the present study proposed and tested whether POS would act as a mediator of the relationship between two aspects of wellness programs (participations and availability) and job satisfaction.

Summary of Findings

Hypothesis 1 stated that POS would mediate the relationship between participation in wellness programs and job satisfaction such that employees who participated in a wellness program would feel more supported by their organization, which would ultimately result in higher levels of job satisfaction. Results showed a positive and significant effect on the following relationships: participation in wellness program and POS (path *a*), POS and job

satisfaction (path *b*), and participation in wellness program and job satisfaction (path *c*). Additionally, the results indicated that POS fully mediated the relationship between participation in wellness programs and job satisfaction. The findings of this study provide support for the first hypothesis of this study and the theory proposed by Park and Steelmen (2008). The positive relationship between participation in wellness programs and job satisfaction was likely due to the perception that the organization valued and cared for its employees, which in turn, increased job satisfaction.

Hypothesis 2 stated that POS would mediate the relationship between availability of wellness programs and job satisfaction, meaning as organizations provide more wellness programs, employees are likely to perceive higher levels of support from their organization, leading to increased job satisfaction. Results showed a positive and significant effect on the following relationships: availability of wellness program and POS (path *a*), POS and job satisfaction (path *b*), and availability of wellness program and job satisfaction (path *c*). The results indicated that POS fully mediated the relationship between availability of wellness programs and job satisfaction. Therefore, the result of the analysis supported Hypothesis 2.

Theoretical Implications

Previous literature has shown positive outcomes for those who take part in wellness programs, especially regarding job satisfaction (Abdullah & Lee, 2012; Marshall, 2020; Parks & Steelman, 2008). The current study's findings are consistent with this previous research, highlighting the positive relationship between participation in wellness programs and job satisfaction. However, the current study goes beyond these previous findings by revealing that POS fully mediated the relationship between participation in wellness

programs and job satisfaction. This finding is important because it suggests that organizations can increase employees' job satisfaction by improving their perception of organizational support through the provision of wellness programs.

Furthermore, the current study's findings are consistent with previous research that highlighted the importance of POS in the context of wellness programs. Muñoz et al. (2022) found that wellness programs could generate positive feelings from employees, reflecting how employees view POS. Similarly, Varga et al. (2020) found POS played a mediating role in the relationship between wellness programs and stress. The current study's findings add to this body of research by demonstrating the mediating role of POS in the relationship between wellness programs and job satisfaction.

Practical Implications

This study's results suggest that POS fully mediates the relationship between participation in wellness programs and job satisfaction, as well as the relationship between availability of wellness programs and job satisfaction. Therefore, this study offers several practical implications for organizations seeking to develop and implement wellness programs while taking into account potential outcomes of such implementation.

Given that both participation and availability of wellness programs were positively related to job satisfaction, organizations can use this finding to justify investing more into wellness programs for their employees. Investing in employee wellness programs can play an integral role for organizations to demonstrate their dedication to employee well-being and promote a supportive workplace culture. By offering employees opportunities to participate

in wellness programs, organizations can enhance their employees' perceptions of support and care, resulting in greater job satisfaction.

Increasing the availability of wellness programs is crucial for organizations to promote employee well-being, but it is equally important for organizations to understand that not all wellness programs may be effective, preferred, or applicable by all employees. For instance, some employees may prefer group fitness classes, while others may prefer access to healthy food options or counseling services. Therefore, organizations must acknowledge that certain wellness programs may not be helpful in fulfilling the particular needs and preferences of their employees. To address this, organizations should conduct surveys or focus groups to understand their employees' interests, preferences, and health concerns. By doing so, organizations can gain insight into which wellness programs are most beneficial to their employees.

While the availability of wellness programs is essential, participation in such programs had a stronger correlation with POS, according to the findings in the current study. In order to promote a supportive workplace environment that fosters employee well-being and job satisfaction, it is not sufficient for organizations to only offer wellness programs; they must also encourage their employees to participate. To increase employee participation in wellness programs, organizations should seek feedback from their employees and use this information to improve their programs. By creating programs that meet the specific needs and preferences of their employees, organizations can increase engagement and ultimately lead to higher participation rates. This approach creates a more supportive workplace environment that promotes employee well-being and job satisfaction by providing a wider array of wellness

programs that cater to the diverse needs of their employees, therefore, increasing both the availability and variety of programs to participate in.

Strengths of the Study

One strength of the present study is that it examined the relationship between both the availability and participation in wellness programs and job satisfaction. By examining both availability and participation, the study was able to differentiate between the effect of simply having the option of a wellness program versus actually engaging in one. Although organizations can control the availability of wellness programs, they cannot necessarily control employee participation. Therefore, by examining both availability and participation, the current study provided a more comprehensive understanding of the relationship between wellness programs and job satisfaction.

The current study also filled a gap in the literature by exploring the relationship between wellness programs and outcomes across different industries and settings. Previous research on wellness programs, such as the study by Varga et al. (2020), has predominantly focused on specific occupations or industries, limiting the generalizability of the findings. The current study expands on past research by surveying employees from a variety of industries, including technology, healthcare, education, engineering, and finance, to provide a more comprehensive understanding of the possible benefits of wellness programs for employees in a variety of work contexts.

Limitations and Directions for Future Research

Although this study provides major contributions to existing literature, it is important to recognize some of its limitations. The first limitation pertains to the lack of diversity within

the sample. The majority of the sample was composed of females (74.7%) and employees who worked less than three years (67.5%). To increase the generalizability of this study, future research should make it a point to collect data from a more diverse sample, especially when it comes to gender and tenure.

Another limitation of the study is that it only focused on employees who had wellness programs available to them and did not compare the job satisfaction of those who did not have wellness programs. This again limits the generalizability of the findings because it failed to account for the possible influence of other factors on job satisfaction. Future research should consider including a control group of employees who do not have access to wellness programs to have a more comprehensive understanding of the impact of wellness programs on job satisfaction.

Considering the present study only investigated POS as a mediator of the relationship between wellness programs and job satisfaction, future research could expand by looking at different outcomes such as employee engagement, job performance, absenteeism, burnout and organizational commitment. This is because employees who feel supported by their organization are likely to be more engaged in their work, perform better, and feel a stronger sense of loyalty (Rhoades & Eisenberger, 2002). Future research could explore these potential outcomes and further examine the role of POS in the relationship between wellness programs and employee well-being.

Conclusion

The present study investigated the mediating role of POS on the relationship between participation in wellness programs and job satisfaction, as well as availability of wellness

programs and job satisfaction. To the best of my knowledge, this study is the first to examine the impact of both participation in and availability of wellness programs on job satisfaction, while also exploring the mediating role of POS. With full mediation concluded on both participation and availability of wellness programs, the results of this study suggest that employees who participate in a wellness program are likely to feel more supported by their organization, which are ultimately likely to result in higher levels of job satisfaction. Also, the results imply that when organizations provide more wellness programs, employees are likely to perceive higher levels of support from their organization, leading to increased job satisfaction. In summary, offering a range of wellness programs to employees can have a positive impact on their perception of organizational support, leading to increased job satisfaction. Overall, the results of the study may help future organizations decide whether to invest in wellness programs within their organization.

References

- Abdullah, D. N. M. A., & Lee, O. Y. (2012). Effects of wellness programs on job satisfaction, stress and absenteeism between two groups of employees (attended and not attended). *Procedia-Social and Behavioral Sciences*, 65, 479-484. <https://doi.org/10.1016/j.sbspro.2012.11.130>
- Aldana, S. G., Merrill, R. M., Price, K., Hardy, A., & Hager, R. (2005). Financial impact of a comprehensive multisite workplace health promotion program. *Preventive Medicine*, 4, 31-37. <https://doi.org/10.1016/j.ypmed.2004.06.009>
- American Institute of Stress. (n.d.). *Workplace stress*. Retrieved from <https://www.stress.org/workplace-stress>
- Anderson, L. M., Quinn, T. A., Glanz, K., Ramirez, G., Kahwati, L. C., Johnson, D. B., Buchanan, L. R., Archer, W. R., Chattopadhyay, S., Kalra, G. P., & Katz, D. L. (2009). The effectiveness of worksite nutrition and physical activity interventions for controlling employee overweight and obesity: A systematic review. *American Journal of Preventive Medicine*, 37(4), 340-357. <https://doi-org.libaccess.sjlibrary.org/10.1016/j.amepre.2009.07.003>
- Baicker, K., Cutler, D., & Song, Z. (2010). Workplace wellness programs can generate savings. *Health Affairs*, 29(2), 304-311. <https://doi.org/10.1377/hlthaff.2009.0626>
- Baron, R. M., & Kenny, D. A. (1986). The moderator-mediator variable distinction in social psychological research: Conceptual, strategic, and statistical considerations. *Journal of Personality and Social Psychology*, 51, 1173-1182. <https://doi.org/10.1037/0022-3514.51.6.1173>
- Bazarko, D., Cate, R. A., Azocar, F., & Kreitzer, M. J. (2013). The impact of an innovative mindfulness-based stress reduction program on the health and well-being of nurses employed in a corporate setting. *Journal of Workplace Behavioral Health*, 28(2), 107-133. <https://doi.org/10.1080/15555240.2013.779518>
- Bergström, G., Bodin, L., Hagberg, J., Aronsson, G., & Josephson, M. (2009). Sickness presenteeism today, sickness absenteeism tomorrow? A prospective study on sickness presenteeism and future sickness absenteeism. *Journal of Occupational and Environmental Medicine*, 51(6), 629-638. doi: 10.1097/JOM.0b013e3181a8281b.
- Blau, P. M. (1964). *Exchange and power in social life*. John Wiley.
- Brayfield, A. H., & Rothe, H. F. (1955). The Brayfield-Rothe job satisfaction index. *Journal of Applied Psychology*, 39(5), 379-384.

- Eisenberger, R., Huntington, R., Hutchison, S., & Sowa, D. (1986). Perceived organizational support. *Journal of Applied Psychology*, 71(3), 500-507.
- Gånedahl, Zsaludek Viklund, P., Carlén, K., Kylberg, E., & Ekberg, J. (2015). Work-site wellness programmes in Sweden: A cross-sectional study of physical activity, self-efficacy, and health. *Public Health (London)*, 129(5), 525–530. <https://doi.org/10.1016/j.puhe.2015.01.023>
- Giorgi, G., Dubin, D., & Perez, J. F. (2016). Perceived organizational support for enhancing welfare at work: A regression tree model. *Frontiers in psychology*, 7, 1770. <https://doi.org/10.3389/fpsyg.2016.01770>
- Gubler, Larkin, I., & Pierce, L. (2018). Doing well by making well: The impact of corporate wellness programs on employee productivity. *Management Science*, 64(11), 4967–4987. <https://doi.org/10.1287/mnsc.2017.2883>
- Hayes, A. F., & Preacher, K. J. (2014). Statistical mediation analysis with a multicategorical independent variable. *British Journal of Mathematical and Statistical Psychology*, 67, 451–470. <https://doi.org/10.1111/bmsp.12028>
- Health.gov (n.d.). *History of Healthy People*. Retrieved August 30, 2022 from <https://health.gov/our-work/national-health-initiatives/healthy-people/about-healthy-people/history-healthy-people>
- Homonoff, T., Willage, B., & Willén, A. (2020). Rebates as incentives: The effects of a gym membership reimbursement program. *Journal of Health Economics*, 70, 102285–20. <https://doi.org/10.1016/j.jhealeco.2019.102285>
- Hughes, M. C., Patrick, D. L., Hannon, P. A., Harris, J. R., & Ghosh, D. L. (2011). Understanding the decision-making process for health promotion programming at small to midsized businesses. *Health Promotion Practice*, 12(4), 512. doi:10.1177/1524839909349162
- Kaiser Family Foundation. (2021). *Employer health benefits: 2021 employer health benefits survey*.
- Kurtessis, J. N., Eisenberger, R., Ford, M. T., Buffardi, L. C., Stewart, K. A., & Adis, C. S. (2017). Perceived organizational support: A meta-analytic evaluation of organizational support theory. *Journal of Management*, 43(6), 1854–1884. <https://doi.org/10.1177/0149206315575554>
- Lahti, Laaksonen, M., Lahelma, E., & Rahkonen, O. (2010). The impact of physical activity on sickness absence. *Scandinavian Journal of Medicine & Science in Sports*, 20(2), 191–199.

- Lahti, J., Rahkonen, O., & Lahelma, E. (2012). Changes in leisure-time physical activity and subsequent sickness absence. *Journal of Science and Medicine in Sport*, 15, S237–S238. <https://doi.org/10.1016/j.jsams.2012.11.577>
- Losina, E., Yang, H. Y., Deshpande, B. R., Katz, J. N., & Collins, J. E. (2017). Physical activity and unplanned illness-related work absenteeism: Data from an employee wellness program. *PloS One*, 12(5), e0176872–e0176872. <https://doi.org/10.1371/journal.pone.0176872>
- Lowensteyn, I., Berberian, V., Belisle, P., DaCosta, D., Joseph, L., & Grover, S. A. (2018). The measurable benefits of a workplace wellness program in Canada: Results after one year. *Journal of Occupational and Environmental Medicine*, 60(3), 211–216. <https://doi.org/10.1097/JOM.0000000000001240>
- Mattke, S., Schnyer, C., & Van Busum, K. (2012). *A review of the U.S. workplace wellness market*. Rand Health.
- Marshall, C. (2020). Analysis of a comprehensive wellness program's impact on job satisfaction in the workplace. *International Hospitality Review*, 34(2), 221–241. <https://doi.org/10.1108/IHR-05-2020-0014>
- Muñoz, J., Andrade, S. M., Peña, I., & Donate, M. J. (2022). Wellness programs in times of COVID-19, perceived organizational support and affective commitment: effects on employee innovative behavior. *European Journal of Innovation Management*. <https://doi.org/10.1108/EJIM-02-2022-0072>
- Parks, & Steelman, L. A. (2008). Organizational wellness programs: A meta-analysis. *Journal of Occupational Psychology*, 13(1), 58–68. <https://doi.org/10.1037/1076-8998.13.1.58>
- Pencak, M. (1991). Workplace health promotion programs: An overview. *The Nursing Clinics of North America*, 26(1), 233–240.
- Person, Colby, S. E., Bulova, J. A., & Eubanks, J. W. (2010). Barriers to participation in a worksite wellness program. *Nutrition Research and Practice*, 4(2), 149–154. <https://doi.org/10.4162/nrp.2010.4.2.149>
- Reardon, J. (1998). The history and impact of worksite wellness. *Nursing Economics*, 16(3), 117–121.
- Reif, Chan, D., Jones, D., Payne, L., & Molitor, D. (2020). Effects of a workplace wellness program on employee health, health beliefs, and medical use: A randomized clinical trial.

- Archives of Internal Medicine* (1960), 180(7), 952–960.
<https://doi.org/10.1001/jamainternmed.2020.1321>
- Rhoades, L., & Eisenberger, R. (2002). Perceived organizational support: a review of the literature. *Journal of Applied Psychology*, 87(4), 698–714. <https://doi-org.libaccess.sjlibrary.org/10.1037/0021-9010.87.4.698>
- Sandercock, & Andrade, J. (2018). Evaluation of worksite wellness nutrition and physical activity programs and their subsequent impact on participants' body composition. *Journal of Obesity*, 2018, 1035871–14. <https://doi.org/10.1155/2018/1035871>
- Song, Z., & Baicker, K. (2019). Effect of a workplace wellness program on employee health and economic outcomes: A randomized clinical trial. *JAMA : the Journal of the American Medical Association*, 321(15), 1491–1501.
- Sun, L. (2019). Perceived organizational support: A literature review. *International Journal of Human Resource Studies*, 9(3), 155-175. <http://dx.doi.org/10.5296/ijhrs.v9i3.15102>
- Varga, Mistry, T. G., Ali, F., & Cobanoglu, C. (2020). Employee perceptions of wellness programs in the hospitality industry. *International Journal of Contemporary Hospitality Management*, 33(10), 3331–3354. <https://doi.org/10.1108/IJCHM-12-2020-1417>
- Westover, J. & Taylor, J. (2010). International differences in job satisfaction: The effects of public service motivation, rewards and work relations. *International Journal of Productivity and Performance Management*, 59(8), 811–828.
<https://doi.org/10.1108/17410401011089481>
- Willis Towers Watson. (2014). *The Willis Health and Productivity Survey Report 2014*.
- Wnuk, M. (2017). Organizational Conditioning of Job Satisfaction. A Model of Job Satisfaction. *Contemporary Economics*, 11(1), 31–43. <https://doi-org.libaccess.sjlibrary.org/10.5709/ce.1897-9254.227>
- World Health Organization. (2017). *Noncommunicable diseases fact sheet*. *Noncommunicable diseases progress monitor*. Retrieved from <https://www.who.int/nmh/publications/ncdprogress-monitor-2017/en/>

Appendix

Demographic Items

Are you currently employed?
How many hours do you work per week?
How long have you been employed at your current company?
Which of the following best describes the industry in which you work?
Which of the following best describes your current working arrangement?
What is your age?
What is your gender identity?

Scale Items

Wellness Programs

Does your organization provide any wellness programs for their employees?
If yes, which of the following wellness programs does your company provide?
How often do you participate in the wellness programs that your organization offers?

Perceived Organizational Support (POS)

The organization values my contribution to its well-being.
If the organization could hire someone to replace me at a lower salary it would do so.
The organization fails to appreciate any extra effort from me.
The organization strongly considers my goals and values.
The organization would ignore any complaint from me.
The organization disregards my best interests when it makes decisions that affect me.
Help is available from the organization when I have a problem.
The organization cares about my well-being.
Even if I did the best job possible, the organization would fail to notice.
The organization is willing to help me when I need a special favor.
The organization cares about my general satisfaction at work.
If given the opportunity, the organization would take advantage of me.
The organization shows very little concern for me.
The organization cares about my opinions.
The organization takes pride in my accomplishments at work.
The organization tries to make my job as interesting as possible.

Job Satisfaction Questions

I feel satisfied with my present job.

Most days I am enthusiastic about my work.
Each day at work seems like it will never end.
I find real enjoyment in my work.
I consider my job to be rather unpleasant.