

Managing Employee Wellbeing Why Do Finnish Organizations Provide Wellness Services?

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MANAGING EMPLOYEE WELLBEING – Why Do Finnish Organizations Provide Wellness Services?

This explanatory study analysis the underlying rationales of Finnish organizations to provide wellness services to their employees. Although being currently a very actual topic, corporate wellness has not been comprehensively studied from managerial perspective. In order to intervene to the decreasing employee wellbeing, the topic has to be brought into the organizational context. Thus, this study links the corporate wellness to the International Human Resource Management literature.

The data used in this study was collected by an online questionnaire sent to Finnish organizations' HR managers and CFOs. The data consisting of 148 responses was then analyzed by using two multivariate data analyzing techniques. First, factor analysis was conducted in order to identify the underlying rationales relating to corporate wellness services. These underlying rationales were secondly altered to cluster analysis resulting two opposing corporate wellness market segments.

The findings of the study indicate that the Finnish employers either take a progressive or suspicious stand towards managing employee wellbeing depending on the internationalization stage of an organization. Whereas the progressive wellness service providers view the wellness services from employee perspective leaving it to employee to decide which services to consume, where and when, the suspicious wellness service providers adopt a somewhat ignorant top-down perspective and are only willing to fulfill the obligatory responsibilities of an employer.

This study also contributes to the existing literature by providing an overall view on corporate wellness market in Finland. By revealing that there exist two different customer segments in Finnish corporate wellness market and by demonstrating that on contrary to the earlier studies, it might not be the organization size that after all determines the rationale to provide wellness services, but rather the internationalization stage of an organization, this study deepens and enriches the somewhat limited corporate wellness literature conducted from organizational perspective.

Keywords: Corporate Wellness, International Human Resource Management, Occupational Health, Employee Wellbeing, Wellness Services

TYÖHYVINVOINNIN JOHTAMINEN – Miksi Suomalaiset Organisaatiot Tarjoavat Työhyvinvointipalveluja?

Tämä tutkimus selittää suomalaisten organisaatioiden perusteluja tarjota työhyvinvointipalveluja työntekijöilleen. Vaikka aihe on hyvin ajankohtainen, sitä ei ole kattavasti tutkittu organisaatioiden ja johtamisen näkökulmasta. Jotta heikkenevään työhyvinvointiin voitaisiin konkreettisemmin puuttua, tulee se ymmärtää selkeämmin työelämän kontekstissa. Näin ollen tässä tutkimuksessa työhyvinvointi tutkimusalanana sidotaan osaksi International Human Resource Management –teoriaviitekehystä.

Tutkimuksessa käytetty aineisto on kerätty suomalaisten organisaatioiden HR- ja talousjohtajille suunnatun sähköisen kyselylomakkeen avulla. Lomake lähetettiin 1.040 johtajalle, joista 148 vastasi kyselyyn. Vastaukset analysoitiin kahden monimuuttujamenetelmän, faktori- ja klusterianalyysin, avulla. Faktorianalyysillä määriteltiin ensin työhyvinvointipalvelujen tarjoamisen ulottuvuudet, jotka tämän jälkeen altistettiin klusterianalyysiin. Näin organisaatiot ryhmiteltiin toisistaan eroaviin työhyvinvointipalvelujen tarjoajiin määritettyjen ulottuvuuksien avulla.

Tutkimustulosten mukaan suomalaiset organisaatiot omaavat joko edistyksellisen tai epäilevän asenteen työhyvinvointipalveluja kohtaan riippuen organisaation kansainvälisyysasteesta. Edistykselliset yritykset hyödyntävät työhyvinvointipalveluja työntekijälähtöisesti valtuuttaen yksilöt itse päättämään mitä palveluja käyttävät missäkin olosuhteissa. Epäilevät yritykset sitä vastoin omaavat työnantajälähtöisen asenteen ja pyrkivät täten täyttämään vain pakolliset työnantajaan kohdistuvat työhyvinvointivelvoitteet.

Tutkimus tarjoaa arvokkaan yleiskuvan suomalaisten organisaatioiden asenteista työhyvinvointia kohtaan erottamalla toisistaan kaksi hyvinkin erilaista tapaa suhtautua työhyvinvointipalvelujen tarjoamiseen. Aiemmasta tutkimuksesta poiketen organisaation kansainvälisyysaste selittää organisaation kokoa paremmin työnantajan halukkuuden tarjota työhyvinvointipalveluja työntekijöilleen. Näin ollen tutkimus onnistuu sekä syventämään että laajentamaan olemassaolevaa tutkimuskenttää.

Avainsanat: Työhyvinvointi, International Human Resource Management, Työhyvinvointipalvelut

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1 INTRODUCTION

The employee wellbeing is in crisis. This study raises the issue by linking the occupational health literature to the main International Human Resource Management (IHRM) theories, and thereafter revealing the underlying reasoning of Finnish organizations to tackle the problem. This chapter introduces the main objectives and research problems of the study first by describing the background and context of the research and thereafter determining the scope and used methodology of the study. In the end also the outline and structure of the research are presented.

1.1 Background

Finnish organizations are today required to compete more vigorously with fewer employees. The much referred globalization tendency has remarkably fast reconstructed the work life. The spreading out of multinational corporations has had immediate effects on the local business cultures resulting a situation where work has become free of any locational or temporal constraints and the distinction between work and free time blurring. Due to the increasing competition, employers are also placing increasing demands towards employees to be more productive, innovative and to constantly improve their skills. The increasing work pressure combined with the changes in industrial countries demography (increase in the proportions of older people along with decline in the proportions of the young) has led to situation where diminishing supply of workforce is struggling with increasing productivity expectations.

As a result, alarming amount of working-age people is unable to handle the pressure and thus either temporarily or permanently incapable of working. In 2007 as many as 272,000 Finnish citizens were on a disability pension. The situation is most concerning among young people entering the work life. The unable young workforce (35 years old or younger) costs society 6.6 billion euro annually when considering both the costs of treatment and the lost tax revenues. The amount has increased with two billion euro in two years. When noting that the Finnish federal budget is approximately 50 billion euro annually, the magnitude of the problem clarifies. (Kauppinen et al 2009, 278). Thus, the retirement bomb is not just caused by the old employees

retiring early, but more by the young individuals not capable of attending work life in the first place.

The general decrease in employee health is not only burdening the federal budget but also hindering the performance of Finnish organizations. In fact, all employees have occupational health coverage in Finland, meaning that employers are required to arrange, at their own expense, professional-level occupational health services for their employees (Kela, 2009, 4). Thus, the increasing amount of exhausted employees has brought about unforeseen dysfunction of Finnish organizations. When in 2006 the average number of sickness absence days among Finnish employees was 8.5, two years later the figure had already climbed to 10 (Kauppinen et al 2009, 278). No wonder the total costs concerning employee healthcare are increasing. When in 2006 the reactive employee healthcare totaled 459 million euro, year later the costs reached 589 million resulting an alerting 22 percent increase just in one year (Kela, 2009, 5).

The recent trend is anything but encouraging. Finnish employers lose 21 billion euro per year for not treating their employees well when combining the costs of occupational health related direct money flows, paid pensions, and immature retirement costs (Aura, Ahonen & Ilmarinen 2009, 10). Regardless of how one chooses to view the issue, neglecting the wellbeing of employees is an expensive managerial decision and a very short-sighted way to save money even during recession. Such neglect not only results in losing the individuals incapable of working, but also the skilled workforce that seek career options from organizations paying more attention to these issues. As a result, the whole viewpoint towards employee wellbeing is gradually changing now that employers are starting to realize that exhausted employees hinder the profits the same way than inefficient logistics or decreasing market demand.

As a result, Finnish organizations are starting to incorporate elements of preventive healthcare into their human resource policies and programs. Consequently, employees are increasingly investing in voluntary corporate wellness services. The employer sponsored programs designed to improve employee wellbeing are seen as excellent forums for controlling both the risks of exhausting the employees and losing them either to the disability pension or to competitors (Mitchell 2004, 12).

Due to the fact that in Finnish organizations the shift from reactive occupational healthcare to more proactive preventive healthcare has occurred only recently, there exist almost no comprehensive studies revealing the “wellness business” situation in Finnish organizations let alone studies exploring the underlying reasoning of Finnish organizations to manage the employee wellbeing. Moreover, the literature examining the employee health in the context of Human Resource Management is surprisingly scant as the origins of the discipline spur from medicine and psychology (Ginn & Henry 2003, 24). In this study the obvious research gap is covered by studying the rationales of Finnish organizations to provide corporate wellness services to their employees and revealing whether the organizational characteristics can be proven to determine these rationales.

1.2 Research Problem and Objectives

The goal of this study is to reveal the varied reasoning of Finnish organizations to offer wellness services to their employees and to examine whether the organizational characteristics can be seen as determining these attitudes. Furthermore, the study aims at exploring how many different corporate wellness segments it is possible to find within the Finnish corporate wellness market. The research objective is approached by linking the corporate wellness literature to the two main approaches to IHRM, namely Resource Based View of the firm (RBV) and social exchange theory. The linkage is crucial in order to form the necessary measures used in the empirical part of the study.

To these ends, the study focuses on the following main research question:

What are the underlying rationales of Finnish organizations to provide wellness services to their employees?

Along with the main research question, also the following question will be answered:

Can the Finnish corporate wellness market be segmented based on these rationales?

Do organizational characteristics such as industry, size and internationalization stage impact organizations' rationale to provide wellness services?

The empirical part of the study is based on data collected in March 2010. An online questionnaire was sent to 1,040 Finnish organizations' HR managers and CFOs, of which 148 answered the questionnaire. The gathered data is altered to two exploratory multivariate techniques. First, factor analysis is conducted in order to identify the respondents' underlying attitudes towards employee wellbeing. Second, cluster analysis is utilized to segment the Finnish corporate wellness market and to profile the organizations based on the adopted attitudes.

1.3 Structure of the Study

Chapter 2 introduces the research topic by illustrating both the current changes in work life and the consequences for employee wellbeing. The decrease in individual wellbeing is further reflected to the wellbeing and functioning of an organization, which then brings the reader to the literature review on occupational health. Here, the origins of the discipline are first introduced and thereafter linked to the organizational research by adopting the IHRM perspective. After the study field is brought into the organizational context, the viewpoint is further narrowed to corporate wellness in Chapter 3.

Chapter 4 follows by presenting the research method. The process of data collection is described and the two statistical analyses methods introduced. Chapter 5 thereafter presents the empirical findings of the study by revealing both the different underlying reasons for organizations to provide wellness services to their employees and segmenting the overall Finnish corporate wellness market. Finally, Chapter 6 summarizes the findings and draws conclusions for both managers and future research.

2 CHANGES IN OCCUPATIONAL HEALTH

In this chapter the recent changes in the work life along with their impacts on employee wellbeing will be introduced before turning the attention to the actual occupational health literature. Here, the definition of occupational health is conceptualized and linked to the two main approaches to IHRM. This chapter thus concentrates on defining the key concepts of the research together with relating the issue with managerial studies.

2.1 Changes in the Work Life

Corporations have adopted global or regional strategies quickly in recent years. Several developments have been driving this trend including standardization of market demand among countries, falling international transportation and communication costs and the rising tide of global competition against which efficiency is a necessary defense (Palich & Gomez-Meija 1999, 588). Indeed, multinational corporations have spread out the globe and quite dramatically changed the local business cultures. The ongoing tendency has also influenced Finnish organizations and led to a completely new way of doing business, which again has had far reaching implications to the working lives of employees.

The multinational corporations have brought about a new working order that is free from locational and temporal constraints and which is redefining the “normal” working day (Farrell & Geist-Martin 2005, 546). Daily work arrangements decreasingly remind the traditional local face-to-face arrangements that take place within the boundaries of an organizational unit, but on contrary consist of collaborative networks and virtual teams that are bound together by telecommuting and fuelled primarily by information and communication technologies (ICTs). Nor does work respect temporal boundaries as in the current “long hours culture” employees are both expected and required to work long hours in order to keep up with the increasing competition (Tienari & Vaara 2003, 56).

The prevailing model of “long hours culture”, which enables the flow of humanity, information and capital across geographical and temporal boundaries, includes a notion of ideal employee who is flexible and shows commitment by working long hours. The ideal employee works simultaneously within multiple time zones being available 24/7 and prioritizing his or her career over all other aspects in life. This puts increasing demands on people to compete, create new ways of thinking, prove their commitment, and constantly develop their professional competences. One can name various features of this kind of living: precarious jobs, long hours of working, the collapse of the boundaries between work and free time, relatively poor pay when considering all the hours at work, high levels of mobility, passionate attachment to work and the existence of creative employees, informal work environments and constant need for keeping up in the rapidly changing fields (Gill & Pratt 2008, 14 & Berardi 2006, 24).

These changes in work lives have had remarkable influences over the whole society. In fact, as Scott (2000, 35) points out, the transformation of work has eventually transformed the whole society from a class society into a risk society. Also Adam, Beck and Van Loon (2000, 11) refer to the current way of living with the same notion. While in class society the production took place in factories, in today’s risk society, the production has been transformed into employees’ minds creating a totally new type of worker; creative worker. As opposed to the manufacturing work, creative work can be done regardless of time and space. Creative work is characterized by an increasingly pervasive logic of organizational uncertainty where social structures, institutions and relationships are more complex, contingent and fragmented and where employees constantly fear losing their position.

In fact, the feeling of urgency within workplaces has almost doubled in three decades (Lehto & Sutela 2008, 199). This has had serious effects on employee wellbeing. It has slowly changed the psychological contract both horizontally between colleagues and vertically between employers and employees. The horizontal contract is faded by technological intermediation and cultural differences that have significant impacts on the functioning of employee interaction. The absence of many psycho-social cues can mitigate the negative effects engendered by the normal interaction due to the difficulty of overcoming cultural barriers and establishing a common frame of reference. In addition, the technological intermediation is less conducive to informal or social

exchanges hindering the possibility for colleagues to form social binds. (Palich & Gomez-Meija 1999, 588). As a result the employees can feel isolated from the normal work interaction.

Unreasonable expectations, short-term focus and unethical leadership behavior have all contributed to a growing cynicism in the workplace (Baptiste 2008, 287). Managers are often incapable of controlling the organizational changes that seldom appear on a sequential basis with periods of stability in between, but instead come together causing a chaos both to the workplace and to the minds of employees. In this constant change, individuals do not have time or space to make adjustments to reach a state of equilibrium (Hillier, Fewell, Cann & Shephard 2005, 429). This in turn weakens the vertical psychological contract between employee and employer.

The new work order has certainly had its impacts. Already in the beginning of the 1990s, rapidly changing work environments, characterized by i.e. mergers and acquisitions, work-family imbalances, poor leadership, poor internal communications, and work load had an effect on employee lives. An American survey conducted jointly by International Communications Research, American Society of Chartered Life Underwriters & Chartered Financial Consultants, and the Ethics Officer Association sheds some light on these effects. The results of the survey reveals that 56 % of employees reported being under immense pressure and as many as 88 % of respondents reported physical or psychological reactions to this pressure, including insomnia, headaches, depression, weight changes, and panic attacks. (Danne & Griffin 1999, 375).

Indeed, the increasingly high cost of employee healthcare has been well-documented. U.S. corporations pay about 30 % of the national health bill by providing medical insurance as an employee benefit (Chernew; Cutler & Keenan 2005, 1036). Not only have the insurance costs risen, but also the other costs relating to poor stage of occupational health. While in the 1990s the total annually employee healthcare costs in the U.S. were around \$43.7 billion (Cooper & Cartwright 1994, 287), today the same figure is unbelievable \$300 billion (DeVries 2010, 47).

Although most of the alerting facts are documented in the U.S., the situation in Europe is not any better. In Europe every sixth person (active population between 16 and 64) is suffering from a long standing health problem or disability (Eurostat 2003). This means 45 million European

individuals. In its 2005 survey of absence management in the UK, the Chartered Institute of Personnel and Development reports that an average of 8.4 days per year are lost to sickness absence at a cost of £601 per employee. Minor illnesses are the most significant cause of short-term absence, but stress-related absence continues to increase. In fact, stress and mental illness related absence has already risen to the top two causes of long-term absence among non-manual employees (Roslender, Stevenson & Kahn 2006, 50). As a result, sickness absence causes UK employers £11.6 billion annually (MacDonald 2005, 3).

The situation is even worse here in Finland where as many as 32 % of active population (between 16 and 64) suffers from a long standing health problem or disability (Eurostat 2003). Finnish employers loose 21 billion euro annually for not treating their employees well when combining the costs of occupational health related direct money flows, paid pensions and immature retirement (Aura, Ahonen & Ilmarinen 2009, 10).

As the above factors indicate, employee wellbeing, or more correctly a lack of it, is a growing problem for advanced societies' organizations. As a result, organizations have started to intervene to the problem by providing wellness services to their employees. Nevertheless, not all organizations are corresponding to the problem equally. The employers' differing point of views towards the whole concept of occupational health determine what wellness services are provided and to what extent. Thus, in order to perceive the rationales of Finnish organizations to provide wellness services to their employees, the different point of views towards the notion of occupational health need to be clarified and tied to the two broad approaches of International Human Resources Management (IHRM): Resource Based View of the firm (RBV) and social exchange theory. Next the origins of the discipline are quickly introduced before turning the attention to the actual occupational health literature.

2.2 Origins of the Discipline

The past 15 years have seen a merging of multiple disciplinary approaches to occupational health and employee wellbeing. This is not surprising keeping in mind the origins of the discipline. The

research field emerged during 1800 from interdisciplinary set of scientific contributions including medicine, psychology and technology that only afterwards have been transferred to the organizational context (Macik-Frey; Quick; Quick & Nelson 2009, 3). It has been a combination of preventive medicine focusing on disease epidemics, psychology giving concern for human wellbeing and engineering trying to translate its innovations into human work systems (ibid., 5). Although the history of preventive occupational health and employee wellbeing literature within organizational context has only developed towards the end of the 1900s, one can name three main concerns of the literature aiming at (i) identifying health risk factors related to the work itself, (ii) preventing the consequences of unhealthy workforce and (iii) developing efficient intervention strategies.

While the traditional evaluations of occupational health concentrate on identifying health risk factors and examining the consequences of unhealthy workforce, the concern is currently on finding efficient intervention strategies to prevent the consequences happening in the first place (Macik-Frey; Quick; Quick & Nelson 2009, 7). In this study, the interest lies precisely on the last concern, as the overall aim is in discovering the rationales to intervene with the employee health and wellbeing. Due to this, the key points of departure for this study date from the review by Danna and Griffin (1999), it being among the first ones to bind the notions of health and wellbeing to the organizational context. Thus, also here their famous framework is benefitted in linking the two approaches of IHRM to the occupational health literature.

2.3 Occupational Health in the Context of IHRM

Over the past two decades, the main priority of International Human Resource Management (IHRM) research has been on identifying HRM practices, bundles of practices, work systems or other configurations of either practices or policies which are likely to have a positive effect on organizational performance (Dany, Guedri & Hatt 2008, 2095). Increasingly, the focus has been shifting from the micro perspective analyzing single nominators of effective workplace, often having individual as the target of interest, to more macro or strategic perspectives highlighting the role of HR management systems as solutions to business problems in general.

The shift in focus is reasonable as by definition the human resource management includes all those activities affecting the behavior of employees in their efforts to formulate and implement the strategic needs of a business (Wright & McMahan 1992, 298). The term “Strategic Human Resource Management” (SHRM) is generally used to signal this more comprehensive view pointing out that human resource management practices should enhance organizational performance, not least in financial terms (Becker & Huselid 2006, 900).

There exist multiple approaches to IHRM and almost as many categorizations. In a broad sense the field can be claimed to consist of two main approaches: the one focusing on the relationship between IHRM and performance, and the other taking a broader and more employee oriented perspective. The former represents an American “hard” utilitarian perspective arguing that what is good for the organization is good for the employee, whereas the latter represents European “soft” and more pluralist perspective (Gooderham, Parry & Ringdal 2008, 2041).

Indeed, there are two completely different perspectives providing alternative reasoning for managing and improving employee health and wellbeing. The one stemming from the Resource Based View of the firm (RBV) cherishes the outcome, i.e. improved organizational performance, of the HRM practices, but has lately been criticized on neglecting the employee health from the equation. Thus, the social exchange theory, stemming from sociology, concentrates on filling in the gap in the mainstream literature by explaining the links between HRM practices and employees’ wellbeing at work (Baptiste 2008, 287). Therefore, the perspective is built more on the bottom-up point of view while focusing either on commitment building or pure employee wellbeing. That is not to say that it would not also aim for improved organizational health, which it does, but to highlight the fact that the increased employee wellbeing is not only seen as mean to an end, but also as a valuable end result itself that might afterwards lead to a better overall performance of an organization.

As both of the IHRM approaches aim at managing the behavior of employees in order to formulate and implement the strategic needs of a business, they certainly target also at managing the employee health and wellbeing. In fact, the approaches share the overall goal, but differ in

their means and reasons. The different rationales to manage employee wellbeing can be explained by the divergent meanings given to the occupational health concept. Next the two IHRM approaches are explained in more detailed manner simultaneously revealing their stand point to the employee health and wellbeing. On the one hand there are those RBV deriving thoughts highlighting the control or calculative nature of IHRM and on the other hand, there are thoughts that focus on commitment-based or wellness nature of IHRM deriving from social exchange theory.

2.4 Resource Based View of the Firm

Numerous theorists have argued that human resources can potentially be a powerful source of sustainable competitive advantage for organizations, and thus have sought to demonstrate that there is a positive relationship between IHRM and firm performance (Becker & Huselid 2006, 900). As a matter of fact, majority of IHRM theories derive from Resource Based View of the firm and accordingly view employees as strategic assets in creating sustainable competitive advantage for a firm by linking investments on human capital to the overall performance of an organization (Wright & McMahan 1992, 302).

The IHRM literature stemming from RBV can be further divided into three schools of thought: universalistic perspective, configurational perspective and contingency perspective. Now the different nuances of these views will be presented before turning the attention to the alternative point of view presented by social exchange theory.

2.4.1 Universalistic Perspective

Of all the three RBV schools of thoughts, the universalistic perspective takes the most micro-level approach to the performance issue. It is associated with the term “best practice” as its underlying assumptions argue that there is a linear relationship between universally applicable best HR practices and organizational performance (Boselie, Paauwe & Jansen 2001, 1108).

The researchers adopting the universalistic point of view posit that some HR practices are always better than others and that all organizations should adopt these best practices (Delery & Dory 1996, 802). The school of thought got ground when Pfeffer (1994, 6) demonstrated that the traditional sources of success – products and process technology, access to financial markets and economies of scale – no longer acted as primary competitive advantage for firms in the beginning of 1990s, and that the focus should be switched to employees. More recently it has been demonstrated how the Netherlands has been able to outperform many of the other European countries in getting a highly competitive economy due to the high usage of “best HRM practices” (Boselie, Paauwe & Jansen 2001, 1122).

Universalistic arguments are the simplest form of theoretical statement in the RBV literature because they imply that the relationship between a given independent variable and a dependent variable is universal across the population of organizations. Thus, the approach provides quite straightforward practical advices to managers as according to it, developing universal best practice HR policies require only two steps. After first identifying the important business and HR strategies, the firm must then adopt the best HR practices targeted to the exact strategic dilemmas (Delery & Dory 1996, 806).

2.4.2 Configurational Perspective

Central to the configurational or high “performance work system” perspective is the argument that the impact of HRM on organizational performance is dependent on the adoption of an effective combination of HRM practices, often referred to HRM bundles (Delaney & Huselid 2996, 952). Thus, it states that a firms’ performance is dependent on bundling together interrelated elements of HRM practices in a consistent manner.

The basic idea is that synergies, both among a firm's HRM practices and between a firm's HRM practices and its competitive strategy, can have an additional and positive effect on firm performance (Delaney & Huselid 2996, 952). Thus, the configurational mode represents a more systemic perspective than universalistic school in viewing a firm as a production system. It

highlights the cumulative nature of change by viewing HRM practices' link to performance as path-dependent. Therefore, it suggests that although adopting a single HRM practice may influence performance positively, the adoption of a set of complementary HRM practices influences performance more strongly (Laursen & Foss 2003, 249). Therefore, the configurational approach combines HR practices in a fashion that promotes consistency whereas the universalistic view simply adds individual effects when combining incompatible HR practices (Delery & Dory 1996, 812).

Hence, configurational approach states that all corporate systems should form coherent bundles of mutually reinforcing practices, systematically led from top-down, delivering an end product by firstly improving employees skills and abilities with efficient education and training, thereafter motivating employees with required incentives and finally providing them with sufficient work autonomy (Guest 2002, 340). For example Batt & Applebaum (1995, 316) in their study demonstrate that both workers and firms gain from mutually reinforcing practices that improve the overall business performance.

The configurational argument is based on the assumption that HRM bundles are equally effective under all conditions. It is based on an idea that the closer an organization's HR practices resemble the correct prototypical system, the better the performance (Boselie, Paauwe & Jansen 2001, 1109). Thus one could argue that configurational bundling represents closely related approaches to universalistic approaches as both strongly suggest that there are ideal types of HRM practices that can be used in all kinds of contexts and environments. The difference is that here, it is all about adopting the ideal set of practices that most consistently support the organization's strategy.

2.4.3 Contingency Perspective

Like the configurational approach, also the contingency approach to IHRM is concerned about the strategic fit between mutually reinforcing bundles of HR practices and business strategy. The basic assumption is that those who manage to achieve this strategic fit will also gain superior

performance. However, contrarily to the configurational view, contingency theorists argue that in order to be effective, an organization's HR policies must be consistent not only with organizations' strategy, but also with other aspects of the organization, i.e. its context (Delery & Dory 1996, 804).

This behavioral perspective implies that successful implementation of business strategy relies heavily on contextual factors such as employee behavior and specific industrial requirements. As an organization's strategy necessitates behavioral requirements for success, HR practices must be used to control employee behavior encouraging behaviors that are consistent with the business strategy and industrial requirements (Delery & Dory 1996, 808). Hence, the perspective supposes that the relationship between HRM practices and performance will vary according to company size, company age, technology, capital intensity, the nature of work, industry, ownership and location (Boselie, Paauwe & Jansen 2001, 1109).

Therefore, contingency perspective rejects the universal applicability of HRM practices, and thus differs from both universalistic and configurational theories. Moreover, contingency arguments are more complex than the other two RBV deriving perspectives because they imply interactions rather than simple linear relationships between HRM practices and performance. According to the contingency perspective HRM practices will interact differently when relating to different kinds of companies (Delery & Dory 1996, 807). Therefore, HR's strategic impact is seen as contingent on its contribution to the effectiveness of strategic business processes. The value of this impact increases when the HR architecture is differentiated by industry and other relevant nominators of the business strategy.

Figure 1. Summary of RBV Deriving Perspectives to Corporate Wellness

Type of Wellness Service	Universalistic perspective	Configurational perspective	Contingent perspective
Universal / Context specific	Universal	Universal	Context specific
Individual / Bundle	Individual	Bundle	Bundle
Externally fit / Internally fit	Externally fit	Externally fit	Externally fit and Internally fit

2.5 Social Exchange Theory

The brief overview of different approaches to RBV demonstrates that there is little concern on employees. The role of an organization is to improve business performance and the employees are more or less seen as means to an end. Nevertheless, recently the perceptions have changed as managers are increasingly endeavoring to develop a committed and qualified workforce in a climate of trust and co-operation (Gould-Williams 2004, 65). There is a shift in the focus from company performance to employee' satisfaction and wellbeing.

There exist two employee friendlier approaches to IHRM. The first, commitment perspective, builds the employee to the IHRM-performance relationship by focusing on employee attitudes and job satisfaction as key mediators of the relationship. The second approach, employee wellbeing perspective, concentrates on work satisfaction and employee wellness. (Guest 2002, 345). Both of these perspectives belong to the social exchange theory that is used to explain the links between HRM practices and employees' satisfaction at work. Social exchange theory suggests that once there is perceived employee trust in managers and the employees feel that their wellbeing is a matter of managerial concern employees will reciprocate and respond with

positive work attitudes through increased motivation and commitment that in the end leads to enhanced organizational performance. (Baptiste 2008, 290).

Whereas commitment approach focuses more on employee attitudes and job satisfaction, the employee wellbeing perspective concentrates more on subjective wellbeing and work satisfaction. They both highlight the job or work satisfaction, but take different angles to the issue. Commitment approach can be argued to refer to narrower job satisfaction and employee wellbeing to broader work satisfaction. Job satisfaction refers to pleasurable or positive emotional state resulting from the appraisal of one's job or job experiences, whereas work satisfaction refers to one's subjective sense of satisfaction not only with work but also with the larger organizational context within which work exists (Locke & Latham 1990, 247). Either way, both of these perspectives view the employee wellbeing from broader viewpoint than the three RBV deriving approaches. Next, these approaches are explained in more detail.

2.5.1 Commitment Perspective

Commitment perspective focuses primarily on motivation based attitudes. According to the approach the goal of IHRM is to build a committed employee whose work can be described with the now very popular words of quality and flexibility. Thus, commitment perspective aims at shaping attitudes by forging psychological links between organizational and employee goals (Gooderham, Parry & Ringdal 2008, 2045).

The key result is to show how the organizations with employee friendly practices and activities have superior performance through the improved employee attitudes as a catalyst (Guest 2002, 343). The improved attitudes are gained through the strengthened psychological contract between the employee and the company resulting over time a better organizational outcome through improved employee performance.

What distinguishes the commitment approach from approaches stemming from RBV is the fact that it is based on assumption that traditional controls no longer success in attracting new

generation workforce. Indeed, on contrary to the earlier generation's individuals, the so called generation Y employees, born 1978 onwards, decreasingly view work as defining their identities and therefore more willingly leave their job if the employer is not capable of responding to their expectations (Montana & Petit 2008, 139). Used to live under constant change, "with strong societal stressors", the new generation employees expect employers to invest in their career development and to provide a work culture with healthy social relations (Kelan & Lehnert 2009, 3). Thus, it is seen that by taking a more active role in managing employees' job satisfaction, employers can create a greater sense of job security and be more likely to retain the best human resources. Commitment perspective thus represents a move from top-down command to one that is based on high involvement and mutual commitment (Gooderham, Parry & Ringdal 2008, 2045).

Hence, the commitment approach emphasizes the need for management to recognize employees as significant stakeholders in the enterprise. Organizations following a commitment-based approach implement HR practices that collectively demonstrate a long-term investment in their employees motivating them to contribute high levels of discretionary behaviors by aligning their interests with those of an organization and creating a mutually reinforcing high-investment employer-employee relationship. (Collins & Smith 2006, 546).

Thus, the direct top-down control is replaced by management through organizational cultures. The approach argue that HR practices do not directly impact performance, but instead foster social climates that facilitate the development of employee-based capabilities that in turn create competitive advantage. Further, the social climate of a firm, i.e. employees' shared believes regarding the norms and values that govern interactions among them as they carry out their jobs, can affect employees' abilities, motivations, and opportunities to exchange and combine their knowledge. In particular, relational aspects of organizational social climate enable employees to exchange and recombine knowledge and thus improve their work performance (Collins & Smith 2006, 546).

Therefore, the approach is built on the notion of social interaction where the influence is mutually shared between management and employees. Management needs to comprehend

employee interest in order to create the necessary psychological contract. Without such processes, employee intrinsic motivation is undermined giving rise to employee resentment and distrust, which results in unwillingness to take responsibility for the performance of the firm. (Gooderham, Parry & Ringdal 2008, 2045).

2.5.2 Employee Wellbeing Perspective

The second social exchange stemming approach to IHRM links HR practices to employee wellbeing and more comprehensive work satisfaction (Guest 2002, 347). On contrary to the commitment approach, the employee wellbeing approach regards the work satisfaction beyond the boundaries of job by highlighting the overall sense of happiness of the workforce (Baptiste 2008, 287).

Wright and McMahan (1992, 312) call this perspective also as power and politics IHRM pointing out that it is often political rather than technical actions that determine the wellbeing of employees. The statement is justified, as employee wellbeing does not exist on its own in the workplace but within a social context. Thus, individual lives are affected by social relations with organizational agents, lifestyle and employment changes, which construct the experiment of wellness. Certainly, the employee wellbeing refers to how people feel about their lives. Therefore, one can claim that employee wellbeing perspective is strongly based on subjective wellbeing (SWB) notion.

Subjective wellbeing provides a comprehensive view on life quality, conventionally measured by questions of life satisfaction. SWB must be measured directly because it cannot be inferred from traditionally used objective indicators, such as health or income. Hence, although SWB concepts such as 'happiness' per se are assumed to be a universal experiences, there are often fine-grained differences with regards to their conceptualization between cultures. Wellbeing may indeed be perceived somewhat differently by different people under different circumstances. (Lau, Cummins & McPherson 2005, 425). All in all, employee wellbeing approach can be said to stand

for the most subjective and broad determination of wellness, where the aim of HR practice is to achieve a generally happy workforce.

Figure 2. Summary of Social Exchange Deriving Perspectives to Corporate Wellness

Wellness service targeted at	Commitment perspective	Employee wellbeing perspective
Job satisfaction / Work satisfaction	Job satisfaction	Work satisfaction
Objective wellbeing / Subjective wellbeing	Objective wellbeing	Subjective wellbeing

2.6 Occupational Health and Employee Wellbeing

As can be interpreted from above, the two approaches to IHRM apply different means to capitalize the benefits of effective workforce. Whereas RBV deriving perspectives highlight the importance of either single best practice or bundles of HR activities enabling the employees to work effectively, the social exchange theory emphasizes the importance of satisfied and happy workforce. The two approaches take different perspectives to employee wellbeing. In this chapter, the definitions of employee health and wellbeing are clarified and linked to the two IHRM approaches.

Even at its most general, health is a difficult construct to define. The general conceptualization of wellbeing is equally vague. But as the study at hand views the concepts from organizational perspective, both of the terms are defined according to the Danna and Griffin (1999) definitions which are widely seen as appropriate for organizational research (see for example Macik-Frey, Quick & Nelson 2009). Danna and Griffin suggest that health as a term is narrower than wellbeing and thus should be applied to organizational settings when specific physiological or

psychological indicators are of interest and concern. On the other hand, wellbeing tends to be a broader concept that takes into consideration the “whole person.” (Danna & Griffin 1999, 364).

Occupational health as a definition concentrates purely on the physiological and psychological aspects of health within organizational context. Here physical health refers to employees’ physical wellbeing, i.e. non-existence of negative physical effect, and psychological health on the other hand (although not having single definition consistent in the literature) to the absence of distress caused by the organizational settings (Farrell & Geist-Martin 2005, 548). Occupational health thus can be seen as context-free in its nature as it means same things to the different people under different organizational settings. In short, occupational health aims at preventing all the possible physiological and psychological health risks organizational settings could alter the employee to.

Whereas occupational health as definition is limited to cover only context-free physiological and psychological aspects of health and to limit its responsibility within organizational setting, the employee wellbeing as definition argues that wellbeing does not represent the same state of being and mind for everyone. Indeed, it adopts a fairly subjective view towards employee wellbeing by defining it as broadly as “ones overall experience in life” reflecting ones self-described happiness (Diener et al 1999, 277).

Referring to one’s overall experience in life, the employee wellbeing thus takes a broader viewpoint towards corporate wellness. In addition to the physiological and psychological aspects of health, it also covers two other elements of health. Thus, employee wellbeing is seen as being constructed by physical, psychological, spiritual and social aspects. Here spiritual health refers to a process of individual growth and nourishment at workplace by highlighting the importance of finding individual purpose for work and having a meaning in day-to-day tasks, and social health to the quality of an individual’s network of professional and personal relationships (Farrell & Geist-Martin 2005, 549). Consequently, employee wellbeing adopts subjective approach to corporate wellness where the overall happiness of an employer is determined not only within organizational setting, but also during free time.

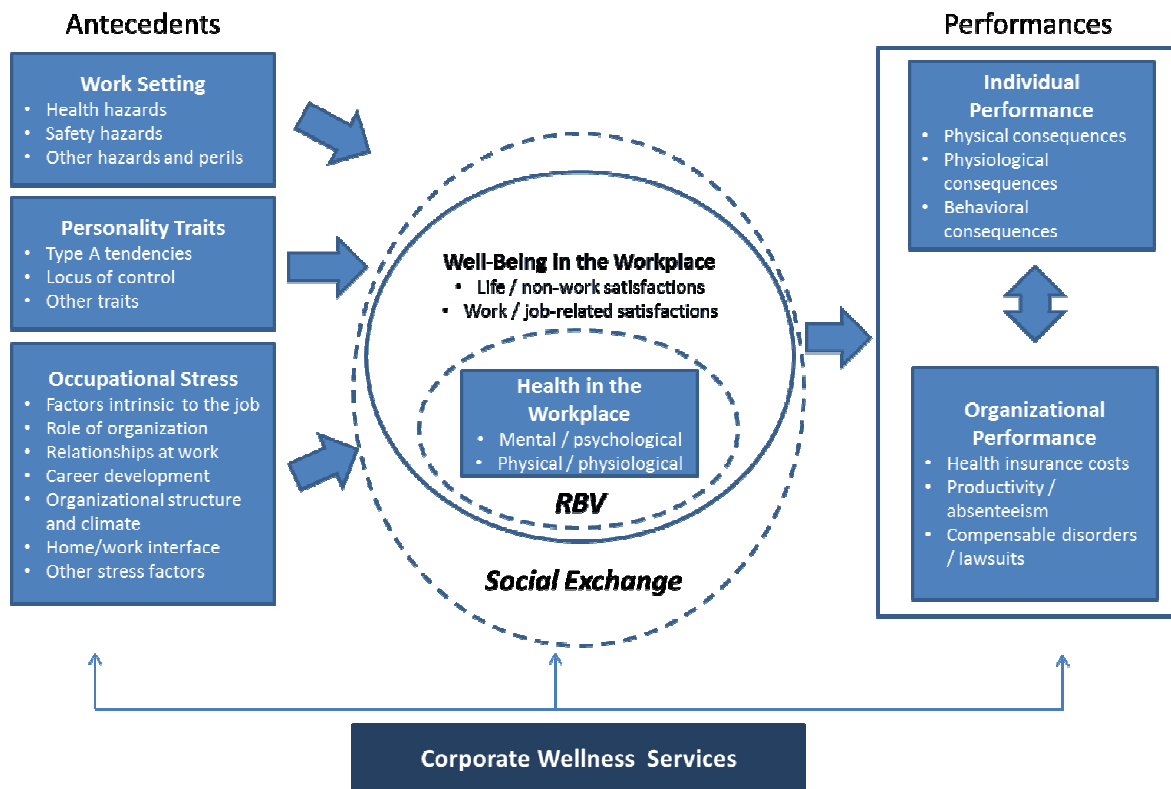
Therefore, wellbeing is about quality of one's life guided by a person's own set of criteria. Accordingly, stress and illness are consequences of the lack of fit between individual needs and demands and those of the environment. Wellbeing includes factors related to one's job (i.e. work overload, long hours and travel), one's role in the organization (i.e. role ambiguity, role conflict, and the degree of responsibility), one's relationships at work, one's career development and the organizational structure and climate the person is part of (Cooper & Cartwright 1994, 265). In short, employee wellbeing is all-encompassing physical, psychological, spiritual and social state of mind that is based on work environment and free time suitable integration (Kivistö, Kallio & Turunen 2008, 21).

As can be expected, the RBV deriving perspectives, seeing employees as company owned assets and by providing them wellness services in order to get them work more effectively, understand corporate wellness from occupational health perspective. Here corporate wellness aims at preventing the possible physiological and psychological health risks of an organizational setting. On the other hand, the perspectives deriving from social exchange theory adopt the broader employee wellbeing understanding to corporate wellness and thus see it as all-encompassing physical, psychological, spiritual and social state of mind that is based on work environment and free time suitable integration.

When applied to the framework by Danna & Griffin (1999), it becomes clear that the social exchange viewpoint towards corporate wellness is broader than RBV's point of view, as it includes also non-work determinants to overall employee satisfaction. Nevertheless, they both are seen as incorporating three general sets of antecedent factors but with different emphasizes. One set of factors relate to the work setting itself, whereas the other set of factors deal with personality traits (the way an individual reacts to stressful situations) and the organizational settings (indicating how often and for what extent the individual has to deal with occupational stress). Depending on the applied viewpoint to the corporate wellness, these three sets of antecedent factors with differing emphasizes determine the occupational health and more broadly the employee wellbeing in the workplace that again have interrelated sets of individual and organizational consequences in the workplace.

One set of consequences have the most direct implications for individuals. Here the RBV perspectives concentrate on physical and psychological consequences whereas social exchange theory deriving perspectives include also the spiritual and social consequences into the equation. The other set of consequences, including health insurance costs, productivity and absenteeism, is more directly relevant to organizations. Finally, the role of wellness services is highlighted showing their potential impact on employee health and wellbeing.

Figure 3. The RBV and Social Exchange Approaches to Corporate Wellness



Source. Adapted from Danna & Griffin 1999, 364

To sum up, from RBV view point, corporate wellness services are seen as an integral part of business and human resource targets. Corporate wellness can be defined as systematic activity that has clear targets and resources which are regularly measured both on individual and company levels. Thus according to the RBV, the physiological and psychological health of

employee has to be managed as it has distinctive impact on business profitability through employee effectiveness (Aura, Ahonen & Ilmarinen 2009, 8).

Universalistic school proposes that there exist best practices that are effective regardless of industry and other contextual factors thus also arguing that there are best practices with regard to wellness programs. Configurational theorists, while agreeing with universalistic theories that wellness services are equally effective under all conditions, highlight the idea that wellness services work best when they mutually reinforce each other in a way that supports the organization's strategy (Ginn & Henry 2003, 25). Thus, stressing the benefits of synergies, both among wellness practices and between a firm's wellness services and its competitive strategy (Falkenberg 1987, 511). Contingency theories agree that wellness services must support the organization's strategy, but stress the fact that best wellness services must not only be contingent with the business strategy but also with the internal characteristics of an organization (i.e. company size and industry).

Hence, the three approaches stemming from RBV all take a top-down perspective to corporate wellness where the employee is seen as valuable resource to the organization and in the sake of increased productivity his or her wellbeing is been controlled through the adoption of either individual wellness practices or configurational bundles that are either made fit only with the overall corporate strategy or also with other aspects of the company. Corporate wellness services offer a way of securing higher employee productivity, providing insurance and employee healthcare cost savings, and decreasing absenteeism that lead to greater company performance.

To sum up, from a social exchange perspective, corporate wellness services offer a way of securing the all-encompassing physical, psychological, spiritual and social wellbeing of employees and by that enhance the loyalty and commitment of employees, i.e. improving employee morale, by showing them that the organization is concerned about their wellbeing. Here HR practices aim at improving employee health, which is seen as a valuable goal itself and not only as a mean to improve the company performance. As a consequence, HR practices aim also at improving the company image through the wellbeing and generally happy and satisfied workforce.

2.7 Critical Perspective

The perspective of this study is based on mainstream IHRM theory assuming that wellness services lead to better outcomes for employees and organizations. Yet, there are many critical approaches to IHRM literature pointing out some questionable consequences of blindly adopting the mainstream way of thinking. Without going too deep into the issue, some of these critical points of view will be presented and discussed.

The IHRM literature is often being criticized for being normative in its nature when presenting a somewhat linear relationship between strategies, instruments (i.e. wellness services), individual outcomes and organizational outcomes. Due to its normative nature, it is often criticized as neither being power-neutral nor gender-neutral.

2.7.1 Power-neutrality

First, the power-neutrality refers to the fact that the view does not consider the implicit form of power, namely hegemonic power processes (Mescher, Benschop & Doorewaard 2010, 23). The concept of hegemony refers to the power of daily life routines making people subjected to it without being fully aware of the influence. It is about dominant cultural norms transforming into shared truths and self-evidences that do not allow for discussion. These dominant norms represent themselves in the normal ways of doing things within the organizational context. (ibid., 23). Working in an organization brings employees gradually to accept these organizational norms and practices without being aware of the intended and unintended side effects, that is to say meaning and identity formation.

The hegemonic power allows employers direct means to form organizations' practices and norms to its benefit and through these exercise indirect influence over employees. Organizations' norms and practices become shared truths that start to determine the way of thinking by creating the boundaries for organizational reality. Through the constant interaction between the organizational norms the employee obedience moves from external obedience to internalization

through social learning (Barnett & Duvall 2005, 49–52). Once the employee has internalized the norms and rules they start to restructure his or her organizational identity and he or she becomes part of the hegemonic power.

Thus, corporate wellness arrangements can be seen as containing rules and codes that include conceptions of ideal worker. Often, the characteristics of this ideal worker is full-time availability, mobility, high qualifications, a strong work orientation and no responsibilities in life other than the ones required by the organization (Mescher, Benschop & Doorewaard 2010, 24). Thus, the corporate wellness services construct productive subjects as David McGillivray (2005, 132) points out drawing on Michel Foucault's ideas on governmentality and subject. From critical point of view, corporate wellness simply acts to colonize the subjective dimensions of labor to maximize the productivity of the working body to meet the increasing demands of the work life.

2.7.2 Gender-neutrality

If HR practices and wellness services can be criticized of not being power-neutral, they can also be pointed out to strengthen the inequalities between genders. Indeed, many studies have discovered how wellness services are highly gender -unneutral. In their research, Mescher, Benschop and Doorewaard (2010) noticed that 60 % of the “work life balance” -program rationales in ten multinational corporations were related to childcare and almost always the voices were females. Hardly ever the “work life balance” programs were targeted to male workers and in the few exceptions the males taking advantage of “work life balance” program the rationale behind the decision was to have more time for individual exercising goals.

Other studies demonstrate how wellness services can also result an increase in work-life conflict (see for example Brought, Holt & Bauld et all. 2008, 262). The reason is that employees are not passive objects but active subjects, shaping their own working situation. Thus, a potentially adequate intervention aimed at reducing a constraint in the work situation may even have a

negative impact on the health and motivation of employees when forced upon them by an authoritarian supervisor (Kompier, Cooper & Geurts 2000, 386).

Thus, wellness services might not always have solely positive outcomes and also the possible negative consequences should be kept in mind. But as no theory can claim to be un-normative in its nature and as every perspective always favors some features over others, this study from now on concentrates on the intended outcomes of wellness services. In fact, it is now time to take a closer look at corporate wellness literature.

3 ORGANIZATIONAL PERFORMANCE AND WELLNESS SERVICES

The adopted definition to corporate wellness determines the sufficient way of an organization to manage employee health and wellbeing. Individuals do not exist in workplaces in vacuum, but on contrary form their workplace identities in relationship with their colleagues and supervisors. Therefore, health and wellbeing is born in social interaction between the employees and other individuals working in the same organization and can be seen as a by-product of constructed realities and identities (Guzzini 2005, 499). Thus, employer, who defines the social context of work and through that participates in constructing the working identities of his or her employees, has a serious influence on the wellbeing of both employees and the whole organization.

There are many interventions targeted to manage the employee health and wellbeing. Nevertheless, they have not been studied enough as the focus of the previous literature has been mostly on organizational health risk consequences. Therefore, the existing studies have concentrated more on reducing the effects, rather than reducing the presence of stressors at work (Kompier, Cooper & Geurts 2000, 380). Indeed, comparably little is known about effective interventions for reducing health risk factors.

Besides, the focus of the existing research concerning corporate wellness services has often been too narrow focusing solely on a specific program. A good example of the previous research is the study of de Jong and Emmelkamp (2000, 318) concentrating on finding out how stress management training affects the work results of employees (concluding that the stress management training does result a better outcome than in situations where there is no such a thing available) and the similar study of Vuori and Silvonen (2005, 48) examining the benefits of corporate wellness programs targeting at preventing depression.

In addition, the main target in the existing literature has been the individual employee rather than the organization. In fact, corporate wellness has not been properly linked to the management theory. Thus, what is missing is a more complete picture on the state of corporate wellness services in workplaces and the employers reasoning behind providing these to the employees.

3.1 Wellness Services

As demonstrated above, there is a growing need for efficient wellness services as the direct and indirect organizational costs of absent and exhausted employees increases. Not surprisingly, the expansion of employers providing some sort of wellness programs has indeed been remarkable. When in the early 1980s it was estimated that 20 % to 35 % of U.S. companies had some sort of wellness program available (Danne & Griffin 1999, 377), by the middle of the same decade nearly two-thirds of U.S. worksites (with fifty or more employees) offered at least one health promotion activity (Divine 2005, 44).

Corporate wellness programs expanded rapidly over the past decade and today among the multinational corporations and nation's largest worksites the availability of health promotion activities is almost universal. In fact, it is now estimated that up to 90 % of the large businesses offer some type of wellness program to their employees (DeVries 2010, 46). Not only has the number of companies providing wellness services increased during the recent years, but also the money invested by each company. Strikingly, in January 2010 despite of the economic downturn, almost two thirds of 340 American employers surveyed by Hewitt Associates said they would continue to make significant investments in improving the health and productivity of their workforce (Hewitt Associates 2010).

Businesses' adoption and investments in wellness services have very much reflected the current perception of the benefits related to the services. The supply of wellness services has gradually increased and extended from physical wellbeing oriented services to more psychological oriented services. In the 1990s many studies already showed how employers providing exercise programs to their employees reported lower absenteeism figures and more satisfied workforce (Daley & Parfitt, 1996). Along with the increasing usage of exercise programs, companies also became increasingly concerned about the ergonomic elements of the workplace. It was noticed that ergonomic adjustments did not only have an impact on the health and safety of workers, but also could make workers more efficient as for example a case study in the automobile industry revealed in the late 1990s (Larson 1998, 46). Moreover, demand management and employee assistance as categories of wellness have become more common in the workplaces. Nutrition

programs, weight management, sleep and relaxation enhancement programs and addiction prevention can be included into this category.

Recently, companies have come to realize that it might not be possible to decrease the absenteeism costs by only focusing on the physical aspects of wellbeing (Pauly et al 2002, 221). Thus, companies agree that the physical and demand management services are not enough to guarantee the wellbeing of the workforce as the real reasons are elsewhere (ibid., 230). To also tackle these indirect challenges, companies are currently broadening their wellness offerings, tactics and technology to better achieve long-term wellness results (DeVries 2010, 46). Indeed, the focus has gradually shifted more and more to stress prevention and mental wellbeing due to the alerting statistics of employee burnouts that today cause most of the negative outcomes for both individual employees and organizations. Hence, recently also the work life balance (assisting in combining career and ones responsibilities as mother and father), digital ergonomics (assisting in coping with increased flow of information) and general problem solving programs have increased their popularity (Hillier, Fewell, Cann & Shephard 2005, 420).

A lot of investments have also been made to improve the manager's ability to screen the employee wellbeing after the studies have revealed how employers with highly effective management programs pay less for employee sick leaves, have fewer short-term and long-term disability cases, and eventually pay considerably less for general healthcare. Not only have the companies with effective healthcare management programs in place lower healthcare costs, but also have a lot more effective workforce as each employee earns 20 % more revenue to the employer than employees in companies with inefficient management programs (DeVries 2008, 60).

As a result, the current supply of wellness services in the workplace is diverse ranging from simple individual practices to more complex bundles fully integrated into the corporate structure including services from categories of exercise, weight management, nutrition, physical ergonomics, stress prevention, sleep, relaxation, addiction prevention, mental wellbeing, problem solving, work life balance, digital ergonomics, management training and all sorts of combinations of these. As a matter of fact, companies nowadays seek to improve their outcomes

by integrating different solutions. The aim is to leverage the important synergies by combining efficient wellness services and by customizing them to specific employee needs (DeVries 2008, 62).

These integrated solutions help to encourage a comprehensive “culture of health” within and outside the worksite as companies have realized that stress reduction does not solely depend on corrected work environment, but has a lot to do with free time as well. By taking advantage of the integrated wellness solutions, the employers alleviate organizational culture that is based on positive health, work autonomy, personal growth, positive relationships with others and purpose of life (Macik-Frey; Quick; Quick & Nelson 2009, 5). Thus, by incorporating the latest technology the integrated solutions have enabled companies to better measure the outcomes of wellness services and what is important also to guarantee an employee an independent access to manage their own wellbeing (Miller 2005, 947; DeVries 2010, 47).

To sum up, the history of corporate wellness services reflects the development of the IHRM approaches. In 1980s and 1990s companies were first introducing primarily the physical wellbeing oriented individual corporate wellness services (indicating the adoption of universalistic RBV approach) that were later on accompanied and bundled with different psychological oriented services as the configurational approach increased its popularity. The firms adopting contingency approach to wellness services grew in number once it was realized that the causes for increased employee burnouts could not only be solved by providing universally suitable wellness services. Thus, the attention shifted to guaranteeing the right fit of the wellness services to the actual internal context of the company (i.e. industry) as it was obvious that the same bundles of wellness services would not suit blue collar workers and the creative workforce.

Moreover, the whole top-down approach of RBV received a bottom-up rival once many studies revealed the benefits of the comprehensive management systems aiming at creating a trust-based “culture of health” into the workplace. Recently also the social exchange theory deriving commitment approach has decreased its popularity as the trend now is to customize the integrated wellness services to the needs of individual employees in order to enable them to

manage their own wellbeing. It seems that the path has led from the RBV deriving universalistic perspective all the way to the “other end” of social exchange deriving employee wellbeing approach. This does not however mean that all organizations would have followed the trend simultaneously. On contrary, it can be assumed that there are still many organizations not providing wellness services at all or only providing few physical oriented services indicating that organizations can be placed into different stages of this continuum.

Hence, wellness solutions are not evenly used by different organizations. Indeed, research shows that there are remarkable cultural and organizational specific differences in providing wellness services. Wellness promotion is not universally similar as Gupta and Kristensen (2008, 56) point out. Therefore, in the next chapter the literature concerning organizational characteristics and wellness services is briefly illustrated.

3.2 Organizational Characteristics and Wellness Services

As already mentioned, organizational characteristics determine the usage of wellness services. It has been shown that while individual job characteristics partially explain the employee wellbeing, the organizational characteristics explain most of the employee wellbeing at work (Van Veldhoven et al. 2002, 224). Most often it has been the organization size characteristic that has been used as determinant of corporate wellness service supply. Traditionally the percentage of small businesses providing wellness services has lagged considerably behind those for medium and large businesses (Keller, Lehman & Milligan 2009, 296). Lack of resources in terms of personnel, facilities and money and lack of expertise to oversee and implement wellness programs have generally been the key reasons for these lagging participation rates (Divine 2005, 45).

Companies with differing sizes also offer different rationales for providing wellness services. The literature suggests that big companies more often report humanitarian concerns towards their employees whereas small companies tend to be more concerned about the monetary return. Additionally, large companies are more proactive in terms of employee wellbeing as they tend to

screen early on the health of their employees, whereas small companies more reactively respond to the health problems of their employees (Andrus & Paul 1995, 90).

Although, there are no studies pointing out that the internationalization stage of an organization would determine the usage of corporate wellness services, there is quite a lot of research on the relationship between firms' internationalization stage and HRM practices in general. Most of the studies point out how international firms have all the resources in place to provide well developed HRM practices to their employees (Ruigrok & Wagner 2003, 64). The multinational corporations indeed are the leaders in providing corporate wellness services to their employees (Stavroulakis 2009, 147) and thus might differ in their rationales to provide wellness services from their domestic rivals.

In order to link the corporate wellness literature to organizational context, the services need to be viewed from employer perspective. Next, the research method of the study is presented together with the data gathering techniques. The objective is to collect an inclusive data on corporate wellness from employer perspective enabling a comprehensive analysis on the underlying rationales of organizations to provide wellness services to their employees.

4 RESEARCH METHOD

A quantitative research method was chosen to answer the research questions:

What are the underlying rationales of Finnish organizations to provide wellness services to their employees?

Can the Finnish corporate wellness market be segmented based on these rationales?

Do organizational characteristics such as industry, size and internationalization stage impact organizations' rationale to provide wellness services?

4.1 Sampling the Survey Organizations

The data was collected in March 2010 by inviting 1.040 Finnish HR managers and CFOs to answer an electronic questionnaire. The HR managers were chosen to the sample due to their key role as HR practice providers and CFOs as investors to these practices. As the study is being part of a corporate wellness project, the questionnaire was tested with several corporate wellness experts (i.e. professionals from companies specializing in corporate wellness services and professionals from insurance companies) before it was sent to the target population. The questionnaire is presented in appendix A.

The questionnaire contains four types of questions, each addressing different areas of interest. The respondents were first asked about the existing wellness services by focusing both on the underlying reasons to provide wellness services and on the scope and nature of the current services. The rationale behind providing wellness services was examined by using multi select check-box questions, so that the respondents could by maximum choose three most important rationales out of seven alternatives provided by the current literature. Both of the main approaches to IHRM were represented by three response alternatives, so that subsequent insurance cost savings, subsequent employee healthcare savings and improved employee

productivity stand for the RBV view and improved employee health, improved employee morale and improved employer image for social exchange point of view. After discussing with corporate wellness experts, an additional rationale was added to the list, due to the fact that increasingly the employers are attracting employees by allowing them an access to corporate wellness services as an integral part of total compensational package. The last alternative can be seen as being neutral to the theoretical dichotomy, and thus placing itself in between the two perspectives stemming from the literature.

The scope and nature of current wellness services were on the other hand studied by dichotomous check-box question, asking respondents to indicate whether the listed services were currently in use in the companies they represented. The provided list of possible wellness services capitalizes the studies of Daley and Parfitt (1996), Larson (1998), Hillier, Fewell, Cann and Shephard (2005), and DeVries (2010), thus resulting a list of current supply of wellness services: exercise, weight management, nutrition, physical ergonomics, stress prevention, sleep, relaxation, addiction prevention, mental wellbeing, problem solving, work life balance, digital ergonomics and management training. Again, the alternatives were checked by the corporate wellness experts, so that no major services were missed.

What comes to the last type of questions in the questionnaire, the focus changed to address the respondent's attitudes towards the future of corporate wellness. Now the questions followed the logic of Likert psychometric scale, commonly used in survey research, providing the respondents with five-level response alternatives: strongly disagree, disagree, neither disagree nor agree, agree and strongly agree. The questions addressed the possible future features of corporate wellness services and measured the respondents' attitudes towards providing these to their employees.

After sending two reminders to the 1.040 HR managers and CFOs, at one and a half weeks intervals, 148 responses were received indicating a total response rate of 14.2 %. Considering the high positions of the respondents, the response rate is very satisfying. As for limitation to the research, the sampling frame does not correspond to the whole population of Finnish companies' HR managers and CFOs, but on contrary is a result of convenience sampling. This does not

cause major concerns thanks to the large size of the sample frame. However, it does place additional demands for analyzing the data.

The survey research, although based on a convenience sample, represents the population with necessary reliability, thus causing no serious problems to the generalization of the results. As Tables 1 and 2 below present, the corporate wellness survey, answered by 148 Finnish HR managers and CFOs, results quite a comprehensive picture on Finnish economy. It has been responded by Finnish organizations' HR managers and CFOs regardless of their industry sector, company size and internationalization stage.

As Table 1 presents, the survey quite comprehensively covers all the industries existing in Finland. No major differences can be found when broadly separating the private sector enterprises to manufacturing and service industries, although notable differences can be found when concentrating on specific industries within these three general categories. The survey does underestimate some industries (agriculture and forestry, construction, transportation and other services), while overestimating others (manufacturing, wholesale and retail, IT and communications and finance and insurance industries). As the study concentrates on evaluating the attitudes of HR managers and CFOs, it is natural that some of the industries with commonly small amount of employees and no official HR manager and CFO post, i.e. agriculture and forestry, are underestimates. What is satisfying on the other hand is the fact that the portion of respondents from public (approximately 30 %) and private (approximately 70 %) sector organizations balance with the overall situation in Finland.

Table 1. Respondents by Industry

Industry	Total		Survey	
	pcs	%	pcs	%
Public sector	93 717	29,2	44	29,7
Agriculture & forestry	57 951	12,7	5	3,4
Manufacturing	23 290	5,1	19	12,8
Construction	41 295	9	8	5,4
Wholesale & retail trade	47 042	10,7	24	16,2
Transportation	22 885	5	2	1,4
Other services	72 341	16	15	10,2
IT & communication	8 358	1,8	10	6,8
Finance & insurance	4 464	1	5	3,4
Real estate	15 067	3,3	2	1,4
Other industries	28 264	6,2	14	9,5
All industries	194 322	100	148	100

Source. Statistics Finland: Finland in Figures, 2008

The same survey bias of small organizations not having pointed HR managers and CFOs is affecting greatly with the distribution of respondents related to the organization size, as one can see from the below Table 2. Here it should be noticed that the public sector organizations are not included to the total figures of Finnish enterprises, as it ended up being impossible to find such a statistic. As most of the public sector organizations are rather middle sized or large (and thus having official HR managers and CFOs), it is fair to suggest that the lack of public sector organizations in the total population weights down the actual amount of middle and large sized firms emphasizing too greatly the small entrepreneurial firms. So the actual difference in between the overall population and survey might not be as remarkable as it for the first sight seems. Still, the large companies are overrepresented and the small companies underrepresented by approximately 30 % in the survey.

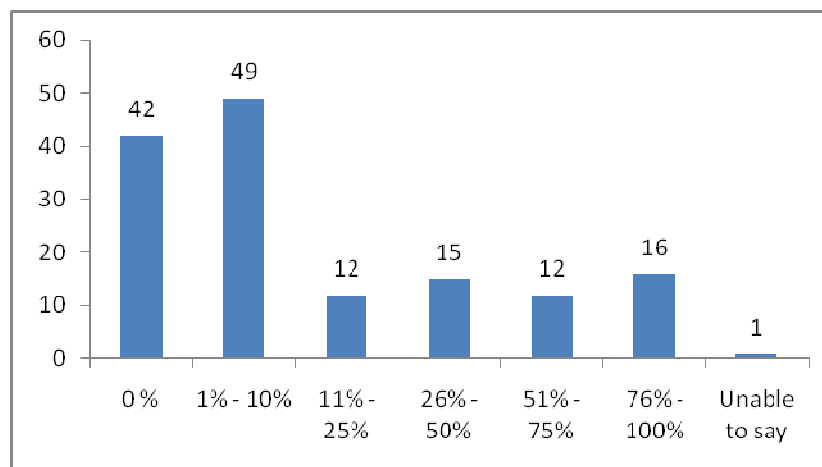
Table 2. Respondents by Organization Size

Size of personnel	Total		Survey	
	pcs	%	pcs	%
- 49	697 000	46,4	19	12,9
50 - 249	246 000	16,4	32	21,6
250 -	559 000	37,2	97	65,5
All personnel	1 502 000	100,0	148	100,0

Source. Statistics Finland: Finland in Figures, 2008

What comes to the third variable of interest, organizations' internationalization stage, there is no statistics available to compare the survey's organizations. In the survey, the internationalization stage was measured by asking the respondents to indicate how much of their organizations' activities occur outside Finnish borders. As a result, half of the respondents specify their organization to function either completely domestically or have international activities less than 10 %. Within this group, 28 % have no international activities. The other half is quite evenly distributed to the rest of the response alternatives (10-24 %, 25-50 %, 51-75 % and over 75 % activities outside Finnish borders), so that approximately 10 % of the surveyed organizations function in each.

Figure 4. Respondents by Internationalization Stage



To conclude, the respondents of the corporate wellness survey can be said to represent the overall population with necessary significance.

4.2 Analysis Methods

The data was analyzed by using both factor and cluster analysis. First, factor analysis, used for data reduction and summarization (Malhotra & Birks 2007, 646), was conducted in order to summarize the 14 attitudes relating to the features of future corporate wellness services into fewer set of factors indicating the underlying rationales to provide wellness services in the future. Second, cluster analysis was conducted to categorize the respondents, i.e. Finnish organizations, according to the underlying assessments formed by the factor analysis. The aim was to shed light on the Finnish corporate wellness market by discovering the different employer segments that later could be used to distinguish the different types of organizations according to their assessments on why to provide wellness services to employees.

4.2.1 Factor Analysis

On a broad sense there exist two kinds of factor analysis; Exploratory Factor Analysis (EFA) and Confirmatory Factor Analysis (CFA). The former, and more common form of analysis, seeks to uncover the underlying structure of a relatively large set of variables with assumption that any indicator may be associated with any factor, whereas the latter seeks to determine if the number of factors and the loadings of measured variables prove the pre-established theory to hold. (Statnotes: Topics in Multivariate Analysis by Garson).

This study applies the Exploratory Factor Analysis (EFA) as there is no prior theory to be proven right, but the purpose is to identify dimensions that explain the correlations among a set of variables - attitudes. The aim is to reduce the original number of variables to a smaller number of factors which act as an underlying dimensions to the whole set of variables (Gaur 1997, 407). Thus, the relationships among many interrelated variables are represented in terms of few

underlying factors. In this case it helps to reveal the latent variables that cause the analyzed variables to co-vary.

Factor analysis is part of the general linear model (GLM) family of procedures and makes many of the same assumptions as multiple regressions. These include linear relationships, interval or near-interval data, untruncated variables, proper specification of variables, lack of high multicollinearity, and multivariate normality for purposes of significance testing. (Statnotes: Topics in Multivariate Analysis by Garson). This study fulfills the requirements as the Kaiser-Mayer-Olkin (KMO) measurement was used to validate the appropriateness of the method. The measure compares the magnitudes of the observed correlations coefficient with the magnitudes of the partial correlation coefficients. In this study the KMO measurement results a value 0.684. Generally, a value greater than 0.5 is desirable, thus proving that the factor analysis is an appropriate method for the study. (Malhotra & Birks 2007, 651).

Another precondition for using factor analysis deals with the minimum number of cases required for conducting the analysis. According to Malhotra and Birks (2007, 649) there should be at least five times as many observations as the number of variables to be analyzed. In the data consisting of 148 cases and 14 variables, this subjects-to-variables ratio equals 10.6, exceeding the limit of five. Thus the findings are considered as having sufficient explanatory power and the factor analysis suitable for the study.

Despite of all the similarities with multiple regressions, factor analysis differs from linear regression in two ways. First, factor analysis focuses on mutual interdependence, whereas regression analysis studies dependencies. It looks at basic patterns of interrelation between numbers of variables. Thus, the original variance of a variable in factor analysis is broken down into variance components that are associated with the variation of a set of other quantities. Secondly, unlike linear regression analysis factor analysis looks at unobservable common factors that a specific group of variables has explaining a specific situation. (Gaur 1997, 408).

Mathematically, the factor analysis of standardized variables can be presented as

$$(1) \quad X_i = \sum_{j=1}^m (A_{ij} F_j) + V_i U_i,$$

where X_i = i th standardized variable
 A_{ij} = standardized multiple regression coefficient of variable i on common factor j
 F = common factor
 V_i = the unique factor for variable i
 m = number of common factors

The unique factors that correlate with each other's and with the common factors can be expressed as linear combinations of the observed variables as

$$(2) \quad F_i = \sum_{j=1}^k W_{ij} X_j,$$

where F_i = estimate of i th factor
 W_{ij} = weight or factor score coefficient of variable j on factor i
 k = number of variables

The results in factor analysis focus on estimation of factor loadings (Ding & Hwang 1999, 447). The factor loadings are the correlation coefficients between the variables and factors. By the rule of thumb the loadings should be 0.7 or higher to confirm that independent variables identified a priori are represented by a particular factor. However, the 0.7 standard is a high one and real life data may well not meet this criterion, which is why in marketing research it is common to use lower level such as 0.4 for the central factor and 0.25 for other factors. (Statnotes: Topics in Multivariate Analysis by Garson). In this study, the value of 0.40 was defined as the minimum loading to include a variable to the factor.

Interpretation of the factor loadings depends on the chosen extraction and rotation methods. There are several factor analysis extraction methods to choose from. The two major methods are Principal Components Analysis (PCA), used when the purpose of modeling is only to reduce a large number of variables to a smaller dimensions, and Principal Factor Analysis (PFA), which reassumes a use of causal model that is been confirmed. (Statnotes: Topics in Multivariate Analysis by Garson). In this study, the former extraction model is chosen as the data does not follow normal distribution. During factor extraction the shared variance of a variable is partitioned from its unique variance and error variance to reveal the underlying factor structure. The result is a situation where only shared variance appears in the solution. (Costello & Osborne 2005, 2).

After extraction the researcher must decide how many factors to retain for rotation. One of the most common procedures to determine the amount of factor is based on eigenvalues. The eigenvalue for a given factor measures the variance in all the variables which are accounted by that factor. The ratio of eigenvalues is the ratio of explanatory importance of the factors with respect to the variables. (Statnotes: Topics in Multivariate Analysis by Garson). If a factor has a low eigenvalue it is contributing only a little to the explanation of variances in the variables. Thus, by general rule, only factors with eigenvalues greater than 1 are retained in the study (Malhotra and Birks 2007, 654). After eliminations, total of four factors with eigenvalues above 1 were rotated.

The next decision is rotation method. The goal of rotation is to simplify and clarify the data structure in order to make the interpretation simpler (Costello & Osborne 2005, 4). In rotating the factors each factors should have significant loadings for only some of the variables. Likewise, each variable should have significant loadings to preferable only one factor. (Malhotra and Birks 2007, 656). In this study the rotation is done by using the orthogonal varimax method that minimizes the number of variables with high loadings on a factor thus enhancing the interpretability of the factors.

4.2.2 Cluster Analysis

Heterogeneity as opposed to homogeneity typically characterizes today's markets. Hence, in order to build an overview of the corporate wellness market in Finland, it is required to concentrate on homogenous sub-markets rather than dealing with one heterogeneous overall market. Segmenting a market involves creating a number of submarkets based on the heterogeneity of the overall market (Jafar & Rao 2001, 10). Thus, cluster analysis is used in order to segment the Finnish corporate wellness market based on the underlying factors resulted from the factor analysis.

Indeed, cluster analysis is considered a suitable method to segment a market based on multiple characteristics. Cluster analysis seeks to identify homogeneous subgroups of cases in a population. It specifically deals with how objects should be assigned to groups so that there will be as much similarity within and difference among groups as possible (Jafar & Rao 2001, 8). Thus, as a result objectives in each cluster tend to be similar with each other and dissimilar to objects in other clusters (Malhotra & Birks 2007, 671).

Like factor analysis also cluster analysis is concerned with classification. The difference is that cluster analysis classifies respondents and thus can be used to segment the market. In this study it is applied in order to identify groups of companies with similar attitude towards corporate wellness services.

There are multiple alternative cluster methods to choose from, but this study utilizes the non-hierarchical clustering due to the fact that it is the most commonly used clustering method in organizational research (Chaturvedi et al 1997, 370). More precisely, the clustering was conducted using k-means algorithm where the researcher specifies the number of clusters in advance. Afterwards the algorithm calculates how to assign cases to the K clusters. K-means cluster analysis uses Euclidean distance, where initial cluster centres are chosen randomly in a first pass of the data, then each additional iteration groups observations based on nearest Euclidean distance to the mean of the cluster. That is, the algorithm seeks to minimize within-cluster variance and maximize variability between clusters. Cluster centres change at each pass.

The process continues until cluster means do not shift more than a given cut-off value or the iteration limit is reached. (Statnotes: Topics in Multivariate Analysis by Garson).

While cluster analysis is an extensively used market segmentation methodology, it is not without its preconditions. Just like all other multivariate techniques, cluster analysis is a parametric statistical tool which demands that certain requirements and conditions be satisfied for proper application of the method. The utility of pre-defined clusters must be assessed by three criteria; size, meaningfulness and criterion validity. Therefore, the cluster analysis to be valid the size of all clusters should have enough cases to be meaningful and the meaning of each cluster should be readily intuited and compared to the prior research. (Statnotes: Topics in Multivariate Analysis by Garson). In addition, in non-hierarchical clustering the ratio of total within-group variance to between group variance must be maximized. The heterogeneity change can be measured by using pseudo F –statistics, which compares the heterogeneity of k clusters to k-1 clusters. In other words it seeks for the point at which the heterogeneity is the greatest indicating the appropriate number of clusters (Malhotra & Birks 2007, 681).

A crucial issue in cluster analysis is deciding the number of clusters. The analysis was conducted on the basis of the factors formed in previous analysis in order to first reduce the original data and to achieve interpretable clustering solutions. The analysis was performed by trying alternative cluster amounts ranging from two to five. Adapting to the method requirements, 2 clusters solution turned out to be the most suitable for the study. When using 2 clusters solution, both clusters have enough cases to be meaningful and also the distribution of cases is even so that both of the clusters contain somewhat same amount of cases. Moreover, the pseudo F value reached its culmination of 25.95 at the 2 cluster solution strengthening the assumptions of 2 cluster solution as the most appropriate for the study.

In order to test the existing theory and to place the different organizations to different clusters, cross-tabulation was conducted between the clusters and organizational characteristics. By using cross-tabulation the categories of one variable are cross-classified with the categories the other variable (Malhotra & Birks 2007, 516). The aim is to conclude whether the groups can be said to differ resulting the approval or rejection of the null hypothesis assuming the groups to be similar.

The results are then reflected to the previous literature thus comparing the actual results with the expected ones.

4.2.3 Validity and Reliability

A primary function of the research design is to maximize the validity of the conclusions, i.e. to minimize the number of probable alternative hypothesis that are consistent with the data. It is useful to distinguish between internal and external validity, where the internal validity is concerned on the statements about the sample and the external validity with the interpretations and generalizations of the sample to other situations and populations (Altmann 1973, 229).

Here, the internal validity is essential to the external validity: to the extent that if the alternative explanations have not been ruled out, there is no point in making generalizations out of the sample. Yet, this does not mean that internal consistency does always lead to external invalidity as some generalizations depend less on the internal validity of the sample than others (Altmann 1973, 230). Indeed, social sciences in general tend to show lower internal validity, but higher external validity.

What comes to the internal and external validity and reliability of the survey research, according to Dillman (2000, 9) there are four possible sources of error: sampling error, coverage error, measurement error, and non-response error. If any of these errors occurs in a survey research, the results and recommendations become decreasingly valuable as evidence of the characteristic in the target population. In order the questionnaire to be internally valid, both the sampling and non-response errors should be minimized.

Sampling error, is a result of the measuring a characteristic in some, but not all, of the units or people in the population of interest. Sampling error always exists at some level even when a random sample is drawn, but can be reduced through larger samples (ibid., 10). In this study, the sampling error gets a special focus as the sample frame is not based on a random sample, but convenience sample. Indeed, the sampling frame does not include the whole population of

Finnish organizations HR managers and CFOs, but instead is a result of combining various customer lists of a multinational company's Finnish subsidiary, which can be seen as serving or at least contacting most of the companies operating in Finland. In order to minimize the error, the sampling frame was constructed to be as comprehensive as possible thus including as many as 1040 HR managers and CFOs. Also as Ferber (1977, 57) points out, the sampling error does not cause as much problems within an exploratory case study, as the size of the sample might easier stop the possible error from occurring. Still, the possible sampling error cannot be solely ignored and the results must be analyzed by keeping this in mind.

The other possible errors relating to the internal validity of the survey research have to do with the handling of non-response error. This type of error exists to the extent that respondents are different than those of the total population of the sampling frame (Lindner, Murphy & Briers 2001, 44). This can be measured by comparing the early respondents with the late respondents. In this study, no major differences were found between early and late respondents, although the small companies more often included to the late respondents than the big ones.

Not only does the data collection need to fulfill some basic scientific requirement, but also the analysis method needs to be internally reliable. Thus, the Cronbach's alpha method was used to measure the internal consistency of the factor analysis. Cronbach's coefficient alpha represents the average of all possible split-half coefficients resulting from different ways of splitting the scale items. In exploratory study, a value above 0.60 is generally accepted as satisfactory internal consistency (Malhotra & Birks 2007, 646). Here, all factors exceed the generally accepted minimum level of 0.60, varying from 0.623 to 0.680. What comes to the cluster analysis, the validity was clarified by cross-tabulating the clusters by the nominators established by the earlier research as having impact on the firm attitudes towards the wellness services, i.e. industry, company size, and for the sake of the study at hand, also the internationalization stage.

To consider the external validity and reliability of the survey research, both coverage and measurement errors need to be tackled. The coverage error has to do with the systematic errors unrelated to the sample frame. Therefore, it exists when the list or frame from which the sample is drawn fails to contain all of the subjects in the population of interest (Lindner, Murphy &

Briers 2001, 44). In this study, the coverage error is somewhat impossible to pass, as the minor companies are automatically left out from the sample frame due to the fact that they rarely have appointed HR manager and CFO posts. Indeed, the sample frame by design is biased, but this does not mean that the research would be useless. On contrary, it is reasonable to include only the organizations to the study that have such a posts available, as they are the employers of most of the employees, whereas the micro firms often consists of entrepreneurs without responsibilities to employees.

Finally, measurement error has to do with data collection. Reducing this source of error requires that the researcher use items that are valid, reliable, and unambiguous to the research subjects (Lindner, Murphy & Briers 2001, 44). Thus, both the researcher-based and respondent-based errors should be minimized. Here, the researcher-based error is eliminated by the chosen survey method, as the researcher cannot lead the respondents to any particular direction unless the wording of the questionnaire is biased. Keeping this in mind, the wording of the questionnaire was carefully conducted with help of existing theory and testing with outsiders. Indeed, the questions and the lists of option alternative were tested against the current literature and viewed by several corporate wellness experts, i.e. HR professionals. The respondents were also allowed to choose an “other” -option or simply move forward without answering to the specific question. Due to these, also the respondent-based error should be minimized.

All in all, the research setting can be seen as valid for the study purpose and thus, the results reliable enough.

5 FINDINGS

The aim of this research is to explore the different underlying rationales of Finnish organizations to provide wellness services to their employees. One should be careful with the generalization of the findings, as the data covers only Finnish organizations. Although Finnish business culture is slowly changing due to the globalization tendency and arrival of multinational corporations, Finland is still known as one of the most “employee friendly countries” (where the employees are covered with employer provided healthcare and where monthly working hours are not as high as in many other industrial countries). Thus, the rationale to provide wellness services might differ in organizations existing in different business cultures. Regardless, the results of this study might be useful for other European countries as well at least in terms of being a starting point to further research.

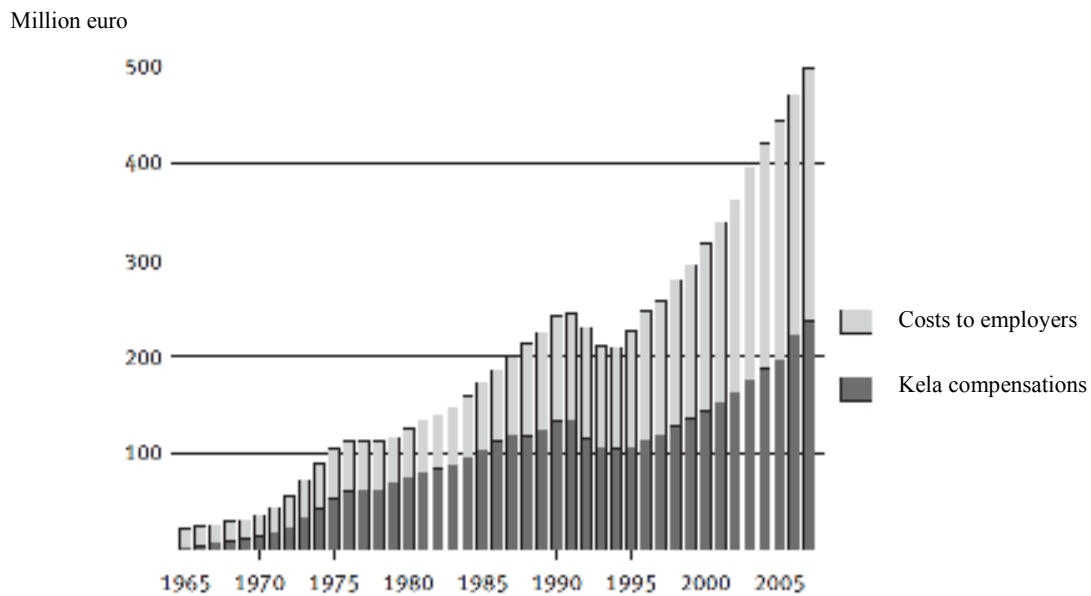
Hence, this chapter presents the results of the study by first giving light to the Finnish organizational context in general and then interpreting the findings of factor and cluster analyses. Once gaining the understanding of the Finnish organizations’ underlying rationales to provide wellness services, the results are thereafter altered to cross-tabulation in order to reveal whether organizational characteristics determine these rationales.

5.1 Corporate Wellness in Finland

The previous literature on corporate wellness in Finland is almost non-existing. However, there is an interesting study conducted by Aura, Ahonen and Ilmarinen (2009, 10) indicating that strategic employee wellbeing is poorly managed in Finnish companies. According to their results, only one third of Finnish employers proactively manage their employees’ wellbeing. What is striking is that only 37 % of the companies had defined roles for managers on the matter. The study also points out how only three out of four companies actually has a written action plan concerning corporate wellness although being a statutory activity the percentages should be 100.

The shocking development of direct occupational health care costs in four decades reflects the situation. The Figure 6 below illustrates the trend. As can be seen, the costs have risen from 300 million in 2000 to 500 million in 2007. Although Kela compensations have grown simultaneously, the increase in organizations' costs burden has been tremendous.

Figure 5. Occupational Healthcare Costs and Compensations in Finland in 1965-2007



Source. Official Statistics of Finland: Kansaneläkelaitos (Kela), Helsinki 2009, 8

In order to respond to the unsettling situation, many Finnish employers have started to intervene with the employee wellbeing. In fact, in Finland approximately two billion euro is invested to corporate wellness each year (Aura, Ahonen & Ilmarinen 2009, 10). However, this amount is less than tenth of the amount that premature retirement and absenteeism cost each year.

Indeed, despite of wakening to the problem, Finnish organizations are far from responding to the problem in right degree. Currently the best corporate wellness projects have decreased the absenteeism only by 27 % and healthcare costs by 26 % whereas decreases in insurance costs have been approximately 32 %. (Aura, Ahonen & Ilmarinen 2009, 10).

All in all, strategic corporate wellness investments are scarce compared to the absenteeism and disability pension costs. As can be interpreted, the current state or corporate wellness is not

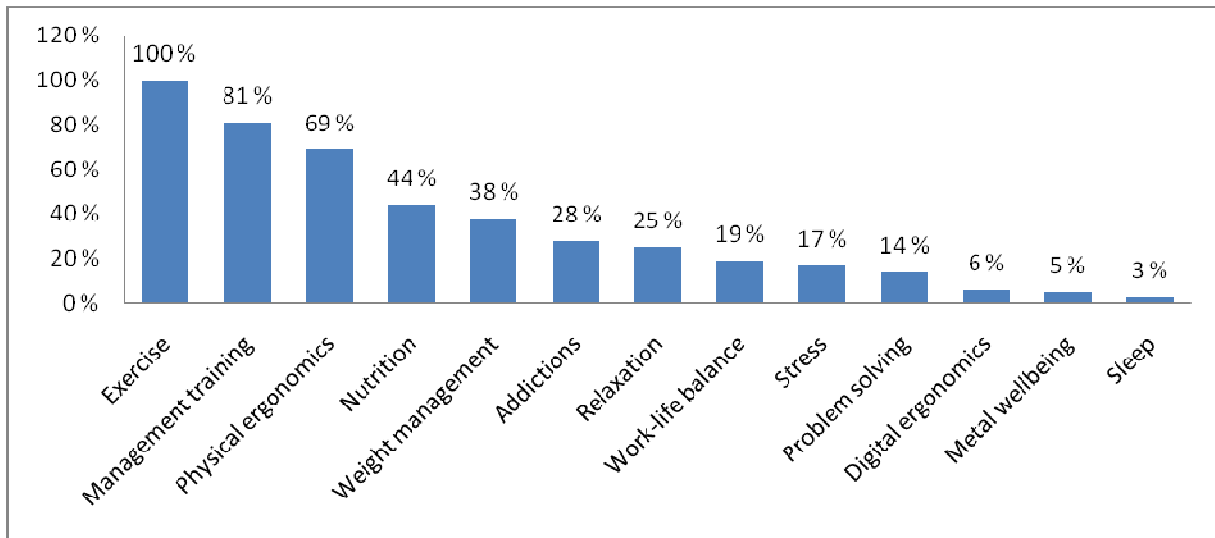
enough to mitigate the employee health related risk factors. In order to correspond to the alarming situation one needs a comprehensive understanding of the current supply of corporate wellness services in Finnish organizations. Therefore, the next chapter exposes what kind of wellness services Finnish employers are currently providing to their employees. Only thereafter the perspective is turned to future by revealing the underlying attitudes of Finnish organizations to provide wellness services to their employees.

5.2 Current Wellness Services

In the question regarding the current wellness services the responses ranged from providing none of the services (9 % of the respondents indeed state that their organization does not provide wellness services to their employees) to providing as many as 12 services out of 13 listed alternatives. As can be seen from the Figure 7, the Finnish organizations most commonly provide exercise and management training related services. Every surveyed organization (providing wellness services) is providing exercise services and over 80 % organizations offer some kind of management training related to the employee wellbeing. Physical ergonomics ranks third with almost 70 % coverage and nutrition (44 %) and weight management (37 %) fourth and fifth.

Strikingly, only 17 % of the organizations are concerned about their employees' stress levels even though the stress related absenteeism is increasingly common burden within Finnish organizations. Moreover, the other hot topics in corporate life – employees' mental health and work life balance – get only little hands on attention in Finnish organizations. Only 3 % of the organizations are providing mental wellbeing related wellness services and 16 % work life balance related services.

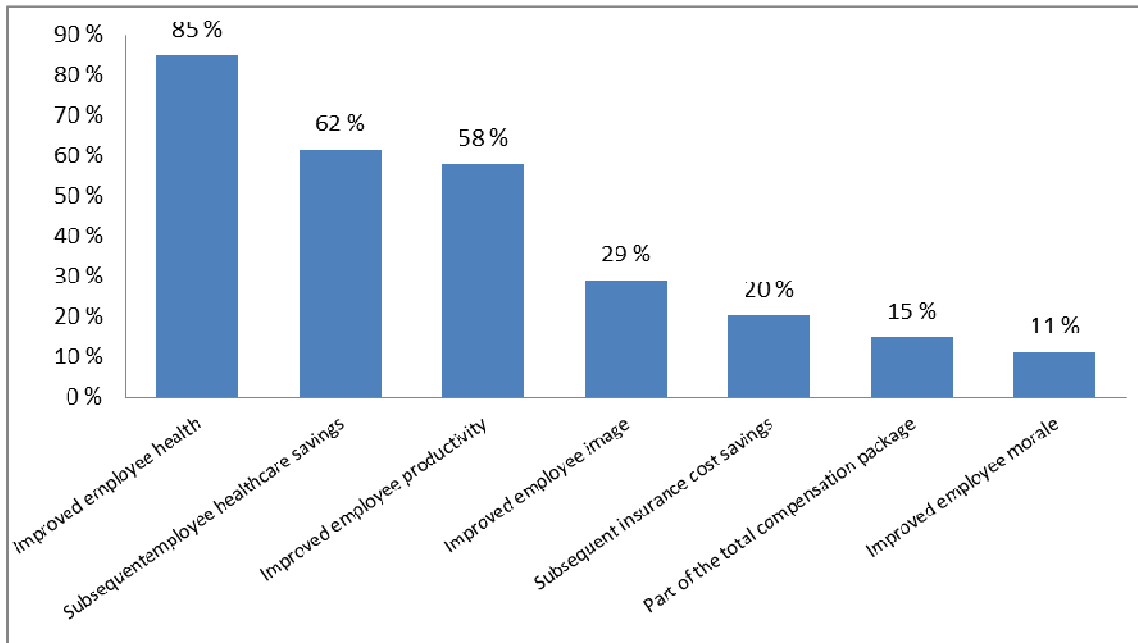
Figure 6. The Current Wellness Services Provided by the Finnish Organizations



5.3 The Rationale Behind Providing Wellness Services

In the questionnaire, the rationale behind providing wellness services was examined by using multi select check-box questions so that the respondents could by maximum choose three most important rationales out of seven alternatives provided by the current literature. Both of the main approaches to IHRM were represented by three response alternatives which were accompanied by one additional alternative placing itself in between the two groups. The Figure 8 presents the results.

Figure 7. The Rationale behind Providing Wellness Services



As the Figure 8 illustrates, the most important reason to provide corporate wellness services is the improved employee health. Indeed, 85 % of the respondents have chosen this alternative deriving from social exchange perspective. Also the two RBV originating alternatives, subsequent employee healthcare savings and improved employee productivity, have gained ground as almost 62 % of respondents have chosen the former and 58 % the latter as affecting their decision to provide wellness services to their employees. Consequently, it seems that the improved employee health leading to improved productivity and finally decreasing the overall healthcare savings is the ultimate path that employer pursues by financing the wellness services.

Thus, the proactive and preventive wellness services are provided in order to make the reactive employee healthcare unnecessary. It is not so much about decreasing the insurance costs (alternative that gained a bit over 20 % popularity), or enhancing the employee morale (gaining just 11 % popularity) that the employers are concerned about. Nor it is about recruiting and retaining the best employees as the improved employer image (29 %) and providing wellness services as part of the total compensation package (15 %) do not gain popularity among Finnish HR managers and CFOs.

It is impossible to make a clear distinction between the two theoretical perspectives as they both are almost equally presented, RBV gaining total of 139,9 share and social exchange 125,6 share. As mentioned, they supplement each other rather than compete with each other. Although the results are interesting, it is not however possible to draw conclusions about which perspective is more prevailing among Finnish organizations. They both are equally dominated as the corporate wellness services target at decreasing the overall employee healthcare payments. Thus, in order to answer the main research question, the research objective must be approached differently as it is done later in the study.

What comes to the respondents' wellness service ranking, the future does not seem to differ from the current situation. In fact, the same wellness services are being invested in the future that are dominating today as one can see from the below Table 3. After calculating the ranking points of all the listed thirteen wellness services, exercise, physical ergonomics and management training got least ranking points suggesting that they are not only popular today but are also viewed as the most important services to invest in the future. What will change though is the amount of investments in stress related wellness services. Stress prevention will increase in the Finnish workplaces. The result is not surprising when contrasting it to the current public discussion concerning the increasing stress related health problems especially among young people entering work life. Indeed, the employers are concerned with the fact that stress caused by work is the second most common work related health problem in the EU and in Finland as many as 28 % of working population is reported constantly to experience mild or serious work exhaustion (Happonen et al 2008, 1).

Yet, the traditional wellness services preserve as weight management, nutrition, relaxation and sleep related wellness services are remaining somewhat important. Merely addiction prevention is decreasing its popularity. Excluding stress prevention, the other psychological wellbeing targeting services: work life balance, digital ergonomics, mental wellbeing and problem solving are not expected to be increasingly invested in the future. The results are alerting and inconsistent with the wellness literature suggesting a recent shift in focus from physical health to psychological and social wellbeing due to the increases in employee burnouts and disabilities to balance work and free time.

Table 3. Future Investments on Corporate Wellness Services

Most Invested	Neutral	Least Invested
1. Exercise	5. Weight Management	10. Digital ergonomics
2. Physical ergonomics	6. Sleep	11. Addictions
3. Management training	7. Relaxation	12. Mental wellbeing
4. Stress	8. Nutrition	13. Problem solving
	9. Work life balance	

As for limitations, the results might be affected by the respondents' unawareness of each listed service. The traditional services, i.e. exercise, physical ergonomics and management training, are easily understandable compared to the next generation services, i.e. digital ergonomics and mental wellbeing, as the respondents might not have any earlier experiences on them. Regardless, the surprisingly traditional and physical wellness focused results evoke concerns as the invested services might not correspond with the increasingly psychological wellness problems deriving from more creative and mentally demanding jobs.

As was demonstrated above the single question concerning the rationales on providing wellness services to employees does not reveal anything to conclude on, it is time to go deeper. Therefore, it is time to analyze the factor analysis results in order to reveal the heterogeneous assessments on wellness services that can be thereafter used in segmenting the corporate wellness market into somewhat homogeneous submarkets based on the cluster analysis results.

5.4 Factor Analysis

The factor analysis results four different assessments towards why provide wellness services. The Table 4 presents the findings.

Table 4. Factors Presenting Attitudes towards Wellness Services

Factor	Metrics	Factor loading	h ²	Cronbach's alpha
F1	Employee motivation	0,613	0,594	0,68
	Insurance incentives	0,62	0,451	
	Rethinking corporate wellness	0,633	0,432	
F2	Lower cost services	(0,381)	(0,285)	0,672
	Efficiency	0,755	0,664	
	Administrative easiness	0,776	0,656	
	Technology leverage	0,762	0,64	
	Clear measures	0,506	0,512	
F3	Enough awareness	0,862	0,751	0,664
	Satisfied with traditional services	0,845	0,733	
F4	Employee independence	0,813	0,689	0,623
	Portable services	0,675	0,62	

One can distinguish four different perspectives towards corporate wellness services. Factor 1, factor 2 and factor 4 all represent an attitude highlighting the need for increased future investments in both physical and especially psycho-social wellness services whereas factor 3 disagrees by stating that the current investments in the traditional services are enough to guarantee a well-functioning workforce.

While all the other factors agree on the need for future investments in wellness services, they however differ in their reasoning behind. Factor 1 yields for extra investments, but not unless the society's incentive structure changes. In fact, it represents an attitude seeing the whole society as responsible of ensuring the wellbeing of its citizens. According to it, the investments in wellness services increase in the future through the restructuring of the whole wellness structure. The basic idea is to involve the broader society to taking care of employees and not leave the

responsibility solely to the shoulders of employers. Thus, the organizations' extra investments in employee wellbeing should be encouraged and rewarded by insurance companies' incentives. Moreover, the attitude underlies the need to motivate employees to consume the wellness services by providing participating employees additional compensations.

The whole perspective relies on the power of incentives thus strongly responding to the ideas of RBV. As within configurational RBV, also here the incentives' link to organizational performance is seen as path-dependent as the top-down society driven incentives are seen as systematically first encouraging organizations to invest more in wellness services and then motivating employees with required incentives to actually consume these services (Guest 2002, 340). Additionally, as according to the contingency perspective on RBV, the factor 1 also claims that successful implementation of wellness services relies heavily on employee behavior and other internal aspects of an organization. The need for organization to reward and encourage employees to utilize wellness services is highlighted and the industry specific requirements towards wellness services admitted. All in all, factor 1 is willing to increase the amount of investments in the preventive wellness services, but only if the broader society is backing up its efforts and the employee encourage system in place within the organization.

Factor 2, also highlighting the need for extra investments, takes a more practical point of view focusing on the corporate wellness services themselves. According to it, the future investments in the wellness services depend mostly on the availability of the administratively easy and technologically advanced services. Moreover, in order to attract extra investments, the efficiency of the services should be more easily proved and linked to the overall business results. Contradicting to the factor 1, this perspective does not consider service costs as affecting the management decision on whether to provide certain wellness services as the "lower service cost" -variable seems to hold only limited amount of exploratory power. What counts is the nature of the service itself and organizations can be thus expected to invest in individual wellness services if they can be proved to be effective, technologically advanced, easily used and their contribution to business clearly measurable.

As per universalistic perspective on RBV, factor 2 values modern and best practice wellness services. It concentrates solely on the benefits of individual wellness services, and in fact proposes that these best practice services can be effective regardless of contextual factors, when weighting whether to invest in corporate wellness or not (Ginn & Henry 2003, 25). All in all, factor 2 is willing to increase investments in corporate wellness if the actual wellness services are worth investments.

As for separation from other factors, factor 3 believes to have enough information on corporate wellness services and regardless see no point in extra investments. Actually, it seems to be satisfied both with the current supply and with the current investments. On contrary to the other factors, it demands neither public incentives nor improved wellness services in order to invest more in its employees' health, as it takes a rather passive and unconcerned point of view to the whole issue. All in all, factor 3 is not willing to invest more in corporate wellness in the future as it sees the current investments satisfactory.

Factor 4 on the other hand views the corporate wellness services from employee perspective. For this reason it yields for extra investments in order to establish employee friendly services. According to it, the future services need to allow employee an independent access to consume the services whenever the employee feels like it. Thus, the services must be provided portable so that the employee can access them also during work trips and outside work office and hours. On contrary to the other factors, it would decrease the employer role on actively controlling employees' participation to wellness services but underlies the importance of providing employee 24/7 access to the services and leaving it up to the employee to decide whether and when the services are consumed. Therefore, the perspective takes a social exchange stand to the corporate wellness issue. On contrary to the three other factors adopting a top-down perspectives to the employee wellbeing, factor 4 includes both commitment and employee wellbeing ingredients while taking a bottom-up approach.

In effect, it focuses on employee satisfaction and wellbeing. The primary concern is in employees' subjective health, just as employee wellbeing perspective suggests, as the wellness services are seen responsible of constructing a workplace where social relations between

organizational agents are based on trust and where the organizational culture and employment changes pay attention to individual experiment of wellness. Indeed, the wellness services are seen as targeting at creating a workplace that reinforces the overall sense of happiness together with all-encompassing health of the workforce (Baptiste 2008, 287). Only after accomplishing organizational climate of trust, can the performance of workforce be expected to increase. All in all, factor 4 is willing to increase investments in corporate wellness, but only if the actual notion of corporate wellness will be more widely understood and the employee friendly services established.

To summarize, the Finnish HR managers and CFOs' attitudes towards corporate wellness services can be mapped into four dimensions:

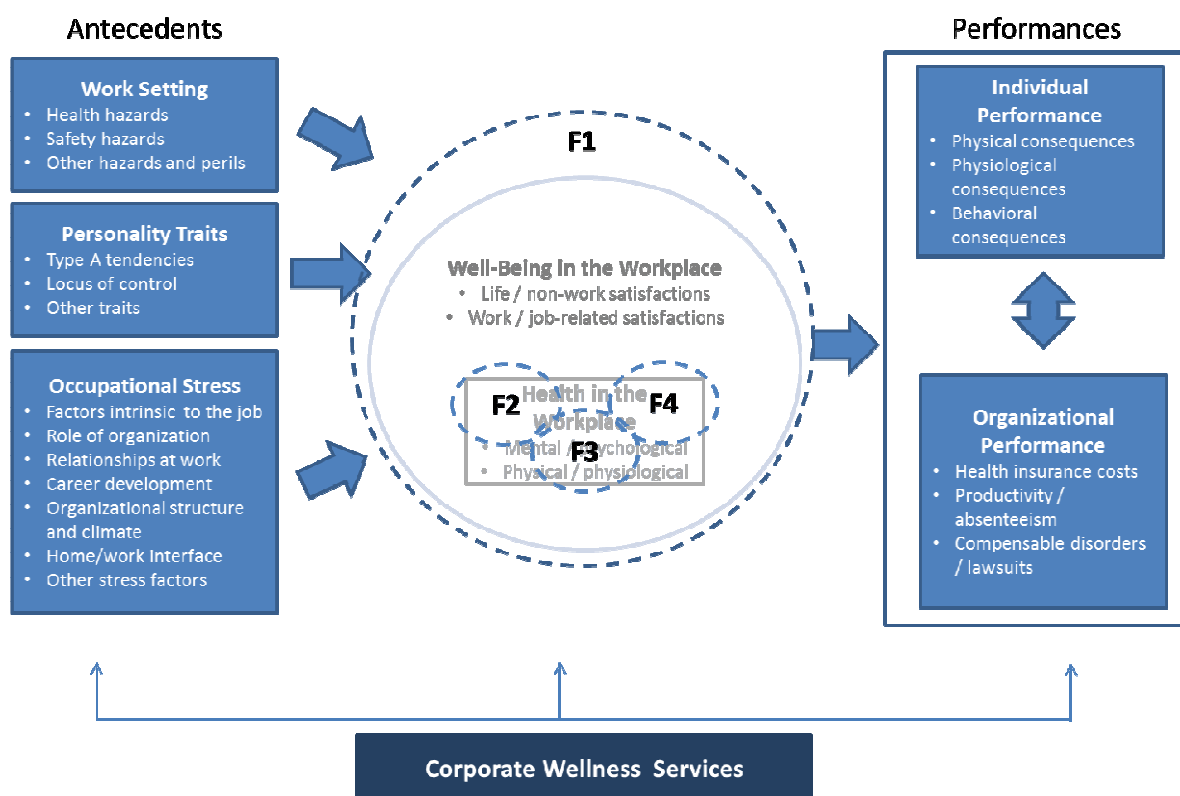
- 1) Responsibility sharing – the whole society to reinforce the wellbeing of employees.
- 2) Service modernization – the efficient, administratively easy and technologically advanced services.
- 3) Change resistance and ignorance – the current wellness services are enough to correspond to the challenge of employee health.
- 4) Employee empowerment – the portable 24/7 accessible corporate wellness services.

Here it comes clear that whereas the factors 1, 2 and 3 support the traditional occupational health approach to corporate wellness, the factor 4 presents a wider employee wellbeing perspective. It has more sociological origins in it while stating that in order to succeed the corporate wellness services need to take a “whole-person” view to the employee wellbeing (DeVries 2008, 62). When factors 1 and 2 measure wellness services in terms of financial performance indicators like profits, or by market share and sales levels, the factor 4 concentrates primarily on constructing an employee friendly organizational culture. As opposed to focusing on examining only the medical costs of poor employee health or calculating the net present value of improved employee efficiency, the broader view to corporate wellness also considers the consequences of increased

absenteeism and exhausted employees to the organizational culture. Thus, it includes all the aspects of employee health, i.e. physical, psychological, spiritual and social, while encouraging a comprehensive “culture of health” within the workplace.

When adapted to the framework by Danna and Griffin (1999), the factors 1, 2 and 3 relate to the notion of occupational health as they apply to the organizational settings when specific physical or psychological health states are of interest and concern. On the other hand, factor 4 corresponding with the notion of employee wellbeing tends to be a broader concept by taking into consideration the “whole person” and including both the job-related satisfaction, i.e. job satisfaction and satisfaction with the organizational culture, and overall life satisfaction and happiness.

Figure 8. Four Underlying Rationales to Provide Wellness Services



Source. Adapted from Danna & Griffin 1999, 364

5.5 Cluster Analysis

Now that the different perspectives to corporate wellness have been identified through the factor analysis, it is time to subject these factors to K-means cluster analysis. Here, the purpose is to profile the overall corporate wellness market in Finland with different sub-groups highlighting specific perspectives related to the corporate wellness services. The clusters have been interpreted by examining the cluster centroids and thereafter named by the most powerful features. The results of the cluster analysis can be viewed from Table 5.

Table 5. Cluster Centroids of the Groupings of Finnish Organizations

Cluster	F1 Responsibility sharing	F2 Service modernization	F3 Change resistance	F4 Employee empowerment
Progressive wellness service providers	0,161	0,384	-0,155	0,571
Suspicious wellness service providers	-0,185	-0,439	0,177	-0,654

Two different market segments can be identified by profiling the clusters by the cluster centroids. These employer segments adopt different rationales for providing corporate wellness services to their employees as they put different amount of weight to the four factors presented earlier. As a matter of fact, they emphasize the contrasting determinants thus viewing the corporate wellness future from opposing perspectives. In order to ease the interpretation, both the positive and negative features of the factors are presented in the below Figure 10. The factors having high value on segments are bolded and the factors having low value are marked in grey.

Figure 9. Features behind the Two Corporate Wellness Segments in Finland

Progressive wellness service providers	Suspicious wellness service providers
<ul style="list-style-type: none"> + Employee independence + Portable services + Efficient services + Administrative easiness + Technology leverage + Clear measures + Lower cost services + Employee motivation + Insurance incentives + Rethinking corporate wellness 	<ul style="list-style-type: none"> + Enough awareness + Satisfied with current services
<ul style="list-style-type: none"> - Enough awareness - Satisfied with current services 	<ul style="list-style-type: none"> - Employee independence - Portable services - Lower cost services - Efficiency - Administrative easiness - Technology leverage - Clear measures - Employee motivation - Insurance incentives - Rethinking corporate wellness

The Finnish corporate wellness market can be demonstrated to consist of two opposite segments: the progressive wellness service providers and the suspicious wellness service providers.

- 1) Progressive wellness service providers – are clearly not satisfied with the current supply of corporate wellness services and show high concern towards employee empowerment. The corporate wellness is viewed from employee perspective as the features guaranteeing employee an independent 24/7 access to the portable wellness services are valued the most. Indeed, it considers itself as responsible for providing the employees the proper circumstances for taking care of their wellbeing, but leaves it to the employees to decide when and where to consume wellness services.

Additionally, the wellness services are expected to be modernized by improving their efficiency and technology leverage enabling the employer to measure and weight the successfulness of the services. Nevertheless, although strongly emphasizing the best practice wellness services, it allows employees to decide which services suit best to their circumstances. In fact, employees are empowered to judge which services represent the best practice services for them. Moreover, the segment values administrative easiness. It

also considers with some extent that it is time to rethink the whole society wide corporate wellness structure in order to provide with organizations the right incentives to provide wellness services and motivate employees also to consume these services.

- 2) Suspicious wellness service providers – claim to have enough information on the current corporate wellness services and regardless seem to be quite untroubled with the situation. As being satisfied with the current situation, they are not willing to give extra investments on employee health unless it is encouraged by public incentives. Indeed, until the broader society shares the concern and costs, they stay indifferent towards the worsen employee wellbeing. Moreover, no service modernization is needed as the currently available services are enough to respond to the challenge. As the services aim primarily at improving the organizational health, they are provided from employer perspective. Thus, it is assumed that the employer knows best which services to provide to employees within the organizational settings.

It comes clear that the two segments in the Finnish corporate wellness market contradict each other, so that while the former group takes a bottom-up perspective to the issue, the latter group emphasizes the employer oriented top-down perspective as the most appropriate one to respond to the increasingly concerning reality of employee wellbeing. Furthermore, the two segments differ in their understanding on employee health so that the former group takes a wider and more comprehensive employee wellbeing perspective, whereas the latter group sticks with the traditional occupational health notion.

Progressive wellness service providers segment bases its rationale to provide wellness services primarily on the thoughts of the social exchange approach. Therefore, it is primarily concerned about the improved employee health, which it further understands to be subjective in its nature allowing an employee the power to define the state of its wellness at work. Indeed, the employer is seen as responsible of providing the employee with the necessary wellness services and constructing an organizational culture which permits the employees to feel overall satisfaction of themselves. The secondary purpose of wellness services, the improved employee performance, is only expected to occur after the primary target is fulfilled. Thus, the bottom-up reasoning starts

from the employee empowerment leading to better employee and organizational productivity through the modernized wellness services and the rethought overall wellness structure of the society.

On contrary, the top-down reasoning of suspicious wellness service providers -group starts from the idea of employer being only responsible of providing the employee with the very basic wellness services that exist already today. The rationale stemming from RBV is based on the assumption that the primary aim for wellness services is to improve the organizational productivity, and not to take care of the employees overall happiness. Thus, the employees are only provided with the services that best responses to the targets of the organization. Moreover, it is not considered to be employer responsibility to be the one investing extra in the overall health of its employees by taking initiatives to broaden the supply of wellness services, at least not unless the invested money is compensated by society's incentives. Thereby, the responsibility of an employer ends where the basic targets of the organizations has been fulfilled.

It is apparent that the two groups construct their reasoning to provide wellness services to their employees from different rationales. In fact, the categorization of the total Finnish corporate wellness market into two sub-groups provides a lot more insight to the actual situation than could be provided by concentrating on the overall market. Now that the primary objective of the study is fulfilled, it is time to turn the attention to the secondary target and investigate if the organizational characteristics determine whether an organization adopts progressive or suspicious viewpoint to corporate wellness.

5.6 Corporate Wellness Segments by Organizational Characteristics

A cross-tabulation between the segments and the organizational characteristics was conducted in order to answer the sub research questions of whether the organizational characteristics determine the rationales to provide wellness services. For the purpose of testing reasonably whether industry can be seen as relevant organizational characteristic, the eleven industry groups were regrouped into three broader groups: service, industry and public groups. In addition to

industry also organization size and internationalization stage was included to the characteristics possibly influencing organizations rationales to provide wellness services to its employees. Obviously, each time the chi-square test was conducted to test the significance of the cross-tabulations. In the end, only the internationalization stage can be concluded to be statistically significant ($p < 0.007$) determinant of differences between the two segments, whereas industry and company size cannot be expected to determine the attitudes of an organization towards corporate wellness services. The results of the analyses can be viewed below.

Table 6. Clusters by Industry

	Service	Industry	Public	Total
Progressive wellness service providers	52,5 % 31	56,5 % 26	58,0 % 25	82
Suspicious wellness service providers	47,5 % 28	43,5 % 20	42,0 % 18	66
Total	100 %	100 %	100 %	100 %
N	59	46	43	148

$\chi^2 = 0,349$, d.f= 2, p = 0,840

Table 7. Clusters by Company Size

	-49	50 – 249	250 -	Total
Progressive wellness service providers	37 % 7	52 % 15	60 % 60	82
Suspicious wellness service providers	63 % 12	48 % 14	40 % 40	66
Total	100 %	100 %	100 %	100 %
N	19	29	100	148

$\chi^2 = 3,663$, d.f= 2, p = 0,160

Table 8. Clusters by Internationalization Stage

	0 %	1% - 10%	11% - 25%	26% - 50%	51% - 75%	76% -	Unable to tell	Total
Progressive wellness service providers	48 %	45 %	50 %	86 %	67 %	88 %	0 %	82
	20	22	6	12	8	14	0	
Suspicious wellness service providers	52 %	55 %	50 %	14 %	33 %	12 %	100 %	66
	22	27	6	2	4	2	3	
Total	100 %	100 %	100 %	100 %	100 %	100 %	100 %	100 %
N	42	49	12	14	12	16	3	148

$\chi^2 = 19,6$, d.f= 7, p = 0,007

As can be interpreted from above, internationalization stage of an organization resulted of being the only organizational characteristic significantly determining the attitude towards corporate wellness services. Consequently, the typical organization having a progressive attitude towards wellness services has more than 25 % of its activities outside Finland, whereas the purely domestic organizations can be argued to share a more suspicious attitude towards the wellness services. Although company size cannot be statistically shown to affect the organization's attitudes towards wellness services, with caution it could be claimed that small organizations might more often belong to the suspicious wellness service providers group and big companies to progressive wellness service providers group whereas the middle sized organizations would stand somewhere in between.

Based on the cross-tabulations, the following two groups can be distinguished from each other's. One should keep in mind that the interpretation is purely based on the characteristic deviations between the segments and thus the interpretation must be related with caution.

- 1) Progressive wellness service providers: international and usually large organizations
- 2) Suspicious wellness service providers: domestic and usually small or medium sized organizations

The two profiles identified above imply that the corporate wellness attitudes adopted by organizations are at least partly affected by the characteristic factors. Organizations with different internationalization stage and for some extent with different sizes tend to share different

rationales towards providing wellness services to their employees. This supports the literatures suggestion that these characteristics might have explanatory power.

The literature has demonstrated how small businesses lag behind in providing wellness services to their employees from medium and large enterprises (Keller, Lehman & Milligan 2009, 296). In addition, it has been stated that companies with differing sizes also differ in their rationales to provide these services as big companies more often stress the so called humanitarian concerns whereas the small companies tend to be more concerned with the monetary return (Andrus & Paul 1995, 90). However, this study contributes to the previous research by suggesting that it might not be the company size that actually determines the attitudes towards the wellness services, but the internationalization stage. In fact, these two characteristics tend to go hand in hand as large companies often are also expanding to new markets. Indeed, it is more often the large organizations that seek further growth by entering new markets or the companies that have activities outside national borders more often are also larger than the purely domestic organizations.

Thus, it is easy to conclude that the company size determines the organizations rationale to provide wellness services although in reality it might be actually the internationalization tendency that makes organizations to consider the issues of employee wellbeing as employees are expected to work in distributed teams and be available more or less around the clock. Therefore, it might not be so much about the increase in personnel than expanding to new locations that makes organizations more proactive rather than reactive towards employee wellbeing.

6 SUMMARY AND CONCLUSION

In order to answer the main research question and capture the underlying rationales of Finnish organizations to provide wellness services to their employees the occupational health literature was first introduced and brought into the organizational context by engaging it to the two IHRM theories: Resource Based View of the firm and Social Exchange theory. Thereafter, the actual survey research was conducted.

The findings of the study indicate that there are two different employer segments in the Finnish corporate wellness market differing in their underlying rationales to provide wellness services to their employees. The organizations in the smaller segment (n=66) share the ideas of RBV thus perceiving wellness services as being an integral part of business targets. Therefore, corporate wellness services primarily aim at increasing the efficiency and performance of the workforce and can be viewed as tools to manage the employees' contributions to match the overall business targets of an organization. While the smaller segment takes a rather rational and employer deriving perspective, the bigger employer segment (n=82) supports the ideas of a more complex and employee deriving social exchange theory. Here, the corporate wellness services are seen as means to improve the overall wellbeing and happiness of the workforce as the desirable "by-products" of the improvements in productivity are viewed only possible through happy employees.

By linking the medicine and psychology deriving study field into the organizational context and by studying the corporate wellness interventions in comprehensive manner, this study has filled in the gap in the existing literature. This was done by first pointing out four underlying rationales to provide wellness services to employees and thereafter two contradictory employer segments relating differently to the wellness rationales. Moreover, it was shown how organizational characteristics do indeed determine the adopted rationales. Interestingly, the results of the cross-tabulations did not support the existing literature as the company size cannot be with adequate significance shown to determine whether an organization comply with RBV or social exchange deriving rationales. As a matter of fact, an internationalization stage of an organization is a better

and more probable determination of the wellness rationales as it resulted as having a sufficient explanatory power.

Depending on the internationalization stage, the Finnish organizations either possess an employer deriving RBV rationale or employee deriving social exchange theory rationale to provide wellness services to their employees. The former segment stresses the change resistant and responsibility sharing attitudes towards wellness services taking a suspicious point of view to the whole idea of further improving employee health with advanced wellness services. In fact, the organizations belonging to this segment address that the current wellness services are sufficient in managing employee health. This is due to the fact that these organizations share a narrow definition to occupational health including an idea that employer should only be interested in managing employee health for business purposes.

Whereas the former segment takes a suspicious perspective towards corporate wellness, the latter segment highlights the importance of additional investments in employee health and is willing to provide employees with better wellness services that correspond to the current changes in the work life. Thus, the organizations in this segment share a progressive point of view towards wellness services by emphasizing the need for service modernization and employee empowerment. In order to get these organizations to invest on wellness services, the actual services have to be proved to be more efficient than the current ones in responding to the stress factors of current global business environment. In addition, they need to be easily administrated, leverage the modern technology and able to demonstrate their results with clear measures. All these features are desirable so that employees would more willingly consume wellness services independently without an employer intervention. Here the whole idea of the corporate wellness is to provide employees with all the necessary instruments to manage their wellbeing not only within the organizational context, but also outside the organizational domain.

These two different segments determined by the internationalization stage of an organization emphasize different attitudes towards corporate wellness due to their different understandings of the whole concept of employee health and wellbeing. While the RBV deriving corporate wellness segment addresses the narrow occupational health definition suggesting that the notion

of employee health should be applied purely within the organizational setting, the social exchange theory deriving segment adopts a broader employee wellbeing definition. Accordingly, the employee wellbeing as notion is understood to include all aspects of the employee thus stressing the “whole person” point of view. Therefore, employee wellbeing is seen as being constructed not only within organizational setting but also within free time.

6.1 Conclusions

When binding the theoretical framework and the actual results of the survey, the following conclusions can be drawn from the study:

What are the underlying rationales of Finnish organizations to provide wellness services to their employees?

There exist four underlying rationales to provide wellness services in the Finnish corporate wellness market. Whereas three perspectives highlight the need for increased future investments in employee health and wellbeing, thus showing concern towards the alerting reality of increased work stress and burn outs, the last perspective clearly states that the current wellness services are enough to correspond to the employer obligations.

Although, one can conclude that there exist three proactive rationales and one reactive rationale to provide wellness services, the three proactive rationales differ in their reasoning. While the responsibility sharing rationale stemming from configurational and contingency approaches to RBV stresses the power of incentives as linking the investments in employee health to the organizational performance (first on the society level by encouraging organizations to invest more in wellness services and then on the organizational level by motivating employees to actually consume these services), the service modernization rationale deriving from the universalistic perspective to RBV is conditioning its extra investments on the existence of universally efficient, technology leveraging and easily administrative and measured services.

Thus, the former rationale is motivated by the lower costs and incentives, whereas the latter accumulates its reasoning from well-functioning and advanced wellness services.

Finally, the employee empowerment rationale stemming from social exchange theory conditions its extra investments on the existence of employee friendly wellness services, which enable employees an independent access to the services regardless of time and space. Here, the primary aim is to improve employee wellbeing both by providing suitable wellness services and constructing a healthy workplace where social relations are based on trust and where the organizational culture enhances the employee wellbeing and work satisfaction.

Thus, it comes clear that whereas the three other rationales support the traditional occupational health approach to corporate wellness, the employee empowerment rationale presents a holistic employee wellbeing perspective. Instead of focusing only on the decreased medical costs and received monetary incentives or calculating the net present value of improved employee efficiency, this broader view to corporate wellness considers the consequences of organizational culture by focusing on physical, psychological and spiritual health as well as social wellbeing. In fact, here the employer aims at composing a healthy organizational culture that enhances all the four health components and helps the employee to balance its professional and personal lives.

Can the Finnish corporate wellness market be segmented based on these rationales?

One can distinguish two different employer segments within Finnish corporate wellness market based on their rationales to provide wellness services to their employees. Whereas the progressive wellness service providers view the wellness services from employee perspective leaving it to employee to decide which services to consume, where and when, the suspicious wellness service providers adopt a somewhat ignorant top-down perspective and are only willing to fulfill the obligatory responsibilities of an employer.

Therefore, the former group is more receptive towards adopting new and more advanced corporate wellness services. As a matter of fact, they are unsatisfied with the current supply and expect more technologically advanced, easily measured and employee oriented services to

appear in order to tackle the increasing problem of absenteeism. Indeed, the organizations belonging to this group appreciate the superior features of the services and emphasize the employee empowerment perspective. On contrary, the organizations belonging to the latter group increase their investments in employee wellbeing only if and when they are rewarded from doing so either by incentives or proved cost savings.

Do organizational characteristics such as industry, size and internationalization stage impact organizations' rationale to provide wellness services?

Contradicting with the previous research, this study revealed that it is actually the internationalization stage of an organization that determines its rationale to provide wellness services to its employees rather than the size of an organization. In fact, the typical organization having a progressive attitude towards wellness services has more than 25 % of its activities outside Finland, whereas the purely domestic organizations can be argued to share a more suspicious attitude towards the wellness services. As usually the size and internationalization stage of an organization go hand in hand, it is easy to interpret that it is the company size that determines the rationale to provide wellness services although in reality it might actually be the internationalization stage as concluded in this research. However, this study agrees with the earlier findings about the fact that big multinational organizations more often justify the wellness services with humanitarian concerns whereas more or less domestic SMEs are more concerned about the monetary returns. To sum up, the size of an organization can only to some extent be seen as affecting its rationale to provide wellness services whereas industry cannot be seen as having any explanatory power. What matters is the internationalization stage as it turned out to be the only characteristic significantly impacting an organizations attitude towards corporate wellness.

6.2 Managerial Implications

By analyzing the comprehensive and unique data, this study contributes to the somewhat limited corporate wellness literature conducted from employer perspective. Being a first quantitative

study analyzing the underlying rationales of Finnish organizations to provide wellness services to their employees, the present study imply that not all employers can be motivated to take care of employee wellbeing with the same means. In fact, HR managers and CFOs relate differently to the wellbeing of their employees depending on the internationalization stage of their organization. Whereas HR managers and CFOs in domestic organizations can be motivated to invest in employee wellbeing by demonstrating the cost savings and incentives, the HR managers and CFOs in international organizations appreciate the enhanced and easily measurable wellness services along with employee empowerment aspects as they need to tackle the problems caused by the “long hours culture” and working in distributed teams.

The below Figures 11 and 12 illustrate the findings by mapping both the strengths and opportunities together with weaknesses and threats of getting the employer segments to invest more on employee wellbeing.

Figure 10. SWOT Analysis: Progressive Wellness Service Providers

<p>Strengths</p> <ul style="list-style-type: none"> - Share a broad employee wellbeing perspective towards corporate wellness focusing on overall employee life satisfaction - Complementary services are widely explored and more advanced services expected 	<p>Weaknesses</p> <ul style="list-style-type: none"> - There are yet no successful measures to prove that some wellness services would actually be more efficient and employee friendly
<p>Opportunities</p> <ul style="list-style-type: none"> - Easy to motivate by highlighting the advanced features of the services along with the employee empowerment aspect - Internet enables a cost-effective distribution and communication channel for employers to provide employees with 24/7 accessible wellness services - The utilization of advanced technology tools provide almost limitless opportunities for employers to provide different services to different employee needs by paying only according to use - Employees working in international (often multinational) organizations are often more educated and thus willing to take care of their wellbeing than employees working in small domestic companies 	<p>Threats</p> <ul style="list-style-type: none"> - Motivating people to take more active role in their health can turn out to be challenging - Lack of common standards affect the development of online wellness services and has slowed down the adoption of portals enabling employees to manage their own health - Managing the always available employee portals might turn out to be time consuming and costly

Figure 11. SWOT Analysis: Suspicious Wellness Service Providers

<p>Strengths</p> <ul style="list-style-type: none"> - Have information concerning the minimum employer obligations 	<p>Weaknesses</p> <ul style="list-style-type: none"> - Share a narrow occupational health point of view towards corporate wellness - There are yet no successful measures to link the extra investments on wellness services to the increased business profits and decreased employee health costs
<p>Opportunities</p> <ul style="list-style-type: none"> - Willing to meet all the required employer obligations - Easy to motivate with different incentives targeting at decreasing employer costs - Reserved interest towards low cost services - By some extent willing to rethink the current corporate wellness service supply if the future investments are somehow compensated to the employer 	<p>Threats</p> <ul style="list-style-type: none"> - When claiming to possess enough information about how to manage employee health, the adopted somewhat narrow perspective to employee health is not easily changeable - Different employee needs are not considered due to the adopted top-down perspective to employee wellbeing

All in all, getting either of the employer segments to invest more on employee health can be challenging. When considering the challenges associated to the progressive wellness service providers, the most crucial obstacle to overcome is the ability to demonstrate that some wellness services indeed are easy to administrate and measure. Additionally, motivating the employees to take more active role in managing their wellbeing can turn out to be challenging. Also, the lack of common standards and the managing of always accessible employee portals might hinder the excitement of adopting the technology leveraging services. At the same time, the success factors are as evident as the international organizations belonging to this segment are obviously alerted by the recent negative changes in employee wellbeing and therefore waiting for the right cure to the problem.

Thanks to the progressive attitude, the more suitable wellness services are already explored. In fact, employers belonging to this category are far in realizing the increasingly demanding expectations of the new generation workforce and thus showing more concern towards the overall satisfaction of the employees. Moreover, not only are these employers more proactive in answering the varied employee needs by providing employee oriented wellness services, but also the employees in international organizations usually are more proactively taking care of their

wellbeing. Also internet could be used as a cost-effective arena for gathering and distributing the wellness services so that employees could decide themselves which ones to use, where and when.

When considering the challenges associated to suspicious wellness service providers, the challenge might be to broaden the very narrow and employer oriented perspective towards corporate wellness services. Additionally, as the mostly domestic organizations belonging to this segment are unwilling to increase their investments unless they are provided by incentives or/and guarantees of cost savings, it might be problematic to motivate these employers to tackle the problem of exhausted employees at least in short run. Furthermore, the top-down perspective on providing wellness services to employees might in fact decrease the participation figures as employees might avoid the employer commanded services. Also, not all employees can be motivated to consume same services, which cause additional challenges when “forcing” the wellness services to employees.

When one considers the opportunities related to “suspicious” organizations, the fact that most of these organizations are aware of their obligations as employers, the attitude towards wellness services could be changeable. Also, the companies are fairly easily motivated by different incentives and promises of future cost savings and can be seen somewhat ready to rethink their stand point if the overall structure of employee wellbeing changes and the whole society starts backing up employer efforts.

6.3 Limitations and Implications for Future Research

Although, the study at hand constitutes a valuable starting point for analyzing overall corporate wellness market in Finland, it is limited by the convenience sample that overemphasizes the perspective of large multinational organizations that after all represent a minority group in Finnish corporate life. Thus, in future it would be interesting to compare the results of this study to the research benefiting more complete data sampling method. Additionally, it would be highly essential to deepen the results of this quantitative study with qualitative research concentrating

on the more specific reasoning behind the attitudes towards corporate wellness services. Indeed, it would be very interesting to interview HR managers and CFOs from organizations having differing amount of activities outside Finnish boundaries in order to scratch a complete picture on the research topic. Finally, it would also be worthwhile to expand the research to include other countries as well and see whether there exist location specific differences in the attitudes towards corporate wellness services.

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Appendix A: Corporate wellness questionnaire (in Finnish)

Työhyvinvointikysely

Tervetuloa työhyvinvointikyselyyn!

Tutkimuksen tarkoituksena on selvittää suomalaisten yritysten asenteita työhyvinvointipalveluja kohtaan, jotta tulevaisuuden palvelut vastaisivat paremmin koko ajan muuttuvan työympäristön tarpeisiin.

Huomaattehan, että tutkimus erottaa työhyvinvoinnin työterveyshuollosta.

Työhyvinvoinnilla viittaamme kaikkeen ennaltaehkäisevään toimintaan, jonka tarkoituksena on tehdä työterveyshuolto tarpeettomaksi. Pyydämmekin, että kysymyksiin vastatessanne erotatte työnantajan tarjoamat työterveyshuolto- ja lääkäripalvelut työhyvinvointipalveluista.

Työhyvinvointipalveluihin ei kuulu jo olemassa olevien vaivojen hoito – lääkärikäynnit, fysioterapia tai säännölliset terveystarkastukset – vaan kaikki työnantajan tarjoama ennaltaehkäisevä toiminta.

Jos ette halua vastata kaikkiin kysymyksiin, voitte vapaasti jättää vastaamatta ja siirtyä seuraavaan kysymykseen.

1) Toimiala

Valitse vastaus

2) Organisaation työnluonne

Valitse vastaus

3) Työntekijöiden lukumäärä

Valitse vastaus

4) Vastaajan työnkuva

Valitse vastaus

5) Kansainvälisyyden taso. Arviolta kuinka suuri osa organisaationne toiminnasta tapahtuu Suomen rajojen ulkopuolella?

Valitse vastaus

6) Työntekijöiden arvioitu keski-ikä

Valitse vastaus

Työhyvinvoinnilla viittaamme kaikkeen ennaltaehkäisevään toimintaan, jonka tarkoituksena on tehdä työterveyshuolto tarpeettomaksi. Työhyvinvointipalveluihin ei siis kuulu jo olemassa olevien vaivojen hoito – lääkärikäynnit, fysioterapia tai säännölliset terveystarkastukset – vaan kaikki työnantajan tarjoama ennaltaehkäisevä toiminta.

7) Tarjoatteko tällä hetkellä työhyvinvointipalveluja työntekijöillenne?

Kyllä

Ei

8) Miksi tarjoatte työhyvinvointipalveluja työntekijöillenne? Valitkaa korkeintaan kolme vaihtoehtoa.

Vakuutusmaksukustannusten väheneminen

Työterveyskustannusten väheneminen

Parempi työntekijöiden tuottavuus

Parempi työntekijöiden terveys

Parempi työntekijöiden moraalit

Paremmen työnantajan imago

Osa työntekijän kokonaiskompensaatiota

9) Minkälaisia työhyvinvointipalveluja tarjoatte tällä hetkellä? Valitkaa

niin monta vaihtoehtoa kuin tarpeen.

- Liikunta
- Painonhallinta
- Ravinto
- Fyysinen ergonomia
- Stressi
- Uni
- Rentoutuminen
- Riippuvuuksien ehkäiseminen
- Aivojen hyvinvointipalvelut
- Ongelmanratkaisutaidot
- Elämän hallinta (työn ja vapaa-ajan tasapainottaminen)
- Digitaalinen ergonomia (ajan ja informaation hallinta)
- Esimieskoulutus
- Muita palveluja

10) Arviolta kuinka suuri osa työntekijöistänne kuluttaa tarjoamianne työhyvinvointipalveluja vuosittain?

- 0-10 %
- 11-25 %
- 26-33 %
- 34-50 %
- 51-66 %
- 67-75 %

76-100 %

Työhyvinvointipalveluihin ei kuulu jo olemassa olevien vaivojen hoito - lääkärikäynnit, fysioterapia tai säännölliset terveystarkastukset - vaan kaikki työnantajan tarjoama ennaltaehkäisevä toiminta.

11) Arviolta kuinka paljon maksatte vuosittain nykyisistä työhyvinvointipalveluistanne yhtä työntekijää kohden?

Työterveyspalveluihin kuuluvat kaikki työntekijän terveyttä edistävät palvelut. Ne sisältävät sekä jo olemassa olevien vaivojen hoidon, että ennaltaehkäisevät työhyvinvointipalvelut.

12) Arviolta kuinka paljon maksatte vuosittain nykyisistä työterveyspalveluistanne yhtä työntekijää kohden?

13) Mikä on organisaationne nykyinen työeläkevakuutuksen maksuluokka?

1 2 3 4 5 6 7 8 9 10 11

14) Miten mittaatte nykyisten työhyvinvointipalvelujen tuottavuutta?

- Osallistujamäärät
- Työntekijöiden arviot / kommentit
- Työilmapiirikyselyt
- Tyytyväisyyskyselyt
- Yksilöiden voimavarakyselyt
- Työyhteisön voimavarakyselyt
- Työpoissaolot
- En mitenkään
- Jotenkin muuten

Työhyvinvoinnilla viittaamme kaikkeen ennaltaehkäisevään toimintaan, jonka tarkoituksena on

tehdä työterveyshuolto tarpeettomaksi. Työhyvinvointipalveluihin ei siis kuulu jo olemassa olevien vaivojen hoito – lääkärikäynnit, fysioterapia tai säännölliset terveystarkastukset – vaan kaikki työnantajan tarjoama ennaltaehkäisevä toiminta.

15) Jos ette tällä hetkellä tarjoa työhyvinvointipalveluja, oletteko suunnitelleet niiden tarjoamista?

Kyllä Ei En osaa sanoa

16) Miksi että tällä hetkellä tarjoa työhyvinvointipalveluja työntekijöillenne? Valitkaa korkeintaan kolme vaihtoehtoa.

- Korkea hinta
- Epävarmuus työntekijöiden kiinnostuksesta
- Sisäisten resurssien puute
- Liialliset hallinnointikulut
- Palveluntarjoajan valinnan vaikeus
- Sopivien palveluntarjoajien puute
- Ei näyttöä palveluiden tuloksellisuudesta
- Työterveyshuolto on riittävä työhyvinvoinnin elementti
- En osaa sanoa
- Muusta syystä

Seuraavat kysymykset kartoittavat asenteitanne työhyvinvointipalveluja kohtaan. Valitkaa aina parhaiten sopiva vastausvaihtoehto.

17) Tietoisuus palveluista

			Ei samaa	
Täysin samaa mieltä	Samaa mieltä	eri mieltä	eikä eri mieltä	Täysin eri mieltä

Omaan tarpeeksi tietoa mahdollisista

työhyvinvointipalveluista

18) Nykyinen palvelukirjo

	Täysin samaa mieltä	Samaa mieltä	Ei samaa eikä eri mieltä	Eri mieltä	Täysin eri mieltä
Olen tyytyväinen nykyiseen työhyvinvointipalvelujen kirjoon Suomessa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

19) Kustannus

	Täysin samaa mieltä	Samaa mieltä	Ei samaa eikä eri mieltä	Eri mieltä	Täysin eri mieltä
Olisin valmis lisäämään / tarjoamaan työhyvinvointipalveluja jos vuosittainen työntekijäkohtainen kustannus alenisi	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

20) Tuloksellisuus

	Täysin samaa mieltä	Samaa mieltä	Ei samaa eikä eri mieltä	Eri mieltä	Täysin eri mieltä
Olisin valmis lisäämään / tarjoamaan työhyvinvointipalveluja jos niiden tuloksellisuutta voitaisiin paremmin mitata	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

21) Hallinnointikustannukset

			Ei samaa		
	Täysin		eikä		Täysin
	samaa	Samaa	eri	Eri	eri
	mieltä	mieltä	mieltä	mieltä	mieltä

Olisin valmis lisäämään / tarjoamaan työhyvinvointipalveluja jos hallinnointikustannukset vähenisivät

22) Teknologia

			Ei samaa		
	Täysin		eikä		Täysin
	samaa	Samaa	eri	Eri	eri
	mieltä	mieltä	mieltä	mieltä	mieltä

Olisin valmis lisäämään / tarjoamaan työhyvinvointipalveluja jos ne hyödyntäisivät paremmin olemassa olevaa teknologiaa

Seuraavat kysymykset kartoittavat asenteitanne työhyvinvointipalveluja kohtaan. Valitkaa aina parhaiten sopiva vastausvaihtoehto.

23) Itsenäinen hyvinvoinnin seuranta

			Ei samaa		
	Täysin		eikä		Täysin
	samaa	Samaa	eri	Eri	eri
	mieltä	mieltä	mieltä	mieltä	mieltä

On tärkeää tarjota työntekijöille itsenäinen pääsy työhyvinvointipalveluihin, jotta he voisivat omaehtoisesti seurata omaa fyysistä ja henkistä hyvinvointiaan

24) Liikkuvat työhyvinvointipalvelut

		Ei samaa		
Täysin		eikä		Täysin
samaa	Samaa	eri	Eri	eri
mieltä	mieltä	mieltä	mieltä	mieltä

On tärkeää tarjota työntekijöille liikkuvia työhyvinvointipalveluja, jotta he voisivat paikasta ja ajasta riippumatta seurata fyysistä ja henkistä hyvinvointiaan myös työmatkoilla ja työajan ulkopuolella

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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25) Työhyvinvointipalvelujen mitattavuus

		Ei samaa		
Täysin		eikä		Täysin
samaa	Samaa	eri	Eri	eri
mieltä	mieltä	mieltä	mieltä	mieltä

On tärkeää pystyä mittaamaan työhyvinvointipalvelujen tuloksellisuutta

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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26) Työntekijöiden motivointi

		Ei samaa		
Täysin		eikä		Täysin
samaa	Samaa	eri	Eri	eri
mieltä	mieltä	mieltä	mieltä	mieltä

On tärkeää motivoida työntekijöitä kuluttamaan työhyvinvointipalveluja

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

27) Vakuutusyhtiön kannustimet

		Ei samaa		
Täysin		eikä		Täysin
samaa	Samaa	eri	Eri	eri
mieltä	mieltä	mieltä	mieltä	mieltä

Jos vakuutusyhtiö tarjoaisi organisaatiolleni kannustimia työhyvinvointipalvelujen tarjoamiseen, vaikuttaisi se positiivisesti päätökseeni lisätä / tarjota työhyvinvointipalveluja työntekijöilleni

28) Työhyvinvointipalvelujen ajankohtaisuus

Ei samaa
Täysin samaa mieltä Eikä eri mieltä Täysin eri mieltä

On todennäköistä, että seuraavan vuoden aikana harkitsen uudelleen tarjoamiani työhyvinvointipalveluja

29) Fyysinen työhyvinvointi

Ei samaa
Täysin samaa mieltä Eikä eri mieltä Täysin eri mieltä

On todennäköistä, että tulevaisuudessa investoin enemmän fyysistä kuntoa parantaviin työhyvinvointipalveluihin

30) Psyykinen työhyvinvointi

Ei samaa
Täysin samaa mieltä Eikä eri mieltä Täysin eri mieltä

On todennäköistä, että tulevaisuudessa investoin enemmän psyykkistä olotilaa parantaviin työhyvinvointipalveluihin

31) Rankatkaa seuraavat työhyvinvointipalvelut sen mukaan kuinka tarpeellisina koette ne organisaatiollenne. 1 = tärkein, 13 = vähiten tärkein.

Liikunta	<input type="text"/>
Painonhallinta	<input type="text"/>
Ravinto	<input type="text"/>
Fyysinen ergonomia	<input type="text"/>
Stressi	<input type="text"/>
Uni	<input type="text"/>
Rentoutuminen	<input type="text"/>
Riippuvuuksien ennaltaehkäisy	<input type="text"/>
Aivojen hyvinvointipalvelut	<input type="text"/>
Ongelmanratkaisutaidot	<input type="text"/>
Elämän hallinta (työn ja vapaa-ajan tasapainottaminen)	<input type="text"/>
Digitaalinen ergonomia (ajan ja informaation hallinta)	<input type="text"/>
Esimieskoulutus	<input type="text"/>

32) Jos hankkisitte työhyvinvointipalvelunne talon ulkopuolelta, mikä olisi teille mieluisin tapa ostaa nämä palvelut? Valitkaa korkeintaan kaksi vaihtoehtoa.

- Kiinteä työntekijäkohtainen vuosimaksu
- Kiinteä työntekijäkohtainen kuukausimaksu
- Kulutuksen mukainen laskutus
- Kaikki palvelut yhdeltä toimittajalta räätälöitynä pakettina
- Palvelutarjonnan kokoaminen usean palveluntarjoajan palveluista
- Tuloksellisuuden- / säästöjenjako periaatteen mukaan (riskin

jakamismalli)

En osaa sanoa

33) Kuinka paljon olisitte valmis maksamaan työhyvinvointipalveluista työntekijää kohden vuodessa?

34) Fyysisen työhyvinvoinnin kehitys

	Paranevan		Huononevan		
	Paranevan selkeästi	jonkin verran	Pysyvän ennallaan	jonkin verran	Huononevan selkeästi
Kuinka koette henkilöstön fyysisen hyvinvoinnin kehittyvän tulevaisuudessa?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

35) Psyykkisen työhyvinvoinnin kehitys

	Paranevan		Huononevan		
	Paranevan selkeästi	jonkin verran	Pysyvän ennallaan	jonkin verran	Huononevan selkeästi
Kuinka koette henkilöstön psyykkisen hyvinvoinnin kehittyvän tulevaisuudessa?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

36) Teknologian hyödyntäminen tulevaisuudessa

	Lisääntyvän		Vähentyvän		
	Lisääntyvän selkeästi	jonkin verran	Pysyvän ennallaan	jonkin verran	Vähentyvän selkeästi
Miten arvelette teknologisen mittaamisen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

kehittyvän
tulevaisuudessa
työhyvinvoinnin
piirissä?

37) Jos haluatte vastaanottaa tutkimustulokset, kirjoittakaa sähköpostiosoitteenne alla olevaan kenttään.

Appendix B: SAS printouts

Eigenvalues of the Correlation Matrix: Total = 14 Average = 1				
	Eigenvalue	Difference	Proportion	Cumulative
1	3.27858336	1.48436171	0.2342	0.2342
2	1.79422165	0.18542133	0.1282	0.3623
3	1.60880032	0.32930953	0.1149	0.4773
4	1.27949079	0.30295564	0.0914	0.5686
5	0.97653515	0.05303058	0.0698	0.6384
6	0.92350458	0.18333635	0.0660	0.7044
7	0.74016823	0.02986658	0.0529	0.7572
8	0.71030165	0.13749808	0.0507	0.8080
9	0.57280357	0.03237862	0.0409	0.8489
10	0.54042494	0.07175067	0.0386	0.8875
11	0.46867427	0.05755924	0.0335	0.9210
12	0.41111503	0.02649887	0.0294	0.9503
13	0.38461616	0.07385587	0.0275	0.9778
14	0.31076029		0.0222	1.0000

Rotated Factor Pattern					
		Factor1	Factor2	Factor3	Factor4
17: Omaan tarpeeksi tietoa mahdo	17: Omaan tarpeeksi tietoa mahdollisista työhyvinvointipalveluis	0.06328	-0.03368	0.86209	-0.05007
18: Olen tyytyväinen nykyiseen t	18: Olen tyytyväinen nykyiseen työhyvinvointipalvelujen kirjoon	-0.12672	-0.04093	0.84521	0.03286
19: Olisin valmis lisäämään / ta	19: Olisin valmis lisäämään / tarjoamaan työhyvinvointipalveluja	0.35779	0.38101	-0.07570	-0.07585
20: Olisin valmis lisäämään / ta	20: Olisin valmis lisäämään / tarjoamaan työhyvinvointipalveluja	0.25565	0.75530	0.10992	-0.12592
21: Olisin valmis lisäämään / ta	21: Olisin valmis lisäämään / tarjoamaan työhyvinvointipalveluja	-0.15255	0.77573	-0.16657	0.05785
22: Olisin valmis lisäämään / ta	22: Olisin valmis lisäämään / tarjoamaan työhyvinvointipalveluja	0.13013	0.76168	-0.08195	0.18950
23: On tärkeää tarjota työntekij	23: On tärkeää tarjota työntekijöille itsenäinen pääsy työhyvinv	-0.06329	0.00493	0.15589	0.81260
24: On tärkeää tarjota työntekij	24: On tärkeää tarjota työntekijöille liikkuvia työhyvinvointipa	0.19110	0.19463	-0.29863	0.67484
25: On tärkeää pystyä mittaamaan	25: On tärkeää pystyä mittaamaan työhyvinvointipalvelujen tuloks	0.42917	0.50634	0.17301	0.20439
26: On tärkeää motivoida työntek	26: On tärkeää motivoida työntekijöitä kuluttamaan työhyvinvoint	0.61288	-0.27756	0.02236	0.37570
27: Jos vakuutusyhtiö tarjoaisi	27: Jos vakuutusyhtiö tarjoaisi organisaatiolleni kannustimia ty	0.62044	0.07515	0.03845	-0.08730
28: On todennäköistä, että seura	28: On todennäköistä, että seuraavan vuoden aikana harkitsen uud	0.63298	0.17529	-0.09020	-0.10230
29: On todennäköistä, että tulev	29: On todennäköistä, että tulevaisuudessa investoin enemmän fyy	0.60339	0.08063	-0.10222	0.12905
30: On todennäköistä, että tulev	30: On todennäköistä, että tulevaisuudessa investoin enemmän psy	0.73066	0.14490	0.04104	0.12102

Variance Explained by Each Factor			
Factor1	Factor2	Factor3	Factor4
2.5375220	2.3355655	1.6755208	1.4124878

Final Communality Estimates: Total = 7.961096													
17: Omaan tarpeeksi tietoa mahdo	18: Olen tyytyväinen nykyiseen t	19: Olisin valmis lisäämään / ta	20: Olisin valmis lisäämään / ta	21: Olisin valmis lisäämään / ta	22: Olisin valmis lisäämään / ta	23: On tärkeää tarjota työntekij	24: On tärkeää tarjota työntekij	25: On tärkeää pystyä mittaamaan	26: On tärkeää motivoida työntek	27: Jos vakuutusyhtiö tarjoaisi	28: On todennäköistä, että seura	29: On todennäköistä, että tulev	30: O todennäköistä, että tule
0.75084375	0.73319831	0.28466519	0.66377055	0.65612197	0.63971738	0.68864802	0.61898842	0.51227280	0.59431384	0.39969609	0.44998781	0.39768688	0.5711851

Cluster Summary						
Cluster	Frequency	RMS Std Deviation	Maximum Distance from Seed to Observation	Radius Exceeded	Nearest Cluster	Distance Between Cluster Centroids
1	79	0.9313	3.7236		2	1.5523
2	69	0.9169	4.6388		1	1.5523

Cluster Means				
Cluster	Factor1	Factor2	Factor3	Factor4
1	0.1614842339	0.3837455309	-.1549354928	0.5713136469
2	-.1848877461	-.4393608252	0.1773899120	-.6541127262

Table Analysis Results

The FREQ Procedure

Frequency Col Pct	Table of CLUSTER by 1: Toimiala				
	CLUSTER(Cluster)	1: Toimiala(1: Toimiala)			Total
		1	2	3	
1	31 52.54	26 56.52	25 58.14	82	
2	28 47.46	20 43.48	18 41.86	66	
Total	59	46	43	148	

Statistics for Table of CLUSTER by 1: Toimiala

Statistic	DF	Value	Prob
Chi-Square	2	0.3490	0.8399
Likelihood Ratio Chi-Square	2	0.3490	0.8399
Mantel-Haenszel Chi-Square	1	0.3290	0.5662
Phi Coefficient		0.0486	
Contingency Coefficient		0.0485	
Cramer's V		0.0486	

Table Analysis Results

The FREQ Procedure

Frequency Col Pct	Table of CLUSTER by 3: Työntekijöiden lukumäärä			
	CLUSTER(Cluster)	3: Työntekijöiden lukumäärä(3: Työntekijöiden lukumäärä)		
	1	2	3	
1	7 36.84	15 51.72	60 60.00	82
2	12 63.16	14 48.28	40 40.00	66
Total	19	29	100	148

Statistics for Table of CLUSTER by 3: Työntekijöiden lukumäärä

Statistic	DF	Value	Prob
Chi-Square	2	3.6634	0.1601
Likelihood Ratio Chi-Square	2	3.6599	0.1604
Mantel-Haenszel Chi-Square	1	3.5511	0.0595
Phi Coefficient		0.1573	
Contingency Coefficient		0.1554	
Cramer's V		0.1573	

**Table Analysis
Results**

The FREQ Procedure

Frequency Col Pct	Table of CLUSTER by 5: Kansainvälisyyden taso# Arvio								
	CLUSTER(Cluster)	5: Kansainvälisyyden taso# Arvio(5: Kansainvälisyyden taso# Arviolta kuinka suuri osa organisaati)							
	0	1	2	3	4	5	6	7	
1	0 0.00	20 47.62	22 44.90	6 50.00	12 85.71	8 66.67	14 87.50	0 0.00	82
2	2 100.00	22 52.38	27 55.10	6 50.00	2 14.29	4 33.33	2 12.50	1 100.00	66
Total	2	42	49	12	14	12	16	1	148

Statistics for Table of CLUSTER by 5: Kansainvälisyyden taso# Arvio

Statistic	DF	Value	Prob
Chi-Square	7	19.5808	0.0066
Likelihood Ratio Chi-Square	7	22.4403	0.0021
Mantel-Haenszel Chi-Square	1	11.2673	0.0008
Phi Coefficient		0.3637	
Contingency Coefficient		0.3418	
Cramer's V		0.3637	