



Influence of employee's intellectual wellness programmes on service delivery in faith-based hospitals in Nairobi metropolitan area

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Article History

Received: 2024-04-19

Revised: 2024-07-29

Accepted: 2024-08-09

Published: 2024-08-16

Keywords

Faith-based
Intellectual
Service delivery
Wellness

How to cite:

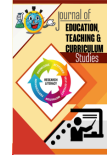
Karanja, B. W., Gichuhi, D. & Kiambati, K. (2024). Influence of employee's intellectual wellness programmes on service delivery in faith-based hospitals in Nairobi metropolitan area. *Research Journal of Education, Teaching and Curriculum Studies*, 2(2), 21-29.

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Abstract

This study sought to investigate the intellectual wellness programmes on service delivery in faith-based hospitals in Nairobi metropolitan area. In the modern competitive business environment, organisations and their management have realised that their survival and competitiveness lie in quality of the services and by extension the service providers. The study adopted descriptive survey and correlational research designs. The study targeted the employees in faith-based hospitals in the Nairobi metropolitan area. A stratified random sampling approach was used in selecting the respondents. The study sample size was 297 respondents. Of the 297 questionnaires distributed to the target respondents, 244 of the questionnaires were filled and returned. Thus, there was a response rate of 82 per cent. The study obtained primary data using a questionnaire. Descriptive and inferential statistics were used to analyse data. Descriptive statistics included frequencies, mean, standard deviation and percentage. Correlational analysis was used to determine the relationship between the independent and dependent variables. The study also carried out a regression analysis to determine the level of association of the study variables. Results were presented in tables. The study established that there were employees' intellectual wellness programmes in the faith-based hospitals in the Nairobi metropolitan area. Correlation analysis results showed that a significant moderate positive correlation existed between service delivery and intellectual wellness programmes. The study also determined that intellectual wellness had a significant influence on service delivery in faith-based hospitals in the Nairobi metropolitan area. The study thus concluded that intellectual employee wellness programmes had a significant influence on service delivery in faith-based hospitals in the Nairobi metropolitan area.



Introduction

Intellectual wellness is about making better decisions and engaging in activities that bring more fulfilment in life. It also helps improve the engagement of the mind and creates an opportunity to learn and gain more knowledge and skills. Awareness and adoption of intellectual wellness give individuals the skills to balance demanding work tasks and personal and family responsibilities. It also encourages healthy behaviour for all workers and students in different learning institutions. There is a need to expand opportunities for learning and growing to expand the knowledge base and engagement of the mind in thought processes and critical and creative thinking.

Intellectual wellness is about the recognition of the creative abilities of an individual and encouraging them to expand their skills and knowledge base. Ackabah (2018) suggested that intellectual wellness is associated with personal and professional development, involvement in community and cultural practices and space to do hobbies and interests. The work activities should stimulate the mind and keep the employee's interest. The organisation can improve intellectual wellness by availing resources to expand the knowledge and skills of employees. Furthermore, supervisors should allocate tasks based on the interests and IQ of the staff to engage their minds fully (Bosire, 2021). In this study, intellectual wellness is a measure of professional development classes, on-the-job training, brainstorming sessions, chances for collaboration and creative and innovative thinking for the full engagement of employees.

Increased consumerism in organisations and industries has shown that value delivered to clients is what differentiates between success and failure. Thus, service delivery is at the core of success in service-based organisations and industries. It measures real outcomes, effective and efficient service rendering and prompt delivery. It is also about the extent of excellence and professionalism (Attridge, 2019). Since service delivery is based on the employee, their well-being must be considered through wellness programmes. Sickly, fatigued, unmotivated and unrecognised employees cannot deliver on their mandate. Kitali (2021) contends that in recognition of the value of employees' health, well-being and economic benefits, many employees are increasingly providing wellness programmes. Increased chronic health conditions, toxicity at workplaces, depression, an ageing workforce and lack of work-life balances have seen employee productivity decline. In worse cases, the turnover rates are too high when employees cannot cope with the work demands and schedules.

Employee wellness has gained recognition as a critical factor influencing the performance of healthcare providers. The proponents of employee wellness programmes argue that their execution can improve employee productivity and service delivery to the clients and customers of the organisation (Susan et al., 2021). While some faith-based hospitals have implemented employee wellness programmes, there is limited research on the implication of these programmes on the quality of healthcare service delivery in the Kenyan context. Consequently, there is limited understanding of how these programmes influence the physical and mental health of healthcare workers, their job satisfaction, and ultimately the quality of healthcare services provided. This study sought to fill the gap by investigating the influence of employee's intellectual wellness programmes on service delivery in faith-based hospitals in the Nairobi metropolitan area.

Intellectual Wellness and Service Delivery

Syed et al. (2017) researched intellectual wellness for teachers of science in universities and the comparisons based on gender. The study focused on intellectual wellness awareness for basic science teachers at medical universities in Karachi, Pakistan. The focus was conducting a comparative analysis



based on gender. The findings showed that intellectual wellness awareness was significantly better and more prevalent among male medical and science teachers in public and private medical universities. The assessed female teachers recorded lower scores for intellectual wellness awareness and implementation.

A study by Botha (2013) was done on intellectual wellness and the behaviour levels of management teams in South African institutions of higher education. The transformations and changes in South Africa's higher education sector have pushed the demand for intellectual managers to handle the complex challenges. The study assessed how managers in two South African higher education institutions engage in activities and behaviours that stimulate intellectual development, growth and establishment. Some score lowly on intellectual wellness, creating a need for interventions that include keeping oneself informed on social, political, and economic factors, as well as learning and scientific discoveries. The study concluded that managers had intellectual wellness and needed to acquire new skills, competencies and knowledge to improve academic performance. The study recommends gaining more skills and knowledge, especially from computer and technological applications and systems.

Mafumbate et al. (2017) researched the social and intellectual wellness of orphaned children in the Masvingo urban area in Zimbabwe. The researcher noted that HIV and AIDs has had a big social cost to the Zimbabwe people and left behind millions of orphaned children. The researcher purposively selected 16 orphaned children and 4 guidance and counselling teachers and reviewed past documents. The study found that children in Masvingo Urban were at risk and experienced academic challenges linked to their socialisation process. The study also found compromised, inconsistent and inadequate support structures for the orphaned children that had negative effects on their intellectual wellness and academic and learning processes.

Further results indicate that female orphans are the most affected and show much distress than their male counterparts. The inadequate social support resulted in poor intellectual wellness that led to bad academic performance among the leaders. The study concluded that social and intellectual wellness was poor and affected the learning and academic process of the orphaned children. The study recommended strengthening the provision of social and intellectual wellness for orphaned children. There is also a need for awareness creation and advocacy to eradicate the problem.

Wickramarathne et al. (2020) studied the wellness dimension models to advance society. Wellness is a way of life that always involves exploring, searching, asking new questions and discovering new answers while living in the physical, mental and social dimensions. The study focused on reviewing all wellness dimension models and assessed using the Preferable Reporting Items Systematic Reviews and Meta-Analysis (PRISMA). The findings showed that the wellness dimension model follows the stages of identifying, scanning, and checking people's inclusion and eligibility levels in society. The dimensions of wellness cover social, spiritual, physical, emotional, intellectual and occupational wellness. The study findings revealed that recognising, adopting and practising these dimensions in both the working places and education and learning institutes helped create a better society. Wellness can help create better attitudes and positive personal phenomena. The policymakers, administrators and entrepreneurs can help develop efficiencies and effectiveness by doing the right thing at the right time and with the suitable tools as guided by the suitable model.



Rehman's (2015) study was on intellectual wellness and mentorship for medical students at the Aga Khan University in Pakistan. The researcher noted that anxiety and stress, the lack of pleasurable events and creative release results in illnesses of people across the globe. Medical students face mental stresses linked to voluminous and stressful academic curriculum. The medical students showed burn-outs, mental exhaustion, depression and suicidal tendencies. The study found that intellectual wellness acquired from group discussions, reading, watching and net surfing can help in withstanding stress and solving mental proficiencies problems. The intellectual well-being of medical students can be based on using cognitive, psychomotor and affective domain resources. The study collected data from medical students and revealed that the intellectual wellness of the students can be attained through mentoring programmes and the use of mentors. The mentors can offer guidance, help with coping mechanisms, reduce stress and lower depression and cases of dementia. The mentors can also work to improve communication and critical and creative thinking. The study recommended that mentors work with medical students by directing them towards realistic and attainable goals, self-criticism, reinforcing the need for physical health and setting time for hobbies.

Methodology

The target population for this study comprised human resource officers and medical staff working in faith-based hospitals across the Nairobi Metropolitan Area. The population included 32 level four and five faith-based hospitals. From these hospitals, a stratified random sampling technique was utilised to select 19 hospitals, ensuring representation across different counties based on their number of hospitals. Specifically, all hospitals in Murang'a, Machakos, and Kajiado counties were included due to their smaller numbers, while 50% of hospitals in Nairobi and Kiambu counties were randomly selected.

The sample size was determined using Yamane's (1967) formula:

$$n = N / 1 + N(e)^2$$

Where n is the required sample size from the population under study

N is the whole population that is under study,

and e is the precision or sampling error, which is usually 0.05

$$n = 1154 / 1 + 1154(0.05)^2$$

$$n = 1154 / 3.885$$

$$= 297$$

Thus, the sample size was 297 respondents, representing 25.7 per cent of the total population. The sample was distributed proportionately across the selected hospitals.

Faith-based hospitals were chosen due to their unique organisational structures and mission-driven focus, which often strongly emphasises employee well-being. This setting provides a rich context for evaluating the impact of occupational wellness programs on service delivery, offering insights that may differ from secular institutions.

Data were collected using a semi-structured questionnaire administered to the sampled human resource officers and medical staff. The questionnaire included both closed-ended and open-ended questions to capture qualitative data. It was pre-tested in a pilot study involving 15 respondents from medium-sized private hospitals to ensure clarity and reliability.

Data analysis involved descriptive statistics to summarise the data and inferential statistics to test the hypothesis. Descriptive statistics (mean, standard deviation) summarised demographic information



and responses to the questionnaire. The sample comprised 297 respondents from the selected hospitals. Distribution by county was as follows: Nairobi (137), Kiambu (107), Murang'a (29), Kajiado (16), and Machakos (7). This composition ensured a representative analysis of occupational wellness programs' impact on service delivery across the Nairobi Metropolitan Area's faith-based hospitals.

Intellectual Wellness Programmes

The respondents were required to indicate their opinions on statements regarding employees' intellectual wellness programmes in their hospitals. Responses were on a five-point Likert scale where one represented strongly disagree, two represented disagree, 3 represented moderate, four represented agree, and five represented strongly agree. Results are summarised in Table 1.

Table 1: Descriptive Statistics on Employee's Intellectual Wellness Programmes

	N	Min	Max	Mean	Std. Dev
Our organisation offer its employees professional development classes	244	1	5	4.14	1.198
On-the-job training is important for our employees because it provides first-hand knowledge and experience in the workplace	244	1	5	3.93	.844
Brainstorming sessions help our employees in problem solving as they undertake their tasks	244	1	5	3.84	.800
Our organisation encourages collaboration opportunities among the employees	244	1	5	3.82	1.142
Collaboration opportunities ensures that tasks in our organisation are linked to achieve the set goals	244	1	5	3.62	1.246
Our organisation encourages brainstorming sessions to enhance service delivery	244	1	5	3.44	.934
Our organisation provide employee with the on-the-job training programmes	244	1	5	3.44	1.115
Professional development classes allow our employees to perform better and prepares them for positions of greater responsibility	244	1	5	2.62	1.114
Aggregate				3.61	1.049

Results in Table 1 indicated that the aggregate mean score for employees' intellectual wellness programmes was 3.61, alluding to employees' agreement that there were employees' intellectual wellness programmes in their hospitals. These results postulate that faith-based hospitals in the Nairobi metropolitan area management considered employees' intellectual wellness programmes to be important in delivering quality services to their patients. The standard deviation of 1.049 indicated high deviations in the existence of such programs, suggesting that while some hospitals had elaborated intellectual wellness programmes, others had none. The range of responses from 4 with a minimum of 1 to a maximum of 5 also suggests a disparity in the respondents' opinions on the existence of employee intellectual wellness programmes.

On individual attributes of intellectual wellness programmes, it was established that most hospitals offered their employees professional development classes, as shown by a mean score of 4.14 and a



standard deviation of 1.198. It was also noted that respondents agreed that their hospitals considered on-the-job training as important for their employees to provide first-hand knowledge and experience in the workplace (mean = 3.93; Std. Dev = 0.844), brainstorming sessions help employees in problem-solving as they undertake their tasks (mean = 3.84; Std. Dev = 0.800), hospitals encouraged collaboration opportunities among the employees (mean = 3.82; Std. Dev = 1.142) and collaboration opportunities ensured that tasks in their hospitals were linked to achieve the set goals (mean = 3.62; Std. Dev = 1.246).

On the other hand, it was established that respondents were indifferent to the fact that their hospitals encouraged brainstorming sessions as a means of enhancing service delivery (mean = 3.44; Std. Dev = 0.934), implying that while some hospitals encouraged brainstorming sessions, others did not perceive it as important in improving service delivery. Results also suggested that although the management acknowledged that brainstorming sessions helped employees in problem-solving, some hospitals did not encourage such sessions. Similarly, respondents were indifferent to the fact that their hospitals provided the employees with on-the-job training programmes (mean = 3.44; Std. Dev = 1.115). This implies that although the management of faith-based hospitals in the Nairobi metropolitan area considered on-the-job training programmes important in providing first-hand knowledge and experiences to employees, many did not have such programmes. Respondents were also indifferent that professional development classes allowed employees to perform better and prepare them for positions of greater responsibility (mean = 2.62; Std. Dev = 1.114). This alluded to the fact that possession of a professional development course was not a major factor for consideration of such opportunities.

The results concurred with the declaration of Botha (2013), who stated that intellectual wellness was positively associated with performance and, therefore, there is a need to keep oneself informed on social, political, and economic factors, learning and scientific discoveries. Additionally, Rehman (2015) revealed that the intellectual wellness of students through mentoring programmes can help in developing coping mechanisms, reduce stress and lower depression and cases of dementia. Besides, Wickramarathne et al. (2020) concluded that intellectual wellness creates better attitudes and positive personalities and that recognising, adopting and practising intellectual wellness in both the working places and education and learning institutes helped to create a better society.

Test of Hypothesis

The study tested the null hypothesis that employee intellectual wellness programmes have no significant influence on service delivery in faith-based hospitals in the Nairobi metropolitan area. To test the hypothesis, service delivery was regressed on employee intellectual wellness programmes, and the model summary results are shown in Table 2.

Table 2: Model Summary Results for Intellectual Wellness Programmes

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.519 ^a	.270	.267	.622

a. Predictors: (Constant) Intellectual Wellness

The results in Table 2 indicated that the correlation coefficient between service delivery and employee intellectual wellness programmes was 0.519, indicating a moderate positive relationship between the two variables. The results also showed that the adjusted R square was 0.267, indicating that employee



intellectual wellness programmes predicted 26.7 percent of service delivery in faith-based hospitals in the Nairobi metropolitan area. The results thus suggest that other variables contribute to service delivery in faith-based hospitals, accounting for 73.3 percent.

The study conducted the Analysis of Variance (ANOVA) test to determine the model's fitness for predicting service delivery. The results are shown in Table 3.

Table 3: ANOVA Results for Intellectual Wellness Programmes

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	34.599	1	34.599	89.391	.000 ^b
	Residual	93.666	242	.387		
	Total	128.265	243			

a. Dependent Variable: Service Delivery

b. Predictors: (Constant), Intellectual Wellness

Results in Table 3 indicated that the F-statistic for the model was 89.391 > 3.880. The study also established that the model statistic's P-value was 0.000 < 0.05. Based on these results, the study concluded that the model was significant in predicting service delivery.

To determine the significance of employee intellectual wellness programmes in predicting service delivery in faith-based hospitals in the Nairobi metropolitan area, the study conducted the student t-test, and the results were summarised in Table 4.

Table 4: Coefficients Results for Intellectual Wellness Programmes

Model		Unstandardised Coefficients		Standardised Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	.593	.304		1.948	.003
	Intellectual Wellness	.795	.084	.519	9.455	.000

a. Dependent Variable: Service Delivery

The results in Table 4 indicated that the model constant was 0.593, holding employee intellectual wellness programmes constant at zero. Service delivery in faith-based hospitals in the Nairobi metropolitan area would equal 0.593. This relationship was found to be constant ($P = 0.003 < 0.05$). The results showed that the standardised coefficient for employee intellectual wellness programmes was 0.519, indicating that, holding all other factors constant, a unit increase in employee intellectual wellness programmes would increase service delivery in faith-based hospitals in the Nairobi metropolitan area by 51.9 per cent. The study also observed that the t-static for employee intellectual wellness programmes was 9.455 > 0.525, while the P-value for the variable was 0.000 < 0.05. It was, therefore, established that employee intellectual wellness programmes were significant in predicting service delivery in faith-based hospitals in the Nairobi metropolitan area.

The results were consistent with qualitative data. Most respondents indicated that intellectual wellness influences service delivery in their hospital. In their explanation, it was determined that being allowed time to enhance their skills enables them to perform better. A respondent stated that:



When employees are allowed to pursue higher education, they gain better skills, which enables them to discharge their duties more efficiently. Another respondent stated that possession of professional skills makes employees make better decisions at work. Further, the study established that having the right skills for the job gives employees some security.

When you have the minimum qualifications for the position, it is unlikely that you will be removed from the job because you have the qualifications and can do your job well.

The study further established that providing relevant training to employees enables them to do their work better.

The seminars and workshops attended impact relevant skills on emerging issues, especially new drugs and equipment to diagnose diseases, which helps provide better services. I am a benefit of the training offered.

Another respondent stated that:

Intellectual wellness is important because it promotes proactive thinking, which is necessary for decision-making.

To enhance service delivery, most respondents supported that employees should be willing to seek further training and the management should facilitate more training by paying for seminars and organising workshops.

The obtained results were consistent with descriptive results, which indicated that employees agreed that there were intellectual wellness programmes in their hospitals to a great extent. Accordingly, it was determined that the management of these hospitals considered employee intellectual wellness a critical variable in offering quality services. The results on this variable were also consistent with correlation results, which indicated that a moderate positive correlation existed between employees' intellectual wellness programmes and service delivery in faith-based hospitals in the Nairobi metropolitan area.

More so, the results on this variable were consistent with existing empirical literature, which showed that intellectual wellness was positively associated with performance (Botha, 2013). Further, Wickramarathne et al. (2020) concluded that intellectual wellness creates better attitudes and positive personalities and that recognising, adopting and practising intellectual wellness in both the working places and education and learning institutes helped to create a better society. Furthermore, Mafumbate (2017) found that compromised, inconsistent, and inadequate support structures negatively affected their intellectual wellness and academic performance, supporting the idea that intellectual wellness affects productivity.

The findings also support the postulation of the theoretical framework anchoring the study. Specifically, the study's results supported the Social Exchange Theory developed by Homans (1958), which states that human actions are based on cost-benefit analysis. Accordingly, how an organisation treats its employees is reciprocated in their actions. Thus, when a company treats their employees well, it expects them to reciprocate the firm's good actions (Cook et al., 2013). Thus, a company that offers opportunities for its employees in the form of professional development classes, on-the-job training, brainstorming sessions, collaboration opportunities and encouraging creative and innovative thinking expects that their employees are more productive and offer quality services.



Conclusion

It was determined that there were employees' intellectual wellness programmes in faith-based hospitals in the Nairobi metropolitan area. A significant moderate positive correlation existed between service delivery and intellectual wellness programmes, and employees' intellectual wellness programmes significantly influenced service delivery in faith-based hospitals in the Nairobi metropolitan area. Therefore, it was concluded that employees' intellectual wellness programmes significantly influenced service delivery in faith-based hospitals in the Nairobi metropolitan area.

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