

Case Study: A Workplace Wellness Policy and HIV/AIDS Policy for Zambia

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The Zambian Ministry of Tourism and Arts identified an overall goal of utilizing Zambia’s natural and cultural resources as a tourism driver to increase economic growth for the country. However, the industry has experienced problems with attrition, productivity, and high mortality rates of wildlife police officers (WPOs) which negatively affects the ability to protect the wildlife and natural resources that drive the tourism industry. A systematic review of the evidence was conducted in support of the Ministry of Tourism and Arts (MOTA) to identify the key components of a workplace wellness and HIV/AIDS program to reduce the attrition and mortality of the WPOs. The findings from the review indicate the essential components of a workplace wellness and HIV/AIDS policy should include four categories: (a) program design; (b) program growth; (c) disease management and prevention; and (d) program evaluation. Findings also

Zambia’s economy is fed by the tourism industry. But high attrition and climbing mortality rates of the wildlife police officers (WPOs) fighting against poachers and traffickers to conserve Zambia’s wildlife must be addressed. Can a workplace wellness policy improve the longevity of the WPOs?

indicate that wellness programs have a positive correlation with absenteeism, job satisfaction, job performance/productivity, employee turnover, and return on investment (ROI). However, management involvement and support to resource a program and reduce the stigma associated with it are necessary for its success. This case study presents evidence-based recommendations to assist the MOTA with the development and implementation of an effective workplace wellness policy focusing on HIV/AIDS, other communicable and noncommunicable diseases, addiction, and mental health support. Recommendations included the formation of a workplace wellness committee, development and communication of the wellness program, engagement through employee forums, increased training for leadership, and the involvement of stakeholders as program advisors.

Keywords: Africa, health program, HIV/AIDS policy, MOTA, rangers, Theory of Planned Behavior, tourism, wildlife police officer, workplace wellness, Zambia

Introduction

Wildlife Police Officers (WPOs) are the protectors of Zambia's wildlife. Every day, these officers engage in a war against poachers as they fight to conserve Zambia's wildlife (Ministry of Tourism, 2018). However, as gallant as they are, Zambia's wildlife ambassadors face another battle, HIV/AIDS. The Ministry of Tourism and Arts' (MOTA) workforce is highly vulnerable to the HIV/AIDS pandemic. They are challenged with maintaining a qualified workforce of uniformed WPOs while fighting high mortality and attrition rates among personnel and constraints that delay, or eliminate, the recruitment and hiring of new officers.

In 1998, the Department of National Parks and Wildlife (DNPW) was written into the Zambian constitution under the Wildlife Act No. 12 (Department of National Parks and Wildlife, Who We Are, 2020). Under the Act, the DNPW has authority over the management of Zambia's National Parks. The department also manages the conservation and enhancement of Zambia's Wildlife ecosystem and biodiversity (Food and Agriculture Organization of the United Nations, 2020). In 2011, MOTA absorbed the DNPW following the realignment of Zambia's ministries. The realignment gave MOTA governance over Zambia's tourism, and because wildlife accounts for 80 % of Zambia's tourism, MOTA was granted authority over the DNPW and the WPO workforce.

High mortality and attrition rates within MOTA over the last five years have caused a significant workforce challenge, especially in the critical WPO workforce. In fiscal year 2019, there were 22 deaths recorded for the workforce of slightly more than 2000 WPOs with an annual attrition rate of 1.1%, and mortality rates continue to rise because of HIV/AIDS (Ministry of Tourism, 2018). Currently, the deaths for the WPOs stand at 13.5% of the total workforce annually. The loss in the number of trained WPOs has lessened MOTA's capacity to conserve Zambia's wildlife and promote tourism (Ministry of Tourism, 2018). WPOs are gone from their families for two to three months at a time to patrol their areas and may engage in sexual activity with several partners, including WPOs from the opposite sex. The high mortality rate due primarily to HIV/AIDS affects MOTA staff recruitment and is a costly process. MOTA is seeking to implement a workplace wellness and HIV/AIDS policy to protect the health of and retain the remaining workforce. This study was initiated by Innovatus Zambia, an evidence-based management consulting company that collaborates with universi-

ties and other organizations to deliver results to governments and private companies (Innovatus, 2020). The health issues of the WPOs were identified in detail in a document from MOTA to Innovatus Zambia. Innovatus will incorporate the results of this study and provide recommendations to MOTA. This research will serve as a guide for evidence-based research on a workplace wellness program relating to the treatment and prevention of HIV/AIDS and other communicable and non-communicable diseases and viruses, addiction and mental health support, and education that encourages healthy lifestyle choices and disease prevention measures.

The Ministry of Tourism and Arts in Zambia

The Ministry of Tourism and Arts (MOTA) provides industry stakeholders, visitors, students, media, and the public with information to make informed decisions relating to tourism in Zambia (Ministry of Tourism and Arts: A smart and value-centered public service, 2019). According to the Ministry of Tourism (2018), the overall goal of MOTA is to use Zambia's natural and cultural resources as a tourism driver to increase economic growth for the country. As a line directorate under MOTA, the Department of National Parks and Wildlife (DNPW) integrates wildlife policy with economic, environmental, and social policies improving

the quality of life within the country's existing communities through five primary objectives:

the quality of life within the country's existing communities through five primary objectives:

- protect and conserve Zambia's wildlife and improve the quality of the life among communities in the wildlife estates,
- maintain a sustainable biodiversity in national parks and game management areas,
- reverse the decline in wildlife resources,
- improve wildlife resource management to secure a sustainable flow of benefits from the resources, and
- improve the wildlife resource base investment in cooperation with the private sector and local communities (Department of National Parks and Wildlife, Who We Are, 2020).

The natural resources of Zambia provide the country with a strong competitive position in Sub-Saharan Africa. Wildlife covers 31% of the country's land mass and includes 20 National Parks, 36 Game Management Areas, and eight wetland sites (Ministry of Tourism, 2018). A graphical presentation of the National Parks and Game Management Areas is shown in Figure 1. Zambia has more lakes, rivers, and large bodies of water than any other country in the region.

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Figure 1: Zambian National Parks and Game Management Areas

Note. The map of the national parks shows the areas protected by the wildlife police officers. Taken from Zambia Tourism, 2020 (<https://www.zambiatourism.com/destinations/national-parks/>). In the public domain.

These bodies of water have unique biospheres that sustain Africa's fauna and flora and inspire unique cultural traditions allowing Zambia the ability to offer a better variety of natural and cultural experiences than other tourist destinations in the region (Acorn Tourism Consulting, Ltd. 2018). The natural resources of Zambia account for 80 percent of all tourism activity providing the country with a travel and tourism competitiveness ranking of 41 out of 140 nations analyzed in the World Economic Forum (2019). The country's natural resources provide a significant contribution to the country's economy. Travel and tourism contributed \$1.046 billion (United States dollars) to the national economy in 2018 and provided 318,000 jobs (African Travel & Tourism Association, 2019), thereby making it a critical industry for the country.

Wildlife trafficking and illegal poaching of elephants, rhinos, and other rare wildlife threatens Zambia's

biosphere and the tourism industry. Wildlife Police Officers (WPOs), also called rangers or troopers, are employees of the Zambian government. The officers are responsible for wildlife law enforcement and are a key resource for the daily protection of wildlife and the reduction of illegal wildlife poaching in Zambia. WPOs also serve an important role as community educators on conservation. According to the Frankfurt Zoological Society (<https://fzs.org/en/>), community members do not understand the tangible benefits of wildlife conservation efforts. Many people who live in the city are not aware of the effort required to maintain the wildlife upon which the country depends. This lack of understanding prevents the communities from reporting illegal poaching activities. WPOs operate within the communities and along with their direct role of preventing and catching illegal trafficking and poaching, they can educate and share the benefits of wildlife conser-

vation and encourage the community to participate in anti-poaching enforcement.

Without enough anti-poaching enforcement, the country is ripe for criminal activity that negatively affects the environment and the economy. As indicated by Travel and Tourism Competitive Rankings of 2019 (World Economic Forum, 2019), both the lack of safety and security and the lack of health and hygiene affect the tourism in Zambia. WPOs face danger daily from confronting armed and dangerous poachers to rescuing animals that are wounded or trapped due to unsuccessful poaching attempts. They may have to walk through crocodile infested waters or use paramilitary tactics to locate and arrest poachers. Once arrested, and if found guilty, the seriousness of the offenses against wildlife are demonstrated through the punishment. Unlawful possession of wildlife meat, skins, or ivory can result in a five-year prison sentence with hard labor.

The WPOs are the predominant monitors and enforcers of the wildlife protection laws, and without an adequate number of these wildlife rangers, it is extremely difficult to monitor the 36 different game management areas spread across the country. The total number of WPOs is approximately 2000 split into eight assigned areas. For example, there are only 200 WPOs assigned to patrol a park of 3500 square miles (Tembo, 2020). The work of the ranger takes them away from their homes for long periods, leading some to engage in unhealthy behaviors, including sexual behaviors leading to the spread of HIV/AIDS. As a result, the absentee rate, attrition rate, and mortality rate of the WPOs is high, averaging around 13% over the last five years (2015-2019). Additionally, the bureaucracy associated with hiring and the training of replacement WPOs can be extremely challenging. WPOs in Zambia must pass extremely tough paramilitary training, including retaliation methods if attacked, and many do not make it through. Once the WPOs complete training, the challenges and dangers of the job begin, sometimes ending with the loss of life. In March of 2020, while interrogating suspects, three WPOs were ambushed and all received gunshot wounds, resulting in the death of one WPO (Department of National Parks and Wildlife, 2020). In addition to the dangers of the environment and the job itself, the WPO attrition and mortality due to unhealthy behaviors is plaguing an already challenged workforce. The current research will support MOTA as they are in the process of implementing a workplace wellness policy focused on improving the health of their WPOs such that those who can be hired and trained remain healthy.

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Theory of Planned Behavior

The purpose of this case study is to use an evidence-based approach to research and recommend the components of a health and wellness program for the workplace that will reduce the high mortality and attrition rate and allow the organization to maintain a qualified workforce of uniformed wildlife policy officers. A case study is the most appropriate method for investigating MOTA's problem as it uses a real-life context to understand concepts, constructs, and dynamics within an organization to inform a descriptive or explanatory question (Yin, 2012).

According to Yin (2012), there are three primary steps in approaching a case study: (a) defining the case; (b) selecting a case study design; and (c) implementing theory. A case is usually defined as a discrete entity and this team of researchers were mindful to articulate the boundaries within which we worked to be clear on what elements should be included in understanding the case and what elements were outside our scope. A case study design can center on just one case or can comprise multiple cases. This case study design focused on one holistic unit of analysis. As a lens for understanding the problem, theory can be used in several different ways in case study research. In this case study, theory provided a framework to define, organize, and make sense of concepts and dynamics that emerged from study-

ing the case.

The Theory of Planned Behavior was selected as the theoretical lens through which to study the organizational problem faced by MOTA. The theory of planned behavior developed by Ajzen (1985) postulates that a person's intention regarding a behavior depends on the person's control of the factors surrounding the behavior. The theory considers the person's positive or negative attitude toward the behavior, how likely they are to carry out the behavior, whether others are likely to approve or disapprove of the behavior, and the individual's belief about their control over the behavior. The theory advances that people make logical reasoned decisions to engage in a behavior based on their overall evaluation of the behavior (Ryan & Carr, 2010). Traditionally, the theory has been used to develop and/guide programs that shape behavior, and there are several examples of its use in the literature.

In a study titled *Using the Theory of Planned Behavior to determine the condom use behavior among college students*, Asare (2015) found that the application of the theory of planned behavior was successful in

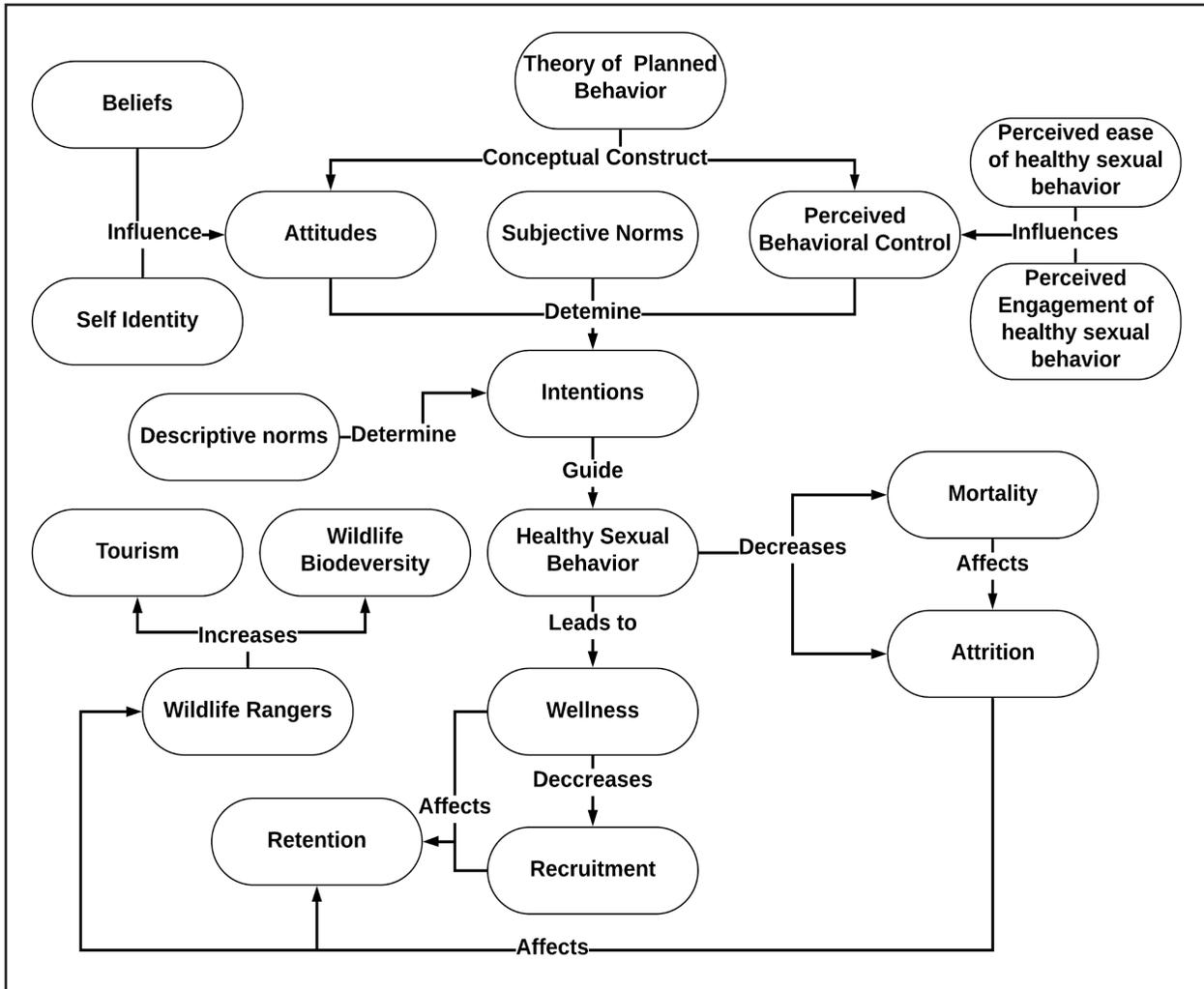


Figure 2: The theoretical concept model is depicting the problem based on the theory of planned behavior

increasing condom use by as much as 15%. Similarly, in their study *Predicting intention to use evidence-based management among U.S. healthcare administrators: An application of the theory of planned behavior and structural equation modeling*, Guo, Berkshire, Lawrence, Fulton and Hermanson (2019) found the theory of planned behavior to be a useful theoretical model for predicting a healthcare leader's intention to engage in evidence-based behaviors. Based on the evidence presented in these and other articles, the theory of planned behavior was selected on the premise that (a) wellness consists of healthy behavior; (b) engagement in healthy behavior will mitigate the spread and transmission of HIV/AIDS, and other conditions, among WPOs; (c) a decline of HIV/AIDS, and other conditions, will decrease the mortality rate and staff attrition among WPOs thereby decreasing the need for recruitment and retention strategies; and (d) an increase in healthy rangers will support MOTAs objectives of sustaining wildlife and increasing tourism. A conceptual repre-

sentation of the theory of planned behavior and the problems at MOTA is shown in Figure 2.

Organizational Assessment

An overall organizational assessment of MOTA was performed to identify how and where the role of the WPOs affects the organization. A SWOT (strengths, weaknesses, opportunities, and threats) analysis of MOTA was used to identify the impact of WPO wellness and the tourism industry improvements that can assist Zambia in fulfilling the long-term objective of becoming a prosperous middle-income country (Ministry of Tourism, 2018).

Organizations can conduct a SWOT analysis for an entire organization, or a component, that provides a structured method to capture new opportunities and threats in its thinking and planning to evaluate a competitive strategy (Coman & Ronen, 2009). A SWOT analysis was used to analyze MOTA's overall strengths, weaknesses, opportunities, and threats.

<p>Strengths</p> <ul style="list-style-type: none"> • Un-crowded and authentic parks • Variety and density of wildlife and interesting cultural traditions • Innovative conservation management partnerships • Hospitality and tourism training facilities • Well known and promoted safari destinations with high quality safari guiding • Good water quality and main road network • Wildlife policies and legislation • Well-functioning nature and heritage conservation services 	<p>Weaknesses</p> <ul style="list-style-type: none"> • Many parks depleted of wildlife due to illegal poaching • Health and sustainment of the Wildlife Protection Officers • Lacking visitor amenities and signage in many unprotected areas • Protected areas difficult to reach, cultural tourism experiences not easily bookable • Immigration and visa access expensive and not conducive to tourism growth • Gap between affordable and high-end accommodation facilities • Limited air transport, ground handling, touring services and tourist entertainment • Limited public-private sector trust and partnerships • Fragmented planning and poor implementation of plans • Cost of doing business (taxes, infrastructure, etc.) and inadequate government tourism funding
<p>Opportunities</p> <ul style="list-style-type: none"> • Expansion in and around many protected areas • Various sites set aside for tourism development in national parks • Central location in Africa and a variety of entry points • Range of accommodation price and quality • Banking services improving • Introduction of a dedicated tourism levy and bespoke tourism fund for future tourism development • Developing an HIV/AIDS and wellness workplace policy • Conducting massive recruitment efforts to replace staff 	<p>Threats</p> <ul style="list-style-type: none"> • Poaching, overfishing, deforestation, vandalizing of heritage • Hydroelectric power and dams disturbing river systems • Photographic and hunting tourism conflict • Human-wildlife conflict increasing • Tourism training supply not in tune with industry needs and standards • Limited travel awareness and participation among Zambians • Perceptions of Zambia being expensive • Low leisure tourism volumes and poor economies • Poor and seasonal road infrastructure in and around main tourists' sites and protected areas • Tourism capacity, lack of understanding at the local government level • Bureaucracy and over-regulation of tourism • Workforce is highly vulnerable to HIV/AIDS pandemic • Experiencing a reduction of qualified employees due to high levels of turnover through death • High death rate has affected staff replacement as it is a costly process

Figure 3: SWOT analysis for Zambia's Ministry of Tourism and Arts (MOTA)

The SWOT analysis depicted in Figure 3 identifies key drivers of Zambia's competitiveness, including resources, demand conditions, support services, and industry structure and governance. Using the results of the SWOT analysis can help MOTA develop strategy because it provides the information needed to

make decisions about where the organization should be going, where it should dedicate its resources and energies, and how it can best fulfill its mission and vision (SWOT analysis, 2009). Currently, the health and attrition of WPOs are a significant weakness for the organization which results in the threat of the

Methodology

Systematic reviews have become fundamental to evidence-based practice and represent a key methodology for locating, appraising, synthesizing, and reporting the best evidence (Briner, Denyer, & Rousseau, 2009). A systematic search was performed using the following databases: (a) ABI/Inform, (b) Academic Search Ultimate, (c) CINAHL, (d) EBSCO-Business complete, and (e) UMGC One Search (a compilation of 49 library databases). Databases were selected based on their capacity for empirical evidence centered around leadership, HIV/AIDS, and wellness workplace programs and policies. A total of 11 search strings were applied to each of the databases, and a total of 29 articles were selected according to the inclusion and exclusion criteria established. The following parameters were extracted from each of the selected 29 articles: author and date of publication, sector/population, study design, sample size, measures, main findings, effect size, limitations, and level (Barends, Rosseau, & Briner, 2017). In this case study, the Transparency, Accuracy, Purposivity, Utility, Propriety, Accessibility, and Specificity (TAPUPAS) tool developed by Pawson et al. (2003) was selected to ensure an acceptable level of relevance and quality were met. Each of the articles included in this study was scored using the seven TAPUPAS criteria that were totaled and translated to quality ratings of High (H), Medium (M), or Low (L). One article, by Kumar, McCalla, and Lybeck (2009), was scored as Low quality but was retained for the analysis based on its relevance to the research question. All 29 articles were viewed as being relevant and of sufficient quality to be included in the synthesis. Coding and analysis of the articles was performed in two cycles. The first cycle resulted in the creation of descriptive themes that summarized the main findings. In contrast, the second cycle of coding allowed the researchers to generate analytical themes that took the synthesis to a deeper level and generated ideas that may not be explicated in any one article but emerged as a common theme across the body of evidence (Gough et al., 2012). See Table 1 for the analytical themes and findings extracted from the 29 articles. Recommendations for managers as well as an implementation plan and risks resulted from the body of evidence and are included in the Findings and Discussion.

wildlife and other natural resources being poached or endangered in some way. It is critical for MOTAs to be able to retain their WPOs and keep them healthy as they contribute to many of the strengths and opportunities identified within the SWOT.

Findings and Discussion

This research used a thematic analysis which allows the researcher to look across the body of evidence to find themes that can develop empirical evidence reflective of MOTAs desired wellness plan. Coding of the literature was performed in two cycles at the end of which findings were grouped into five primary themes to synthesize the research findings: a) effective workplace wellness program components, employee participation, the benefits of a workplace wellness program, active leadership and management commitment, and the influence of stigma and discrimination. Table 1 shows select findings mapped to the five themes.

Themes and Recommendations

MOTA should address several elements as they seek to mitigate the challenge of maintaining a qualified workforce of uniformed WPOs resulting from high mortality and attrition rates among personnel and constraints that delay, or eliminate, the recruitment and hiring of new officers. This challenge is reflected in the weaknesses and threats identified in the organizational analysis and negatively affects the organization's ability to deliver the tourism experience that the country is dependent upon for its economic survival. This systematic review was done with the goal of providing MOTA with insights into addressing the problem through key findings in the literature regarding a workplace wellness policy for the WPOs. The body of evidence suggests: (a) components of an effective workplace wellness and HIV/AIDS program must be comprehensive and should span across the program from development to evaluation; (b) employees must participate for a wellness workplace policy to be successful; (c) wellness programs have a positive correlation with job satisfaction and job performance and a negative correlation with absenteeism and employee turnover; (d) a successful wellness workplace program requires management support, and (e) stigma is a significant barrier to successful workplace wellness programs. Based on the evidence-based research from this study, five recommendations emerged aligned with the analytical themes.

Theme 1: Components of an effective wellness workplace and HIV/AIDS program include:

program design – ensures all employee health needs are met and that managers and leaders of the organization support the program.

program growth - eliminates participation barriers and provides effective communication, access, and confidentiality to employees.

disease management and prevention - provides prevention and management of HIV/AIDS as well as other diseases and mental health issues.

Table 1: Analytical Themes Extracted from the Articles in the Synthesis

Theme	Findings from the Literature	Example References
<p>Workplace Wellness Program Components Components of an effective workplace wellness and HIV/AIDS program can be summarized into four categories: program design, program growth, disease management and prevention, and program evaluation.</p>	<p>The development process will require an investment of time for planning, gathering input from employees, and understanding the culture and work environment.</p> <p>Wellness policies often fail because they are often formed quickly and randomly without the employee's needs being fully understood.</p> <p>The key to a successful health program is to assess specific health needs and useful health benefits during the developmental phase.</p>	<p>Rojatz, Merchant, & Nitsch, 2018</p> <p>Milano, 2007</p> <p>Chigumete, Townsend, & Srinivas, 2017</p>
<p>Employee Participation Employee participation is crucial for success.</p>	<p>The key to a successful health promotion process is to engage employees during the developmental phase to assess specific health needs and useful health benefits.</p> <p>The major challenge of a wellness program is to communicate its benefits and get employees to participate.</p> <p>Employees with riskier behavior are less likely to participate in a wellness program.</p> <p>Nurses in South Africa thought that a workplace wellness program was very important yet wasn't adequately promoted or encouraged by management.</p> <p>A healthy workforce is a key contributor to increasing workplace productivity and efficiency.</p> <p>Use health risk assessments to identify employee health issues prior to developing a wellness program.</p>	<p>Chigumete, Townsend, & Srinivas, 2017</p> <p>Wipfli et al., 2018</p> <p>Anderson & Louw-Potgieter, 2012</p> <p>Basson & Roets, 2013</p> <p>Chigumete, Townsend, & Srinivas, 2017</p> <p>Milano, 2007</p>

program evaluation - collects program data and provides independent monitoring to evaluate success and adequate return on investment.

Applying the above components to a wellness policy captures key goals at each stage of the development process. The development process will require an investment of time for planning, gathering input from employees, and understanding the culture and work environment (Rojatz, Merchant, & Nitsch, 2018). Wellness policies often fail because they are often formed quickly and randomly without the employee's needs being fully understood (Milano, 2007), and lack leadership support (Ledikwe et al., 2017). The wellness workplace program elements, as shown in Table 2, identify the specific subcategories of each of the four essential components.

Recommendation: Encourage stakeholder involvement from the beginning of the development process.

Involving stakeholders will ensure that valuable input, guidance, resources, and perspectives are incorporated into all stages of the wellness program development

and implementation. Stakeholders can serve as an advisory panel, assisting with identifying required goals and strategies and interpreting findings to support the program. Stakeholders can include wildlife experts that can offer safety training for the WPOs as they interact with local fauna, healthcare experts that can offer seminars and taped health and first aid instructions that can be viewed periodically and privately, and other local organizations that can provide education and training on healthy living, nutritional health, safe sex, mental health, and domestic violence. A comprehensive wellness policy and wellness program establishes and endorses the subjective norms of health and wellness behaviors for the organization and will support a cultural change at MOTA.

Theme 2: Employee participation is crucial for success.

According to Chigumete, Townsend, and Srinivas (2017), the key to a successful health promotion process is to engage employees during the developmental phase to assess specific health needs and useful health benefits. Wipfli et al. (2018) found that the major challenge of a wellness program is to com-

Table 1: Analytical Themes Extracted from the Articles in the Synthesis (continued)

<p>Benefits of an Effective Wellness Program</p> <p>If well developed, wellness programs can be used to build a health culture in the organization in addition to retaining employees and helping organizations gain a competitive advantage.</p>	<p>Wellness programs had a positive correlation with job satisfaction and performance and a negative correlation with absenteeism and employee turnover.</p> <p>Wellness programs benefit the employee and employer through increased productivity, staff retention, staff morale and loyalty, and reduced absenteeism.</p> <p>Wellness programs increased job satisfaction and performance, and decreased absenteeism and employee turnover.</p> <p>Wellness programs were positively correlated to three dimensions of employee well-being: subjective well-being, work well-being and psychological well-being.</p> <p>Improving job performance and engaging in wellness programs were also found to mitigate high risk behaviors.</p> <p>A healthy and motivated workforce is a critical organizational element for competitive success in the global market.</p> <p>Wellness programs can also focus on providing information on healthy habits, healthy eating and physical exercise to also increase employee job performance.</p> <p>Little empirical evidence exists to support the benefits of wellness programs, yet most employers are following best practice guidelines for health and well-being of their workforce.</p> <p>Workplace wellness programs may discriminate on employees with health issues and invade on employees' privacy if not balanced with the needs and desires of the employees.</p>	<p>Pink-Harper & Rauhaus, 2017</p> <p>Dickson-Swift, Fox, Marshall, Welch, & Willis, 2014</p> <p>Abdullah & Lee, 2013; Benavides & David, 2010</p> <p>Page & Vella-Brodrick, 2013</p> <p>DeGroot & Kiker, 2003</p> <p>Meyer-Weitz, Baasner-Weihs, & Weihs, 2015</p> <p>Kumar, McCalla, & Lybeck, 2009</p> <p>Zula, 2014</p> <p>Madison, 2016</p>
<p>Active Leadership and Commitment by Management</p> <p>Management input and support is an important part of a successful workplace wellness policy.</p>	<p>Managers must decide which stakeholders should be included, establish the services, promote participation, and then monitor the results.</p> <p>When wellness programs were administered by third parties, they were less effective.</p> <p>In a study of 128 mostly private organizations in Zambia, 47 had wellness policies in place but management participation in health programs was limited.</p> <p>One of the major challenges of a workplace wellness policy is promoting participation and a continued engagement in the program such that health behaviors can be changed and sustained.</p> <p>Wellness policies often fail because they lack leadership support.</p> <p>Organizational leadership should actively participate in the development, execution, promotion, and maintenance of a wellness policy.</p>	<p>Worley et al., 2009</p> <p>Pettinico, Milne, & Miller, 2020</p> <p>Chatora, Chibanda, Kampata, & Wilbroad, 2018</p> <p>Wipfli et al., 2018</p> <p>Ledikwe et al., 2017</p> <p>Ledikwe et al., 2017; Setswe, 2009, Whelan, Dickinson, & Murray, 2008</p>

municate its benefits and get employees to participate. An unfortunately, those with riskier behavior are less likely to participate in a wellness program (Anderson & Louw-Potgieter, 2012). Participation may even be an issue for health professionals, as Basson and Roets (2013) reported that nurses in South Africa thought a workplace wellness program was very important yet wasn't adequately promoted

or encouraged by management and therefore there was not much participation. Employees' health needs may vary between individuals and organizations, so it is important to understand that one wellness workplace program will not fit the needs of all organizations or all employees. Communicable and non-communicable diseases can be related and lead to other conditions which lead to increased

Table 1: Analytical Themes Extracted from the Articles in the Synthesis (continued)

<p>Stigma and Discrimination</p> <p>The stigma and discrimination surrounding HIV/AIDS is a major obstacle to success of a wellness program.</p>	<p>The stigma and discrimination surrounding HIV/AIDS is not only contrary to human rights but also represents a major obstacle to a successful workplace wellness program.</p> <p>The fear of rejection, shame, and discrimination undermines efforts to promote behavior change, inhibits people from using voluntary counseling and testing services, and prevents people from seeking care for opportunistic infections.</p> <p>Countering stigma should be an objective of wellness workplace programs.</p> <p>Communicating the facts of HIV/AIDS can reduce the stigma and discrimination associated with the disease.</p>	<p>Ledikwe et al., 2017; Mahajan et al., 2007; Mall et al., 2013; Naude, 2008; Sestwe, 2009</p> <p>Setswe, 2009</p> <p>Mahajan et al., 2007</p> <p>Chamrathirong, Ford, Punpuing, & Prasartkul, 2017; Kiragu, Nyumbu, Ngulube, Njobvu, & Mwaiba, 2008</p>
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employee absenteeism and increased work inefficiencies. An unhealthy workforce requires sick days and takes more time to complete work tasks due to fatigue, thereby increasing costs to organizations. Chigumete, Townsend, and Srinivas also reported that a healthy workforce is a key contributor to increasing workplace productivity and efficiency. Milano (2007) suggested using health risk assessments to identify employee health issues before developing a wellness program so that programs could be tailored to employee needs. These health assessments should be done in coordination with employees to identify a range of employee issues such as weight

loss and nutrition advice, cholesterol screenings, depression, and domestic violence. Utilizing employee input to target high risk behaviors serves as a gateway towards empowerment. The empowerment of employees supports their capacity to serve as experts on their healthcare needs. Helping employees achieve enough self-efficacy to exercise behaviors such as condom use, smoking cessation, and improved diet and exercise will lower the disease sequence of events, lower absenteeism, and increase work efficiency. Figure 4 shows the possible flow of communicable and non-communicable disease sequence of events.

Table 2: Four Essential Components of a Workplace Wellness Program

Program design	Program growth	Disease management and prevention	Program evaluation
Initial financial investment	Convenient access	HIV/AIDS	Track return on investment
Employee input	Communication of benefits	Substance abuse	Data collection
Cultural sensitivity	Partner with outside organizations	Noncommunicable diseases	Data evaluation
Management support	Education, awareness and training	Mental health	Formal policy
Leadership that promotes health	Confidentiality	Care and support	
Environment that promotes health	Voluntary counseling and testing	Women's health	
	No participation barriers		

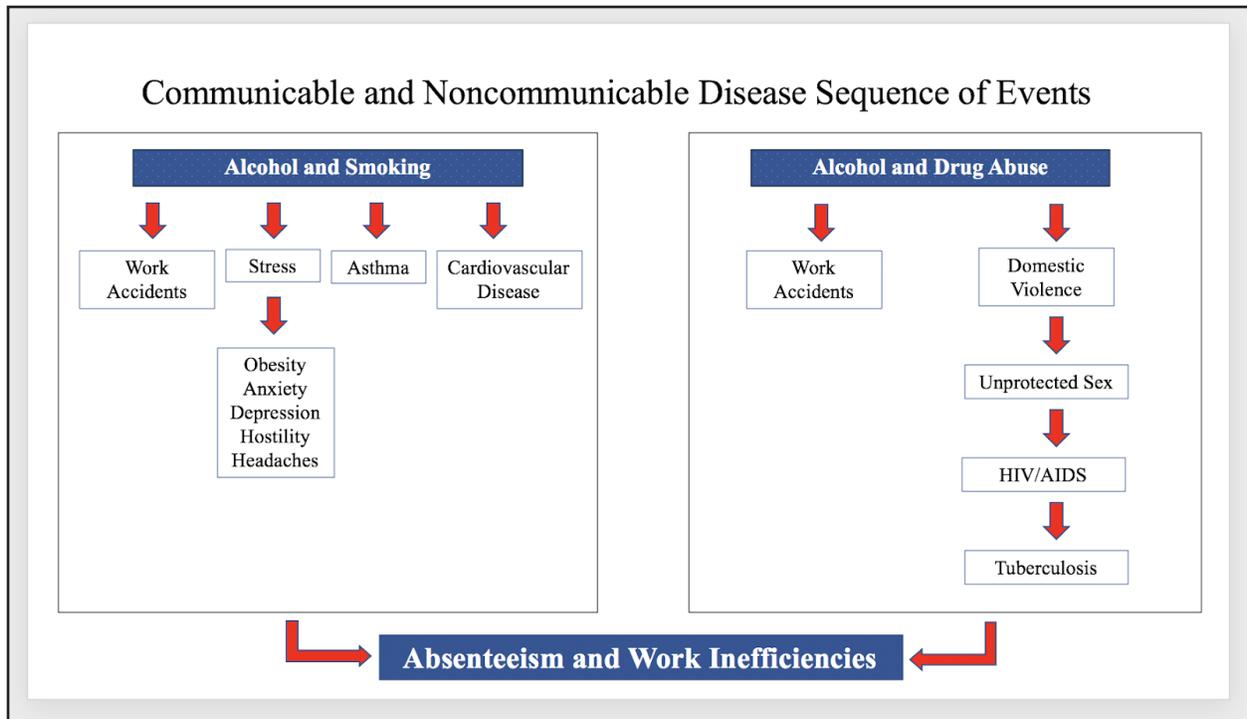


Figure 4: Disease Sequence of Events

Recommendation: Develop a forum focused on employee health needs, encouragement, and participation in the wellness program.

The key to a successful health promotion process is to engage employees during the development phase to assess specific health needs and useful health benefits. Employees that are informed of the benefits available will be more likely to utilize the benefits. Employees that positively benefit from the wellness program can serve in a corporate outreach role that encourages their peers to also seek the benefits offered in the wellness program. Self-efficacy beliefs can be enhanced by providing employees a voice in their health treatment and benefits and influence their participation in the program.

Theme 3: Several benefits can result from an effective wellness program.

Pink-Harper and Rauhaus (2017) found that wellness programs positively correlated with job satisfaction and performance and negatively correlated with absenteeism and employee turnover. Dickson-Swift, Fox, Marshall, Welch, and Willis (2014) reported that wellness programs benefit the employee and employer through increased productivity, staff retention, staff morale, loyalty, and reduced absenteeism. The research found in the remaining articles agreed that wellness programs increased job satisfaction and performance and decreased absenteeism and employee turnover (Abdullah & Lee, 2013; Benavides & David, 2010). Page and Vella-Brodrick

(2013) found that wellness programs were positively correlated to three dimensions of employee well-being; subjective wellbeing, work wellbeing, and psychological wellbeing. In addition to improving job performance, wellness programs were also found to mitigate high-risk behaviors (DeGroot & Kiker, 2003). Meyer-Weitz, Baasner-Weihs, and Weihs (2015) stated that a healthy and motivated workforce is a critical organizational element for competitive success in the global market. Wellness programs can also focus on providing information on healthy habits, healthy eating, and physical exercise to increase employee job performance (Kumar, McCalla, & Lybeck, 2009). The sum of benefits associated with wellness programs endorses the value of the programs. Zula (2014) found that little empirical evidence exists to support the benefits of wellness programs yet found that most employers are following best practice guidelines for the health and well-being of their workforce. However, workplace wellness programs may discriminate against employees with health issues and invade employees' privacy if not balanced with the needs and desires of the employees (Madison, 2016). If well developed, wellness programs can support a new set of social norms for the organization and the WPOs to build a health-focused culture in the organization. In building a health-focused culture, organizations can remove barriers impeding behaviors such as the lack of condom use and mitigate noncompliance with programs such as smoking cessation, substance abuse, and mental health. Increased focus on the benefits

associated with the outcomes of wellness programs and how they contribute to employee wellbeing and retention will help reinforce employee motivation. Providing information on the benefits can change beliefs and attitudes that provide a motivation to comply with the program.

Recommendation: Implement a workplace wellness program and ensure that benefits are communicated effectively.

To be successful, members need to know about the available benefits and how to access them. Research indicates that wellness programs have low participation due to logistical issues with obtaining services, employees unaware of benefits available, participation messages that are too generic, low motivation for behavioral change, time not available for participation, and cultural insensitivities within the program. Making the benefits easy to use and understand will motivate the WPOs to participate and increase the outcome benefits of the wellness program.

Theme 4: Active leadership and commitment by management is critical.

Management input and support is an integral part of a successful workplace wellness policy. Managers must decide which stakeholders should be included, establish the services, promote participation, and monitor the results (Worley et al., 2009). When third parties administered wellness programs, they were less effective (Pettinico, Milne, & Miller, 2020). A study by Chatora, Chibanda, Kampata, and Wilbroad (2018) of 128 mostly private organizations in Zambia found that 47 had wellness policies in place, but management participation in health programs was limited. One of the significant challenges of a workplace wellness policy is promoting participation and continued engagement in the program such that health behaviors can be changed and sustained (Wipfli et al., 2018). Therefore, organizational leadership should actively participate in the development, execution, promotion, and maintenance of a wellness program (Ledikwe et al., 2017; Setswe, 2009; Whelan, Dickinson, & Murray, 2008). Jiménez, Winkler, and Dunkl (2015) summarized the leader's role, "Leaders are able to influence their surroundings with their attitude and behavior. They are viewed as organizational role models and are able to set the working conditions for their employees" (p. 2445).

Recommendation: Provide leadership training that promotes the importance of management com-

mitment and support in the workplace wellness program.

All levels of management at MOTA should acknowledge the seriousness of the HIV/AIDS epidemic, the significant impact on the workforce, and the importance of leadership involvement and promotion in implementing a wellness program. Management at MOTA should respond with compassion and understanding of the HIV/AIDS challenges in the workplace. Training managers will provide a deeper knowledge of HIV/AIDS and how to manage the impact of the disease in the workplace. The training should cover knowledge, skills, and attitudes to ensure successful implementation of the wellness program. Active leadership, and commitment by management, should be considered an essential component of the wellness program. Leaders can role-model healthy behaviors and help employees create new normative beliefs regarding healthy behaviors. Leadership involvement also provides the WPOs with additional motivation to participate in and comply with a health and wellness program.

Theme 5: Stigma and discrimination represent a major obstacle.

The stigma and discrimination surrounding HIV/AIDS represents a significant obstacle to a successful workplace wellness program

The stigma and discrimination surrounding HIV/AIDS is not only contrary to human rights but also represents a significant obstacle to a successful workplace wellness program (Ledikwe et al., 2017; Mahajan et al.,

2007; Mall et al., 2013; Naude, 2008; Sestwe, 2009). The fear of rejection, shame, and discrimination undermines efforts to promote behavior change, inhibits people from using voluntary counseling and testing services, and prevents people from seeking care for opportunistic infections (Setswe, 2009). The key to eliminating stigma and discrimination is through education. HIV/AIDS is no longer a death sentence now that treatments can allow the HIV/AIDS patient to live a full and complete life. Communicating the facts of HIV/AIDS can reduce the stigma and discrimination associated with the disease (Chamrathirong, Ford, Punpuing, & Prasartkul, 2017; Kiragu, Nyumbu, Ngulube, Njobvu, & Mwaba, 2008). Countering stigma should be an objective of workplace wellness programs (Mahajan et al., 2007). Wellness programs can achieve this through management of normative and control beliefs regarding high-risk behaviors. Through the development of a culture that is accepting and inviting of employees diagnosed with HIV/AIDS, wellness programs can curb the degree of discrimination experienced by employees diagnosed with HIV/AIDS. Reducing the perceived external barrier of discrimination will fa-

cilitate the ability to teach employees about behaviors such as condom use and the seeking of treatment.

Recommendation: Form a wellness workplace committee to build trust and tackle stigma.

Results indicate that having a dedicated workplace wellness program committee and management support facilitates the implementation of the components in the workplace wellness program (Ledikwe et al., 2017; Setswe, 2009). It is essential to involve several stakeholders, including occupational health services and medical experts as early as possible to build trust and to tackle stigma and discrimination. Forming a committee involving all parties sends a clear signal that the initiatives undertaken are trustworthy and intended to support all WPOs as well as other employees. Removing the barriers of the stigma of those having HIV/AIDS, their family members or their coworkers can reduce the negative beliefs standing in the way of education prevention efforts and getting treatment for those with the disease. A workplace environment that does not tolerate discrimination against employees and openly supports HIV/AIDS prevention efforts will help reduce the stigma surrounding the disease.

Implications for Practice

A quality workplace wellness and HIV/AIDS program can benefit MOTA and the tourism industry of Zambia. Providing and promoting a comprehensive wellness program to the WPOs can reduce the morbidity of the staff and extend their career life spans, saving the resources required to train and replace new officers. The WPOs can serve as role models within the communities they serve with the goal of educating and promoting healthy sexual and lifestyle behaviors. The successful workplace wellness program can also be adapted to fulfill the needs of other organizations, further expanding the promotion of healthy living and providing staff longevity benefits to other areas within the MOTA.

The wellness program can be a behavior-driven initiative designed to prevent the occurrence of high-risk behaviors synonymous with HIV/AIDS, promote healthy sexual practices, and prevent and manage other communicable and non-communicable diseases. The program can also provide mental health benefits, support for those with addiction and physical abuse; and education for healthy lifestyle promotion. MOTA can improve employee behaviors

by highlighting the benefits of healthy living and removing the barriers. Organizations can display posters as a method of communicating the consequences of unhealthy living, provide taped educational materials to employees that can be accessed at their leisure, provide incentives and rewards for positive behavior changes, and promote health challenges and goals between employees to encourage participation and team building.

In tackling stigma, organizations should provide information on HIV stigma and opportunities to discuss stigma with peers. More than merely providing information, management can provide workshop-based activities that teach employees and other stakeholders to recognize and challenge stigma. Lastly, counseling and support for people living with HIV/AIDS can help them recognize and deal with self-stigma and to build resilience to experiences and perceptions of stigma.

The establishment of employee-centric policies will increase job satisfaction among WPOs, serve as a recruitment and retention strategy, decrease the incidence of HIV/AIDS and other communicable and non-communicable diseases, which in turn will reduce absenteeism and the rate of mortality among WPOs and other employees involved in the workplace wellness program. By achieving these results, MOTA can sustain the number of healthy WPOs needed for wildlife tourism, while also supporting staff retention and efficiency of other components of the organization.

Providing knowledge of and guidance for the benefits of healthy living can improve the quality of life of employees and community members and promote a positive image contributing to the growth of tourism and the economy of Zambia.

Proposed Implementation Plan

An implementation strategy was established to reflect constructs central to the Theory of Planned Behavior. The strategy consists of six steps.

- 1. Readiness assessment.** During the readiness assessment, leaders are to assess employee perceptions and beliefs about high-risk behaviors, HIV/AIDS, wellness, and the implementation of a workplace wellness and HIV/AIDS program (Guo et al., 2019). Leaders should also assess employee perceptions and beliefs on communicable and non-communicable diseases, mental health, substance abuse, domestic violence, and overall healthy living lifestyles. The readiness assessment corresponds with the construct of *atti-*

tude in the theory of planned behavior.

2. **Employee education.** During education, employees will learn about HIV/AIDS transmission, signs and symptoms, and treatment. Employees will also learn about the workplace wellness and HIV/AIDS program and the role that it will play in promoting healthy behaviors and mitigating high-risk behaviors through practices such as condom use (Asare, 2015). Employee education is reflective of *subjective norms* (Guo et al., 2019). Education will also be provided for the prevention and treatment of communicable and non-communicable diseases, mental health, substance abuse, domestic violence, and overall healthy living lifestyles.
3. **Goal setting.** Goal setting is a collaborative effort between employees and MOTA. By empowering employees to become experts on their health, healthcare needs, and goals, MOTA provides employees with ownership of those goals increasing employee *perception of control* over those goals (Guo et al., 2019). The greater the perceived control over a behavior, the greater the likelihood one is to exercise that behavior.
4. **Resource allocation.** Management must identify the funding source to implement the wellness workplace and HIV/AIDS program. The MOTA Tourism Master Plan identified a need for an increased budget and capacity for nature law enforcement and anti-poaching that could be used to address the overall shortage of WPOs in addition to covering the cost of essential training and health programs. The initial cash outlay to implement a wellness workplace program can be significant, with the return on investment being recognized on a long-term basis. Milano (2007) states that the returns can be substantial, with an average return on investment of \$3.48 recovered for every dollar spent on costs associated with health care and \$5.82 recovered for every dollar spent on absenteeism costs. During this phase, MOTA should also provide employees with the resources needed to engage in healthy behaviors and/or mitigate high-risk behaviors. Resource allocation is reflective of *perceived behavioral control* (Guo et al., 2019).
5. **Monitoring and measurement.** All stakeholders involved in the workplace wellness program should work towards the monitoring and measuring of behavioral outcomes. Monitoring will allow MOTA to make the changes necessary to the program to ensure its intended outcomes.

All stakeholders involved in the workplace wellness program should work towards the monitoring and measuring of behavioral outcomes.

Effective monitoring should be performed through data collection efforts at regular intervals. Data on participation rates, benefits accessed, successful and unsuccessful outcomes, and voluntary withdrawal from the program are examples of potential measures of individual participation. Metrics can also be beneficial in lobbying for program resources.

6. **Evaluation.** Of most significant importance to the life of the wellness program is the continued evaluation of the program over its lifespan. Evaluation of the program will ensure that the program remains a viable resource for MOTA, its employees, and stakeholders. The data points used for the monitoring and measurement can be periodically displayed via a data dashboard/performance measurement report to determine the level of program success.

Implementation Risks

Although well developed and planned, every implementation strategy is not without risks. A series of events were identified as potential risks to the successful implementation of a workplace wellness and HIV/AIDS program. Risks were categorized into three categories, low, medium, and high-risk events, with low-risk events classified as either unlikely or easy to mitigate and high-risk events being classified as detrimental to the project or

hard to mitigate.

Low risks. Low risks include a poorly designed program.

- The successful mitigation of a poorly designed program is contingent upon the early involvement of all stakeholders involved within the program and the strict and continued evaluation of the program from its inception.

Medium risks. Medium risks include restricted access to health resources, hospitals, and primary care centers resulting in an increase of staff mortality.

- The delivery of healthcare in Sub-Saharan Africa is community-based (Hollard & Sene, 2016). As such, it is important that MOTA engage or partner with external organizations and healthcare facilities to increase wildlife officer accessibility to local hospitals and clinics within the surrounding communities. Wildlife police officers are often in challenging geographical areas that are not easily accessed and have sparse healthcare capabilities.
- The development of partnerships with local hospitals and clinics will facilitate a wildlife

officer's ability to seek treatment when needed. The timely delivery of services and treatment will help reduce or delay staff mortality (Hollard & Sene, 2016).

- During the implementation phase, employee education, increased time and resources will be dedicated to (a) ensuring employee access to health resources; (b) ensuring employees have an understanding of high-risk behaviors, diseases, disease processes, and treatment options; and (c) ensuring staff can make informed decisions about their health.

High risks. High risks include low employee buy-in, inadequate leadership and management support, social and cultural differences of participants, inability to collect and evaluate program data, and the COVID-19 pandemic.

- The mitigation of low employee buy-in will be addressed during the early phases of readiness assessment and employee education. During these phases, it is essential that leaders effectively communicate the content and structure of the workplace wellness program and its intended benefits and encourage employees to have input into the process. Wildlife police officers typically attend training exercises on strategies and tactics of the job. The WPO training programs should be expanded to include a session on the importance of health and wellness for career longevity. MOTAs leadership should receive the training necessary to be leaders throughout the life of the program.
- A recent MOTA assessment identified a lack of engagement of leadership in existing HIV/AIDS programs. The mitigation of this risk is in part mitigated by sharing the results of this study with MOTA. There is an opportunity to take advantage of the many NGOs and non-profits operating in the country to address this issue as it affects the overall health and stability of families in the country.
- The challenge of social and cultural differences will require education focused on the benefits of healthy lifestyle choices. As individuals adopt these positive changes, the resulting health benefits will encourage others to change behaviors.
- To mitigate risks associated with the inability to collect and evaluate program data, it is recommended that MOTA establish strategic relationships with organizations skilled at data collection and its analysis until they can develop or hire staff to complete said functions.

- COVID-19 has disrupted the entire world. As the world continues to learn more about the pandemic, it is vital that all MOTA employees learn basic principles of how to protect themselves and remain safe. Little empirical evidence exists on the governance of an organization during a pandemic, however, it is recommended that MOTA develop strategic goals that will move employees towards a common goal until they can gain enough insight to lift the ambiguity that has become characteristic of the COVID-19 pandemic (Hannan, 2020).

Limitations and Future Research

Some relevant studies may have been missed due to the search process. Wellness programs were created as early as 1930 (Ott-Holland, Shepherd & Ryan, 2019) and have had different names such as work-family programs and employee assistance programs. Failure to recognize the different naming conventions may have limited the breath and quality of research incorporated into this study. With no wellness program standard definition, it is difficult to identify the standards applied to wellness programs and the costs associated with various organizational health programs. Future research on the types of wellness programs, general features, and program costs would help organizations to better plan and create more wellness programs.

The challenge of social and cultural differences will require education focused on the benefits of healthy lifestyle choices.

Much of the research used in this case study was from the private sector. Private companies possess more capital and resources than government agencies. This allows private companies to implement wellness programs that are more comprehensive than those offered by government agencies (DeGroot & Kiker, 2003). Some results contained within the case study are reflective of private companies and may not have the same impact when exercised by government agencies. Given these limitations, government agencies are cautioned to investigate the structure and benefits of workplace wellness programs so that they may capitalize on their implementation. Future wellness program research should be conducted on government agencies which have more bureaucratic structures, limited resources, and responsibility for answering to the public.

An emerging limitation of the case study is the paucity of literature surrounding the coronavirus (COVID-19) pandemic and its impact on the social organization. A lack of understanding of the virus has hindered the social organizations' capacity to gain the strategic insight necessary to manage its resources and employees (Hannan, 2020). Insufficient

knowledge and evidence about COVID-19 has created a degree of uncertainty about how leaders can best serve and protect their employees and decrease the negative impact of the COVID-19 pandemic on their financial solvency. Future research should take the information and lessons learned from the current pandemic and reassess future plans for a workplace wellness program in light of recent events.

Research from employers and employees in Sub-Saharan Africa was not prevalent. Studies from other countries provided insight into the elements of quality workplace wellness programs. Employers in Sub-Saharan Africa should be aware that available resources, and cultural differences, may impact the implementation of the recommendations. Given these limitations, findings from this case study should not be presented as conclusive but may contribute to fill the gap that exists in current knowledge. Future research should focus on the employees in south Africa and their working conditions.

Questions Unanswered by Research

An internal document from MOTA identified poor leadership and lack of coordination and management of existing HIV/AIDS programs. This study produced evidence supporting the need for leadership and management involvement in implementing a successful workplace wellness program but did not determine a methodology for solving leadership involvement. MOTA should conduct discussions within their leadership to determine the reasons for the lack of involvement and a resolution for the problem.

Social stigmas and cultural issues could negatively impact the success of a workplace wellness program. Employee acceptance of a workplace wellness program will be limited if participating invokes a fear of judgment that negatively distinguishes the participating employees from the nonparticipating employees and other members of the community. MOTA should encourage open discussions of stigma and cultural issues to identify an implementation plan that encourages participation as a healthy lifestyle choice and not as a barrier to social acceptance.

The success of the program will be based on participation and behavioral changes. This study identified methods of encouraging participation and behavioral changes, but behavioral changes are often hard to predict. Also, this study did not identify methods for tracking participation and behavioral changes. MOTA will need to identify a strategy for documenting these areas to evaluate program success.

Conclusions

This case study provided background information on MOTA, highlighting the organizational challenge of the negative effect HIV/AIDS has on its WPOs and provided insights by way of themes and recommendations that emerged from the evidence found from the systematic review. The findings support answering the research questions related to the components of an effective workplace wellness and HIV/AIDS program and its benefits.

The Theory of Planned Behavior was found to be instrumental during this study in developing the approach for MOTA to establish a workplace wellness program. The theory was selected on the premise that engaging in healthy behaviors will mitigate the spread and transmission of HIV/AIDS and other conditions among WPOs. A decline in HIV/AIDS and other conditions will decrease the mortality rate and staff attrition among WPOs, thus decreasing the need for recruitment and retention. Increasing healthy WPOs will support MOTAs objective in sustaining wildlife and increasing tourism.

The evidence revealed the components of an effective wellness workplace and HIV/AIDS program to reduce mortality rates, attrition, and absenteeism and improve job satisfaction and performance. The evidence also revealed the importance of

employee participation, communicating the benefits of an effective wellness program, the active leadership and commitment of management, and the importance of tackling stigma. These are key elements in influencing the personal attitudes, subjective norms, and personal control beliefs of the WPOs regarding their intention to change their health behaviors. When building a workplace wellness program, it is important that MOTA develop not only a program but create an organizational culture designed to decrease the incidence of high-risk behaviors where leaders provide the resources and support needed to facilitate the adoption and maintenance of healthy behaviors.

Therefore, MOTA should encourage stakeholder involvement from the beginning of the implementation process, develop a forum focused on employee health needs and participation in the wellness program, ensure the benefits of the workplace wellness program are communicated effectively, provide leadership training that promotes the importance of management commitment and support, and form

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a workplace wellness committee to build trust and tackle stigma.

The results of this study were forwarded to the President of Innovatus Zambia working on behalf of the MOTA. Innovatus Zambia then presented the findings of this study which were favorably received by the Permanent Secretary of MOTA, who then endorsed the implementation of a Wellness Programme. Following that endorsement, in September 2020, Innovatus Zambia briefed the President of African Parks as part of a holistic wellness program for game rangers. While the budget for the program is still being worked by the African Parks, Innovatus Zambia has begun planning for baseline health assessments of the WPOs, leadership change management training, curriculum development for the WPOs, and other elements of the Zambian WPO Wellness Programme. Furthermore, Innovatus Zambia has brought together the stakeholders across Zambia and South Africa as part of a Consortium with shared responsibilities for the implementation and monitoring of the health and wellness program.

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Review

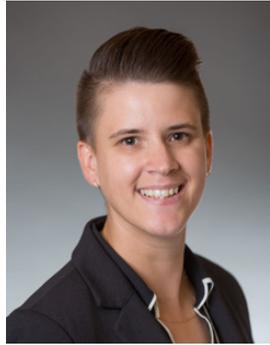
This article was accepted under the *strict peer review* option. For further details, see the descriptions at:

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