

**A STUDY OF POSTGRADUATE STUDENT
REPORTED FACTORS INFLUENCING
THEIR WELLNESS**

by

JENITA FATIMA DE SOUSA

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Supervisor: Prof H Brand

PRETORIA

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DECLARATION

I, Jenita Fatima De Sousa, declare that “A Study of Postgraduate Student Reported Factors Influencing their Wellness” is my own unaided work both in content and execution. All the resources I used in this study are cited and referred to in the reference list by means of a comprehensive referencing system. Apart from the normal guidance from my study leader, I have received no assistance, except as stated in the acknowledgements.

I declare that the content of this thesis has never been used before for any qualification at any tertiary institution.

I, Jenita Fatima De Sousa, declare that the language in this thesis was edited by Keshantha Kisten.

Jenita Fatima De Sousa

Date: 11 January 2016

Signature

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ABSTRACT

In today's world of work, working and studying simultaneously has become the norm. This has given rise to an increasing number of students who have to constantly navigate between work and studies. During the first year of postgraduate studies, students' wellness undergoes a process of degradation. These working students experience difficulty in functioning, demotivation and exhaustion. Thus, in order to manage the pressure students resort to substance use or other coping mechanisms. This confirms the need to better understand the challenges faced by postgraduate working students in respect of their wellness.

The primary objective of this study was to identify and explore the factors influencing postgraduate full-time working students' wellness by focusing on how the situation of working and studying simultaneously impacts the three aspects of wellness, namely: physical, mental and social wellness. The researcher embarked on this study from an interpretivist stance in terms of which a qualitative research strategy was employed in order to explore the experiences of postgraduate full-time working students and gain an understanding of the factors influencing their physical, mental and social wellness. A purposive sampling strategy was utilised in order to determine the nineteen postgraduate full-time working students, who constituted the sample for this research study. The data was obtained through semi-structured interviews, essays, as well as drawings and was analysed using thematic analysis.

The results of the study revealed that various factors impacted the wellness of the participants of the study. Significant factors such as a balanced lifestyle, time and task management, the nature of the job and studies, coping mechanisms, overarching emotions, mental capacity and effective functioning, attitude and motivation, as well as a support structure were identified in this study. Many of the factors were within the three domains of wellness, thus demonstrating significant links among physical, mental and social wellness. The participants also highlighted the lessons learnt from and the benefits of concurrently working and studying. Along with this, the participants indicated a need for an effective support system, more awareness concerning wellness management and the nature of the masters' course, as well as clarifying expectations from the University.

This dissertation focuses on an under researched, but important aspect of student wellness and therefore opens avenues for future research. This paper makes a contribution to the literature on postgraduate student wellness, as there is little known literature in South Africa that explores the factors influencing postgraduate working student wellness.

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A STUDY OF POSTGRADUATE STUDENT REPORTED FACTORS INFLUENCING THEIR WELLNESS

CHAPTER 1:

INTRODUCTION AND BACKGROUND

The turn of the 21st century has sparked the importance of wellness. “Wellness is a proactive and preventive approach that is designed to provide optimum levels of health, emotional and social functioning” (Todd, 2011, p. 177). It is a “dynamic process of change, as well as growth” (McKinley Health Centre, 2011, p. 1). Similarly Witmer and Sweeney (1992) indicate in Els and De la Rey (2006, p. 46) that wellness is understood as “a total person approach towards improving the quality of his or her life, health and psychological strengths in proactive and positive ways - both as member of a community and as an employee”. Mafumbate and Musingafi (2014, p. 105) state that “wellness is a state of optimal well-being that is orientated towards maximizing an individual’s potential”. Therefore, it can be assumed that it is important to value an individual’s whole being. As cited in Sterling, Von Esenwein, Tucker, Fricks and Druss (2010, p. 131) wellness includes “different lifestyles and mind-set elements like a strong sense of personal responsibility, physical fitness, good nutrition, a positive outlook, a strong interest in critical thinking and openness to new discoveries”.

All these definitions refer to wellness as being focused on an individual deciding to move towards optimal health through the choice of living a healthy, balanced life which should ultimately result in an integration of body, mind and spirit. One can presume that an individual who is well is healthy. Health can be defined as the physical, social and psychological dimensions of a person’s condition on a continuum with positive and negative poles (Travis & Ryan, 2004). Travis and Ryan (2004) further indicate that wellness is not merely the absence of disease, but also the capacity of an individual to be well.

In today’s world of work, working and studying simultaneously has become the norm. During the first year of honours and masters postgraduate studies, students’ wellness undergoes a process of degradation. The researcher is of the opinion that the majority of full-time working students experience difficulty in functioning, demotivation, as well as exhaustion and thus resort to substances as a means to cope with the pressure. Along with this, the researcher assumes that when students enter the world of work they are required to make important decisions, develop

more intense relationships and thinking becomes more abstract, conceptual, as well as future orientated. Such cognitive changes play an essential role in assisting these individuals to deal with more complex demands and during this time of transition, stressors may build up and affect their overall functioning, if they do not have the support that is so evidently required during this time (Urdang, 2010).

As a result individuals experience an increase in emotional outbursts and moodiness which in turn affects one's behaviour in relation to others. When psychological and physical transitions do not occur concurrently, individuals need to cope with the imbalance and thus the added stress (Bejerano, 2014; Dainese, Allemand, Ribeiro, Bayram, Martin & Ehler, 2011; Abdulghani, AlKanhal, Mahmoud, Ponnampuruma & Alfaris, 2011). It is due to this process of wellness degradation that the issue of student wellness should be addressed and possible solutions should be formulated. It is assumed that wellness is an important part of keeping a balanced lifestyle and there are many benefits to improving ones wellness.

While there is a variety of research concerning wellness, academic success, adolescents, students, schools and higher educational institutions, little is known about the way in which overall wellness and the factors impacting wellness contribute to university students (Hettler, 1984; Larson, 1999; Myers & Betchel, 2004; Myers & Sweeney, 2005; Shurts & Myers, 2005; Adebayo, 2008; Astin, 1993; Camera & Echternacht, 2000; Tinto, 1993; Bejerano, 2014; Nelson, Jackson, Nelson & Smith, 2010).

In addition, as far as could be determined, a study focusing specifically on postgraduate student wellness has not been undertaken before, especially among postgraduate students in the South African context. As such this has given impetus to the present study. Research strongly advocates the need for universities as well as organisations to identify, understand and support student wellness (Myers & Betchel, 2004; Myers & Sweeney, 2005; Shurts & Myers, 2005; Adebayo, 2008; Bejerano, 2014; Robotham, 2009).

The study seeks to explore the participants' experiences, the way in which they interpret factors of their working and studying environments, as well as determines how significantly they are affected, whether it is positively or negatively. In this specific study, wellness incorporates three of the seven elements that constitute the modern definition of wellness, namely: physical, mental and social wellness. Each element described in the definition of wellness is influenced by various factors such as the working environment, an individual's personality, attitude, tolerance levels, conflict, workload and organisational support.

In recent literature, wellness with regard to employees or working individuals has focused specifically on areas like stress, alcoholism, drug abuse and assistance programmes (Myers & Sweeney, 2005; Viljoen; 2006; Visser & Routledge, 2007; Mazantsana, 2013). As such this study has sought to fill a gap in the research with regard to other factors impacting the working individual's wellness. Factors such as those mentioned in the modern definition of wellness have often been overlooked in research aimed at gaining a greater understanding of the working individuals' wellness. The researcher is of the opinion that there are several factors that affect the wellness of individuals in the situation of working and studying simultaneously. These factors can be within or outside the work and study environments. Investigating other factors of wellness will contribute to a much greater understanding of the concept of wellness and what wellness means to the modern individual who is both working and studying simultaneously.

This chapter covers the scope of the research study. Firstly, the research problem is stated and the purpose of the study is highlighted. Thereafter the main research objective is identified and refined into three specific research questions, followed by a brief overview of the methodology. The significance and academic value of the study along with the delimitations considered are explained. Finally an outline of the various chapters is also provided.

1.1 RESEARCH PROBLEM

Over the past decade, individual roles have changed as they are now required to work and study. As a result of this, on a daily basis, our bodies are functioning in countless ways, allowing us to work, rest, eat and play. Sometimes we expect our bodies to perform tasks without providing the nourishment and support our body needs. Considering the reviewed literature, it can be concluded that there are certain factors in terms of wellness that need to be considered at both the individual and organisational level. As such these factors appear to be significant with regard to impacting postgraduate working students' wellness.

According to Goetzel, Ozminkowski, Bowen and Tabrizi (2008) at the individual level, it is essential to consider job and task factors associated with an individual's work which includes the physical and psychological demands of the job, as well as individual factors which include health, safety and behavioural or lifestyle habits related to exercise, smoking, nutrition, alcohol or drug use and the use of preventive services. Investigating the impact of factors influencing postgraduate student wellness is a key avenue to explore, since students have increasingly moved into the work arena while still maintaining responsibilities which in effect tends to complicate the once clear distinction between their personal, study and professional lives.

One of the main issues that need to be addressed is the question of how the situation of working and studying impacts postgraduate students' wellness as well as the factors influencing their wellness. Additionally, only a few studies have been done on student wellness and minimum research exists, thus the exploration of it is necessary (Myers & Mobley, 2004; Myers, Mobley & Booth, 2003; Hermon & Hazler, 1999; Adams, Bezner, Drabbs, Zambarano & Steinhardt, 2000). Spurr (2009) supports that a prominent interest exists among health and educational experts with regards to fostering the health and well-being of future generations; however research into student wellness is limited.

Therefore it is assumed that a current challenge of determining the factors impacting student wellness is present. "Student wellness is critical to the success" of young individuals and "to the future" (Saskatchewan Learning, 2002, p. 251). From this statement, it is assumed that student wellness is viewed as a crucial element in the achievement of effective learning outcomes and is developing as a priority globally within education.

Furthermore it is clear that wellness has numerous benefits for students as well as their workplaces or organisations (De Sousa & Brand, 2013). The researcher is of the opinion that the existence of wellness management provides students with a reassurance that their employers' value and care about them. Consequently the wellness of a student can impact the wellness of their workplace and their academic results. It is assumed that many postgraduate students are struggling to cope with their studies; especially the working students and thus they are using substances or other things as a means of energy or stress relievers. Subsequently the researcher assumes that these students have many factors affecting their wellness. Therefore exploring the levels, types and impact of these factors on physical, mental and social wellness in relation to the experience of working and studying simultaneously of postgraduate students is warranted.

1.2 PURPOSE OF THE RESEARCH STUDY

The main objective of the study is to contribute towards research in the area of student wellness. Strategies to address the different aspects of postgraduate student wellness are becoming increasingly important. As such this study explores the concepts of student wellness and health, focusing mainly on physical, mental and social wellness. The aim of the study is to identify and explore the factors influencing postgraduate working students' wellness by focusing on how the situation of working and studying simultaneously impacts certain aspects of wellness, to be precise: physical, mental and social wellness.

Per se the study identifies the impact and effect of postgraduate students both working and studying full-time simultaneously. These affects are based entirely on the students' perceptions, experiences and opinions, and help to provide a more in-depth understanding of what contributes to their wellness, positively or negatively, as a result of their working and studying environments. It is important to answer the research question, as it enables researchers to recognise the factors impacting postgraduate students' wellness. This is essential for increased productivity, health, morale and attitude, decreased absenteeism and injuries (De Sousa & Brand, 2013). An ancillary aim of the study is to determine whether these factors hinder or encourage postgraduate students' wellness.

By answering the research question, another gap in the field of wellness is narrowed in terms of research, as answers are provided. Research for this question helps to close the gap between what employers believe theoretically about student well-being and what, in practice and reality, actually does occur in student well-being. Researchers are also able to see what factors influence student wellness. The intention is to use the information collected as guidelines in the development of future postgraduate student wellness programs or solutions, while considering the situation of working and studying full-time and how to better manage it.

1.3 RESEARCH QUESTIONS

The main research objective that has been developed for the purpose of this study is: *How does the situation of working and studying impact the three aspects of wellness, specifically physical, mental and social wellness?*

In order to answer this objective, the following three research questions have been developed:

1. How does the situation of working and studying impact your physical wellness?
2. How does the situation of working and studying impact your mental wellness?
3. How does the situation of working and studying impact your social wellness?

1.3.1 Context and unit of analysis

In terms of the context and the unit of analysis, the researcher conducts the study on individual postgraduate working students within a South African University.

1.4 METHODOLOGY OVERVIEW

The researcher embarks on this study from an interpretivist stance in order to explore the experiences of postgraduate working students. The broad research design is that of qualitative research and phenomenology as a form of qualitative research. Non-probability, purposive sampling is utilised when selecting the participants, thus participants relevant to the purpose of the study and who met the specified requirements are selected.

Semi-structured interviews, essays and drawings along with follow up sessions are used to collect data. The findings of the interviews, essays and drawings guide the questions asked in the follow up sessions. A comprehensive analysis is conducted that involves thematic analysis which is aided by the qualitative process of coding. The coding process aids the researcher in categorising and assigning themes to specific data. Additionally, the coding of the data ensures that the themes are properly categorised in accordance with the research questions. Refer to chapter 3 for a comprehensive discussion of the methodology.

1.5 ACADEMIC VALUE AND INTENDED CONTRIBUTION OF THE STUDY

Wellness is an important factor within the university as well as the workplace. It assists in creating healthy, productive, energetic and motivated individuals who are committed to the university, organisation and their goals (Sieberhagen, Rothmann & Pienaar, 2009). If wellness is not managed, it can lead to reduced performance. Previous research studies place the research question in a theoretical context by defining exactly what wellness means, and how in theory, it is to be achieved. All these solutions should be used, however in practice, it is important to understand the dynamics and nature of working with students who manage their wellness in different ways and are all different in their own way. Research in understanding the impact of both working and studying full-time, as well as the various factors influencing postgraduate student wellness, adds value to literature and assists in developing solutions that will address the key issues that individuals face.

Consequently the researcher sought to gain an understanding of the meaning of the phenomenon “a working student’s wellness”, through the experiences of postgraduate students. After extensively reviewing the literature on wellness, the researcher realises that even though research in respect of student wellness has slowly increased over the last years, a detailed investigation has yet to occur within the University setting. Specifically, knowledge concerning the construct of

postgraduate working students' wellness constitutes a new contribution to the foundation of student wellness research.

Research indicates that the wheel of wellness has been applied to college students and perceived levels of wellness have been evaluated which all contribute to the understanding of wellness, however more in-depth, comprehensive research in terms of student wellness is warranted (Adams et al., 2000; Myers & Mobley, 2004; Myers et al., 2003). Similarly studies have also been conducted that focus specifically on employee wellness in relation to the effects of factors such as stress, substances and the physical environment, to name a few. However limitations of studies have been identified as they focus predominantly on the experiences of employees' wellness, while working students are not examined or studied exclusively. More qualitative studies are needed to put "flesh on the bones of generic constructs and their relationships, seeking generic processes" (Miles & Huberman, 1994, p. 27). For that reason, research from a qualitative stance is necessary as limited research has been done on the subject.

Therefore from a theoretical perspective, a study of this nature has not been done before among students in the South African context and contributes theoretically to the understanding of the wellness of postgraduate students in the working environment. The results of this qualitative study provide valuable insight and add to the limited research done exclusively on postgraduate student professionals in the South African context. This holds practical value as it can improve the well-being of both students and their employers. The practical importance of this study is its contribution to the understanding of positive and negative factors present in the postgraduate student working and studying environment that also influences their wellness. The lack of information on factors of wellness regarding students that are also working is one of the reasons the researcher believes this study helps to plug this gap in information and enhances knowledge on the subject. The above mentioned gap in information was discovered when attempting to find information on student wellness. While researchers usually study a predetermined list of factors and then test them against the target population, the research study does not include preconceived factors. It relies on student's input with regard to their experiences and perception of those factors. In this way, the study contributes meaningfully to the existing body of knowledge with research that conveys a focused understanding of the way students in the working environment view and experience wellness.

The researcher is of the opinion that it is only through understanding people's experiences that we are able to ascribe meaning to a phenomenon. This meaning influences what we see and how we behave. The research is aimed particularly at providing an opportunity for postgraduate students to

voice their experiences. This assists in obtaining valuable insight into the experiences and attitudes of postgraduate working students and the impact of these on their physical, mental and social wellness. By gaining this understanding, a gap in the research field is filled, providing information on a previously unknown area of wellness, namely the factors influencing postgraduate full-time working students' wellness. This information is useful for future studies and provides a framework for gathering information and solutions. Furthermore, it also broadens the understanding of wellness and how students can develop or maintain the ideal state of wellness. Accordingly, it is evident that the research study presents value as it holds the potential to assist in wellness management. As a result the knowledge gained from this study provides direction for educational experts or institutions in developing an environment that supports the students, hence, experiencing greater well-being, positive learning as well as a life-long success.

The study therefore provides valuable insight and understanding within the university as well as amongst managers in organisations, regarding postgraduate student wellness, opportunities and challenges presented to students as well as the impact of factors on their physical, mental and social wellness. Consequently the study also assists in sensitising these supervisors and/ or managers as well as lecturers to the challenges faced by working students in their personal as well as professional lives. Additionally the findings of this study provide working students with awareness of the perceptions held with regard to their wellness. Per se they are be able to distinguish myths from facts, as the study sheds some light for students who aim to enter into the work world, while studying simultaneously, hence becoming aware of the challenges. By creating awareness of the factors, the adverse impact of these can be minimised and vital support can be offered. This study makes a valuable contribution by providing a holistic picture of the factors impacting postgraduate working students' wellness by examining their experiences regarding their wellness.

1.6 DELIMITATIONS

Little research has been done on student wellness; therefore the investigation into personal factors influencing student wellness is necessary. Postgraduate students are rich sources of data and are therefore incorporated into research in order to determine the factors influencing their wellness.

The researcher assumes that the study will be delimited in terms of the following:

- The specific context, as it is conducted within the South African context and only one University participates in the study. The university is one of the top universities within the

country and therefore presents an adequate environment in which to conduct the study. Consequently other contexts and Universities are not studied.

- The specific constructs that the researcher studies, as the study is limited to the factors influencing postgraduate working students' wellness. Therefore the study delimits previous non-working or undergraduate students' wellness as the researcher is only investigating the current postgraduate working students' wellness. Furthermore, only factors that HR or IOP students perceive to affect their wellness is included in the study. Additional factors that HR or IOP students perceive not to affect their wellness during the course of the study are excluded (Ripley, 2003). Including all the departments within the university or fields of studies renders the study too broad. By limiting the scope, the relationship between the factors and the wellness of HR or IOP students is better determined.
- The study is limited to the exact literature perspectives that are consulted. Therefore the study is delimited in terms of other closely related literature perspectives that are not accessed.
- Lastly the study is limited to the specific unit of analysis which is individual working postgraduate students. Therefore the study is delimited in terms of unemployed individuals as well as retired employees.

1.7 DEFINITION OF KEY TERMS

The researcher needs to ensure that the most appropriate keywords are used in the research study, as this has an impact on the significance of the results. The search terms that are used in the literature review contain synonyms and the main concepts which are used in this research study is defined below:

1.7.1 Wellness

The following definitions of wellness are used in the study: wellness is “a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity” (Manderscheid, Ryff, Freeman, McKnight-Eily, Dhingra & Strine, 2010, p. 1). It is generally used to indicate a healthy balance of the mind, body and spirit which in turn results in an overall feeling of well-being (Smith & Kelly, 2006). Refer to section 2.1 to better understand wellness and how this definition is used in the study.

Similar words considered: Well-being

1.7.2 Students

For the purpose of this study, the following definition of students is used: “a person who is formally engaged in learning”, specifically one enrolled in a University and “who studies, investigates or examines thoughtfully” (Dictionary.com, n.d., p. 1). The keyword “students” is used in terms of wellness (refer to section 2.3).

1.7.3 Physical wellness

The study employs the definition by Greenberg, Dintiman & Oakes (2004, p. 2) who define physical wellness as: “the ability to meet life’s demands and still have enough energy to respond to unplanned events”. Additionally the definition by Botha and Brand (2009, p. 3) is also adopted within the research study, to be precise: physical wellness comprises “cardiovascular flexibility and strength”, frequent “physical activity”, knowledge in terms of “food and nutrition” as well as “medical self-care” and lastly it “discourages the use of tobacco, drugs and excessive alcohol consumption”. The keyword “physical wellness” and its definition are used in section 2.2.1.

1.7.4 Mental wellness

The study utilises the following definitions of mental wellness: mental wellness is generally viewed as a positive attitude, such that a person can reach an enhanced level of mental health, even if they do not have any diagnosable mental health condition, and is a “generalised feeling of happiness” (Schmutte & Ryff, 1997, p. 551). It is “a state of emotional and psychological well-being in which an individual is able to use his or her cognitive and emotional capabilities, function in society, and meet the ordinary demands of everyday life” (Kumari, 2012, p. 48). The keyword “mental wellness” is used in terms of a review of wellness (refer to section 2.2.2.).

1.7.5 Social wellness

For the purpose of the study, the following definition of social wellness is used: “being comfortable, accepting others and sustaining healthy relationships” (Botha, 2007, p. 22) as well as social support and activity, personal interaction and life satisfaction (Temane & Wissing, 2006). Refer to section 2.2.3 to better understand social wellness and how it is used in the study.

1.7.6 Wellness management

The following definitions by Salerno, Margolies and Cleek (2008, p. 8) are considered for the purposes of this study: “managing our mental and physical well-being” and “handling stress, solving problems, getting along with others, coping with disappointments and keeping a balanced life as part of your day-to-day activities”. The keyword “wellness management” is used in terms of the benefits of attaining an overall sense of wellness (refer to section 2.4.).

Similar words considered: well-being management.

1.8 CHAPTER LAYOUT

This dissertation consists of seven chapters and these chapters are demarcated as follows:

- Chapter 2: Literature review
In this chapter, the core concepts of the study as they are reviewed in different literature sources are discussed. In addition, different points of view are explored in terms of the research topic. As such this chapter delineates the relevant literature applicable to the study.
- Chapter 3: Research design and methodology
This chapter thoroughly describes the research approach, design and methodology for conducting the research. Furthermore the quality and rigour of the study are deliberated to ensure dependability, credibility, transferability and conformability of procedures; and to eliminate any risk of possible bias. Ethical aspects of the study are also considered.
- Chapter 4: Results on the factors influencing postgraduate student wellness
This chapter reports on the results of the study in which various factors that have shaped the participants perceptions regarding their wellness are identified and described. It includes the current factors transpiring from the participant’s lives that have moulded their perceptions regarding their physical, mental and social wellness. Per se the results of the analysis of the findings are provided in this chapter, following the principles of thematic analysis.

- Chapter 5: Discussion of results
Final integration of the research results are summarised and concluded in this chapter. It provides a comprehensive discussion on the main findings of the study as compared to prior literature on the subject.
- Chapter 6: Conclusion, limitations of the study and recommendations
This chapter draws conclusions by presenting the study's findings in response to the research questions, the significant contributions and limitations of the present study, as well as the recommendations for future research.
- Chapter 7: Reflections on the research journey
This closing chapter entails a reflection on the researchers' experience of the journey undertaken in the completion of this thesis. It provides some inside scope into the researchers' story, disclosing her thoughts, feelings and experiences during her journey in discovering the truth about the factors influencing postgraduate student wellness.

SUMMARY

The background to the present study together with the problem statements and the purpose of the study were discussed in this chapter. Furthermore, the research questions, contributions of the study, definition of the key terms and the layout to be used in the subsequent chapters of this thesis were presented.

Chapter 2 describes the various perspectives and relevant literature pertinent to the research study.

CHAPTER 2:

LITERATURE REVIEW

This section focuses on the literature surrounding wellness in support of the current research study. Through numerous literature studies, the researcher was able to conceptualise and fully discuss the topic under study. Firstly an overview of wellness is provided along with the theoretical perspectives underpinning the research study. Thereafter the three main dimensions, specifically: physical, mental and social wellness, that the research study addresses are discussed. Following this is a brief review on the current literature with regard to student wellness. Lastly, the benefits of attaining an overall sense of wellness are presented.

2.1 AN OVERVIEW OF WELLNESS

Within this section the researcher indicates what wellness entails along with the current perspectives on the concept 'wellness', including an holistic perspective which constitutes the current perspective on wellness as well as international perspectives. Subsequently the conceptualisation of wellness is also explained.

2.1.1 Wellness defined

Literature indicates that wellness has been broadly defined as an overall sense of wellbeing and can be divided into three main elements, specifically: psychological/ mental wellness, physical wellness and social wellness, which combined, provide an overview of an individual's wellness (Farrell & Geist-Martin, 2005; Schaefer, King, & Bernard, 2007; Attridge, Maiden & Herlihy, 2013). Within this research study, wellness is intended to mean a state of balance between the physical, mental and social dimensions of life.

The World Health Organisation defines wellness as "a state of complete physical, mental and social wellbeing and not merely an absence of disease or infirmity" (MacDonald, 2005, p. 1). Although this definition is at the epicentre of the modern understanding of wellness, the researcher is of opinion that this definition is idealistic since it is almost impossible for an individual to truly attain an overall sense of complete wellness within all the areas. Therefore as cited in Edlin, Golanty and Brown (2000) an amended definition of wellness was proposed which placed the responsibility of overall wellness on the individual through lifestyle behaviours which promote

health and wellness. As such the onus is on the individual to achieve a complete sense of wellbeing through modifications in his or her lifestyle. This is supported by Hurley and Schlaadt (1992) who cite in Botha and Brand (2009, p. 9) that wellness is “an approach to personal health that emphasizes individual responsibility for wellbeing through the practice of health-promoting lifestyle behaviours”. Keyes and Haidt (2006) also suggest wellness as a proactive dynamic process whereby the individual becomes aware of life’s choices and the responsibilities they have, hence taking action to make the right decisions or choices towards a life of quality and wellness.

Wellness is focused on the integration of functioning which is orientated towards an individual reaching his or her full potential and is considered as a process which constitutes an individual’s motivation to continuously improve his or her quality of life through obtaining a balance of physical, mental and social wellness (Hattie, Myers & Sweeney, 2004). The premise of the drive to obtain a state of wellness is to ensure functionality within all areas as well as enhance one’s quality of life and attempt to prevent disease or illness. Additionally Hoeger and Hoeger (2010) indicate that the concept of wellness as merely an absence of disease or illness has long been discarded and is continuing to develop as the effect of lifestyle factors on wellness are being investigated. Consequently Els and De la Ray (2006) cite in Siberhagen et al. (2009, p. 2) that wellness is the “experience of optimal health, good relationships with others, being emotionally and cognitively well stimulated and experiencing significance and purpose in life”.

From the above definitions, it is evident that wellness has widely accepted meanings but the focus being on the individual taking on the decision to move towards optimal health through the choice of living a healthy, balanced life, ultimately resulting in an integration of one’s body, mind and spirit. One can presume that an individual who is well is healthy. Hence, wellness is viewed as a holistic concept in which the human being is totally balanced with an overall wellbeing.

2.1.2 Perspectives on wellness

The most common descriptions of wellness create the theoretical framework that views individuals within a holistic perspective, consisting of numerous dimensions.

2.1.2.1 *Wellness from a holistic perspective*

Holistic wellness is “the integration of body, mind, and spirit – the appreciation that everything you do, think, feel and believe has an impact on your state of health” (Travis & Ryan, 2004, p. xvi). The holistic perspective of wellness is generally agreed upon as the favoured model as it totally

transformed the concept of health and, the catalyst that began this transformation was perhaps that of the wellness movement (Hales, 2005; Kindig, 2007; Anspaugh, Hamrick & Rosato, 2004; Panelli & Tipa, 2007; Travis & Ryan 2004). The researcher assumes that the primary health concern is that of chronic and lifestyle illness, related to several stressors in life as well as the workplace. Dunn (1959) was one of the first author's to provide a modern definition for the concept of wellness, specifically that it is the maximization of health through an assimilated way of functioning while taking into account an individual's environment. Importantly Els and De la Rey (2006) point out that problems employees experience as a result of their physical, emotional, intellectual, social or spiritual domains become dilemmas that organisations have to deal with. Therefore it is vital that throughout the organisations life wellness is understood from a holistic perspective so as to maintain a healthy workforce.

As the wellness movement evolved, Lalonde (1981) indicated that more could be done in order to increase freedom from disease and disability as well as to promote a state of wellbeing so as to ensure sufficient levels of physical, mental and social activity. As such Ardell (2005) indicates that through the adoption of changes in various areas of one's lifestyle, a high level of wellbeing can be attained as one takes the conscious choice involved in taking accountability for the improvement of the quality of one's life. In addition to this, Travis and Ryan (2004) uphold the view that wellness encompasses a process of integration including awareness, education and growth. Gatterman and Brimhall (2006) delineate the act of being well as being capable of creatively adapting within all life's aspects, thus resulting in an optimal level of functioning. Therefore the concept of wellness is seen as something distinct and associated more to values and behaviours that promote health.

2.1.2.2 *International perspectives of wellness*

For a number of years wellness has been a topic of interest and thus the understanding of it has improved over time. It is essential for modern organizations to address wellness in terms of each of the wellness areas, specifically psychological, social and physical so as to ensure the effectiveness thereof. Two of the most significant studies of recent decades are the studies performed by Pelfrey and Hobson (1984) and Roslende, Stevenson and Kahn (2006) respectively. Both these studies examined the overall benefits of wellness in relation to the organisation. Research indicates a gradual shift from the 19th and 20th centuries, a purely industrialist view towards a view that recognizes individuals as true assets within an organisation. This shift is continuing and will potentially reach the point where an organisation recognizes the true value and significance of effectively managing an individual's wellness. Roslender, Stevenson and Kahn (2006) and

Attridge et al. (2005) provide evidence of this as they confirm that wellness management is a huge contributor to organisational success.

Halbert Dunn defends the modern movement of wellness by defining wellness as “an integrated method of functioning which is oriented toward maximizing the potential of which the individual is capable and requires that the individual maintains a continuum of balance and purposeful direction within the environment where he or she is functioning” (Ballentine, 2010, p. 5). In terms of this statement “integrated” is used in the sense of interrelated and that it is essential to develop your whole body, while “maximising” is a sense of completeness in that the individual is developing on a daily basis and “potential” is referred to as the capacity of the individual (Dunn, 1977, p. 4). Hettler (1984, p. 14) on the other hand, states that wellness is “an active process through which people become aware of, and make choices about, a more successful existence” (as cited in Ballentine, 2010, p. 5). Other authors have also expanded on research regarding the link between wellness and success.

As such numerous wellness models have been developed. Myers and Sweeney (2005) point out that many early models of wellness originate from the medical field perspective and focus on developing a distinction between the lack of illness and being well. In addition to this, these models focus on positive psychology and try to conclude associates between health, the quality of life and longevity (Myers & Sweeney, 2005).

2.1.3 Conceptualising wellness

As indicated earlier the central view of wellness is that it is holistic in nature and both absences of illness as well as a state of wellbeing are critical (World Health Organization, 1986). Several authors indicate that wellness is viewed as more than just the absence of illness and diseases; it also includes the presence of positive elements like physical health and satisfaction (Corbin & Pangrazi, 2001; Anspaugh et al., 2004; Travis & Ryan 2004; Hales, 2005; Myers & Sweeney, 2005; Kindig, 2007; Panelli & Tipa, 2007). Panelli and Tipa (2007) note that the concept ‘wellness’ emerged succeeding the Second World War, as developments in medical technology destined that health comprised also of wellness and was not merely an absence of disease or illness.

Kirsten, van der Walt and Viljoen (2009) note that the bio-medical model needs to keep up to date and adopt a holistic approach as human wellness comprises, amongst others things, mind, body, spirit, as well as community interactions and the numerous wellness dimensions are all significantly interrelated. According to literature, many authors and theorists have well-defined broad concepts

around the meaning of wellness (Adams, 2003; Anspaugh et al., 2004; Ardell, 2005; Clark, 1996; Corbin & Pangrazi, 2001; Dunn, 1977; Greenberg, 1985; Hales, 2005; Hatfield & Hatfield, 1992; Helliwell, 2005; Jensen & Allen, 1994; Jonas, 2005; Lafferty, 1979; Lalonde, 1981; Maslow, 1968; Myers & Sweeney, 2005; Rickhi & Aung, 2006; Ryan & Deci, 2001; Ryff & Singer, 2006; Sackney, Noonan & Miller, 2000; Saracci, 1997; Sarason, 2000).

In an attempt to clarify the definition of wellness, it has been debated that the concept of wellness is subjective and an accurate definition of the construct is difficult (Kelly, 2000; Sarason, 2000; Travis & Ryan, 2004). The researchers' appraisal of wellness theorists provides an inclusive and developmental view of the literature on wellness. The fundamental areas of wellness include a mixture of a strong sense of identity, a reality oriented perspective, a clear life purpose, recognition of a unifying force within an individual's life, the capability to manage one's affairs creatively as well as uphold a hopeful view, and lastly the ability of inspirational as well as open relationships (Egbert, 1980).

The World Health Organisation (1986, p. 2) further elucidated the definition of wellness by confirming that in order to reach a state of health "an individual or a group must be able to realize aspirations and satisfy needs, and to change or cope with the environment," while Bouchard, Shephard and Stephens (1994, p. 23) recommend that "positive health pertains to the capacity to enjoy life and withstand challenges". Additionally Witmer and Sweeney (1992) describe wellness in respect of life tasks that encompass self-regulation, work, friendship, spirituality, and love. Dunn (1977) highlights wellness as a positive state that goes way beyond simply no sickness, thus expanding on the definition of the World Health Organisation by underlining the changing extents of wellness and its interconnectedness, every-changing aspects. As such Dunn emphasises the interrelated nature of wellness as the mind, body and environment which all exist in equilibrium that is dynamic in nature as individuals attempt to obtain a balance between each. Along with this Dunn (1977) also abstracts the wellness dimensions to be ever-changing as individuals make decisions that either move towards or away from their maximum potential.

Numerous authors investigate the various elements that comprise wellness. According to past literature, wellness encompasses physical, psychological/ emotional, social, intellectual, and spiritual dimensions (Depken, 1994). Similarly, Greenberg (1985) and Lafferty (1979) define wellness as an incorporation of the five factors and complex wellness as the balance amongst them as well as the meaningful direction with the environment. However the concept mental wellness was utilised in place of intellectual wellness.

Hettler (1980) includes a sixth dimension known as occupational wellness and emphasises wellness, as the process of becoming wellness conscious and making decisions towards optimal living. Renger, Midyett, Mas, Erin, McDermott, Papenfuss, Eichling, Baker, Johnson and Hewitt (2000) describe wellness as entailing physical, emotional, social, intellectual as well as spiritual components and add an environmental component in order to acknowledge the effect of an individual's surroundings. As such, the prominence of knowledge, attitude, perception, behaviour and skill in relation to each wellness dimension, as well as the incorporation and balance thereof is highlighted by Renger et al. (2000).

Adams (2003) mentions four key principles pertaining to wellness, namely: 1) it is multidimensional in nature; 2) research and practice should be oriented toward the identification of wellness rather than illness causes; 3) it is about balance; and lastly 4) it is relative, subjective as well as perceptual. Schuster, Dobson, Jauregui and Blanks (2004, p. 351) state that wellness is "a higher order construct integrating the domains of physical, psychological (mental/ intellectual/ emotional), social, spiritual and drawing on individual self-perception".

Myers, Sweeney and Witmer (2000, p. 252) are of opinion that wellness is "a way of life, oriented toward optimal health and well-being in which the body, mind and spirit are integrated by the individual to live more fully within the human and natural community". The notion that wellness is more a state that is psychological rather than physical has been a key focus for researchers. Anspaugh et al. (2004) and Hales (2005) make reference to seven wellness dimensions, including: physical, emotional, social, intellectual, spiritual, environmental and occupational.

Jonas (2005, p. 2) expands on the difference between health and wellness by stating that health constitutes a state of being, whereas wellness is a process of being and thus wellness is "a way of life and living in which one is always exploring, searching, finding new questions and discovering new answers, along the three primary dimensions of living: the physical, the mental, and the social; a way of life designed to enable each of us to achieve, in each of the dimensions, our maximum potential that is realistically and rationally feasible for us at any given time in our lives". Rickhi and Aung (2006) believe the creation of wellness constitutes a focus on practices that are beneficial to an individual, thus to all of the three elements - body, mind and spirit. Therefore physical wellness includes clean drinking water, healthy eating, and physical activity, where mental and spiritual wellness require mind or body based stress reduction programs, adapting the body to nature and being aware of the senses.

2.2 DIMENSIONS OF WELLNESS

Owing to wellness being a dynamic and constant process, all dimensions are interrelated and integrated in such a way that discord in one will impact the others. As such this indicates that the concept of wellness simply exceeds the absence of disease or illness. Wellness integrates factors like adequate fitness, proper nutrition, stress management, disease prevention, spirituality, not engaging in substance abuse including smoking, personal safety, health education, repetitive physical examinations or assessments, and environmental support (Hoeger & Hoeger, 2010).

With regard to the three key dimensions of wellness, namely: social, mental/ psychological as well as physical wellness, social wellness is assumed to have the most significant effect on overall wellness, and in terms of the order of importance, it seems to be followed by psychological and physical wellness. This tendency is in line with the view that human beings inherently seek companionship and that the quality of individual relationships has a substantial impact on an individual's social as well as overall wellness.

Similarly, as cited in Danna and Griffen (1999) there are two prominent person related concepts that are combined with a more societal level perspective: firstly health and wellbeing which refers to the physical health of individuals as indicated by physical symptomatology and epidemiological rates of physical illnesses, and secondly the mental, psychological and emotional aspects of individuals as indicated by emotional states and epidemiological rates of mental illnesses (Shahandeh, 1988). Additionally these two people related dimensions constitute the societal dimensions of health and wellbeing such as substance abuse and the consequences thereof.

In the exploration of a specific wellness dimension, it is essential to consider the interrelatedness of all the dimensions. While the present investigation focuses on exploring three areas of wellness, aspects of the other dimensions of wellness are also considered in conjunction with these three aspects, owing to their influence.

2.2.1 Physical wellness

The McKinley Health Centre (2011) points out that the physical aspect of wellness “entails taking good care” of one’s “physical body” and that “being physically well reduces the risk of illness fatigue and injury”. According to Myers and Mobley (2004) studies have found that students rate the physical dimension and the emotional dimension of wellness as the most important. Based on

this, the researcher is of the opinion that only a few individuals realise how important physical wellness is to a balanced life.

Physical wellness has been researched over a long period and through a review of the literature, many elements of physical wellness as well as the applications of physical wellness are highlighted. Such elements include, but are not limited to: increases in performance and morale, reduced absenteeism, improvement in mental health, increased self-esteem, and improved perceived wellness (Bezner, Adams & Whistler, 1999; Huta, Deci & Ryan 2008; Kulinna, Warfield, Jonaitis, Dean & Corbin, 2009; Miller, Gilman & Martens, 2008; Pelfrey & Hobson 1984). The most interesting elements that have an influence on perceived physical wellness are that of hope and optimism (Adams et al., 2000).

Myers and Sweeney (2005) are of the opinion that frequently wellness is deliberated to be limited to physical well-being. On the basis of this, the researcher assumes that even though the modern concept of wellness goes beyond an individual's physical state, it is still an essential element to overall wellness and functioning. Accordingly Vanhees, Lefevre, Philippaerts, Martens, Huygens, Troosters and Beunen (2005) indicate that the relationship between physical activity, physical fitness and health is a complex interaction.

Temane and Wissing (2006), describe physical wellness as comprising of disease, illness and mortality rates. Botha and Brand (2009, p. 3) indicate that the physical dimension "involves cardiovascular flexibility and strength, regular physical activity, knowledge about food and nutrition and medical self-care and discourages the use of drugs, tobacco and excessive alcohol consumption". Maintaining good health forms a key part of maintaining physical wellness. According to MacDonald (2005) the following methods can be adopted: ensuring three regular meals a day specifically breakfast, moderate exercise two or three times a week and seven to eight hours of sleep at night. In conjunction: avoiding smoking, maintaining one's normal weight, drinking alcohol in moderation, undertaking theme days such as a healthy heart month, going for annual medical check-ups, offering incentives for individuals who maintain a healthy lifestyle and creating awareness around relevant health issues like eating healthy, dieting and exercising all contribute towards maintaining physical wellness (MacDonald, 2005).

Consequently the researcher assumes that lifestyle accounts for the most important influence on wellness. Adjustments to lifestyle include changing one's diet as well as exercise routines, and daily habits so as to fulfil all dimensions of wellness. King, Mainous and Geesey (2007) found within their study that the adoption of healthier lifestyle habits like diet which contain recommended

quantities of vegetables and fruits, exercise, maintaining a healthy weight as well as stopping smoking reduced death rates by 40% and the risk of cardiovascular diseases by 35%. These statistics were confirmed after a four year investigative period as compared with individuals who had been living less healthy lifestyles.

Likewise Miller (2010, p. 226) as well as Drolet and Rodgers (2010) provide evidence that the aspect physical wellness is the most important as it has an effect on the other aspects of wellness, namely that: “diet, exercise and rest have a profound effect” on how “individuals feel emotionally”; “exercise” is also known as a “good way in which some individuals can connect to their spiritual wellness”, an example of such an exercise would be “yoga or tai chi; “going for walks outside” can also “increase an individual’s environmental wellness”; and lastly exploring physical wellness together” assists individuals in “building healthier relationships for social wellness”. Thus the researcher assumes that adequate physical wellness provides a good foundation for a whole as well as complete life and is integral for health.

Physical wellness constitutes having the ability to apply ones “knowledge, motivation, commitment, behaviour, self-management, attitude and skills towards achieving” ones “personal fitness” as well as “health goals” (“Dimensions of wellness”, n.d., p. 2; Lambert & Grube, 1988; McConnell, 2014). In addition to this, physical wellness also includes: maintaining a “healthy quality of life” that allows an individual to get through their “daily activities” without any “undue fatigue or physical stress”; individuals recognising that their behaviours “significantly impact their wellness”; and “adopting healthful habits” (Botha, 2007; Botha & Brand, 2009, p. 3). Therefore, healthy nutritional intake and physical activities that contribute to overall wellness are encouraged.

Nonetheless the premise of attaining a sense of wellness is to cope despite the external influences. Edlin et al. (2000) point out that wellness encompasses the awareness that certain influences and lifestyle habits are not healthy and thus alternatives need to be found. In addition, the researcher is of the opinion that in order to maintain a state of optimal wellness, individuals need to be physically active, display no signs of illness and be free of risk factors. By developing physical wellness, individuals will be empowered to be able to monitor their own vital signs and understand their body’s warning signs (Hettler, 1976). Furthermore, the individual may attain an understanding and appreciation of the relationship between sound nutrition and how their body performs (Hettler, 1976). Studies illustrate that individuals who are physically healthy are more resilient and deal more effectively with stress-producing factors such as work overload and work pressure (Attridge, 2005; Slack 2006; Thogersen-Ntoumani & Fox, 2005).

Lastly Mangione (n.d., p. 1) states that “physical wellness is the goal, it is part of an overall wellness continuum” that an individual is already on and it involves “taking a step towards better health”. Physical well-being constitutes the “full body experience of vitality that happens” as an individual moves into “greater states of physical wellness” (Mangione, n.d., p. 1). Therefore the researcher assumes that physical wellness is a get up and go as well as a spring in your step experience, it comprises the enjoyment of the pleasure of a healthy body as well as being ready and able to physically explore what you want to do and are inspired to do.

2.2.1.1 *Physical activity and exercise*

Several studies indicate that physical exercise has the ability to influence numerous dimensions of wellness and therefore result in a general improvement in overall wellness. Physical activity is defined by the American College of Sports Medicine (ACSM, 2010) as body movements caused by skeletal muscle contraction which results in a significant increment above that of resting energy expenditure. Buckley and Buckley (2008) confirm an association between physical activity, exercise and health outcomes, to the degree that the effects experienced from maintaining physiological health and fitness is based on the quantity of physical activity pursued. This indicates the relationship between physical and mental wellness.

Recent physical exercise and activity studies demonstrate that there is therapeutic value in moderate intensity activities that also promote health (Armstrong, Conn & Pinner, 1999). The authors found that participation in moderate amounts of physical activity benefits one’s overall wellness. Similarly the authors found that those who participated in moderate levels of activity such as cycling, walking and going to the gym had higher levels of perceived physical wellness. This association conveys the prominence of regular physical exercise and how it creates a positive influence in one’s physical health.

Physical activity or exercise constitutes a factor that has a direct impact on an individual’s health. Vuori (1998) and Marshall (2004) suggest that high and moderate levels of physical activity hold benefits for individuals as they undergo beneficial physiological and psychological changes when they are physically active, such as higher job satisfaction and less job stress. The healthier people are, the better they feel, the better they deal with stress and the more resilient and involved they are in their work (Dunkin, 2008). Edwards (2006) indicates that various studies have clearly illustrated the effectiveness of physical exercise in reducing stress, anxiety as well as depression. Therefore it can be said that attaining this in times of uncertainty and stressful events will be pivotal

in organisational success. Research indicates that physical activity provides many benefits, including a considerable impact on an individual's immune system (Vuori, 1998).

Spence and Lee (2003) indicate that in order to understand the effect of physical activity on wellness, social and environmental constructs need to be reviewed. King, Mainous and Geesey (2007) explored the influence of physical activity on occupational wellness and found an increase in productivity, decrease in absenteeism, improvement in social and networking constructs and a reduction in health care costs. Chen, Lin, Peng, Li, Wu, Chiang, Wu and Huang (2002) affirm that the physical ecology has been recognised to have a direct link with physiological and psychological factors that affect involvement in physical activity. Such factors could pose limitations to an individual's optimal ability to perform physical exercise, for instance extreme temperature can deter an individual's ability to partake in physical exercise and influence their attitude. Therefore these ecological factors influence the psychological outcome.

Vanhees et al. (2005) is of the opinion that individuals with low income or the lack of facilities and an adequate environment to support participation in physical activity have major psychological setbacks, including unfavourable mind-sets and perceptions towards physical exercise. As such this negative attitude along with the economic constraints, serve as a barrier for physical activity thereby hindering any attempt to accomplish overall wellness.

Buckley and Buckley (2008) confirm a relationship between physical fitness, physical activity as well as mortality and morbidity outcomes. Haby, Markwick, Peeters, Shaw and Vos (2012) note that literature has established, that an increase in physical activity results in physiological improvements like body composition as well as muscular strength and endurance. Such improvements in respect of chronic conditions, have demonstrated an impact on health and quality of life. Physical fitness is referred to as a set of attributes like endurance, strength, power, flexibility, agility, balance and body composition, that people have or achieve that relate to their ability to perform physical exercise (Warburton, Nicol & Bredin, 2006).

Blair, Cheng and Holder (2001) confirm that the psychological adaption to physical exercise or activity is physical fitness which is to a large degree under genetic influence. Al-naddaf and Dabayeb (2007) emphasise the importance of meeting physical activity recommendations in their findings, specifically that the reduction in regular physical activity and a non-positive energy balance may be responsible for the increase in obesity. Researchers have also found that exercise substantially influences visual concentration, eye hand coordination, pro action-reaction time,

response speed and accuracy (Tomprowski, 2003; Du Toit, Kruger, De Wet, Van Vuuren, Van Heerden & Janse van Rensburg, 2006; Du Toit, Kruger, Joubert & Lunsky, 2007).

A key problem in modern society is that individuals lack the motivation along with an unsuitable attitude towards physical exercise. Research supports this as it confirms that individuals involved in sport have higher levels of moderate to vigorous exercise which results in several wellness benefits such as weight control, improved capacity and performance, improved strength and finally, a greater sense of self-concept (Vanhees et al., 2005). Consequently physical fitness is considered an essential health aspect and thus it is vital for physical fitness to be incorporated as an integral measure in assessing physical wellness.

The researcher recognises that if the necessary exercise equipment and personnel is available on site, the need to leave work in order to exercise will be eliminated. In this way, having on-site physical exercise programmes will improve attendance as well as improve physical wellness for the specific individual. Attridge et al. (2005) suggest that the initial costs of setting up on-site physical exercise facilities will be worthwhile considering the long term benefits.

Warburton et al. (2006) point out that several studies are in favour of thirty minutes of leisure activity within an eight hour working day. This also helps to combat cardiovascular diseases; however Shephard (2001) indicates that this is insufficient due to the low intensity. On the other hand Dunn (2009) notes that thirty minutes of vigorous intensity physical activity per day, which can include either planned or unplanned leisure, occupational or household activities may help control risk factors like cholesterol, blood pressure and body composition. Dubbert (2002) confirm an inverse relationship between physical activity and mortality in conditions like heart diseases, strokes and colon cancer. Along with this, substantial evidence affirms the positive influence of physical exercise on conditions like diabetes, obesity and osteoarthritis (Dubbert, 2002).

Likewise, physical exercise provides numerous benefits in reducing the risk of lifestyle induced diseases and illnesses (Kokkinos & Myers, 2010). According to Ojikutu and Agbaraji (2012), maintaining one's level of physical fitness provides a significant degree of protection from cardiovascular risk factors and the occurrence of developing cardiovascular diseases. Ryan, Williams, Patrick and Deci (2009, p. 108) state that "when active, people feel more energetic and they satisfy deep psychological needs which contribute to an overall sense of wellness". According to Ryan et al. (2009, p. 119) physical exercise can be "intrinsically motivated which is facilitated by support for autonomy and competence". Nevertheless physical exercise is often extrinsically motivated however these extrinsic motives will vary depending upon their relative autonomy (Ryan

et al., 2009). Ryan et al. (2009, p. 119) state that “the more extrinsic motives are internalized and integrated, the more autonomous they are and this in turn predicts both positive experience and better maintenance”.

With regard to student wellness, Ballentine (2010) indicates that physical exercise influences academic performance and university student retention. Zhang and RiCharde (1998) study of students and the role of fitness in academic success revealed that students with higher fitness scores are significantly more likely to remain within the institution. Similarly Trockel, Barnes, and Egget (2000) explore the relationship between academic results and certain healthy behaviours where they confirm that a positive association exists between strength training and academic grades. Han, Dinger and Hull (2008) indicate that physical exercise tends to reduce during the summer prior to semester one in university. Irwin (2007) notes, that in actual fact the majority of university students may not partake in a sufficient amount of physical exercise that is considered to be healthy. Increased physical exercise results in less health problems. Research demonstrates an association between physical activity and healthy behaviour (Seo, Nehl, Agle & Ma, 2007).

Nevertheless, the risks associated with not being physically active outweigh the benefits of physical exercise. Physical inactivity can result in increased risks of various diseases and illnesses (Warburton et al., 2006; Shephard, 2001; Rennie, Henningway, Kumari, Brunner, Malik & Marmot, 2003). The World Health Organisation recognised physical inactivity as a global health concern and ranked it fourth in terms of risk factor related overall mortality burdens, accounting for 6% of deaths globally (Siefken, MacNiven, Schofield, Bauman & Waqanivalu, 2012). The researcher is of the opinion that the human body relies on movement and physical exercise for sustainability. Based on research, it is assumed that physical inactivity can result in serious health consequences.

2.2.1.2 Nutrition

The researcher assumes that lifestyle related behaviour like nutritional status is critical in maintaining a sense of overall wellness. Andersen, Wadden, Barlett, Zemel, Verde and Franckowiak (1999) found that a program combining diet and exercise had positive influences on improving obesity reduction, weight loss as well as blood pressure. With this the authors also found that irrespective of the type of exercise, maintaining a healthy diet elicited benefits (Andersen et al., 1999).

Westerterp (2010) suggests that nutritional status is reliant on energy requirement, body size and physical exercise. Research indicates that nutritional state and exercise are interrelated through energy balance which involves the relationship between energy intake and energy expenditure (Westerterp, 2010). A positive energy balance entails that energy intake exceeds energy expenditure which results in a gain in one's weight. Therefore a negative energy balance implies that energy expenditure exceeds energy intake and in turn results in weight loss. Liebman, Pelican, Moore, Holmes, Wardlaw, Melcher, Liddil, Paul, Dunnagan & Haynes (2006) indicate that while numerous factors can be ascribed to weight gain, principle factors encompass environmental effects which enable inactive behaviour and encourage a nutritional status related with a positive energy balance.

Therefore it is vital to adjust one's diet in accordance with the volume of physical activity performed and a sensible diet can be classified as a caloric intake in correct proportions from the basic food groups. Individuals who partake in intense physical exercise tend to have higher caloric intake due to the greater energy expenditure (Hoeger & Hoeger, 2010). As such protein intake will vary according to an individual's level of physical exercise. Research indicates that individuals who live longer stress the importance of good nutrition and exercise (Myers & Sweeney, 2005).

2.2.1.3 Perception and motivation

In terms of perception, if someone perceives something to be true and valid, then it should be. Thus individuals who perceive themselves, to be physically well, believe that they are physically well. Nevertheless there is evidence that fitness makes a difference in physical health. Research supports this by indicating a change in attitude as a result of physical fitness (Mack & Shaddock, 2004). Motivation is seen as one of the most important sources for optimum performance. It is not only important to increase one's performance but also necessary in order to stay active and eat healthy. Research found that more physically active individuals experience an increased sense of self-efficacy resulting in higher levels of motivation, as the physical exercise reduces anxiety and tiredness (Mack & Shaddock, 2004).

Buckworth, Lee, Regan, Schneider and DiClemente (2007) found that individuals are more likely to engage in wellness management when their participation is motivated by extrinsic motivators and as soon as they experience the physical as well as emotional benefits of exercise and healthy eating patterns, intrinsic motivators will lead to the sustainability of their participation. Likewise Kwan and Bryan (2009) support this and found that individuals are more likely to continue to be

physically active when they feel good from exercising and maintaining physical activity in the future.

2.2.1.4 Stress and anxiety

Kaplan and Saccuzzo (2005, p. 494) highlight the relationship between stress and anxiety by stating that “exposure to stressful situations can cause an observable reaction known as anxiety, an emotional state marked by worry, apprehension, and tension”. In actual fact, stress and anxiety are so closely interrelated that their physiological symptoms are often identical, for instance a fast heart-rate leads to an increase in pulse rate and other similar physiological responses (Kaplan & Saccuzzo, 2005).

Love, Irani, Standing and Themistocleous (2006) state that at an individual level, stress can contribute to physical disorders, where “physical illnesses may include high systolic blood pressure, high cholesterol” and “ulcers”. Johnson, Cooper, Cartwright, Donald, Taylor and Millet (2005) agree with the impact of stress on physical health. Johnson (2006) declared that long-standing and intense stress can lead to heart disease, back pain, depression and anxiety. Several studies have sought to associate psychological stress with heart rate and found a link between conditions like perceived stress, depression and anxiety (Dishman, Nakamura, Garcia, Thompson, Dunn & Blair, 2000; Sloan, Shapiro, Bagiella, Boni, Paik, Bigger, Steinman, & Gorman, 1994; Warburton et al., 2006). Grippo and Johnson (2009) state that psychological adaptations to a stressful event such as increased sympathetic dominance, decreased tone, higher blood pressure and increased heart rate are jointly detrimental to cardiovascular health. This verifies the necessity to maintain a holistic sense of wellness. Nonetheless Dubbert (2002) suggests that mental health can be improved through physical exercise.

From an evolutionary perspective, the stress response is said to be shaped by the natural selection of one’s ability to enhance coping mechanisms in circumstances that necessitate action or defence (Nesse, Bhatnagaer & Young, 2000). Vanhees et al. (2005) confirm that physical exercise has the potential to substantially reduce stress levels through the adjustment of physiological mechanisms like neurotransmitter release. As such physical exercise contributes to the reduction of stress levels in individuals who exercise.

Zimbardo, Weber and Johnson (2003, p. 92) describe a three-stage pattern of “physical responses as a result of prolonged stressors”. The first stage is defined as the “alarm reaction stage” as it is a short phase where the individual is “physiologically prepared to ward off the stressor” and the

“adrenal functions are activated through the hypothalamus which communicates to the sympathetic nervous system” so as to release the “body’s natural energy and defence resources” (Zimbardo et al., 2003, p. 92). This stage results in an “increased heart rate, increased blood flow to muscles, heart and brain, preparing the individual to fight back or flee” (Zimbardo et al., 2003, p. 92). However, if the “individual is exposed to constant intense or prolonged stressors, his or her body energy and defence resources will become exhausted” (Zimbardo et al., 2003, p. 92). Stage two, on the other hand is known as the “resistance stage” as the body adapts to the “continuing presence of the stressors due to the parasympathetic interventions that stabilize the bodily functions” and thus “adrenal output decreases” during this stage (Zimbardo et al., 2003, p. 92).

Lastly, stage three, “exhaustion” is defined by a “resurgence of the alarm stage and a powerful response from the autonomic system attempts to regulate the hormone response” (Zimbardo et al., 2003, p. 92). During this stage the body’s vital resources have been exhausted from the immune system, therefore leaving the individual vulnerable to illness or disease (Zimbardo et al., 2003). Furthermore at stage three, the body is in a “state of hypoadrenia – this is a state where the body does not have the capacity to adapt or to deal with the stress” and can result in “health problems” for example “high blood pressure, high cholesterol, heart attacks, chronic fatigue, depression and anxiety” (Zimbardo et al., 2003, p. 92).

Colligan and Higgins (2005, p. 93) describe workplace stress as “the change in one’s physical response to workplaces that pose an appraised challenge or threat to the employee”. They also state that prolonged exposure to these factors will increase the risk of individual’s developing physiological disorders (Colligan & Higgins, 2005). Demerouti, Le Blanc, Bakker, Schaufeli and Hox (2009) indicate that workplace stress plays a big role in increased illness. It is assumed that highly stressed employees are more likely to suffer from stress related medical problems. Thompson (2009) provides evidence of this through the indication that sickness and absence cause significant problems in the organisation in various ways, to be precise: additional pressure is placed on employees thus resulting in work overload problems, reduction in quality of service occurs for internal and external stakeholders, tensions and conflicts arise, deadlines could be missed and huge financial costs as well as the organisations reputation could suffer.

Occupational stress can be related to physical ill health. It is important to note that heart disease, some cancers, allergies, migraines, back problems, depression and an increased frequency in minor ailments such as colds and flu are all associated with stress and burnout (Spector, 2002). When individuals feel better as a result of being healthier, they have the internal resources required to reduce the influence of high job demands.

2.2.1.5 Medical self-care

Botha and Brand (2009) indicate that medical self-care is a way of promoting one's physical wellness, as it refers to upholding a healthy lifestyle and minimizing wellness behaviour risks. For instance, through certain actions such as: giving up smoking, drinking the right amount of water, practicing hygienic measures, checking high blood pressure and cholesterol levels as well as doing self-examination tests are ways of promoting physical wellness (Botha & Brand, 2009).

2.2.1.6 Psychological benefits

Edwards (2006) notes the link between physical and psychological wellness, specifically in terms of the benefits of these dimensions as he states that the physical benefits of looking good and feeling terrific often result in psychological benefits like enhanced self-esteem, self-control, determination and a sense of direction. Vuori (1998, p. 100) states that "...physical activity appears to improve health related quality of life by enhancing psychological wellbeing (e.g. self-concept, self-esteem, mood and affect)". It enhances one's moods and then impacts self-esteem which in turn will enhance his or her level of motivation (Vuori, 1998).

Similarly results from research conducted in Britain prove that this increased physical exercise energizes employees and increases their concentration, as well as problem-solving abilities and they experience a better mood (Shumaker, Ockene & Riekert, 2008). Physical exercise has upheld to be beneficial to mental wellness. It improves the stimulation of neurochemical changes in the brain and consequently improves one's ability to deal with stress and depression (Remington, 2009). Evidence suggests that moderate, relative intensity exercises reduces anxiety and depression, as well as improves one's mood (Shephard, 2001; Caldwell & Huitt, 2004).

According to the Surgeon's General Report (1996), a curvilinear relationship exists between exercise and psychological conditions, especially depression and anxiety. This indicates a close relationship between exercise and mental benefits. Several studies indicate that the psychological profile of active individuals display enhanced cognitive functioning, decreased cardiovascular responses to stress and reduced levels of anxiety and depression (Fletcher, Balady, Blair, Blumenthal, Caspersen, Chaitman, Epstein, Sivarajan Froelicher, Froelicher, Pina, & Pollock, 1996). Physical exercise is known to improve self-confidence and self-esteem, as well as reduce cardiovascular response to stress (Fletcher et al., 1996). The psychological aspect of wellness has been studied extensively and various models have been developed in an effort to conceptualise wellness.

In summary, maintaining a healthy lifestyle of fitness, flexibility and strength through a healthy exercise regime and diet is the central focus of physical wellness. In addition, seeking medical care when necessary and keeping a realistic view of one's own physical capabilities and limits, is essential. Healthy individuals seem to be more capable of coping with stress in the workplace when they are active and follow a healthy diet, and are more productive when they are physically well. Another positive result of increased physical exercise is mood improvement which results in a high level of motivation to perform. The link between individual motivation, health, as well as performance is made clear and the result indicates a possible relationship between healthy employees, absenteeism and motivation.

2.2.2 Mental wellness

Mental wellness is one of seven elements that constitute the modern definition of wellness. This dimension is also known as intellectual or psychological wellness and involves openness to new ideas, as well as concepts. The key aspects of this dimension include the application of knowledge attained through learning, the creation of opportunities to further one's education and constant engagement of one's mind to interact with the environment (Hoeger & Hoeger, 2010). Intellectually well individuals continuously aspire to new challenges and experiences (Edlin et al., 2000).

The focus of this dimension is the part of wellness which is difficult to measure, however it is important for an individual to function effectively and enjoy a good quality of life (Spies, 2005; Bonehill, 2012). A key feature of this research study is that the topic covers both wellness, as well as the factors influencing personal wellness. According to Page and Vella-Brodrick (2009, p. 445) psychological wellness encompasses "a breadth of wellness that includes positive evaluations of one's self and one's life, a sense of continued growth and development as a person, the belief that life is purposeful and meaningful, the possession of good relationships with other people, the capacity to manage one's life and the surrounding world effectively, and finally a sense of self-determination".

Consequently this dimension focuses on the subjective method an individual employs to attaching value to their lives (Hermon & Hazler, 1999; Page & Vella-Brodrick, 2009). Snyder and Lopez (2002) indicate that positive functioning make up six dimensions of psychological wellness, namely: self-acceptance, positive relationships, personal growth, meaning and purpose in life, environmental mastery and autonomy.

In terms of positive psychology, mental health consists of an individual's ability to enjoy life and acquire a balance between life activities, as well as the efforts to achieve psychological resilience. Edwards (2006) conducted a study of physical exercise and psychological well-being, where he describes mental health as implying some experience of psychological wellbeing, referring to a specific theoretical and empirical construct, measuring the integration of a number of psychological components with regard to being well. Mental competence narrates to spheres of learning and growing up, creativity and intuition, as well as searching for meaning and self-fulfilment (Edwards, 2006). The researcher assumes that mental, as well as emotional incapability result from many factors which could also include work related stress.

Gropp, Geldenhuys and Visser (2007, p. 24) state that the "movement in the direction to positive psychology is accompanied by a shift towards the study of psychological wellness". According to Adams et al. (2000) wellness is generally conceptualised as having many dimensions. Despite the interest in psychological wellness, research indicates that little effort has been made in terms of evaluating in what way psychological or mental dimensions are related to overall wellness (Gropp et al., 2007). Kozma, Stones and McNeil (1991) cite in Gropp et al. (2007) that mental wellness is part of a broad field of study that examines the quality of life issues which share common characteristics such as happiness, life satisfaction and morale. Cowen (1994) defines mental wellness as a "potentially fruitful orienting concept that directs attention to a family of genotypically unified phenomena of interest" (Gropp et al., 2007, p. 24). Gropp et al. (2007) note that mental wellness encompasses behavioural markers which include maintaining effective interpersonal relationships and mastering ability-appropriate tasks, also psychological markers which include a sense of belonging and purpose along with control over one's satisfaction and fate.

Ryff's Model (1989) suggests that psychological well-being includes six dimensions of wellness, namely: self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life and personal growth. Coupled with this, the author upholds that a crucial element of psychological well-being is the belief that gives an individual a feeling of purpose and meaning in his or her life. Therefore, specific life goals, intentions and a sense of direction will all contribute towards this feeling, that life is purposeful and meaningful.

In order to explore the multi-dimensional aspect of mental wellness along with the interaction between the different wellness dimensions, researchers like Adams, Bezner and Steinhardt (1997), Jahoda (1958), Seeman (1989), Witmer and Sweeney (1992) and, more recently, Compton (2001) have developed numerous models. Within all these models the following two dimensions are consistent: aspects of the self which include intrapersonal, affective or cognitive behaviour,

spirituality as well as personal growth and aspects of other domains in life which consist of interpersonal, social and contextual, in love and work, within which the self-will manifest in itself (Schepers, Gropp & Geldenhuys, 2006).

Gropp et al. (2007) indicate that mental wellness can be divided into the different aspects of individuals' lives, specifically: the self, cognition, emotions, behaviour, social interaction and value alignments. Furthermore Gropp et al. (2007, p. 25) also suggest that by taking in consideration the different models, it is evident that mental or "psychological wellness is multi-dimensional, with optimal functioning occurring when these dimensions are in balance". As such mental wellness functions constitute a complex system that is subject to change, depending on the time, place and integration of the various dimensions.

Research suggests that health related components such as nutrition, stress perception, endurance, flexibility and heart health, as well as skill related components like speed, power, balance, reaction and aptitude are necessary for health and effective performance of daily functional activities (Vanhees, et al., 2005; Caspersen, Powell & Christenson, 1985; Chen et al., 2002; King et al., 2007). Thus these components contribute primarily to achieving success. Siefken et al. (2012) confirm that the exploration of psychological components of wellness is predominant for mental wellness.

2.2.2.1 Nature and satisfaction of job

Job satisfaction is described as "an affective or emotional response towards various facets of one's job" (Kreitner, Kinicki, & Buelens, 1999, p. 197). Since job satisfaction encompasses an individual's effective response and emotional involvement, it will in turn, have major consequences on their lives. Locke (1976, p. 1311) states that the most common consequences of job satisfaction on individuals, are: "the effects on physical health and longevity, mental health and its' impact on the individual's social life in general".

Csiernik (2005) describes some of these symptoms as physical, cognitive, emotional, as well as behavioural reactions and indicates what each of these encompasses, specifically that: physical includes shock, nausea, fatigue, dizziness and twitches; cognitive comprises of confusion, concentration problems, reduced attention span, problem solving-difficulty and memory impairment; emotional involves anxiety, fear, loss, numbness, a sense of disbelief, identification with the victim, irritability, helplessness and hopelessness; and lastly behavioural encompasses withdrawal or isolation, hyper-alertness, sleep and appetite disturbances. As cited in Van den Berg

(2000, p. 113) stress is considered as “a function of the amount and the pace of change a person is experiencing at any given time divided by the coping skills available to them”.

2.2.2.2 Stress

Zimbardo et al. (2003) describe stress as an individual’s physical and/ or mental state response to stressors perceived as a threat or challenge. The researcher is of the opinion that individuals can experience stress if they have to behaviourally adjust to circumstances or situations. Stress in itself is not negative, as some stress reactions can be of some benefit to an individual. Prolonged threats or challenges that are burdensome to individuals and cause them emotional stress, as well as physical illnesses are called distress (Colligan & Higgens, 2005). Monteiro, Balogun and Oratile (2014) note that an individual’s capability of dealing with stress will differ from person to person as it is dependent upon the individual’s characteristics, experiences, coping mechanisms and circumstances. Therefore what is perceived as stressful for one individual may not be stressful for another person.

According to Spielberger, Vagg and Wasala (2003) occupational stress is well-defined as the mind-body arousal resulting from the physical and/or psychological demands associated with a job. The review of a stressor as threatening leads to the emotional arousal of anxiety and anger, as well as the associated activation of the autonomic nervous system. If it is “severe and persistent, the resulting physical and psychological strain may cause adverse behavioural consequences” (as cited in Rothmann, Steyn & Mostert, 2005, p. 57). As cited in Greenhaus, Callanan and Godshalk (2000, p. 262) stress is “aroused when a person is confronted with an opportunity, a constraint or a demand” (Schuler, 1980).

According to Rothmann et al. (2005), it is important for a person to evaluate his or her work environment in terms of the severity and frequency of occurrence of specific job demands and pressure, as well as the level of support provided by the organization. The failure to consider the “frequency of occurrence of a particular stressor may contribute to overestimating the effects of highly stressful situations that rarely occur, while underestimating the effects of moderately stressful events that are frequently experienced” (Rothmann et al., 2005, p. 57).

Research suggests common causes of workplace stress such as: workload including “unrealistic demands or tight deadlines” which are perceived as “unreasonable or unachievable”; the “nature of the job or the type of work, including problems such as repetitive or monotonous work, lack of clarity, lack of control or the lack of an opportunity for an individual to utilize his or her skills”; the

“long or unsocial working hours”, and finally the lack of “management support” (MacDonald, 2005, p. 19). Likewise Sieberhagen et al. (2009) indicate sources of stress like work pressure, deadlines, competitiveness and conflict affect an individual’s wellness. However the focus on wellness should not only be on factors that affect individuals negatively like stress and strain, but also on the promotion of positive factors of wellness such as good relationships, mutually respectful support, growth opportunities and adequate job or study resources (Sieberhagen et al., 2009).

Hillier, Fewell, Cann and Shephard (2005) indicate that the negative effects suffered by individuals due to workplace stress comprise of: heart disease, mental illness, alcohol misuse, smoking, lack of exercise and carelessness. Therefore, it appears that stress produces a range of symptoms and negative results for individuals. Additionally research shows that individuals who are exposed to continuous and excessive stress experience a decline in cognitive processes and this influences their ability to solve problems (Seligman, 1992). Although a certain amount of stress is important to health and performance, as it results in motivation and good performance, too much stress is counterproductive for high performance and ultimately affects productivity (Hillier et al., 2005).

Stress is a common problem within the domains of wellness and as such the prevention and control of it is an essential component of effectively managing one’s wellness. Dietrich, Abbott, Gartner-Schmidt and Rosen (2008) suggest evidence that chronic stress seems to be on the rise in the modern life. In today’s world an excessive amount of stress contributes to major illnesses and mental health problems (Edworthy, 2000; Sanderson, 2004). Kaplan and Saccuzzo (2005, p. 493) define stress as “a response to situations that involve demands, constraints, or opportunities”. Additionally Kaplan and Saccuzzo (2005) indicate that stress is both adaptive and harmful; it residues adaptive as soon as the individual is capable of dealing with it effectively, thus it serves as a motivational force for achievement. Nonetheless stress can become maladaptive when a person is not capable of handling environmental demands and as a result experiences a significant amount of anxiety (Kaplan & Saccuzzo, 2005).

Different studies have shown that it is the accumulation of multiple stressors that may be particularly detrimental to the psychological wellbeing of students (McMahon & Peters, 1990). That is, while students may be capable of continuing to function effectively with the presence of one or two stressors, when these stressors build up, functioning and psychological well-being may deteriorate rapidly (McMahon & Peters, 1990). Stress can affect an individual’s persistence in education and students who have better stress management skills are more successful in their academics as stress has a negative influence on academic performance (Zajacova, Lynch, &

Espenshade, 2005). Ballentine (2010, p. 3) states the importance for “students who are transitioning” to university or college “to take care of themselves physically” as illness or a “lack of fitness may contribute negatively to academic performance”.

Love et al. (2006, p. 1) state that at “an individual level, work related stress” can contribute to “mental disorders”, where “poor mental health can include low self-esteem, job dissatisfactions, job-related tension, anxiety, depression, nightmares, insomnia, alcoholism and drug abuse”. Research conducted by Jackson, Rothmann and Van de Vijver (2006) indicate that stress and exhaustion result in ill health, as well as mental distance. Jackson et al. (2006) found that burnout is also related to health problems as a result of high job demands.

2.2.2.3 Burnout

Burnout is described as a tenacious, negative, work-related state of mind or syndrome that develops in ‘normal’ individuals, characterized by an array of physical, psychological and attitudinal symptoms, chiefly exhaustion, and escorted by distress, a sense of decreased effectiveness, reduced motivation and the development of dysfunctional personal, as well as societal attitudes and behaviours at work (Schaufeli & Enzmann, 1998). This psychological condition “develops gradually but may remain unnoticed for a long time by the individual involved” (as cited in Rothmann et al., 2005, P. 55). Kreitner et al. (1999, p. 511) state that burnout is “a chronic affective response to very extreme demands from the work environment, especially pressure and conflicts arising from direct contact with and care of other people”.

As cited in Kreitner et al. (1999), the fundamental premise underlying the model is that burnout develops in phases, to be precise: firstly emotional exhaustion due to the combination of personal and organizational stressors; secondly depersonalization which is a state of psychological withdrawal from one’s job, hence the victims treat the individuals they serve more like objects and less like humans; and thirdly the feeling of a lack of personal accomplishment, unappreciated, ineffective or inadequate. Research specifies that the additive effect of these three phases has a host of negative attitudinal and behavioural outcomes. Greenhaus et al. (2000, p. 274) state the consequences of burnout on an individual, namely: “negative emotions, interpersonal friction, withdrawal, poor health, declining job performance, substance abuse and feelings of meaninglessness”.

2.2.2.4 *Work-family balance*

The management of work and personal lives poses a substantial challenge, as well as the need for separation of work and family, where neither of these roles will interfere with each other. Cooper (2005) suggests that we embrace new technology and stop feeling guilty about not being in the office all the time. Greenhaus and Beutell (1985) developed a model that explains work-family conflict, specifically the existence of work-family conflict as a result of pressures from work and family roles being mutually irreconcilable. Thus participation in one role will be made more difficult by virtue of participation in another role.

According to Greenhaus et al. (2000, p. 291) work-family conflict is related to time and behaviour. In terms of time, if individuals spend time in one role, they cannot devote time to another role at the same time (Greenhaus et al., 2000). As such this is common for individuals who work for long hours and travel. With regard to behaviour, it may be effective in one role but out of place in another role. For instance an employer may expect an individual to be self-reliant, forceful, detached, and objective while family members on the other hand expect the individual to be affectionate, nurturing, emotional and human in their relationships with them (Greenhaus et al., 2000).

This consists of a life outside the work environment and gaining the necessary support from the organization they work for so as to handle personal responsibilities when necessary. One can infer that balancing ones' work life has a significant impact on an individuals' wellness and seems to be increasingly difficult to accomplish. The two roles demand one scarce commodity, to be specific, "time". Research suggests that within South Africa, family structures have changed significantly and thus the wellbeing of the labour force is dependent upon the support and resources in an individual's work and family environment, thus assisting them in maintaining a balanced lifestyle (Anderson, 2008).

2.2.2.5 *Life satisfaction and social activity*

Schaefer et al. (2007) highlight the importance of psychological wellness and ascertain the links between life satisfaction and the dimensions of wellness. The study determined that in terms of the impact on life satisfaction, social wellness had the greatest influence followed by psychological wellness and thus social activity influences both psychological wellness and life satisfaction. Through socialising with friends and colleagues, individuals enhance their psychological wellness while engaging in conversation or venting (Hermon & Hazler, 1999; Schaefer et al. 2007; Adams et

al., 2000). Considering today's fast paced, demanding and ever changing world, this is a critical discovery as employed individuals are required to work long hours and travel, thus rarely having time to socialize.

The quality of the relationships is also very important because individuals who have healthy and supportive relationships, experience greater psychological wellness (Schaefer et al., 2007). Therefore relationships with little control can significantly affect the psychological wellness of an individual. Similarly the quality of relationships has a substantial influence on psychological wellness and the way in which relationships are perceived determines their quality. The findings of the study conducted by Adams et al. (2000) support the notion that the quality of relationships affects an individual's psychological wellness. It is assumed that individuals can greatly enhance their psychological wellness through an appropriate social network or support system. Page and Vella-Brodrick (2009) indicate that prior to an individual experiencing this enhancement, it is essential that social networks are present inside and outside the organization, as well as that they are of a high enough quality to provide effective support (Page & Vella-Brodrick, 2009).

Beyond specific physical and psychological symptoms or diagnoses relevant to health, wellness should include context free life experiences like satisfaction or happiness. Subjective well-being has been branded as life satisfaction as researchers have discovered that this subjective form of happiness is a global assessment of the quality of an individual's life guided by an individual's own set of criteria. Especially when determining what leads to the positive evaluation of life. Ryan et al. (2009) indicates that the Basic Psychological Needs Theory (BPNT) elaborates on the concept of basic needs through the direct wellness connection with them.

Along with this Ryan et al. (2009, p. 2) states that the Basic Psychological Needs Theory (BPNT) postulates that "each need exerts independent effects on wellness, and moreover that the impact of any behaviour or event on wellbeing is largely a function of its relations with need satisfaction". According to literature total need satisfaction forecasts individual differences in health, wellness and within individual fluctuations in wellness. According to the Goal Contents Theory (GCT) goals such as "intimate relationships, personal growth, or contributing to one's community are conducive to need satisfaction, and therefore facilitate health and wellness" (Ryan et al., 2009, p. 2).

Ballentine (2010) confirms that comparable research has demonstrated that positive work and leisure activities have a direct link to psychological well-being. Hermon and Hazler (1999, p. 341) study supports this as it revealed that "the variables of self-regulation and work, recreation, and leisure of the wellness model seem to be the best predictors of a university students' psychological

well-being” (Hermon & Hazler, 1999, p. 341). As such students who experience unhappiness with aspects of their lives related to work or recreation, experience difficulty in concentrating and thus their performance is affected.

2.2.2.6 *Personality and effectively functioning*

Dolbier, Soderstrom and Steinhardt (2001) are of opinion that only by allowing the appropriate aspect of an individual’s personality to lead, will the individual be able to function effectively. Research done by MacGregor, Cunningham and Caverley (2008) discovered that employees attend work while sick because they feel compelled to go to work, experience feelings of insecurity or have too many work demands. This results in presenteeism which Hargrave Hiatt, Alexander and Shaffer (2008, p. 284) describe as “...being on the job but having impaired functioning due to mental or physical symptoms”.

Research suggests that health related components such as nutrition, stress perception, endurance, flexibility and heart health, as well as skill related components like speed, power, balance, reaction and aptitude are necessary for health and effective performance of daily functional activities (Vanhees, et al., 2005; Caspersen et al., 1985; Chen et al., 2002; King et al., 2007). Thus these components contribute primarily to achieving success. Siefken et al. (2012) confirm that the exploration of psychological components of wellness is predominant.

The focus of an individual’s attention will limit the amount and type of information he or she would process. Nakamura and Csikzentmihalyi (2002) provide evidence of this through the indication that entering flow is to a large degree the product of what a person can and will focus his or her attention on at any given time. Along with this, it is evident that remaining in a state of flow necessitates that attention be maintained and held by the stimulus field in which the flow is being found (Nakamura & Csikzentmihalyi, 2002).

2.2.2.7 *Motivation and goals*

Motivation is viewed as and is observable within an individual’s behaviour. Benson (2008, p. 4) defines motivation as “an individual’s internal drive required to complete a task” in addition to his or her skills and available resources. Linder (2009) states that motivation is goal orientated and individually driven by an internal force that provides direction, as well as purpose to an individual’s behaviour. It is seen as the will to achieve, thus an inner force that energizes individuals to achieve their personal goals (Linder, 2009). Clark (2003) suggests that performance is the result of an

individual's capability and motivation. It would seem that motivation is known as an internal drive to accomplish a goal that will fulfil an individual's internal need and a state of arousal that directs one's behaviour to achieve specific goals which are important to him or her.

The researcher is of the opinion that one is willing to invest energy in a task or activity if he or she perceives the outcome to be worthwhile. Manolopoulos (2007) describes internal motivation as an individual performing an activity so as to acquire motivation because it seems to be self-sustained and self-defined. Amabile and Kramer (2007) state that one's motivation and performance has an impact on his or her perceptions, emotions and motivation for work. Healthy individuals have better self-perception; more energy and accordingly the ability to effectively deal with demands (MacLean, 2008).

Miller et al. (2008) conducted a study at a school which aimed at increasing student's physical and mental wellness, in which hope and optimism were the focus of the study. The findings of the study revealed that hope and optimism were directly related to goals (Miller et al. 2008). Snyder, Lopez, Shorey, Rand and Feldman (2003) indicate that a number of steps are followed in order to enhance hope and optimism through goals. These include: setting the goals, breaking the goals down in sub goals and lastly selecting the goals that are important to the individual (Snyder et al., 2003). By following these steps, an individual achieves goals that are manageable and prioritized, which permits the individual to progress towards the end goal and at the same time enhances their confidence as they obtain the psychological benefits from achieving their goals.

The study by Miller et al. (2008) suggest that if an individual was to achieve personal milestones, no matter how small, many elements of that individual's life, for instance hope, optimism, autonomy and self-esteem would be enhanced. As a result of this the individual's physical wellness and ultimately their overall wellness would be enhanced. As such goals are influential on an individual's mental wellness.

2.2.2.8 Perception and attitude

The researcher assumes that perception constitutes an individual's private reality and it is an essential determinant of what influences a person and the way in which he or she acts. Depending on the perception of the individual concerned, each of the different factors can have different influences on wellness. The researcher believes that a greater understanding of what constitutes and affects psychological wellness can be determined. Adams et al. (2000) investigates what constitutes psychological wellness and its most significant influence. The findings of their study

have formed a vital part of this literature study on mental wellness. One of the most important findings of the literature review was the following comment: ‘...that perceived support rather than received support has the most powerful influence on health’ (Hatteberg, 2014).

Additionally, the stress literature suggests that “perceptions of internal resources enable individuals to survive and thrive under conditions of extreme stress” (Adams et al., 2000, p. 164). This is critical because of its translation for the working and studying individuals within an organisation – the support structures and resources may be available, but it is the manner in which they are perceived that will determine whether it assists with psychological wellness or reduces it. Hermon and Hazler (1999) indicate a critical element of psychological wellness which is a sense of control. This element has a substantial influence on individual wellness.

As cited by Adams et al. (2000, p. 167) “a sense of control is where an individual continues through a dynamic feeling of confidence” where, both his or her “internal and external environments are predictable” and there is a “high possibility that things will work out as expected”. Both the studies of Hermon and Hazler (1999) and Adams et al. (2000) view sense of control as a key element in an individual’s psychological functioning. The researcher understands a sense of control as an individual’s ability to control themselves, as well as their emotions (Hermon & Hazler, 1999). This ability has been underlined as one of the critical components of psychological wellness. When one considers this aspect of psychological wellness closely, it becomes clear as to why it is important. For an individual to function effectively he or she needs to be able to feel in control of their world and be able to regulate themselves (Dolbier et al., 2001). It is not always possible for individuals to continuously possess a sense of control and hence their psychological wellness can be at risk.

2.2.2.9 Purpose and meaning

Myers and Sweeney (2005) indicate that another factor described by the concept wellness is an individual’s capability in creating meaning of processes in relation to his or her life, which can involve things like self-identity, cultural identity, self-care, and spirituality. Ballentine (2010) is of the opinion that other elements associated to the essential self may disturb a student’s capability to cope with the university environment. A research study that focused on authenticating the coping with the university environment suggests that spirituality comprised one of six areas that had a significant contribution (Ackerman & Morrow, 2007). Likewise Koenig (2001) demonstrates that individuals with higher levels of spirituality have enhanced social relationships and coping skills. Spirituality also has a direct association with academic results. George, Dixon, Stansal, Gelb, and

Pheri (2008) explore factors that contribute towards academic success and grades, and confirm the existence of a positive relationship between greater spirituality and overall academic results.

The spiritual component includes life purpose. A study by Adams et al. (2000) reveals life purpose has an effect on perceived wellness, as it is regulated by the psychological elements of sense of confidence and control. As such an individual demonstrates optimism when he or she has a positive outlook on life and believes that he or she can effectively deal with situations and circumstances. The main finding of the study was that life purpose is an element of spiritual wellness. Additionally, Adams et al. (2000) indicate that confidence in turn influences whether or not an individual has a sense of control. Consequently if individuals have a positive outlook, the belief that they can control not only their environment but also themselves will be much stronger and in turn impact their experience of having a life purpose that will, along with the psychological wellness components, influence their perceived wellness.

2.2.2.10 Coping and support

According to early research, the importance of the capability to constructively express, manage and integrate one's feelings is revealed (Hettler, 1980). Crose, Nicholas, Gobble and Frank (1992) include coping as a component of emotional wellness within their model and similarly other models of wellness have also highlighted the importance of managing one's feelings in a given situation (Roscoe, 2009). An individual may appraise a situation as both positive along with threats and thus adopt coping mechanisms in a more subconscious manner, for instance eating more without realizing the reason for doing so.

Ballentine (2010) states that the concept of managing stress through coping skills has also been applied to higher education and an increase in stress contributes to individuals' academic performance, as well as their choice of whether to remain at an institution. As such this may also be true for working student's transitioning from university to the work environment. Those working students who cannot manage the change in environment may experience difficulty in coping (Wang, Chen, Zhao & Xu, 2006). Additionally, research indicates that students frequently engage in unhealthy behaviours such as overeating, excessive alcohol consumption, smoking and substance abuse as a response to the increased levels of stress (Pritchard, Wilson & Yamnitz, 2007).

Furthermore, individual coping strategies can also have a positive impact on the transition from university to working and studying simultaneously. Wang et al. (2006) gathered data from students

in an attempt to determine how coping and social support affected the transition from high school to college and the findings suggest that students who had well-developed individual coping strategies or mechanisms experienced a faster transition. Moreover social and institutional support relevant to the development of coping mechanisms would be beneficial to students (Wang et al., 2006). Likewise Clifton, Perry, Roberts and Peter (2008) explore the relationship between psychological dispositions and academic achievement in university students and conclude that coping mechanisms or strategies had a significant impact on the individuals' academics.

Coping mechanisms or strategies that are highly developmental will permit working students to cope and manage the increased stress that accompanies the transition into a new environment. Research provides evidence that students lacking the ability to manage their emotions are more likely to experience lower grades related to poor psychological wellbeing (Sinclair & Myers, 2004). This statement signifies the capability of an individual to be comfortable with his or her self, as well as cultural and spiritual identity. According to research, students with concerns in these areas have increased stressors and thus may be unable to concentrate on other areas like academic performance (Evans & Broido, 1999; Zubernis & Snyder, 2007).

2.2.2.11 Substance abuse

The researcher concurs with reference to Sinha (2008), as well as Coffey and Brumback (2006) that substance abuse can increase the likelihood for psychiatric disorders, including conduct, mood and anxiety disorders. According to South African Community Epidemiology Network on Drug Use (SACENDU) reports, student substance abuse is associated with academic difficulties, declining grades and dropouts (SACENDU, 2002b). Therefore, although substance abuse as such is related to serious behavioural problems, the effects related to it are also of a serious and concerning nature. The psychological factors involved with the etiology of substance abuse are several and involve developmental, personality, affect and cognition, conditioning or learning and familial factors (Bratter & Forrest, 1985).

The researcher notes that many of these factors are not uniquely psychological factors, but may also be classified as social factors. Research indicates that many individuals are likely to use and abuse substances as an escape from the unpleasantness of their lives. As such, this indicates that abuse of substances will not only be determined by the pharmacological, euphoric effects created by the substances but also the escape from pain, stress, panic and anxiety that different substances offer (Barlow & Durand, 1999). Accordingly the development of substance abuse is related to both the event and the after effect.

It is assumed that the relationship between substance abuse and psychological wellbeing is of a complex nature and thus a bio-psychosocial model is often adopted when looking at the dynamics of wellbeing (Tarter, 2002). As such Tarter (2002), as well as Green and Shellenberger (1991) utilised a bio-psychosocial model that views wellness as a result of the interaction of three factors, namely: (1) biological factors which include genetics, environmental factors that impact physiological functioning and behaviours such as exercise, diet and smoking; (2) psychological factors which consist of managing stress, life goals, perceptions, feelings, personality, health and sickness behaviours; and lastly (3) social factors which involve all social systems influencing the individual e.g. their family, colleagues, work, social values and customs.

Blum (1987) reveals that the effect of smoking cessation leads to better psychological wellness, cognitive functioning, energy levels and sleep adequacy. Therefore individuals who stop smoking will have improved psychological wellness. Numerous studies found correlations between emotional or behavioural problems and substance abuse. Armstrong and Costello (2002) support this, indicating that environmental factors account for large proportions of the risks for substance use and psychological, as well as biological factors seem to be more influential. Tarter (2002) notes that low psychological self-regulation, which encompasses facets of cognition; affect and behaviour are temperament and natural. As such Tarter (2002) infers that cognition, behavioural factors and emotional factors all play an integral role in the initiation of substance abuse.

Consequently, substances are often used to self-medicate pre-existing psychological symptoms, or as a coping mechanism for psychological distress (Ford, 2001). The Tension Reduction Theory acknowledges that psychological characteristics can hinder functioning and impact poorly upon an individual's quality of life which in turn may direct them to use substances and thus risk behaviour is related to an individual's psychological factors, e.g. self-esteem, locus of control, the need for acceptance, anxiety levels and sensation seeking (Shiel, 1999).

Visser and Routledge (2007) indicate a relationship between substance abuse and mental wellness. According to Visser and Routledge (2007, p. 609) individuals who "reported excessive alcohol and drug use had significantly lower levels" of mental wellness. According to South African statistics, alcohol is the most common form of substance abuse (Parry, Meyers, Morosely, Flisher, Bhana, Donson & Pluddeman, 2004; Visser & Routledge, 2007). South African research has also revealed that substance abuse among young individuals constitutes a significant health and social problem (Flisher, Parry, Evans, Lombard, & Muller, 2003; Visser & Routledge, 2007).

2.2.2.12 Emotions

Desai (2009) affirms that loss or bereavement is strongly related to depression and anxiety. Thus the greatest fear of an individual is to experience a loss of something that is very important to them. Nonetheless Desai (2009) argues that one in six people are likely to experience a mental health problem which makes these problems a common feature in the organisation. This is supported by Sieberhagen et al. (2009) through the study conducted in 1998, where the findings indicate that mental health disorders in the Netherlands comprise the largest diagnostic group for work incapacitation, followed by musculoskeletal disorders. The causes of these mental health problems vary from relationship breakdowns, financial problems and change in circumstances.

Additionally the Health and safety commission projected that 13.4 million days off work in a single year were due to stress, anxiety and depression, and that a third of all sickness absence was accredited to mental health issues (MacDonald, 2005). Therefore a critical part of maintaining mental and emotional wellness, as well as a vital factor to ensure effective functioning and the achievement of results is that of maintaining good health. The researcher believes that individuals experiencing mental health problems within an organization require support as they can easily become isolated from their colleagues. It is therefore essential for employers, as well as other colleagues to engage with the individual experiencing the distress through a variety of strategies, e.g. supervisory support, time out or assistance programs like counselling.

2.2.2.13 Physical exercise

Most studies highlight a positive relationship between physical exercise and mental health or emotional well-being in improving symptoms of depression and anxiety. However this can vary depending on the mode of activity, for example aerobic exercise is known to combat psychological stress and depression (Haby et al., 2012; Siefken et al., 2012). Haby et al. (2012) also indicate that the intensity at which the exercise is performed also impacts stress reduction. Drastically increasing or decreasing the intensity, has significant stress reducing effects. Several studies indicate the emotional wellness benefit of partaking in physical exercise, specifically helping to reduce symptoms of depression and anxiety, as well as improving one's mood (Kickbusch & Payne, 2003). A study conducted on older individuals demonstrated that a resistance training program performed three times a week resulted in a significant improvement in mood and a reduction in confusion, anger and tension (Kickbusch & Payne, 2003).

Although physiological indicators like body composition and physical fitness are likely to influence the type and extent of physical activity pursued, it does not solely constitute the reason for being physically active, rather it is assumed that psychological factors like cognitive and personality constructs are more likely to impact physical activity behaviour (Chen et al., 2002). This is a reflection of the multi-dimensional nature of wellness and emphasises the notion that no one dimension can be considered superior to another. Physical exercise has a significant influence on all dimensions of wellness (Haby et al., 2012; King et al., 2007).

2.2.3 Social wellness

There are various interpretations of social wellness. Brand (2009) suggests that social wellness has been defined as comprising of two dimensions, namely: environmental wellness and social awareness. Environmental wellness focuses on environmental issues like pollution - solid waste, air and water pollution, as well as global warming, while social awareness is focused on the appraisal of an individual's circumstances and functioning in society (Botha & Brand, 2009). Social wellness refers to the efficacy by which an individual is capable of performing his or her role in a social construct. It is referred to as the ability in performing social roles effectively, comfortably and without harming other individuals, as well as accepting others and sustaining healthy relationships (Botha, 2007). Consequently social wellness is about the recognition of the need for leisure and recreation and budgeting for such activities. This denotes the ability to effectively and comfortably perform social roles without causing harm to others.

Renger et al. (2000) confirm that social wellness includes getting along with others, while being comfortable, the willingness to express one's feelings, supportive and fulfilling relationships and the interaction with the social environment with its contribution to one's community. May (2007) adds peer acceptance, attachments or bonds with other individuals and social skills such as communication, assertiveness and conflict resolution, as key elements of social wellness. Therefore social wellness relates strongly to the level of communication skills and comfort level one feels in interacting with others within a variety of different settings or situations. Likewise Helliwell (2005) notes essential elements, such as the ability to uphold intimacy, accepting others that differ from oneself and cultivating a support network of caring friends and family members.

2.2.3.1 Social activity

A study was conducted in which the different aspects of wellness were investigated and the findings suggest that social wellness takes precedence in order of importance, followed by

psychological, occupational, spiritual and physical wellness (Schaefer et al., 2007). This is also supported by a study in which Schaefer, Plant, Obukhov, Hofmann, Gudermann and Schultz (2000) report that social wellness is described as the most important aspect of an individual's overall wellness, as it has the greatest influence on wellness.

In a study by Schaefer et al. (2007) on university students, an emphasis was placed on the prominence of social activity, indicating that social activity had a significant effect on students' social wellness. This social activity comprised of two aspects: being part of a group and being positively connected to other individuals. The first component necessitates an individual to feel part of a group, thus being accepted for who they are. Schaefer, Plant et al. (2000) indicate that social wellness translated into the need to feel part of numerous groups at the organisation. The second component necessitates an individual to not only feel part of a group, but also the creation of a sense of companionship between the members of the group.

Consequently individuals will have the ability to rely on others for support and relaxation. Both these concepts are also applicable to university students as they are to work with colleagues. Furthermore both aspects of social activity contribute towards friendship between individuals and subsequently increase their social wellness. The majority of individuals thrive in an environment where the need for socialization is fulfilled. Research provides evidence of this through the indication that the element of interaction with other individuals has a large influence on an individual's social wellness (Hermon & Hazler, 1999, Schaefer et al., 2007).

2.2.3.2 Social support

Temane and Wissing (2006) indicate that social wellness is characterized by social support and activity, personal interaction and life satisfaction. According to Myers, Willse and Villalba (2011) social support is divided into two main parts: (1) friendship, which concerns relationships with friends, as well as colleagues and (2) love, which concerns the feeling between individuals. As friendship is an essential element of social wellness, it is imperative that the relationships individual's experience in their working and studying environment is of such a nature that they foster growth and sustain social wellness. If not, the social wellness of the individual will be impeded (Schaefer et al., 2007).

Social well-being within social interactions results in feelings of confidence and emotional security (Janse van Rensburg, Surujlal & Dhurup, 2011). Numerous researchers support this view and have found that feelings of sadness, loneliness, as well as low self-esteem is less likely to be

experienced by individuals who have close and supportive friends, family and colleagues (Botha & Brand, 2009). The main aspect of social support was identified as family support because it has a significant impact on the perceived social support that an individual receives (Myers et al., 2011). If an individual perceives the support they receive as positive, it will improve their overall wellness.

Myers et al. (2011) debates aspects of social support and what is termed to be its most influential components. Social support was not only essential to an individual's social wellness, but to their overall wellness and no other contributing factor of wellness has a greater influence on long term mental health (Myers et al., 2011). It is assumed that a fundamental premise in assisting individuals to cope with stressful situations is the manner in which an individual perceives or appraises a situation, as it determines his or her behaviour. The researcher is of the opinion that support from significant others plays a valuable role in assisting individuals to cope with life's challenges.

Edgar Schein emphasises the importance of significant others as a source of dealing with stress (Havenga & Van Tonder, 2011). Support from others can assist in changing stress environments and safeguard individuals from the harmful effects of stress. Tuck (2005) identifies specific work conditions that contribute to work stress, namely: complexity of the job, work overload, role ambiguity, career development stress and interpersonal stress. Some additional factors include work dissatisfaction, lack of group cohesion and discontent with one's employer (Tuck, 2005).

Additionally, Agneessens, Waeye and Lievens (2006) cite in Botha and Brand (2009, p. 3) that "social support contributes to lower stress levels, emotional and psychological wellbeing, physical wellbeing, health and the longevity of individuals". Equally Myers and Sweeney (2005, p. 27) confirm this through their statement that social support is "positively correlated with both physical and emotional health and provides a buffer against stress". As such the researcher assumes that the support individuals obtain from their family, friends and other social contacts plays a significant role in the way in which they perceive their situation. Social support is a critical element of transition in higher education, as the indivisible self-model described the way in which social wellness factors influence job satisfaction and work performance (Degges-White, Myers, Adelman & Pastoor, 2003; Hutchinson, 1996).

This crucial and basic need is what drives interactions and allows the human race to thrive and grow. As defined by Botha and Brand (2009) social support comprises the availability and quality of an individual's relationships with others along with the amount of positive consideration and assistance received from others. Therefore, it can be inferred that part of social wellness is

developing, as well as building close friendships and intimacy, practicing empathy, effectively listening, caring for others and allowing others to care for you.

2.2.3.3 Coping and substance abuse

Students with increased levels of stress or decreased vents for coping with a changing environment may experience difficulty in the classroom (Astin, 1993; Hermon & Hazler, 1999). The researcher is of the opinion that substance use and abuse contributes major threats to the health of individuals and is the cause of emotional, social, familial and occupational problems. According to Weir-Smith (2001), local researchers have found that substance abuse can be identified as one of the most significant health and social problems in the South African community. Several studies have found that social support is the strongest influence on an individuals' decision to use substances (Williams, 2004).

The social and cultural environment of substance abuse can be divided into two general aspects, namely: the physical environment and the social environment (Huisman & Bruggeman, 2012). Research indicates that individuals resort to drugs and alcohol as a way to escape their problems (Countries, Obot & Room, 2005). Subsequently, it appears that individuals find substance use as a source of comfort. Culture and socio-economic factors can influence substance abuse rates. The positive influence of peers can highlight the negative effects of drug abuse. Despite on-going research providing information on the devastating effects of substance abuse, individuals continue to misuse and abuse these substances (Williams, 2004).

The researcher assumes that alcohol can be regarded as the most commonly abused substance. Studies confirm that one in every 13 individuals throughout the world abuse alcohol or are in fact alcoholics (National Institute on Alcohol Abuse and Alcoholism [NIAAA], 2000). Weinberg (2001) states that alcohol intake is a significant problem for 10-20% of the student population. South African statistics report that alcohol is the most common form of substance abuse (SACENDU, 2002b).

In five major studies done amongst young people in South Africa (Flisher, Ziervogel, Chalton, Leger & Robertson, 1993a; Parry et al., 2004; Rocha-Silva, de Miranda & Erasmus, 1994; Weir-Smith, 2001), it was discovered that a fair degree of risk proneness to alcohol related problems had been established and regular use of alcohol (at least once a week) was common among the older age group (18-21 years). Herwig-Lemp (1996, p. 26) maintains that "there is no single overarching theory behind alcoholism and drug addiction; instead there are a plethora of

incomplete descriptions and explanations”. Subsequently the majority of research on substance abuse focuses on alcohol, specifically due to the fact that alcohol is the most available and legal substance.

2.2.3.4 Relationships

Janse van Rensburg et al. (2011) point out that social wellness can be associated with developing and maintaining meaningful interpersonal relationships. Likewise Shurts and Myers (2005) note an association between wellness and an individual's ability to initiate, as well as maintain these relationships. As such social wellness can be rated as the quality of an individual's network of professional and personal relationships (Farrell & Geist-Martin, 2005). This tendency supports the view that human beings are inherently seeking companionship and that the quality of individual relationships has a substantial impact on an individual's social and overall wellness.

Research confirms that relationships constitute a key component of social wellness and the quality of these relationships can affect the wellness of an individual to a large extent (Farrell & Geist-Martin 2005; Hattie, Myers & Sweeney, 2004; Myers et al., 2011; Schaefer et al., 2007). The National Collaborating Centre for Determinants of Health (2010) also emphasises the significance of relationships and the quality of one's social network, especially family. Similarly Ballentine (2010) indicates that the dimension of social wellness appears in several models which emphasise the importance of social relationships and how they lead to a healthier life (Hettler, 1984; Ardell, 2005).

Myers and Betchel (2004) applied the Indivisible Self Model to higher educational studies and revealed that lower wellness scores are related to fewer social relationships and increased stress in university students. In addition, Shurts and Myers (2005) note that increased overall levels of wellness may be associated with successful social relationships. According to Grant (2007), it is evident that healthy interpersonal relationships at work have a positive impact on motivation as it creates a supportive environment which in turn generates a sense of belonging. Therefore when individuals feel better, they are able to relate better and deal more efficiently with their job demands (Tietjen & Myers, 1998). When they relate better, the general atmosphere is better which in turn results in higher job satisfaction and a deep sense of motivation (Tietjen & Myers, 1998).

Studies have found that the socialisation of university and faculty members have a substantial effect on student persistence success, as such members may have a profound effect on the performance of a student through guidance and mentoring (Astin, 1993; Educational Policy

Institute, 2004; Tinto, 1987b). Hence those individuals who are capable of navigating a social network at their higher educational institutions experience feelings of higher self-esteem and a positive outlook, as they experience a sense of belonging, yet it is essential to take into account the quality and frequency of the interaction (Ballentine, 2010).

Therefore the majority of research that is associated with the transition to university highlights the necessity of social integration and thus students who are capable of establishing lasting social relationships are more successful. Negative relationships on the other hand are related to bigger health problems. Studies conducted by Edwards, Hershberger, Russell and Markert (2001), investigate the effects of positive and negative social interactions among students. It was discovered that negative social interactions led to a larger number of physical health problems and were related to lower physical wellness (Edwards et al., 2001). This demonstrates the link between social and physical wellness and indicates that the extent of relationships is impacted by an individual's motivation and action. The stronger an individual's social network, the better their health.

Furthermore Helliwell (2005) examines the nature of interpersonal styles and patterns, focusing on an individual's attitude towards relationships, as well as their willingness to seek help from others. Hoeger and Hoeger (2010) state, that an individual's sense of self allows them to display respect and tolerance towards others, thereby enabling them to uphold close relationships with other individuals. As such social wellness involves the concern for oneself, humanity, as well as the general environment and is hallmarked as the capability to interact with and relate to others.

2.2.3.5 Community and environment

According to recent research, the term wellness includes social relationships, mental well-being and satisfaction with the surroundings (Larson, 1999; Myers & Sweeney, 2005). The researcher assumes that social wellness is associated with contributing to one's human and physical environment and to the shared welfare of an individual's community. This is supported by Leafgren and Elsenrath (1986), as they indicate that the outcomes of social wellness lend itself to an individual's human and physical environment which includes the common welfare of one's community.

Botha (2007) encourages an individual to contribute to his or her human and physical environment and highlights the interdependence with other individuals and nature. Additionally, social wellness integrates the interdependence among individuals with nature and the pursuit of harmony within an

individual's family (Leafgren & Elsenrath, 1986). Furthermore Botha (2007) notes that in order to achieve optimal health and wellness, it is vital for individuals to live in a high quality environment and prevent the deterioration of our planet through the depletion of environmental resources and pollution.

2.3 STUDENT WELLNESS

Research indicates that studies have scrutinized wellness within the college population. For example, Hermon and Hazler (1999) utilised the wheel of wellness and conducted an investigation on the relationship between college students' perceived well-being and the quality of their lives. In addition to this, Adams et al. (2000, p. 166) "tested a model of wellness" which was founded on three principles, namely: (1) "multi-dimensional", (2) "balance among the dimensions" and (3) "salutogenesis (defined as causing health rather than illness)". Consequently, the results of the study specified that "an optimistic outlook and sense of coherence must be present for an enhanced life purpose and a sense of overall wellness" (Adams et al., 2000, p. 165).

Additionally Leonard and Hilgert (2004, p.109) state that: "...interestingly, the third most powerful factor driving commitment is worker's sense of affiliation or connectedness on the job, just behind safety and security, as well as pay and perks". Therefore this is related to a student's commitment to his or her studies along with a sense of affiliation and connection. Understanding student wellness plays a significant role in assisting working postgraduate individuals in coping with the factors influencing their wellness and guiding them through transitional phases so as to attain feelings of satisfaction, security and a sense of belonging.

The wheel of wellness was also employed by Myers et al. (2003) in order to evaluate wellness within the college student population. The results indicate that counselling students experience greater wellness than the general population (Myers et al., 2003). Later the wheel of wellness was tested on adolescent participants and the findings suggest that undergraduate students experience lower levels of wellness than non-students (Myers & Mobley, 2004). Therefore in terms of college students, previous researchers applied the wellness wheel and evaluated the perceived levels of wellness. Still, limited research exists on the factors influencing working students' wellness. Spurr (2009) summarises a continuum of college student wellness research in Table 1 below.

Table 1: A continuum of college student wellness research

1999	Hermon & Hazler: significant relationship between the five dimensions of the wheel of wellness and psychological well-being.
2000	Adams at al.: an optimistic outlook and sense of coherence must be present for life purpose to enhance wellness. Diener: the criterion for well-being was subjective well-being as it allowed individuals to decide what was important in their life.
2003	Myers et al.: counselling students experienced greater wellness than the general population. Hartwig & Myers: no significant differences between delinquent and non-delinquent students in relation to wellness and family environment.
2004	Myers & Mobley: undergraduate students experienced lower levels of wellness than non-students.

Source: Spurr (2009, p. 29)

2.4 BENEFITS OF ATTAINING AN OVERALL SENSE OF WELLNESS

Wellness involves making smart decisions and healthy choices which in turn results in reduced health care costs, increased vitality and diminished absenteeism. Additionally wellness is known to “boost productivity and performance, increase individual health, reduce stress and cut health-care costs”, as well as “improve morale, increase work satisfaction and reduce disability, as well as absenteeism” (Dursi, 2008; “Organisational wellness vs employee wellness”, n.d., p. 1). Research supports this by indicating that many benefits arise from being healthy, specifically: higher performance, reduced non-attendance and less overtime which will in the future reduce an individual’s health related costs (Skinner & Chapman, 2013). Likewise Blake and Lloyd (2008, p. 450) also point out some of the benefits, including: “improved physical and mental health, reduced absenteeism and rates of accidents, as well as injuries, improved morale, motivation and work performance or productivity, and reduced occupational health care costs”.

Similarly, through the effective management of wellness, one can prevent injury and illness as individuals are more alert and an increase in morale will arise along with increased motivation and performance (Green, Malcolm, Greenwood & Murphy, 2001; Matlhape, 2003). Cooper and Robertson (2001) report that within the overall wellness category, it is elucidated that engagement which comprises a combination of cognitive and emotional variables in the organization generates a higher frequency of positive effect such as work satisfaction, commitment, joy, fulfilment, interest and care. Subsequently positive effect lends itself to the efficient application of work. McGillivray (2005) indicates that healthier individuals are happier and more productive.

Based on research, studies prove that greater wellness constitutes “giving good care to your physical self, using your mind constructively, expressing your emotions effectively, being creatively involved with those around you, and being concerned about your physical, psychological and spiritual environments” (Gregoire & Jungers, 2007, p. 645). From this continuum it is evident that even though “an individual demonstrates an adequate level of fitness” when he or she is assessed, “indulging in unhealthy lifestyle behaviours will increase the risk of developing chronic diseases” and thus diminishing the well-being of that individual (Hoeger & Hoeger, 2010, p. 14). As such, lifestyle accounts for the most important influence on wellness.

Spiegelhoff (2012) confirms that life is a process and one’s wellness is reliant on the way in which the individual manages his or her energy. Adjustments to lifestyle include changing one’s diet, as well as exercise routines and daily habits so as to fulfil all dimensions of wellness. Studies demonstrate that individuals who maintain a healthy lifestyle through regular exercise and healthy eating are generally in better health. Poor health, on the other hand, can result in lower performance and productivity and a decrease in morale. This will have an effect on an organization or task at hand, as absence or non-appearance of unhealthy individuals intensifies the stress and work load for others who are present at work or university and thus in turn affects their morale. Individuals who maintain their wellness will have improved moods, attitudes towards work and studies, sleeping patterns, eating habits and an overall sense of wellness. Research indicates a clear link between wellness, productivity and performance, especially in organizations (Hillier et al., 2005; McGillivray, 2005; Thogersen-Ntoumani & Fox, 2005).

The premise of attaining a sense of wellness is to cope despite the external influences. Research indicates that higher levels of coping skills, spirituality, physical fitness, partaking in social activity and creativity are all related to higher university academic grades (Clifton, et al., 2008; George, et al., 2008; Richards & Casey, 1975; Tinto & Goodsell, 1993; Turbow, 1985). Myers and Sweeney (2005) specify that the concept of wellness includes many non-academic factors that are also related to academic success and performance, namely: the capability of coping with stressful situations, creativity, self-identity, physical wellbeing and supportive relationships.

Furthermore, as cited in Sterling et al. (2010), wellness has an effect on seven distinct facets, namely; mental, emotional, physical, social, intellectual, environmental and spiritual wellness (Mackey, 2000). Panepento (2004) supports this through the indication that when individuals feel physically and emotionally better they perform better and thus are able to deal with their stress more effectively. Similarly Hillier et al. (2005) suggest that when attention is given to individuals’ quality of life, it results in increased performance and job satisfaction as they perform better, have

enhanced resilience levels and an increased capability to think, as well as focus better. Anderson (2008) and Hunt (2008) highlight the importance of creating an environment that fosters healthy lifestyles which will result in healthier individuals functioning at a higher level, a positive attitude, improved morale and engagement, as well as job satisfaction. It appears that individuals with a higher quality of life are healthier.

Kelly, Holbrook and Bragen (2005, p. 191) state that “true wellness is achieved by attending to all areas of life” which includes “physical, mental, spiritual, emotional, social, environmental, and occupational” in order to “optimise performance, reduce the risk of illness, and improve communication and awareness”. Gropp et al. (2007) maintain that optimum wellness is only obtained when a spiritual and personal balance in each of the six interrelated dimensions exists. McGillivray (2005) also suggests that individuals will benefit, by establishing health-conscious environments inside and outside their workplaces. Each of the elements described in the definition of wellness, specifically physical, mental and social, are influenced by a number of factors such as the working environment, nature of work, personality of individuals, stress and levels of tolerance, support, lifestyles, mind-sets, perceptions, attitude, social activity and physical exercise. Hence this research study fills a gap in research with regard to the factors affecting personal wellness of postgraduate working students.

SUMMARY

This chapter described the various perspectives and relevant literature pertinent to the research study. As such an overview of wellness was provided. Thereafter the researcher discussed the current literature in terms of the three main dimensions of wellness, namely: physical, mental and social wellness. Along with this, student wellness and the benefits of obtaining an overall sense of wellness was discussed.

Chapter 3 provides a detailed discussion of the design and methodology used within the study.

CHAPTER 3:

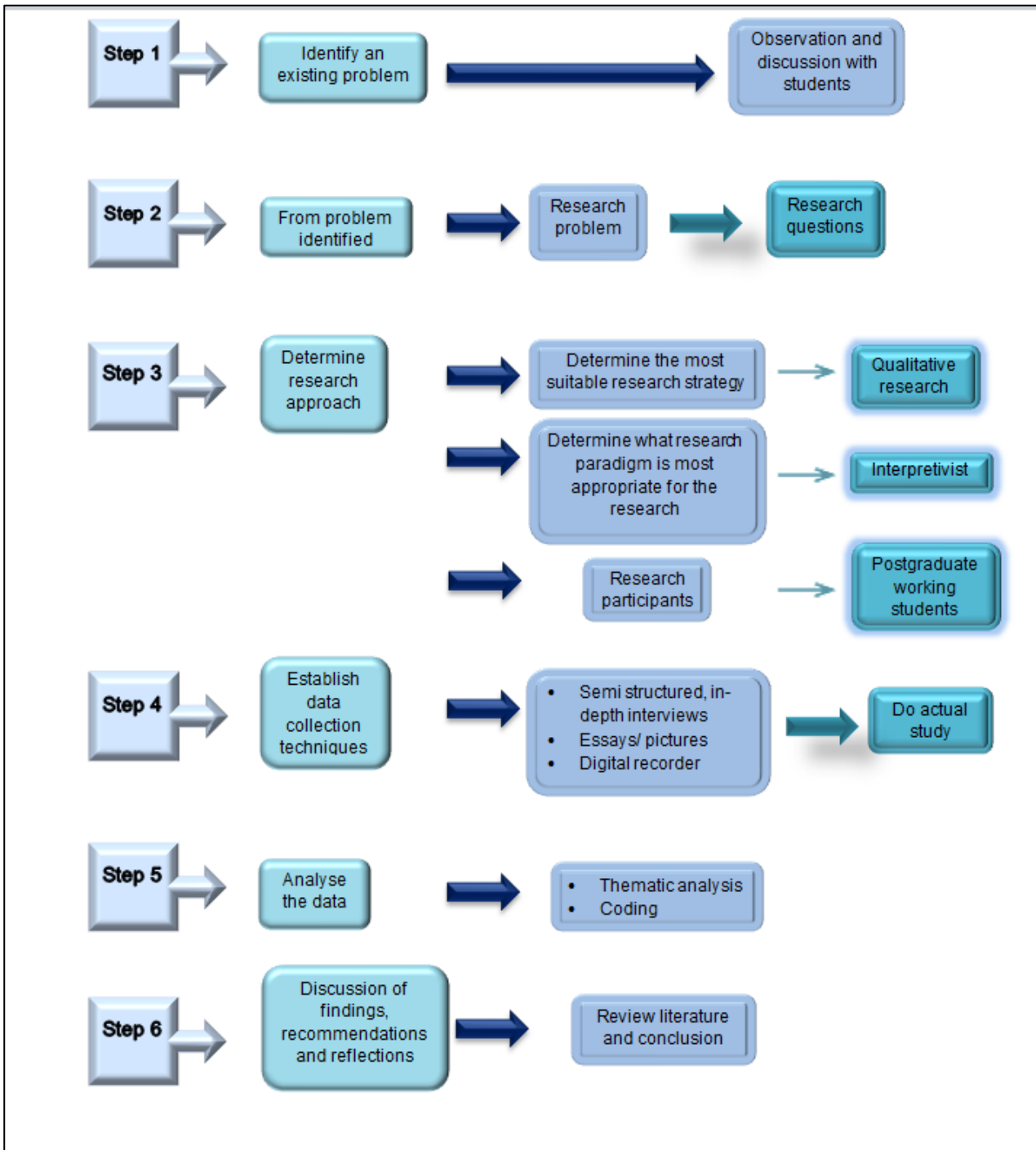
RESEARCH DESIGN AND METHODOLOGY

This chapter provides a detailed discussion of the research design and methodology used in this study. A research design is described as a “road map or a blueprint” (Myers, 2009, p. 19; Babbie & Mouton, 2006, p. 77) for commencing a research study so as to address the problem concerned, specifically in this research, the absence in the factors influencing postgraduate students’ wellness. Accordingly Babbie and Mouton (2006, p. 74) infer that a research design comprises “a plan of how the research will be conducted” before observing and analysing. Therefore it is critical that the research design is appropriate for the research question and the nature of the study so as to ensure that the research objective is achieved (Leedy & Ormrod, 2013; Henning, Smit & Van Rensburg, 2004). As such, the research design within this study served as the overall detailed plan that guided the research process and the manner in which the study was conducted in order to achieve the intended aim.

As discussed in chapter 1, the primary objective of this study was to understand the factors influencing postgraduate students’ wellness by focusing on how the situation of studying and working simultaneously impacts certain aspects of wellness, to be precise: physical, mental and social wellness. As mentioned above, there is a lack of research that focuses specifically on postgraduate students’ wellness. Therefore this study can be described as being exploratory in nature. According to Babbie (2007) exploratory research is essential when a researcher is examining a relatively new topic as it just about always provides new insights into the topic being studied. By examining the factors influencing postgraduate working students’ wellness through exploratory research, it helps to develop an understanding of their situations and perceptions, as well as the underlying reasons behind this and the impact thereof.

Furthermore this chapter also presents a discussion of the research methodology, including the research philosophy, design and methods used. Subsequently the chapter commences with a discussion of the research paradigm, strategy and approach along with the rationale for using them. This is followed by a detailed discussion of the sampling method, data collection techniques and the method of data analysis employed. Lastly a comprehensive overview of the quality and rigour as well as the research ethics is provided. Figure 1 below is a graphical representation of the steps employed within the research process and is discussed in more detail within the subsequent sections.

Figure 1: Steps employed during the research process



Source: Adapted from Mackenzie and Knipe (2006, p. 203)

3.1 RESEARCH PARADIGM/ PHILOSOPHY

A research paradigm is defined by Weaver and Olson (2006, p. 460) as a pattern “... of beliefs and practices that regulate inquiry in a discipline by providing lenses, frames and processes through which investigations are accomplished.” Accordingly it is also defined as “... a basic belief system or worldview that guides the investigator ...” (Guba & Lincoln, 1994, p. 105). In essence, a paradigm is what guides the research process (Ponterotto, 2002). Consequently it is noted that the researcher should choose a research paradigm that is consistent with her beliefs about the nature of the reality (Millis, Bonner & Francis, 2006).

According to Hatch (2006) people experience and create their own realities in different ways as they have their own assumptions, beliefs and perceptions. Wheatley (1999) indicates that the reality that is experienced by an individual does not exist out there but instead is co-created through the acts of awareness as well as observation, and thus it can be said that something will only exist when it is experienced and assigned a meaning. The research paradigm or philosophy that underlined this study was that of interpretivism which views the research as “an interaction between or among the researcher and the participants with the goal of understanding the phenomena from the participants’ perspective” (Ponterotto & Grieger, 2007, p. 410).

This paradigm is also known as naturalistic and is usually associated with qualitative and inductive research methods (De Villiers, 2005). Ponterotto and Grieger (2007) indicate that the method of interpretivism is concerned with the naturalistic and highly interactive nature of research and attempts to uncover the embedded meaning through words and text (hermeneutical). The role of the researcher can be described as one that is interactive as the researcher: “interacts with the human subjects of enquiry, changing the perceptions of both parties”; is a “co-creator of meaning” as she “brings her own subjective experience to the research”; and tries to “develop an understanding of the whole” as well as “of how each part is related to the whole” (Ponterotto & Grieger, 2007, p. 410).

The interpretivist paradigm was used to gain a better understanding from an individual perspective and to explain what is going on. According to Saunders, Lewis and Thornhill (2009) Interpretivism is when individuals interpret everyday roles in accordance with the meaning that they give to those roles and it advocates that it is necessary for the researcher to understand the differences between humans. The researcher began with the assumption that “access to reality is only through social constructions, consciousness and shared meanings” (Maree, 2012, p. 59). This is supported by a number of researchers who indicate that the interpretivist believe that there is not one reality that

exists but many, and the majority of an individual's knowledge is obtained through social creations such as language, joint understandings, perceptions, resources and other artefacts which enclose meaning within a person's life (Bryman & Bell, 2007; Maree, 2012). Furthermore the interpretivist approach is based on a number of assumptions, specifically:

- The placement of individuals in their social environments provides a better opportunity to understand the insights these individuals have in terms of their own actions (Maree, 2012; Hussey & Hussey, 1997).
- An individual's behaviour is pretentious by the knowledge he/ she possesses with regard to the social world (Maree, 2012; Hussey & Hussey, 1997). The interpretivist paradigm posits that a phenomenon does not have a single reality but rather multiple realities, and these realities may differ over time as well as in the situation in which they were created (Maree, 2012; Hussey & Hussey, 1997).
- Human life can only be understood from an internal perspective and thus not from an external reality (Maree, 2012; Hussey & Hussey, 1997). Accordingly the focus of this study is on the subjective experiences of individuals as well as the manner in which they construct their social world.
- An individual's "mind is the purposive source or origin of meaning" (Maree, 2012, p. 59; Hussey & Hussey, 1997). As such through the discovery of how meanings are created, the researcher gained insight into the meanings conveyed in order to obtain a holistic understanding of the individual and his or her experiences.

The social world does not exist independently from the knowledge of people, implying that the knowledge a person possesses is constructed by the experiences or situations to which that person has been exposed (Maree, 2012). Therefore the ultimate aim of the researcher was to "offer a perspective of a situation and to analyse the situation under study" in order to "provide insight into the way in which a particular group of people make sense of their situation or the phenomena they encounter" (Maree, 2012, p. 60). Wellman, Kruger and Mitchell (2007, p. 7) state that a particular concern with this paradigm is "understanding the experience of a phenomenon and not the description of phenomenon", thus to understand human behaviour from the perspectives of the individuals that are involved in the study. Hence the interpretivist approach to research is concerned with the individuals, their understanding and experiences. The rationale behind adopting the interpretivist research perspective is that it is aligned with the purpose of the study, which focuses on gaining an in-depth understanding of the factors impacting postgraduate working students' wellness.

Lastly the research approach employed is highly suitable for a developmental topic where a theoretical gap is identified in empirical research (De Villiers, 2005; Rowlands, 2005). As stated in chapter one, there is a significant gap in the literature concerning student wellness and the factors impacting postgraduate student wellness. Thus, the interpretive paradigm is an appropriate research approach, as it creates significant learning and awareness about this relevant knowledge gap.

3.1.1 Key scientific beliefs

This section explains the researchers' scientific beliefs as they had a bearing on her outlook on the research study as well as the subsequent actions in conducting it. Guba and Lincoln (1994) predict that the fundamental assumptions on which a research paradigm is built are based on the researchers' ontological, epistemological and methodological positions. According to Denzin and Lincoln (2005) it is vital for researchers to state their relevant underlying assumptions and ontology so as to consider the impact that these beliefs may have on the study results. As such the researchers "...set or assumptions or beliefs about fundamental aspects of reality...such as beliefs about the nature of reality (ontology), the relationship between the knower and known (epistemology) and assumptions about methodologies" provides direction in terms of which research paradigm is ultimately chosen and therefore guides the researchers behaviour (Nieuwenhuis, 2008, p. 47; Creswell, 2009). Table 2 below summarises the philosophies that relate to the interpretivist paradigm.

Table 2: Summary of the interpretivist paradigm philosophies

Research Paradigm	Interpretivist
Ontology	<ul style="list-style-type: none"> • The world is complex and dynamic and is constructed, interpreted and experienced by people in their interaction with each other and with wider social systems. • Reality is subjective. • People experience reality in different ways. • Reality can only be imperfectly grasped.
Epistemology	<ul style="list-style-type: none"> • Interactive researcher– participant role; potency of interaction uncovers deeper meaning and insight into the lived experience of the participant. • Knowledge is about the way in which people make meaning in their lives, not just that they make meaning or what meaning they make.
Axiology	<ul style="list-style-type: none"> • Researcher value biases are inevitable and should be acknowledged and discussed at length.
Methodology	<ul style="list-style-type: none"> • Qualitative • Phenomenology as a form of qualitative research

Method of data collection and analysis	<ul style="list-style-type: none"> Data is gathered by means of participant observation, human documents and interviewing, and is analysed systematically.
Reporting style/ Rhetorical structure (language used to present research procedures and findings)	<ul style="list-style-type: none"> The researcher provides insight into behaviour expressed and meanings and interpretations that subjects give to their life worlds. First person; relying extensively on participant voices; emotive prose.

Source: Ponterotto and Grieger (2007), and Babbie and Mouton (2007)

From the Table 2 above the philosophies that are relevant to the interpretivist paradigm are clearly indicated, however it is important to describe the ontology, epistemology and the methodology in detail. Consequently the following sections below discuss the philosophies along with the rationale for its use within the study.

3.1.1.1 *Ontology*

Ontology is a philosophical choice made by individuals on how to define reality (Maree, 2012). It is referred to as the researchers “view of the nature of reality or being” (Saunders et al., 2009, p. 119). Therefore it can be assumed that ontology focuses on understanding a phenomena or reality and is concerned with the nature of reality, what the reality is and what can be known about it (Ponterotto, 2005). Similarly it is about the deeper meaning of social actions, how they are interpreted or appreciated by individuals and how they have been shaped by various factors over time to form something that is ‘real’ (Nieuwenhuis, 2008). The specific ontological perspective assumed by the researcher for this particular study is underpinned by the interpretivist paradigm, which assumes that reality can only be studied through individuals’ experiences so as to learn more about its richness.

Additionally the ontology of the interpretivist paradigm is based on the premise that there is no single reality but rather multiple realities that are relevant and true for the individual. This is supported by Ponterotto (2005. p. 130) who states that the reality that individuals develop is influenced by the “individual’s experiences and perceptions, the social environment and interaction between the individuals and the researcher”. Similarly the reality under study is based on human experience, constructed by each individual separately and in relation to the particular context in which he or she finds themselves.

Maree (2012) discovered that the view of qualitative researchers from an ontological position is that reality is socially constructed and thus the researcher cannot be detached from the research. As a qualitative researcher, the researcher believes that multiple realities exist due to various factors that have an influence on individuals' lives. Furthermore these realities are subjectively constructed as the context of each situation weighs its influence on each participant's reality. Consequently the researcher only studied the individuals' experiences and meanings as they present them. In line with this, the researcher also regarded herself as part of the research process, seeing that each participant's reality was interpreted by the researcher; who thus could not be regarded as an objective entity due to her own preconceptions and take on reality.

3.1.1.2 Epistemology

Epistemology can be defined as: "the study of knowledge, the acquisition of knowledge and the relationship between the knower (research participant) and the would-be knower (researcher)" (Ponterotto, 2005, p. 127). According to Saunders et al. (2009, p. 119), epistemology is the researchers "view regarding what constitutes acceptable knowledge". It can be described as "the nature and scope of knowledge" (Kotze, n.d., p. 5). In addition to this it refers to "what is the nature of the knower and what is to be known" (O'Neil, 2014, p. 9).

Nieuwenhuis (2008) suggests that research is guided by a set of beliefs and feelings concerning the world and the nature of the research inquiry that directs one in deciding how the research should be understood and investigated. In view of this study, the researcher realises that knowledge can only be generated through a process whereby information is obtained in the form of individual experiences and interpreted so as to gain an understanding. As such the information gathered is influenced by the participants' context as well as background, and the best that the researcher can hope to generate is a true reflection of the various experiences gathered (Trochim, 2004).

Consequently interpretive epistemology assumes a subjectivist standpoint, which advocates that reality is discovered in social contexts. As such the interface between the researcher and the participant is critical. The interpretivist therefore adopts a more interactive approach and the researcher along with the participant worked together in order to develop the meaning of the phenomena in question. A hermeneutical interaction took place in such a relationship, whereby awareness and cognisance was created by both parties in terms of the lived experiences of the participants. Ponterotto (2005) indicates that the researcher is allowed to demonstrate empathy

and sympathy towards the participant's situation, which will inevitably strengthen the researcher's interpretation of the situation and experiences.

The researcher believes that both she and the participants contributed towards a joint creation of the findings and she is aware as well as understands that her experiences have an influence on the study. In order to prevent her preconceived ideas from obscuring the results of the study, she was transparent about her experiences. She is a full-time working and studying student who has experiences with wellness and the factors impacting wellness, as many of her friends and colleagues are currently within such situations. Given the above, the researcher has adequate exposure to factors influencing these individuals wellness. Despite her exposure, her self-reflection (refer to Chapter 7) has made her conscious of the preconceived ideas she might have brought to the study, and ensured that these did not cloud her judgement. The researcher was determined to pursue this study with an open mind and has done her best to remain objective at all times.

3.1.1.3 *Axiology*

Finally the last factor to consider is axiology which refers to the impact that values have on the research process. The researchers' values have a significant impact on the research process when adopting an interpretivist perspective (Ponterotto, 2005). As such the researcher was cognisant of her own values whilst still being able to distinguish between her own values and those of the research participants. Accordingly the researcher constantly sought clarity from the participants whenever she was uncertain or unclear of certain statements they had made. This in turn assisted in ensuring that the researcher did not make any erroneous deductions or assumptions based on her values.

3.2 DESCRIPTION OF INQUIRY STRATEGY AND BROAD RESEARCH DESIGN

This section provides an explanation of the inquiry strategy as well as the broad research design that was used in this study.

3.2.1 A description of the research study's strategy of inquiry

For the purpose of this research study, a qualitative strategy of inquiry was used and this choice was supported by previous studies that have also used qualitative approaches to study wellness (Bessinger, 2006; Bonehill, 2012; Du Preez, 2010; Lucas, 2012). Thus a qualitative study defined

as exploratory was utilised as the aim of the study was to obtain rich, in-depth information and a further understanding of the topic. This study seeks to understand the factors influencing postgraduate student wellness. Additionally the researcher seemed to lean predominantly towards a qualitative approach as the researcher believes that individuals create subjective realities, the research questions were investigative in nature (which is a characteristic of the interpretivist paradigm), and the literature available on the topic of inquiry was limited which necessitated an in-depth study.

Accordingly the research problem required research that promoted the researcher to dig deep in an attempt to form a significant and in-depth understanding of the phenomenon. Therefore based on the research requirements and the researchers personal interests, skills as well as knowledge, the qualitative interpretivist research approach was deemed the most suitable research strategy of inquiry to follow within the current research study. Within qualitative research, the researcher is not only interested in “what happens” but also in “how it happens” and more importantly, “why it happens in the way it does” (Henning et al., 2004, p. 3). Therefore qualitative research is usually used to answer questions in respect of the complex nature of phenomena and focuses on describing as well as understanding the phenomena from the participants viewpoint (Leedy & Ormrod, 2013).

As such a qualitative research design was selected to conduct the study, because it was more appropriate when wanting to explore subjective experiences of individuals. According to Burns and Grove (2009) qualitative research is a subjective approach that describes life experiences and provides them with meaning. In addition to this, qualitative studies provide researchers with a lens to explore specific behaviours, perspectives, feelings and experiences in depth (Holloway & Wheeler, 2002). Qualitative research involves the analysis of textual data. Nieuwenhuis (2008) indicates that this type of research is more subjective in nature and seeks to gain a deeper understanding of a specific situation.

This approach also involves collecting rich, descriptive data, thus leading to an in-depth understanding (Maree, 2012) of the factors influencing postgraduate student wellness. Maree (2012, p. 51) also states that a qualitative approach studies “people or systems by interacting with and observing the participants in their natural environment and focusing on their meanings and interpretations”. Consequently the design was suited for the purpose of the research study and it provided the means through which data was obtained and meaning derived. Furthermore, according to Merriam (1998, p. 20) the researcher is known as the primary instrument for data

collection as well as analysis and accordingly is able to “respond to the situation by maximising opportunities for both collecting and producing meaningful information”.

Moreover the strategy of inquiry for the research study is beneficial in terms of:

- Enabling the researcher in gaining an understanding of the subjective meanings that the participants attached to the phenomenon.
- Consolidating the subjective experiences of the participants was formulated into central themes and the data was less likely to be incorrect as it was based on perceptions rather than facts.
- The researcher used qualitative interviews as this allowed for more detailed information to be obtained than would be obtained through the use of quantitative analysis.

However the strategy is not without disadvantages. The main criticisms of qualitative research comprise of the following: it is too subjective and impressionistic, as the researcher’s values, biases and theoretical inclination may influence the outcomes of the research; it is difficult to replicate, as it often relies on the researcher’s ingenuity and lacks standard procedures; it raises problems in respect of generalisation as the scope of the results is restricted; and it lacks transparency as it can be sometimes challenging to establish what the researcher did and how the researcher arrived at the conclusions (Bryman & Bell, 2007). Nonetheless the researcher was aware of these criticisms and focused on combatting these limitations through the adoption of various strategies to ensure validity and reliability of the study. These strategies can be seen in section 3.6.

3.2.2 Characteristics of the broad research design: qualitative research

Qualitative research is defined as the interpretive study of a specific problem where the researcher plays a central role to the sense that is made (Ritchie, Lewis, Nicholls & Ormston, 2013). The goal of qualitative research is to “establish the socially constructed nature of reality, to emphasise the relationship between the researcher and the object of study as well as to emphasise the value-laden nature of the inquiry” (Wellman at al., 2007, p. 188).

According to Merriam (1998, p. 5) qualitative research is described as “an umbrella term” that covers “many research approaches” in order to assist us in understanding and explaining “the meaning of phenomena with as little disruption as possible to the natural setting in which these

phenomena occurs”. Consequently the methods of qualitative research are scientifically designed to explore individuals and the issues associated with them. It does not depend on numerical data, thus it seeks to provide a description of the meaning rather than the frequency of phenomena (Fox & Bayat, 2007).

Furthermore Gerson and Horowitz (2002, p. 199) state that qualitative research “always involves some kind of direct encounter with the world and is concerned about the way people construct, interpret and give meaning to their experiences”. In a similar manner, the research study sought to understand the factors influencing postgraduate student wellness within the situation of both working and studying full-time. Moreover, Leedy and Ormrod (2013) note that research which is of a qualitative nature often serves the purpose of description as well as interpretation. Therefore these studies can reveal in-depth descriptions about specific individuals or groups of individuals and will enable the researcher to gain insights with regards to the observable facts. Hence, the research study is classified as qualitative research. It encompasses empirical interpretations of the factors influencing individuals who are working postgraduate students’. It also lends itself to an overall experience of wellness within the South African university work-place context.

Moreover Babbie and Mouton (2006, p. 273) summarise the main characteristics of qualitative research as indicated in Table 3 below:

Table 3: Characteristics of qualitative research

Qualitative research	
Approach to setting	Natural settings and takes whole context into consideration.
Aims of research	Thick descriptions as well as interpretive understanding.
Research strategy	Inductive and contextualising
Notion of objectivity	Inter-subjectivity, specifically gaining trust and report so as to get as close as possible to the subjects as well as trustworthiness and credibility.

Source: Babbie and Mouton (2006, p. 273)

3.2.3 Phenomenology as a form of qualitative research

Nieuwenhuis (2008), states that one of the interpretive approaches to qualitative research is that of phenomenology. Saunders, Lewis and Thornhill (2007) indicate that phenomenology comprises a qualitative research approach that views social phenomena as socially constructed and is particularly concerned with generating meanings as well as attaining insights into such phenomena. The main goal of the research study was to investigate the factors influencing

postgraduate students' wellness. Thus, to ultimately understand the experience, from the participants' point of view (Leedy & Ormrod, 2013).

Therefore phenomenological research was a form of the strategy of inquiry adopted within the research study as it is defined as a "strategy of inquiry in which the researcher" was able to identify the "essence of human experiences about a phenomenon as described by the participants" (Creswell, 2009, p. 13). Similarly, Giorgi (1986) suggests that a phenomenological research design lends itself towards descriptions of meanings, as experienced by individuals within the domain of organisational wellness. As cited in Hale (n.d, p. 207) "phenomenology seeks to understand a person or persons' perceptive as he, she, or they experience and understand an event, relationship, program and emotion" (Leedy, 1997). Similarly the research study focused on the individual and how he or she experienced a phenomenon, which in this case was the factors influencing postgraduate students' wellness. Accordingly, the researcher investigated what the experience and existence of feelings indicates concerning the phenomenon explored.

Richards and Morse (2007, p. 50) note that phenomenology is underlined by two assumptions, to be precise: the perceptions presenting "evidence of the world as it is lived" and that the individuals "are in their worlds" and "only understandable in their own contexts". Therefore postgraduate students' wellness within the organisational domain is only understood by individuals who are working in an organisation and studying simultaneously. Consequently Saunders, Lewis and Thornhill (2012, p. 137) also state that phenomenology "refers to the way in which humans make sense of the world around them" and the view that "what the researchers observe, is interpreted reality" (Fox & Bayat, 2007, p. 70).

Given the above, the researcher was able to understand the data by positioning herself from the viewpoint of the participant. Therefore, from a phenomenological perspective, the focus remained on the essence of an experience. Merriam (1998) describes these essences as the core meanings that are mutually understood through a phenomenon that is commonly experienced. With regard to the current research study, the focus was based on the essence of postgraduate student wellness and the experiences of the participants were analysed and compared in order to identify the essence of the phenomenon.

Furthermore, according to Creswell (2009), there are two types of phenomenological research, namely: the hermeneutic type which comprises the interpretation of individual lived experiences and the psychological type which is focused on providing a description of individual experiences of a phenomenon. Due to the fact that the current research study focused on students currently

working for an organisation as well as studying simultaneously and their experience of wellness along with the factors that impact it, the hermeneutic type of the phenomenological research design was adopted.

Finally, Saunders et al. (2009, p. 116) indicate that the barriers the researcher faces, is being able to enter the “social world” of her participants and understanding “their world from their point of view”. Thus the phenomenological approach blends “what is really present with what is imagined as being present from the point of possible meanings” (Merriam, 1998, p. 17). Additionally, employing phenomenology as a form of qualitative research has various strengths. Within the context of postgraduate student wellness, phenomenology provided the researcher with a means of describing the understanding along with the importance that individuals attach to the factors impacting their wellness. Braud and Anderson (1998) assert that the results produced from phenomenology research emerge and are not forced.

3.2.4 Classification of the proposed study’s overall research design

The following research characteristics are relevant descriptors that best describe the broad research design of the current research study:

- Empirical study: the researcher collected primary, textual data from the participants. Therefore the study was empirical in nature as it was concerned with the collection and analysis of primary data (Saunders et al., 2012). Additionally, the empirical approach also confirms the use of exploratory research as information was uncovered based on the factors influencing postgraduate working student wellness, focusing specifically on physical, mental (psychological) and social wellness, as similar research and literature is limited. Consequently a new foundation of research was discovered in terms of postgraduate student wellness.
- Applied research: the study seeks to gain insight into the participants’ experiences. Applied research was used to make a contribution to the factors influencing postgraduate students’ wellness within the context of the South African working environment.
- Exploratory: the current research study provided the researcher with a basic or preliminary understanding of the phenomenon. Exploratory research within applied research enabled the researcher to “gain a preliminary understanding of the nature, context, potential impact and possible causes of, as well as the possible factors contributing to an organizational problem; to distinguish the symptoms of an organizational problem from the underlying causes thereof” (Kotze, n.d., p. 5). Furthermore it involves an open and flexible research

approach that is focused on ensuring comprehension and generating new insights (Kotze, n.d.). Hence, the researcher incorporated phenomenology which is a form of qualitative research.

- Cross-sectional research: this is the study of a particular phenomenon at a specific point in time and is carried out once as well as representative of a snap shot of one point in time (Cooper & Schindler, 2006). Therefore the current research study was cross-sectional as interviews were conducted with different participants in order to gather information and the interviewees were only interviewed once. These interviews engaged the participants' perceptions as well as experiences of wellness. The researcher made contact with the participants via email in order to clarify issues and verify the common themes that were identified after analysing the data. Accordingly the data collected symbolized a snap shot at one point in time (Saunders et al., 2012).
- Non-experimental: the current research study sought to gain an understanding of the participants' perceptions as well as their experiences (Saunders et al., 2012).
- Primary data: this refers to data collected specifically for a research project being undertaken (Saunders et al., 2012). Within the current research study, the researcher collected data via semi-structured interviews. This data constituted as empirical data which addressed the research question (Saunders et al., 2012).
- Textual data: the type of data collected was textual and was gathered through interviews which generated non-numerical data, drawings and essays were also used as follow up techniques for those individuals who felt that they could better express themselves in such data gathering techniques. Textual data is also referred to as "qualitative data which is non-numerical data" and "refers to data other than words such as pictures" (Saunders et al., 2012, p. 678). Therefore the research study was qualitative in nature relying on the participants' answers and subjective meaning.
- Verbal: the study incorporated verbal answers from the participants.

3.3 SAMPLING

The data for the research study was collected by means of a sample as it was not possible to interview the entire population. Samples are representations of the specific population under study. They are drawn from the population in such a manner that encourages an increased understanding of the wider population. Saunders et al. (2007) points out that gathering data from fewer cases assists the researcher in collecting more in-depth information. This section discusses the target population, unit of analysis, sampling method and sample size.

3.3.1 Target population

The target population for the research study was employed postgraduate students who were currently working full-time for an employer and completing their studies simultaneously at a South African University that is based in the Pretoria region during the 2014 - 2015 financial years. Thus the study was conducted within the South African context and in order to be included in the study, it was required that the participants were working full-time for an employer, thus not self-employed and concurrently studying.

The study focused on this particular target population for the following reasons: firstly the sample was more easily accessible as there were no geographic restrictions and secondly it is assumed that the participants are literate and qualified as they were postgraduate students who were currently employed.

3.3.2 Unit of analysis

The unit of analysis of a study is concerned with the entities about which the researcher desires to draw conclusions (Terr Blanche & Durrheim, 2004). As indicated earlier, the researcher conducted the study on postgraduate full-time working students within a South African University. Therefore, with regard to the source from which the data was collected, it emerged entirely from one South African University based within the Pretoria region. In terms of, from whom the data was collected, it was collected from a number of individual full-time working students who were currently completing their postgraduate studies at the specific University.

3.3.3 Sample method

Wellman et al. (2007, p. 67) state that “the probability that any element will be included in a non-probability sample cannot be specified”. Babbie and Mouton (2006) indicate that social research is frequently conducted in situations where one is unable to select the types of probability samples used in large-scale social surveys. Thus the researcher made use of non-probability sampling which entails elements being selected purposely to mirror specific characteristics of individuals within the population being sampled.

Accordingly for the current research study, it was not practical or theoretically sensible to employ a random sampling technique, hence non-probability methods were adopted. To be more precise, the type of non-probability sampling method adopted was that of purposive sampling as it was

considered the most appropriate sampling strategy for the study considering that the participants were chosen based on their convenience and availability.

Specifically the purposive sampling strategy entails selecting specific individuals by virtue of attributes or characteristics considered by the researcher in order to be representative of the greater population and/ or to provide the most information about the particular issue under investigation (Barbour, 2008; Leedy & Ormrod, 2013). It must be noted that the purposive sampling strategy was appropriate for the current study's research design as qualitative research is aimed at contextualisation rather than generalisation (Saunders et al., 2009).

A requirement for this sampling is that participants should meet certain criteria before they could participate. This was done for the purpose of the research outcomes, which necessitated depth instead of quantity. Neuman (2000) indicates that a non-probability sampling technique is done when the study is qualitative in nature and as such the depth and quality of the data gathered, in contrast to the number of respondents, was important. Therefore the sampling was theoretical in nature as well as purposive.

Participants who met the following criteria and who were willing to participate in the study were purposefully selected to take part in the study:

- The participants had to be full-time working employees.
- The participants had to be full-time postgraduate students.
- The participants had to be enrolled for a postgraduate degree (Honours/ Masters) in Human Resource Management or Industrial Psychology.
- The participants had to be studying within the specific University based in the Pretoria region.
- The participants had to be employed and working as well as studying during the 2014 - 2015 financial years.

Nonetheless a major drawback of the purposive sampling strategy is that different researchers employ different methods to extract a sample, therefore it is impossible to assess the degree to which such samples are representative of the population (Wellman et al., 2007). In order to allow other researchers to understand and assess the degree of representation of the chosen sample, the researcher was transparent about the predetermined criteria which determined the individuals

who qualified to take part in the study as referred to above. Furthermore the following limitations are also associated with the chosen sampling approach:

- Firstly the individuals who participated in the study were of a convenience nature even though they were purposefully selected in terms of certain criteria and accordingly it is assumed that the sample is not representative of the South African population as a whole (Saunders et al., 2012). Thus the sample is less representative of an identified population and difficult to generalise to other subjects (McMilian, 1996).
- Secondly the main limitation of purposive sampling is that there is a possibility of an error in judgement from the researcher's side which in turn will result in the sampling influencing the results (Saunders et al., 2012). Therefore, the results are dependent upon the unique characteristics of the sample (McMilian, 1996).

Furthermore, it is important to note that the researcher considered biasness when choosing the sample as this could result in inaccurate representations of the population, thereby making the study results futile (Saunders et al., 2012). According to Wienclaw (2009) bias is defined as a tendency for an assigned experimental design or the implementation thereof, to unintentionally skew the research results. Therefore, in the process of choosing individuals to take part in the study, it was maintained that the researcher's personal bias did not play a role.

Finally the researcher benefited based on the strengths of purposive sampling, as McMilian (1996) points out that, it was less costly, less time consuming, easy to administer, there was a possibility of generalisation to similar subjects, it adds credibility to qualitative research and finally it assures a high participation rate.

3.3.4 Sample size

The researcher was dedicated to obtaining clear and in-depth data of what is being researched, thus the sample size was determined with regards to the data obtained and not by the specific number of interviews that would be conducted (O'Neil, 2014). Although the researcher originally expected a total number of 10-15 participants, the final number of interviews conducted was 19. On the basis of the first interview, the interview guide was refined. It was difficult to give an exact number as the number of individuals were dependent upon the depth of the data that was gained, data saturation and the voluntary participation; thus there was no specific number as it was

dependent upon all the evolving research sections being answered and confirmed (O’Neil, 2014). The exact size was dependent upon voluntary participants and the quality of information gathered.

A brief biographical questionnaire had been provided to the participants to complete prior to commencing the interview. As noted by Kerlinger and Lee (2000) the collection of biographical information is essential as it is used to ensure the adequacy of samples and establish the relationship between variables. A summary of the participants’ demographical information of the final sample in the study can be seen in Table 4 below.

Table 4: Demographical information of participants

Race	Age Group	Gender	Marital Status	Home Language	Current Year of Study	Current Occupation
Coloured	20-30	Female	Single	Afrikaans	Masters Final Year	Personnel Officer
White	20-30	Female	Single	Afrikaans	Masters Final Year	Industrial Psychology Intern
White	20-30	Female	Single	English	Masters Final Year	Industrial Psychology Intern
White	20-30	Female	Single	Afrikaans	Masters Final Year	Au pair and IOP Internship
Indian	20-30	Male	Single	English	Honours Final Year	Intern Psychometrist and Assessment Series Specialist
White	20-30	Female	Engaged	English	Masters Final Year	Human Capital Consultant
White	20-30	Female	Single	Afrikaans	Honours Final Year	Recruitment Admin Assistant
White	20-30	Female	Single	Afrikaans	Honours Final Year	Training Facilitator
White	20-30	Female	Married	Afrikaans	Masters Final Year	Industrial Psychology Intern
White	20-30	Female	Married	English	Masters Final Year	Industrial Psychology Intern
White	20-30	Female	Single	Afrikaans	Masters Final Year	Graduate Intern
White	20-30	Female	Engaged	English	Masters First Year	Training Content Developer
Coloured	20-30	Female	Single	Portuguese	Masters Final Year	Industrial Psychology Intern
White	20-30	Female	Single	Afrikaans	Masters Final Year	Lecturer
White	20-30	Female	Single	Afrikaans	Masters Final Year	Human Resource Officer
White	20-30	Female	Single	English	Masters Final Year	Industrial Psychology Intern
African	20-30	Female	Single	Sotho	Masters First Year	Administration Officer
White	20-30	Female	Single	Afrikaans	Masters Final Year	Administration Officer
White	20-30	Female	Single	English	Masters Final Year	Human Resource Officer

From Table 4 above, it is evident that the majority of the participants were predominant white single females, all in the age group of 20-30 years. There was no diversity in terms of the age group of the participants. With regard to the current year of study, the majority of the participants were in their final masters year. Only one male participated in the study. This was also the only participant in his honours final year. In addition to this, majority of the participants' home language was that of Afrikaans, followed by English. In respect of marital status, only four participants were either engaged or married, while the rest of the participants were single. Lastly in terms of the participants' current occupation, it was diverse as they were employed in different roles. Although it seems that the majority of the participants were employed within internship positions.

3.4 DATA COLLECTION

For the purpose of this study, the wellness of postgraduate working students was investigated through the identification and examination of the factors influencing their wellness. Accordingly there were several variables that could hamper the data collection process, to be precise: the participant's schedules, the researchers schedule, the interview duration, and the overall workload (Saunders et al., 2012). To combat these challenges, the researcher conducted the interviews during the participants' non-working and non-class hours (thus weekends) as this assisted in ensuring the availability of the participants and sufficient time for an interview.

3.4.1 Data collection technique

The data collection technique utilised for the current research study was semi-structured interviews. This implies individually interviewing each participant and asking them open-ended questions, so as to invite them to say as much as possible on their wellness (Bless, Higson-Smith & Kagee, 2006). An interview can be defined as a conversation with the specific purpose of gathering information, and personal interviews are well-known in providing insight into the beliefs, attitudes, perceptions and experiences that underlie a phenomena (Berg, 2007; Leedy & Ormrod, 2013).

Hence the research obtained descriptions of experiences through first person accounts in informal conversations and during interviews, thereby endeavouring to understand human behaviour. In addition to this the researcher used an induction approach to gain an understanding of the meanings humans attach to events (Saunders et al., 2012). The reason the researcher utilised such an approach is because she wanted to gain a close understanding of the research context and was part of the research process.

In addition, the researcher conducted open ended, semi-structured, in-depth interviews to allow the participants to discuss their opinions, views and experiences in detail. De Vos, Strydom, Fouche and Delpont (2005) emphasise that semi-structured, one on one interviewing is a valuable data collection method in obtaining in-depth information relating to the participants involved in the study. Kvale and Brinkman (2009) suggest that qualitative interviews aid the understanding of the phenomenon from the participants view. Therefore the researcher gained as much information as possible which, in turn allowed for detailed subjective information to be acquired.

De Vos et al. (2005) further explains that a semi-structured interview is one in which the researcher is guided by a pre-determined list of questions based on the precise topics that needs to be covered, however the interviewer is given flexibility to include questions that arise as a result of the responses obtained. Therefore the researcher chose this data collection technique as it was deemed the best to elicit the rich, in-depth information required from the participants.

The open-ended questions offered many advantages; however the main purpose of these questions was to gain insight into the participant's views, ideas, beliefs and attitudes about certain events or phenomena (Maree, 2012). Another aim of this study was to explore the factors influencing working postgraduate students' wellness. Thus, the open ended questions helped to achieve the research objective and gain in depth information by allowing the participants freedom in their responses. While still focusing on the issues of greatest significance to them, the researcher avoided imposing her views and interests on the participant (Barbour, 2008). These type of questions allowed the researcher to probe and ask follow up questions, in order to gain an understanding and rich information on the phenomenon (O'Neil, 2010).

As such, the researcher got clarity on any unclear responses and ensured that questions were answered completely (Rubin & Rubin, 2005). The researcher was also mindful of sensitivity when probing as well as formulating the open-ended questions. Accordingly the questions were in accordance with the guidelines set out by De Vos et al. (2005, p. 297), to be specific, the questions were "neutral rather than leading, jargon and ambiguous questions" were avoided, they were "open-ended", and "judgmental" and "biased questions" were avoided. Questions that did not meet the criteria of De Vos et al. (2005) were rephrased or excluded. Consequently the open-ended questions gave rise to a deeper and more comprehensive understanding of the factors impacting postgraduate working students' wellness.

Furthermore, the participants were politely requested prior to the semi-structured interview to provide their biographical information and the questions asked during the interview reflected the

constructs that the researcher wanted to investigate. The interview focused on a descriptive and exploratory account of the participants' experiences which were guided by a number of themes within the literature review. The researcher was of the opinion that interviews were the most appropriate data collection method for the proposed study as they are known to guarantee a 100% response rate (Saunders et al., 2007; Lucas, 2012).

Additionally, interviews also offer flexibility and allow the researcher to gain richer information from the participants, however they do tend to be time consuming and there is a risk of possible interviewer bias (Lucas, 2012). Nonetheless, the researcher did take these factors into consideration and countered them by effectively managing time and strictly adhering to standardised procedures. One of the setbacks of the interview was that participants can be unresponsive, for instance, by presenting misleading information in order to be viewed favourably. (De Vos et al., 2005). However, the researcher accounted for this and tried to prevent it from reoccurring. This was done by ensuring the participants were put at ease prior to the interviews and building a trust relationship between the researcher and the participants, in turn, the responses were honest and participants felt comfortable.

There was the possibility that the researcher would make use of essays and drawings depending on the amount, depth and accuracy of the collected data. Thus the essays and drawings were used to gain additional information and to aid those individuals who felt they were not able to fully express themselves verbally in the interviews. As part of the essay or drawing, the participants were asked to give their views, opinions and experiences on their wellness and the factors impacting it. A first draft of the primary collection data instrument, namely, the discussion guide used in the semi-structured interview can be seen in Appendix A.

3.4.2 Data collection process

Prior to any data being collected or approaching the postgraduate students, approval from the relevant parties were obtained and consent procedures were followed. The researcher then contacted the participants who met the criteria personally in order to introduce herself and build rapport with these individuals (Saunders et al., 2007). Thereafter the researcher sent each individual participant an email specifying the topics that will be covered in the research study and attached a participant letter (refer to Appendix B) which states that the research study is for academic purposes. The purpose of the email was to prepare the participants of what to expect and invite them to voluntary participate in the research study. The participants who were interested

were contacted telephonically and consulted on their availability. Thereafter, a meeting was set on a date and a venue that best suited the participants.

It is important to note that the majority of the interviews were conducted personally at a venue chosen by the respective participants in order to convenience them and to allow them to feel a sense of comfort. As such most of the interviews were conducted at the participants' homes, at the researchers home, at the university, at a restaurant or telephonically. The basis for the telephonic interviews was that some participants stayed in residence and had gone home for the university recess.

Thereafter the researcher informed each participant of the purpose of the interview and the interview process (Saunders et al., 2007). All participants were required to sign a consent form and the researcher obtained permission to record the interview (refer to Appendix E). During this process, the researcher reiterated aspects mentioned on the consent form such as anonymity and confidentiality. In terms of the time required to collect the data, it was difficult to provide time frames it was dependent upon the participants' answers to the interview questions (Lucas, 2012).

Therefore the researcher was unable to provide time frames for the data collection process. However, the researcher did consider the time available to the participants and thus restricted the interview to no more than an hour per participant. The participants were requested to complete the biographical questionnaire (refer to Appendix C) and to provide a brief overview of themselves. This process was suggested by Wellman et al. (2007) in order to build rapport and a relationship of mutual trust and confidence between the interviewer and the participant prior to proceeding with the interview.

Lastly, the researcher conducted the interview and asked the three open-ended research questions that were related to the main research objective, but also asked follow up questions based on the participants' responses. Thereafter the researcher personally transcribed the interviews and ensured that all the interviews were conducted with minimal disturbance. A personal interview also equipped the researcher with an opportunity to engage in any non-verbal communication and allowed both the interviewer and the participant to seek any clarification necessary (Saunders et al., 2007; Creswell, 2009). Therefore the researcher kept a notebook and recorded the body language as well as the changes in tone of voice of the participants during the interview. This information was incorporated in the data analysis process. Once the interviews were conducted, the researcher requested the participants to write an essay or draw a picture on the topic. The participants could use this channel to provide any additional information needing to

be expressed. The researcher collected the data herself in order to ensure accuracy, nothing was omitted and that confidentiality was maintained (Lucas, 2012; Creswell, 2009).

In summary the data collection method adopted in the research study was qualitative interviewing, following the phenomenological approach which was conducted as follows (Creswell, 2009, p. 181):

1. Firstly the researcher identified the phenomenon (Creswell, 2009).
2. The researcher left her own world and assumptions behind (Creswell, 2009).
3. The data was then collected through the use of qualitative semi-structured interviews and essays or drawings if necessary (Creswell, 2009).
4. The data was then analysed in which the data separated into themes (Creswell, 2009).
5. Thereafter the views, opinions and experiences or phenomena was described and finally the meaning of the experiences was interpreted (Creswell, 2009).

In order to determine whether the formulated questions acquired the anticipated information, the researcher conducted a pre-test on one participant. The information obtained from this pre-test was analysed so as to ascertain whether the questions were detailed enough and requiring the necessary data (Saunders et al., 2012: Creswell, 2009). It tested whether there were any issues concerning the data collected and the quality thereof.

3.4.3 Data recording

Once the participants gave consent to record the interviews, a digital voice recorder was utilised and then transcribed verbatim for further analysis. Saunders et al (2009, p. 341) notes the “advantages and disadvantages of voice recording interviews”, these are summarised below in Table 5 below.

Table 5: Advantages and disadvantages of audio-recording interviews

Advantages	Disadvantages
<ul style="list-style-type: none"> • Allows the interviewer to concentrate on questioning and listening. • Allows questions formulated during the interview to be accurately recorded for use in later interviews where appropriate. • Allows direct quotes to be used. • Accurate and unbiased record provided. • Can re-listen to the interview. • Permanent record for others to use. 	<ul style="list-style-type: none"> • May adversely affect the relationship between the interview and interviewer (the possibility of focusing on the audio recorder). • Possibility of a technical problem. • Time required transcribing the audio-recorder. • May inhibit some interviewee responses and reduce reliability.

Source: Saunders et al. (2009, p. 341)

In agreement with the purpose of the interviews, the advantages far outweigh the disadvantages. As such the decision to record the interviews was made. It was vital to have verbal accounts of what the participants expressed, which made it easier to utilise direct quotations when reporting the data as well as the analysis of the data. In order to reduce the disadvantages the researcher utilised two recording devices in case of any technical complications.

In addition to this, the researcher also began the interview with a brief explanation of the reasons why the interview was being recorded. The participants were reassured of their confidentiality. They were also requested to give their consent prior to proceeding with the recordings. Finally, the interviews commenced with a brief biographical background, to ensure ease among the participants and assurance of a relationship based on mutual trust and openness.

3.4.4 Data management

The method of data management that the researcher adopts follows a systematic process (Creswell, 2009). This process involves creating separate folders for each of the participants, and separating each process required for the data analysis under different documents. Therefore, the interview documents were kept in a separate folder, including the consent form, the interview questions, the code list and all information relating to the specific interview. This process assisted in managing each participant's information and helped to limit the confusion between the participants. The recorded information on the computer files were transcribed verbatim by the researcher herself, through a logical and systematic method (Gandhi & West, 2006). This process was administered manually by the researcher and although it was a lengthened, physically and mentally challenging process, the researcher settled on this method so as to familiarise herself with the information obtained which in the end was an advantage when analysing the information and compiling the findings (Matheson, 2007).

Additionally, all the data collected from each participant whether essays or drawings, voice recordings of the interview, the interview transcripts, and the coded data were categorised and stored on the system. Each folder for each participant comprised of the above four documents and by doing so, it was easier to keep track of the different participants and the data obtained from them. Finally, only the researcher had access to these folders, with strict security measures that were undertaken with an access password. This was to ensure that the privacy and protection of the documentation was maintained at all times. Moreover, a backup support was created on the hard-drive where the data was stored, where only the researcher can access with the use of a

password. The initial recording on the digital recorders were permanently deleted ensuring that the equipment along with the information on it does not end up in unauthorised hands.

3.5 DATA ANALYSIS

The data analysis phase in the qualitative research process involves understanding the data collected (Creswell, 2009). Specifically, it adds order, structure and meaning to a large amount of data collected (De Vos et al., 2005). Babbie (2007) reports, that data analysis is the interpretation of the collected data with the focus on identifying patterns in the relationships and underlying meanings. The analysis strategy along with the process of the analysis undertaken in the research study is elaborated in the subsequent sections.

3.5.1 Strategy of analysis: thematic analysis

Thematic analysis, as the name suggests, is “a method for identifying, analysing and reporting patterns (themes) within data” (Braun & Clarke, 2006, p. 79). According to Maree (2012, p. 101) it is evident that thematic analysis comprises “a process of looking at data from different angles with a view to identifying keys in the text” that assist in understanding as well as interpreting the raw data. In essence, the goal of qualitative thematic analysis was to obtain a broad summarised understanding of the phenomenon along with the focus of obtaining ideas or categories that portray the phenomenon (Elo & Kyngas, 2008).

According to Schwandt (2007) and Wellman et al. (2007), themes are explained as ‘umbrella’ constructs, which represent a specific pattern found in the data. Applied thematic analysis is the result of a blending of the more useful techniques from, specifically interpretivism and phenomenology which are adapted to an applied research context (Guest, MacQueen & Namey, 2012). For the purposes of this research study, thematic analysis was utilised in order to analyse the responses obtained from the qualitative interviews so as to gain a better understanding of, attain new insights in as well as make sense of the data.

Additionally, due to the exploratory nature of the study, an inductive approach was deemed appropriate and thematic analysis also fits within the qualitative inductive approach employed as it is known as an inductive process (Maree, 2012). Boyatis (1998) points out that thematic analysis is a process used to analyse qualitative information and the analysis process includes coding the data in order to facilitate the identification of themes. Furthermore, with regard to an under-researched

topic such as the current study, identifying themes inductively was valuable (Joffe & Yardley, 2004).

As such the data analysis procedure occurred inductively where raw information was organised into a sifting process in order to develop themes, descriptions and patterns of information relevant to the research study. Accordingly the researcher interpreted the results by drawing comparisons and similarities into value added and integrative evidence of actual experiences. The advantages of thematic analysis is that: it is relatively easy to conduct; it allows for a rich as well as detailed analysis of the data to be presented; and lastly it is flexible as it allows for a wide range of epistemologies, research questions as well as analytical options to be adopted (Braun & Clarke, 2006). According to Guest et al. (2012) thematic analysis is the most useful analysis method for obtaining the complexities of meaning from the collected data.

Nonetheless Braun and Clarke (2006) also identified some common pitfalls with regard to this analysis method, specifically that thematic analysis: involves paraphrasing the data content which can actually result in the data not being analysed at all; utilising the data collection schedule as the reported themes; non-coherence and inconsistency in the generation of themes; failure to support the analytical claims with data extracts; and finally a mismatch between the theoretical frameworks and the analytical claims made. Irrespective of these potential pitfalls, thematic analysis was still deemed the most appropriate analysis method for the research study as the focus of the study was to obtain an in-depth and detailed analysis of the data collected. Furthermore, the researcher ensured that she was aware of these concerns and took this into consideration when analysing the data and maintaining that the analysis was steered by the research questions.

3.5.2 Data analysis process

The researcher started analysing the interviews as they were taking place, noting the new ideas and facts that had emerged throughout the process of data collection. Therefore the gathered data was studied, interpreted and communicated to give it meaning (Polit & Beck, 2008). Firstly the researcher organised and prepared the data for analysis by personally transcribing the interview recordings verbatim. This was done to ensure that all the relevant data was recorded. The next process was that of data cleaning which ensured that transcriptions as well as observational notes were accurate, complete and free from errors (Saunders et al., 2009). All identifying information was removed from transcriptions and files were saved as codes so as to ensure anonymity. Thereafter the data was stored carefully for the purpose of analysis.

Next, the researcher studied through the transcripts repeatedly in order to familiarise herself with the data and reflect on the findings. This assisted her in obtaining an overall picture of the data and a general idea of the results. Once the researcher had obtained a general feel for the information, a comprehensive analysis with a coding process was initiated. The coding involved classifying and categorising the raw data (Babbie, 2007). Throughout the data collection process, large amounts of data were collected and therefore the researcher began a process of reduction of the data by categorising and identifying similar themes. This entails that the data had to be broken down into various segments so as to bring meaning to it (Rossman & Rallis, 1998).

As such the information was arranged in themes using a coding process whereby the participants' answers to the various questions were coded. As stated by Strauss & Corbin (1998) coding is the organising of data into conceptual categories by creating themes that are frequently used during data analysis. Hence, the data obtained from the interviews was categorised and themes were allocated to each category.

This process was known as "open coding" which is the "creation of particular categories pertaining to certain segments of text" (Babbie & Mouton, 2006, p. 499). Accordingly the open coding was achieved by evaluating the data as it was obtained and themes were identified as well as codes assigned. This was the first attempt to condense the mass of data into categories. The researcher used the interview questions as a guide and was seeking out specific themes within the data and then allocating codes to them.

Thereafter, the researcher interpreted the data collected and sorted the codes into themes which can be described as sections of data (Creswell, 2009). The coding process assisted the researcher in categorising themes according to the defined research questions. This process involved sorting and grouping together codes in order to generate common themes or categories that emerged according to the context of the data. This process was known as axial coding and consists of "a set of procedures whereby data is put back together in ways after open coding, by making connections between categories" (Babbie & Mouton, 2006, p. 500). As such, axial coding was employed in order to connect the open codes into broader themes or categories which were determined inductively by data immersion and grounding these in the data through specific excerpts.

Furthermore the themes were reviewed in order to determine the validity of the individual as well as the collection of themes relevant to the data set (Braun & Clarke, 2006). This stage involved a discussion with the researchers' supervisor surrounding the themes that emerged and the rationale behind generating them, as well as the interconnections between them. This process involved

selective coding which “is the process of selecting a core category, systematically relating it to other categories, validating those relationships and filling in categories that need further refinement and development” (Babbie & Mouton, 2006, p. 500). Once the themes were established, the final step was the interpretation of the data. This was done by comparing the findings to previous literature studies and reflecting on the lessons that have been displayed throughout the research study.

The accuracy and completeness of the data collected was verified when the data became saturated and through the provision of the final descriptions and themes to the participants for the confirmation of accuracy. Finally a comprehensive understanding was formed during the process of data analysis as the researcher dissected the data in such a manner that she could obtain a holistic picture of the underlying meaning behind the participants’ experiences. This was reported in a logical, concise and coherent manner as recommended by Braun and Clarke (2006).

Bryman & Bell (2007) suggest that one of the main criticisms of qualitative data analysis is the issue of losing the context of what was being said when coding segments of text, as the process fragments the data. As such the researcher remained conscious of the coding process. The process is more complex in qualitative analysis due to words having multiple meanings (Wellman et al., 2007). These setbacks were easily overcome as initial codes were generated by systematically working through the data.

3.6 ASSESSING AND DEMONSTRATING THE QUALITY AND RIGOUR OF THE RESEARCH DESIGN

This section indicates how the researcher assessed and demonstrated the quality as well as the rigour of the research design, specifically qualitative research.

3.6.1 Quality

Quantitative researchers aim to enhance the validity and reliability of their research, whereas qualitative researchers seek to enhance the credibility and trustworthiness of their research findings – seeing as they themselves constitute the research instruments (Nieuwenhuis, 2008). According to Guba and Lincoln (1994, p. 290) the “quality of data within the qualitative realm” is described as “trustworthiness” which is regarded as a “simple question of how an enquirer can convince his or her audience that the findings of an enquiry are worthy of attention”. Similarly

Kenyon (2004) insists that good qualitative research should be trustworthy, thus the findings need to be worthwhile. Additionally, the researcher followed certain criteria to ensure a sense of trust in the research study.

This criterion is referred to by Guba and Lincoln (1994) as the four dimensions of trustworthiness which comprise (the quantitative definitions are provided in brackets): credibility (internal validity), transferability (external validity), dependability (reliability) and confirmability (objectivity). In addition to this, these four dimensions for evaluating the soundness of qualitative research were utilised as alternatives to more traditionally quantitatively orientated criteria. Evidence proves that within the consideration of qualitative research, it is difficult to use validity and reliability in the same way that it is used in quantitative research (Babbie & Mouton, 2006; Schurink, 2009; Trochim, 2004).

Interview bias and response bias, can affect the findings of a research study (Saunders et al., 2007). Interview bias refers to the way in which the participants respond to the interviewer based on her tone of voice, behaviour and comments, while response bias refers to how the participants respond to the interviewer. As such the researcher reduced both of these forms of bias by building sufficient rapport with the participants prior to the interview via emails.

3.6.1.1 Credibility

Credibility deals with “how believable are the findings” and thus involves the confidence in the truth of the data through the determination of how accurately the findings of the study represent the reality of the phenomenon under study (Bryman & Bell, 2007, p. 43; Shenton, 2004). According to Babbie and Mouton (2006, p. 277) a qualitative study is only seen as valid if it is credible and it is mentioned that the study “cannot be called transferable unless it is credible”. Credibility refers to the participants views which mean that if the results are viewed as credible by the participants then it can be said that the study is credible.

Consequently the researcher adopted the following methods by Creswell (2009, p. 191) in order to enhance the credibility in the research study, to be precise: “full disclosure and honesty” by the researcher, “prolonged engagement” which means that the research “stayed within the research field until the point of data saturation” had been reached, and finally using “member-checking” so as to “determine the accuracy of the findings by providing the participants with the final descriptions” as well as the “themes” so that they can confirm the accuracy (Trochim, 2004).

Subsequently the researcher also made use of triangulation of the data in order to ensure credibility of this study. Thus she asked questions from different angles during the interview and essay or drawing discussions (Creswell, 2009). As a result, adopting various methods like interviews, recordings and observations enables more legitimate, consistent and diverse constructions of reality to emerge (Golafshani, 2003). Within the current study, triangulation of the various sources of data, including the interviews, recordings and observations was accomplished through scrutinising them in order to build a coherent justification for the emerging themes. The researcher followed SIOPSA (Society for Industrial and Organisational Psychology of South Africa) discussions on wellness in order to provide further insight as well as understanding.

Furthermore the researcher also focused on reducing bias within the data collection process by requesting that the participants provide essays or drawings in order to verify the accuracy of the information obtained. Similar themes were apparent and established from various participants. Follow-up interviews were conducted with the participants so as to clear any doubts on the researchers interpretations (this process also ensured dependability of the findings), and descriptive reflections surfaced. Additionally, during the data collection process, the researcher employed various communication strategies as recommended by De Vos et al. (2005), specifically probing, summarising, clarifying and reflecting in order to ensure that the message being conveyed was correctly interpreted. The researcher aimed to develop a relationship based on mutual trust and openness with the participants by explaining the purpose of the study to them along with the process to be followed. Their consent was also obtained prior to the interviews.

Moreover, in order to ensure an objective, overall assessment of the results, the researcher held regular meetings with her supervisor who audited the research study and provided feedback on the accuracy of the findings. In addition to this, the researcher obtained feedback from another qualitative researcher so as to validate the conclusions drawn from the data. Finally, the participants were presented with the themes in order to determine whether they understood the themes and interpretations to be accurate and true.

3.6.1.2 *Transferability*

Transferability is the degree to which the results could be associated with other contexts or settings and is interpreted by thoroughly describing the research context and assumptions (Babbie & Mouton, 2006; Trochim, 2007; Creswell, 2009; De Vos et al., 2005). Therefore transferability refers to whether the findings of the research study can be applied to other contexts or participants. As such the researcher collected adequate descriptions of the data and through the use of purposive

sampling she increased the trustworthiness (Guba & Lincoln, 1994). Accordingly, through the collection of detailed data descriptions and reflections alongside reporting the data thoroughly, detailed as well as precisely, enabled the reader to make judgements with respect to the transferability of the research study (Babbie & Mouton, 2006; Maree, 2012).

3.6.1.3 Dependability

Dependability is the extent to which data collection methods or analysis will ignite consistent findings (Saunders et al., 2007). In essence, it deals with the question, “are the findings likely to apply at all times?” (Bryman & Bell, 2007, p. 43). Guba and Lincoln (1994) state in Babbie and Mouton (2006, p. 278) that there is “...no credibility without dependability, a demonstration of the former is sufficient to establish the latter”. Thus, the findings of the study should be similar if it was to be repeated with similar participants within a similar context (Bonehill, 2012). As such the researcher ensured the quality of research dependability by (Saunders et al., 2009):

- Being aware of all possible errors and biases so as to avoid and eliminate them;
- Triangulation of the information where various sources (interviews, essays and drawings) were compared;
- Proper preparations were conducted;
- The researcher is well informed on the field and shared essential information to the participants. By doing so, the researcher gained the trust of the participants through openness and honesty and reassured them that all the data obtained during the interviews was to remain confidential and anonymous;
- At all times, the researcher ensured that the participants were protected and perceived to be protected;
- To eliminate the maturation of qualitative information, additional time and effort was placed on identifying biases and subjective information. This was possible by verifying the researcher’s interpretations.

In addition to this, the researcher also enhanced dependability by employing an inquiry audit, as it is known to enhance the dependability of the data (Babbie & Mouton, 2006). This was achieved by keeping records throughout all phases of the research process, from the problem formulation to the data analysis and beyond. These records comprised of all the research meetings with the researcher’s supervisor, interview audio recordings, interview transcripts, raw notes, correspondence with the participants, personal reflections and data analysis decisions. All these documents were stored electronically on the researcher’s laptop and flash drives, in line with the

university's research ethics policy. Furthermore, the researcher also listened to the interview audio recordings multiple times and did numerous analyses of the interview transcripts in order to increase the dependability of the research study. Finally the researcher also provided a comprehensive illustration of the research process conducted in order to determine how consistent she was throughout the process.

3.6.1.4 Confirmability

Confirmability is concerned with the objectivity or neutrality of the data, by ensuring that the researcher has been ethical and has not overtly allowed her individuals biases, values or theoretical inclinations to influence the study approach and results (Bryman & Bell, 2007; Amankwaa, 2005; Plack, 2005). Confirmability is also the extent to which the research process and findings of the study can be confirmed by others (Wagner, 2009). Within this study, confirmability was established since: it involved the researchers' data collection of shared occurrences in their natural contexts where possible; the researcher ensured evidence of thick descriptions as well as audit trails; meticulous information and recording management was ensured; verbatim transcriptions of the interviews was done by the researcher; detailed records of all participants and the data they provided was held; and confirmability was enhanced by regularly reviewing the credibility of the findings (Wagner, 2009; Corley & Shah, 2006).

Additionally, triangulation, as stated earlier, was utilised in order to limit the researcher's personal bias. All data, documents and notes were stored and are available to other researchers who wish to verify the results of this study after the publication. It is critical that these records provided sufficient information to enable the evaluator in assessing whether the results reflect the key focus of the enquiry (Guba & Lincoln, 1994; Babbie & Mouton, 2006; Kenyon, 2004). Furthermore, it is almost impossible to entirely exclude bias when collecting qualitative data; hence self-reflection through journaling became a necessity. The researcher recorded her thoughts and feelings which helped her to identify her own biases throughout the research process and how they could have influenced reasonable judgement throughout the research study. This process is also referred to as "reflexivity" which reveals and interprets the various elements that impact the research process (Creswell, 2009).

Lastly it is noted that qualitative research is valid as long as it is useful and worthwhile in helping the researcher, the participants, as well as other individuals in gaining a deeper insight and understanding of the phenomenon that is being studied (Saunders et al., 2007). Therefore, the researcher presented discrepant findings because real life is composed of different perspectives

that do not continually correlate with other data and by presenting this data, there was a possibility that the account would become more realistic and in turn more valid (Creswell, 2009; Lucas, 2012).

3.6.2 Rigour

The researcher firstly employed a strategy that was systematic and self-conscious in respect of the research design and data collection, analysis, interpretation and communication in order to ensure rigour. In addition to this, the researcher created a record which consisted of the method as well as the data that could be analysed by another researcher who could reach similar findings. The researcher also provided a coherent and plausible explanation for the phenomenon being studied (Mays & Pope, 1995). Finally, as indicated earlier, the researcher made use of peer debriefing by sharing the research methodology, analysis, interpretations and conclusions with professionals experienced with qualitative analysis in order to obtain critical feedback from them (Babbie & Mouton, 2006).

The findings of the study were reported in a realist style. The researcher discussed the results in the third person, while the experiences of the participants were directly quoted (Holt, 2003). This technique ensured that the reader easily read and distinguished between the role of the researcher and the various participants (Storm, 2007). Furthermore, Storm (2007) indicates that the realist reporting style provides a realistic scenario of the research phenomenon as well as a realistic outline of the participants (postgraduate working and studying students) interface with the system (university and work context). Therefore, the recorded interviews and observations the researcher administered were reported exactly as they took place.

3.7 RESEARCH ETHICS

Saunders et al. (2007, p. 610) states that research ethics is described as the “appropriateness of the researchers behaviour in relation to the rights of those who become the subjects” of the research study or who “are affected by it”. During various stages of the research study, it is possible that a number of ethical issues can arise. As cited in Maritz (2011, p. 40) “respondents should never be harmed in any physical, psychological or emotional manner” (Babbie & Mouton, 2006). Maritz (2011) also indicates that participants have a personal right to refuse participation, insist on confidentiality, privacy and they have a right to be informed about the nature of the research. Creswell (2009) points out that researchers have an obligation to protect their participants by establishing trust with them, promoting the integrity of the research, guarding them against misconduct and any impropriety that might impact negatively on their organisation.

Therefore the researcher is obliged to respect the rights, needs, values as well as desires of the participants and to behave in an ethical manner while conducting the study and not only when presenting the findings (Ruane, 2005).

The ethical considerations and strategies that the researcher employed throughout the research process include:

- Plagiarism and copyright: the researcher acknowledges all the literature sources that she has used (Saunders et al., 2007).
- Voluntary participation: each respondent's participation was fully voluntary (Leedy & Ormrod, 2013). Therefore the researcher provided each respondent with an opportunity to terminate the interview at any stage with no negative consequences and informed consent was obtained from each participant prior to the interview commencement. The participants were also encouraged to ask the researcher to clarify any issues that they were uncertain of.
- Informed consent and the deception of participants: each participant was briefed on the nature of the study and was allowed to decide whether or not he/ she would like to participate in it. Subsequently each participant was required to sign a consent form before participating in the study, indicating that their participation in the study is voluntarily and that their responses will be kept confidential (Leedy & Ormrod, 2013; Saunders et al., 2007). The researcher assured the participants that their privacy is respected and that their personal identities are protected. In addition to this all the signed informed consent forms of the participants were kept until the study was completed. All the consent forms can be found in Appendix E.
- Prohibition of the use of financial/ non-financial incentives to encourage the participants: the researcher did not use incentives to get the potential candidates to participate in the study (Saunders et al., 2007).
- Protection from harm: the researcher took care to ensure that the physical, emotional as well as psychological wellbeing of the research participants are not in any way at risk (Leedy & Ormrod, 2013).
- Anonymity and confidentiality: The respondents' right to privacy was respected at all times (Leedy & Ormrod, 2013). Therefore in order to ensure the confidentiality of information obtained, the researcher removed all identifying information from the transcripts and

assigned pseudonyms to the participants. These pseudonyms were utilised during all stages of data collection and analysis, including discussions and writing up of the findings. Therefore confidentiality and anonymity imply that all the information gathered is treated in such a manner that it protects the individuals' identity (Leedy & Ormrod, 2013; Saunders et al., 2007). Consequently the researcher paid special attention to issues such as: the sensitivity of the information, the location of the research as well as the disclosure of the results (Creswell, 2009).

- Permission from the University (Saunders et al., 2007): the researcher first obtained permission from the specific South African University within the Pretoria region in which the study would be conducted before contacting the participants, namely the postgraduate students. Thus the researcher obtained written permission to conduct the study from the Dean of the faculty as well as the head of the academic department. The students were all from this specific faculty and are enrolled for a specific degree. This was done in order to ensure that the proposed research plans were ethically compliant. Additionally, the researcher utilised the specific University's code of ethics for research as a guide in conducting the research.
- Archiving and storage of the research data (Saunders et al., 2007): the data was stored on the researcher laptop in private folders which require passwords to access as well as on a hard drive which is locked up and no one other than the researcher has access to the research data.
- Researcher's honesty, objectivity and integrity: the researcher maintained that when the findings were reported, she remained honest as well as unbiased and did not mislead the individuals in respect of the nature of the study (Saunders et al., 2007). Therefore she ensured that the results were reported in a thorough manner and that they had been recorded fairly as well as accurately.
- Honesty among professional colleagues: the researcher ensured that the findings were reported in an honest and inclusive manner, and that the results were not misrepresented in any way (Leedy & Ormrod, 2013). Thus fabrication or falsification of the data did not take place (Saunders et al., 2007).
- Interviewing: The researcher took special care in order to ensure that the questioning was not forceful in any way (Leedy & Ormrod, 2013). According to Saunders et al. (2007) the researcher also ensured that the questions were not guiding so as to allow the participants to present their own opinions.

- Avoidance of conflicts of interest: the researcher made it clear to the participants that the study was being conducted as partial fulfilment of the researcher's masters degree so as to maintain high ethical grounds (Saunders et al., 2007).

Moreover, the researcher, at all times, exercised sensitivity in the use of language and provided her contact details so that participants could contact her at any time should questions or uncertainties arise.

SUMMARY

This chapter explained the research approach, design and methodology that the researcher applied in conducting the research. Along with this, the quality and rigour of the study was reflected in order to ensure that all the procedures prove to be dependable, credible, transferable and confirmable; also removing any applicable likely bias. Furthermore the ethical aspects of the research study were also considered and explained.

In Chapter 4, the findings as obtained from the participants are presented.

CHAPTER 4:

RESULTS ON THE FACTORS INFLUENCING POSTGRADUATE STUDENT WELLNESS

In the current chapter, the researcher focused on the factors influencing the participant's wellness, which includes an exploration of their physical, mental and social wellness. Therefore, this chapter serves as a presentation of the outcomes of the research study. The actual findings from the interviews, essays and drawings are presented in this chapter reflecting how participants experience wellness in their lives. The process of coding of the interviews and essays led to four major selective coding themes, to be specific: physical wellness, mental wellness, social wellness, as well as suggestions, lessons learnt and benefits. This process of coding/ analysis can be viewed in Appendix D. The relevant findings for each of these codes are presented below along with the drawings and their interpretations.

4.1 PHYSICAL WELLNESS

When the term physical wellness was mentioned during the data collection interviews, six axial codes were identified concerning the factors influencing the participants' physical wellness in the situation of working and studying simultaneously. These axial codes are illustrated in Figure 2 below and thereafter discussed in more detail.

Figure 2: Physical wellness axial codes



4.1.1 Health habits

This axial code relates to the participants health habits with regard to exercise, eating and sleeping patterns. The participants displayed a significant tendency towards unhealthy eating and sleeping patterns, with twelve participants indicating they would eat unhealthy or not eat at all. While seven participants stated that they would eat regularly, and fourteen participants specified they would not sleep or function on minimum hours of sleep, while only five would get at least six hours sleep and ensured regular sleeping patterns. Therefore some of the participants were serious about being healthy and would proactively manage it. However the majority experienced unhealthy habits.

The majority of the participants experienced difficulty in their health habits and indicated a few barriers that made it difficult for them to participate actively in exercise or extramural activities. They mentioned that work demands as well as time constraints presented barriers for them to lead an active, healthy lifestyle as they required effort to be active. This was clearly evident from the participant responses as only seven of the participants indicated they were physically active and made time for exercise, while twelve of the participants neglected physical exercise completely.

The open codes identified within this theme were: exercise; bad, unhealthy and irregular eating patterns; effort required to eat properly and drink lots of water; healthy and regular eating patterns; irregular sleeping patterns, and regular sleeping patterns. Below are examples of the participants' responses:

"I have to make an effort to eat well or even to eat at all especially when I am stressed, I cannot eat. I do however make an effort to drink a lot of water especially during exams and most of the time I would just sit in front of the TV and fall asleep. I slept a lot so when I had a test I would generally sleep. If I could not study I would fall asleep, I would go to bed and I would rather wake up early in the morning to study." (Participant 11)

"Sleep for me was a second hand thing as I was working on maybe three hours a night for a good three weeks in a row and a lot of the time sleep did not occur. If I had an assignment that was due at twelve o' clock, I generally worked through the night and only handed in at about six o' clock and then drove to work and worked the full day. It was like this catch 22 situation, I need sleep but I cannot sleep because I am too stressed about everything that needs to be done. I did not have time to eat, in the mornings, it would be a protein shake and then what would happen is, because I would not eat the whole day I would all of a sudden crash when I had a moment." (Participant 2)

“Sleep wise, I have managed to be quite good, however eating three times a day did not happen, I was not very healthy during my masters years.” (Participant 4)

“In terms of my eating, this was fine. I still ate three meals a day but my sleeping patterns were effected a little bit.” (Participant 10)

“I have to cook, so I need to look after myself and often fulfil those roles of feeding myself. I do try and get enough food and I get the right food, so there I have no complaints. I knock off early sometimes so when I do, I actually catch a nap; however the most hours of sleep are usually six.” (Participant 8)

“I have no sleep and even when I did sleep it was disturbed sleeping patterns due to stress. My eating pattern was completely off the chart, I lived on takeaways as I did not have time to cook even though I love cooking.” (Participant 12)

“I was so stressed I could not even sleep and I was constantly working with people so there was always another enquiry after another and just no time, so I would sometimes have to skip lunch.” (Participant 14)

“I was averaging on about three to four hours of sleep.” (Participant 17)

“I did exercise but a lot less than I used to because I am quite a fit person. I used to play sport at least six days a week sometimes even seven, so with the working and studying I still tried to train but it would be maybe two or three times a week.” (Participant 15)

“Exercise went really down because I got home late and there was no time for it. I had to focus on my studies.” (Participant 3)

“In terms of exercise that completely stopped because I actually had Saturday classes as well for my internship, so exercise went completely to zero.” (Participant 10)

“I go to gym every day after work except for weekends and that is why I am also eating now because you cannot go to gym without eating.” (Participant 18)

Consequently health habits comprise of irregular/ regular and unhealthy/ healthy eating and sleeping patterns as well as exercising, and the effort required to maintain these health habits.

4.1.2 Physical symptoms

This axial code explored the physical symptoms experienced by the participants as a result of working and studying simultaneously, where seventeen of the participants experienced some sort of physical symptom, while two of the participants experienced none.

The open codes identified were: panic attacks due to stress; increased levels of illness and hospitalisation; low immune system, headaches, eye strain, weight loss and gain, heart palpitations, low and high blood pressure, hair loss and skin breakouts; as well as physically exhausted and drained. Below are a few of the participants' responses:

"I was tired after work and then coming home, and still having to study was draining. I also experienced eye strain from all the reading and constant headaches." (Participant 1)

"I was actually hospitalised due to a hormonal imbalance, induced by stress and as a result of this, my body went into a downfall and I would crash." (Participant 2)

"Due to the anxiety and stress, I started losing a bit of my hair. I have never in my life experienced this kind of stress." (Participant 7)

"My illness level kept increasing as I experienced an increase in sinusitis, colds and flus, so I wasn't in a good space, as my physical wellness struck a low point." (Participant 12)

"I got to a point where it actually led to burnout and there were mornings I would wake up and my blood pressure was very low so I kept fainting. I was physically exhausted and very nauseas due to my nerves." (Participant 13)

"At one stage in the year I fainted at work, I was shaking and I got sick. The doctors indicated that I experienced a panic attack which was all stress related." (Participant 15)

"I was sick the whole time, my immune system was completely down and due to the exhaustion, I experienced fatigue. I could not eat as I was so nauseas and this led to weight loss. The whole time my heart was beating fast and I was continuously anxious and worrying." (Participant 9)

“It affected my skin and then I became negative and self-conscious because I did not want people to see me like that. I also had bags under my eyes which I could not get rid of, so I did not feel good.” (Participant 9)

Therefore the physical symptoms the majority of the participants experienced consisted of panic attacks, burnout, low immune system, headaches, eye strain, weight loss, heart palpitations, low blood pressure, hair loss, skin breakouts and increased susceptibility to illness, as well as physical exhaustion.

4.1.3 Time and task management

This axial code was related to the participants’ planning as well as managing their time and tasks. Based on the participants’ responses, eleven of the participants suggested that time and task management was a factor impacting their physical wellness. Along with this, it was indicated that eight of the participants experienced difficulty in time and task management, while three of the participants were able to adequately manage their time and tasks. The participants noted that having a balance and structure was associated to being healthy. The majority of the participants were challenged in terms of managing their time as a result of work demands and responsibilities, thus finding it difficult to obtain a balance.

The open codes identified were: planning and managing tasks according to energy levels; difficulty in managing responsibilities; demands, tasks and time; difficulty in prioritising and obtaining a balance; as well as obtained balance and routine. Examples of participant responses are:

“I was really pushing hard because I had a lot to get done and I didn’t want to fall back on my other responsibilities and my other wants and needs in life.” (Participant 2)

“There is no routine in my life; I am tired the next day. I noticed if I am into a routine like sleeping at a certain time, waking up at a certain time then I am okay the next day and I can function but my life is so volatile and I do not go to bed the same time every night, there is just always something different coming up or I work later on certain work projects which takes a toll on my body.” (Participant 8)

“I think it comes back to your priorities and what is most important for you because if I think about other people working and studying, they manage quite well. So I think it depends on

what type of person you are, like valuing family, friends and exercise, like a good health and quality of life.” (Participant 13)

“My body got into that mode that I had to work constantly so I would wake up and I would work in the morning and then I would go to my real job, I would work there and I would come home, I would work on my studies and then I would sleep at the same routine every day.” (Participant 16)

“There is just not enough time in the day for me to fit everything in, even though people say there is 24 hours in the day, they didn’t understand all the demands from both the studies and my job. I really struggled to plan and manage my responsibilities, there was absolutely no time for anything.” (Participant 17)

Subsequently time and task management includes the importance of balance, routine, prioritising, planning and managing responsibilities, demands, tasks and managing time in accordance with one’s energy levels.

4.1.4 Nature of the job and studies

The majority of the participants, namely twelve, stated that the nature of one’s job and studies influenced their physical wellness. Such an influence on wellness involved an increase in anxiety and stress levels along with an impact on one’s quality of life, including demotivation and lack of sleep.

The open codes identified within this axial code include: the nature of job – travelling, sitting for long hours and staring at the computer; stress and pressure due to deadlines, work and study demands; lack of sleep due to work demands and stress; and the impact on quality of life. Examples of the participant responses are:

“I definitely pulled all-nighters, but at the end of the year it started to become better so when I was at momentum, I think the structure of the assignments was a lot less work.” (Participant 20)

“The travelling and still trying to do your work was really stressful.” (Participant 15)

*“...stressed to a point where you feel pressure to do good in your studies and perform at work. It got to a point where I got really stressed and I slept very little due to it.”
(Participant 13)*

*“I was physically tired at work. I could not stay awake and because of sitting at a desk the whole time, I am not moving a lot and it is kind of torturous as I sat for long hours and stared at the computer.”
(Participant 1)*

*“My stress levels and anxiety was like much less. I think it was because I did not have time to stress or to worry about university.”
(Participant 6)*

*“...stress especially from the university side because I did not actually have sufficient time to prepare for classes each day and I finished my assignments at the last minute, usually the weekend before so I had quite a bit of stress.”
(Participant 10)*

*“I am a big procrastinator which puts extra stress on my body.”
(Participant 11)*

*“I am in a full-time working space which does not allow me to even go out long enough for a decent lunch, the deadlines and workload is too much, there is so much pressure to perform and meet the demands immediately.”
(Participant 12)*

As such the nature of the job and studies includes long work hours, technology, travelling, study demands, workload, deadlines, pressure to perform and lack of sleep, all leading to stress and pressure as well as an adverse impact on one’s quality of life.

4.1.5 Coping mechanisms

The participants’ views on their wellness are comprehensively discussed within the framework of coping mechanisms. All the participants highlighted various ways of coping, from substance use to exercise, stress relievers, sleep and eating. A few of the participants admitted that they had engaged in substance abuse as a coping mechanism.

The open codes involve: energy obtained as a result of sleep and stress relieve, exercise resulting in increased self-esteem and confidence; emotional eating; exercise utilised as an energy source, stress reliever, meditation, to break fatigue and an outlet; utilised music to relax; utilisation of

substances and supplements for sleep, stress, anxiety, to stay awake and focus; as well as spirituality. Examples of the participant responses are:

“The only thing that helped me break fatigue and provide extra energy was to exercise.”
(Participant 1)

“I would drink coffee at night if I needed to put in another hour or two and sometimes turbovite.”
(Participant 10)

“I actually started using supplements to help me stay awake as I would drink four cups of coffee and it would not work. So I took bio-plus and had numerous vitamin B shots. I also had other supplements that I was taking.”
(Participant 2)

“I was on so many tablets; I was using supplements to keep me awake and active. I was very tempted to use Ritalin as I have a friend who is a dealer of it and he gave me some, however I tried not to use it even though I was very tempted as there were points where I just thought of taking something to make my brain work because it just was not working.”
(Participant 3)

“My gym session is like my meditation session. I found that on the days I skipped gym I was more stressed and grumpy.”
(Participant 4)

“I am an emotional eater so if it is not going good with me, I eat bad food.” (Participant 7)

“My energy sources my stress and in order to make sure I have a proper night’s rest before I write an exam, I will take rescue.”
(Participant 11)

“I had to learn to work on my energy levels all the time. Exercising made me more positive and feel better. It increased my self-confidence.”
(Participant 15)

“For me, gym was an outlet as it was something that could just calm me and make me feel good again. Along with this, prayer is what really got me through...”
(Participant 16)

“I started taking pills that made me stay awake and for the stress which eventually got the better of me when it became an addiction. I mean I would just go to my GP and ask them for anti-depressant pills, they did not even ask questions, they just gave it.” (Participant 17)

“...because my brain did not want to switch off, I had to go see the doctor in order to get some sleeping medicine and I also listened to music to relax.” (Participant 19)

“Physical exercise was a stress reliever for me, especially team sports.” (Participant 5)

Hence the coping mechanisms identified include: spirituality, sleep and stress constituting energy, emotional eating, music, and exercise which leads to improved self-esteem and confidence, as well as a source of energy, stress reliever, meditation, and an outlet to break fatigue. Additionally the utilisation of substances and supplements to deal with stress, anxiety, sleep, concentration, and to stake awake was also adopted as a way of coping.

4.1.6 Overarching emotions

The axial code of overarching emotions encompasses all the feelings experienced by the participants during the situation of working and studying simultaneously. According to the participants' responses, fifteen of them experienced a change in their emotions, specifically feelings of depression, demotivation, frustration, unhappiness, torture and pressure, while four of the participants experienced none of these.

The identified open codes are: change in behaviour and emotions; balanced levels of stress and anxiety; increased stress, pressure and anxiety; feelings of depression, demotivation, frustration, unhappiness and torture; as well as frustrated frame of reference. Examples of the participant responses are indicated below:

“I could not relax because I was so stressed and anxious.” (Participant 19)

“I am under so much stress and pressure that it was forcing me towards these animal instincts of survival and I eventually started hurting other people and all of a sudden did not care. The fact that I was not really getting any sleep meant that I was short tempered and I was in such a frustrated frame of mind that I would eventually just start crying.”

(Participant 2)

“...sometimes it is very difficult because I get depressed easily because of the high stress levels.” (Participant 7)

“I feel unhappy and depressed most of the time.” (Participant 8)

“I felt frustrated because then I was working and then I had to go to class.” (Participant 13)

“I got to that point where I felt so depressed and I thought no I do not want to do this anymore. The purpose in all the things I enjoyed was gone and everyone in the office was anxious due to the stress levels.” (Participant 14)

“There were days where I wanted to quit because the pressure and stress was just too much.” (Participant 17)

“I work well under pressure but it must not be too much because then I cannot function, I just freeze and I cry.” (Participant 18)

Accordingly, overarching emotions relate to a change in one’s behaviour and emotions as a result of increased levels of stress, pressure as well as anxiety, and include feelings of depression, demotivation, frustration, unhappiness, and torture, leading to tears as well as the importance of balancing one’s levels of stress and anxiety.

4.2 MENTAL WELLNESS

Within this selective code, eight axial codes were identified with regard to the situation of working and studying simultaneously on the basis of the information obtained during the data collection. These axial codes are indicated in Figure 3 below and are discussed in more detail.

Figure 3: Mental wellness axial codes



4.2.1 Emotional wellbeing and stress

The axial code relates to the feelings and emotions of the participants during the situation of working and studying full-time simultaneously. All of the participants indicated emotional wellbeing and stress as a factor influencing their mental wellness. Only one participant indicated positive emotions towards concurrently working and studying full-time, while the rest of the participants specified negative feelings and emotions.

The open codes identified within this axial code are: managing stress; anxiety and depression; reverted growth and development due to stress and pressure; seeking internships increased levels of stress and frustration; affected emotions at work; constant stress, mental pressure and anxiety; feelings of frustration, depression, anger, overwhelmed and crying; anxiety due to uncertainty of applying theory practically; anxiety due to uncertainty in terms of expectations; and increased levels of stress and depression during course work year. Examples of the participants' responses in this regard were as follows:

“The entire time you are sitting there with all of this stuff in your head and you know that you are meant to use this but you do not know how and the more you think I know all of this stuff, the more anxious and stressed you get. It is sad to think that a little thing like stress and pressure can revert back so many years of growth and development within ourselves.”
(Participant 2)

“I experience constant stress and anxiety in the back of my mind because most of the time there is just this cloud hanging over me.”
(Participant 8)

“I was highly irritable, a very angry person and very depressed but also extremely stressed because I got a lot of pressure from my supervisor to get me started and I also wanted to get started but there was just no hope. This is one of the most stressful years in my life. I received a massive salary cut so I mean now that's putting extra pressures on my social life.”
(Participant 12)

“I feel it is such a big thing, they did not design the course for working and studying but I am just doing it and I am really stressed about everything. I get frustrated and then if I have so much work and I am sick, all I am thinking about is the deadlines.”
(Participant 15)

"I feel completely drained, I would get home or even on the way home, I would just start crying. The stress and mental exhaustion just lead to tears. " (Participant 5)

"I was frustrated with not getting an internship; I do not feel like I am moving forward with my career." (Participant 6)

"I am tired and anxious because I do not know what to expect." (Participant 11)

"I am depressed and something can like get me down very easily. I am in a state of mind that I just want to run away, I just want to get away from this stuff." (Participant 19)

"...stress, anxiety and depression as a result of work and all the demands." (Participant 8)

"It is important to get rid of all the stress and manage it." (Participant 14)

"I feel such accomplishment if I tick something off my to do list and I do not let stress impact me, it serves as a motivational force for me. I change the negatives into positives."
(Participant 4)

Therefore emotional wellbeing and stress relates to: managing stress levels; lack of growth and development; feelings of anxiety, frustration, worry, depression, anger, overwhelming, crying; and mental pressure as a result of uncertainty with regard to expectations as well as practical application of academic work; finally, the internship availability.

4.2.2 Mental capacity and effective functioning

The axial code relates to the participants' mental capability and effective functioning attitudes as well as their mind-sets towards the situation of working and studying full-time simultaneously. From the responses acquired, it was evident that the majority of the participants indicated that mental capacity and effective functioning was a key factor impacting their wellness, as eighteen of the participants indicated that their mental capability and concentration was negatively affected.

The open codes were: not coping in terms of mental wellness; mentally draining as a result of working and studying simultaneously; mental exhaustion - continuously applying your mind; difficulty in functioning effectively and focusing on studies; switching mind off from work;

insecurities within participants mind; and affected mental capacity at work. Examples of the participants' responses include:

"The fact of the matter is that I have never been the best and that of course creates all sorts of insecurities within my head because I never get the top mark, I never perform the best I am always helping others I am never thinking of myself first. But at the same time I want to be the best, it makes no sense". (Participant 2)

"My brain is slow and I find it difficult to concentrate because I am stimulating it with so much information all the time." (Participant 1)

"I am just so tired that I cannot even think straight. I actually forget a lot of things and I experienced some memory loss." (Participant 17)

"It has a lot to do with trying to keep myself positive when I am exhausted and motivating myself at my lowest which was challenging for me as I could not focus immediately." (Participant 5)

"It was really draining and mentally exhausting to work the whole day and thereafter come home, having to study. I think especially entering a new workplace; it was mentally draining because you had to learn a lot of new things and processes as well as methods. It was a big adaptation in itself. The academic studies were a very big shock for me but in a sense it kept my mind active." (Participant 4)

"It really drained me, my mind was really busy and it was gambling a lot of things however it was an opportunity to develop and grow my mental capacity." (Participant 3)

"Mentally it really stretched me but no it was not good for me because I started fixing things like my personality, whole facets of me was just being lost and I was like a robot just working." (Participant 12)

"My mental wellness is not coping because there are a lot of relationships I have to balance in my current employment." (Participant 10)

"I am able to chuck everything out of mind and focus on the task at hand so that helps, I've been able to kind of deal with things in that way." (Participant 11)

Consequently mental capacity and effective functioning indicates that it is mentally exhausting to work and study simultaneously as a result of insecurities along with the continuous application of one's mind. The inability to cope, including difficulty in functioning effectively and concentrating, thus requiring one to concentrate less on work and focus more on their studies.

4.2.3 Time management and planning

This axial code was aligned with the concept that the participants could manage themselves by setting up and achieving goals, along with planning and managing their time. On the basis of the participant's responses, all the participants indicated time management and planning as a significant factor impacting their mental wellness. As such six of the participants indicated that they planned their time and stuck to their plans or would implement minor adjustments, while thirteen stated that they did not stick to their original plans, their time was limited and they could not obtain a balance. Additionally, the participants also indicated the essence of time management and planning within this axial code.

The open codes with regard to this axial code involve: planning work around energy levels; planning tasks assisted in balancing work and studies; difficulty in planning tasks and managing time; planning, setting goals and preparation; as well as time management. Examples of participant responses are indicated below:

"I had to work extremely focused and efficient in my designated time." (Participant 1)

"You are juggling so much that sometimes you set personal goals every day and plan a to-do list on your cell phone. I am not managing as well as I want to because it is difficult judging time." (Participant 4)

"Just knowing you have so many deadlines, you do not give yourself a choice to say I am not focused or tired but rather I tried and schedule what type of work I had to do along with my energy levels. I did not find the studies itself to be extremely difficult, just that my time to work on assignments was limited and I had to settle for good enough even if I wanted to do more." (Participant 15)

"Everything has to be scheduled; I planned each day and stuck to those plans." (Participant 18)

“If your goals are clear and you know what you want as well as when to compromise, your wellness automatically goes up. It is important to plan and set goals for yourself, and to unwind.” (Participant 5)

“I will plan all my programs nicely on my big white board and then if it is done I will just scratch it out or wipe it out so that I know that is done. I can move onto the next thing and you know sometimes when there are three things happening, I will set aside like two hours for one project and then rest for an hour.” (Participant 6)

“Time management plays a big factor, if you do not manage your time well then you are going to be more emotionally drained and you will not feel good about yourself. It is almost like a hierarchy of needs, if you not helping the foundation of it, the rest of it, is not going to follow.” (Participant 4)

“Time is the crucial factor because it is the one thing that I think we all need. The difficulty was also over weekends, just switching off. Apart from time being sufficient, another thing that also plays a significant role is your studies and being competent and efficient at work.” (Participant 10)

“Definitely balancing your time, have a schedule and say okay this is the deadline, it is important to stay in that deadline because sometimes you get tired and you say o no I will do it tomorrow and then you do not do it tomorrow and you get stuck.” (Participant 14)

Accordingly time management and planning effects difficulty in planning tasks along with managing one’s time and the necessity to set goals, prepare, manage time and plan in accordance with one’s energy levels.

4.2.4 Balance and prioritisation

Balance and prioritisation relates to the approach undertaken by the participants towards their daily activities and overall wellness during the situation of concurrently working and studying. With regard to this axial code, fourteen of the participants agreed on it, two of them noted that they had a balanced lifestyle and prioritised certain events, while the other twelve participants indicated a struggle in balancing and prioritising their work and studies as a result of deadlines and expectations.

The open codes generated within this axial code are as follows: difficulty in finding a balance; prioritising studies and self-discipline; maintaining a balanced lifestyle; feelings of satisfaction when achieving a balance; balancing work and study demands; and knowing when enough is enough and what is expected of you. Examples of the participant responses are provided below:

“I had to listen to myself, my body as well as emotions, and on the basis of that do something about it consciously. I couldn’t do everything and I couldn’t be nice all the time. It all comes down to knowing your boundaries and when you should stretch yourself, knowing when you can actually go further than you think you can.” (Participant 5)

“The most important thing is knowing when enough is enough. At first I did not understand the orientation camp, but once I got to second semester it was very clear in my mind what the supervisor was talking about because first semester for me was fine but then when it came to second semester I think that it was the worst for me.” (Participant 16)

“I achieved to balance both and reached my personal goals which resulted in feelings of satisfaction and a reason to be proud.” (Participant 14)

“You know what is expected of you and you know what to do. But if you did not know, you coming into a new world and then it would have been very difficult.” (Participant 15)

“It was difficult to separate my work with my academic tasks. So it is kind of mixed up because when I am at work, I was worried about my assignments and projects. My full focus is just at work and then when I am in class, I am worried I have to take leave and what made it difficult is that we did not have study leave at all.” (Participant 3)

“I think the biggest impact for me was balancing my studies and work.” (Participant 17)

“If you are not focused while doing your masters or postgraduate studies, focused on having a balanced lifestyle, you can very easily get swallowed in by the academics of it and that adds to stress, burnout and fatigue. The key for me would be to have a balance...” (Participant 1)

As such balance and prioritisation refers to the difficulty in obtaining a balance between work and study demands and maintaining a balanced lifestyle, the prioritisation of one's studies, self-discipline, feelings of satisfaction and knowing when enough is sufficient.

4.2.5 Attitude and mentality

This axial code relates to the attitude and mind-sets of the participants in respect of mental wellness. From the information obtained during the data collection interviews, it was evident that all the participants suggested attitude and mentality as a factor influencing their mental wellness. Only five of the participants indicated that they had a positive attitude and mind-set, while the rest indicated that they had a negative attitude or mind-set towards the situation of working and studying simultaneously. The majority indicated a change in attitude or an adaption of one's mind-set and attitude.

The open codes identified were: maintaining a positive attitude and motivation; being an overachiever; opportunity to develop and grow mental capacity; change in behaviour, attitude and personality; and being able to say no. Below are examples of a few participant responses:

“Working and studying at the same time had a huge impact on my mental wellness, actually more than I expected. It served as a force of learning and taking responsibility for development and growth on various levels of my life.” (Participant 14)

“It was a complete attitude change because I was kind of a last minute person. But now I realised that doing bit by bit can actually make a big difference.” (Participant 18)

“Attitude I think that is a big one, it is something I need to work on instead of being negative all the time but it is difficult when you work with negative people so that is my challenge.” (Participant 8)

“Obviously from time to time I would just be upset that I only got a sixty or a seventy and I felt that if I had put more time and effort into it I could definitely walk away with like an eighty or so. I am an overachiever and I always try to give my 110%.” (Participant 10)

“The most important thing for me is being able to say no and then to stick with it and not say no now and then a week later you are like okay but maybe I can still do this.” (Participant 5)

“I was so tired that I could not think clearly anymore because there were just so much things taking up my focus, however the moment I told myself I would have to do this, I just had to focus and do it.” (Participant 15)

“What’s helped a lot on the mental side, is just telling myself you are not in it alone.” (Participant 15)

“I think your attitude is very important, if I was not excited and motivated to do these things and if I did not wake up every day saying today I am going to do my best again, I do not think I would have been able to do both.” (Participant 6)

Subsequently attitude and mentality comprise of: a change in behaviour, attitude and personality; upholding a positive attitude and impetus; being an overachiever; being able to say no and growing as well as developing one’s mental capacity.

4.2.6 Motivation

In terms of this axial code, twelve participants suggested motivation as a factor influencing their wellness, while the other seven participants did not mention it. Additionally these twelve participants pointed out various sources of motivation that got them through the year, to be precise: their faith and spiritual beliefs, a positive and motivated attitude, the right mind-set and goals, which enabled them to improve and grow as individuals.

The open codes were: spirituality and faith served as a motivational force; positive attitude and mind-set; lack of energy levels and motivation to continue; work was stimulating for the mind and motivating; practical application of theory in work; exhaustion served as a motivational force to become efficient in work; and deadlines and last minute stress served as a motivational force to continue. Examples of participants’ responses include:

“It is important to keep a positive attitude or have a good state of mind. The biggest constraint for me was switching off from work and then switching on for university but still relaxing for that period of time before the university lecturers’ start.” (Participant 10)

“It was straining to work and study at the same time but I think if you go in with the right mind-set it motivates you. I went in with my goal in mind and thought of how privileged I am

to be doing this. I grew so much at the end of the year, when I reflected on what I went through. It is definitely possible and I think if you implement your path in the right way, then it can be so wonderful for your mental wellness and you can just improve as a person.”

(Participant 16)

“The thing that carries me through all of this is my spiritual wellbeing. I feel almost like my spiritual wellness is my anchor at this stage which is like pushing my wellness up because I know whatever I am being exposed to, there is a reason for that. My attitude is my hopeful anchor, I am on very strict deadlines and yes I do not make room for failure which is a little stressful.”

(Participant 12)

“I think the more I did the more I was able to do. The workload served as a motivational force, so I was suddenly able to act like this robot and do so many things in just one day. So it was as if my attitude and overall health condition mentally, just grew bigger and suddenly I could just do something I was not able to do. So I would say it affected me in a very positive way and it influenced me to just be double the person I thought I am”.

(Participant 6)

“In a way the work was stimulating and I could relate my studies to it. However the time that I had to put into my work, took some of my study time which was hard for me but our study deadlines kind of forced me to work and kept me going. If I did not have those deadlines, I probably would not have worked so hard on my studies.”

(Participant 1)

“I was not exhausted, I was sometimes tired but it motivated me to just keep on working, I became very efficient and very effective in working.”

(Participant 6)

“Being in the real world of work, everything just clicked so all the theory that we have been learning for years just made sense and to practically see things being implemented was just amazing and motivating.”

(Participant 10)

“I believe praying got me through everything. There were nights that I felt I cannot anymore, then I would just go take a moment and just talk to God and then I would just do it.”

(Participant 16)

Hence motivation referred to motivational forces such as spirituality, faith, positive attitude and mind-set, stimulating work, the practical application of academic work, deadlines, last minute stress and efficiency.

4.2.7 Coping and support

This axial code relates to the coping mechanisms adopted by the participants along with their support systems. Six of the participants stated they could cope or had good support structures, while thirteen of the participants were of the opinion that a lack of support existed for them and they experienced difficulty in coping. As such these participants were challenged, it was a traumatic experience and they started questioning their purpose in life, they found it difficult to relax and were dependent upon the adoption of building blocks in order to cope. Nonetheless most of the participants noted that their wellness improved during the dissertation year as the pressure was less.

The axial code is comprised of the following open codes: difficulty in coping and finding time to switch off; adopt building blocks necessary to cope; spirituality served as a coping mechanism; participants question purpose of life and reasons for studying; not much support – border of a traumatic experience; decreased wellness and difficulty in coping as a result of working and studying simultaneously; coping better and improvement in wellness in dissertation year; as well as just switching off and relaxing. A few examples of the participants' responses are:

"I eventually went to the doctor who prescribed me anti-depressants in order to cope."

(Participant 9)

"Because you busy the whole day, the difficulty for me was just relaxing for that period of time and then switching on."

(Participant 10)

"I got to tell myself daily that I am worth more."

(Participant 12)

"I eventually reached that point where I could not cope anymore; I had to go to the doctor to prescribe me with something to help me cope. Nonetheless, once I had pulled through, it was all worth it but it was a really difficult step for me. I learnt that is very important to be in a top mental condition as it may serve as a force of inner drive and motivation. The deadlines demotivated me, I had to form building blocks necessary to cope with life and build a strong character."

(Participant 14)

“There came a point in the year where I started like questioning why I am doing this to myself. You go backwards because you cannot do everything that you want to do.”

(Participant 15)

“I am someone who needs acknowledgement, praise and motivation from someone outside. I was placed within an environment that does not offer that in the least within a family environment that has always thought if you do whatever you do, it is good...”

(Participant 2)

“There were not a lot of people there who were willing to help, I had no support and it was the border of being a traumatic experience. A chapter that I never want to experience again in my life.”

(Participant 5)

“Support systems played a big role, my mom called me every single night just to hear how I was and I think that really meant a lot.”

(Participant 16)

“I prayed daily, it made me positive, calm as well as motivated and was the main reason I could cope and be in a good state of being.”

(Participant 16)

“In order to cope I would take a break and see people who were not studying. I would try to just get into their world for an hour and thereafter I would be ready to face my world again. The subject that I really struggled to motivate myself with was research. The other subjects were okay because I could apply it to the working situation however I did not have energy or motivation with the research subject.”

(Participant 5)

Accordingly coping and support constitutes: the difficulty in mentally coping, finding time to relax, a lack of support, questioning one’s purpose of life, and the adoption of building blocks to mentally cope.

4.2.8 Nature of the job and studies

This axial code relates to the participants’ overall experience to the situation of both working and studying. This axial code looked at the nature of participants’ jobs. Most of the participants noted that the nature of one’s job and studies affected their mental wellness. Two of these participants indicated a positive effect in terms of managing stress and being able to work on their studies at

work, while ten of the participants suggested a negative effect of this factor due to the neglecting of one's studies and wellness, work hours and demanding targets, assignments and exam dates, group work, travelling and prioritising work over studies. This also includes the commitment and loyalty of the participants towards their employers.

The following open codes were identified to create this axial code: prioritising work over studies due to work obligations; nature of the job and work environment - long office hours, demanding targets and workload; stress due to demanding deadlines; group work - lack of understanding, conflict and busy schedules; nature of job - travelling and hours; work and study demands, deadlines and environment; mental wellness impacted by workload and deadlines; decreased wellness during course work year; as well as external factors like financial implications and technology. Examples of the participants' responses in this regard were as follows:

"The deadlines of you assignments need to be spread out a bit as it increased my levels of stress, thus affecting my wellness." (Participant 17)

"Because in my work you have a boss and you being paid to do a job, you tend to kind of concentrate more on work and my academics were kind of getting the back seat. The work load, on both student and worker, was hard to manage and it felt like I was neglecting my studies due to work obligations and long working hours." (Participant 3)

"I had to prioritise work first because there were deadlines and I would look incompetent if I could not deliver as well as that it affects business directly, you can see the impact and all eyes are on you so I felt responsible to put the company first. It was hectic because I felt this thing in the back of my mind 'dissertation' and it did take a back seat. Sometimes I would also bring work home, so a lot of the time I was actually working more than what I was supposed to and I would come home later." (Participant 8)

"The positive thing about my work environment is that I actually get to do parts of my studies while I am busy with my full-time job." (Participant 12)

"I had to meet demanding targets at work which was quite hectic and I had to adjust to the workload as well as the hours." (Participant 13)

"Group work can have a very negative influence and it depends on your group members and how they manage each other. I saw there were a lot of conflicts in some of the groups"

and it really affects you as a person when there is conflict and you cannot do your work.”
 (Participant 1)

“It was ridiculous with the amount of assignments and the due dates. If I look at the exams, I think they were also a bit unfair like having two days or one day between especially because of the volume of work they wanted.”
 (Participant 4)

“The environment of your work and studies also plays a major role.”
 (Participant 6)

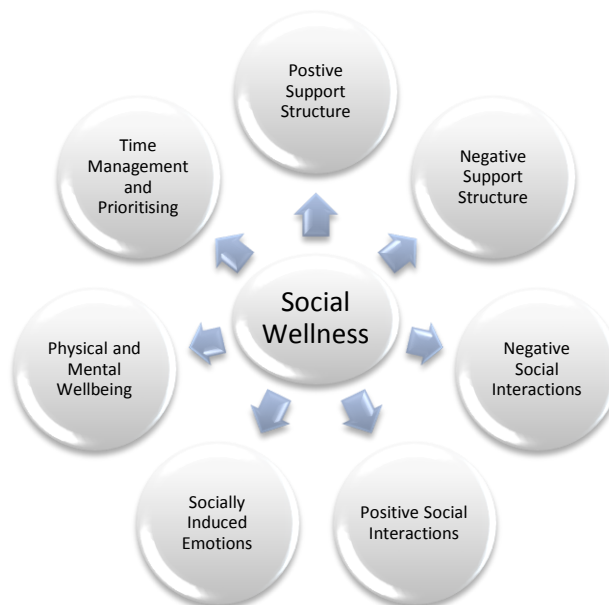
“Location was also a big thing due to travelling of work and studies, I got to a point where I felt the University wasn’t organised in terms of lectures and dates.”
 (Participant 15)

As such the nature of job and studies refers to: prioritisation, group work, conflict, a lack of understanding, external factors, and the environment including workload, demanding targets, deadlines and work hours.

4.3 SOCIAL WELLNESS

When the term social wellness was mentioned during the interview process, seven axial codes were identified in respect of the situation of both working and studying at the same time. These codes can be seen in Figure 4 below and are discussed in more detail.

Figure 4: Social wellness axial codes



4.3.1 Positive support structure

The participants suggested a positive support structure as a key factor impacting their social wellness. This axial code includes the participant's ideal support structure, to be more precise: a positive and good support structure from family and friends. From the responses obtained, twelve of the participants indicated a positive support structure. These participants specified the necessary support from their family, friends, employers, life partners and the University. The participants noted that they had the necessary support and understanding from those around them.

The open codes identified were: mentors - someone to talk to; life partner was supportive; friends and family were supportive; good support structures from those around the participant; and strong support structure from university. Below are some examples of the responses obtained from the participants:

"My friends were very good, I mean they came to my house and dropped off sweets and chocolates for me and my boyfriend was also very supportive. But there were a lot of times that I could not spend with them or see them, I just had to lock myself in the room and just focus on my studies." (Participant 15)

"My husband was very supportive, we would cook together and that is when we would talk and catch up on the work days. He was helpful and supported me; he would sit next to me and do something while I studied." (Participant 1)

"In terms of my social wellness, it is important to say that I have an insane support structure, really very good, my supervisor will defend me if he sees my wellness being affected, he will remind me of it and empower me to get out of it or if he sees there is like a sense of helplessness or hopelessness, he always jumps in like a father. I also have a mother in law and mother that sends me messages every day letting me know that they are proud of what I have done and that is a boost. My husband will push me into positive ways of thinking when I am getting myself down but will also force me to think of solutions." (Participant 12)

"I do not know what is wrong with my family, they like overly supportive. I do not think I would have done my masters without them. Like really, it is important to have a great support system." (Participant 3)

“I do not think I would be where I am today without my family, I am not earning the most glamorous amount of money and they really support me. My boyfriend, my brother and my friends are also very supportive.” (Participant 4)

“My boss was my mentor, he told me exactly how it is done and was really open to suggestions. I think having mentors in the same field will help as it is important to explain the situation that you are currently in to your friends so that they understand that it will not be like this forever.” (Participant 4)

“I spoke to my colleagues, friends and fellow master students. Without their support I would not be here now because we are all in the same situation, they can understand and you know that you are not alone. As soon as you hear do not worry I also feel that way and it helps you, it supports you too speak to your fellow colleagues and friends as they are also in the same position, they can speak with authority and know how it feels.” (Participant 14)

Accordingly a positive support structure is associated with good support obtained from friends, family, life partners and the university.

4.3.2 Negative support structure

In contrast to the above axial code, a negative support structure relates to a lack of support from family and friends. Seven of the participants agreed that their support structure was negative as they experienced either minimal or no support at all from those closest to them such as their life partners, parents, siblings and friends.

The open codes identified within this axial code include: lack of academic support from family and friends; lack of emotional support from family and friends; lack of financial support from parents; life partner was not supportive; and no support structure from university. A few examples of the participants' responses are indicated below:

“It was difficult not to get drawn into politics, not to get drawn into those situations where you are thinking about power and how best to do something...I mean I was highly influenced by an individual at the university who kept on telling me but you are paying for this, they should be offering you a service, they should be doing this and that for you. Yes we are paying for this service but it is up to you to actually learn, it is up to you to make the

most of the service. I was shifted across by different people and no matter what I was going through they did not exactly care.” (Participant 2)

“My parents did not have the financial stability to put me through masters and were against it as they believed that they would have to fund this venture of mine with very little return on investment. Only later in the year, did my family become interested in what I was doing. In addition to this, I also had no support structure from the university.” (Participant 2)

“It affected my friendship because they were in the same boat as me. I had a lack of academic support from spouse, as he indicated that this is not the person he married and he has completely decentralised industrial psychologists because of me working overtime and worrying about my studies.” (Participant 12)

“I mean my family do not really know what it means to actually study or you know get that that degree. For them to actually understand the intensity, time and effort that you need to put in was very different and I did not really get a lot of support. My fiancé on the other hand also wanted to spend time with me and see me at least you know once a week but it was also difficult. I eventually got to see him and could only spend like an hour to two with him, so it was really hard.” (Participant 17)

“My friends do not understand why I am always busy. When they are free I am busy and then when they busy I am free, I have had to cut out a lot of friends that do not understand my situation because I feel like they are wasting my time and placing emotional pressure on me.” (Participant 18)

Consequently a negative support structure is associated with a lack of academic, emotional and financial support from family, friends, parents, life patterns and the university.

4.3.3 Negative social interactions

Negative social interactions are associated with the participants building and maintaining social relationships, including the engagement in social gatherings. Nine of the participants confirmed that their social interactions were negatively impacted as they had to avoid social gatherings or make up excuses and experienced difficulty in building new relationships with others and maintaining current relationships.

The following open codes were identified within this axial code: avoiding social interactions with friends and family; difficulty in building new social interactions; and developed manipulative social behaviour. Examples of responses obtained from the participants are as follows:

“I had to say no to social activities and could not attend all family gatherings. I also did not really have any other social interactions beyond seeing my husband at home in the evenings. It is strange in the work context I did not really see it as social interaction, because the people were older than me and different. At lunch time I would get food and sit on the computer doing my assignments.” (Participant 1)

“I had been hurt so much by everything that what was going on, that it did not matter anymore, it just mattered that I got what I wanted and the fact that I knew how to get what I wanted but I never exerted that power in the past. Now it was irrelevant, I just wanted results and that was it. A friend of mine needed reassurances and help but I could not be there for her as I was so busy trying to look after myself. With my friends it was difficult because I was spending more time with people who are not associated with the university, so anyone who was attached to my university life was the people who suffered because I was trying to get away from that.” (Participant 2)

“My social life was just non-existent. I cannot even remember when I socialised with friends. I cannot even recall a night or evenings were I was able to go out because when I am out and I know I have to do something, I would not be enjoying it because I would be thinking about what I have to do.” (Participant 17)

“I developed manipulative behaviour because I was being taught a lot about observation; I ended up having to really stop myself from analysing my social relationships because it would harm me and others. I mean with one of my friendships, I realised that I am not really this person’s friend and this person is not really a friend to me. I had to learn how to manage that and realise that it is the way that this person wants this friendship and it is okay because everyone has a personal way of dealing with friendship or social relationships.” (Participant 12)

Therefore negative social interactions include the avoidance of social gatherings, difficulty in building new relationships and the development of manipulative social behaviour.

4.3.4 Positive social interactions

In contrast to the above axial code, positive social interactions are linked to the participants' commitment and loyalty towards their social relationships with others. According to the responses obtained, eleven of the participants noted that their social interactions were of a positive nature and resulted in a better understanding from their friends and family as well as a form of a coping mechanism. From the feedback most of the participants agreed that maintaining one's relationships are important. This was done around time as well as work obligations.

The open codes relevant to this axial code comprise of: building and maintaining relationships; clarifying expectations with employers; managed social interactions over weekends and around time; as well as social interactions utilised as a coping mechanism. Examples of the participants' responses in this regard were as follows:

"I had a good relationship with the lecturers and it made a huge difference as they understood my situation. Also knowing that I was not in it alone, I would see my class mates who also had to work and study which played a big role." (Participant 15)

"I explained carefully to my family and friends what it is going to be like when I signed up for masters which assisted them in better understanding my situation. I think that your workplace needs to have some form of understanding of what it is that you are doing and try relieving some of the pressure off you so when you are on your block week it means you are on your block week." (Participant 16)

"I kept a balance, once in a weekend I would see my friends and family, and then week days I would say okay no and focus on work." (Participant 6)

"I feel I need to spend time with my family as I can cope better knowing I took time off even though there is that element of stress. So on the weekends I would see my boyfriend and family." (Participant 8)

"I was living with friends so that avoided problems in terms of them understanding my schedule." (Participant 13)

Subsequently positive social interactions constitute the management of social interactions in accordance with time, building and maintaining relationships, clarifying expectations and the utilisation of these interactions as a way of coping.

4.3.5 Socially Induced Emotions

This axial code includes the emotions participants experienced with regard to their social wellness. On the basis of the data collection interviews, five of the participants indicated that they experienced socially induced emotions. The participants noted that emotions such as depression, loneliness and frustration can be considered as a factor that impacted their social relationships with others.

The open codes identified within this axial code involve: emotionally draining; felt depressed and alone; financial strain and pressure; and frustration due to friendship support being misused. Examples of participant responses include:

“Majority of the time that I was putting in was less than what I was getting out and that naturally creates frustration which led to many things such as emotional turmoil within myself that I actually want to sabotage them. I am a very motivated individual, I need acknowledgement, I need a pat on the back, I need motivation from the people around me, I need to know that what I am doing is good because I do not believe in myself. It was really depressing because I felt like I was alone and I did not have anyone who thought that I could do this.” (Participant 2)

“I experienced frustration and depression due to my friendship support being misused. My friends would just misuse me for when they needed help.” (Participant 1)

“My social wellness was emotionally draining for me as it was straining.” (Participant 6)

“Due to the amount of stress and financial pressure experienced, I eventually began avoiding relationships with others.” (Participant 12)

Thus socially induced emotions comprise of depression, loneliness, strain, pressure, frustration, misuse of support and emotional exhaustion.

4.3.6 Physical and mental wellbeing

On the basis of the participant responses, five of the participants noted that they either neglected their social relationships due to physical and mental exhaustion or that their social relationships affected their physical and mental wellness as it was draining and their social groups were not understanding of their situations.

The following two open codes informed this axial code: mental exhaustion and physical exhaustion. Examples of the participants' responses are indicated below:

"My social wellness was impacted by my tiredness from work, I felt physically drained."
(Participant 7)

"...complete mental exhaustion influenced my social decisions as well as the lack of energy and motivation for possibly planning around my social interactions." (Participant 12)

"I get home in the evenings and I am so tired that I do not want to speak to anybody. I am just not willing to socially interact as I am exhausted from work." (Participant 14)

"I ask my friends if we can just go somewhere because I am going to get depressed, this is really getting to me let's just go out and enjoy the day. So I would actually go out with them but on weekends I would be working right through like morning and night which was physically and mentally draining." (Participant 19)

"My social relations really drained me as I was physically tired and no one understood, so it was mentally exhausting to listen to my friends complain about me." (Participant 6)

Hence, physical and mental wellbeing is associated with physical and mental exhaustion.

4.3.7 Time management and prioritising

This axial code relates to the participants' ability to prioritise tasks and accordingly manage their time. According to the responses obtained during the data collection process, seventeen of the participants suggested time management and prioritising, as a factor influencing their social wellness. From these seventeen participants, it was evident that five of the participants managed their social relationships in accordance with their time and tasks, while twelve experienced difficulty

in terms of managing their social relationships or neglected them completely. On the basis of the responses obtained, it seemed that the five participants prioritised their social relationships on weekends rather than their work and would make an effort to see their friends or family. In contrast to this, the other twelve participants had less or no time for social activities, they sacrificed their hobbies and experienced an impact on the quality of their relationships.

The open codes identified within this axial code, include: impacts on quality time devoted to relationships; time management of social interactions, work and study; need to make social recreational sacrifices; prioritised work over social interactions; making time for things you enjoy and sacrifices; as well as social life took strain. A few examples of the participants' responses are as follows:

"I did not have time to do anything, I mean with me working and having to study and all the projects. I had to work over weekends so I did not see my family and friends that much."
(Participant 9)

"I had to start managing my time, I would go to a party but then I would limit myself to three hours and although I was still in a party mood, I would literally have to remind myself that it is not because I am going to go back home now to work. It is because if I do not go back home now and sleep, I am not going to get up tomorrow morning."
(Participant 5)

"I need to make social recreation sacrifices, I do not do music at all and I use to do it regularly."
(Participant 18)

"Although I had to limit my social interactions with friends, I still had a good balance as I focused on my work and then weekends I actually focused on family and friends."
(Participant 6)

"The biggest impact is obviously on my husband. I mean it completely impacted every area of a marital relationship that no job or studying should ever impact and that is also when I realised that this is changing too much in my life and it is actually hurting me more than it is helping. No amount of finance can replace what is happening in your relationship."
(Participant 12)

“It robs you of that quality time that you can spend with your family. The only time that we can see each other is weekends but now I have to do my studies on a weekend, so it put extra stress on me and it was really difficult. I didn’t even know where to make time for my friends or family.” (Participant 14)

“It is the small things that actually matter, you have to make time for your family and for the things you enjoy even if it is just an hour.” (Participant 7)

“I do not have time to sit and chat or even go out for tea. It was difficult for me because I was used to doing those things, now it was just all the deadlines and it became very hectic, I had to neglect my social wellness.” (Participant 17)

“I did not have a social life, my boyfriend and I actually broke up because I could not see him and I was always busy. Every night I had classes and when I did not have class I had to work on my projects. On weekends I did not go anywhere I just had to work on my studies, so I pushed everything aside. I was just working and studying because there was no time for anything else.” (Participant 19)

As such time management and prioritising involves the impact on the quality time that has been devoted to one’s relationships, work and study as well as the need to make social sacrifices and prioritise work over one’s social life.

4.4 SUGGESTIONS, LESSONS LEARNT AND BENEFITS

This selective code is associated with the participants’ learnings and benefits obtained from the situation of concurrently working and studying full-time as well as recommendations. Within this code, five axial codes have been identified and are represented in Figure 5 below. These axial codes comprise additional information that was obtained during the data collection interviews.

Figure 5: Suggestions, lessons learnt and benefits axial codes



4.4.1 Support system

The majority of the participants were influenced by family and friends to work and study simultaneously. The participants indicated that support played a major role within this situation and suggested a support system as a recommendation to be implemented within the university. Such a support system could include a counsellor or mentor. The participants indicated that such an individual would assist them during times of difficulty and serve as a guide. Additionally, the participants noted that an elderly person would be better than someone within the class (like the class representative), as they could better understand the situation and advise them accordingly. Finally, the participants suggested that a good support system signifies continued motivation and encouragement.

The open codes identified were: support systems in place for students' namely, counsellor; support from the University; support and understanding from employers and a mentorship system in place for working students. Examples of the participants' responses follow below:

“Have a mentor, like your lecture that you can go to every month to just talk. Somebody that is in your field and knows what you are going through.” (Participant 2)

“What assisted me within this situation was the fact that I have a good manager who was very understanding. So it helps that I have an employer that is able to accommodate what I need.” (Participant 11)

“My support system is there to motivate me and encourage me when it feels like I am struggling to cope and they reassure me that I am able to succeed and better deal with and manage my wellness.” (Participant 11)

“I think there should be a counsellor, somebody students can talk to when they are feeling stressed or going through a hard time, preferable an elderly person. At the same time I think if it should be someone else outside the class, it is better, else that person is also under the same stress. So if you stressed and they stressed and they trying to help you, it just makes you more stressed. Personally I found my study leader helped me a lot, being just very open and understanding. This made a big difference.” (Participant 15)

“At work, a wellness champion was appointed just for the wellness of employees so they will like schedule every second Friday where they would have massages or they will put things on your desk like sweeties or a note or something which motivated you. I carried this across to my studies because I felt like there is motivation on my work side so I do not need to motivate myself to work at least because it is already there.” (Participant 5)

Thus support systems comprise of support as well as understanding from the university and one’s employer such as an onsite counsellor, wellness champion or mentorship system.

4.4.2 Creating course awareness and clarifying expectations

Some of the participants wanted to better understand what the masters’ course embodied and what they would need to achieve. As such participants have suggested this as a recommendation for future postgraduate students who are working and studying. The majority of the participants stressed university transparency with an openness in respect of the expectations and the time required for postgraduate studies. These participants stated that the university should encourage part time jobs as the postgraduate courses require a sufficient amount of time dedicated to the studies. Along with this, the participants expressed that university deadlines should be more realistic and consideration should be given to students working especially with regard to block weeks and those who are travelling.

The open codes identified include: university transparency in terms of the full-time masters course; preparation and an awareness session by the University on what to expect; and the importance of planning and organising. Below are examples of participants’ responses:

“The university should consider that when they tell people you know get a job, they should say to them get a half day job or a part time job but do not put all of your time in there because you need lots of time to do your studies as well.” (Participant 9)

“I think people do not really realise the impact that working and studying full-time can have on you. It emotionally, physically and mentally takes a lot out of you and requires a lot of effort along with the importance of planning and organising.” (Participant 15)

“I think the university needs to be more transparent in the sense that yes we are advertising for a part time course but this is how much classes you will need to be doing and this is how much leave you are going to have to take...wellness was something that fell between the cracks when I was studying.” (Participant 4)

“If they could stream line their block weeks more efficiently and you know have the lectures actually more dedicated so that you know when they say a time, they mean a time. Maybe they could lessen the workload or adjust the deadlines.” (Participant 17)

Hence creating course awareness and clarifying expectations relates to university transparency, including awareness of expectations and the importance of planning and organising.

4.4.3 Awareness around wellness

This axial code was one of the suggestions by the participants. A minority of the participants suggested that more awareness around the aspects of wellness and maintaining a balance should be created especially for those who are both working and studying full-time. These participants pointed out the prominence of motivation, having the right mind-set including the right attitude, preparation, self-awareness and balancing the different wellness areas.

The open codes identified comprise of: creating self-awareness around wellness and maintaining it; awareness sessions surrounding the impact of working and studying full-time simultaneously; obtain a balance across all areas of wellness; and adopting the right mind-set and maintaining a positive, motivated attitude. Examples of the participants' responses include:

“A few years ago, I very much endeavoured towards academic excellence and only wanted to achieve in that aspect but my view changed when I realised I have achieved as a whole being. So my focus has shifted from only performing in one area towards performing in all the areas of my life that includes my mental wellness, my spiritual wellness and my physical wellness. So I still worked out, exercised every day, mostly spent time with the Lord and had religious time, and scheduled time with my husband and friends. There should still be a balance in your life and although it was a bit tipped to the one side with the working and studying it was just for a period...” (Participant 1)

“People are not going to gym anymore, they are not caring about what they eat, they do not see their friends anymore, and they hardly talk to their family. So I think awareness of it in terms of maintaining a balance and making sure nothing falls on the way side since it is a year of your life and as much as it is a big impact on our lives, it is also a big step in our careers. I also think it is all in your mind-set. If you know that you want to finish masters but you want to work full-time then I think you come to the conclusion that this is my reality and I am going to just do my best.” (Participant 4)

“...always knew that it was going to be a difficult year and you kind of just have to prepare yourself for it and have the right attitude.” (Participant 15)

“It is academically challenging and mentally motivating but if you motivated, you can still go past it.” (Participant 5)

Subsequently awareness concerning wellness consists of an awareness session with regard to the impact of concurrently working and studying, self-awareness in terms of maintaining one's wellness including a balanced lifestyle, positive and motivated attitude, and the right mind-set.

4.4.4 Lessons learnt from working and studying simultaneously

This axial code specifies what the participants erudite from such a situation. Most of the participants state that it was challenging and exhausting, but they learned to manage as well as plan their time properly, gained self-confidence and discipline, the importance of having a balance and taking time to unwind, staying positive as well as handling pressure.

The open codes identified consist of: exercising regularly and maintaining regular sleeping patterns; pressure and working served as a motivational force; taking time to relax and unwind;

self-discipline (will be roll-backs but it is rewarding); more planned and organised; and more positive and making an effort to balance everything. Below are examples of the participants' responses:

"I learnt to plan my time properly, stay focused on what I needed to do and gained self confidence in my ability to contribute significantly to the company." (Participant 15)

"...now there is a balance, I am eating before six at night, waking up, running, I see my friends and family, and I actually feel healthy. My lifestyle is so much better and I know where to do what and I can fit everything into my day." (Participant 19)

"I've been making a concerted effort to actually balance things out. I am still not where I would have planned to be or wanted to be because I did not do much over the holidays but I am happy because I see progress." (Participant 8)

"If you have the self-discipline and the capacity to do it, I think it can be beneficial...it is possible, there is a lot of roll backs to it but I think if you have the type of personality that can do it and you realise the things you have to give up for it...you will do it. I was more focused; planning helped me in a way to work and study better." (Participant 1)

"...the master's program in itself was already demanding, the biggest difficulty was having less time to dedicate on my academic work and it was key for me to carefully manage my time and social interactions." (Participant 1)

"I think you need to unwind at some stage because then you will burn out, you constantly on that role of studying, working and then sleeping, that is not really a life." (Participant 13)

"...as an experience, it taught me a lot about myself and how to handle pressure." (Participant 3)

Consequently the experiences from working and studying simultaneously include the lessons learnt from such a situation, specifically the importance of regular exercise and sleep patterns, taking time to relax, utilising pressure as a motivational force, self-discipline, planning and organising, balance, and positivity.

4.4.5 Benefits of working and studying simultaneously

This theme considers the satisfaction of the participants within the situation of concurrently working and studying. A minority of the participants noted the benefits they acquired through the situation of both working and studying simultaneously. These participants indicated that work was rewarding, it was a part of growing up, evolving and living your purpose in life. The majority of the participants indicated that it was difficult and challenging; however some participants noted that although it was hard, it was worth it as a result of the value obtained from this situation including mind stimulation, wider frames of reference, practical application of one's knowledge, motivation and inner drive.

The open codes identified within this axial code were: quality and purpose of life; wider frame of reference; and opportunity to grow, mature and evolve. Examples of the participants' responses were as follows:

"It was rewarding to work and to feel that you have accomplished something, it is kind of living your purpose and contributing to more than just your small circle. Working and studying concurrently widens your horizons and frame of reference, so I think it was a very good change for me although it was very hard. It is part of growing up and maturing and evolving." (Participant 1)

"This was one of the most challenging and precious periods in my life, the value I received from working and studying simultaneously was phenomenal, it was stimulating on an academic level and provided an opportunity to apply my accumulated knowledge in a workplace. I feel that I have purpose in life and I am working towards something larger than myself. I have obtained an internal drive through this great opportunity to be able to study and I am grateful therefore." (Participant 1)

"I still had a quality of student life." (Participant 13)

"...opportunity to apply what I learnt in my studies..." (Participant 15)

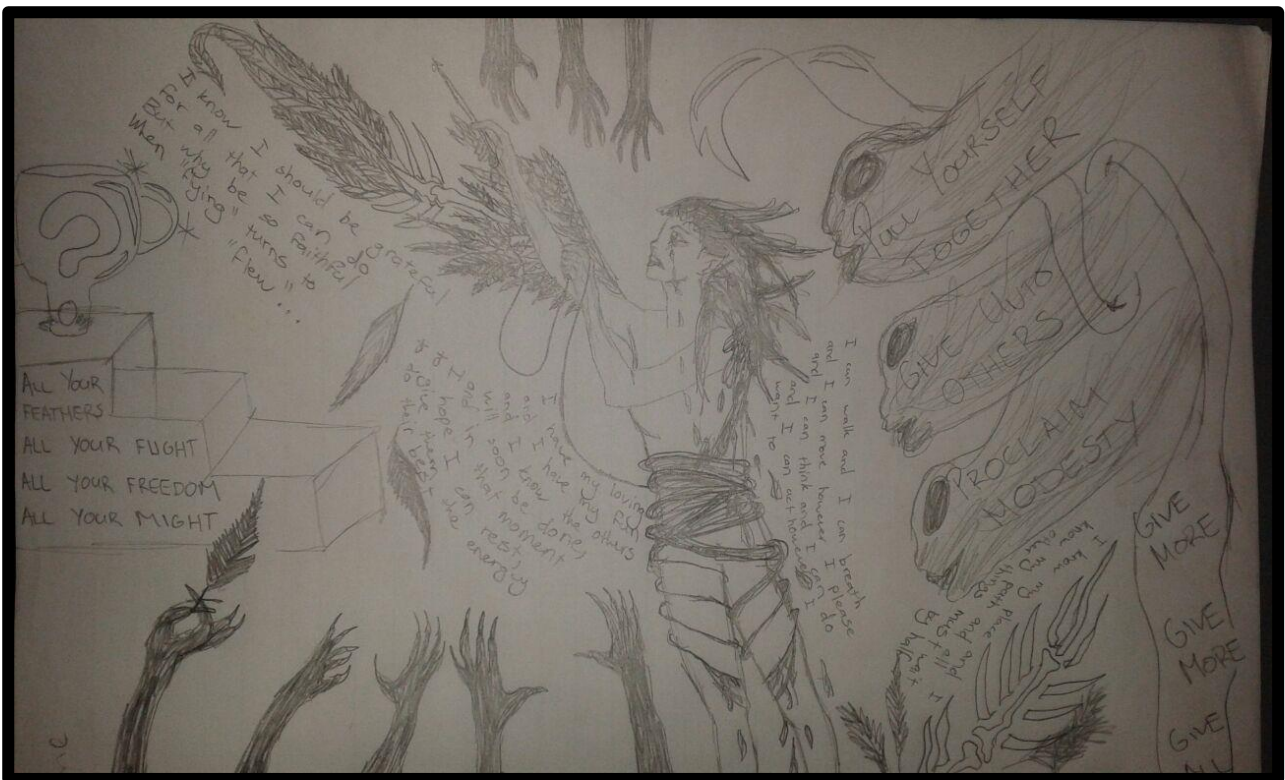
"I feel that after this experience I can only grow and improve my ability to juggle my mental, physical and social wellness better." (Participant 3)

Therefore the benefits of working and studying simultaneously relates to the advantages, such as one’s quality and purpose of life, a wider frame of reference and an opportunity to grow, stretch oneself and evolve, including mind stimulation and practical application of academic work.

4.5 REPRESENTATIONS

In addition to the interviews, some of the participants expressed their situation of working and studying in the form of a representation. Only three participants verbally consented to the utilisation of their drawings in the research study. On the basis of this, only three representations are illustrated below and interpreted according to the participants’ explanation of them.

Figure 6: Drawing one of the situation of working and studying simultaneously



Drawing one in Figure 6 above was one of the most interesting representations. The words within the drawing represent a poem. The name of the poem is called “pull yourself together, give unto others, proclaim modesty”, while the subtitle is “give more, give more, give all”. The poem begins from the right to the left with the words “I know my place...fight all your freedom, all your might.” In summary, the drawing is an angel trying to fly, while her feathers are pulled apart by the people around her, and she is expected to sow herself up using her own strength, which in essence is unravelling her from below, while individuals see this and keep on asking for more and more.

The participant begins by illustrating a naked person in the middle. The justification for this is that the participant is literally naked to the world in terms of her emotions and the struggle she is going through, it strips her bare. The participant was this person who could achieve great things. Having wings and flying, being fantastic but then everyone made demands on her. Her wings fell off and she realised that she could not fly anymore. She had to cope with this hindrance. The needle and thread represent the participant stitching herself together and in doing so she is pulling herself apart, as the participant is putting her wings together with her own skin, flesh and bones (the feathers on the bones), she is cutting herself open and bleeding (the drops running on the legs), not realising that although she is going to reach her goal (the trophy), she is breaking herself down in other places.

In this process the participant is seen as soaring, she is portrayed as greatness because she is still up in the air flying but in actual fact, she is falling with people pulling her apart. While trying to put herself together, she is pulling herself apart; it is most unlikely that she will accomplish her goal as is expected of her. All the effort that the participant is placing and the frustration represented by tears becomes the blood. She cannot differentiate between what is her own sadness as it is created from inside and what is the sadness as it is expected from the outsiders. Her body is engulfed in rope, creating an armour for her. This could perhaps indicate that the image she projects is not really who she is as a person. It is just an outer coverage. As such the participant endeavours to pull herself together but the means by which it is being done is not necessarily good.

The various pairs of hands represent those pulling from the bottom, waiting for her to fall apart (the feathers falling and hands reaching for them). The hands from above, which want to pull her up but in turn end up pulling her apart. The participant also points out that there are little rats that speak to her (the bodiless spheres), they are faceless and nameless. They represent the different stakeholders who have expectations and control over her. Like wraiths, they shift and change form into any person who needs something from you. Even, family and friends who appear to lend support and guidance but instead contribute to a breakdown and destruction of the individual. The participant eventually self-destructs. All this relates to the participants support system.

The participant ends up giving up all her feathers in the end, she ends up surrendering the people around her, thus resulting in her not being able to fly and her internal drive is completely drained as well as exhausted ultimately limiting her from achieving her goal. As a result of this, the participant lost track of her initial goal, she questioned what she was doing and the purpose of studying for six years of her life. She questioned the point and purpose of it. The participant notes that the trophy

does not have a platform and the reason for this, is because it can fall and change as it is dependent on the things around her such as context (internships) and people.

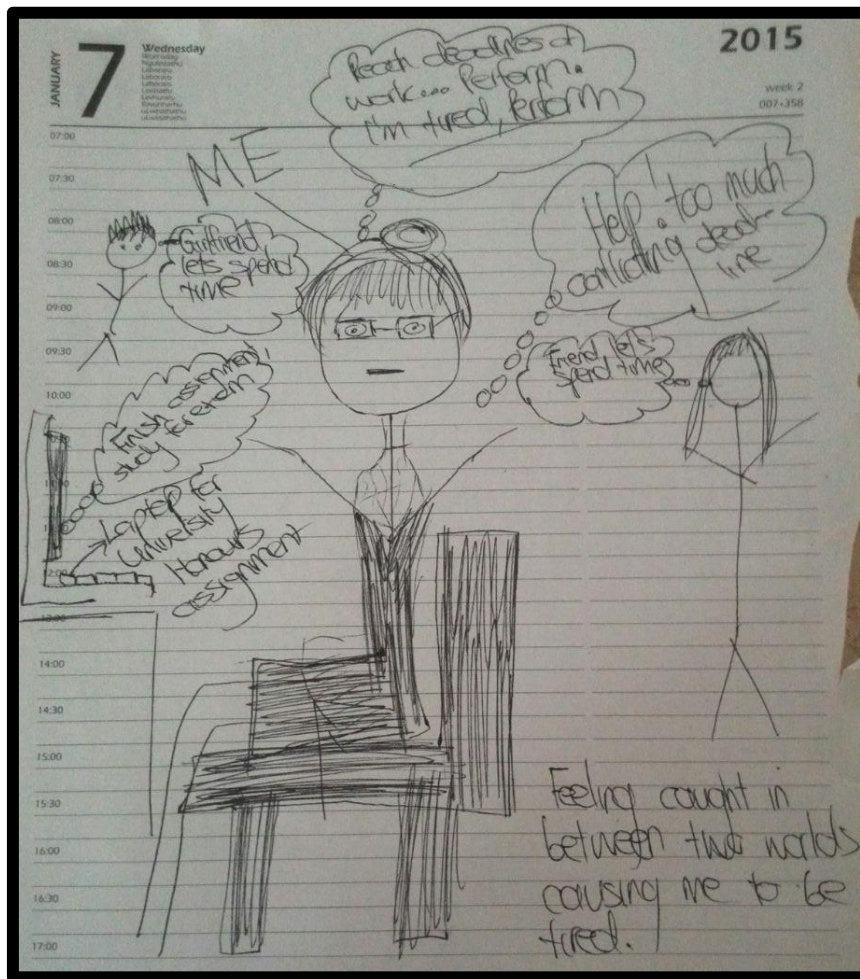
With regard to the poem, the first paragraph “I know my place...” indicates the matter of the participant realising that she is starting her masters and she is a student. She has to place everything else on hold; her life needs to stop and is now dedicated to this cause. The second paragraph describes the internal part of her that says her life has got to be on hold but she can be grateful about the fact that she can do this. It is how the concept is marketed, that one is a student and can do this, however when the participant compared it to the working world, she felt incapable of identifying active knowledge that could be applied. In terms of the following words “...and I can act however I want to...” the participant notes that it is a lie, saying she is the new industrial psychologist; she is going to embrace the world which is really not like that.

The third paragraph “I have my loving...” shows that the participant needs to be grateful for the fact that she has people who love her and has fun doing what she is doing. This is where she starts realising, she is doing this for others but it is okay because soon it will be complete and she can put herself together and be happy, but in the mean time she is lying to herself by saying that she must be grateful by focusing on the positive things. Additionally, the participant suggests that in the mean time she needs to ensure others reach their goals and give off their best as she was of the belief that everyone is a team and must work together, she pulls herself down because she is busy helping everyone else and no one is helping her.

The fourth paragraph “I know I should be grateful...” is the most important theme as it summarises the entire message of the poem- that one is so privileged to be studying in this postgraduate course and to have a job. Nonetheless, the participant states that she has to put so much faith in this task and remain hopeful. The final part of the poem suggests why the participant should be faithful to this cause, if it is just going to break her. She questions the purpose of this goal.

It is important to note that in order to read the picture it has to be turned. The reason for this is because life is upside down. If the picture is upright, the angel is flying and if the picture is upside down, the angel is falling. Along with this, the platform is an illusion as the participant does not know the platforms to reach the goal or how to get there.

Figure 7: Drawing two of the situation of working and studying simultaneously

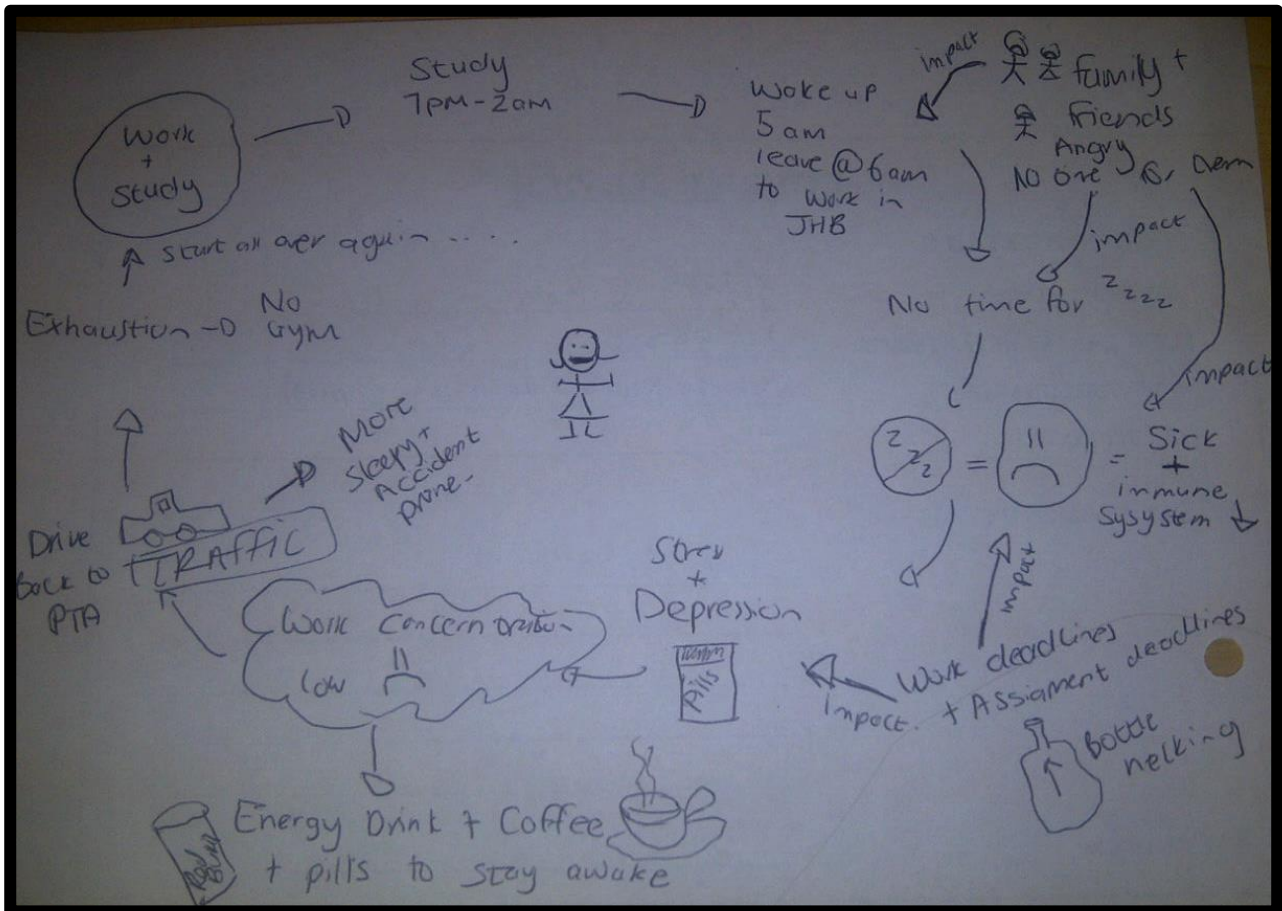


Drawing two in Figure 7 above illustrates that all three aspects of wellness are influenced by factors such as time, deadlines and workload, whilst in the situation of working and studying simultaneously. The participant presents herself in the middle of her diary (busy schedule). The reason for this, it that the participant is portraying the various times of her day as she is constantly working and has no time for anything else. The lady sitting on the chair in front of the laptop represents a typical day in the life of a participant where she spends time sitting behind a desk and working on a computer, be it work or studies. The speech bubbles indicate that the participants mind was continuously occupied. She was under constant pressure to complete her assignments, to meet work deadlines, to perform at work and to begin focusing on her exams.

In addition to this, the participant also had social pressure as her boyfriend (the stickman on the left side of drawing); family and friends (the stick lady on the right side of the drawing) were insisting that she spend time with them. As such, her social wellness was targeted due to her work and study obligations. The raising of hands illustrates the call for help, the participant was seeking help as she struggled to cope with meeting the deadlines between work and studies; she was torn

between two worlds which resulted in exhaustion. As a result of this, she was mentally fatigued and her physical wellness took a strain as she neglected her physical body due to time constraints and an urgency to meet work obligations.

Figure 8: Drawing three of the situation of working and studying simultaneously



Drawing three in Figure 8 above illustrated the daily life of the participant. The representation illustrates the participant in the centre with everything else around her. As she stands alone, the pressures of life surround her, this being; work, studies and social factors. These factors in turn, have an adverse effect on her wellness. It is clear that the participant was dependent upon three to four hours of sleep; she had to wake up in the early hours of the morning and travel to work which took an hour and a half to two hours.

As a result of time constraints, the participant's social relationships took strain (the stick men on the right hand side of the drawing). Her family and friends were becoming agitated and impatient. Therefore the participant appeared depressed and withdrawn. This in conjunction with the lack of sleep manifested into physical health complications (the impact of sleep and emotions "smiley face" on the right hand side of the drawing). Work and study deadlines resulted in further stress

and depression. The participant reached a point of intolerance, where her progress was declining (“bottlenecking”). She noted that the workload was too much, she was under immense pressure. This landed the participant in a doctor room, where medical intervention was necessary in order cope with all the demands (the pictures of tablets, coffee and energy drink at the bottom of the drawing).

The participant indicated that her mental capability was affected as she experienced difficulty in functioning (the sad face in the speech bubble). Subsequently, after work, the participant had to travel back home in traffic (the picture of car on left hand side). Due to the long working hours and sleep deprivation, the participant was more accident prone and exhausted both mentally and physically. Nonetheless, the participant had no time for physical activity as she would arrive home and focus on meeting her study deadlines, thus only going to bed in the early hours of the morning. The participant would follow this same routine daily. All three aspects of the participants’ wellness were affected. Due to the participants’ overloaded daily routine, she experienced immense difficulty, mentally, physically and emotionally which resulted in the use of certain coping mechanisms in order to survive within this situation.

SUMMARY

In this chapter, the researcher presented the results obtained from the data collected. The focus was on the participants’ current lives and examined the factors influencing their wellness in respect of the three aspects of wellness. It is undeniable that the impact of working and studying plays a critical role in contributing to the wellness of a student. It became even clearer that various factors influence a postgraduate working student’s wellness.

The next chapter presents a discussion of the main findings of the study in relation to the available literature on the topic.

CHAPTER 5:

DISCUSSION OF RESULTS

The findings discussed in Chapter 4 illustrate the various factors influencing postgraduate working students' wellness. The participants expressed very strong opinions on the various factors; some overlapped with those of other participants and others were unique and different. As such this section includes a discussion of the results in relation to the current available literature, specifically the four main selective coding themes of: physical wellness; mental wellness; social wellness, and suggestions, lessons learnt and benefits. In order to make sense of these results with regard to existing literature, this chapter focuses on demonstrating where the results support literature and where they differ from previous research studies. Therefore the researcher focuses on answering the research questions as established in Chapter 1, through the comparison of the research findings with the most recent literature.

5.1 PHYSICAL WELLNESS

On the basis of participant responses obtained during the data collection process, the following axial codes were identified as factors impacting their physical wellness; health habits, physical symptoms, time and task management, nature of the job and studies, coping mechanisms, and overarching emotions. These axial codes are discussed below in conjunction with one another and in relation to physical wellness.

Firstly, health habits are related to exercise, eating and sleep patterns. This is supported by research, as Botha & Brand (2009, p. 3) indicated that the physical dimension encompasses "regular physical activity, knowledge about food and nutrition." Similarly MacDonald (2005) indicates that the following methods are adopted to maintain good health; ensuring three regular meals a day, specifically, breakfast, moderate exercise two or three times a week and seven to eight hours of sleep at night. According to the results only a minority of the participants would eat the recommended three regular meals and get at least six hours sleep a day. As such only some of the participants were serious about being healthy and would proactively manage their health. The majority of the participants were orientated towards unhealthy eating and sleeping patterns, with most of the participants indicating that they would eat unhealthily or not eat at all, and they would not sleep or would function on minimum hours of sleep. These participants experienced difficulty in keeping healthy habits and noted a few barriers that made it difficult for them to participate actively

in exercise. They mentioned that work demands and time constraints made it difficult to participate in physical activity.

Similarly, on the basis of the drawings obtained, drawing three depicts what the participant's daily life entailed and the findings support a lack of sleep as the participant noted that she was dependent upon three to four hours sleep at night. The participant also neglected physical activity due to her limited time as she would have to study after work. Consequently, the researcher assumes that lifestyle accounts for the most important influence on wellness. Adjustments to lifestyle include changing one's diet as well as exercise routines and daily habits so as to fulfil all dimensions of wellness (King et al., 2007). Similarly the participants note that effort was required to eat properly and drink lots of water as well as to maintain these healthy habits.

Trockel et al. (2000) explored the relationship between academic results and certain healthy behaviours. They confirm that there is a positive association between strength training and academic success (Trockel et al, 2000). As such due to the participants' lack of engagement in physical activity, it can be inferred that this could be a reason for the inability to function effectively. This relates to the results obtained under mental wellness and supports the link between physical and mental wellness. Ballentine (2010) concurs with these findings through the indication that physical activity influences academic performance.

Irwin (2007) notes that the majority of university students do not partake in a sufficient amount of physical activity that is considered to be healthy. Similarly, Kwan and Bryan (2009) support this premise and indicate that individuals are more likely to continue to be physically active if they feel good as a result of exercise. As such, the reason for the participants not eating healthy or not eating at all can be related to their participation in physical exercise. Westerterp (2010) also supports this through the indication that nutritional status is reliant on physical activity.

According to research physical wellness includes: maintaining a "healthy quality of life" that allows an individual to get through their "daily activities" without any "undue fatigue or physical stress"; individuals recognising that their behaviours significantly impact their wellness; and "adopting healthful habits" (Botha, 2007; Botha & Brand, 2009, p. 3). In addition to this, the researcher is of the opinion that in order to maintain a state of optimal wellness, the participants need to be physically active, display no signs of illness and be free of risk factors. Hoeger and Hoeger (2010, p. 14) state that "indulging in unhealthy lifestyle behaviours increases the risk of developing chronic diseases and diminishes the wellbeing of that individual". This brings about the second factor that participants mentioned impacting physical wellness, namely: physical symptoms. This axial code

explores the physical symptoms experienced by the participants as a result of working and studying simultaneously. The majority of the participants experienced physical symptoms such as: panic attacks due to stress; burnout; a low immune system; headaches; eye strain; weight loss and gain; heart palpitations; low and high blood pressure; hair loss; skin breakouts; increased levels of illness or hospitalisation and physical exhaustion.

The reasons for the participants experiencing these physical symptoms ascribed to the lack of participation in physical activity and the indulgence of unhealthy lifestyle habits. Warburton et al. (2006) supports this idea attribution in terms of blood pressure. Through the indication physical exercise has been found to be effective in reducing blood pressure in individuals (Warburton et al., 2006). However, the individual would have to engage in physical exercise on a regular basis in order to maintain the beneficial effect (Strong, Malina, Blimkie, Daniels, Dishman, Gutin, Hergenroeder, Must, Nixon, Pivarnik, Rowland, Trost & Trudeau, 2005). Similarly, Dunn (2009) also supports this by indicating that thirty minutes of vigorous physical exercise per day contributes to an improvement in risk factors such as cholesterol and blood pressure.

With regard to the participants' low immune system, research notes that physical activity provides many benefits and can have a considerable impact on an individual's immune system (Vuori, 1998). Al-naddaf and Dabayeb (2007) research findings support the relation between weight gain and a lack of exercise. As such the researcher infers that the participants' who experienced weight gain could be due to them not partaking in regular physical activity. Westerterp (2010) substantiates the participants' response of weight loss through the indication that nutritional state and exercise are interrelated through energy balance which involves the relationship between energy intake and energy expenditure.

In addition, researchers have found that exercise substantially influences visual concentration, eye-hand coordination, proaction-reaction time, response speed and accuracy (Du Toit et al., 2006; Du Toit et al., 2007; Tomporowski, 2003). This is also supported by drawing two in which the participant indicates that when she neglected physical exercise, she experienced physical symptoms, such as eye strain and headaches.

Equally Andersen et al. (1999) found that a program combining diet and exercise had a positive influence on obesity reduction, weight loss, and blood pressure. The authors also found that irrespective of the type of exercise, maintaining a healthy diet elicited benefits (Andersen et al., 1999). As such it is important to adopt healthy habits in order to avoid these physical symptoms. This also substantiates that the participants' experiences of these physical symptoms are a result

of them adopting unhealthy lifestyle habits. Consequently, the researcher confirms that lifestyle-related behaviour like nutritional status is critical in maintaining a sense of overall wellness.

In regard to stress, Kaplan and Saccuzzo (2005) specify that stress and anxiety are so closely interrelated that their physiological symptoms are often identical. For instance, a fast heart rate leads to an increase in pulse rate and other similar physiological responses (Kaplan & Saccuzzo, 2005). This research supports the participant response of stress relating to heart palpitations. Love et al. (2006) state that at an individual level, stress can contribute to physical illnesses, such as high systolic blood pressure. Moreover, Johnson (2006) declares that long-standing and intense stress can lead to back pain, skin disorders, depression and anxiety. As such it seems that stress was closely related to the participants' blood pressure, hair loss, skin disorders and increased illnesses.

Research also infers that, if the individual is exposed to constant intense or prolonged stressors, his or her body energy and defence resources will be exhausted (Zimbardo et al., 2003). This leads to the body's vital resources being depleted from the immune system, leaving the individual vulnerable to illness or disease (Zimbardo et al., 2003). The participants' responses indicated this as their high stress levels resulted in increased illnesses and a low immune system.

Most important to note is that allergies, migraines, back problems, depression and an increased frequency in minor ailments such as colds and flu have all been associated with stress (Spector, 2002). This confirms that the participants' increased headaches are related to burnout, physical exhaustion and stress. Jackson et al. (2006) found that burnout is also related to health problems as a result of high job demands, pressures and stress. This is associated with another factor indicated by the participants, specifically that the nature of their work affected their time and task management, which brings about the next axial code "the nature of the job and studies". This involves the amount of work hours; the use of technology; travel time; studying demands; workload; deadlines; pressure to perform, and amount of sleep. All of these factors can lead to stress and pressure and can have an impact on their quality of life. As such, this relates to the fact mentioned earlier that the nature of work and studies also influenced whether the participant adopted a healthy lifestyle or not.

The majority of the participants indicated that the nature of their job and studies had an impact on their physical wellness. On the basis of the drawings obtained, number two and three also provide evidence of this. The participant in drawing two emphasises the nature of her job and studies through the indication of her busy schedule, deadlines, workload, limited time and the fact that the

majority of her day comprised of sitting behind a desk and working. The participant in drawing three similarly demonstrates that her job requires her to spend nearly four hours of her day travelling in traffic, impacting on her physical wellness. With regard to this research study, limited literature exists in terms of exploring this factor and thus it can be further explored in future studies.

Furthermore, the participants indicate that they experienced an increase in anxiety and stress levels due to factors such as the nature of their job and studies. Research indicates that stress becomes maladaptive when a person is incapable of handling environmental demands and experiences a significant amount of anxiety and physical exhaustion as a result (Kaplan & Saccuzzo, 2005). The participants had an impact on their quality of life, level of motivation and sleeping patterns. Stress and pressure due to travelling, staring at a computer, long working hours, and tight deadlines resulted in a lack of sleep. Research supports this finding in that it has been found that sickness and an increase in absenteeism can be significant problems in an organisation. Additional pressure is placed on employees, thus resulting in work-overload problems, a reduction in quality of service, tensions and conflicts arise, deadlines are missed and there are huge financial costs (Thompson, 2009). Studies have also illustrated that individuals who are physically healthy are more resilient and deal more effectively with stress-producing factors, such as work overload and work pressure (Attridge et al., 2005; Slack 2006; Thogersen-Ntoumani & Fox, 2005). This infers that the nature of one's job, such as work demands and overloading have an association with stress and is related to physical wellness.

Time and task management, which includes the participants' planning as well as managing their time and tasks also arose as a factor influencing physical wellness. More than half of the participants experienced difficulty with time and task management. The participants note that having a balance and structure is linked to being healthy. However, the majority of them experienced difficulty in obtaining this balance. The few participants that managed their time well and planned it in accordance with their energy levels had established a set routine. There is limited literature to support this factor of time and task management as an element influencing physical wellness. As such, it can be inferred that this is an interesting result which should be further explored in the future.

The participants' perspectives regarding their physically wellness will now be comprehensively discussed within the framework of coping mechanisms. All the participants highlighted various ways of coping. A few of the participants admitted that they engaged in substance abuse as a coping mechanism. On the basis of the participant responses, coping mechanisms include: spirituality, sleep to regain energy, emotional eating, music to relax, and exercise which led to

improved self-esteem and confidence, as well as increased energy, stress relieve, meditation and an outlet to combat fatigue. Additionally, the use of substances and supplements for stress, anxiety, sleep, focusing and lying awake were also adopted as a way of coping. According to the participants' drawings and their interpretation thereof, it was clear that in drawing one, the armour around the angel represented a persona or another part of the participant that protects her from outside factors. This was indicated as the participant's way of coping.

With regard to the use of substances and supplements, Botha states, that the physical dimension "discourages the use of drugs, tobacco and excessive alcohol consumption" (Botha & Brand, 2009, p. 3). As such, it seems that the use of substances had a negative impact on the participants' physical wellness as they utilised them as a means of coping. Most of the participants mentioned exercise as a coping mechanism. Research provides evidence of this as Miller (2010, p. 226) states that: "diet, exercise and rest have a profound effect" on how individuals feel emotionally and that exercise is also known as a good way in which some individuals can connect to their spiritual wellness. An example of such an exercise would be yoga or "tai chi". This again indicates the relationship between physical and mental wellness, and is supported by the participants' responses.

Shumaker et al. (2008) suggest that high and moderate levels of physical activity hold benefits for individuals, as they undergo beneficial physiological and psychological changes when they are physically active, leading to higher job satisfaction and less job stress. The healthier people are, the better they feel, the better they deal with stress, and the more resilient as well as involved they are in their work (Dunkin, 2008). This is aligned with the participants' responses of exercise as a coping mechanism which led to increased self-esteem and confidence, as well as an energy and stress reliever.

Likewise, Ryan et al. (2009, p. 108) state that "when active, people feel more energetic they satisfy deep psychological needs that contribute to an overall sense of wellness". An individual may appraise a situation as both positive and negative, but subconsciously adopt coping mechanisms to deal with threats. For instance, an individual may eat more without realizing the reason for doing so. Research indicates that working students who cannot manage the change in environment may experience difficulty in coping (Wang et al., 2006). This was evident in the participants' responses with regard to the adoption of substance use and emotional eating as way of coping.

The final identified factor influencing physical wellness was that of all the overarching emotions which were experienced by the participants during the situation of working and studying

simultaneously. According to the participants' responses, the majority of them experienced a change in their emotions. These overarching emotions relate to a change in one's behaviour and emotions as a result of increased levels of stress, pressure, anxiety and include feelings of depression, demotivation, frustration, unhappiness and torture, leading to crying as well as the importance of obtaining balanced levels of stress and anxiety as well as a frustrated frame of reference.

Research supports this by indicating a change in attitude as a result of physical fitness (Mack & Shaddox, 2004). Due to the participants' lack of physical exercise, this could have resulted in a change in attitude and the experience of these overarching emotions. Edwards (2006) also supports this by indicating that various studies have illustrated the effectiveness of physical exercise in reducing stress, anxiety and depression. Likewise the United States of Public Health Service Office of the Surgeon General (1996) suggests that a relationship exists between exercise and psychological conditions, especially depression and anxiety.

Another reason for these overarching emotions is that of stress. Zimbardo et al. (2003, p. 92) indicate that when an individual's body is in a "state of hypoadrenia – a state where the body does not have the capacity to adapt or to deal with the stress, it can result in health problems, such as high blood pressure, fatigue, depression and anxiety". As indicated earlier the participants experienced high blood pressure, panic attacks, fatigue, depression, pressure, demotivation, frustration, unhappiness and anxiety. Several studies also indicate the benefit of emotional wellness by partaking in physical exercise (Kickbusch & Payne, 2003). They indicate a positive relationship between physical exercise and mental health or emotional wellbeing in improving symptoms of depression and anxiety (Haby et al., 2012; Siefken et al., 2012). Exercise has been found to specifically reduce symptoms of depression and anxiety, as well as improve one's mood (Kickbusch & Payne, 2003). On the basis of the participant responses obtained, this was evident as exercise was adopted as a coping mechanism for stress and anxiety.

Likewise a study conducted with older individuals demonstrates that a physical resistance training programme performed three times a week resulted in a significant improvement in mood and a reduction in confusion, anger and tension (Kickbusch & Payne, 2003). Therefore it can be inferred that physical exercise assists in reducing these overarching emotions. For example, aerobic exercise is known to combat psychological stress and depression (Haby et al., 2012). As such, this is thought to prove the reduction in stress levels of the participants who exercise.

Edwards (2006) also specifies the link between physical and psychological wellness, specifically in terms of the benefits of these dimensions. He indicates that the physical benefits of looking good and feeling terrific often result in psychological benefits such as enhanced self-esteem, self-control, determination and a sense of direction. Exercise impacts one's mood state and enhances it, not to mention self-esteem which in turn enhances the person's level of motivation (Vuori, 1998). Therefore the participants' responses with regard to emotions such as unhappiness and depression leading to crying and demotivation seem to be aligned with the findings of literature.

5.2 MENTAL WELLNESS

From the participant responses, it seems that the following factors had an impact on their mental wellness: emotional wellbeing and stress; mental capacity and effective functioning; time management and planning; balance and prioritisation; attitude and mentality; motivation; coping and support, and the nature of the job and studies. These factors are discussed in combination with one another and mental wellness.

Emotional wellbeing and stress relate to the feelings and emotions experienced by the participants during the period of working and studying full-time simultaneously. All participants indicated emotional wellbeing and stress as factors influencing their mental wellness. The majority of their emotions were negative. Only one individual indicated positive emotions. Emotional wellbeing is related to stress, how stress levels are managed, and whether there is a lack of growth and development as a result of stress. In addition to this, emotional wellbeing also leads to feelings of anxiety, frustration, worry, depression, anger and crying. Participants were placed under extreme pressure because of uncertainty about expectations and practical application of academic work. They were also unsure of internship availability which added to their mental pressure.

Zimbardo et al. (2003) describe stress as an individual's physical and mental state as a response to stressors that are perceived as a threat or challenge. The researcher is of the opinion that individuals can experience stress if they have to behaviourally adjust to circumstances or situations. It can be seen that the participants indicated increased levels of stress, anxiety and pressure due to having to concurrently work and study. These increased stress and pressure levels led to behavioural changes and the arousal of emotions. Rothmann et al. (2005, p. 57) state that the view of a stressor as threatening leads to the emotional arousal of anxiety and anger, as well as the associated activation of the autonomic nervous system. The participant responses support this as the participants indicated feelings of anger and anxiety.

Similarly, Love et al. (2006, p. 1) state that on “an individual level, work-related stress can contribute to mental disorders, in which poor mental health can include low self-esteem, job dissatisfaction, job-related tension, anxiety, depression, nightmares, insomnia, alcoholism and drug abuse”. This is evident in the participant responses as the participants experienced anxiety, depression and interrupted sleeping patterns due to stress.

Stress has been found to be a common adverse aspect within the domain of wellness, and as such the prevention as well as control of it is an essential component of effectively managing one’s wellness. Dietrich et al. (2008) suggest that chronic stress seems to be on the rise in modern society. Hillier et al. (2005) indicate that the negative symptoms suffered by individuals due to workplace stress include: mental illness, alcohol misuse, a lack of exercise and carelessness. The participants’ responses are aligned to this tendency as indicated earlier.

On the basis of the drawings obtained, Drawing 1 depicts a naked woman in the middle of the page; this represents the emotions of the women as she is stripped bare and vulnerable. This can be seen to be a symbol of the participants’ emotional wellbeing. Desai (2009) affirms that loss or bereavement is strongly related to depression and anxiety. It can thus be deduced that, a significant fear an individual can have is to experience a loss of someone or something that is very important to them. Furthermore, the participants expressed that due to stress and pressure, their growth and development was hampered. Research also indicates that the depression and anxiety experienced by the participants were a result of their incapability to practically apply their academic knowledge, and the uncertainty they experienced regarding their work expectations. In terms of emotional status, the absence of certain emotions that are associated with mental illness imply mental wellness. To be specific: the non-occurrence of excessive and inappropriate laughing or crying indicates mental wellness. Accordingly, it can be inferred that controlled and stable emotions are indicative of mental wellness (Marini & Stebnicki, 2012).

Research indicates that mental wellness relates significantly to emotional wellbeing. Therefore an individual should be able to manage as well as balance his or her emotional experiences. The majority of the participants were however, unable to do this as their emotions at work were affected by the demands placed on them. During the internship selection process more emotions arose, along with increased levels of frustration and stress which led to a decrease in performance of some of the participants. Research provides evidence that students without the capability to manage their emotions are more likely to experience lower grades, related to poor psychological wellbeing (Sinclair & Myers, 2004). This indication signifies the capability of an individual to be comfortable with themselves and their expectations. According to research, students with concerns

in these areas experience increased stress and thus may be unable to concentrate on other areas such as academic performance (Evans & Broido, 1999; Zubernis & Snyder, 2007). The participant responses were supportive of this.

Another factor impacting mental wellness that the participants indicated was that of mental capacity and effective functioning, which comprise the participants' mental capability and effective functioning. Their mind-set towards working and studying simultaneously also impacted their mental wellness. The majority of the participants agreed that their mental capability and concentration was negatively affected by the experience. According to Bonehill (2012) and Spies (2005) it is important for an individual to function effectively as well as enjoy a good quality of life. However, this was not the case for the participants as they indicated that they experienced difficulty in coping, functioning effectively, concentrating on their studies and switching their mind off from work.

The drawings obtained also reflect this, as all three representations indicate that mental capability and effective functioning had an impact on mental wellness. Within drawing one, the participant indicates that she felt incapable of identifying active knowledge that could be applied, and drawing two indicates the continuous application of one's mind along with uncertainties and pressures to meet deadlines. Drawing three indicates that there was a point of congestion, in which the participant's progress was impeded and she experienced difficulty concentrating.

Research suggests that health-related components such as nutrition, stress perception, endurance and flexibility also affect performance (Chen et al., 2002; King et al., 2007). Skill-related components like speed, power, balance, reaction and aptitude are necessary for health and effective performance of daily activities (Caspersen et al., 1985; Chen et al., 2002; King et al., 2007; Vanhees, et al., 2005). Thus, these components contribute significantly to the achievement of success or the lack thereof. The physical wellness results recorded show that the majority of the participants neglected these health related components. As such it can be deduced that the neglect of these components led to the participants experiencing difficulty in functioning effectively.

Ballentine (2010, p. 3) states that it is important for "students who are transitioning" to university or college "to take care of themselves physically" as illness or a "lack of fitness may contribute negatively to academic performance". Therefore, the participants' difficulty in functioning effectively can be related to their lack of physical activity and adoption of unhealthy habits, as indicated earlier in the factors impacting their physical wellness. Research proves this as Shumaker et al. (2008) suggest that the results of research conducted in Britain show that increased physical activity like

exercises energize employees and increase their concentration, as well as problem-solving abilities. Similarly, Dubbert (2002) and Remington (2009) note the link between mental health and physical exercise.

Another reason for ineffective functioning was the stress levels experienced by the participants. As indicated above the majority of the participants experienced high levels of stress and research supports this through the indication that individuals who are exposed to continuous and excessive stress experience a decline in cognitive processes, and it influences their ability to solve problems (Seligman, 1992). Although a certain level of stress is important for health and performance, as it can result in motivation and good performance, too much stress is counterproductive for high performance and can affect productivity (Hillier et al., 2005). A minority of the participants experienced a positive effect on their mental capability and note that stress served as a motivational force for them. Therefore, it is important for postgraduate working students to manage their stress levels. Research provides evidence of this through the inference that stress can affect an individual's persistence in education (Zajacova et al., 2005). Students who have better stress management skills are academically more successful as stress has a negative influence on academic performance (Zajacova et al., 2005).

The participants also note that the situation of concurrently working and studying was mentally draining and exhausting, as they were continuously applying their mind. This is supported by research as Hoeger and Hoeger (2010) indicate that the key aspects of the mental wellness dimension include: the application of knowledge attained through learning; the creation of opportunities to further one's education, and constant engagement of one's mind to interact with the environment. The reason for this mental exhaustion could be a result of the participants' difficulty in concentrating and focusing, which limits the amount and type of information he or she can process.

Nakamura and Csikzentmihalyi (2002) provide evidence of this through the indication that "entering flow" is to a large degree the product of what a person can and will focus his or her attention on at any given time. For an individual to effectively function he or she needs to be able to feel in control of their world and be able to regulate themselves (Dolbier et al., 2001). Therefore, the result of the participants' inability to function effectively is related to their inability to regulate themselves and a lack of control as the participants indicated a high level of feelings of insecurity.

Time management and planning was aligned with the tendency that the participants could track themselves by setting up and achieving goals, along with planning and managing their time. On the

basis of the participants' responses obtained, it can be deduced that the majority of the participants state that they never stuck to their original plans, their time was limited and they could not obtain a balance between work and studies. They experienced a great deal of difficulty in planning tasks, managing their time and setting goals. Limited literature exists on time management, planning and its relation to mental wellness. As such, this can be further explored in the future.

With regard to the participants striking a balance they noted a lack of balance resulted in conflict. Research supports this as Greenhaus et al. (2000, p. 291) state that "work-family conflict is related to time and behaviour". In terms of time, if individuals spend time in one role, they cannot devote time to another role at the same time (Greenhaus et al., 2000). This is common for individuals who work for long hours and spend a significant amount of their day travelling (Greenhaus & Beutell, 1985). With regard to behaviour, it may be effective in one role, but will impact on another role. This is directly related to the participants' response that difficulty in obtaining a balance was related to limited time. Only a minority indicated that they planned their time and stuck to their plans, or would implement minor adjustments. These participants would plan their work around their energy levels and goal-setting which helped them obtain a balance between their work and studies. A study by Miller et al. (2008) supports this through the indication that if an individual was to achieve personal milestones, no matter how small, many elements of that individual's life, for instance hope, optimism, autonomy and self-esteem would be enhanced. As such goals are influential on the participant's mental wellness.

Balance and prioritisation relate to the approach taken by the participants towards their daily activities and overall wellness during the situation of concurrently working and studying. Edwards (2006) note that with regard to positive psychology, mental health consists of an individual's ability to enjoy life and acquire a balance between life activities and the efforts to achieve psychological resilience. According to the results obtained, the majority of the participants indicate that they experience a struggle in balancing, as well as prioritising their work and studies as a result of deadlines and expectations. These participants suggest this was due to a lack of self-discipline and not knowing when enough work is sufficient.

The reason for the participants' struggle in obtaining a balance is also linked to their support system. This is supported by research which notes that in South Africa, family structures have changed significantly and thus the wellbeing of the labour force is dependent upon the support and resources in an individual's work and family environment, which helps them maintain a balanced lifestyle (Anderson, 2008). Only a few participants note that they had a balanced lifestyle, and prioritised certain family events which resulted in feelings of satisfaction.

The next factor relates to the attitude and mind-set of the participants, in respect of mental wellness. From the information obtained during the data collection interviews, it was evident that most of the participants had a negative attitude about working and studying simultaneously. The majority note that a change in attitude and personality, or an adaption of mind-set and attitude was necessary. Only a few participants had a positive attitude and mind-set towards their working and studying situation. In terms of the drawings, the poem in drawing one, specifically the first and second paragraphs relate to the participant's mind-set and her attitude, as she was starting her masters studies. Thus, she had to put everything else on hold, her life changes and she had to adapt to this.

Subsequently, attitude and mentality comprise a change in behaviour, attitude and personality; upholding a positive attitude and impetus; being an overachiever; being able to say "no" and growing as well as developing one's mental capacity. Page and Vella-Brodrick (2009, p. 445) infer that psychological wellness encompasses "a breadth of wellness that includes positive evaluations of oneself and one's life, a sense of continued growth and development as a person, the belief that life is purposeful and meaningful, and a sense of self-determination". Similarly, Edwards (2006) suggests that mental competence narrates to spheres of learning and growing up, creativity and intuition, as well as searching for meaning and self-fulfilment. The participants also note that their attitude and mind-set was influenced by the measure of control that they had over the situation of working and studying. This is evident in research as Adams et al. (2000) cite that a sense of control enables an individual to continue by giving them a feeling of confidence that their internal and external environments are predictable and there is a high chance that things will work out as they expect. This is linked to the factor of balance and control, which includes expectations.

The studies of Hermon and Hazler (1999) and Adams et al. (2000) view "a sense of control" as a key element in an individual's psychological functioning. Therefore, the researcher perceives "a sense of control" as an individual's ability to control him-herself as well as his or her emotions (Hermon & Hazler, 1999). On the basis of the results obtained, it can be deduced that the participants had a lack of control, as they experienced difficulty in controlling their emotions and maintaining a positive attitude. Similarly, a study by Hermon and Hazler (1999, p. 341) supports this, as it reveals that "the variables of self-regulation and work, recreation, and leisure of the wellness model seem to be the best predictors of a university students' psychological well-being". As such students who experience unhappiness in certain aspects of their lives experience difficulty in concentrating and thus under perform.

Most of the participants indicate that motivation is a factor that influences their mental wellness. Linder (2009) states that motivation is goal-orientated and individually driven by an internal force that provides direction and purpose, for an individual's behaviour. It is seen as the will to achieve, or an inner force that energizes the participants to achieve their personal goals. As such the factor of time management and planning directly relates to this factor of motivation, as goal-setting is a source of motivation. It seems that motivation is known to be an internal drive to accomplish a goal that will fulfil an individual's internal need. It is also seen as a state of arousal that directs one's behaviour to achieve specific goals which are important to him or her. Drawing one also suggests that motivation is a factor impacting mental wellness, as the participant states that in the end she gave up all her "feathers", she gave herself up to the people around her and was unable to "fly". In other words her internal drive was completely drained and she was exhausted, which stopped her from reaching her goals.

Clark (2003) suggests that performance is the result of an individual's capability and motivation. The above mentioned participants' responses are associated with research, as it was pointed out that the various sources of motivation that got them through the year included: their spirituality or faith, attitude and mind-set, stimulating work, deadlines, last minute stress, efficiency and the practical application of their academic work. This is also evident in drawing one, as the participant was completely demotivated due to her negative mind-set and questioning of her life's purpose. Kaplan and Saccuzzo (2005) indicate that stress can be both adaptive and harmful; it becomes adaptive as soon as the individual is capable of dealing with it effectively. Thus, stress can serve as a motivational force for achievement. The participant results provide evidence of this.

Intellectual individuals continuously seek new challenges and experiences (Edlin et al., 2000). This relates to the opportunities for growth and development. On the basis of the participants' results, the researcher infers that one is willing to invest energy in a task or activity if he or she perceives the outcome to be worthwhile. Amabile and Kramer (2007) support this premise through their indication that one's motivation and performance has an impact on perceptions, emotions and motivation to work. The participants' responses, as indicated above, support this.

Research also found that more physically active individuals experienced an increased sense of self-efficacy resulting in higher levels of motivation, as the physical activity reduced anxiety and tiredness (Mack & Shaddox, 2004). Due to the majority of participants' lack of physical activity, it seems that this resulted in demotivation. As such motivation is seen as one of the most important sources for the participants' optimum performance. It is not only important to increase one's performance, but also necessary in order to stay active and eat healthy. A significant aspect

indicated from the participants' responses and with limited literature is that the participants' ability to practically apply their academic knowledge served as a motivational force.

In respect of coping and support, this refers to the coping mechanisms adopted by the participants along with their support systems. More than half of the participants were of the opinion that they experienced a lack of support and difficulty in coping. As such, these participants were challenged, it was a traumatic experience and they started questioning their "purpose in life". They also found it difficult to relax and were dependent upon the adoption of coping mechanisms, such as spirituality and substance use. This is evident in all three drawings. The basis of drawing one was the poem with the title of "pull yourself together, give unto others, proclaim modesty", along with the subtitle "give more, give more, give all", which is related to mental wellness and coping. The participant illustrates this through the demonstration of her "wings" falling off and realising she cannot "fly" anymore, referring to her inability to cope and the need for her to pull herself together. Drawing two demonstrates the participants struggle in coping through the illustration of the participant raising her hands as a call for help. With regard to drawing three, it is evident that the participant had to resort to coping mechanisms such as substance use.

On the basis of the responses obtained, it seems that individual coping strategies can also have a positive impact on the transition from university to the working world. Wang et al. (2006) findings support this as students who have well-developed individual coping strategies or mechanisms experience a faster transition from high school to college. They were also found to add social as well as institutional support relevant to the development of coping mechanisms. Likewise Clifton et al. (2008) also explore the relationship between psychological dispositions and academic achievement in university students and conclude that coping mechanisms or strategies have a significant impact on the individuals' academic performance. On the basis of the responses obtained, this is evident as, an association exists among the participants various coping mechanisms and their performance.

Gropp et al. (2007), indicate that mental wellness is part of a broad field of study that examines quality of life issues which share common characteristics such as happiness and life satisfaction. This corresponds with the participants' responses of questioning their "purpose in life" and reasons for studying. Equally, within drawing one the participant did not even know what she wanted anymore. She questioned what she was doing and the purpose of studying for six years of her life. She wondered why she is putting herself through this and what the point of it was.

With regard to the lack of support obtained, research indicates that the quality of relationships affects an individual's psychological wellness (Adams et al., 2000). Thus, their psychological wellness can be enhanced through an appropriate social network or support systems. This demonstrates the link between social and mental wellness. Page and Vella-Brodrick (2009) indicate that prior to an individual experiencing this enhancement, it is essential that social networks are present inside and outside of the organization. They must also be of a high enough quality to provide effective support.

Ballentine (2010) confirms that comparable research has demonstrated that positive work, and leisure activities have a direct link to psychological well-being. This relates to the participants finding time to relax which was difficult for the majority of them. One of the building blocks that helped the participants cope with working and studying concurrently was that of spirituality. This is closely linked to research, as a study that focused on authenticating methods used for coping in the university environment suggests that spirituality comprised one of six areas that made a significant contribution (Ackerman & Morrow, 2007). Similarly, Koenig (2001) demonstrates that individuals with higher levels of spirituality had enhanced coping skills. It is evident that spirituality also had a significant association with the participants' academic results.

George et al. (2008) explore factors that contribute towards academic success and confirm the existence of a positive relationship between greater spirituality and overall academic results. A study by Adams et al. (2000) reveals that "life purpose" has an effect on perceived wellness, as it is regulated by the psychological elements of sense of confidence and control. As such participants demonstrate optimism when they have a positive outlook on life and believe that they can effectively deal with situations and circumstances. The main finding of the study was that "life purpose" is an element of spiritual wellness (Adams et al., 2000). Similarly, the participant in drawing one supports this tendency as she demonstrates that she puts a lot of faith in her studies yet she does not know what is required of her. The final part of her poem questions, "why should she be diligent to her studies?" if it is just going to "break her". She started questioning her purpose in life as a result of this.

Another finding obtained during the study was that some of the participants engaged in substance abuse, as a mechanism to mentally cope. As such the research indicates that substance abuse can increase the likelihood of psychiatric disorders, including conduct, mood and anxiety disorders (Coffey & Brumback, 2006; Sinha, 2008). According to the South African Community Epidemiology Network on Drug Use (SACENDU), student substance abuse has been associated with academic difficulties and declining grades (SACENDU, 2002b). Therefore, it can be deduced that due to

study demands and difficulties, the participants resorted to substance use as a way of coping. Drawing 3 provides evidence of this, as the participant indicates that the nature of work, specifically her workload, was too much and she resorted to substance use as a coping mechanism to concentrate, feel better and stay awake.

Research supports this as Barlow and Durand (1999) indicate that abuse of substances is determined by the escape from pain, stress, panic and anxiety. Bratter and Forrest (1985) note that there are several psychological factors involved with the etiology of substance abuse, such as developmental, personality, affect and cognition, conditioning or learning and familial factors. Drawing three along with the participant responses provide evidence of the use of substances as a coping mechanism to function and escape stress.

The Tension Reduction Theory acknowledges that psychological characteristics can hinder functioning and impact poorly upon an individual's quality of life, which in turn may direct them to use substances (Shiel, 1999). In this research the participants resorted to substance use such as Rescue remedy, Ritalin and anti-depressants due to their levels of stress and in order to cope or concentrate. This is evident in the research of Visser and Routledge (2007, p. 609), which states that individuals who "reported excessive alcohol and drug use had significantly lower levels" of mental wellness. Nonetheless, most of the participants note that their wellness improved during the dissertation year as the pressure grew less.

Finally, the participants mentioned the nature of the job and studies as a factor influencing their mental wellness. This relates to the participants' overall experience of the situation of both working and studying. This includes the commitment and loyalty of the participants towards their employers. The majority of the participants note that the nature of their job and studies had a negative effect on their mental wellness, due to neglect of one's studies and wellness, work hours, workload and demanding targets, assignments and exam dates, group work, travelling, and prioritising work over studies.

According to Rothmann et al. (2005, p. 57), it is important for a person to evaluate his or her work environment with regard to the severity and frequency of occurrence of specific job demands and pressures as well as the level of support provided by the organization, as the failure to consider the "frequency of occurrence of a particular stressor may contribute to overestimating the effects of highly stressful situations that rarely occur, while underestimating the effects of moderately stressful events that are frequently experienced". As such it is inferred that the participant responses indicate a significant link with literature, as demanding tasks lead to increased levels of

stress. Drawing three supports this through the indication that work and study deadlines resulted in stress and depression.

Research suggests common causes of workplace stress such as: workload including “unrealistic demands or tight deadlines” which are perceived as “unreasonable or unachievable”; the “nature of the job or the type of work, including problems such as repetitive or boring work, lack of clarity, lack of control or the lack of an opportunity for an individual to utilize his or her skills”; and finally the “long or unsocial working hours” as well as lack of “management support” (MacDonald, 2005, p. 19). All these causes of workplace stress were evident in the study on the basis of the results obtained from the participants. The majority of the participants note that in terms of group work, there was a lack of understanding of group members’ daily schedules and what was required of them, as well as conflict among them.

Similarly, Sieberhagen et al. (2009) indicate sources of stress like work pressure, deadlines, competitiveness and conflict, can affect an individual’s wellness. The focus on wellness however should not only be on factors that affect individuals negatively like stress and strain, but also on the promotion of positive factors of wellness such as good relationships, mutually respectful support, growth opportunities and adequate job or study resources (Sieberhagen et al., 2009). Evidently a few of the participants indicate a positive effect of the nature of their job and studies on their mental wellness, which was related to their capability in managing stress and being able to work on their studies at work as well as their support systems. The majority of the participants indicate that their level of wellness decreased during the masters course academic theoretical year. A key aspect identified by the participants in terms of mental wellness (with limited literature to support it) was the influences of external factors like financial implications and technology, impacting their mental wellness.

5.3 SOCIAL WELLNESS

The participants indicate that factors such as: a positive support structure; a negative support structure; positive social interactions; negative social interactions; socially induced emotions; physical and mental wellbeing, and time management and prioritising, influence their social wellness. The researcher discusses the combination of these factors in relation to social wellness.

Firstly, with reference to the support structure, it can either be positive or negative. The participants note that a positive support structure is a critical factor influencing one’s social wellness. Myers et al. (2011) indicate that social support is deemed not only essential to an individual’s social

wellness, but also to their overall wellness. The participants indicated that a positive support structure was related to good support obtained from family, friends, life partners, employers and the university. Myers et al. (2011) indicate that the main component of social support is identified as family support, because it has a significant effect on the perceived social support an individual receives. Therefore, if the participants perceive the support they receive as positive, it will improve their overall wellness.

The participants indicate that they had the necessary support and understanding from those around them. Along with this, they also indicate the importance of having someone to talk to, such as a mentor and the emotional as well as psychological benefits associated with a good support structure. Research confirms this as Botha and Brand (2009, p. 3) state that “social support correlates to lower stress levels, emotional and psychological wellbeing, physical wellbeing, health and the longevity of individuals”.

A minority of the participants indicate that a negative support structure relates to a lack of support from those around you. These participants agreed that their support structure can be described as one that was negative as they experienced either minimal or no support at all from those closest to them such as life partners, parents, siblings and friends. Additionally, this included a lack of academic, emotional and financial support which resulted in increased stress and concerns. Myers and Sweeney (2005, p. 27) also confirm this through their indication that social support is “positively correlated with both physical and emotional health and provides a buffer against stress”. As such it seems that a lack of support leads to increased stress levels, as indicated by the participants.

Social support is a critical element of transition in higher education, as the indivisible self-model described the way in which social wellness factors influence job satisfaction and work performance (Degges-White et al., 2003; Hutchinson, 1996). On the basis of the drawings obtained, all three drawings indicate negative support structures and the impact it had on the participants’ social wellness. Drawing one indicates that the demonstration of the angel attempting to fly and her feathers being pulled apart while she is expected to sew herself together, is due to the lack of a support system.

Additionally, the hands within drawing two also provide evidence of this, as the hands pulling from the bottom represents everyone waiting for her to fall apart because they just want more from her and those hands from the top that want to pull her together but instead are pulling her apart. Along with this the bodiless spheres also relate to her support system as they represent the different

stakeholders who hold expectations of her. These stakeholders include family and friends which become creatures without feathers accept demands and instead of supporting her, they bind her down. Equally drawing two also suggests a lack of a support system as she clearly indicates with her hands that she was seeking support and assistance. Finally, drawing three depicts the participant alone in the middle of the picture with no support and various factors influencing her wellness.

Social interactions were also indicated as a factor impacting social wellness and were described by the participants as either negative or positive. This included building and maintaining social relationships, including engagement in social gatherings as well as one's commitment and loyalty towards their social relationships with others. Research supports this as Botha (2007) refers to social wellness as the ability in performing social roles effectively and sustaining healthy relationships. Similarly, Janse van Rensburg et al. (2011) point out that social wellness is also referred to as developing and maintaining meaningful interpersonal relationships. Likewise Shurts and Myers (2005) indicate an association between wellness and an individual's ability to initiate as well as maintain these relationships.

Social wellness can be understood as the quality of an individual's network of professional and personal relationships (Farrell & Geist-Martin, 2005). The majority of the participants indicate positive social interactions resulted in a better understanding of their work-study situation, from their friends and family as well as a form of coping mechanism. Research confirms that relationships constitute a key component of social wellness and the quality of these relationships can affect the wellness of an individual to a large extent (Farrell & Geist-Martin 2005; Hattie et al., 2004; Myers et al., 2011; Schaefer et al., 2007). Most of the participants agree that maintaining one's relationships is important. These participants indicated that their relationships were maintained on the basis of time constraints, work obligations and expectations from friends.

Those with negative social interactions confirmed that they had avoided social gatherings or made up excuses and experienced stress as well as difficulty in building new relationships with others, as well as maintaining their current relationships. Likewise, drawings two and three also indicate negative social interactions due to time as well as work and study obligations. Myers and Betchel (2004) support this through the indication that lower wellness scores are related to fewer social relationships and increased stress in university students.

Schaefer et al. (2000) indicates that it is imperative that the relationships individuals experience in their working and studying environments are of such a nature that it fosters growth and sustains

social wellness. If not, the social wellness of the individual will be impeded (Schaefer et al., 2007). The participants indicated the development of manipulative social behaviour. This supported by Hoeger and Hoeger (2010) through the indication that an individual's sense of self allows for the extension of respect and tolerance of others, thereby enabling him or her to uphold close relationships with other individuals or utilise manipulative tendencies within these relationships.

With regard to socially induced emotions, this includes the emotions experienced by the participants with regard to their social wellness. Drawings one and three provide evidence of this, as drawing one indicates socially induced emotions such as frustration and sadness, which eventually lead to crying. The participant also indicates a change in her behaviour and attitude as she became arrogant and adopted a vision of an arrogant and driven student. Within drawing three, the participant indicates socially induced emotions such as sadness and depression which resulted in heightened susceptibility to illness. Renger et al. (2000) confirms that social wellness includes getting along with others, being comfortable, the willingness to express one's feelings, and supportive and fulfilling relationships.

Social well-being within social interactions results in feelings of confidence and emotional security (Janse van Rensburg et al., 2011). According to some of the participants they experienced socially induced emotions such as depression, loneliness, strain, pressure, frustration, misuse of support and emotional exhaustion. This includes financial strain and frustration due to friendship support being misused. As cited in Botha and Brand (2009), various researchers support this view and have found that feelings of sadness, loneliness, as well as low self-esteem are less likely to be experienced by individuals who have close as well as supportive friends, family and colleagues (Helliwell & Putnam, 2004). The participants experience of these feelings stem from negative social interactions and a lack of support.

On the basis of the results obtained, it is noted that the participants either neglected their social relationships due to physical and mental exhaustion or that their social relationships affected their physical and mental wellness as it was emotionally taxing and their social groups did not understand their situation. Equally, the drawings obtained also support this, as drawing two indicates that the participant experienced physical and mental exhaustion as a result of conflicting deadlines, while drawing three also indicates that the participant was mentally and physically exhausted. Myers et al. (2011) indicate that social support and relationships are not only essential to an individual's social wellness, but also to their overall wellness, and no other contributing factor of wellness has a greater influence on long-term mental health (Myers et al., 2011).

The study of Edwards et al. (2001), investigating the effects of positive and negative social interactions with students, found that students with negative social interactions resulted in a larger number of physical health problems and had lower physical wellness. This demonstrates the link between social and physical wellness as relationships can impact an individual's motivation and action. The stronger an individual's social network, the better their health. As such the participants' response in terms of social relationships affecting their physical wellness is supported by research.

Ballentine (2010) supports the participants' response with regard to the link between social wellness and mental wellness by indicating that those individuals who are capable of navigating the social network at their higher educational institutions may experience an increase in psychological wellness and feelings of higher self-esteem as well as a positive outlook. It is essential to take into account the quality and frequency of the interaction. Therefore, the majority of research that concerns the transition to university highlights the necessity of social integration and thus students who are capable of establishing lasting social relationships will be more successful, whereas negative relationships on the other hand could be related to health problems.

The majority of the participants suggest time management and prioritising as factors influencing their social wellness. This relates to the participants' ability to prioritise tasks and accordingly manage their time. A minority of the participants managed their social relationships in accordance with their time and tasks, while the majority experienced difficulty in terms of managing their social relationships or neglected them completely. On the basis of the responses obtained, it seems that the minority prioritised their social relationships on weekends rather than during working time and would make an effort to see their friends or family.

According to Grant (2007) it is evident that healthy interpersonal relationships have a positive impact on motivation as it creates a supportive environment, which in turn generates a sense of belonging. Therefore, when individuals feel better, they are able to relate better as well as deal more efficiently with their job demands. When they relate better, the general atmosphere is better which in turn results in higher job satisfaction and a positive impact on their motivation (Tietjen & Myers, 1998). Similarly the majority of the participants note that they had less or no time for social activities, sacrificed their hobbies and thus experienced a negative impact on the quality of their relationships and their work. This links with an impact on satisfaction and motivation. According to research, most individuals will thrive in an environment where the need for socialization is fulfilled. Research provides evidence of this through the indication that the element of interaction with other individuals has a large influence on an individual's social wellness (Hermon & Hazler, 1999, Schaefer et al., 2007).

5.4 SUGGESTIONS, LESSONS LEARNT AND BENEFITS

During the data collection process, the participants also indicated the learnings they obtained from the situation of working and studying simultaneously, as well as the benefits of this. Along with this, the participants suggested future recommendations such as: a student support system, creating course awareness and clarifying expectations, as well as more awareness concerning wellness. Such suggestions could be further researched and implemented within the future.

According to the participants, the situation of concurrently working and studying is one that can be described as significantly challenging and exhausting. However, it forced them to manage and plan their time, increased their self-confidence and discipline, challenged their ability to handle pressure and to remain positive, as well as taking time to unwind and having a work-life balance. Only a minority of the participants indicated the benefits they acquired through the situation of both working and studying simultaneously. These participants indicated advantages, such as one's quality and purpose of life (work was rewarding), a wider frame of reference and an opportunity to grow, extend oneself and evolve, including mind stimulation and practical application of academic work as well as motivation. Hillier et al. (2005) suggests that when attention is given to individuals' quality of life, it results in increased performance and job satisfaction as they perform better, have enhanced resilience levels and an increased capability to think as well as focus better. Nonetheless, limited literature is available on the benefits of or lessons learnt from concurrently working and studying full-time and thus it can be further researched in the future.

In terms of suggestions, various aspects were identified by the participants. Firstly the participants indicate the importance of a support system, especially support from family and friends. Along with this the participants suggest a support system to be implemented within the university, like a mentoring or counselling service. Research supports this as studies indicated that the interaction between university and faculty members have a substantial influence on student persistence success, as such members may have a profound effect on the performance of a student through guidance and mentoring (Astin, 1993; National Research Council, 2004; National Survey of Student Engagement, 2005; Tinto, 1987b). This would assist postgraduate working students during times of difficulty and provide guidance, as suggested by the participants. The participants indicate that an elderly person would be in a better position to be a mentor or counsellor rather than the class representative; as such a person can better understand the situation of the student.

Such support systems would result in motivation and encouragement. Blake and Lloyd (2008, p. 450) support this, indicating that managing wellness and support can lead to the following benefits:

“improved physical and mental health and improved morale, motivation and work performance”. On the basis of the results obtained, it seems essential for postgraduate working students to have good support as they can easily become isolated from their colleagues, thus it is important for employers and the university to engage with the individual student experiencing the distress through a variety of strategies, such as supervisory support or counselling.

Another suggestion provided by the participants was to create awareness concerning wellness management, the nature of the masters course and to clarify university expectations. On the basis of the responses obtained, participants want to better understand what the masters course entails and what they would need to achieve. The majority of the participants agreed with this and indicated that creating course awareness and clarifying expectations relates to university information transparency, including awareness of course expectations and the importance of planning as well as organising.

These participants stated that the university should encourage part-time jobs, as the postgraduate courses require a considerable amount of studying time and trying to concurrently work and study full-time has a huge impact on one’s wellness. Along with this the participants indicate that university deadlines should be more realistic and consideration should be given to students working, in terms of university block weeks and travel time. Anderson (2008) and Hunt (2008) highlight the importance of creating an environment that fosters healthy lifestyles which will result in healthier individuals functioning at a higher level, a positive attitude, improved morale, engagement and satisfaction. It appears that individuals with a higher quality of life are healthier.

As such it is important to create awareness of wellness management for postgraduate working students. The minority of the participants suggested that more awareness around maintaining a work-life balance should be created, especially for those who are concurrently working and studying full-time. Subsequently awareness concerning wellness consists of an awareness session relating to the impact of working and studying, self-awareness with regard to maintaining one’s wellness including a balanced lifestyle, positive attitudes and the right mind-set. This is supported by research as Matlhape (2003) and Green et al. (2001) indicate that the awareness around effective wellness management increases individuals’ alertness around illness and their morale, motivation and performance. Individuals who maintain their wellness will have improved moods, attitudes towards work and studies, sleeping patterns, eating habits as well as an overall sense of wellness. Research indicates a significant link between wellness, productivity and performance, especially in organizations (Hillier et al., 2005; McGillivray, 2005; Thogersen-Ntoumani & Fox, 2005).

SUMMARY

In this chapter the main findings of the study in relation to the available literature on the research topic is discussed. Although each individual participant presented a unique situation about his or her wellness, trends as well as links between the aspects of wellness were identified. Many of the factors were interrelated in the three domains of wellness, thus demonstrating significant links among physical, mental and social wellness. Factors such as time management, planning, task management, spirituality, as well as the nature of the job and studies had limited literature in terms of its link with wellness. Therefore these factors should be further researched in the future. It is apparent that postgraduate working students face many challenges as a result of both working and studying full-time. As such they seem to draw on many resources in order to maintain a balance in their lives.

The next chapter presents a conclusion of the research study along with a discussion of the research limitations and recommendations for future research.

CHAPTER 6:

CONCLUSION, LIMITATIONS OF THE STUDY AND RECOMMENDATIONS

This section presents conclusions related to the research study along with limitations and recommendations for future research. The main objective of this research study was to explore the factors influencing postgraduate student wellness within the situation of simultaneously working and studying full-time. The data of the study was obtained through the interpretivist paradigm, in which the researcher explores the experiences of the participants. The broad research design was that of qualitative research and phenomenology as a form of qualitative research. The data was obtained through semi-structured interviews, essays and drawings. The researcher utilised thematic analysis and four main selective codes were identified during the coding process, namely: physical wellness; mental wellness; social wellness, and suggestions, lessons learnt and benefits. This chapter provides an overview of the research by revisiting the research questions, along with a discussion of how the main findings of the study informed the research questions. Concluding this chapter are recommendations for future research.

6.1 RESEARCH QUESTIONS AND SUMMARY OF FINDINGS

In order to achieve the primary objective, the researcher developed three research questions, so as to explore the factors influencing postgraduate full-time working students' wellness. As such these research questions will be presented, along with a discussion of how the main findings of the study informed these questions.

6.1.1 How does the situation of working and studying impact your physical wellness?

The study indicated that the following factors impact postgraduate full-time working students' physical wellness, namely: health habits; physical symptoms; time and task management; the nature of one's job and studies; coping mechanisms, and overarching emotions. The relation between the factors was significant. Firstly, the majority of the participants showed a significant orientation towards an unhealthy lifestyle, including bad eating habits, lack of sleep and a lack of exercise. The participants emphasised that these habits were a result of the nature of their work, as well as their time and task management. There has been limited research on both of these

factors, and thus further research on the physical wellness of postgraduate students working and studying concurrently should be conducted.

Due to the participants' indulgence in unhealthy lifestyles, the nature of their work and studies, as well as the mismanagement of their time, they experienced an increase in illness. Other physical symptoms also materialised, such as: panic attacks due to stress; burnout; a low immune system; headaches; eye strain; weight loss and gain; heart palpitations; low and high blood pressure; hair loss; skin breakouts, and physical exhaustion. As such the participants resorted to adopting coping mechanisms which ranged from the use of supplements and substances, to exercise, sleeping, emotional eating, spirituality, music and meditation.

These coping mechanisms also had an impact on the overarching emotions and feelings experienced by the participants. For some they led to improved self-esteem and confidence, and served as a source of energy, a stress reliever, meditation, and an outlet to combat fatigue. On the other hand, for others it resulted in increased levels of stress, pressure and anxiety – they experienced feelings of depression, demotivation, frustration and unhappiness, leading to crying and a frustrated frame of reference. Therefore, it seems that all these factors had a significant influence on the participants' physical wellness. These factors along with the relevant literature are discussed in more detail in Chapter five.

6.1.2 How does the situation of working and studying impact your mental wellness?

Factors such as: emotional wellbeing and stress; mental capacity and effective functioning; time management and planning; balance and prioritisation; attitude and mentality; motivation; coping and support, and the nature of the job and studies were indicated in the research results as influencing the mental wellness of postgraduate full-time working students. These factors are discussed in detail in Chapter five, along with their alignment with literature. From the discussion of the results, the relation between the various factors is significantly evident.

For most of the participants, their emotional wellbeing and stress influenced their mental wellness and the majority of these emotions experienced were of a significant negative nature. Such emotions comprised: feelings of anxiety, frustration, worry, depression, anger, and mental pressure which resulted in overwhelming feelings and crying. These emotions came about as a result of uncertainty about expectations and the practical application of academic work, internship availability and selection, lack of growth and development, and the inability to manage stress levels.

Other factors affecting mental wellness and emphasised by the majority of the participants were that of mental capacity and effective functioning. The effect of these factors was indicated as significantly negative by most of the participants. These factors were significantly associated with all the other factors impacting mental wellness. Literature supports this and indicates relations between them. Additionally, the relation between mental capacity, effective functioning and physical wellness was also indicated in the discussion of the results.

Motivation, attitude and mind-set also played an important role. Most of the participants adopted a negative attitude and mind-set towards the situation of concurrently working and studying. Nonetheless, motivational sources, namely: upholding a positive attitude and mind-set; being able to say “no”; positive evaluations of one’s self and purpose of life; exercise; goal-setting; time management; planning; spirituality; faith; stimulating work; practically applying academic work; reaching deadlines, and managing last minute stress, helped to achieve efficient functioning.

In terms of the factor of time management and planning, limited literature exists for this, in relation to mental wellness. However, the link between time management and planning along with balance, prioritisation and the nature of one’s job and studies was evident from the results. Significant factors impacting mental wellness was also coping and support. More than half of the participants indicated the lack of a support system as hindering their progress. Due to this, the participants were challenged and for some of them the situation of working and studying could be described as a traumatic experience, in which they started questioning their “purpose in life”. As such these participants adopted various building blocks in order to cope, such as spirituality or substance use. The coping strategies for mental wellness were similar to the coping mechanisms the participants adopted for managing their physical wellness.

6.1.3 How does the situation of working and studying impact your social wellness?

With regard to postgraduate, full-time working, students’ social wellness, the study indicated that the following factors impacted their social wellness: a positive support structure; a negative support structure; positive social interactions; negative social interactions; socially induced emotions; physical and mental wellbeing, and time management and prioritisation.

The participants indicated that a positive support structure was a very important factor influencing their social wellness, which includes support obtained from employers, the university, family, friends, life partners, siblings and spouses. The majority of the participants had a positive support structure, while the rest had a negative support structure. This related to a lack of academic,

emotional and financial support, and resulted in socially induced emotions. These emotions consisted of increased stress and worry as well as depression, loneliness, strain, pressure, frustration, misuse of support and emotional exhaustion.

Social interactions also had an influence on socially induced emotions. These interactions were aligned with building and maintaining social relationships. Specifically referring to the quality of the participants' personal and professional relationships, were either of a positive or negative nature. The study indicated that the majority of the participants had positive social interactions. These social interactions were strongly related to time management and prioritisation. Additionally, it was indicated that social interactions led to physical and mental exhaustion, as a result of a lack of understanding from social groups and conflicting deadlines.

The participants also indicated time management and prioritisation as factors impacting their social wellness. Most of the participants experienced difficulty in managing their social interactions. All these factors impacting social wellness of participants as well as their alignment with the relevant literature are discussed in more detail in Chapter five.

6.1.4 Lessons learnt from and benefits of concurrently working and studying

The participants acknowledged the benefits and what they learnt from working and studying simultaneously. Although such a situation was described as challenging and exhausting, the participants indicated that it forced them to manage and plan their time better. They also stated that it increased their self-confidence and discipline, improved their ability to handle pressure and remain positive, not to mention their ability to take time to unwind and finding a work-life balance. Only a few of the participants indicated the positive benefits of working and studying simultaneously. Such benefits included: finding purpose of life as work is rewarding; giving them a wider frame of reference; allowing them to grow and evolve; stimulating their mind; showing them the practical application of their academic work, and giving them motivation.

6.2 CONTRIBUTIONS OF THE STUDY

This study aimed to fill a gap in knowledge as it is one of the first studies to focus on the factors influencing postgraduate working students' wellness, within the South African context. Only a few studies have been done on student wellness and little research exists in this domain (Myers & Mobley, 2004; Myers et al., 2003; Hermon & Hazler, 1999; Adams et al., 2000). The limited number of studies in South Africa that have focused on postgraduate working students wellness

indicates how significant this study is in terms of its contribution to the academic pool of knowledge regarding postgraduate student wellness. Research indicates that the wheel of wellness has been applied to college students and perceived levels of wellness have been evaluated, all of which all contribute to the understanding of wellness. However, a more in-depth study and comprehensive research in terms of student wellness was warranted (Adams et al., 2000; Myers & Mobley, 2004; Myers et al., 2003).

The results of this qualitative study provide valuable insight and add to the limited research done on postgraduate student professionals in the South African context. Research called for qualitative studies to put “flesh on the bones of generic constructs and their relationships, seeking generic processes” (Miles & Huberman, 1994, p. 27). Thus research from a qualitative stance was necessary as such research is limited. This information can be useful for future studies and provide a framework for gathering information and solutions. Even if it is a small step in the right direction, this study urges prospective researchers to further explore the topic.

The large number of themes elicited should alert employers and universities of the need to effectively address this phenomenon. The findings should also create awareness of the importance of wellness management around postgraduate students. The study, therefore, provides valuable insight and understanding for the university as well as managers within organisations, with regard to postgraduate working students’ wellness. It provides insight into the opportunities and challenges faced by working students, and the significant factors impacting their physical, mental and social wellness.

Accordingly, this research can help to develop solutions to address the key issues these students face, not to mention provide direction for educational experts or institutions in creating an environment that is conducive for students to experience more well-being, positive learning, and life-long success. Consequently, it also assists in sensitising supervisors, managers, and lecturers to the challenges faced by working students in their personal as well as professional lives. Creating awareness of the rationale for and consequences of not managing one’s wellness also informs the relevant role players so that they can take action to counter this. Students should be proactive rather than reactive in terms of wellness management.

6.3 LIMITATIONS OF THE STUDY

Similar to any research study, there are limitations of this research that should be taken into account. In general, most of the findings of this study are supported by literature. The findings that

were not extensively documented in literature were that of time and task management, along with planning and the nature of one's job and studies in relation to physical and mental wellness.

The first limitation of the study is the geographical area. It is possible that the participants would not share the same experiences as students in other geographical regions and institutions. Studying students from a different geographical area and institution might have led to different results.

Secondly, limitations related to the specific constructs that the researcher studied further narrowed the field of study, as the study was limited to the factors influencing postgraduate working students' wellness. As such the study excluded non-working or undergraduate students' wellness, as the researcher only focused on postgraduate working students' wellness. Additionally, the study only focused on students in the industrial psychology and human resource management field, and only on three aspects of wellness, namely: physical, mental and social wellness. The reason for this was that including all the departments within the university, or fields of study would render the study too broad.

Another limitation of the study relates to time. One semi-structured interview was conducted per participant, along with a few follow up sessions in terms of the essays and drawings that were obtained. The researcher is of the opinion that a study conducted over a longer period of time could possibly yield more conclusive results.

The sample of the study was dominated by one gender, age and race group, even though the participants were employed in various companies. A study conducted on a more diverse group in terms of background, race, age, marital status and gender, could provide a better indication of the situation in the broader South African context. Such a study could identify additional factors.

Finally, the study is limited to the literature perspectives that were consulted and thus the study could be delimited in terms of other closely related literature perspectives that were not accessed. It is important to note that the findings are subjective and not quantifiable. However, Malterud (2001) indicates that this is one of the accepted limitations when conducting a qualitative research study.

Despite these limitations the study makes a valuable contribution to the literature. In terms of the South African literature available on the topic, the researcher believes that this has added to the

limited research on the specific topic available and will possibly stimulate motivation for further research in the indicated domain.

6.4 RECOMMENDATIONS

The following recommendations can be proposed:

The first is to conduct the study on other degree programmes within the sample university; this will provide a better indication of how working students doing other degree programmes view their wellness and the factors impacting on it, providing a better indication of their experiences. Future studies could also focus on other geographic areas and tertiary institutions. This would broaden the information available concerning whether the relationship between wellness factors and academic success are similar across different locations and institutions.

Another suggestion is to conduct the study over a longer period of time, in order to determine how long these experiences last and what the long-term effects of it are. Other past, full-time, concurrently working and studying, students could also be included in the study. Along with this the sample could also be more diverse in terms of age, gender, race and marital status. Such diversity could yield different results as impacting working and studying students' wellness. In addition to this, future studies should also be qualitative as a minority of qualitative studies exist. Through qualitative studies more in depth and rich data can be obtained.

Some initiatives or recommendations that could be employed have been suggested by the research participants in order to deter the negative effects of these threats to postgraduate working students' wellness. Such recommendations included the necessity of having an effective support system, creating more appropriate course awareness and clarifying expectations from the university, as well as more awareness concerning wellness management. These suggestions could be further researched and implemented in the future.

First and foremost, all the participants indicated the importance of having a support system. This included support from the university, such as the implementation of a mentoring or counselling service. Research supports this as such members may have a significant effect on the performance of students through guidance and mentoring (Astin, 1993; Nelson Laird & Kuh, 2005; National Research Council, 2004; National Survey of Student Engagement, 2005; Tinto, 1987b). The participants emphasised that a more experienced elderly person would be in a better position to be a mentor or counsellor.

The second recommendation provided by the participants included university transparency and a better understanding of what the masters course entails. Along with this the participants requested more realistic university academic deadlines and consideration, especially for attendance of the block weeks on campus and the travelling arrangements to be managed by students. Accordingly, it was indicated that part-time jobs rather than full-time jobs should be encouraged as postgraduate study requires effective time management, planning and control. The final suggestion was proposed by a minority of the participants and involved an awareness session in respect of the impact of working and studying on one's wellness, as well as self-awareness with regard to maintaining one's wellness, including things such as a balanced lifestyle, positive and motivated attitude, and the right mind-set. Therefore these suggestions could be further researched. For a detailed discussion on these suggestions, refer to Chapter 5.

SUMMARY

This chapter provided a brief view of the study which aimed at exploring postgraduate student reported factors influencing their wellness. Within this study, the researcher explored the research questions provided in Chapter one, along with the limitations of the study and recommendations for future research. This has resulted in the identification of various challenges and dynamics which postgraduate working students need to navigate. The research study sheds light on the identified challenges for students who aim to enter into the work world while studying simultaneously. By creating awareness of the identified factors, the adverse impact of these can be minimised and vital support can be offered. It is through a combination of the factors and its effects that individual wellness is impacted on. Therefore, if an organisation like a university is to effectively manage its postgraduate student's wellness, it must consider all these elements and realise the importance of student wellness relating to students working and studying.

In the final chapter, the researcher presents her personal reflections on the research journey she embarked upon to complete her dissertation.

CHAPTER 7:

REFLECTIONS ON THE RESEARCH JOURNEY

In closing, I shall reflect on both the highlights as well as the challenges, I have experienced throughout my research journey, which has inevitably created a window of knowledge and enlightenment. This chapter provides some inside scope into my story, disclosing my thoughts, feelings and experiences in discovering the truth about some of the factors influencing postgraduate working students' wellness. The reflections are presented in four phases, specifically: prior to the commencement of the study, during the data collection, the data analysis phase and finally, the complete write-up of the research study.

7.1 REFLECTIONS PRIOR TO THE COMMENCEMENT OF THE STUDY

The factors influencing postgraduate working students' wellness beset my mind during my first year of the master's program. Coming from a background of working and studying simultaneously, there were many challenges and dynamics presented to the master students. I was always involved in sport, had a balanced lifestyle especially with regard to my physical, social, spiritual and mental wellness. I grew up in a home with strong values and support. My parents are strong advocates of education and did not try to influence my decision on the tertiary path to pursue; however, it was clear that pursuing a degree and advancing in a career was necessary. My parents have always encouraged me to study and progress within my career, providing constant reminders of the benefits should I find myself in a situation where I have to fend for myself. Although it had never been a question of whether to study or not, in view of my upbringing and the challenges we face in the world today, it has definitely sparked a motivation for me to further my studies and grow in knowledge.

The inspiration behind this specific investigative study stems from the belief that as a product of a person working and studying, I can relate fully to the experience of working and studying simultaneously. My experiences and exposures in the workplace have laid a solid foundation for me to pilot this study. In addition, I bared witness to much of the stresses, frustrations and confusion of those individuals, including myself, who were working and studying concurrently. In comparison to the students who were both working and studying and those who were only studying varied drastically in terms of the support offered for them to advance in their careers. I noticed that those friends, who had recently started working full-time and got married, had to manage and balance several tasks in their personal lives and were taking strain. This observation became the

driving force behind my research study. I wanted to discover what holds true amongst full-time working and studying postgraduate students' wellness.

Furthermore, being engaged to a professional person and with plans to enter into the full-time working world, I was determined to research the success and non-success strategies adopted by postgraduate working students in order to gain some insight on how to effectively balance work, studies and family life. Additionally, I wanted to identify the common mistakes made by these students in order to avoid making those same mistakes. Through this self-reflection, I acknowledge myself as being immersed in the study and having certain preconceived ideas about the research topic. However, prior to the commencement of the research study, I was aware of the possible bias that I may have brought with me and took extra care not to let it interfere throughout the research process. I was determined to embark on this research study with the goal of providing a true reflection of the participants' experiences, and have tried my best to be objective at all times throughout the study.

Additionally I also have a passion to listen to others and assist them and have learned that all working postgraduate students have a story to tell. I have thoroughly enjoyed sharing in the experiences of my colleagues; above all, I have gained huge insight from their stories and encounters. Having studied industrial psychology, a part of my portfolio requires me to assist individuals in achieving optimal levels of performance. Subsequently helping them find meaning in their lives and also assisting them in attaining a balanced lifestyle which will ultimately improve work and personal lifestyle. This research study has also added great value to my career profile. I decided however to cultivate my skills and passion to help change postgraduate working students' lives in the field of industrial psychology and human resource management. As such, I approached the research study as a stepping stone to one of my future goals.

It should be noted that although the research topic was one that interested me during my masters year study, I was sceptical about the success of this study prior to its commencement, due to the limited quantity of literature I found available on student wellness. These findings sparked a concern in me being able to draw conclusive arguments and conclusions. At this point, I even considered going back to my honours topic. As such the initial feelings and thoughts I experienced before I embarked on my research journey was overwhelming with regard to achieving the proposed outcome. I knew once I had started that there was no turning back. I had no doubt in my ability to conduct the research study but I realized that it would be intense and lengthy with long hours but I would walk away from this experience with an informed attitude and perception. My benefits would simply be owed to the fact that I chose a research topic that I am passionate about.

I was excited about making a difference in some students' life. I did not know what to expect or what the outcome of the research study would be. I do acknowledge my study leaders patience and belief in the importance of such a topic, as his words of motivation inspired me to continue. As I started sharing my findings with other fellow masters' student colleagues, they highlighted the need for such a study to be conducted and expressed immense excitement about reading my dissertation upon completion. I then felt optimistic and excited about the intended outcome of my study and continued to embark on this research journey.

7.2 REFLECTIONS DURING THE DATA COLLECTION

Initially I did not see a need for a pilot interview to be conducted and viewed it as unnecessary work; however I am glad that I chose to carry it out. The pilot interview assisted me in developing my interview skills and helped to ensure that my questions were phrased correctly in preparation for the main study. Throughout my study I learnt how to establish rapport with the participants and established open relationships with them. At first I did struggle to get participants to agree to be interviewed due to their busy schedules. Frustration also set in as certain individuals initially agreed to be interviewed but declined closer to the scheduled interview times. Nonetheless, regardless of these setbacks and challenges, I persevered and successfully managed to reach data saturation after securing 19 interviews.

Some participants did reschedule their initial times due to unforeseen circumstances. Although this left me having to juggle my time and other responsibilities, I maintained that they were doing me a favour and was grateful that they re-scheduled instead of withdrawing from the study. Many participants reported that the interviews provided a platform for them to be open and honest with their responses due to the manner in which it was conducted. This feedback left me with a sense of gratification and accomplishment. Some interviews were conducted in person where the participants chose the venue while others were conducted telephonically.

The responses received from the participants during the interviews as well as the various pictures and essays proved to be interesting and in-depth. I found that all the participants were honest and placed their trust in me. It was evident that my participants had utilised the session as a venting session as many of them expressed the various frustrations experienced when talking about their wellness and the impact on it as a result of concurrently working and studying. These interactions proved self-rewarding and the majority of the participants thanked me for giving them the opportunity to express themselves and have requested feedback upon conclusion of the research study. The participants also expressed value to the university in which this study was conducted.

Some of the interviews felt emotionally draining as participants struggled to express themselves due to various personal emotions which were not discussed previously. These difficult situations stemmed from the reasons for the participants studying and working at the same time. Due to the sensitivity of some of the information obtained, I was requested to eliminate certain parts of information from the research study. Nonetheless, the interviews proved to be worthwhile with valuable information provided by the participants.

The fact that I am now experiencing what my participants experienced during the situation of concurrently working and studying, I am able to relate even better to my study. I had to continuously remind myself during the interview process that I need to remain detached from the participants' experiences. In many instances I was tempted to provide them with advice and share my own experiences in relation to the issues they are facing. Nonetheless, I remained professional, refrained from my perceptions and allowed the participants to express themselves freely. Through my overall conduct in the interviews, the participants felt assured that I was listening to them, rather than providing my opinion.

In spite of the challenges experienced during the data collection phase, this was the one stage which I enjoyed the most. It enabled me to grow as a researcher while obtaining rich in-depth information through various interview techniques such as probing, rephrasing, building rapport, clarifying, mutual understanding and agreement on responses provided. It was insightful and interesting as I related to the various dynamics surrounding one's wellness and the links amongst the various wellness dimensions. I was equally eager to enter the analysis phase, utilising the findings and using the valuable input from my participants.

7.3 REFLECTIONS DURING THE DATA ANALYSIS

During this phase, I discovered that I had a very large database, stemming from 19 interview transcriptions, to essays and pictures. I had to conceptualise where to begin or how to approach it. I was determined to read through all my transcriptions even though data saturation was reached. It was necessary for me to understand every participant's experience, even though the findings were of a similar nature. I also relied on resources such as qualitative data analysis articles and discussions with my supervisor. These resources guided and re-assured me with regard to the way forward. Along with these, many of my codes were intertwined, leading to feelings of uncertainty and confusion during the initial coding phases.

I spent months analysing and coding the information. This was an extremely important process as the analysis of my findings would determine the outcome of my research. Once I clarified the codes, I was in a better position to continue with the analysis and results write up. It was remarkable to see how my transcriptions evolved in a variety of colourful codes and names. Initially, I categorised the codes manually and thereafter utilised an excel spreadsheet. Many of my ideas literally surfaced during my sleeping hours, and I jotted down the concepts the next morning. I spent many days debating the categorisation of my themes and reworking them until I was satisfied. I became so engrossed in the analysis phase that I worked throughout my weekends and excluded myself from social activities. Finally, the outcome was pleasing. It proved rewarding to incorporate my findings as well as compare them to existing literature.

Even though the initial analysis phase was surrounded by confusion, anxiety and debates, I began to enjoy the subsequent developmental stages as I could see the pieces of the puzzle coming together within the bigger picture. At times I felt emotionally and physically drained as the analysis felt like a long and tedious process but it proved to be insightful and inspiring and on completion of the analysis I was grateful and relieved that the long hours and sleepless nights had finally paid off.

7.4 REFLECTIONS DURING THE WRITE UP

Throughout this research study I experienced a variety of different emotions, highs and lows, I had to continuously assess the significance of my research study and the impact it had on me as well as others involved. I soon discovered that it was not as difficult, as I do believe I chose to take on this phenomenon for many reasons. Conducting the literature study was challenging as, I had to research rigorously in order to find relevant literature. In retrospect, it was worthwhile, as it added value to my research study and ultimately helped bridge a gap within this type of research.

I experienced an incredible number of gains when I began my write up. Every chapter written felt rewarding and all of the hard work and preparations were finally serving a purpose. I had to maintain objective conclusions from the research findings throughout my dissertation. This was challenging as there were some sensitive topics. Hence, I adopted a sensitive approach from the beginning and remained diplomatic. Critical objectivity was the code of practice. It was interesting for me to realise my personal developments and growth from the contents discussed in my research study.

During this phase I had follow up data collection engagements with my research participants based on the pictures and essays that they provided. This helped me to better understand the

interpretation thereof. Unfortunately, I wasn't able to utilise all the pictures presented but only of those who granted consent. There were times when I felt physically and emotionally exhausted due to certain circumstances. I was working and experiencing some family issues, these were difficult times coupled with having to travel to work. I conducted my studies at the end of the working day until the early hours of the morning, then again preparing for the working day. Much of the time was spent working on my internship and therefore having to work harder in order to catch up with my dissertation. In spite of the physical exhaustion, I did not resort to stimulants or substances to enable me to get through; I resorted to my spirituality and faith. I did avoid some social gatherings due to the limited time I had left to conclude my research. At times I did break my routines which drew me a few steps back, it led to some tears and took extreme energy to get back into my work.

Evidently, the journey did pose some challenges. The write-up was routine work, something I do not enjoy. I am an individual who enjoys human interactions, thus working around people so working independently and alone was not so great. As mentioned above, my social interactions took a back seat and when I did engage in any interactions with friends and family I was constantly exhausted. My main focus and energy had to be spent on my studies and internship.

Finally, my research and the write up of my dissertation took longer than anticipated, due to unexpected circumstances and issues that arose. I could easily describe this as one of the most difficult years of my life. At times it felt like nothing would fall into place with one issue after the other. It was a month in which everything was just going wrong. I endeavoured to pull myself together and draw from the positive out of everything that was happening. I had to remain supportive of some of my friends who also underwent traumatic experiences and became completely demotivated to complete their studies. My own personal and work life was overlapping and I had to lend support to my brother who stumbled upon some personal challenges in his own life. I made a decision to prioritise the people I love over everything else, where necessary. Nonetheless, prayer was my only outlet together with a wonderful support system who, were understanding and continued to encourage me.

7.5 CONCLUDING REMARKS

As soon as I started working on my dissertation, I enjoyed it thoroughly. My interviews were interesting as well as the pictures and essays. It was enlightening to gain insight into the personal experiences of these students. Although the research journey that I embarked on was not always a smooth road, at times it felt like I was climbing a mountain. Sometimes I fell off the track and had to

persevere to get back on route. It was a journey filled with many emotions including tears, overwhelming confusion and uncertainty, even an attempt to give up. Having stated that, it would be unfair not to mention the laughter, excitement, relief, contentment and joy that the final chapter has brought to my life. This research study was extremely gratifying as many participants expressed their appreciation for being given the opportunity to participate in the study and voice their opinions. Throughout my research study, I made use of twitter (a social network) as well as keeping a journal in order to record my thoughts, feelings and experiences during this research study. Keeping a daily record of my thoughts and feelings proved to be therapeutic. By referring back to my tweets and journal entries, it served as a reminder of the knowledge gained, the tough roads travelled but above all, the motivation to complete my study.

Aside from the challenging experiences, in the end it was definitely worth it and I would certainly travel back down that road. The continuous and wonderful support system surrounding me has most certainly helped to keep me afloat and sailing through the rough seas. It made me realize the effect that people have on my wellbeing and perseverance. God's uninterrupted guidance and wisdom along with my strong support system is what got me through the difficult times. I am grateful to God, my study leader as well as my family and friends who were instrumental in carrying me through to the finish line in completing my research study.

Although the journey was tough during this research study, the personal, spiritual and valuable knowledge gained was far greater. I have certainly grown and learnt. I discovered amazing findings, many of these were written up whilst some remained confidential. I learnt how to conduct a research study through the interpretivist paradigm. I have gained insight into the factors influencing postgraduate working student wellness and the importance of considering these factors and its' impacts on an individual. I have developed myself as an individual and I plan to be aware of such factors and implement them in order to maintain a balanced lifestyle. Additionally, I have been reminded throughout this research journey of my personal growth and the assertive attitude which I have attained. I believe that one can only grow as a person and as a researcher. I have learnt that understanding this phenomenon, has significantly contributed to the progress in my own life.

It was an experience that gave rise to many intellectual journeys, while still remaining grounded. My aim of this research study was to choose a topic that would a make difference and leave a legacy within the department of Human Resource Management. I believe that my research study has achieved this purpose, considering the limited data on this particular subject. Whilst my study served as a contributor to the topic at large, I am determined to investigate other factors that have

arisen during the research which will in effect contribute to the overall topic of “student wellness”. Furthermore, I believe that my research topic has established a sense of awareness and understanding of postgraduate working students’ wellness. In conclusion, a note to my participants, I hope that this research has ignited a greater sense of wisdom, hope and encouragement in pursuit of achieving success in such a situation.

SUMMARY

This chapter was a reflection of my research journey. Both the highlights and challenges experienced throughout my research journey were indicated. Additionally this chapter indicated my thoughts, feelings and experiences throughout the journey of discovering the factors influencing postgraduate working students’ wellness. My reflections were presented in the following four phases: prior to the commencement of my research study, during the data collection, during the data analysis and during the write up.

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APPENDICES

APPENDIX A: INTERVIEW DISCUSSION GUIDE

INTRODUCTION/OPENING

- **Establishment of rapport**
 - The researcher will establish rapport with the participant by using a warm welcome to introduce herself, as well as a firm handshake.
 - The aim is to make the respondent feel welcome and comfortable, as well as to get to know the respondent and ensure that their responses will remain anonymous.

- **Discussion of purpose**
 - The researcher will explain to the participants that questioning regarding the factors influencing their wellness, specifically their physical, mental and social wellness, as well as understanding their situation of concurrently working and studying full-time in conjunction with these factors, is necessary for the purpose of this research study.
 - The respondent will be reassured that there are no ‘wrong’ or right answers as the aim is to gain insight into their experiences with regard to the topic.

- **Discussion of motives of the study**
 - The researcher will explain why it was necessary to delve into the topic of “factors impacting postgraduate working students’ wellness” and what she proposes to do with their findings.
 - Furthermore, the consent of the respondent will be obtained before embarking on the interview and the researcher will ask the respondents whether the interview data can be used for the purposes of this research study.

- **Time line**
 - The researcher will indicate the estimated duration of time that the interview will consume and ask if the participant would still be willing to take part in the interview (Estimated time= 60 minutes).

MAIN DISCUSSION/ INTERVIEW

- **Introductory background questions**
 - The researcher will ask for a brief overview of the participant.

- **General themes**
 - The researcher will provide the definitions of wellness, physical wellness, mental wellness and social wellness in order to ensure that the participants understand these concepts. These definitions are indicated in Chapter 1, section 1.7.
 - The following three questions will be asked in a manner that is free of probing or leading questions:
 - How does the situation of working and studying impact your physical wellness?
 - How does the situation of working and studying impact your mental wellness?
 - How does the situation of working and studying impact your social wellness?
 - Follow up questions with regard to these three main questions will also be asked.

CONCLUSION/CLOSING

- Participants will be given an opportunity to ask questions.
- Participants will be thanked for their time.
- Participants will be given feedback on the findings of the research study.

APPENDIX B: PARTICIPANT LETTER

Dear Student:

You have been invited to participate in a research study designed to investigate the factors influencing postgraduate full-time working students' wellness. The purpose of this study is to focus on how the situation of studying and working impacts the three aspects of wellness, specifically on physical, mental and social wellness. Per se the study will identify the impact and effect of postgraduate students both working and studying full-time simultaneously. These affects would be based entirely on your experiences and opinions and would help to provide a more detailed understanding of what contributes to you wellness, positively or negatively, as a result of your working and studying environments.

The intention is to use the information collected as guidelines in the development of future postgraduate student wellness programs or solutions, while considering the situation of working and studying full-time and how to better manage it. You will be provided with a summary of the findings. As such this research study requires only that you participate in a voluntary interview. Please read the informed consent and indicate that you agree to this process and wish to continue. You will then be asked to participate in an interview.

Kind Regards

Jenita De Sousa

APPENDIX C: BIOGRAPHICAL QUESTIONNAIRE

Biographical Information

Name:	Surname:
University:	Department:
Degree:	Current year of study:

Please indicate your Home language:

English	Afrikaans	Zulu
Sotho	Xhosa	Other:

Please indicate your age group:

<20	20-30	31-40
41-50	51-60	>61

Please indicate your gender:

Male	Female
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Please indicate your ethnic group:

White	Black	Indian
Coloured	Asian	Other:

Please indicate your marital status:

Single	Married	Divorced
Separated	Other:	

Contact details:

Cell no:
E-mail address:

What is your current occupation?

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APPENDIX D: PROCESS OF CODING

Results: Coding Tables

Theme 1

Open Coding	Axial Coding	Description	Selective Coding
Bad, unhealthy and irregular eating patterns	Health Habits	Health habits comprises of irregular/ regular and unhealthy/ healthy eating and sleeping patterns as well as exercising and the effort to maintain healthy habits.	Physical Wellness
Effort required to eat properly and drink lots of water			
Healthy and regular eating patterns			
Irregular sleeping patterns			
Exercise			
Regular sleeping patterns			
Panic attacks due to stress	Physical Symptoms	Physical symptoms consists of panic attacks, burnout, low immune system, headaches, eye strain, weight loss, heart palpitations, low blood pressure, hair loss, skin breakouts and increased levels of illness, as well as physical exhaustion.	
Increased levels of illness and hospitalisation including burnout			
Low immune system, headaches, eye strain, weight loss, heart palpitations, low blood pressure, hair loss and skin breakouts			
Physically exhausted and drained			
Managed and planned tasks according to energy levels	Time and Task Management	Time and task management includes the importance of balance, routine, prioritising, planning and managing responsibilities, demands, tasks as well as time in accordance with one's energy levels.	
Difficulty in managing responsibilities, demands, tasks and time			
Difficulty in prioritising and obtaining a balance			
Obtained a balance and routine			
The nature of job – travelling,	Nature of the Job and	The nature of job and	



sitting for long hours and staring at the computer	Studies	studies involves the long work hours, technology, travelling, study demands, nature of work, deadlines, pressure to perform and lack of sleep, all leading to stress and pressure as well as an impact on one's quality of life.
Stress and pressure due to deadlines, work and study demands, and to perform		
Lack of sleep due to work demands and stress		
Impact on quality of life		
Energy obtained as a result of sleep and stress relieve	Coping Mechanisms	Coping mechanisms include: spirituality; sleep and stress constituting energy; emotional eating due to pressure and stress; music as a mechanism to relax; exercise resulting in an increase in self-esteem and confidence as well as a source of energy, stress reliever, meditation, outlet and breaking fatigue; and finally the utilisation of substances or supplements for stress, anxiety, sleep, focusing and to stake awake.
Exercise resulted in increased self-esteem and confidence		
Emotional eater especially when stressed		
Exercise utilised as an energy source, stress reliever, meditation, to break fatigue and an outlet		
Utilised music to relax		
Utilisation of substances and supplements for sleep, stress, anxiety, to stay awake and focus		
Utilised spirituality as a way of coping		
Change in behaviour and emotions	Overarching Emotions	Overarching emotions relate to a change in one's behaviour and emotions as a result of increased levels of stress, pressure as well as anxiety, and include
Balanced levels of stress and anxiety		
Increased levels of stress, pressure and anxiety		
Feelings of depression,		



demotivation, frustration, unhappiness and torture		feelings of depression, demotivation, frustration, unhappiness, and torture, leading to tears as well as the importance of obtaining balanced levels of stress and anxiety.	
Frustrated frame of reference			

Theme 2

Open Coding	Axial Coding	Description	Selective Coding
Managing stress	Emotional Wellbeing and Stress	Emotional wellbeing and stress relates to: managing stress levels; feelings of frustration, depression, anger, overwhelming and crying; increased levels of stress, anxiety and mental pressure as a result of uncertainty with regard to expectations and practically applying theory; lack of growth and development due to pressure and stress; as well as the internship availability and selection resulting in frustration and worry.	Mental Wellness
Stress, anxiety and depression			
Stress and pressure reverted growth and development			
Seeking internships increased levels of stress and frustration			
Affected emotions at work			
Constant stress, mental pressure and anxiety			
Feelings of frustration, depression, anger, overwhelmed and crying			
Anxiety due to uncertainty of applying theory practically			
Anxiety due to uncertainty in terms of expectations			
Increased levels of stress and depression during course work year			
Not coping in terms of mental wellness	Mental Capacity and Effective Functioning	Mental capacity and effective functioning indicates that it is mentally exhausting to work and study	
Mentally draining to work and study simultaneously			
Mental exhaustion -			



continuously applying your mind		simultaneously as a result of insecurities along with the continuous application of one's mind, as well as a lack of coping in respect of mental wellness including difficulty in functioning effectively and concentrating, thus requiring one to switch off their mind from work and focus on the studies.	
Difficulty in functioning effectively and focusing on studies			
Switches mind off from work			
Insecurities within participants mind			
Affected mental capacity at work			
Plan work around energy levels	Time Management and Planning	Time management and planning denotes difficulty in planning tasks along with managing one's time and the necessity to set goals, prepare, manage time as well as plan work in accordance with one's energy levels.	
Planning tasks assisted in balancing work and studies			
Difficulty in planning tasks and managing time			
Planning, setting goals and preparation			
Time management			
Difficulty in finding a balance	Balance and Prioritisation	Balance and prioritisation relates to the difficulty in obtaining a balance between work and study demands as well as maintaining a balanced lifestyle, the prioritisation of one's studies, self-discipline, feelings of satisfaction as a result of balance and lastly knowing when enough is enough along with your expectations.	
Prioritising studies and self-discipline			
Maintaining a balanced lifestyle			
Feelings of satisfaction when achieving a balance			
Balancing work and study demands			
Knowing when enough is enough and what is expected of you			
Maintaining a positive attitude	Attitude and Mentality	Attitude and mentality	



and motivation		comprise of: a change in behaviour, attitude and personality; upholding a positive attitude and impetus; being an overachiever; being able to say no and the opportunity to develop as well as grow one's mental capacity.	
Being an overachiever			
Opportunity to develop and grow mental capacity			
Change in behaviour, attitude and personality			
Being able to say no			
Spirituality and faith served as a motivational force	Motivation	Motivation referred to motivational forces such as spirituality, faith, positive attitude and mind-set, stimulating work, practically applying theory within the work world, deadlines, last minute stress and pressure, exhaustion and efficiency, as well as a lack of energy levels along with motivation to continue.	
Positive attitude and mind-set served as a motivational force			
Lack of energy levels and motivation to continue			
Work was stimulating for the mind and served as a motivational force			
Practical application of theory in work served as a motivational force			
Exhaustion served as a motivational force to become efficient in work			
Deadlines and last minute stress served as a motivational force to continue			
Difficulty in coping and finding time to switch off	Coping and Support	Coping and support constitutes: the difficulty in mentally coping and finding time to switch off or relax; the lack of support resulting in the border of a traumatic experience; decreased	
Adopt building blocks necessary to cope			
Spirituality served as a coping mechanism			
Participants question purpose of life and reasons for studying			



Not much support – border of a traumatic experience		wellness due to the situation of concurrently working and studying; questioning one’s purpose of life and reasons for studying; as well as the adoption of building blocks to mentally cope, including coping mechanisms like spirituality.	
Decreased wellness and difficulty in coping as a result of working and studying simultaneously			
Coping better and improvement in wellness in dissertation year			
Just switching off and relaxing			
Prioritising work over studies due to work obligations	Nature of the Job and Studies	The nature of job and studies refers to: prioritising work over studies as a result of work obligations; the environment including workload, demanding targets/ deadlines and work hours; group work leading to conflict due to lack of understanding; as well as external factors such as financial implications and technology.	
Nature of job and work environment - long office hours, demanding targets and workload			
Stress due to demanding deadlines			
External factors like financial implications and technology			
Group work - lack of understanding, conflict and busy schedules			
Nature of job - travelling and hours			
Work and study demands, deadlines and environment			
Mental wellness was impacted by workload and deadlines			
Decreased wellness during course work year			

Theme 3

Open Coding	Axial Coding	Description	Selective Coding
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Life partner was supportive	Positive Support Structure	A positive support structure relates to good support obtained from friends, family, life partners and the university as well as mentors.	Social Wellness
Friends and family were supportive			
Good support structures from those around the participant			
Strong support structure from university			
Mentors - someone to talk to			
Lack of academic support from family and friends	Negative Support Structure	A negative support structure is associated with a lack of academic, emotional and financial support from family, friends, parents, life partners and the university.	
Lack of emotional support from family and friends			
Lack of financial support from parents			
Life partner was not supportive			
No support structure from university			
Avoiding social interactions with friends and family	Negative Social Interactions	Negative social interactions include the avoidance of social interactions or gatherings, difficult in building new relationships as well as the development of a manipulative social behaviour.	
Difficulty in building new social interactions			
Developed manipulative social behaviour			
Managed social interactions over weekends and around time	Positive Social Interactions	Positive social interactions constitute the management of social interactions in accordance with time, building and maintaining relationships, clarifying expectations as well as the utilisation of social interactions as a way of	
Social interactions utilised as a coping mechanism			
Clarifying expectations with employer			
Building and maintaining relationships			



		coping.	
Emotionally draining	Socially Induced Emotions	Socially induced emotions comprise of depression, loneliness, strain, pressure, frustration, misuse of support and emotional exhaustion.	
Felt depressed and alone			
Financial strain and pressure			
Frustration due to friendship support being misused			
Mental exhaustion	Physical and Mental Wellbeing	Physical and mental wellbeing relates to physical and mental exhaustion.	
Physical exhaustion			
Impacts on quality time devoted to relationships	Time Management and Prioritising	Time management and prioritising involves the impact on the quality time that has been devoted to one's relationships, work and study as well as the need to make social recreational and other sacrifices, prioritising work over one's social interactions thus resulting in strain on one's social life.	
Time management of social interactions, work and study			
Need to make social recreational sacrifices			
Prioritised work over social interactions			
Making time for things you enjoy and sacrifices			
Social life took strain			

Theme 4

Open Coding	Dimension Category	Axial Coding	Selective Coding
Support system in place for students i.e counsellor	Support System	A support system comprises of support and understanding from the university as well as one's employer such as an onsite counsellor, wellness champion or mentorship system.	Suggestions, Lessons Learnt and Benefits
Support from University			
Support and understanding from employers			
Mentorship system in place for working students			



University transparency in terms of the full-time masters course	Creating Course Awareness and Clarifying Expectations	Creating course awareness and clarifying expectations relates to university transparency with regard to the master's program including awareness of expectations and the importance of planning as well as organising.
Preparation and awareness session by the University on what to expect		
Importance of planning and organising		
Creating self-awareness around wellness and maintaining it	Awareness Around Wellness	Awareness concerning wellness consists of an awareness session in respect of the impact of working and studying, self-awareness with regard to maintaining one's wellness including a balanced lifestyle, positive and motivated attitude as well as the right mind-set.
Awareness session surrounding the impact of working and studying full-time simultaneously		
Obtain a balance across all areas of wellness		
Adopting the right mid-set and maintaining a positive, motivated attitude		
Exercising regularly and maintaining regular sleeping patterns	Lessons Learnt From Working and Studying Simultaneously	Lessons learnt from working and studying simultaneously includes what the individuals acquired through such a situation, specifically the importance of regular exercise and sleep patterns, taking time to relax, utilising pressure as a motivational force, self-discipline, planning and organising, balance as well as positivity.
Pressure and working served as a motivational force		
Taking time to relax and unwind		
Self-discipline- will be roll backs but is rewarding		
More planned and organised		
More positive and making an effort to balance everything		
Quality and purpose of life	Benefits of Working and Studying Simultaneously	The benefits of working and studying
Wider frame of reference		



Opportunity to grow, mature and evolve		simultaneously relates to the advantages, such as one's quality and purpose of life, a wider frame of reference as well as an opportunity to grow, stretch oneself and evolve.	
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APPENDIX E: PARTICIPANT CONSENT FORMS



Informed consent for participation in an academic research study

Dept. of Human Resource Management

A STUDY OF POSTGRADUATE STUDENT REPORTED FACTORS INFLUENCING THEIR WELLNESS

Research conducted by:

A study of postgraduate student reported factors influencing their wellness
Ms. J.F. De Sousa (10501445)
Cell: 076 076 8034

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Respondent's signature

22/01/2015

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03/03/2015
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31/01/2015

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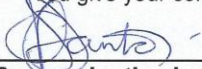
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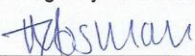
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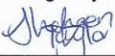
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Nasser mann

Respondent's signature

6 Nov '14

Date



**Informed consent for participation in an academic
research study**

Dept. of Human Resource Management

**A STUDY OF POSTGRADUATE STUDENT REPORTED FACTORS INFLUENCING
THEIR WELLNESS**

Research conducted by:

A study of postgraduate student reported factors influencing their wellness
Ms. J.F. De Sousa (10501445)
Cell: 076 076 8034

Dear Respondent

You are invited to participate in an academic research study conducted by Jenita Fatima De Sousa, a Masters student from the Department of Human Resource Management at the University of Pretoria.

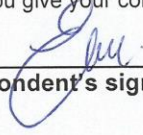
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Respondent's signature

2015-01-26

Date



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Dept. of Human Resource Management

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21 / 01 / 2015

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2015/01/20

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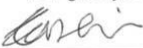
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