EMPIRICAL STUDY

Concepts of health and well-being in managers: An organizational study

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Abstract
Global changes and new managerial challenges require new concepts of health and well-being in organizational contexts. In the South African context, health and well-being of managers have gained relevance in organizations and in management sciences. International organizations, in particular, attempt to address the increasing demand for health care and the delivery of health services to their managers. Careful and appropriate health management requires research to evaluate context-specific health concepts and strategies. The purpose and aim of this article is to assess managerial concepts on health and well-being that could be used by the organization to contribute to managerial well-being by implementing health promotion according to managerial needs. At the same time, this article contributes to salutogenetic health research that is very rare with regard to the South African organizational management research.
This study is a multi-method research study conducted in a selected international organization in South Africa. However, in this article, selected qualitative findings will only be presented.
This organizational study presents selected research findings on health concepts and strategies employed by managers. Findings demonstrate that the managerial concepts of health and strategies mainly refer to not only physical but also to mental and spiritual aspects, with a priority on physical health and well-being.
The findings presented are based on qualitative research methods and their research criteria.
This assessment serves as a foundation for new approaches to health management within the international work context in South Africa. It also contributes to a paradigm shift from pathogenetic to salutogenetic concepts of health and well-being within the South African organizational work context.
The article produces new insights into the qualitative health concepts of South African managers and expatriates and contributes to promoting salutogenesis in organization within South Africa.

Key words: *South Africa, managerial health, well-being, automotive industry, case study, organizational health, health management, salutogenesis*

The increasing demand for managers to cope with the growing complexities and challenges of a global environment in the work situation results in versatile development possibilities for the individual in trans-cultural organizational contexts (Mayer, 2008). These changing environmental aspects impact on managerial health and well-being at work and within organizations, and the (re-) construction of health and well-being has become a major issue in South African organizations (Barkhuizen & Rothmann, 2004).

The constitution of the World Health Organization (WHO, 1948) defines health as "a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity" (Johanson, Ahonen, & Roslender, 2007, World Health Organization, 2002). At the same time (Stellman, 1998, p. 28) states:

> Occupational health should aim at: the promotion and maintenance of the highest degree of physical, mental and social well-being of workers in all occupations; the prevention amongst workers of departures from health caused by their working conditions; the protection of workers, in their employment situation, from risks resulting from factors adverse to health; the placing and

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maintenance of the worker in an occupational environment adapted to his physiological and psychological needs and capabilities; and, to summarize, the adaptation of work to man and of each man to his job.

This definition includes physical, social, and psychological (mental) dimensions. Few definitions take psychological health, as the prevention and management of stress or depression, into account. In this article, health is defined in terms of the whole person and encompasses the emotional, intellectual, spiritual, occupational, social, and physical dimensions of individuals (Davies, Davies, & Heacock, 2003).

In the South African context, international enterprises maintain a relatively high standard of working conditions in comparison to small- and medium-sized enterprises (South African Department of Labour, 2004). Ill-health and occupational stress often lead to low production, a high number of production errors and accidents, high labour turnover, increased absenteeism, and high medical costs (Schabracq, Winnubst, & Cooper, 2003).

Health- and well-being- related aspects at work are increasingly important to managers and organizations (Pillay, 2008): the way managers think and define health has profound ramifications for their health behaviour as well as for their managerial practice and work management. International organizations particularly try to react to the increasing demand for health care and the delivery of health services to their managers in South African contexts (Mayer, Louw, & Louw, 2010), particularly as South Africa's workforce productivity is ranked 31st out of 45 countries, one-fourth of the country's workforce is affected by problems that contribute to deterioration in work performance (Noemdoe, 2002), South Africans are judged to suffer from unhealthy lifestyles and diet (Mead, 1998) and one-quarter of the economically active population is HIV-positive. These facts contribute to high labour turnover rates and relatively low worker productivity and exert high pressure on employee benefit programmes (The South African Institute of International Affairs, 2004). These aspects lead to the problem statement and the aims of this study.

Aim and purpose of the article

This article is to assess managerial concepts on health and well-being, as well as managerial strategies for keeping healthy, in a selected international organization in South Africa to contribute new insights to the current South African health management debate.

By addressing the intersection of managerial health concepts and strategies, the study's findings may serve as a foundation for new approaches to promoting health management in the international organizational context in South Africa and provide new ideas how to create and manage healthy organizations (e.g., Feldt, Kivimaki, Rantala, & Tolvanen, 2004). This article addresses concepts of health and well-being to contribute to the current South African scientific health debate as well as to the practical and social implications of management by responding to two research questions:

- Which concepts of health and well-being do managers in a selected international organization portray?
- How do managers stay healthy in this organization?

In the following, theoretical approaches on health and well-being of managers and organizational health will be introduced, research methodology and research findings will be presented, and a conclusion will be provided.

Managerial and organizational health in South Africa

The topic of health and well-being in organizations has recently gained major interest in scientific and applied management research (Mayer & Boness, 2009), and the question of "what keeps people healthy?" (Antonovsky, 1979) has also gained popularity (e.g., Rothman & Cilliers, 2007). This is not only due to the fact that illnesses and diseases cause high costs in the global economy (Rantanen, Lehtinen, & Savolainen, 2004) but also due to increased interest in organizational and management studies to explore humanistic topics impacting on organizations and their management.

The South African government considers occupational health and well-being a major priority. South Africa spends 30 billion Rand per annum in the South African organizational health context (South African Department of Labour, 2004). Health is promoted through health consciousness and awareness campaigns and inspections in organizations (Mdladlana, 2007). The South African Occupational Health and Safety Act (1993) defines health as being "free from illness or injury attributable to occupational causes"; however, this definition only defines health as an absence from illness and is not specific in terms of physical, mental or spiritual health, and well-being. At the same time, the focus with regard to health in South African organizations focuses on the management of HIV/AIDS

and leaves many other relevant health topics, such as chronic diseases or general health and well-being, unattended (Kanengoni, Tomu, & Harunavamwe, 2010). Therefore, there is a void in research on emic perspectives on managerial health and well-being in South African organizations (see also Mayer, 2011, in press).

Concepts of health and well-being

In the South African research literature on health, concepts of health and well-being are often connected to stress research. Köhler (2004, p. 60) argued that the "positive impact of work" and "health knowledge" (Brinkmann, 1993, p. 34) in organizations should rather be focused than stressors.

However, in South Africa, managerial wellness and health promotion is not yet a priority; and still aims to become a standard in organizational management, as the focus is still on concepts of illness and diseases than on positive health concepts (e.g., Bischoff, Ekoe, Perone, Slama, & Loutan, 2009; Legare & Gelman, 2009).

It has been stated widely that personal and organizational resources and perceptions of health can support health (Geißler, Bökenheide, Geißler-Gruber, Schlünkes, & Rinninsland, 2003, p. 81) and influence personal health behaviour. In the South African managerial context, many studies have been carried out on health care, planning and organising health systems and health-care structures particularly in the health-care management context (e.g., Pillay, 2008), mental health-care delivery (Van Rensburg, 2009), and on the perception of wellness in the South African police force (Rothmann & Ekkerd, 2007), using Adam's wellness model (Adams, Bedzner, & Steinhardt, 1997) and concepts of well-being of ministers (Buys & Rothmann, 2010). Most of the studies on health use quantitative research methodologies and are related to a positivist paradigm. At the same time, hardly any of these studies have focused on managerial concepts of health and their health strategies in the described context.

The sense of coherence in salutogenesis

Focussing on health and well-being, Antonovsky (1979, 1987) recognized the fact that individuals can remain healthy, despite the presence of overwhelming stressors. He developed the concept of salutogenesis, responding to the question "What keeps one healthy?" Salutogenesis includes the concept of the sense of coherence (SOC) that is a life orientation that is believed to be entrenched in an individual's historical and present sociocultural experiences. SOC develops over time, provided that general resistance resources are repeated, consistent, and regular (Rothman, Jackson, & Kruger, 2003). In contrast, experiences that are unpredictable, uncontrollable and uncertain lead to a weak SOC and are associated with patterns of declining health (Morrison & Clift, 2006). The SOC exists out of the sense of comprehensibility (referring to how you understand the world), the sense of manageability (how you cope with challenges) and the sense of meaningfulness (how you are motivated and how you define your meaning in life). An increased awareness of health-related issues and perceptions, as highlighted in this article, can support the development of promoting organizational health in managers and emphasize the importance of SOC.

Individuals with a high SOC are able to make cognitive sense of the workplace and perceive its stimulation as clear, ordered, structured, consistent and predictable. They perceive their work as consisting of experiences that are bearable and with which they can cope. They see them as challenges that they can cope with by activating personal resources. Further on, they can make emotional and motivational sense of work demands and see them as welcomed challenges in which they like to invest energies (Strümpfer, 1990).

A strongly developed SOC equates to a higher probability of becoming and remaining healthy. The business environment and the individual managerial concepts of health influence health and well-being through its structures and organizational culture (Köhler 2004, p. 18). Health promotion in organizations requires an integrated approach that includes individual and organizational health concepts (Johanson et al., 2007, p. 84). Therefore, this article focuses on the individual concepts of health in managers to create awareness and inform management on health promotion according to managerial needs.

In the following, the research methodology will be introduced.

Research methodology

Research approach

A qualitative research approach was elected as the foundation for this research, and multiple qualitative and quantitative methods were employed (Collis & Hussey, 2003). Within phenomenological paradigm, the theoretical and methodological approaches used are found on both the epistemological tradition of constructivism (Berger & Luckmann, 2000) and interpretative hermeneutics (Habermas, 1999).

Research method

A multi-method case study was used to understand and explain health concepts and strategies. The research findings presented in this article are, however, only based on selected data that were purely gained through qualitative research methods.

Entrée and establishing researcher roles

The forms of access granted to the interviewer to implement and conduct the research included "physical, continued and mental access" to the organization, the key informant and the interviewees (Taylor & Bogdan, 1994), prepared through establishing contacts and meeting with key persons in the organization. The role of researcher was constructed as that of being an "external, independent researcher", referring to "ethical considerations" (Babbie & Mouton, 2006, p. 520).

Research setting and sampling

The organization identified and used for this case study operates in 120 countries worldwide and belongs to one of Europe's leading German engineering groups (Organizational Paper, 2006a). One of its largest sales regions is Southern Africa (Organizational Paper, 2006b, p. 65).

This organization was selected due to its global and regional business involvement and standing, the diversity in the headquarters and in different branches of this organization in various regions in South Africa, the safety, health, and environment (SHE) policies that are in place and well managed, the international management profile and the permissible access to the organization.

Central to this research were the key issues of guiding organizational principles and policies on SHE (Organizational, 2008) that are well in place and well managed within the organization. However, the SHE policies do not refer to the mental and/or spiritual well-being and health of the employees.

Natural sampling procedures were implemented by the HR Department of the South African headquarters through encouraging all the managers at its headquarters to participate in the study. Altogether, all 120 managers within the headquarters were asked to participate in the study. Finally, 27 managers (15 female and 12 male) voluntarily agreed to participate in the study. Regarding cultural origin, 19 of the interviewees defined themselves as White, three as Indian, one as Coloured, and four as Black. White managers included 13 South African, four German, one Bulgarian, and one manager from the Netherlands.

Analysis of management level according to nationalities indicates that top management was represented by one Bulgarian, two German, and six South African managers. Middle management was represented by seven South African managers and one manager from the Netherlands, whilst lower management was represented by seven South African, one North Sotho, and one German manager. The supervisor position was held by a South African manager and the employee position by a German manager.

Data collection methods

The data collection method implemented comprised triangulation of methods and data. Research findings presented in this article were drawn only from (1) document analysis, (2) in-depth interviews, (3) collateral talks with employees and managers, (4) field notes, and (5) observation.

Internal documents of the organization were analysed to contribute to the understanding of the organizational health policies. The managers' in-depth interviews were recorded in full and transcribed, focusing on the verbal aspects of the communication. The in-depth interviews were based on pre-determined research questions that focused on the subjective experiences of managers with regard to health and well-being, and their concepts of health and strategies to maintain or re-build their well-being and health. The findings provide an in-depth insight into the described international South African context and may be replicated in other organizations in South Africa.

The researchers spend time within the organization to experience the field, take field notes, and talk to the employees. Observation of the organizational situation was also important.

Data analysis

Particularly, the data from the in-depth interviews were analysed according to a five-step process of content analysis: Step 1: Familiarization and immersion; Step 2: Inducing themes; Step 3: Coding; Step 4: Elaboration; and Step 5: Interpretation and checking (Terre Blanche, Durrheim, & Kelly, 2006, pp. 322–326). Data were analysed using ATLAS.ti.

The data taken by observation, field notes, and collateral talks contribute to the interpretation of data.

Research quality criteria

This research is based on defined research ethics that ensure the quality of data, including, among others, the respect accorded to and the rights of the

managers, the creation of informed consent, confidentiality and anonymity, and transparency (Mayer, 2008, p. 111).

Four major quality criteria—conformability, credibility, transferability, and trustworthiness—were defined as supporting concepts of reliability. Validity, in this study, is viewed as a social construct that is situational and changeable according to the interactions of human beings and their environment (Crotty, 1998).

Selected findings on health concepts and strategies will be next reported in a qualitative reporting style. The examples chosen for presentation were selected due to the relevance of content and value of information as well as the degree of representativeness of managerial health concepts and strategies.

Research findings: managerial health concepts

Managers defined their concepts of health by referring to aspects of health and well-being through the use of certain keywords that could be clustered using the above described five-step process of content analysis. This study shows that managers mainly refer to physical and mental (encompassing emotional) health concepts or a combination of mental and physical health concepts. Managers, however, do not refer to physical concepts of health only.

The following excerpts serve as selected examples (P1, P9, P20, and P12)[1] in which at least three managers used the same specific keywords to define their individual concepts of health.

P1 asserts that her health concept is highly defined by "feeling energetic/empowered".

> Yeah, no, when you healthy you have energy, ah, you don't feel your body because there is no pain there, you know, don't feel, its like, ah [. . .] no headaches [. . .] the health, they say its, ah [. . .] like, ah [. . .] absence of sickness, ah, but ah, I don't know if this is for this, this, my meditation, this ayurvedic, ah, they have practice they involve the universal consciousness in healing, that your body can heal yourself if your mind is, ah [. . .] right situation, its ah, so, ah [. . .] its not necessary always to have medicine, must believe in [. . .] and I had experience like this, ah, its like they say when you meditate you can relieve pain and, ah [. . .] I experience this, ah, sometimes you wonder how powerful is your brain. You can't believe [laughter]. Yeah, ah, that why this is healthy. And, ah, as long as my brain is functioning, ah, I'm healthy [laughter].

P1 interlinks positive health with "having energy" that, at the same time, decreases body pain and the

feeling of sickness. Her main tool to achieve this feeling of energy and empowerment is (ayurvedic) meditation that interconnects her mental microcosmos with the universal macrocosmos towards achieving health awareness, consciousness, and healing. This manager believes in a higher energetic power emanating from the universe. Her belief and mental power is, therefore, connected to the spiritual and metaphysic energy that supports her self-healing processes and pain relief. She emphasizes her self-healing power that represents her autonomous thinking and acting. This manager is even surprised at the power of her mind with regard to a healthy body feeling, and she believes that she is healthy as long as her mind can relate to the universal energies. The surprise at her high intra-personal power shows her unconsciousness about her inner strength that keeps her healthy. At the end of this quotation, the manager laughs: presumably this laughter is an expression of her awareness of the paradox of her rational thinking and knowledge about the effectiveness of medication on health and the rational way in which she manages her daily routines in the organization to her "irrational" or "spiritual" way of coping with health.

In parallel to the eight statements on "feeling energetic/empowered", eight other managers highlighted health as "being happy" (e.g., P15). The health concepts of "feeling energetic" and "being happy" mostly relate to individual health as well as to strong emotions and metaphoric descriptions of strengths and positiveness. Other managers connected health to work and to "performing well/ working hard". P9 stated:

> When I get energetic [. . .] I work harder [laughter] more, work more, harder, ahm, ahm, I think, ahm [. . .] I'm, I'm more (?), when I feel good, healthy, I, I bring people more together, I'm working more as a team, ahm [. . .] you know, crack the old joke around, play a trick on somebody, just to get them going, loosen up a bit and, ah, I, I think, ah, that all together brings us closer, works more, team [emphasis] more working together. I think we have more results, if we feel healthier and good about ourselves, actually yeah, we, we just get more done, and quicker and more joy, not just doing the job but also enjoying doing the job. Yeah, I think that's basically, yeah.

When feeling healthy, P9's energies flow into her work and she is highly productive, efficient, and effective. Her definition of feeling healthy is very much connected to her output and work performance. She uses her resources of control to manage work, whilst drawing meaning, commitment, and

engagement from her work. When feeling healthy, this manager can be a facilitator of bringing others together to work as a team that, in turn, fosters her feeling of being influential in work situations. Being healthy, she has the strength to socialize and initiate social work encounters and to motivate others. Feeling healthy is directly connected to her managerial abilities of managing, motivating, and initiating team work.Additionally, for this female manager, health is directly connected to self-consciousness, to "feeling good about ourselves". Feeling healthy for her is, therefore, not only necessarily an individual experience but also has a social dimension that is linked to joy. P9's statement is evidence of her interest in both team work and understanding, appreciating and tolerating the work of others and herself within a work team. Within this team, she can enhance the welfare of herself and others within the organization by motivating others, and both initiate teams with her thoughts and creating energies with regard to her ideas. The work is then filled with joy and not just routine. The inner feeling of health is then directly expressed through positive emotions and increased work results.

Some few managers defined health as "absence of sickness, aches and pains" (P20):

> [. . .] I have no aches and pains. That's it [laughter]. So, so, yeah [exclamation, laughter] [. . .] and I'd say, you know, I, my aches and my pains disappear and then I know that I, I feel healthy, so, yeah. And I'm not hungry [laughter].

This manager highlighted that her health concept means being free of pains and aches. She explained that when she is engaged in her hobbies, her aches and pains disappear. She appears to be aware of the contribution her strength and resources (hobbies) render towards managing "ill health". When her mind is involved in activities, she enjoys, she feels healthy and she does not feel hungry. For her, hunger seems to be an indicator of not feeling well. This could lead to the assumption that eating could be a strategy to cope with stress or other feelings or thoughts that are experienced as being unpleasant. Presumably, this female manager, who tries to engage herself in multiple hobbies and activities besides her work, uses all these activities as coping strategies for her "pains and aches". Her pursuits towards self-direction and independent thought and action, in addition to her hobby of flying planes mentioned in other parts of the interview, underline her eagerness to explore the world. It appears, however, that these activities do not fulfil her longing for a meaningful life. She does not seem to feel stable within herself or with regard to society and other

relationships, nor does she appear to be in harmony with herself. This manager does not seem to prioritize personal success through either demonstrating competence according to social standards, or through pleasure, excitement, and novelty in her life.

"Being active" as a concept of health is highlighted by P12:

> You know, like I said to you, it's, ah, ahm, ahm, there are times I do some swimming, right, and ah, and then, very importantly I think, you know what, peace in my meditation, you know, and ah, in, in my religious practice and my beliefs, you know, that has managed to keep me strong and healthy.

Activity for this manager includes physical activity as well as meditation and mental activity. This meditation is bound to his inner harmony and peace and his religious practice and belief. This highlights that stable relationships, safety, and harmony are of highest value to this manager. This manager is very clear about the fact that these four facets of his life keep him strong and healthy and that he can manage his stress through the mentioned activities; however, he admits that he does not feel healthy during this period of his life and cites, as an example, "physical unfitness". P12's health concept is related to the physical aspect; however, it is possible that this interviewee would like to indirectly indicate that his psychological health is not in a desirable state. This may be corroborated by the interviewee mentioning in a different part of the interview that he does not feel well in the organization at the moment as he was asked to re-locate to the branch in which he previously worked. The statement of physical "unfitness" might also be a metaphor for his psychological "unfitness" with regard to his current life situation: He feels that he is not independent in thought and action and does not experience personal success through demonstrating his competences. His feelings towards achievement and self-direction in, and for this organization are low. This manager does not feel supported, cared for, rewarded, or praised by the organization with regard to his competences.

After having gained insight into the construction of managerial health by the selected managers, the following section will discuss the findings with regard to the literature.

Discussing managerial health concepts

The concepts of managerial health in the selected organization are mainly bound to mental as well as both physical and mental concepts of health. Mental

concepts include "energetic and empowered" as well as "being happy" and "performing well/working hard". Health is, at the same time, primarily defined by personal and individual well-being. A small number of managers emphasized both integrated physical and mental health concepts such as "absence of sickness and no pain", "being active", and "being relaxed". Individual managers emphasized "being positive", "not being tired", and "sleeping well" as being included in the health concept.

Managerial health concepts were highly individualistic and hardly related to the work environment and the organization. Only a few managers related health concepts to work performance and work stress levels that are to be considered and could be interpreted in the way that health is viewed as a personal issue that is not particularly interlinked with health. Health concepts did hardly include aspects of spiritual, environmental, and social health concepts.

However, both the lifestyle and environment of managers strongly influence their managerial health concepts, as stated in the literature (Botha & Brand, 2009). Managerial health is necessarily not only connected to the work environment and managerial performance but also to leisure, private relationships, and the general ability to be active and relaxed. However, these aspects are hardly mentioned by the managers, and well-being and health do not seem to be of primary priority to managers in organizational settings, as already stated by Rantanen, Lehtinen, and Savolainen (2004).

As promoted by the WHO (1948), managers did not reduce health to physical fitness and absence of sickness. Rather, managers resorted to a proactive health approach that includes a complex whole of physical, mental, emotional, and spiritual aspects (Stellman, 1998), in addition to social, intellectual, and occupational aspects (Davies, Davies, & Heacock, 2003), even though these latter aspects are not of highest priority in managerial health concepts. Generally, managers often defined health in terms of "wellness" (Freidl, 2004) that includes aspects of well-being, fitness, and happiness. The healthy life style behaviour is important and managers mentioned aspects of wellness, as promoted by Rothmann and Rothmann (2006), including that of being energetic, motivated, healthy, productive, and committed to the organization and its goals. Managers felt that a "balanced" life is important to being healthy. Stress as a factor towards reducing health and well-being in managers was mentioned within the concepts of health, and the strategies to stay healthy included the reduction of stress, as contended by Rothmann (2005). However, the topic of work stress was not as relevant for the interviewed

managers as referred to in the huge amount of research that has already been carried out on occupational stress (e.g., Van der Merwe, 2005).

The data presented show that managers' concepts of health are as non-scientific and as "lay", as can be found in the general population. They present individual concepts of health and well-being that they re-construct during the interviews in an extraordinary way. Managers talk openly about their spiritual practices, about their belief, their meditation, and thereby refer to their spiritual and mental health in a relatively emotional way. They also mention physical health concepts; however, these concepts are mostly interlinked with mental health concepts. Most of the managers refer to health as a positive concept of well-being, and only a few managers view health in a "pathogenic" way as "absence of sickness". They rather refer to a "salutogenic" health concept that focuses on their personal and social resources. Health is interlinked with individual (life) energy and happiness rather than with work performance.

Generally, managers portray a high SOC (1979), particularly with regard to comprehending concepts of self, well-being, and health in the work context. This foundational comprehensibility is combined with a high sense of manageability and health-enforcing practices such as meditation and swimming. Finally, managers show a high sense of meaningfulness in their life with regard to belief and religion and refer to the social dimension of health and well-being. These abilities support managers to feel in control of challenging situations and provide them with a sense of well-being and meaning in their life. The health concepts of managers are very much supported and defined by a positive outlook on life and by a high degree of comprehensibility, manageability, and meaningfulness, which contributes to managerial health and well-being.

These health concepts influence managerial work attitudes in so far that particularly South African managers—as narrated by German expatriates—try to finish their work within working hours, try to create and maintain personal relationships at work, stick to their break times and try to be active within their breaks to refill their energy levels, to feeling happy and to being able to enjoy their social life and (family) relationships. At the same time, German expatriates also highlight that work in the South African subsidiary is more relaxing and healthy than in Germany due to these particularly behavioural patterns and attitudes. Generally, managers in the selected organization feel well and enjoy working for the company as they feel that "things happen in a predictable manner" (P11). Managers feel that they can cope with the challenges within the South

African society. On the one hand and on the other hand, these challenges make sense to them and they are highly motivated to resolve any kind of occurring challenges or difficulties they experience at work.

Managers can make cognitively sense of their workplace and perceive its stimulation as clear, ordered, structured, consistent, and predictable. They experience their work as bearable and they see themselves as being able to cope with it (Strümpfer, 1990). Finally, they feel that they can maintain their personal balance (Geyer, 1997), despite challenging situations.

Managers speak openly about various aspects of their health concepts such as belief and personal values and activities. This might be influenced by the post-Apartheid South African society that highlights the tolerance towards and the freedom of "being different" and of individual attitudes. However, particularities of managers of different cultures cannot be found within the dataset. White, as well as Indian, Black, and Coloured managers refer to mental and spiritual health concepts. However, expatriates rather talk about physical than mental and spiritual health concepts.

Although several managers refer in the interviews to the financial crises, the new work pressure, and their insecurity towards the future work situation, managers seem to be able to activate several resources to cope with the challenges and to feel relatively well. This might be also due to the fact that they work in an international organization that makes them feel more secure than in local organizations.

In the following, managerial strategies to keep managers healthy will be presented.

Research findings: health-keeping strategies

The findings on health concepts lead to the second research question, which strategies managers use to maintain, respectively, their health. Health-keeping strategies are clustered according to mental and physical health concepts.

Findings show that managers' strategies to keep healthy are mainly based on mental, physical, and/or both mental and physical health concepts. Spirituality is, for example, only mentioned twice.

Thirteen out of 27 interviewees feel that "physical exercise" is the best way to keep healthy. P3 asserted:

I've started, some weeks ago, to do some, ahm, some gym, but I have to say I don't feel better, since I started. My wife convinced me that we have to do something especially here in South Africa where you always have to use your car. And there's no possibility to walk through a park or do whatever else. We, we bought a, a home trainer

and every morning I do twenty minutes exercise on the home trainer. [. . .] So, home training, reduced consume of alcohol, food is an issue and we started to playing golf, not because everyone does it here. I've realized, or we've realized, my wife and me, that it's excellent in order to clear your mind because you're not fighting against each other. Everyone plays his own game and you have the opportunity to walk two or three hours, because unfortunately you are not able to walk in South Africa and, ah, that is, especially during the weekend I prefer to [. . .] leisure, time and that's really excellent.

P3 related his eagerness to keep healthy under conditions that are specific to South Africa. Most important is the fact that this manager always discusses this key question with his wife. The couple is deeply concerned about security and safety in the country: "where you always have to use your car. And there's no possibility to walk through a park or do whatever else". The manager has just moved to South Africa and still needs to adjust to the new living conditions and life style that have presented a major change and challenge in his life. This manager strongly emphasized the importance of safety, harmony, and stability towards feeling well and healthy. He added that "unfortunately you are not able to walk in South Africa" and that this reduces his well-being and health. These living conditions resulted in him having to resort to a gym; however, his health did not improve and the manager subsequently decided to buy a home trainer. In addition to exercising 20 min each morning, the manager further reduced his alcohol consumption. This has resulted in improved sleeping patterns and a higher degree of relaxation. Together with his wife, he explored new hobbies such as playing golf. This allows both partners to play their own game without fighting with each other, in addition to undertaking a 3-h walk within a gated, safe environment. Health for this manager is connected to sport, spending time with his wife, and adjusting nutrition.

Nine of the 27 managers mentioned nutrition as a strategy for keeping healthy. P4 stated:

I make sure that I, that I eat regularly at work and, and, ahm, I drink lots of fluid when I can and, ah, I try to avoid conflict by doing, working as hard as possible. Its, ah, but I don't make a, a, conscious effort to try and stay healthy at the workplace. I think I'm too busy for that [exclamation, laughter].

Frankly speaking, P4 pointed out that "I don't make a conscious effort to try and stay healthy at the workplace". He talked about his principles regarding

nutrition, emphasizing that he eats regularly at work. Additionally, he values the volume of fluids he consumes. P4 then diverted to another problem without making clear why. "I try to avoid conflict by doing"—the manager presumably works hard and uses the lack of spare time as an argument to justify not training his consciousness towards healthy nutrition. The sequence of his unconscious reasons for not dealing with nutrition seems to be the following: There is conflict in my work environment. I want to avoid conflict, therefore, I work hard. If I work hard, I am too "busy" to reflect on my health. That causes my lack of effort to "try and stay healthy at the workplace". His laughter probably indicates that he somehow feels insecure whilst talking about this issue. He does not experience his work environment as structured or consistent and he feels that he cannot readily influence and manage work or conflict situations, thereby resulting in him working hard to avoid conflict. This quotation corresponds with his wish to seek harmony and stable relationships.

Eight managers mentioned a "positive outlook" as being important to staying healthy. P19 revealed:

Ah [exclamation] be positive [laughter], be positive, smile, share a smile with those who don't have one, ahm, have fun, ah [...] and try to instill a positiveness in those that are not feeling so positive. I, I get great joy out of, probably my welfare sort of feeling. I like to, to look after people, to nurture them, so in, when times are tough and I have a feeling that people need me I probably become more positive. Ahm, that's my personal strategy.

P19 exclaimed and laughed whilst talking about the contribution of her positive outlook towards keeping her healthy. The outer appearance of an attracting smile and the sharing of a smile indicate that she highly values the concept of sharing positive mimics, gestures, and attitudes with others. This manager believes in positive thinking and its positive impact. Thus, in her social environment, reciprocity plays a prominent role. Following her intention, she is active in installing positiveness in people who tend to have a negative feeling and/or outlook on life and who have less fun then she does. P19 primarily looks after people who need her, nurturing them and contributing to their welfare. In return, her positive feelings further increase when she perceives other people's need for her. She stated that other people's welfare is highly important to her. She showed that she experiences the organization as less responsible than she would like to see it with regard to reflective

attitudes, having a guiding philosophy and being socially responsible.

Keeping healthy through "leisure" activities is highly important, as explained by P20:

I, I have a hobby [...] in that I, I play music, okay, and my biggest stress relief is my music. I go twice a week for lessons and [...] that gives me quite a lot off stress relief. The other thing I do, my body tells me when I'm stressed. My back gets sore, my shoulder gets sore, I go to the gym. So if I don't go to the gym my body's going to be sore. So I actually, I actually manage my health in, I would say, listening to my body, not always, but I, I'd, I mean eventually you just have to go to the gym and sort it out. They're after work which means I have to slip away here on time which is very difficult, but I really, really try not miss the music because that [...] that is, that is tremendous stress relief, I mean you are so focused on something so different to anything else that your mind cannot [...] it cannot listen to what it's, it's, it's rolling around here at work. I mean if you just sing a song, sing a hymn, you cannot sing that song or hymn and your mind is somewhere else. You can't do that. Ah, I play the violin and the piano.

Managerial stress relief leads this manager to play music and to take lessons in playing the violin and the piano. The main emphasis lies on her dialogue with her body. As soon as she is overstressed, her body exhibits sore shoulders or a sore back as a warning that she has to react, go to a gym, or simply exercise. She stated: "but I really, really try not miss the music because that [...] that is, that is tremendous stress relief". Instead of taking anti-stress medications like other managers do, this English-speaking manager is convinced that playing music or singing songs basically works as a remedy to distract her from the "rolling around here at work".

Discussing health-maintaining strategies

The data on health strategies show that managers—with regard to their health maintaining strategies—mainly refer to physical aspects, mental, or both, physical and mental concepts of health and well-being, physical health (sports and exercise) seems to be highly prioritized by most of the managers to keep healthy and at the same time is related to aspects of mental and a few to spiritual health. Managers refer to physical activities; however, they also mention behavioural aspects of themselves and their colleagues, health-keeping strategies, communication, and

the influence of the environment, here the organizational culture, on their health.

Managers referred to their health strategies by narrating a broad variety of personal and individual strategies. As health is bound not only to concepts of physical, but also to mental and spiritual health, they also mentioned strategies that mainly relate to these three categories, whereby spiritual health was hardly mentioned.

Physical exercise, a balanced diet, a positive outlook, and good leisure time as well as specific strategies to keep calm, approach difficult situations in a spiritual way, keep distance and create positive communication proved individual strategies for staying healthy. Most of the strategies to keep healthy are not related to the organization, work, work relationships, or organizational culture or structure.

The organization selected for this study does not appear to fulfil the objectives suggested by Bedner (2001) to provide every person within the organization with increasing self-determination for their health towards acquiring comprehensive physical, mental, and social well-being. Simultaneously, the connection of organizational health promotion to salutogenesis, as emphasized by Noack (1996a, 1996b), has not been implemented within the organization studied.

The in-depth data on health-maintaining strategies in managers support the findings that managers seem to have a high sense of comprehensibility, manageability, and meaningfulness. Managers have a positive attitude towards their health and their health concepts and are aware of strategies to keep healthy. This shows that they have a salutogenetic approach to health: they know how they can maintain or even increase their health; they are aware of their health, their resources, and what keeps them healthy (comprehensibility); they have already applied health-maintaining activities (manageability), mind sets, and spiritual ways to cope with health challenges (comprehensibility and meaningfulness). Finally, these health strategies make sense to them in terms of keeping them healthy, making them feel well at work, and supporting them to fulfil their "purpose in life" (P12) (comprehensibility, manageability, and meaningfulness).

Conclusion

The aim of this article was to assess managerial concepts of health and well-being in a selected international organization in South Africa as well as managers' strategies to keep healthy to provide new insights and information of South African and international managers working in an international organizational context in South Africa.

Findings demonstrate that the managerial concepts of health and strategies mainly refer to physical and mental health concepts and health-keeping strategies. There are several overlaps of managerial health concepts with regard to the recent literature presented above on health and well-being.

Managers view health and the strategies to stay healthy as being of their individual responsibility. They do not hold the organization as being responsible for their health.

Managers in this selected organization generally seem to have a rather salutogenetic than a pathogenic approach to health: health concepts as well as strategies support the assumption that managers have a relatively high degree of comprehensibility, manageability, and meaningfulness when it comes to health concepts and the related health strategies. The portrayed comprehensibility, manageability, and meaningfulness of managers probably relate to a high degree of SOC which at the same time promote health and well-being.

The salutogenetic approach of managers in their work context is strongly interlinked with their positive outlook on their work and life, on their positive valuing of work–life balance as well as on the "relaxed work atmosphere in which managers feel they can perform well and work hard without feeling stressed" (P24). Managers particularly experience the structured work schedule, their relatively high amount of time for socializing and family relationships, as well as the managing of fixed break times at breakfast and lunch as contributing to their positive health and well-being as managers in the organization.

Particularly, German expatriates highlight that the friendly work atmosphere, the interesting and friendly social relationships across the cultural divide, and the relaxed work situation generally within the company impact positively on their well-being and on their work and work–life balance. In comparison to Germany, expatriates do have more time to spend with their families. They do also have more leisure time and more social contacts within the organizations, which they experience as supportive and thereby contributing to their health and well-being.

It can be concluded that a foundational salutogenetic perspective of managers contributes to "lay", clear, positive, and powerful concepts of health that are defined by the managers as consisting of physical, mental, and spiritual health aspects. These are tightly interlinked with their individual health-maintaining strategies. These lead to and are enforced by a supportive, friendly, and relaxed organizational atmosphere and culture. The international automotive organization of this study seems to have managed well in becoming one of the most

successful international automotive organization in South African and the Southern African region and at the same time promoting individual health and well-being in managers by promoting salutogenesis—through structured work times, transparent communication processes, clear guidelines, functioning support structures, a friendly work atmosphere—within the organizational context.

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Notes

1. Interviews were classified P1–P27: P1 means interview person number 1, etcetera..

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