

PHYSICAL WELLNESS AND EMPLOYEE PERFORMANCE AMONG HEALTHCARE WORKERS IN RIVERS STATE, NIGERIA

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Abstract

This study examined the relationship between physical wellness and employee performance among healthcare workers in Rivers State, Nigeria. The increasing physical demands of healthcare service delivery, prolonged working hours, and exposure to occupational hazards have heightened the need for workplace wellness initiatives that promote employees' physical health and enhance job performance. Physical wellness was examined using physical health support and physical activity support, while employee performance was measured using task performance and contextual performance. The study was anchored on the Job Demands-Resources (JD-R) Theory. A correlational research design was adopted. The study population comprised 560 healthcare workers drawn from 10 selected healthcare organisations in Rivers State, and a sample size of 226 was determined using the Krejcie and Morgan (1970) sample size determination table. A total of 214 out of the 226 questionnaires administered were successfully retrieved and analyzed. Data were analyzed using descriptive statistics and the Pearson Product Moment Correlation Coefficient (PPMCC) at a 0.05 level of significance. The findings revealed that physical health support and physical activity support each had strong positive and statistically significant relationships with task performance and contextual performance. The study concludes that improved physical wellness significantly enhances employee performance among healthcare workers by increasing their effectiveness in carrying out assigned duties and encouraging positive workplace behaviours. The study recommends that healthcare organisations strengthen occupational health services, implement comprehensive workplace wellness and physical activity programmes, integrate physical wellness into human resource policies, and periodically evaluate employee wellness initiatives to sustain high levels of employee performance and quality healthcare service delivery.

Keywords: Physical Wellness, Physical Health Support, Physical Activity Support, Employee Performance, Healthcare Workers.

INTRODUCTION

Healthcare workers represent a critical component of healthcare delivery systems because their knowledge, physical capacity, emotional stability, and commitment directly influence the quality of patient care. The demanding nature of healthcare work, characterized by long working hours, occupational pressure, exposure to health risks, and physically intensive tasks, makes employee wellness an important concern for healthcare organisations. In recent years, attention has shifted from traditional approaches that focus only on employee absence and illness management to broader wellness strategies aimed at maintaining employees' physical health and improving workplace outcomes (World Health Organisation [WHO], 2020).

Physical wellness refers to organisational and individual practices that promote healthy functioning, energy, and the ability of employees to effectively perform their work responsibilities. In healthcare settings, physical wellness may involve access to health support services, preventive healthcare initiatives, and opportunities that encourage physical activity and healthy lifestyles. The physical demands associated with healthcare professions make wellness support particularly important

because fatigue, poor health conditions, and physical exhaustion may reduce employees' ability to deliver effective services (Maben et al., 2020).

The importance of physical wellness has become more evident following the challenges experienced by healthcare workers during and after the COVID-19 pandemic. Healthcare professionals experienced increased workload, fatigue, occupational risks, and psychological strain, highlighting the need for organisational interventions that protect employee health and sustain performance. According to the International Labour Organisation (ILO, 2022), workplace health promotion and occupational safety practices are essential components of decent work because they enhance employee capacity, reduce work-related health risks, and support productivity.

Employee performance represents the extent to which employees effectively execute assigned responsibilities and contribute positively to organisational goals. In healthcare organisations, employee performance extends beyond completing routine duties to include the quality of service delivery, cooperation with colleagues, professional commitment, and the ability to respond effectively to changing workplace demands. Task performance reflects employees' effectiveness in carrying out core job responsibilities, while contextual performance involves behaviours that support the wider organisational environment, such as teamwork, cooperation, and helping behaviours (Koopmans et al., 2021).

Although healthcare organisations continue to invest in improving service delivery, inadequate attention to employees' physical wellness may undermine performance outcomes. Healthcare workers experiencing fatigue, poor physical health support, or limited opportunities for physical activity may encounter reduced energy levels, decreased concentration, and lower effectiveness in performing their duties. Therefore, understanding how physical wellness influences employee performance is important for developing sustainable human resource practices within healthcare organisations.

In Rivers State, Nigeria, healthcare workers operate within an environment characterized by increasing healthcare demands, resource limitations, and challenging working conditions. Despite the essential role of these employees, there is limited empirical evidence regarding how physical wellness initiatives influence their performance outcomes. This study therefore examines the relationship between physical wellness, measured through physical health support and physical activity support, and employee performance, measured through task performance and contextual performance, among healthcare workers in Rivers State, Nigeria.

Statement of the Problem

Healthcare organisations depend heavily on the competence and effectiveness of healthcare workers to achieve quality healthcare delivery. However, healthcare workers in Nigeria continue to experience workplace challenges such as excessive workloads, demanding schedules, occupational hazards, and physical exhaustion, which may negatively influence their ability to perform effectively. The physical demands associated with healthcare responsibilities require organisations to provide adequate wellness support that enables employees to maintain good health and sustain optimal performance.

Despite growing recognition of employee wellness as an important human resource management practice, many healthcare organisations still focus more on patient outcomes while giving limited attention to employees' physical health needs. Inadequate physical health support, limited opportunities for physical activities, and insufficient workplace wellness initiatives may contribute to fatigue, reduced work effectiveness, and declining employee contribution.

Existing studies have largely examined healthcare worker stress, burnout, and psychological wellbeing, particularly after the COVID-19 pandemic, but fewer studies have specifically investigated the relationship between physical wellness dimensions and employee performance outcomes. This creates a knowledge gap regarding whether physical health support and physical activity support can enhance task performance and contextual performance among healthcare workers.

Furthermore, healthcare organisations in Rivers State face unique operational challenges, yet empirical evidence on how physical wellness influences employee performance within this context remains limited. Without adequate understanding of this relationship, healthcare managers may lack evidence-based guidance for designing wellness interventions that improve workforce effectiveness. Therefore, this study seeks to examine the relationship between physical wellness and employee performance among healthcare workers in Rivers State, Nigeria.

Research Objectives

The main objective of this study is to examine the relationship between physical wellness and employee performance among healthcare workers in Rivers State, Nigeria.

The specific objectives are to:

- i. Examine the relationship between physical health support and task performance among healthcare workers in Rivers State, Nigeria.
- ii. Determine the relationship between physical health support and contextual performance among healthcare workers in Rivers State, Nigeria.
- iii. Assess the relationship between physical activity support and task performance among healthcare workers in Rivers State, Nigeria.
- iv. Investigate the relationship between physical activity support and contextual performance among healthcare workers in Rivers State, Nigeria.

Research Questions

The study seeks to answer the following questions:

- i. What is the relationship between physical health support and task performance among healthcare workers in Rivers State, Nigeria?
- ii. What is the relationship between physical health support and contextual performance among healthcare workers in Rivers State, Nigeria?
- iii. What is the relationship between physical activity support and task performance among healthcare workers in Rivers State, Nigeria?
- iv. What is the relationship between physical activity support and contextual performance among healthcare workers in Rivers State, Nigeria?

Research Hypotheses

The following null hypotheses will guide the study:

- H01: Physical health support has no significant relationship with task performance among healthcare workers in Rivers State, Nigeria.
- H02: Physical health support has no significant relationship with contextual performance among healthcare workers in Rivers State, Nigeria.
- H03: Physical activity support has no significant relationship with task performance among healthcare workers in Rivers State, Nigeria.
- H04: Physical activity support has no significant relationship with contextual performance among healthcare workers in Rivers State, Nigeria.

Conceptual Framework

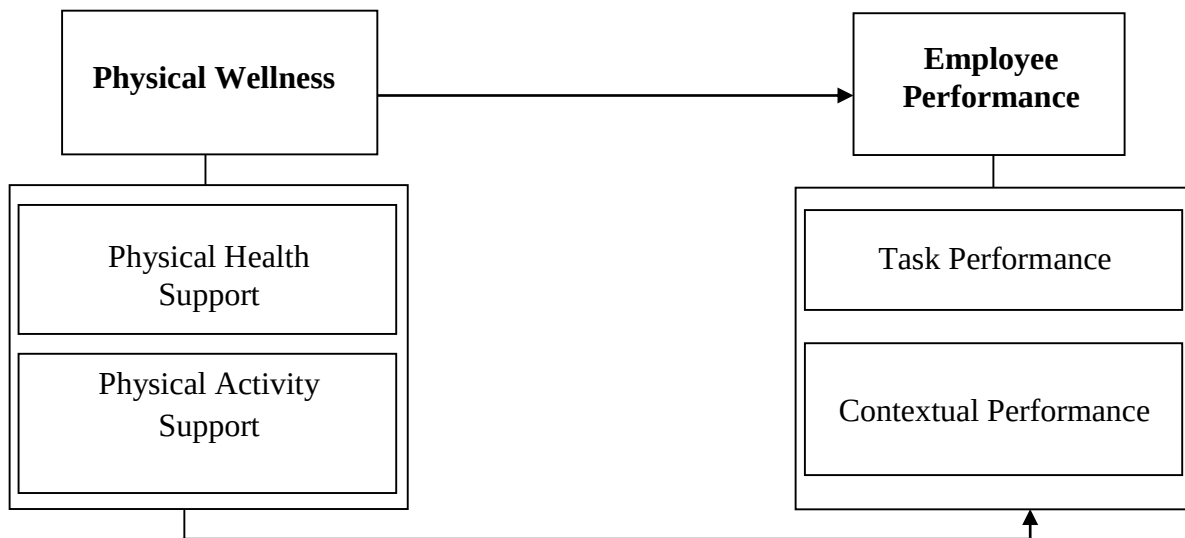


Figure 1: Conceptual Framework Showing the Relationship between Physical Wellness and Employee Performance among Healthcare Workers in Rivers State, Nigeria

Source: The dimensions of Physical Wellness (Physical Health Support and Physical Activity Support) were adapted from the workplace health promotion frameworks of the World Health Organisation (2020) and supported by International Labour Organisation (2022) and Oakman et al. (2020). The measures of Employee Performance (Task Performance and Contextual Performance) were adapted from Koopmans et al. (2011) and supported by Koopmans et al. (2021) and Sarti et al. (2022).

LITERATURE REVIEW

Conceptual Review

Concept of Physical Wellness

Physical wellness is a key dimension of employee wellbeing that emphasizes maintaining good physical health through healthy lifestyles, preventive healthcare, regular physical activity, and organisational support. It enables employees to perform their duties effectively while reducing illness, fatigue, and work-related injuries. Beyond the absence of disease, physical wellness includes workplace initiatives that promote healthy behaviours and improve employees' quality of life (World Health Organisation [WHO], 2020).

Organisations increasingly recognize that physically healthy employees are more productive, experience lower absenteeism, and contribute more effectively to organisational success. Consequently, many employers implement workplace wellness programmes such as preventive healthcare services, health education, fitness opportunities, and occupational safety measures to enhance employees' wellbeing (International Labour Organisation [ILO], 2022).

Physical wellness is particularly important in healthcare organisations, where employees routinely perform physically demanding tasks under challenging conditions. Long working hours, prolonged standing, patient handling, and emergency responsibilities require healthcare workers to maintain good physical health and stamina to ensure effective service delivery (Hall et al., 2021). The COVID-19 pandemic further reinforced the importance of protecting healthcare workers' health through stronger workplace health policies and wellness initiatives (WHO, 2021). Accordingly, this study conceptualizes physical wellness through physical health support and physical activity support.

Physical Health Support

Physical health support refers to organisational efforts to improve employees' physical health through preventive healthcare services, occupational health programmes, medical assistance, health education, and safe working conditions. Such initiatives help prevent illness, reduce workplace hazards, and improve employees' overall health (WHO, 2020).

Healthcare organisations provide physical health support through medical examinations, immunization programmes, occupational health services, ergonomic work environments, and policies that promote adequate rest and recovery. These interventions reduce workplace injuries, improve physical functioning, and enhance employees' ability to perform their responsibilities effectively (ILO, 2022).

Employees who perceive strong organisational support for their health are generally more motivated, satisfied, and committed to their work, whereas inadequate health support may increase absenteeism, physical exhaustion, and reduced work effectiveness (Sorensen et al., 2021). For healthcare workers, maintaining good physical health is essential for ensuring quality patient care and sustained job performance.

Physical Activity Support

Physical activity support refers to organisational initiatives that encourage employees to engage in regular exercise and maintain healthy lifestyles. These initiatives include workplace fitness programmes, wellness campaigns, exercise facilities, walking programmes, and flexible work arrangements that support physical activity. Regular physical activity improves cardiovascular health, physical fitness, and overall wellbeing (World Health Organisation, 2022).

Organisations increasingly incorporate physical activity into workplace wellness programmes because physically active employees generally demonstrate higher energy, improved concentration, lower absenteeism, and greater productivity. Although healthcare workers perform physically demanding tasks, these activities do not necessarily provide the benefits of structured exercise, making organised physical activity programmes essential (Hall et al., 2021).

Research shows that workplace physical activity programmes improve physical fitness, reduce fatigue, enhance stress management, and strengthen employee performance while promoting teamwork and healthier organisational cultures (Pronk & Kottke, 2019).

Concept of Employee Performance

Employee performance refers to employees' effectiveness in carrying out assigned responsibilities and contributing to organisational goals. It includes behaviours and outcomes that support organisational effectiveness through the application of knowledge, skills, and abilities. Modern perspectives view employee performance as comprising both formal job responsibilities and behaviours that support the work environment (Koopmans et al., 2011).

In healthcare organisations, employee performance directly affects patient safety, service quality, organisational reputation, and healthcare outcomes. Healthcare professionals are expected to deliver timely, accurate, and patient-centred care while maintaining high professional standards (World Health Organisation [WHO], 2022).

Employee performance extends beyond completing assigned duties to include teamwork, cooperation, adaptability, and behaviours that promote organisational effectiveness (Koopmans et al., 2011). It is influenced by several organisational and individual factors, including leadership, organisational support, employee wellbeing, and physical wellness. Healthy employees generally

possess higher energy, better concentration, and lower absenteeism, enabling them to perform more effectively (WHO, 2020). In this study, employee performance is measured using task performance and contextual performance.

Task Performance

Task performance refers to employees' effectiveness in performing the core duties formally required by their jobs. It reflects how well employees apply their professional knowledge and skills to accomplish assigned responsibilities efficiently and accurately (Koopmans et al., 2011).

Among healthcare workers, task performance includes delivering quality patient care, administering treatments correctly, maintaining patient records, and complying with professional standards. Employees with good physical health are more capable of sustaining productivity, minimizing errors, and maintaining consistent work quality than those experiencing illness or physical fatigue (Hall et al., 2021). Workplace wellness programmes therefore improve task performance by reducing absenteeism and enhancing employees' work capacity (Sorensen et al., 2021).

Contextual Performance

Contextual performance refers to voluntary behaviours that support the organisational and social environment beyond employees' formal job responsibilities. These behaviours include helping colleagues, cooperating with team members, following organisational rules, and participating in activities that improve organisational effectiveness (Koopmans et al., 2011).

Healthcare delivery depends heavily on teamwork and collaboration. Employees who willingly assist colleagues and maintain positive working relationships improve communication, patient outcomes, and organisational effectiveness (West et al., 2020). Employees with better physical health are also more likely to demonstrate positive workplace behaviours because they possess greater energy and are less affected by physical exhaustion (WHO, 2020).

Physical Wellness and Employee Performance

Physical wellness is closely associated with employee performance because healthy employees generally have greater physical capacity, higher energy levels, better concentration, and lower absenteeism. Organisations increasingly regard employee wellness as a strategic investment that improves productivity and service quality (ILO, 2022).

Within healthcare organisations, physical wellness is particularly important because healthcare workers perform physically demanding tasks requiring stamina, mobility, and sustained concentration (Hall et al., 2021). Physical health support improves employees' health through preventive healthcare and occupational health services, while physical activity support promotes healthy lifestyles and physical fitness (WHO, 2022).

Improved physical wellness enhances task performance by increasing employees' ability to perform assigned duties efficiently and accurately. It also strengthens contextual performance by encouraging cooperation, helping behaviour, and commitment beyond formal job responsibilities (Sorensen et al., 2021). Consequently, healthcare organisations that invest in employees' physical wellness are more likely to improve employee performance, patient safety, service quality, and overall organisational effectiveness.

Theoretical Framework

Job Demands-Resources (JD-R) Theory

The Job Demands-Resources (JD-R) Theory, developed by Demerouti, Bakker, Nachreiner, and Schaufeli (2001), explains how workplace characteristics influence employee wellbeing and performance. The theory argues that every occupation comprises job demands, which require

sustained physical or mental effort, and job resources, which help employees achieve work goals, reduce job demands, and promote growth and development (Bakker & Demerouti, 2017).

According to the theory, excessive job demands without adequate resources lead to fatigue, stress, burnout, and poor performance, whereas sufficient organisational resources improve employees' motivation, resilience, wellbeing, and effectiveness (Bakker & Demerouti, 2017). In healthcare organisations, employees face heavy workloads, long working hours, shift duties, patient care responsibilities, and occupational hazards. Therefore, resources such as physical health support and physical activity support are essential for maintaining employees' physical capacity and improving job performance (Demerouti et al., 2021).

Physical health support, including occupational healthcare services, preventive medical programmes, and workplace health promotion, helps employees maintain good health despite demanding work conditions. Likewise, physical activity support, through workplace fitness programmes and exercise opportunities, improves employees' energy levels, physical functioning, and resistance to fatigue. These resources enhance both task performance and contextual performance by enabling employees to perform effectively and contribute positively to organisational goals. Recent evidence also confirms that job resources remain strong predictors of employee motivation and performance (Bakker & de Vries, 2021).

Social Exchange Theory (SET)

Social Exchange Theory (SET), proposed by Blau (1964), explains workplace relationships as reciprocal exchanges between employees and organisations. The theory suggests that employees who perceive genuine organisational concern for their wellbeing are more likely to reciprocate with positive attitudes and behaviours that enhance organisational performance.

In healthcare organisations, physical wellness initiatives such as occupational health services, medical examinations, workplace fitness programmes, and health promotion activities demonstrate organisational support for employees' wellbeing. Such support encourages employees to exhibit greater commitment, cooperation, and improved job performance (Cropanzano et al., 2017). Employees who perceive higher organisational support are also more likely to reciprocate through positive work behaviours and stronger performance (Kurtessis et al., 2017).

Although both the Job Demands-Resources Theory and Social Exchange Theory explain the relationship between physical wellness and employee performance, this study adopts the Job Demands-Resources (JD-R) Theory as its principal theoretical foundation. The theory is most appropriate because healthcare workers operate in physically demanding environments that require adequate organisational resources to sustain effective performance.

The Job Demands-Resources (JD-R) Theory was adopted because physical wellness dimensions such as physical health support and physical activity support serve as job resources that help healthcare workers maintain good health, reduce fatigue, improve resilience, and enhance task and contextual performance. The theory has been widely applied in occupational health, employee wellbeing, and organisational performance research (Demerouti et al., 2001; Bakker & Demerouti, 2017; Bakker & de Vries, 2021).

Empirical Review

Hall et al. (2021) conducted a systematic review on healthcare workers' wellbeing, burnout, and patient safety across several countries. The review found that employees with better physical and psychological wellbeing demonstrated higher work effectiveness, improved patient care, and lower

error rates. However, the study focused on burnout and patient safety rather than specific dimensions of physical wellness such as physical health support and physical activity support.

Ugwu et al. (2024) examined the effects of day and night shift work on the wellbeing of 387 healthcare workers in Nigeria. The study found that shift work significantly affected employees' physical wellbeing, fatigue, and overall health. Although the findings highlighted the importance of employee wellbeing, the study did not directly examine employee performance.

Aust et al. (2024) reviewed organisational interventions aimed at improving healthcare workers' wellbeing. Their findings revealed that workplace wellness programmes enhanced employee wellbeing, reduced stress, and improved organisational functioning. However, the study emphasized mental wellbeing more than physical wellness.

Similarly, Desai et al. (2024) investigated the effect of a six-week Heartfulness meditation programme among healthcare professionals. The study reported significant improvements in employee wellbeing and work engagement but focused mainly on psychological wellbeing rather than physical wellness.

A recent experimental study published in the Journal of Functional Morphology and Kinesiology found that brief workplace physical activity sessions significantly improved healthcare workers' attention and executive functioning, indicating that physical activity can enhance work performance through improved cognitive functioning.

In Ghana, a study published in the Asian Journal of Business and Accounting found that employee wellbeing significantly improved employee performance among public hospital workers and mediated the relationship between supportive workplace practices and performance.

In Nigeria, Onunwor (2023) examined workplace wellness programmes and employee performance among employees of the Nigerian Agip Oil Company in Port Harcourt. The study found that workplace wellness initiatives, including fitness centres and medical services, significantly improved employee performance. However, the study focused on the oil and gas sector rather than healthcare organisations.

The reviewed studies consistently showed that workplace wellness positively influences employee wellbeing, engagement, and performance (Hall et al., 2021; Aust et al., 2024; Desai et al., 2024). They also emphasized that organisational support for employee health contributes to improved work effectiveness.

Previous studies largely focused on general wellbeing, burnout, or psychological wellbeing rather than physical wellness measured through physical health support and physical activity support. Methodologically, most adopted systematic reviews, experiments, or structural equation modelling, with limited use of correlational survey designs employing Pearson Product Moment Correlation (PPMC). Geographically, most studies were conducted outside Nigeria, while Onunwor (2023) focused on the oil and gas sector. Consequently, evidence on the relationship between physical wellness and employee performance, particularly task performance and contextual performance, among healthcare workers in Rivers State remains limited, justifying the present study.

METHODOLOGY

This study adopted a correlational research design to examine the relationship between physical wellness and employee performance among healthcare workers in Rivers State, Nigeria. The design was considered appropriate because it enabled the determination of the nature, strength, and

direction of the relationship between physical health support, physical activity support, task performance, and contextual performance without manipulating the study variables.

The study population comprised 560 healthcare workers drawn from ten purposively selected healthcare facilities in Rivers State, Nigeria. The selected facilities included public and private healthcare institutions providing primary, secondary, and tertiary healthcare services. The ten facilities were purposively selected to ensure adequate representation of the healthcare sector in Rivers State while keeping the study manageable in terms of time, cost, and accessibility. The inclusion of healthcare facilities with different ownership structures, service levels, and organisational characteristics enhanced the representativeness of the study, reduced institutional bias, and improved the applicability of the findings across healthcare organisations in the state. The population comprised both management and non-management healthcare personnel, including medical doctors, nurses, pharmacists, medical laboratory scientists, physiotherapists, radiographers, administrative staff, and other allied healthcare professionals because they are directly involved in healthcare service delivery and are exposed to workplace health and wellness conditions. The sample size was determined using the Krejcie and Morgan (1970) sample size determination table. Based on a population of 560, a sample size of 226 respondents was selected.

A stratified random sampling technique was employed by first classifying respondents into management and non-management staff. Thereafter, simple random sampling was used to proportionately select respondents from each stratum, ensuring adequate representation and minimizing sampling bias.

Data were obtained from both primary and secondary sources. Primary data were collected using a structured questionnaire, while secondary data were sourced from textbooks, peer-reviewed journal articles, conference proceedings, government publications, and other relevant scholarly materials. The questionnaire served as the principal instrument for data collection and consisted of two sections. Section A elicited respondents' demographic information, while Section B contained items measuring physical health support, physical activity support, task performance, and contextual performance using a five-point Likert scale ranging from Strongly Agree (5) to Strongly Disagree (1).

The instrument was subjected to face and content validation by experts in Management and Research Methodology to ensure the clarity, relevance, and adequacy of the measurement items. Reliability was established using the Cronbach's Alpha technique based on a pilot study conducted outside the study area and analyzed with SPSS. A reliability coefficient of 0.70 or above, as recommended by Nunnally and Bernstein (1994), was considered acceptable.

The questionnaires were administered personally with the assistance of trained research assistants to improve the response rate and ensure accurate completion of the instrument. The independent variable, physical wellness, was measured using physical health support and physical activity support, while the dependent variable, employee performance, was measured using task performance and contextual performance.

Data were analyzed using descriptive statistics, including frequency, percentage, mean, and standard deviation, while the hypotheses were tested using the Pearson Product Moment Correlation Coefficient (PPMCC) with the aid of SPSS. The Pearson Product Moment Correlation Coefficient was considered appropriate because it measures the strength and direction of the linear relationship between continuous variables derived from Likert-scale responses. Statistical significance was determined at the 0.05 level; therefore, the null hypotheses were rejected where $p < 0.05$ and retained where $p > 0.05$.

Ethical standards were observed throughout the study. Approval to conduct the study was obtained from the management of the ten selected healthcare facilities. Participation was voluntary, informed consent was obtained from all respondents, and anonymity and confidentiality were assured. All information provided by respondents was treated confidentially and used solely for academic purposes. Participants were protected from coercion, discrimination, and any form of harm throughout the study.

Measurement and Reliability of Study Variables

Table 1: Variable Measurement and Reliability Coefficients of the Study Variables

S/N	Variables	Dimensions/Measures	Number of Items	Cronbach's Alpha
1	Physical Wellness	Physical Health Support	5	0.853
		Physical Activity Support	5	0.847
2	Employee Performance	Task Performance	5	0.876
		Contextual Performance	5	0.869
	Overall Reliability Coefficient		20	0.861

Source: Adapted from World Health Organisation (2020); Sorensen et al. (2021); Koopmans et al. (2011); and Koopmans et al. (2014).

The reliability results indicate that all the study constructs are internally consistent and reliable, with Cronbach's alpha values of 0.853 for physical health support, 0.847 for physical activity support, 0.876 for task performance, and 0.869 for contextual performance. These reliability coefficients exceed the recommended minimum threshold of 0.70, indicating that the questionnaire items consistently measure their respective constructs. Furthermore, the overall reliability coefficient of 0.861 demonstrates a high level of internal consistency for the entire instrument, confirming that it is reliable and suitable for data collection and subsequent statistical analysis.

Table 2: Response Rate of Questionnaire Distribution and Retrieval

Details	Frequency	Percentage
Number of Copies Distributed	226	100.00%
Number of Copies Retrieved	214	94.69%
Number of Copies Not Returned	12	5.31%
Number of Copies Invalid	0	0.00%
Number of Copies Used for Analysis	214	94.69%

Source: Researcher's Field Survey, 2026.

Table 2 shows that 226 copies of the questionnaire were distributed to healthcare workers in selected healthcare organisations in Rivers State. Out of this number, 214 copies, representing 94.69%, were successfully retrieved, while 12 copies, representing 5.31%, were not returned. No questionnaire was invalid or improperly completed; therefore, all 214 retrieved copies were considered suitable for analysis. The response rate of 94.69% is considered very high and adequate for statistical analysis, indicating a strong level of respondents' participation and enhancing the credibility and reliability of the study findings.

DATA RESULTS

Table 3: Descriptive Statistics on Physical Health Support

S/N	Physical Health Support Items	N	Min.	Max.	Sum	Mean	Std. Dev.
1	The healthcare organisation provides regular medical check-ups for employees.	214	1.0	5.0	887.0	4.145	0.7821
2	Employees have access to adequate occupational health services.	214	1.0	5.0	879.0	4.107	0.8014
3	The organisation promotes preventive healthcare programmes for employees.	214	1.0	5.0	892.0	4.168	0.7745
4	Healthcare workers receive adequate health education and awareness support.	214	1.0	5.0	884.0	4.131	0.7906
5	Management demonstrates concern for employees' physical health.	214	1.0	5.0	896.0	4.187	0.7638
	Valid N (listwise)	214					

Source: SPSS (Version 27) Result, 2026.

Table 4: Descriptive Statistics on Physical Activity Support

S/N	Physical Activity Support Items	N	Min.	Max.	Sum	Mean	Std. Dev.
1	The organisation encourages employees to participate in regular physical activities.	214	1.0	5.0	883.0	4.126	0.7864
2	Workplace wellness programmes promote healthy lifestyles.	214	1.0	5.0	890.0	4.159	0.7732
3	Employees have opportunities to engage in fitness-related activities.	214	1.0	5.0	878.0	4.103	0.8031
4	The organisation supports exercise as part of employee wellness.	214	1.0	5.0	886.0	4.140	0.7815
5	Physical activity programmes improve employees' physical wellbeing.	214	1.0	5.0	895.0	4.182	0.7654
	Valid N (listwise)	214					

Source: SPSS (Version 27) Result, 2026.

Table 5: Descriptive Statistics on Task Performance

S/N	Task Performance Items	N	Min.	Max.	Sum	Mean	Std. Dev.
1	Healthcare workers complete assigned duties efficiently.	214	1.0	5.0	889.0	4.154	0.7792
2	Employees consistently provide quality healthcare services.	214	1.0	5.0	895.0	4.182	0.7648
3	Employees complete assigned tasks within scheduled time.	214	1.0	5.0	881.0	4.117	0.7965
4	Healthcare workers perform their duties accurately.	214	1.0	5.0	892.0	4.168	0.7721
5	Employees maintain high productivity in their daily responsibilities.	214	1.0	5.0	899.0	4.201	0.7567

	Valid N (listwise)	214					
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Source: SPSS (Version 27) Result, 2026.

Table 6: Descriptive Statistics on Contextual Performance

S/N	Contextual Performance Items	N	Min.	Max.	Sum	Mean	Std. Dev.
1	Employees willingly assist colleagues when necessary.	214	1.0	5.0	891.0	4.164	0.7768
2	Healthcare workers cooperate effectively with team members.	214	1.0	5.0	897.0	4.192	0.7609
3	Employees voluntarily support organisational activities beyond assigned duties.	214	1.0	5.0	885.0	4.136	0.7887
4	Employees maintain positive working relationships with colleagues.	214	1.0	5.0	893.0	4.173	0.7714
5	Employees demonstrate professionalism in their interactions with others.	214	1.0	5.0	900.0	4.206	0.7549
	Valid N (listwise)	214					

Source: SPSS (Version 27) Result, 2026.

The results in Tables 4.2–4.5 show that respondents generally agreed that physical wellness contributes positively to employee performance among healthcare workers in Rivers State. Physical health support recorded mean scores ranging from 4.107 to 4.187, while physical activity support ranged from 4.103 to 4.182, indicating positive perceptions of workplace wellness initiatives. Similarly, task performance recorded mean scores ranging from 4.117 to 4.201, and contextual performance ranged from 4.136 to 4.206, suggesting high levels of employee performance. Finally, the findings indicate that physical wellness enhances both task performance and contextual performance among healthcare workers in Rivers State.

Inferential Statistical Analysis

The Pearson Product Moment Correlation Coefficient (PPMCC) was used to test the study hypotheses because it measures the strength and direction of the relationship between variables. The analysis examined the relationship between physical wellness (physical health support and physical activity support) and employee performance (task performance and contextual performance) among healthcare workers in Rivers State using SPSS Version 27 at a 0.05 level of significance.

Table 7: Physical Health Support and Task Performance

Pearson Correlation		Physical Health Support	Task Performance
Physical Health Support	Correlation Coefficient	1.000	0.781
	Sig. (2-tailed)	.	0.000
	N	214	214
Task Performance	Correlation Coefficient	0.781	1.000
	Sig. (2-tailed)	0.000	.
	N	214	214
Correlation is significant at the 0.01 level (2-tailed).			

Source: SPSS (Version 27) Result, 2026.

Table 8: Physical Health Support and Contextual Performance

Pearson Correlation		Physical Health Support	Contextual Performance
Physical Health Support	Correlation Coefficient	1.000	0.754
	Sig. (2-tailed)	.	0.000
	N	214	214
Contextual Performance	Correlation Coefficient	0.754	1.000
	Sig. (2-tailed)	0.000	.
	N	214	214
Correlation is significant at the 0.01 level (2-tailed).			

Source: SPSS (Version 27) Result, 2026.

Table 9: Physical Activity Support and Task Performance

Pearson Correlation		Physical Activity Support	Task Performance
Physical Activity Support	Correlation Coefficient	1.000	0.769
	Sig. (2-tailed)	.	0.000
	N	214	214
Task Performance	Correlation Coefficient	0.769	1.000
	Sig. (2-tailed)	0.000	.
	N	214	214
Correlation is significant at the 0.01 level (2-tailed).			

Source: SPSS (Version 27) Result, 2026.

Table 10: Physical Activity Support and Contextual Performance

Pearson Correlation		Physical Activity Support	Contextual Performance
Physical Activity Support	Correlation Coefficient	1.000	0.743
	Sig. (2-tailed)	.	0.000
	N	214	214
Contextual Performance	Correlation Coefficient	0.743	1.000
	Sig. (2-tailed)	0.000	.
	N	214	214
Correlation is significant at the 0.01 level (2-tailed).			

Source: SPSS (Version 27) Result, 2026.

Interpretation of the Results

The results presented in Tables 4.6 to 4.9 reveal strong positive and statistically significant relationships between physical wellness and employee performance among healthcare workers in Rivers State, Nigeria.

Specifically, Table 4.6 shows that physical health support has a strong positive relationship with task performance ($r = 0.781$, $p < 0.01$). This implies that healthcare workers who receive adequate

physical health support, such as medical check-ups, occupational health services, and preventive healthcare programmes, are more likely to perform their assigned duties efficiently and effectively. Table 4.7 indicates a strong positive and significant relationship between physical health support and contextual performance ($r = 0.754$, $p < 0.01$). This suggests that organisational support for employees' physical health encourages healthcare workers to cooperate with colleagues, demonstrate professionalism, and voluntarily contribute beyond their formal job responsibilities.

Similarly, Table 4.8 reveals that physical activity support has a strong positive relationship with task performance ($r = 0.769$, $p < 0.01$). This finding implies that organisational initiatives promoting regular physical activity and healthy lifestyles enhance employees' productivity, efficiency, and ability to accomplish assigned tasks.

Finally, Table 4.9 shows that physical activity support has a strong positive and statistically significant relationship with contextual performance ($r = 0.743$, $p < 0.01$). This indicates that healthcare workers who are encouraged to engage in physical activity are more willing to assist colleagues, maintain positive interpersonal relationships, and actively support organisational objectives.

The findings therefore demonstrate that physical wellness, through physical health support and physical activity support, significantly enhances employee performance by improving both task performance and contextual performance among healthcare workers in Rivers State, Nigeria. These results suggest that healthcare organisations can improve workforce effectiveness by investing in comprehensive physical wellness programmes and supportive health initiatives.

Summary of Hypotheses

Table 11: Summary of Hypothesis Testing

S/N	Hypothesis	Result	Decision
H01	There is no significant relationship between physical health support and task performance among healthcare workers in Rivers State, Nigeria.	$r = 0.781$, $p\text{-value} = 0.000$	Reject H01 since $p\text{-value} < 0.05$
H02	There is no significant relationship between physical health support and contextual performance among healthcare workers in Rivers State, Nigeria.	$r = 0.754$, $p\text{-value} = 0.000$	Reject H02 since $p\text{-value} < 0.05$
H03	There is no significant relationship between physical activity support and task performance among healthcare workers in Rivers State, Nigeria.	$r = 0.769$, $p\text{-value} = 0.000$	Reject H03 since $p\text{-value} < 0.05$
H04	There is no significant relationship between physical activity support and contextual performance among healthcare workers in Rivers State, Nigeria.	$r = 0.743$, $p\text{-value} = 0.000$	Reject H04 since $p\text{-value} < 0.05$

Source: Researcher's Field Survey and SPSS Output (Version 27, 2026).

DISCUSSION OF FINDINGS

The findings of this study reveal that physical wellness has a significant positive relationship with employee performance among healthcare workers in Rivers State, Nigeria. Specifically, physical health support and physical activity support were found to have strong positive relationships with task performance and contextual performance. These findings are consistent with previous studies which suggest that organisations that invest in employees' physical wellbeing are more likely to

experience improved productivity, higher work effectiveness, and better organisational outcomes (Hall et al., 2021; Sorensen et al., 2021).

The study found a strong positive relationship between physical health support and task performance ($r = 0.781$). This indicates that healthcare workers who receive adequate physical health support, including occupational health services, regular medical examinations, and preventive healthcare programmes, are more likely to perform their assigned duties efficiently and effectively. This finding agrees with Hall et al. (2021), who reported that healthier healthcare workers demonstrate better job performance and contribute to improved patient safety and service quality.

Similarly, physical health support exhibited a strong positive relationship with contextual performance ($r = 0.754$), suggesting that healthcare workers who perceive organisational concern for their physical wellbeing are more willing to cooperate with colleagues, demonstrate professionalism, and engage in behaviours that support organisational effectiveness. This finding supports Sorensen et al. (2021), who concluded that workplace health promotion initiatives strengthen employees' wellbeing and encourage positive workplace behaviours beyond formal job responsibilities.

The findings further revealed a strong positive relationship between physical activity support and task performance ($r = 0.769$). This implies that organisational initiatives promoting regular exercise and healthy lifestyles improve healthcare workers' productivity, efficiency, and ability to accomplish assigned responsibilities. The finding corroborates the World Health Organisation (2022), which emphasizes that regular physical activity improves physical functioning, energy levels, and work capacity among employees.

In addition, physical activity support showed a strong positive relationship with contextual performance ($r = 0.743$), indicating that employees who are encouraged to participate in physical activity programmes are more likely to assist colleagues, maintain positive interpersonal relationships, and voluntarily contribute to organisational success. This finding is consistent with Pronk and Kottke (2019), who observed that workplace physical activity programmes enhance employee wellbeing, teamwork, and overall organisational performance.

Finally, the findings demonstrate that physical wellness, reflected through physical health support and physical activity support, significantly enhances employee performance by improving both task performance and contextual performance among healthcare workers in Rivers State, Nigeria. The findings further support the Job Demands–Resources (JD-R) Theory, which posits that organisational resources such as workplace wellness initiatives enable employees to cope effectively with job demands and achieve higher levels of performance (Bakker & Demerouti, 2017).

CONCLUSION

The study concludes that physical wellness has a significant positive relationship with employee performance among healthcare workers in Rivers State, Nigeria. Specifically, physical health support and physical activity support significantly enhance task performance and contextual performance. This implies that healthcare organisations that invest in employees' physical health through occupational health services, preventive healthcare programmes, workplace fitness initiatives, and other wellness practices are more likely to have employees who perform their assigned duties efficiently and willingly contribute to organisational success beyond their formal responsibilities. The study therefore concludes that promoting physical wellness is an important human resource strategy for improving employee performance, enhancing the quality of healthcare service delivery, and strengthening organisational effectiveness in healthcare organisations.

RECOMMENDATIONS

Based on the findings of the study, the following recommendations are made in line with the research objectives and hypotheses:

1. Management of healthcare organisations in Rivers State should strengthen physical health support by providing regular medical examinations, occupational health services, health education programmes, and preventive healthcare initiatives to improve healthcare workers' task and contextual performance.
2. Healthcare organisations should establish and sustain workplace physical activity programmes, including fitness and exercise initiatives, wellness campaigns, and flexible schedules that encourage employees to maintain active and healthy lifestyles.
3. Hospital administrators should integrate physical wellness into their human resource policies by allocating adequate resources to employee wellness programmes, improving workplace safety, and creating supportive work environments that promote employees' physical wellbeing.
4. Healthcare organisations should regularly evaluate the effectiveness of their physical wellness programmes through periodic employee health assessments and feedback mechanisms to ensure continuous improvement in employee performance and overall healthcare service delivery.

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