

Integrating Employee Well-Being into Departmental KPIS: A Focus on Customer Sales Engineers in Company M

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Abstract

This study examined the integration of employee well-being into departmental Key Performance Indicators (KPIs) among Customer Sales Engineers (CSEs) in Company M's South Business Area. It described existing well-being practices based on Carol Ryff's Six Dimensions of Psychological Well-Being, assessed their level of acceptability and implementation, and identify improvements that will enhance CSEs' contributions to KPIs. Guided by a pragmatic paradigm, the study employed explanatory sequential mixed-methods design. The quantitative data gathering phase involved 34 active Customer Sales Engineers (CSEs) who completed a structured survey checklist designed to measure the awareness and implementation of well-being practices in Company M.

The qualitative data gathering phase included semi-structured interviews with five purposively selected Customer Sales Engineers and one Human Resources Head. Data were also gathered through document analysis, checklist reviews, and direct observations to support the interpretation of findings. Results revealed that employees were aware of the existing well-being programs but with uneven levels of engagement. Programs promoting teamwork and training were strong, while autonomy, personal growth, and mental health support needed improvement. Employees viewed the programs as acceptable but inconsistently implemented across zones. Suggested improvements included clearer communication of goals, more technical training, mentorship, flexible schedules, recognition systems, and mental health initiatives. The study concluded that aligning well-being dimensions with KPI systems strengthens motivation, engagement, and overall performance. It recommended stronger communication strategies, leadership support, and consistent program implementation across business areas.

Keywords: Employee Well-Being, Key Performance Indicators, Ryff's Model, Customer Sales Engineers, Mixed-Methods

Introduction

Organizations often prioritize short-term productivity at the expense of employee well-being, creating toxic cultures, heavy workloads, and declining morale that hinder sustainable growth¹. Despite the Philippine Mental Health Act (RA 11036)², many companies still treat well-being as a peripheral initiat-

¹ Hugosson, A., & Gustafsson, T., "Leadership and Employee Well-being in Growing SMEs," (2025).

ive rather than integrating it into leadership, strategy, and KPIs.

This study examined Customer Sales Engineers in Company M's South Business Area, a group experiencing high operational stress that affects performance, engagement, and morale. It assessed well-being at both the micro level (daily experiences, motivation, productivity) and macro level (service delivery, retention, operational efficiency), consistent with literature linking well-being to improved productivity and commitment³.

Guided by Ryff's Psychological Well-Being Theory, the research identified gaps in current practices and their weak alignment with departmental KPIs. Findings show that embedding well-being into measurable performance indicators enhances employee satisfaction and strengthens organizational outcomes. Overall, the study positions well-being as a strategic driver of sustainable performance and long-term organizational success.

Research Questions and Objectives

The general objective of this study is to evaluate the existing employee well-being practices in Company M's South Business Area and determine how these practices, guided by Ryff's Psychological Well-Being dimensions, can be improved and integrated to better support Customer Sales Engineers in achieving departmental Key Performance Indicators (KPIs). Specifically, the study aims:

1. To describe the current well-being practices of Company M's South Business Area based on Carol Ryff's Six Dimensions of Psychological Well-being:
 - a. Autonomy
 - b. Environmental Mastery
 - c. Personal Growth
 - d. Positive Relations with Others
 - e. Purpose in Life
 - f. Self-Acceptance
2. To assess the level of acceptability and implementation of the existing well-being practices in Company M's South Business Area.
3. To determine specific improvements to Company M's well-being practices that can better support Customer Sales Engineers in contributing to departmental Key Performance Indicators (KPIs).

Research Framework

This study uses Carol Ryff's Psychological Well-Being Model, which explains well-being through six dimensions: autonomy, environmental mastery, personal growth, positive relations, purpose in life, and self-acceptance⁴. The model helped assess how well-being programs are understood and applied among Customer Sales Engineers in Company M's South Business Area, and how these practices support their contribution to departmental KPIs.

² Republic of the Philippines, Congress, "Republic Act No. 11036: An Act Establishing a National Mental Health Policy for the Purpose of Enhancing the Delivery of Integrated Mental Health Services, Promoting and Protecting the Rights of Persons Utilizing Psychosocial Health Services, Appropriating Funds Therefor and Other Purposes," 2018. https://legacy.senate.gov.ph/republic_acts/ra%2011036.pdf

³ Nielsen, K., Nielsen, M. B., Ogbonnaya, C., Käsälä, M., Saari, E., & Isaksson, K., "Workplace Resources to Improve Both Employee Well-being and Performance: A Systematic Review and Meta-analysis," *Work & Stress*, 31(2), 101–120, 2017. <https://www.tandfonline.com/doi/abs/10.1080/02678373.2017.1304463>

⁴ Ryff, C. D., & Keyes, C. L. M., "The Structure of Psychological Well-being Revisited," *Journal of Personality and Social Psychology*, 69(4), 719, 1995. <https://psycnet.apa.org/fulltext/1996-08070-001.html>

As shown in Figure 1, the framework guided the evaluation of current well-being initiatives and their effects on productivity, engagement, and service delivery. It also revealed implementation gaps and areas for improvement, highlighting that integrating well-being into departmental KPIs can strengthen employee performance, operational efficiency, and overall organizational effectiveness.

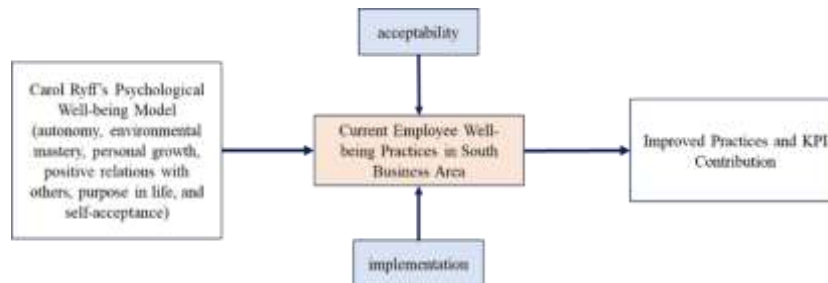


Figure 1. Conceptual Framework of the Study

Significance of the Study

Theory. The study applies Ryff's Psychological Well-Being Model to a performance-driven workplace, showing how its six dimensions can be integrated into departmental operations and linked to employee performance and organizational effectiveness.

Policy. The study may guide organizations and policymakers in strengthening workplace mental health initiatives by providing evidence for integrating employee well-being into policies and Key Performance Indicators, in line with Republic Act No. 11036.

Practice. Findings may help HR practitioners identify gaps in current well-being programs, support managers in designing effective leadership practices, and assist organizations in embedding well-being into daily operations and performance systems.

Social Action. The study may raise awareness of workplace mental health and promote humane, inclusive, and supportive work environments, emphasizing well-being as a shared responsibility essential to individual dignity and sustainable organizational success.

Scope and Limitations.

The study focused on Company M's South Business Area, examining the well-being of Customer Sales Engineers. It assessed existing practices using Ryff's dimensions, evaluated their acceptability and implementation, and identified improvements to strengthen employee well-being and support departmental Key Performance Indicators.

Definition of Terms

Autonomy. It is the degree to which CSEs can make decisions, express ideas, and manage tasks independently.

Customer Sales Engineers (CSEs). These refer to frontline employees in Company M's South Business Area responsible for customer-related transactions.

Departmental Key Performance Indicators (KPIs). These refer to measurable standards used to assess departmental performance such as service quality, productivity, and engagement.

Employee Well-Being. This refers to employees' emotional, psychological, and social health at work, assessed using Ryff's well-being dimensions.

Environmental Mastery. It is the ability of CSEs to effectively manage work tasks, tools, and relationships.

Extent of Implementation. It is the consistency and accessibility of well-being practices across the department.

Personal Growth. These refer to opportunities for learning, skill development, and career advancement among CSEs.

Positive Relations with Others. These refer to quality of teamwork, peer support, and supervisor relationships in the workplace.

Purpose in Life. It is the sense of meaning and alignment between CSEs' roles and the organization's mission.

Self-Acceptance. It is a positive self-view supported by inclusive policies, feedback, and mental health initiatives.

Strategic Integration. This refers to the incorporation of employee well-being into departmental planning, leadership, and performance systems.

Well-Being Practices. These refer to organizational programs and activities that promote employee health, satisfaction, and performance.

Methodology

Research Design

The study used an explanatory sequential mixed-methods design, beginning with a survey and followed by interviews to assess employee well-being among Customer Sales Engineers (CSEs) in Company M's South Business Area.

Research Locale

The research was conducted across Metro South, Central Laguna/Cavite, and Far South zones of Company M's South Business Area, selected for their diverse operational contexts and leadership environments.

Population and Sampling Design

All 34 active CSEs participated in the quantitative phase through a near-census approach. Five CSEs were purposively selected for interviews based on tenure, performance, and program involvement, along with one HR Head for managerial insights. Respondents varied in age, tenure, and zone assignment, providing diverse perspectives.

Research Instruments

Data were collected using a structured survey, a semi-structured interview guide, and a document analysis checklist. The survey assessed awareness, acceptability, and implementation of well-being programs based on Ryff's six dimensions, while interviews and document analysis explored experiences, gaps, and KPI alignment. All instruments underwent expert validation and pilot testing.

Data Gathering Procedure

The quantitative phase used structured surveys and descriptive statistics to identify patterns in well-being practices. The qualitative phase involved interviews and document analysis to examine experiences, implementation gaps, and improvement needs. Ethical standards—voluntary participation, informed consent, confidentiality—and thematic analysis guided the entire process.

Management and Treatment of Data

The data analysis developed for this research are as follows:

Table 1. Summary of Data Analysis Matrix

Objective	Source of Data	Type of Data	Data Analysis Method
1. Describe the current well-being practices of Company M’s South Business Area based on Carol Ryff’s Six Dimensions of Psychological Well-being (Autonomy, Environmental Mastery, Personal Growth, Positive Relations with Others, Purpose in Life, Self-Acceptance).	Survey responses from active Customer Sales Engineers (CSEs)	Quantitative	Descriptive statistics (percentages, means, standard deviations) were used to examine alignment with Ryff’s six dimensions.
	Document analysis, checklists, semi-structured interviews with 5 CSEs and 1 HR Head	Qualitative	Thematic coding using the Colaizzi method was applied to extract themes aligned with Ryff’s dimensions and describe lived experiences of well-being practices.
2. Assess the level of acceptability and implementation of existing well-being practices within Company M’s South Business Area.	Survey responses from active Customer Sales Engineers (CSEs)	Quantitative	Descriptive statistics were used to measure acceptability and implementation levels of well-being practices.
	Semi-structured interviews with 5 CSEs and 1 HR Head	Qualitative	Pattern recognition and contextual interpretation were employed to explore barriers, enablers, and leadership influence on implementation.
3. Determine specific improvements to Company M’s well-being practices that could better support Customer Sales Engineers in contributing to departmental Key Performance Indicators (KPIs).	Semi-structured interviews with 5 CSEs and 1 HR Head; survey responses from active CSEs	Mixed (Quantitative & Qualitative)	Thematic analysis triangulated with survey insights was used to identify strategic improvements, actionable initiatives, and leadership behaviors that enhanced KPI alignment and employee well-being.

Results and Discussion

This section presents the study’s findings on employee well-being practices in Company M, examining awareness, acceptability, and implementation across Ryff’s six dimensions of psychological well-being. It also discusses gaps in program execution and employees’ suggestions for improvements to better align well-being initiatives with departmental KPIs, highlighting strategies to enhance engagement and organizational performance.

I. Current Well-being Practices of Company M’s South Business Area Based on Carol Ryff’s Six Dimensions of Psychological Well-being

Survey results showed varied awareness among Customer Sales Engineers across Ryff’s six well-being dimensions. Awareness was highest for Positive Relations programs (team building, recognition), moderate for Environmental Mastery and Personal Growth initiatives, and lowest for Autonomy, Purpose in Life, and Self-Acceptance. These findings suggest that while social support activities are well-communicated, programs that promote independence, personal meaning, and mental health support require greater visibility and integration into daily work.

Table 2. Respondents’ Awareness of the Well-being Programs Existing in Company M Based on Ryff’s Six Dimensions

Ryff’s Dimension	Well-being Program	Percentage (%)	Decision
Autonomy	Employee empowerment initiatives	29.41	Needs Awareness Support
	Breakthrough	23.53	Needs Awareness Support
	CXIS (Innovation Program)	35.29	Needs Awareness Support
	Training and ergonomic workspace support	50.00	Partially Aware
Environmental Mastery	System Upgrades	55.88	Partially Aware
	Customer handling	47.06	Partially Aware
	Conflict handling	52.94	Partially Aware
	Roadshows for Technical Applications	44.12	Partially Aware
	IIEE Convention	61.76	Partially Aware
	Career development and mentorship programs	41.18	Partially Aware
Personal Growth	Learning & Development programs (70-20-10 model)	38.24	Partially Aware
	Continuous Learning Program (masteral, doctorate, professional licensure training)	44.12	Partially Aware
	Orange Plug-in onboarding	50.00	Partially Aware
	Project Management	47.06	Partially Aware
	I Lead	41.18	Partially Aware
	Leadership training	38.24	Partially Aware
Positive Relations	Team building and peer recognition activities	70.59	Fully Aware
	HMB Inspiration Wall	64.71	Fully Aware
	“Healthy Me, Healthy We”	73.53	Fully Aware
	ONE HMB #Wellness Wednesdays	67.65	Fully Aware
	“AfterLUNCH Sessions”	61.76	Fully Aware
	MERALCO Gatherings (CRS Christmas Party, Salu-Salo)	70.59	Fully Aware

Ryff's Dimension	Well-being Program	Percentage (%)	Decision
Purpose in Life	Sports clubs and inter-office competitions	64.71	Fully Aware
	One MERALCO gatherings	67.65	Fully Aware
	Programs aligning personal goals with company mission	23.53	Needs Awareness Support
	Volunteerism and CSR initiatives via One Meralco Foundation	26.47	Needs Awareness Support
	Gift giving/donation drives	20.59	Needs Awareness Support
	Tree planting and clean-up drives	17.65	Needs Awareness Support
	Community electrification projects	29.41	Needs Awareness Support
	Mental health support and feedback systems	17.65	Needs Awareness Support
	Mental Health Hotline	20.59	Needs Awareness Support
	ORANGE FIT Program	23.53	Needs Awareness Support
Self-Acceptance	MVP Cup	14.71	Needs Awareness Support
	Counseling services and mental health support	17.65	Needs Awareness Support
	MERIT rating	11.76	Needs Awareness Support
	All of the Above Respondent selected every program	11.76	Limited Awareness
None of the Above Respondent selected no program	11.76	Poor Awareness	

Legend: 0–20% – Needs Awareness Support, 21–40% – Partially Aware, 41–60% – Partially Aware, 61–80% – Fully Aware and 81–100% – Widespread Awareness

Qualitative findings revealed that although well-being programs existed in Company M, employees experienced significant gaps in implementation and utilization. Key themes included unclear communication of KPIs, limited mental health support, lack of flexible work arrangements, insufficient technical training, weak mentorship, and minimal career development opportunities. Employees also reported restricted autonomy, inconsistent guidance affecting environmental mastery, and limited personal growth initiatives. Positive relations were hindered by toxic workplace dynamics, purpose in life was weakened by task–goal misalignment, and self-acceptance was constrained by inadequate feedback and inaccessible mental health resources. Overall, structural, cultural, and communication

barriers reduced the effectiveness of well-being initiatives, underscoring the need for stronger implementation, consistent support, and better alignment with employees’ daily work experiences.

II. Acceptability and Implementation of Company M’s Well-being Practices Based on Carol Ryff’s Six Dimensions of Psychological Well-being

Table 3 showed that employees in Company M’s South Business Area found well-being programs moderately acceptable across all six of Ryff’s dimensions, but implementation remained weak. Although initiatives supporting autonomy, personal growth, environmental mastery, positive relations, purpose, and self-acceptance were valued, they were undermined by managerial restrictions, favoritism, inconsistent mentorship, unclear procedures, inadequate training, limited resources, workplace conflicts, and insufficient mental health support. These issues were linked to broader organizational problems, including lack of KPI alignment, heavy workloads, inconsistent HR support, and weak managerial accountability. Employees recommended integrating well-being into departmental KPIs, setting clear objectives, providing adequate resources, and enforcing managerial responsibility, emphasizing that program effectiveness depends on consistent support and structured implementation.

Table 3. Acceptability and Level of Implementation of Well-being Practices under Ryff’s Dimensions

Ryff’s Dimension	Statement	Acceptability (Mean)	Implementation (Mean)	Interpretation
Autonomy	I am given the freedom to make decisions in my daily tasks.	3.76	2.85	Acceptable but poorly implemented
	I feel empowered to propose solutions to customer issues.	3.91	2.90	Acceptable but poorly implemented
Environmental Mastery	I receive adequate training to handle technical challenges.	3.44	3.05	Slightly acceptable and moderately implemented
	My workspace is ergonomically designed to support my tasks.	3.21	3.00	Slightly acceptable and moderately implemented
Personal Growth	I have access to career development opportunities.	3.47	2.95	Slightly acceptable but poorly implemented
	I am mentored by experienced colleagues to improve my skills.	3.56	2.80	Acceptable but poorly implemented
Positive Relations	Team-building activities help me build strong relationships.	3.74	3.10	Acceptable and moderately implemented
	I receive recognition from peers for my contributions.	3.47	3.00	Slightly acceptable and moderately implemented
Purpose in Life	My personal goals align with the company’s mission.	3.56	2.75	Acceptable but poorly implemented
	I understand how my work contributes to the company’s	3.91	2.80	Acceptable but poorly implemented

Ryff's Dimension	Statement	Acceptability (Mean)	Implementation (Mean)	Interpretation
	success.			
Self-Acceptance	I receive constructive feedback that helps me improve.	3.53	2.60	Acceptable but poorly implemented
	Mental health support is available and accessible to me.	3.18	2.50	Slightly acceptable but poorly implemented

Legend: 4.51–5.00: Highly Acceptable / Fully Implemented / Widespread Awareness, 3.51–4.50: Acceptable / Moderately Implemented / Fully Aware, 2.51–3.50: Slightly Acceptable / Poorly Implemented / Partially Aware, 1.51–2.50: Unacceptable / Not Implemented / Limited Awareness and 1.00–1.50: Very Poor / Not Implemented / Poor Awareness

In addition, the qualitative analysis of the acceptability and implementation of well-being programs showed that employees generally valued the initiatives, but engagement varied across different types. Awareness of programs existed, yet mental health programs were underutilized, and technical trainings were most appreciated. Barriers such as heavy workloads, scheduling conflicts, and limited communication reduced participation, indicating that awareness alone did not ensure effective engagement, and employees emphasized the need for better promotion, integration into daily work, and accessible support.

III. Proposed Improvements to Enhance Employee Well-Being and KPI Contribution

Employees recommended several improvements to enhance well-being and support KPI achievement, prioritizing clearer communication of goals and KPIs, flexible work arrangements, and stronger mental health support. They emphasized the need for structured programs, consistent managerial support, fair evaluations, and integration of well-being initiatives into departmental KPIs to ensure accountability and alignment with organizational objectives. Additional priorities included career advancement, mentorship, interdepartmental collaboration, technical training, access to resources, ergonomic improvements, and recognition systems, as gaps in leadership support, inconsistent program implementation, and unclear expectations were reported to undermine both

Table 4. Suggested Improvements to Support KPI Contribution

Suggested Improvement	Percentage (%)	Level of Suggestion
More frequent and relevant technical training	50.0	Suggested
Clearer communication of departmental goals and KPIs	76.5	Majority Suggested
Improved access to tools and resources needed for my work	50.0	Suggested
Enhanced mentorship or coaching from senior colleagues	50.0	Suggested
More flexible work arrangements (e.g., schedule, location)	64.7	Majority Suggested
Better recognition and reward systems for performance	44.1	Suggested
Increased involvement in decision-making processes	32.4	Suggested
More opportunities for career advancement	55.9	Majority Suggested

Suggested Improvement	Percentage (%)	Level of Suggestion
Stronger mental health and wellness support	64.7	Majority Suggested
Improved collaboration across departments, immersion to other departments	55.9	Majority Suggested
Streamlined reporting and documentation processes	44.1	Suggested
Ergonomic improvements to workspaces or field equipment	47.1	Suggested
Regular feedback sessions with supervisors	44.1	Suggested
All of the above	35.3	Suggested
None of the above	0.0	Not Suggested
Other	8.8	Suggested

Legend / Level of Suggestion: Not Suggested: 0%, Suggested: 1% – 50%, and Majority Suggested: 51% – 100%

Moreover, the qualitative findings showed that employees recognized and valued the well-being programs, but engagement varied, with technical trainings being most appreciated and mental health programs underutilized, while barriers such as heavy workloads, scheduling conflicts, and limited communication reduced participation.

The findings informed a set of integrated recommendations aimed at enhancing employee well-being while strengthening their contribution to departmental KPI performance.

Table 5. Integrated Recommendations for Enhancing Employee Well-Being and Departmental KPI Performance

Suggested Improvement	Objective	Persons Involved	Combined Quanti- Quali Insight / Description	Expected Outcome
<p><i>Integration of Well-being into KPIs</i></p> <ul style="list-style-type: none"> ● Include well-being implementation in departmental KPIs. ● Assign metrics to measure well-being program participation and impact. ● Ensure managers are evaluated on supporting well-being initiatives. ● Cascade KPIs at the start of the year, with clear, attainable targets. 	<p>Include employee well-being as a formal part of departmental KPIs to ensure program participation and managerial support</p>	<p>HR, Area Head, Managers</p>	<p>Surveys and interviews highlighted low participation in programs due to absence of well-being metrics and lack of managerial accountability (Theme 1 & 2). KPI cascade at the start of the year is inconsistent.</p>	<p>Employees participate consistently in programs; managers are accountable; well-being aligns with performance outcomes.</p>
<p><i>Fairness and Accountability in Manager Evaluation</i></p>	<p>Prevent favoritism, power</p>	<p>HR, Area Head,</p>	<p>Qualitative data revealed favoritism,</p>	<p>Managers are held</p>

Suggested Improvement	Objective	Persons Involved	Combined Quanti- Quali Insight / Description	Expected Outcome
<ul style="list-style-type: none"> ● Evaluate managers as part of their KPI to prevent favoritism and power abuse. ● Include feedback from employees in manager performance reviews. ● Monitor manager behavior to address issues like bullying, disregard, and outcasting 	<p>abuse, and ensure ethical managerial practices</p>	Supervisors	<p>disregard for employees, bullying, and outcasting by managers (Theme 2). Employees want fair evaluation of management.</p>	<p>accountable; employees experience fair treatment; trust and engagement improve.</p>
<p><i>Merit Rating and Promotion System Reform</i></p> <ul style="list-style-type: none"> ● Validate the MERIT rating system to ensure fair evaluation for all employees. ● Ensure promotions are based on performance and credentials, not favoritism. ● Include both rank-and-file and officers/managers in performance evaluations. 	<p>Ensure merit-based evaluations and promotions</p>	HR, Area Head, Managers	<p>Interviews indicated favoritism in promotions and lack of inclusion of officers/managers in feedback (Theme 2).</p>	<p>Fair and transparent evaluations; based on performance and credentials; morale and engagement improve.</p>
<p><i>Improved Communication</i></p> <ul style="list-style-type: none"> ● Communicate KPIs clearly at the start of the year. ● Ensure consistent updates and direction regarding tasks, expectations, and programs. 	<p>Enhance clarity of KPIs, tasks, and programs</p>	HR, Managers, Team Leads	<p>Employees reported unclear direction, inconsistent updates, and lack of communication on goals and programs (Theme 1 & 2).</p>	<p>Employees understand expectations, resulting in better alignment with KPIs and reduced errors.</p>
<p><i>Strengthening Well-being Program Implementation</i></p> <ul style="list-style-type: none"> ● Ensure well-being programs are consistently implemented, not ad hoc. ● Align programs with actual employee needs, including technical trainings, leadership mentorship, and mental health support. 	<p>Ensure consistent and needs-based implementation of well-being initiatives</p>	HR, Wellness Committee, Managers	<p>Programs are ad hoc and misaligned with employee needs; interviews stressed need for technical trainings, mentorship, mental health support (Theme 2).</p>	<p>Programs are consistently implemented, responsive to employee needs; well-being is embedded in company mission and</p>

Suggested Improvement	Objective	Persons Involved	Combined Quanti- Quali Insight / Description	Expected Outcome
<ul style="list-style-type: none"> ● Include total employee well-being as part of company mission and goals. ● Introduce policies supporting employee well-being. 				goals.
<p><i>Resource and Workload Management</i></p> <ul style="list-style-type: none"> ● Add personnel to reduce workload and address understaffing. ● Provide clear guidelines for tasks (e.g., Net Metering, reporting). ● Ensure adequate workplace infrastructure, tools, and ergonomic support. 	Reduce overwork and improve operational efficiency	HR, Operations, Managers	Staff shortages, excessive reports, and unclear task guidelines hinder performance (Theme 1 & 2).	Adequate staffing, clear task guidance, and proper infrastructure enable efficient work and improved KPI achievement.
<p><i>Mental Health and Support Systems</i></p> <ul style="list-style-type: none"> ● Strengthen mental health programs and provide real support from HR. ● Address workplace bullying, conflicts, and toxic culture. ● Promote empathy and understanding from managers toward employees. 	Promote emotional well-being and address workplace toxicity	HR, Wellness Committee, Managers	Interviews highlighted poor mental health support, bullying, conflicts, and toxic culture (Theme 2).	Employees receive real support; stress, burnout, and workplace conflicts are reduced; engagement improves.
<p><i>Culture and Coordination Improvements</i></p> <ul style="list-style-type: none"> ● Improve coordination between offices to reduce conflicting directives. ● Foster a culture that prioritizes employees' well-being and not just operational targets. ● Reduce unnecessary reports and streamline processes for efficiency. 	Foster a supportive, well-aligned organizational culture	HR, Managers, Area Head	Poor inter-office coordination, conflicting directives, and focus on operations over well-being were reported (Theme 2).	Better collaboration, streamlined processes, and a culture prioritizing employee well-being, improving performance and morale.

Research Implications

The findings suggest that organizations must strengthen the visibility and accessibility of well-being programs, particularly those supporting autonomy, purpose, and self-acceptance. Aligning initiatives with KPIs, improving mentorship, and providing flexible work options and mental health support can enhance both employee well-being and performance.

Summary of Significant Findings

Awareness of well-being programs among Customer Sales Engineers was uneven. Employees were most familiar with initiatives that build positive relationships (team-building, peer recognition) and least aware of programs promoting autonomy, purpose, and self-acceptance, reflecting limited visibility of empowerment, goal alignment, and mental health support.

Although well-being programs were generally acceptable, implementation was inconsistent—especially in autonomy, personal growth, purpose, and self-acceptance—due to weak mentorship, limited resources, and gaps in recognition and feedback. Employees emphasized the need for clearer objectives, stronger mental health support, flexible work arrangements, career development opportunities, better collaboration, and more practical training and mentorship, all aligned with organizational priorities to strengthen engagement and psychological well-being.

Conclusion

Employees were most aware of programs supporting teamwork and social engagement, while initiatives related to autonomy, personal goals, and mental health were less visible and underutilized. Well-being practices were valued but unevenly implemented, with gaps in mentorship, feedback, recognition, and mental health support reducing effectiveness. Employees prioritized clearer communication, stronger mental health resources, flexible work options, technical training, mentorship, and career development—highlighting the need to integrate well-being initiatives with KPIs and improve program design to enhance engagement, well-being, and organizational performance.

Recommendations

1. Increase employee awareness and participation in well-being programs through clear communication, promotion, and engagement guidelines across all six dimensions.
2. Enhance implementation in low-performing areas by providing resources, consistent training, feedback, and mentorship systematically across departments.
3. Include employee well-being in departmental KPIs, measuring program participation, mental health access, skill development, mentorship, and overall psychological health.
4. Support KPI contribution with technical training, resources, flexible work, recognition, and mental health programs to boost performance and well-being.

Conduct research to assess long-term effects of well-being interventions on performance and KPI achievement for sustainability and broader application.

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