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IDENTIFYING THE CHALLENGES AND THE LEVEL OF EFFECTIVENESS OF CAMPUS WELLNESS INITIATIVES AMONG STUDENTS AND STAFFS IN UMK CITY CAMPUS

By

HUSNA SHAHRAINI BINTI BURHA'ANNUDDIN (H20A1166)

MUHAMMAD NURIMAN SYAFIQ BIN LOKMAN (H20A1308)

NUR SYAFIQAH AMIRA BINTI HAMID (H20A1570)

NURUL ZULAIKHA BINTI AZHAN (H20A1708)

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Symbols

r	Pearson Correlation Coefficient
%	Percentage
n	Number
±	Plus, or minus is significance
p-value	The Probability
<	Less
>	Greater

Abbreviations

CAS	Council For the Advancement of Standards in Higher Education
HRAs	Health Risk Assessments
RAND	Research and Development
BMI	Body Mass Index
SD	Standard Deviation
IBM	International Business Machines Corporation
SPSS	Statistical Package for the Social Sciences
UMK	Universiti Malaysia Kelantan
FHPK	Fakulti Hospitaliti, Pelancongan dan Kesejahteraan
FKP	Fakulti Keusahawanan dan Perniagaan
FPV	Fakulti Perubatan Veterinar

ABSTRACT

A wellness programme is to maintain and improve a person's health through a balanced diet, regular exercise, stress reduction, and disease prevention. There are various challenges that contribute to the lack of implementation of Campus Wellness Initiatives among students and staffs, including a lack of understanding about personal health, the problem of obesity, which limits daily mobility and causes fast food intake. As a result, participation in these wellness initiatives is reduced. Therefore, the study aimed to explore the effectiveness that motivate, to assess the extent of support provided by campus leadership support, to determine the level of awareness, to assess the level of interest and to investigate the level of satisfaction of facilities among students and staff in campus wellness initiatives. The study was conducted using a quantitative research approach which is through online questionnaire survey in Google Form to collect the data. There were the 362 respondent consists of students and staff from the UMK City Campus. Based on the research findings, the research objectives of motivation, leadership support, participant awareness and participant interest were supported except the facilities, -.230 is not significant. All the hypotheses have been accepted at a significant level of 0.01, meanwhile the facilities showed that is not significant at $p > 0.05$. A few implications related to the research study are the researcher is difficult to get superiors to become respondents, during covid 19, respondents lacked involvement in health initiatives and were unable to know the effectiveness of the program and the difficulty in finding journals related to the research topic being studied. The implications related to the study have been proposed by the researcher.

Keywords: Campus Wellness Initiatives, Effectiveness, UMK City Campus.

ABSTRAK

Program kesejahteraan adalah untuk mengekalkan dan meningkatkan kesihatan seseorang melalui diet seimbang, senaman yang kerap, pengurangan tekanan dan pencegahan penyakit. Terdapat pelbagai cabaran yang menyumbang kepada kurangnya pelaksanaan Inisiatif Kesejahteraan Kampus dalam kalangan pelajar dan kakitangan, antaranya kurang kefahaman tentang kesihatan diri, masalah obesity, yang mengehadkan pergerakan harian dan menyebabkan pengambilan makanan segera. Akibatnya, penyertaan dalam inisiatif kesihatan ini berkurangan. Oleh itu, kajian ini bertujuan untuk meneroka keberkesanan yang mendorong, untuk menilai sejauh mana sokongan yang diberikan oleh sokongan kepimpinan kampus, untuk menentukan tahap kesedaran, untuk menilai tahap minat dan untuk menyiasat tahap kepuasan kemudahan di kalangan pelajar dan kakitangan. Dalam inisiatif kesejahteraan kampus. Kajian ini dijalankan menggunakan pendekatan kajian kuantitatif iaitu melalui tinjauan soal selidik dalam talian dalam Borang Google untuk mengumpul data. Seramai 362 orang responden terdiri daripada pelajar dan kakitangan Kampus UMK City. Berdasarkan dapatan kajian, objektif kajian iaitu motivasi, sokongan kepimpinan, kesedaran peserta dan minat peserta disokong kecuali kemudahan, -.230 adalah tidak signifikan. Kesemua hipotesis telah diterima pada tahap signifikan 0.01, manakala kemudahan menunjukkan tidak signifikan pada $p > 0.05$. Beberapa implikasi berkaitan kajian penyelidikan ialah pengkaji sukar mendapatkan pihak atasan untuk menjadi responden, semasa covid 19, responden kurang penglibatan dalam inisiatif kesihatan dan tidak dapat mengetahui keberkesanan program serta kesukaran mencari jurnal berkaitan penyelidikan. Topik yang sedang dipelajari. Implikasi yang berkaitan dengan kajian telah dicadangkan oleh pengkaji.

Kata kunci: Inisiatif Kesejahteraan Kampus, Keberkesanan, UMK Kampus Kota.

CHAPTER 1

INTRODUCTION

1.1 INTRODUCTION

This study makes an effort to identifying the challenges and the level of effectiveness of campus wellness initiatives among students and staffs in UMK City Campus. The context of this study, problem statement, research objectives, research question, significance of the study, and the scope of the study are all explained in this chapter. Additionally, the definition of words for some of the terms utilised in this study will be explained. Finally, there will be a conclusion section to summarize this chapter.

1.2 BACKGROUND OF THE STUDY

The concepts "wellness" and "well-being" can be found in a variety of literary genres, including general social commentary, economics, social science, and food marketing. These phrases are frequently employed in contexts that cover both more general and esoteric aspects of life pleasure, such as happiness, as well as mental, physical, and emotional health. Wellness has a direct impact on one's ability to work and labour productivity, the nation's economy, the moral atmosphere in society, young people's education, and how one is perceived and how well one is living. The improvement of the students' quality of life is mostly due to the promotion of health. Indicators of the general personal culture include people's involvement in their own well-being and care, prevention of wellness illnesses, personality tendencies, such as personal health consciousness in many facets of life (Nesterchuk et al., 2020).

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The idea of wellness as a concept effectively conveys a more general meaning of health. The World Health Organization (1948) expanded the definition of health beyond the mere absence of illness and infirmity to include a person's overall state of physical, mental, and social well-being. The term "high-level wellness" was later coined by Dunn (1961) to describe a state of optimal health characterised by a sense of social responsibility, a sense of meaning and purpose in life, and strategies for maximising a person's potential for well-being. It also meant finding strategies to maximise a person's capacity for wellbeing and learning how to meet the challenges of a changing environment.

Paradigm of holistic wellbeing will be presented in this study Hettler's (1984). This strategy was created to encourage wellbeing in academic and social contexts. It has been utilised to improve diabetes prevention and treatment as well as alter college students' health-related behaviours. Wellness initiatives in higher education help people live longer and have fewer illnesses. In this study, 126 or 85 undergraduate students who were enrolled in small liberal arts colleges or research universities were investigated for wellness-related characteristics.

Surveys measuring physical, emotional, social, intellectual, and vocational wellbeing were given to participants. Significant institutional variations were reported for measures of physical and social health (Baldwin et al., 2017). Six broad categories of health-related behaviours make up holistic wellness: physical wellness, including eating plan, workout, sleep, smoking, alcohol use, and personal care emotional wellness, including self-identity and self-esteem; spiritual wellness, including peace and connection with the universe; social wellness, including a sense of community and social support; occupational wellness, including job satisfaction; and intellectual wellness (e.g., creative stimulating mental activities).

Hettler (1984) asserts that a person who seeks holistic wellness considers all aspects of health and deliberately endeavours to make use of these elements on a daily basis. To put it another way, promoting wellness in school environments is great since it is a lifelong endeavour (Herrington et al., 2016). Researchers concur that wellness is a comprehensive, encouraging and positive notion with substantial therapeutic and practical benefits, regardless of the quantity of wellness-related factors (Baldwin et al., 2017).

The goal of a wellness programme is to maintain and improve a person's health through a balanced diet, regular exercise, stress reduction, and disease prevention. Every university needs to ensure that the health program that is established and held receives response from students and staffs to be able to successfully accomplish the goals of the program. This is due to the fact that wellness initiatives can assist in setting programme objectives and identifying particular areas to focus on, such flexibility, strength, and cardiovascular fitness. However, there are some challenges of wellness programs on campus.

As an increasing number of students seek physical and mental health services, college student wellness has become an increasingly important topic in higher education (Staples et al., 2022). Many people have suggested that wellness should be thought of holistically, encompassing not only bodily but also spiritual and mental aspects (Staples et al., 2022). In response to these requests for holistic wellness, studies in higher education have looked into components of moral well-being, such as meaning, direction and purpose in life (Lothes & Nanney, 2019). Then again, to the growth of wellness techniques with a spiritual foundation, such mindfulness and meditation (Lister et al., 2021). The next challenges of wellness initiatives are unhealthy eating. This behaviour is frequently linked to a number of issues with mental health, including sadness, anxiety,

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stress, and mood. For instance, it has been demonstrated that irregular eating habits, such as skipping breakfast, are negatively correlated with mental health.

The student population has traditionally been the focus of wellness initiatives throughout the history of academic institutions' wellness programming. The majority of institutions and executive administrators struggle to maintain their financial viability while remaining competitive in the market and luring and keeping students. Executive leadership, professors, and staff are more aware of the barriers to student performance that include inadequate coping mechanisms, anxiety, stress, depression, bad eating habits, and lack of movement (Amaya et al., 2019).

Among a wellness programs and activities advantages are student, professor, and staff quality of life adjustments that can enhance health are encouraged via wellness initiatives. In result, increased health raises production, which in turn lowers the financial constraints placed on society. Students experience fewer disciplinary concerns, are better able to concentrate on their schoolwork, and develop stronger communication skills when campuses support emotional well-being. This might lead to greater academic success and long-term health (Popirtac, 2021).

Health-related programmes boost morale and inform viewers about the link between health and way of life. By participating in health promotion activities and programs on campus and in the community, students may forge closer bonds with their classmates and educators may have more opportunities to foster collaborative relationships. Programs and activities for prevention provide ways to lower risk and harm, which leads to less suffering and pain. There is evidence that productivity at work rises and absences fall (Davidson, n.d. 2017).

1.3 PROBLEM STATEMENT

The current situation of the mental health of many college students is regularly described by experts and academics in the field of mental health using terms like "epidemic" and "crisis." Lack of sleep or rest increases the risk of mental health problems among students. Mental disorders can also be brought on by dietary changes or substance abuse changes in the brain's chemistry. Several universities and colleges encourage taking a fitness course by students as part of their degree programmes since habits formed at this time can serve as a strong starting point for future health behaviours (Ridner et al., 2016). Such initiatives have been demonstrated to raise students' knowledge of lifelong wellness issues and to encourage healthy behaviour modification (Franzidis & Zinder, 2019).

Health issues like depression, anxiety, and psychological anguish are on the rise each year (Franzidis & Zinder, 2019). According to a recent study, first-year college students' psychological and social wellbeing significantly declined in the first six months after they arrived on campus (Gunnell et al., 2017). These issues may be linked to the additional difficulties that students must overcome, such as rising tuition expenses, higher academic requirements, time constraints, and stress related to being absent from home (Franzidis & Zinder, 2019). Despite the numerous health programmes and services available on campus, many students' absence the methods, expertise, or support networks necessary to control their stress levels or alter their ingrained habits (Franzidis & Zinder, 2019).

Higher education can offer levels of support not found or easily accessible in the wider society because of its sheltered setting (Oswalt et al., 2018). One problem that frequently affects students is that they have less interest in taking part in organised activities since they are unable to manage their time well. Interventions, studies,

initiatives, and policies to help this demographic improve their knowledge of health and wellness are receiving fresh emphasis (Lederer & Oswalt, 2017). Such initiatives would assist students in developing positive attitudes and teaching them how to handle difficulties they may encounter while pursuing higher education (Christianson et al., 2018), and cultivate healthy habits to fend off chronic illnesses later in life (Franzidis & Zinder, 2019). All elements of wellbeing ought to be incorporated into programming for campus-based health and wellness initiatives to be really effective. Wellness, which combines the terms "well-being" and "wholeness," is the synthesis of a variety of aspects, such as those that are intellectual, physical, spiritual, social, emotional, environmental, occupational, and environmental, that have an impact on the quality of life. (Ng et al., 2016).

There are several challenges that cause the lack of implementation of this wellness initiatives among students, including lack of knowledge about personal health. In addition, the problem of obesity that limits daily movement. It also causes less participation in this wellness initiatives. Another stressor the COVID-19 virus epidemic, which began in China at the end of 2019 and has since grown to become a global pandemic, has been included as a result. Students around the world are impacted by the pandemic in many areas of their lives, but especially as a result of campus closures, online courses taking the place of in-person classes, the decline or elimination of social connections and extracurricular activities, and more (Elisabeth Kohls,2020).

Students always have to deal with variety of health issues every day, which have an impact on their lives and restrict their ability to be active. Their capacity to function at their best may be affected by a problem with their physical or mental health. Students who expose themselves to activities such as athletics or various health programs can reduce their stress problems. It can improve physical and mental health and self-control.

Similar to Jazzercise, Zumba is an aerobic dance workout. What sets it apart is the use of Latin American music and dance rhythms to create a festive mood during class. The name of the programme has been given two different explanations. One says it is a slang expression from Colombian that means "to buzz like a bee" or "fast-moving," while the other says it was picked at random as a brand name with a Latin American flair (Williams, 2019).

Although these studies offer insightful information about student wellness, the inconsistent nature of the results calls for a need to look at a wide range teaching students to see variations in their own perceptions of wellness, behaviours, or concerns of college students (Quinn *et al.*, 2018). Researchers have urged you to conduct new research to support, contradict, or add to the present findings (Franzidis & Zinder, 2019). This study's objective was to evaluate students' perception of their wellness in order to inform the creation of campus-based health initiatives and preventative measures.

1.4 RESEARCH OBJECTIVES

The objectives of this study are as follows :

1. To explore the effectiveness that motivate students and staffs to participate in campus wellness initiatives.

2. To assess the extent of support provided by campus leadership support towards wellness initiatives.

3. To determine the level of awareness of students and staffs regarding the available campus wellness initiatives.

4. To assess the level of interest among students and staffs in participating in wellness initiatives.

5. To investigate the level of satisfaction among participants with the existing wellness facilities in the campus.

1.5 RESEARCH QUESTIONS

The research question needs to be precisely and concisely stated. The research questions that our study attempts to answer are :

1. How does motivation impact the level of participation in campus wellness initiatives among students and staffs in UMK City Campus?

2. To what extent does leadership affect the effectiveness of campus wellness initiatives in UMK City Campus?

3. What is the level participant awareness regarding campus wellness initiatives in UMK City Campus?

4. How does participant interest influence the success of campus wellness initiatives in UMK City Campus?

5. How does facilities impact the level of effectiveness in campus wellness initiatives among students and staffs in UMK City Campus?

1.6 SIGNIFICANCE OF STUDY

The relation of the independent and dependent variables, which involves motivation, leadership support, participant awareness, participant interest, and facilities, has been examined by the researcher in accordance with the topic selected from Identifying the Challenges of Campus Wellness Initiatives and Its Relation Towards Program Effectiveness among students and staffs in UMK City Campus. Students,

campus wellness initiatives, and future researchers are parties involved in the process of establishing a solution for the level of programme efficacy who stand to benefit from it.

1.6.1   STUDENTS AND STAFF

The study's findings are significant because if many wellness initiatives are conducted on campus, students will be able to learn a few ways to overcome health problems in themselves and be able to incorporate strategies for maintaining a healthy lifestyle into their everyday routine. Therefore, it benefits pupils to increase their knowledge. Students that participate in wellness initiatives can teach it to other students. In addition, wellness initiatives can provide many benefits to the student's lifestyle. A staff is a collection of people that work for a company and are responsible for carrying out a specific task. A staff is sometimes defined as a group of helpers to a manager, superintendent, or executive. The staff here represent all the lecturers and clerks at UMK City Campus.

1.6.2 BODY OF KNOWLEDGE

Examining empirical research on the subject can help a student acquire a fresh approach to resolving a problem that has been brought up in prior research projects. For example, the method used to gather the data, the sample size, and each data analysis can be modified to focus on a different issue and provide a distinctive study (Rafael, 2018). These opportunities to engage with health programs are great to avoid excessive waste of resources and this can improve the quality of health.

This study intends to provide more precise details regarding the difficulties experienced by campus wellness initiatives and to inform upcoming researchers about the availability of data on campus wellness initiatives among students or staffs. This aids in deepening the investigation into the subject pertaining to the difficulties and success of campus wellness initiatives.

1.6.3 UNIVERSITY

This study will benefits university as useful knowledge that everyone should learn. When the wellness initiatives are reactivated among students or staffs, this institution will eventually understand what crucial techniques and programmes are required for a daily healthy living. It can also identify what factors or ways to improve wellness initiatives. So that, it can implement the program more effectively to the students and staffs. It is also to prevent the waste of resources from happening. For example, responding to a challenge by participating in a national sports day.

1.6.4 COMMUNITY

Wellness initiatives also benefit the community. If the wellness programmed and activities is successful, we can replicate to the community. How important wellness initiatives are to the community because one of the goals is to produce a good health and wellbeing society. By creating socially inclusive wellness initiatives, communities can support people in living fulfilling lives and have a good impact on their general health. A healthy community benefit everyone in it. And community health is one way to achieve a healthy community. That is why it is important for students and staffs at Universiti

Malaysia Kelantan as they are usually very familiar with the community and they can practice it to the community.

1.6.5   HEALTH MANAGEMENT

This phrase describes the overall management and direction of both governmental and private healthcare organizations. In essentially, the goal of healthcare management is to make sure that everything in the healthcare sector runs properly (Wager et al., 2021). Wellness programs have to do with Health management. That is why wellness initiatives are important and can benefit Health Management. It is also to prevent the waste of resources from happening.

1.7   SCOPE OF STUDY

This study will cover the challenges faced by campus wellness initiatives and their relationship with program effectiveness. The scope of this study is to identify the challenges of the campus wellness program in solving the problem of the lack of health programs and also for study focus among student in the university. This study will be carried out in University Malaysia Kelantan (UMK) which is UMK City Campus. This research is conducted to promote and improve health programs and activities. This is for problems and solutions from this program. The data will be collected by using primary data which is questionnaire survey. This survey will be conducted by the researcher to the respondents, namely the Student Representative Council (MPP), the Supreme Council of Wellness, and staffs and students in Universiti Malaysia Kelantan (UMK) City

Campus. Result of this study can provide good idea to campus wellness initiatives and provide opportunities to prevent problems from recurring.

1.8   DEFINITION OF TERMS
1.8.1 CHALLENGES

Problems and issues that interfere with a student's capacity to live a fulfilling life are referred to as challenges. These include external problems like rising living costs that are outside of the direct control of the student as well as internal problems like poor habits that the student can manage. The difficulties in implementing wellness initiatives are the main topic of this study.

1.8.2 WELLNESS INITIATIVES

Initiatives based on the title is for programmed and the activities that have in campus wellness. According to the HealthCare website, a wellness initiative is one that aims to promote and improve one's physical and mental well-being and is typically provided through the workplace, however insurance companies may also make them available directly to its enrollers. These initiatives frequently incorporate social support, contests, behaviour modification initiatives, fitness programmes, and medical checks (Aldana, 2020). At Universiti Malaysia Kelantan City Campus there is a course on wellness. So, wellness students do learn about this wellness programmed and activities even more for fitness students. That is why this study was conducted. Examples of effective wellness programs that's on campus include Zumba, aerobics, Pilates, jogging, blood donation campaigns, Sports Days and many more.

1.8.3 CAMPUS

Campus refers to the area surrounding a university or college's buildings. Some colleges are situated on the campus of the institution they are a part of. (The school buildings and surrounding area make up the term "campus"). In this study, campus involved with wellness initiatives is Universiti Malaysia Kelantan because at UMK City Campus there is a course related to wellness. Not only that, other campuses may also be listed. A wellness initiative can be established on campus as a method to connect with faculty and the local community as well as to offer students the best possible health care (McDonald-Yale & Birchall, 2021). The campus involved in this study are UMK City Campus.

1.8.4 MOTIVATION

The term "motivation" refers to the reasons for a person's actions. It is what drives people to behave the way they do. Motivation is the process that starts, drives, and maintains behaviours with a goal. As an example, consider motivation propels people to achieve their professional goals, such as losing excess weight (Cherry, 2022). Because it gives individuals objectives to strive for, motivation is crucial for helping people solve difficulties and break bad habits (Health Direct, 2018). Students should be motivated about wellness initiatives because most students do not live a completely healthy life and also motivate to participate in wellness initiatives. For example, most students save money just by eating fast food. Students should be exposed to these wellness initiatives that how important it is for them to be involved.

1.8.5   LEADERSHIP SUPPORT

Supportive leaders are those who are prepared to concentrate on assessing what adjustments and support are available necessary to protect the wellbeing of their team and, as a result, achieve a high level of performance by removing obstacles unnecessary barriers (Lowe, 2019). Supportive leadership is a management style in which a manager helps an employee complete a task rather than simply giving tasks and anticipating outcomes. In the context of this study, "leadership support" refers to the backing of leaders like the university's administration, the faculty, the student council, and the student association.

1.8.6   PARTICIPANT AWARENESS

A method known as "awareness-raising" tries to inform and instruct people on a topic or issue with the intention of altering their attitudes, behaviours, and beliefs in order to fulfil a specific objective or goal (Guan et al., 2019). Participants' awareness is important to improve themselves in all aspects. This wellness initiatives can make students and staffs aware of how important this wellness initiatives are in themselves to ensure an effective future. The participant awareness on this study is about the healthy lifestyle practise among them.

1.8.7   PARTICIPANT INTEREST

Wellness initiatives is an exciting programme and activities that involves the fitness and health of students or staffs. The well-being initiatives can be of interest to

participants because it is a program that benefits us on mental health and so on. Programs and activities for student health on college campuses must provide greater opportunities and services, while limiting access to barriers that impair overall student health. In order to supply the diversity of health-related services and facilities accessible to students, a robust support system must use engaging ways to address students who place a high priority on their health and well-being (Christianson et al., 2018).

For the UMK City Campus students and staffs, the participants' interests should take precedence (UMK). Maintaining the student's way of life depends heavily on the participants' interests. The importance of wellness initiatives in student life is due to this.

1.8.9 FACILITIES

Facilities are buildings, pieces of technology, or services made available for a particular use. Among the challenges facing campus wellness initiatives are facilities. Facilities around the campus to make the wellness program successful need to be provided by the campus such as Universiti Malaysia Kelantan (UMK) City Campus. Facilities are important to create wellness programmed and activities among students. Examples of facilities are jogging track, equipment and gym area are limited and others. These facilities are a potent symbol of a campus's dedication to its health and wellness goal and a priceless instructional resource for assisting students in getting ready for a long and healthy life.

1.9 SUMMARY

The study's executive summary is covered in this chapter. It serves as the study's introduction. This chapter provides a clear definition of the study's background, problem statement, research aims, research questions, definition of terms, and study significance. This study aims to identifying the challenges and the level of effectiveness of campus wellness initiatives among students and staffs in UMK City Campus. The focus of the following chapter will be on the research study's literature.

CHAPTER 2

LITERATURE REVIEW

2.1 INTRODUCTION

This chapter will examine the research on dependent and independent variables in an original way. The level program effectiveness of motivation, leadership support, participant awareness, participant interest and facilities. The dependent variable is level program effectiveness students and staffs from Universiti Malaysia Kelantan (UMK) City Campus.

2.2 LITERATURE REVIEW

Wellness initiatives is a programme and activities that tries to improve one's physical and mental health. These initiatives are normally offered through the workplace, while insurance companies occasionally make them directly available to members. The business or plan may use the programme to offer employees premium discounts, cash incentives, gym memberships, and other sign-up incentives. A few wellness initiatives include programmes and activities to assist students or staffs in quitting smoking, manage their diabetes, lose weight, and receive preventative health exams.

The term "wellness of the student" means the total health of a student, which encompasses their social, mental, physical, and emotional health. Enjoyment and life satisfaction are inextricably tied to student well-being. In other words, a student's wellbeing is determined by their perspective on life and on themselves (Popirtac, 2021). Campus has an impact on everyone, including professors, staffs, and students. Campuses

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have the opportunity to empower youth and spread the advantages of humanity. They have the capacity to integrate students' welfare into their learning processes. Students' academic success, self-motivation, and campus satisfaction may all increase as a result. It can also minimise discipline issues and increase prosperity on a local, national, and personal level.

The benefits of wellness services are numerous, and events and aspects of programmes and activities that support wellbeing can be used to communicate important messages to students. The programme scan aims to lessen anxiety, fear, and other stressors as well as pupils' emotional and mental responses to stressors. According to Cambridge High School, wellness initiatives in educational institutions will considerably improve the wellbeing of both students and teachers (Academy, 2021).

It's crucial to encourage wellness activities in order to lessen worry. In order to succeed academically, students also experience anxiety related to studying, handling testing, and completing assignments. Wellness practises, as well as encouragement and support for learning, can lessen fear. Wellness initiatives are advantageous for both staff and children, and they could have a lasting effect on raising quality of life and educational outcomes (Academy, 2021).

2.2.1 MOTIVATION

Motivation is crucial for identifying variables that might affect why people decide to finish the course. For example, perceived internal and personal incentives for completing a task or action, such as greater knowledge or a sense of success or self-worth, can be classified as intrinsic or extrinsic sources of motivation. A person's want to conduct

or act in a way that will satisfy specific conditions or demands, which typically includes wishes, desires, or objectives, is referred to as motivation (Yilmaz et al., 2017).

Many mental health practitioners think that the fundamental drive to enhance pleasure, reduce physical suffering, and promote well-being underlies motivation. As it energises a student to work towards achieving a specific goal, or in other words, as it gives the actions a sense of purpose, motivation is thought of as a prerequisite for learning. According to certain research, when we feel powerless to exert control, for instance, we tend to give up easily (Gacek et al., 2017). Others have demonstrated that when we are pressured, we lose access to our inner resources for motivation (Ryan & Deci, 2019).

Mental health problem among student can be reduce by gain motivation in wellness initiatives university (Al-Kumaim et al., 2021) . Programs for wellness actively involve students in activities that reduce anxiety, stress, and other mental health issues that may have an impact on how well they learn. In order for students to have successful futures, educators must provide them with the knowledge, abilities, and general health and well-being. Increasing wellness initiatives can benefit both the educator and the student. For students' mental health to be under control amid the pressure of online learning, such as when COVID struck, real motivation is required. Participating in the university's welfare programme and activities will give students access to it.

2.2.2 LEADERSHIP SUPPORT

There are numerous definitions and interpretations of leadership. The leadership development models that originated in the framework of work organisations had limited application to students in learning environments as a result of emphasising employee-employer relations in a corporate environment (Shek & Lin, 2016). One of the earliest

theories of leadership was the "Great Man Theory," which claimed that leaders were born, not made (Lumpkin & Achen, 2019). In sharp contrast to this, contemporary approaches to leadership development view leadership as a relational activity rather than the exercise of hierarchical power. According to modern views, leadership is a skill that can be learned and as a result, can be taught and developed over time (Kelly, A., & Azaola, M. C.,2015)

As many leadership typologies as there are actual leadership philosophies certainly exist. Ironically, a large portion of them is produced by individuals who lack the essential knowledge and experience, and as a result, their calibre can range from analytical models that advance theory to straightforward folktales intended to support a saleable concept for lecture tours. There may not be many adjectives left that haven't had "leadership" appended to them at some point, but there hasn't been much research done to determine how these apparently revolutionary concepts have affected student performance.

Many leaders fail to recognise the importance of mental health awareness, although doing so would be detrimental to the long-term success of any organisation. It's crucial for students to have a thorough awareness of their team and a general sensitivity to their wellbeing as a leader. If any team member is experiencing personal difficulties that bleed over into their work life without receiving any help, the team cannot function properly. In communications with the students, be open and honest about mental health, stress, and participation.

By being open and honest, they express their appreciation of and comprehension of the student's feelings, thoughts, concentration, and presence are just as vital as financial gain. Speaking candidly about this subject with their friends or a counsellor serves as an example for them for how to talk to their pupil. Think about discussing their own

experiences with mental health. Honest and open communication among leaders is a sign of strength, not of weakness (Grossmeier et al., 2019).

2.2.3 PARTICIPANT AWARENESS

People need knowledge about the actions and intentions of their co-workers when they collaborate in a shared setting, whether it be virtual or not. Successful cooperation requires this knowledge, especially when using groupware solutions (Collazos et al., 2018). One of the most well-known definitions of awareness is a comprehension of other people's activities, which provides context for a person's own activity. This knowledge of others is the outcome of the interaction of the participants and their environment (Collazos et al., 2018).

The prevalence of depression and anxiety disorders was found to be undergraduate students received 15.6%, while graduate students received 13.0%., indicating that there are a variety of mental health issues on college campuses for which students need support (Lipson & Eisenberg, 2017). 14.9% of college students reported having received a diagnosis of depression at some point in the past, of whom 32% had experienced depression in the previous year, 24.5% were undergoing psychotherapy at the time of the research, and 35.6% were taking an antidepressant (Oswalt et al., 2018).

Therefore, it is more common for mental health issues to go untreated among college students, and it is unclear how and where they seek treatment or whether previously noted trends in who uses resources more frequently still hold true when only focusing on on-campus services. It is crucial to monitor the use of on-campus services in the context of particular mental health issues and risk factors in order to ensure that students receive the assistance they require (Bourdon et al., 2018).

There is a severe lack of participant awareness of mental health issues, particularly among students. This presents a significant challenge because students tend to think this issue is common because they are unaware that they can participate in health programmes and activities at the same time. Lack of understanding of the extent to which particular situations could precipitate signs of mental illness. Given the various triggers for mental illness that college students experience (Dieringer et al., 2017). The students' capacity to recognise the risks connected with particular social and academic settings may be significantly hampered by this information gap.

From freshman to junior year, there is a declining awareness that specific experiences might be the beginning of anxiety symptoms. One new pattern is this one. Even though first-year college students reported having a considerable need in this area, it was considerably less than what their classmates in their sophomore and junior years reported. Students weren't able to identify certain situations as causing increased anxiety until their senior year.

2.2.4 PARTICIPANT INTEREST

The majority of health initiatives only reach people who are already driven to take care of their health, according to ongoing studies of participation rates in wellness programmes and activities. Less motivated people will avoid topics like clear awareness of mental health issues and the significance of wellness programmes and activities. The people who are least knowledgeable about the subject are those who need this incentive the most. The fact that student health efforts are overly complicated, time-consuming, or challenging is another factor in the low participation rates in wellness initiatives. It's difficult to establish habits that last while making large, radical changes.

The evidence for success is less positive if the objective of health programming is to lower health care costs, reduce absenteeism, or improve chronic health issues (Heidi Zwart, 2018). As we all know, university students are less interested in wellness initiatives if they are not given the proper emphasis, and if they are not given more attention, they are exposed to the hazards of this mental health to students. The majority of them might believe that it is commonplace and won't hurt them or those around them.

Interventions, studies, initiatives, and policies to help this demographic improve their knowledge of health and wellness are receiving fresh emphasis (Lederer & Oswalt, 2017). Such programmes and activity would assist students in developing healthy habits, learning how to deal with obstacles they encounter while pursuing higher education, and developing healthy skills to stave off chronic illnesses in later age (Christianson et al., 2018). (Franzidis & Zinder, 2019), according to some academics, higher education institutions have a responsibility to advance this population's health because it is essential to their goal (Lederer & Oswalt, 2017).

2.2.5 FACILITIES

The type of campus recreation facilities is sometimes one of the deciding considerations for college enrolment for college students (Andre et al., 2017). Additionally, obtaining a degree after successfully completing a college career is one of the top focuses for institutions across the country (Makubuya et al., 2020). Student outcomes related to campus recreation, according to the Council for the Advancement of Standards in Higher Education (CAS), can be used to gauge the effectiveness of campus health and wellness programmes (Wells, 2015). Some of the domains in which the CAS-related student learning outcomes lie include knowledge acquisition, integration,

construction and application, cognitive complexity, inner growth, interpersonal skill, compassion and civic participation, and practical skill (Makubuya et al., 2020).

Recreational sports departments should use the dimensions associated with these domains as benchmarks for their programming and providing services. Learning outcomes for students are distinctive client qualities that might give the facility information about the likelihood of client intention for referral and repeat business. To maximise the effects of leisure activities on the student body on service delivery, collegiate recreation departments collaborate campus stakeholders to ensure that they are promoting the educational objectives for their institutions (Makubuya et al., 2020).

Institutions that offer services for students that connect to recreation frequently think about how to improve students' lives and experiences. Climbing walls, elevated walking or jogging tracks, and other sophisticated recreation facilities are now commonplace, and a variety of other attractions rather than the outdated locker rooms and court gymnasiums (Kampf et al., 2018). In higher education, institutional initiatives to satisfy CAS requirements frequently give focus to areas related to student services (CAS, 2015). As a result, recreation initiatives are faced with figuring out how to enhance student experiences while also achieving student learning objectives.

2.3 HYPOTHESIS STATEMENT

The main objectives of this research are to identify the challenges of campus wellness initiatives and its relation towards program effectiveness. The specific objectives of the research are:

Hypothesis 1: Motivation

Motivating someone to take action in order to accomplish a goal is the process of motivation. A person's urges, needs, and desires can serve as the basis for motivation, which can fuel behavior. Every program done aims to motivate and inspire the audience. However, it has become a challenges of campus wellness initiatives because the attitude of some individuals who do not have awareness and high motivation within themselves has caused a person to lack self-confidence and quickly give up hope in achieving their dreams. This will cause symptoms of physical and mental health disorders for a person.

Therefore, with the existence of campus wellness initiatives, it can provide effectiveness to individuals who participate in the program and activities. Among them is being able to increase the level of confidence and motivation in everyone. There are several benefits derived from the program and activities to motivate students and the public. One advantage is that motivation is an internal condition that energizes students, guides them in specific directions, and maintains their interest in particular activities (Prebensen, 2017). When the cognitive and behavioral processes required for learning are voluntary and within the control of the student, motivation frequently affects whether and how much the student really learns a difficult activity.

Whether college students continue to pursue something after they have learned how to do it successfully is primarily determined by their drive (Wong, 2020). These advantages presumably result from motivated college students participating in learning-enhancing activities, such as attending class, actively participating in discussions, reviewing new course material frequently, organising their knowledge and connecting it to what they already know, and applying their skills and knowledge in various contexts. (Cho et al., 2019). Additionally, they felt confident in their ability to study and were free

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of fear and boredom (Lee et al., 2021). Students assess their progress and feel more effective about learning as they acquire new skills. Increased self-efficacy and optimistic outcome expectations frequently inspire more drive, which drives quality improvement (Ruegg, 2018).

H1: There is a relationship between the motivation among student and staffs, and the effectiveness of the wellness initiatives.

Hypothesis 2: Leadership Support

Being a leader is taking charge of a team or an organization. Until their students and staffs are capable of working independently, supportive leadership will typically guide and assist their subordinates with tools and resources. Additionally, supportive leadership is constantly prepared to assist and provide assistance to its people in order to achieve high performance. Supportive leadership also cares about the health and well-being of the employees under them (CFI Team, 2022). Leaders can therefore enhance student performance at campus and staff health by implementing campus wellness initiatives. However, chronic diseases faced by student and some staff who consider their health to be a minor issue become the challenges of campus wellness initiatives. This is because it will cause a decline in students and staff's performance and increase the number of high their absenteeism at work.

However, this problem can be solved by having wellness programs in the workplace. This is because this program and activities is able to provide good effectiveness to leader and students and also staffs. Programs frequently incorporate health-screening exercises to detect health hazards and actions to lower risks and

encourage healthy lives, according to the report (Mattke et al., 2015). The majority of employers who offer wellness programmed (72 percent) describe their programmed as a combination of screening procedures and treatments (Mattke et al., 2021). Wellness benefits may be offered by leaders or vendors to all student or group health plan participants.

Health Risk Assessments (HRAs), which are self-administered questionnaires on risk factors like body weight and behaviors like exercise habits, are used in screening activities. These activities may also consist of clinical examinations to collect biometric information such height, weight, blood pressure, and blood glucose levels. The leader uses the results for programmed planning and assessment as well as for guiding staff members toward preventive measures that address their health risks. According to statistics from the RAND Employer Survey, 80% of firms who offer wellness programs also check their workers for health concerns.

Primary prevention can be achieved through addressing employees who have secondary preventive, lifestyle management risk factors for chronic disease can be achieved by enhancing disease control in individuals who have demonstrable chronic disorders (Meng et al., 2017). Although over 80% of businesses with wellness programs and activities offer nutrition and weight-control activities, and smoking cessation programs are provided by 77% of employers, while lifestyle management programs, which are provided by 77% of businesses with a wellness program, focus on a wide range of risk factors. Additionally, leaders provided some sort of intervention for weight loss and nutrition, as well as smoking cessation services via telephone counselling or instructional program.

Leadership support is crucial in supporting the formation of well-being initiatives among students and staffs at UMK City Campus. This is because, if they do not receive support from the leader, the well-being of the program will simply disappear.

H2: There is relationship between leadership support and the effectiveness of wellness initiatives effectiveness.

Hypothesis 3: Participant Awareness

There are difficulties in measuring awareness or knowledge of problems. The term awareness is not quite obvious to begin with. Being aware entails having knowledge of, realizing, or showing interest in something, as well as knowing that it is significant. According to the Oxford Advanced Learner's Dictionary, awareness is knowledge of something. Program awareness among participants wellness is defined as an individual's awareness, understanding, and appreciation of their own health after engaging in a campus wellness initiative (K Abdul Gafoor., 2012).

Although the wellness initiatives are able to increase the level of people's awareness, it still has some challenges to make it successful. One of the challenges is time limitations. Being busy these days causes people to not have the opportunity to participate in health programs and activities held. In addition, another challenge is that people are not interested with the topic presented. The attitude of some people who do not care and are not interested in the health topic that will be discussed causes people to have no awareness about health.

Despite the challenges faced, this wellness initiatives are actually able to provide effectiveness to everyone involved. Among the effectiveness is participants can gain

awareness on the importance of maintaining the health of the body. Participants can also gather a lot of knowledge about good health and exercise. Exercise program and activities can have a variety of beneficial side effects, including as regulating weight, preventing illness and disease, and reviving one's zest for life. We may be familiar with the research literature or have personally experienced these effects. Good physical health can increase work productivity and avoid high disease rates in the community, especially university students and workers.

H3: There is a relationship between participant awareness and the effectiveness of wellness initiatives.

Hypothesis 4 : Participant Interest

Wellness initiatives are very important to attract participants in their teenage years. It defines the proper growth of a student. It also expresses the student's other skills and development. Each campus has a main motto for developing student wellness initiatives on their campus. Therefore, they finally start interacting with their students with some programs that benefit their students. Student wellness encompasses students' overall health, including their social, mental, physical and emotional health. Fun and life satisfaction are closely related to student wellness. In short, students' wellness is how they see themselves and their lives (Popirtac, 2021).

The interest of students or participants is very important in the wellness initiatives because their well-being and academic excellence are interrelated. Therefore, the UMK City Campus should not only be a place for students to study. They should also be places where student wellness comes first, while still delivering excellent teaching and

learning activities. A student is in a mentally wellness state when they are able to identify their potential, cope with day-to-day problems, work professionally and creatively while giving back to their communities. In a variety of ways, campuses can have a significant impact on students' mental health.

The degree to which students feel protected and physically healthy is linked to their physical wellness in school and other environments. Regular exercise, preventive health care, diet, and physical safety and stability, are all included. Beneficial health outcomes are enabled by physical wellness. Physical wellness can be promoted on campus through encouraging physical activity and providing a safe environment, as well as nutritious food (Popirtac, 2021).

That is why interest on health programs and activities are important among university students.To attract participants in wellness programs is to participate in activities that are important and meaningful to them, to have a sense of emotional control, to be valued, valued, and driven to achieve success, to experience a sense of belonging in their community, have value and meaning in life and be part of a positive relationship.

H4 : There is a relationship between participant interest and the effectiveness of wellness initiatives.

Hypothesis 5 : Facilities

Because it guarantees that work is completed in a secure and comfortable setting, facilities management is crucial. People feel good, are invigorated, productive, and excited about their work when they work in a positive setting. It will encourage people to show up for work and work hard when they are there. Numerous significant facets of the

student experience are regarded as elements of overall wellness. It includes interacting with others, physical activity, good nutrition, rest, and awareness. Each has an effect on the physical and emotional well-being of students. They will be able to lower their stress levels, engage in healthy social connections, and attain their best levels of wellbeing by making small, healthy decisions every day (Pfizer, 2022). To build a good dimension of well-being, well-being facilities are important to develop the effectiveness of well-being initiatives.

Among the examples of facilities that must be present in the health initiatives at the university to foster students' interest in the health program are fitness centres, smoking cessation programs, paramedic services, jogging tracks, adding fitness centre facilities such as dumbbells, yoga classes and others. . This can overcome mental health problems among students. With the availability of facilities in the campus welfare program, it can make students become better and think rationally. With the existence of this welfare program and activities, it can strengthen the effectiveness of the program.

H5 : There is a relationship between facilities and the effectiveness of wellness initiatives.

2.4 CONCEPTUAL FRAMEWORK

Five independent variables (IVs) are the motivation, leadership support, participant awareness, participant interest and facilities among The Challenges of Campus Wellness Initiatives. The dependent variable is the programme efficacy level (DV). This study attempts to look into the difficulties campus wellness initiatives face

and how they relate to the success of the programmes and activities at Universiti Malaysia Kelantan (UMK) City Campus. The following is the research's theoretical foundation:

Independent Variable   **Dependent Variable**

| Motivation | H1 |

| Leadership support | H2 |

| | Level of The Initiatives Effectiveness |

| Participant awareness | H3 |
• The Frequency of Initiatives
• Effect of an Initiatives

| Participant interest | H4 |

| Facilities | H5 |
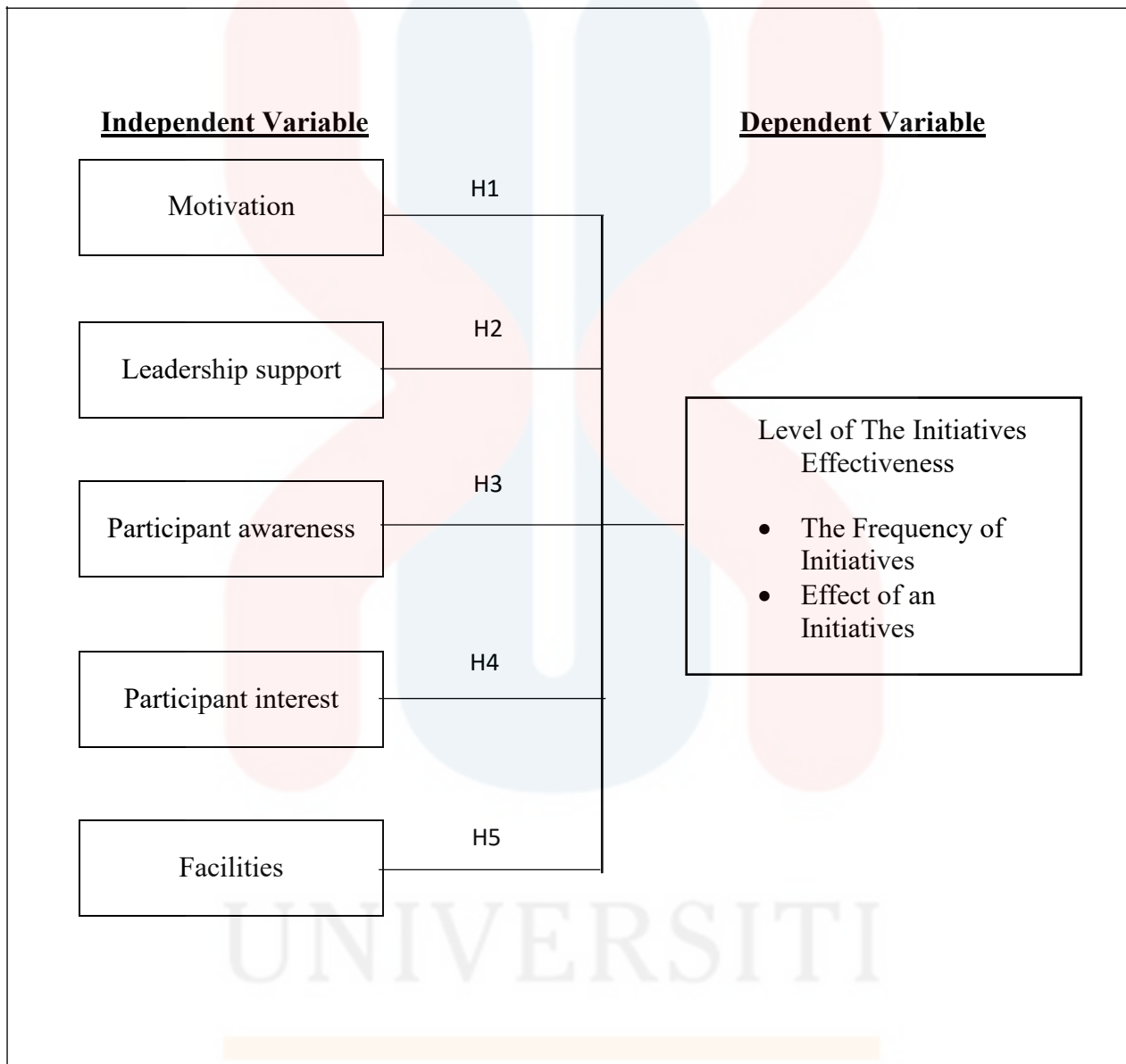
Figure 2.1 : Conceptual Framework

The link between the individual variables and the dependent variable in this analysis is shown in Figure 2.1. Certain presumptions about the context-based relationship between the dependent variable and the independent variables may be made by researchers. In this study, the level of initiatives efficacy is the dependent variable

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(DV), whereas the independent variables are motivation, leadership support, participant awareness, participant interest, and facilities (IV). The dependent variable (DV) which is level of programmed and activities effectiveness measured by the frequency of initiatives and effect of an initiatives. This research will identify the relationship that researchers mentioned in Figure 2.1 between the independent variables and dependent variable among students and staffs of Universiti Malaysia Kelantan (UMK) City Campus.

2.5 SUMMARY

The dependent and independent variables are the main topics of discussion in this chapter's review of the literature related to the study. To make the research issue more understandable, each dependent and independent variable for this study has been defined. A person's ability to express themselves through a variety of behaviours is referred to as their "lifestyle," which varies according to their level of vulnerability and resilience as well as the types of tasks they perform. The degree to which a programme is effective in terms of facilities, participant awareness, leadership support, participant interest, and motivation. Students and staffs from UMK City Campus level programme effectiveness is the dependent variable. There is a relationship between the independent and dependent variables. Conceptual framework has been developed and presented of the end of a chapter.

CHAPTER 3

METHODOLOGY

3.1 INTRODUCTION

The purpose of this chapter is to examine the methodology used in this study. The research design, sample size, sampling technique, data collecting, instruments, data analysis, and anticipated outcomes will be included in this chapter. This study will cover every point in detail and explain how it works. The chapter will provide a better understanding of the methodology in this study. Additionally, the study design, sample frame, population, sampling technique, sampling size, unit of analysis, data collection procedures, instrument, and validity will all be used in this chapter to ensure that the research's goal is achieved.

3.2 RESEARCH DESIGN

The goal of this study is to make sure that the data obtained will successfully help the researcher address the research challenge at hand (USC Libraries, 2018). The most effective approach for the study can be viewed as a research design, which is an interpretative methodology. The questionnaires utilised in this study's examination structure are a quantitative approach, and all of the information collected from respondents will be used as the study's primary data. The primary source of information from this primary data is from Google forms.

By examining the data, an analyst will be able to determine how the independent variable (IV) and dependent variable (DV) are a similar structure that involves setting up

and structuring a study strategy. Given that the quantitative data was acquired through the survey, this investigation technique makes use of it. The questionnaire includes information on age, gender, study profile, ethnicity, academic year, and other factors. The surveys have three sections: A, B, and C which relate to independent variables, dependent variables, and demographic variables, respectively. There are around 362 respondents from the UMK City Campus students and staffs who will be chosen for this study.

3.3 POPULATION

A research population is a sizable collection of individuals or things that are the subject of a scientific investigation. The purpose of research is to benefit the general public. A "research population" is a precisely defined group of people or things that are recognised to have certain characteristics. Typically, every individual or object found within a community possesses some form of defining characteristic (Explorable, 2019). The participants in this study are students and staffs from the UMK City Campus. Consequently, the study's target audience is made up of students and staffs from UMK City Campus. The target population in this research was the 6522 population of all students and staffs from UMK City Campus. These respondents' demographics can be used to create a poll that examines the difficulties faced by campus wellness initiatives and how they relate to the success of those initiatives. In the state of Kelantan, researchers have access to all data.

3.4 SAMPLE SIZE

The purpose of this study was to ascertain the difficulty of campus wellness initiatives and its relationship to the success of the programmes and activities. The number of subjects included in the observation and study is referred to as the sample size. The sample size is an important factor to take into account while conducting an empirical study with the goal of drawing conclusions about a population from a sample (Kretzschmar & Gignac, 2019). The size of a random sample must be large enough to generalize without introducing biases or inaccuracies in sampling.

The selection of the sample is made in light of the diversity present in the population, the investigators' goals, and the statistical modelling techniques to be used, among other factors, to determine whether the sample size is enough (Taherdoost, 2017). The data collection of study for the population size is around 6522 students and staffs. Source of the number of students based on the data applied according to each faculty available at UMK City Campus. Meanwhile, the sample size that will be used is 362 students and staffs according to the suggestion of Ziafati Bafarasat (2021).

Population Size	Sample size					
	Quantitative variables Margin of error=3%			Qualitative variables Margin of error=5% Population proportion=50%		
	Confidence level(1−α)			Confidence level(1−α)		
	1−α =90% Z =1.65	1−α =95% Z =1.96	1−α =99% Z =2.58	1−α =90% Z =1.65	1−α =95% Z =1.96	1−α =99% Z =2.58
100	46	55	68	74	80	87
200	59	75	102	116	132	154
300	65	85	123	143	169	207
400	69	92	137	162	196	250
500	72	96	147	176	218	286
600	73	100	155	187	235	316
700	75	102	161	196	249	341
800	76	104	166	203	260	363
900	76	105	170	209	270	382
1,000	77	106	173	213	278	399
1,500	79	110	183	230	306	461
2,000	83	112	189	239	323	499
4,000	83	119	198	254	351	570
6,000	83	119	209	259	362	598
8,000	83	119	209	262	367	613
10,000	83	119	209	264	370	623

Figure 3.1: A general table of sample size.

3.5 SAMPLING METHOD

The act of picking a sample from a population is known as sampling. The sample must be chosen in a way that will ensure that the population it represents is accurately represented. Appropriate sample methods must be employed to assure accuracy. The methods used to pick samples from the population and the samples that are ultimately chosen must be unbiased and representative of the population. It depends on the population's homogeneity or heterogeneity, the accessibility of the sample frame, the research project's importance, and the research project's budget. The two components of sampling technique are probability sampling and non-probability sampling.

The definition of random sampling, also known as probability sampling or chance sampling, is the assumption that each component of the universe has an equal likelihood of being present in the sample. Non-random sampling, often referred to as non-probability sampling, is a technique in which the sample is chosen without regard to how likely it is that a given unit will be included in it, but rather by other factors, such as the sampler's experience, intention, and common sense (N. Rai & B. Thapa., 2015). By taking into account the population's and the survey's time constraints, the researchers adopted the convenience sampling technique, which is in non-probability sampling.

Accidental sampling is the term used for convenience sampling. Which responder was chosen because they happened to be in the appropriate location and time. In addition, respondents can also consist of anyone without the need for specific criteria, where they themselves are willing to participate. Convenience sampling is also easy to do because researchers can get sampling information in a short time and this sampling method can also save research costs.

The students and staffs of UMK City Campus are to receive the questionnaires. Convenience sampling will be used in this research project because Universiti Malaysia Kelantan's City Campus student and staff's populations are relatively huge. This is due to the fact that students from the Faculty of Hospitality, Tourism and Wellness (FHPK), the Faculty of Entrepreneurship & Business (FKP) and Faculty of Veterinary Medicine (FPV) attend Universiti Malaysia Kelantan (UMK). The researcher will utilize this sampling technique on 362 respondents, as it will be hard to include the entire population of 6522 students and staffs at UMK City Campus given the low participation rate.

Convenience sampling is inexpensive, simple, and has easy access to the subjects. The main objective of convenience sampling is to collect data from subjects who are easily accessible to the researcher. Convenience sampling will represent the population regarding the challenge of campus wellness initiatives and its relation towards program effectiveness. What makes convenience samples so unpredictable is their vulnerability to severe hidden biases (Acedemia edu.,2016)

3.6 DATA COLLECTION PROCEDURE

Data collection is a methodological process of collecting information about a specific subject. The result of this data collection will be the answer to the questionnaire that is to be studied. It refers to the respondent's answer through the questionnaire that will be conducted. Based on well-defined research questions and objectives, a quantitative technique was used in the study. The questionnaires were given to students and staffs of UMK City Campus for provide insight into the challenges of the campus wellness initiatives and its relationship with the effectiveness of the program. The questionnaire was distributed through online and social media like WhatsApp and

collected data among students and staffs in UMK City Campus. The students answered the questionnaire according to the condition and related to their current situation as well.

There are 362 involved respondents consisting of UMK City Campus. All of the questions are to be answered by respondents, and the researcher will pick responses at random from the questionnaire. Data will be collected and analysed through forms questionnaire. The parties' researchers need to concentrate on independent variables that affect the difficulties of campus wellness initiatives among students and staffs at UMK City Campus through the responses provided on the questionnaire.

3.7 RESEARCH INSTRUMENT

The equipment a researcher uses to gather the term "research instrument" is used to describe data. In nursing studies, scales and questionnaires are the most used tool types. The choice of the tools is guided by the research issue. Based on a study of the data requirements, the type of research instrument is chosen (Sathiyaseelan. M,2015).

The questionnaire was utilised in this study to collect data and compile all the information needed to finish the study. The questionnaire is the ideal tool for gathering data since it asks respondents to provide written or verbal responses to a series of questions. In addition, this kind of research is typically less expensive than other approaches. There will be a multilingual version of this questionnaire available in both English and Malay.

3.7.1 QUESTIONNAIRE SURVEY

In order to get data from respondents for this study, the researcher will employ the questionnaire method, a form of research tool that entails a series of questions or other prompts (Swetha Amaresan, 2019). Both closed and open questions are frequently seen on a research questionnaire. This questionnaire's objective was to gather information from respondents on the difficulties the campus wellness initiatives face. To explain the matter, this questionnaire was constructed by dividing it into two parts Part A, Part B and Part C. Part A is recorded from UMK City Campus students and staff's demographics. Meanwhile, part B and part C is given a measurement scale for students to choose their own opinions. The demographics section of Section A was created to gather data on the proportion of male and female students and staffs who took part in this survey.

The demographic section is very important because it can count and summarize the current participating categories questionnaires were given to respondents. In part B, respondents were given questions based on independent variables such as motivation, leadership support, participant awareness, participant interest and also facilities and part C the question about dependent variables such as the level of program effectiveness which is measured qualitatively in terms of programmed frequency and programmed effects. The questionnaire is provided in the form closed questions and bilingual in English and Malay. The questions generated by, are accurate and thorough to ensure the respondents who answered can understand the question clearly. With this the challenge of the campus welfare program can be seen by the measurement scale was used to study to collect the data among the students involved.

3.7.2 CONTENTS

Demography is the study of the population based on factors such as age, race and gender. Through this demography the researcher will get information about the respondents that are involved in terms of gender, age, race and course. This data about this survey is taken from (Hayes, 2022). Data on demographics were collected from the UMK City Campus which has male and female students and staffs. They have agreed to provide views on the challenges of the campus wellness initiatives. Through the results of the demographic data that have been conducted can be divided and made a decision for this study. There are 3 sections in the questionnaire survey which are Part A, Part B and Part C. Total questions for each section as below:

Table 3.1 : Questionnaire Survey

Part	Questions
Part A Demographic	8 Questions
Part B Independent Variable	31 Questions
Part C Dependent Variable	8 Questions

3.7.3 MEASUREMENT SCALE

The measurement scale used to collect answers from respondents about challenges to the campus wellness initiatives. The researcher can identify whether or not the answers given are related to the learning study being conducted. The measurement scale is helpful since it offers a number of ready-made response alternatives and is ideal

for determining the respondent's response (Elliott, 2021). The measurement scale type that being using for this research are Agree to Disagree measurement scale:

1. Strongly Disagree

2. Disagree

3. Undecided

4. Agree

5. Strongly Agree

3.7.4 INSTRUMENT VALIDITY

A pilot study was selected to examine data on the challenges of campus wellness initiatives and their relationship to program effectiveness among students. The quantities method is being employed in this study based on the questionnaire. 30 students will participate in this pilot study. The reliability of independent variables and dependent variables from the prior research are used in this pilot study. A pilot study at the UMK City Campus was conducted to manage this part, with a special focus on the FHPK students who would be participating in the research. We made a google form to make it simple for respondents to respond, and we distributed it at random to 30 students and staffs from UMK City Campus.

The term "reliability" describes how consistent a test is or how dependent it is on the characteristic being measured. Consistency in testing, study, observation, or other measuring methods is a synonym for reliability (Mohajan, 2017). This test is distinguished by high dependability when determining if test results are reliable,

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repeatable, and independent of measurement error. Reliability The Cronbach Alpha method is employed to evaluate item consistency.

Internal consistency, or how closely connected a group of items are to one another, is measured by Cronbach's alpha. It serves as a gauge of scale dependability. Even if alpha has a "high" value, the metric might not be one-dimensional. Other investigations can be carried out if you want to show that the scale is one-dimensional in addition to assessing its internal consistency. Uncovering dimensionality can be done in one way, with exploratory factor analysis. Technically speaking, Cronbach's alpha is a coefficient of dependability (or consistency) rather than a statistical test (UCLA, 2021).

Table 3.2: Cronbach's Alpha Coefficient

Cronbach's Alpha	Internal Consistency
$\alpha \geq 0.9$	Excellent
$0.9 > \alpha \geq 0.8$	Good
$0.8 > \alpha \geq 0.7$	Acceptable
$0.7 > \alpha \geq 0.6$	Questionable
$0.6 > \alpha \geq 0.5$	Poor
$0.5 > \alpha$	Unacceptable

3.8 DATA ANALYSIS

Descriptive analysis is used by the researchers to provide more information about the fundamental characteristics of the study's data. Data reduction is what descriptive analysis is also referred to as (Loeb et al., 2017). The organisation of the sample, measurements, and data summary will aid this research. The study's variables

will be broken down into the simplest data possible using descriptive analysis (Holcomb, 2016).

The statistical tool, often known as the Statistical Package for Social Science, is a tool used in data analysis (SPSS) version 26 to analysed the data obtained. The SPSS programme aids analysts in selecting the most effective measurable approach to employ. Measurements based on SPSS data include mean, variance, standard deviation, and the frequency. The researcher chose a straightforward descriptive analysis, reliability analysis and correlation analysis to evaluate the data. One variable is considered in a frequency distribution sequentially, which is a mathematical distribution. The frequencies will be gathered, and a comparison will be made using the information provided.

One variable is taken into account at a time in a frequency distribution, which is a mathematical distribution. The frequencies will be gathered, and a comparison will be made using the information provided. The information gathered will be used to demonstrate how the Universiti Malaysia Kelantan's campus wellness initiative's identification of issues affects the program's efficacy. The objective is to count the number of respondents who are partners with different values for one variable and to quantify this count as a percentage. This approach was chosen by the researcher because it makes it simple to comprehend and analyses the data. Additionally, this approach yields a prompt and precise outcome.

Table 3.3: Data Analysis

Research Objectives	Data Analysis
RO 1	Inferences Statistics
RO 2	Inferences Statistics
RO 3	Inferences Statistics

RO 4	Inferences Statistics
RO 5	Inferences Statistics

3.8.1 DESCRIPTIVE STATISTICS

Basic aspects of data analysis are defined by descriptive statistics. Through the straightforward use of samples and metrics, descriptive analysis aids data researchers in interpreting data (Gupta et al., 2019). A summary of samples and measurements is provided by descriptive statistics. Quantitative data analysis might start with a straightforward graphical analysis. Researchers who require well-regulated quantitative additions can also employ descriptive statistics. Additionally, descriptive statistics assist researchers in keeping an organized set of massive data.

The three main categories of descriptive statistics are frequency distribution, measures of variability, and measures of central tendency. Both quantitative and qualitative data are employed in the frequency distribution, which displays the frequency or count of distinct outcomes in a data collection or sample. The frequency distribution is frequently shown as a table or graph. The count or frequency of the values' occurrences within an interval, range, or particular group are included for each entry in the table or graph. The number of instances in each class are displayed or summarized in a frequency distribution, which is separated into mutually exclusive groups. It makes it possible to show unstructured material in a more organized and organized way. Examples of typical graphs and charts used in the presentation and visualization of frequency distributions include bar charts, histograms, pie charts, and line graphs. (CFI Team, 2022).

A dataset is said to have a central tendency if its descriptive summary uses a

single number to represent the middle of the data distribution. Measures of central tendency are sometimes referred to as measures of central placement. The mean, median, and mode are the indicators of central tendency. The most common way to quantify central tendency is to utilize the mean, which is the average or most frequent value in a set of data. The median is the middle score for a set of data arranged in ascending order. The mode of a data set is the score or value that appears the most frequently (CFI Team, 2022).

A summary statistic that measures variability that reflects the degree of sample dispersion. The variability measures tell us how far the data points seem to fall from the center. The terms dispersion, spread, and variability denote the depth and breadth of the distribution of values in a data collection. The range, standard deviation, and variance, respectively, describe the spread's many components and characteristics (CFI Team, 2022).

3.8.2 INFERENCE STATISTICS

Using Pearson Correlation when two continuous variables are compared, the coefficient measures the strength and direction of the linear relationship, divided by the components of the standard deviation (de Winter et al., 2016). The correlation indicates how much each variable changes as a result of the other. Only linear dependency states are measured using the Pearson coefficient. It was determined by using this connection whether it was weak, strong, negative, or positive.

r, R, or Pearson's r are other names for Pearson's correlation. the calculation of a linear relationship between two variables over a range or ratio. a number between +1 and -1, where 1 denotes a general linear correlation that is positive, 0 denotes there is no

linear correlation, and -1 denotes a general linear correlation that is negative. Point-biserial correlation-like. Calculation of interactions between dichotomous vector periods or ratios and the binary options of yes or no, male or female. This happens when one variable's value rises while the other's value falls, creating a straight line on the scatterplot.

On a scale of + 1 to -1, the correlation coefficient measures how strongly two variables are related. Either + 1 or -1 represents the entire relationship between two variables. When one variable decrease while the other increases, the correlation is negative; when both variables increase, the correlation is positive. A correlation with zero degree of absence is denoted by a value of 0 (TheBMJ, 2019).

3.9 SUMMARY

In conclusion, this chapter describes the research study's methodology and design. The primary goal of this survey design is to investigate the relationship between UMK City Campus students and staff's motivation, leadership support, participant awareness, participant interest, and facilities with level of wellness programme effectiveness. In this study, we used quantitative methodologies, and we created the questionnaire using a Google Form. Convenience sampling is used by the researcher to choose the respondents for this study.

CHAPTER 4

RESULT AND DISSCUSSION

4.1 INTRODUCTION

This chapter will include reliability analysis, descriptive analysis for demographic profile, independent variables (IV) and dependent variables (DV), reliability test, Pearson correlation analysis, hypothesis testing and summary. This chapter also discusses the results and findings from the analysis which was conducted based on data collected from the questionnaire. The total number of 47 questionnaires were distributed to 362 respondents in the UMK City Campus, Kelantan. The data from the questionnaire has been evaluated by a software program using Statistical Package for Social Science (SPSS) version 26.0. Pilot test was done before conducting the actual questionnaire. Total number of pilot tests is 30 respondent and reliability tests used to obtain the validity of the variables.

4.1.1 PILOT STUDY

Scaled-down versions of proposed research are called "pilot studies," which are used to evaluate their effectiveness and pinpoint areas for improvement. They aid in the early identification of potential issues so that they can be corrected without investing in the cost and effort of a comprehensive study (Simkus, 2022). This pilot test allows the

researcher to identify and fix any mistakes that appear in the questionnaire before to administering the actual questionnaire.

The total of pilot test questionnaire is 30 respondent which is provide to students and staffs in UMK City Campus and the collected input will be utilized to improve the quality of the questions. The validity of the variable's using SPSS was assessed using the reliability test of this pilot test.

Table 4.1: Reliability Statistic for Pilot Test.

Variables	N of item	Cronbach Alpha Coefficient	Internal Consistency
Motivation	6	.780	Acceptable
Leadership Support	6	.892	Good
Participant Awareness	6	.888	Good
Participant Interest	7	.810	Good
Facilities	6	.751	Acceptable
The Level of Effectiveness	8	.736	Acceptable

Based on the table 4.1, showed the reliability of each variable which is has 6 variables including independent and dependent variables. Cronbach's Alpha is used to measure the reliability of the variables. The reliability of a measure reveals the consistency and stability with which the instrument measures the idea and assists in determining the usefulness of a measure (Srinivasan & Lohith, 2017). The table showed, the Cronbach's Alpha Coefficient for each variable is reliable.

It starts with motivation that the value of Cronbach's Alpha is 0.780 with more is considered acceptable. At this level and higher, the items are consistent enough to imply that the measure is dependable (Frost, 2022). Then, the value of leadership support is 0.892 which is the internal consistency is good. Meanwhile, for participant awareness the value of Cronbach's Alpha is 0.888 which is reliable. The independent variables of participant interest are good same like others variable before that which is the value 0.810 and for facilities the internal consistency is 0.751 which is considered acceptable. Lastly variables that is dependent variables. The Cronbach's Alpha for the level of effectiveness is 0.736. It is more considered acceptable.

4.2 RESULTS OF DESCRIPTIVE ANALYSIS

Based on the information gathered from the 362 respondents on section A for background information summaries in respondents' demographic profile, a descriptive analysis was carried out.

4.2.1 DEMOGRAPHIC PROFILE

4.2.1.1 Gender

Table 4.2 below presents the gender distribution of a total of 362 respondents collected from the data collection through questionnaire.

Table 4.2: The gender of the respondents

Gender	Frequency (n)	Percentage (%)
Female	254	70.2
Male	108	29.8
Total	**362**	**100.0**
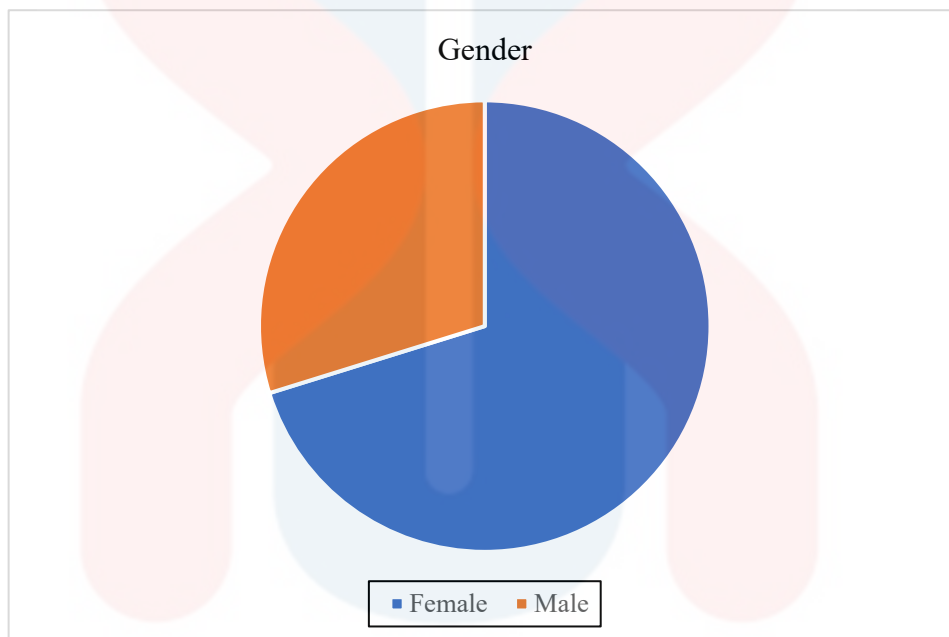
Figure 4.1: The percentage of gender

The pie chart displays the gender distribution of all 362 respondents based on figure 4.1 above. According to the pie chart, there are 70.2 percent (n=254) more female respondents than male respondents (n=108), who make up 29.8 percent of the total respondents. Female respondents are more likely to fill out the questionnaire than male respondents because they are more approachable and ready to take the time to do so.

4.2.1.2 Age

Table 4.3 below shows the age distribution of a total 362 respondents collected with the questionnaire.

Table 4.3: The age of the respondent

Age	Frequency (n)	Percentage (%)
18 - 21 years	29	8.0
22 - 25 years	301	83.1
26 - 29 years	25	6.9
30 years and above	7	1.9
Total	362	100.0
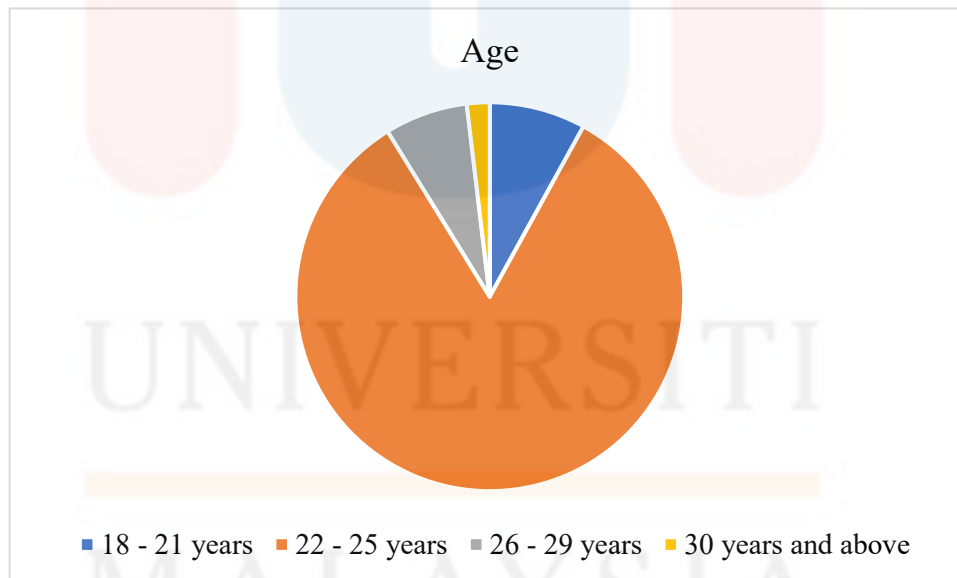
Figure 4.2: The percentage of age.

Among these 4 age groups, the highest percentage of respondents for the study identifying the challenges and the level of effectiveness of campus wellness initiatives among students and staffs in UMK City Campus was between the ages of

22 and 25, which is 83.1 percent (n=301). The second highest is 18 to 21 years old with 8.0 percent (n=29). The third highest was aged 26 to 29 years old with 6.9 percent (n=25). Following by the 5 percent (n=10) age group from 30 years and above While the lowest percentage is 0.5 percent (n=1) from the age of 30 years and above with 1.9 percent (n=7).

The reason why the age group of 22 to 25 years has the highest percentage is that they are among the first to third-year students of the UMK City Campus. This is because respondents at that age are interested in answering questionnaires. Meanwhile, the age of 30 years and above is the lowest because it is likely from among the staffs of the UMK City Campus.

4.2.1.3 Marital status

Table 4.4 shows the marital status distribution of a total 362 respondents collected from data collection through questionnaire.

Table 4.4: Marital status of respondent.

Marital status	Frequency (n)	Percentage (%)
Married	29	8.0
Single	333	92.0
Total	**362**	**100.0**
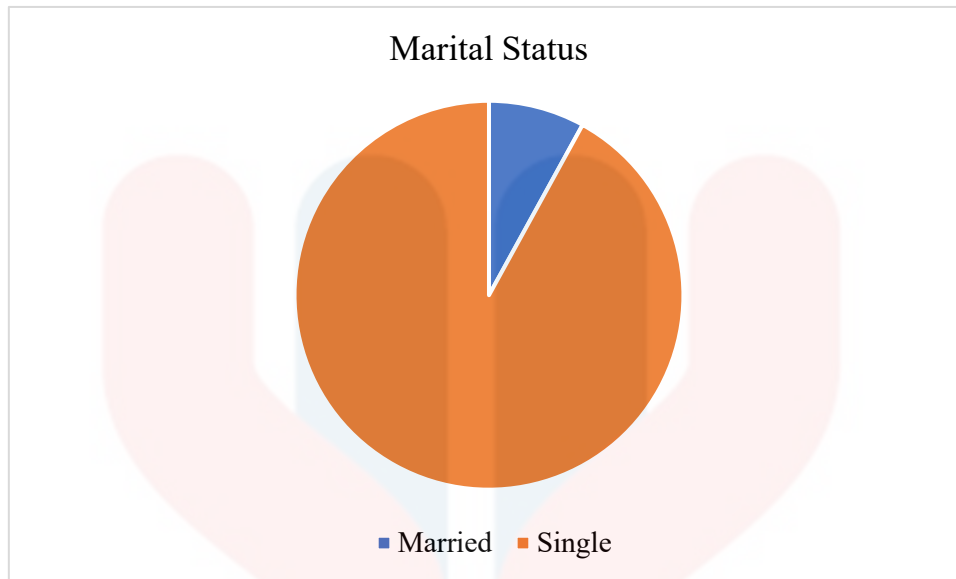
Figure 4.3: The percentage of marital status.

The percentage of respondents who were married is shown in the table. Significant disparities exist between single respondents and married respondents, with single respondents scoring the greatest percent (92.0%) (n=333) and married respondents scoring the lowest percent (80%) (n=29). Because they have more time to answer the questionnaire than people who are married, single respondents received the highest percentage and number of responses. They are essentially too busy with their families and other responsibilities.

4.2.1.4 Ethnicity

Table 4.5 shows ethnicity distribution of a total 362 respondents collected from data collection through questionnaire.

Table 4.5: Ethnicity of the respondents.

Ethnicity	Frequency (n)	Percentage (%)
Chinese	29	8.0
Indian	23	6.4
Malay	307	84.8
Others	3	0.8
Total	**362**	**100.0**
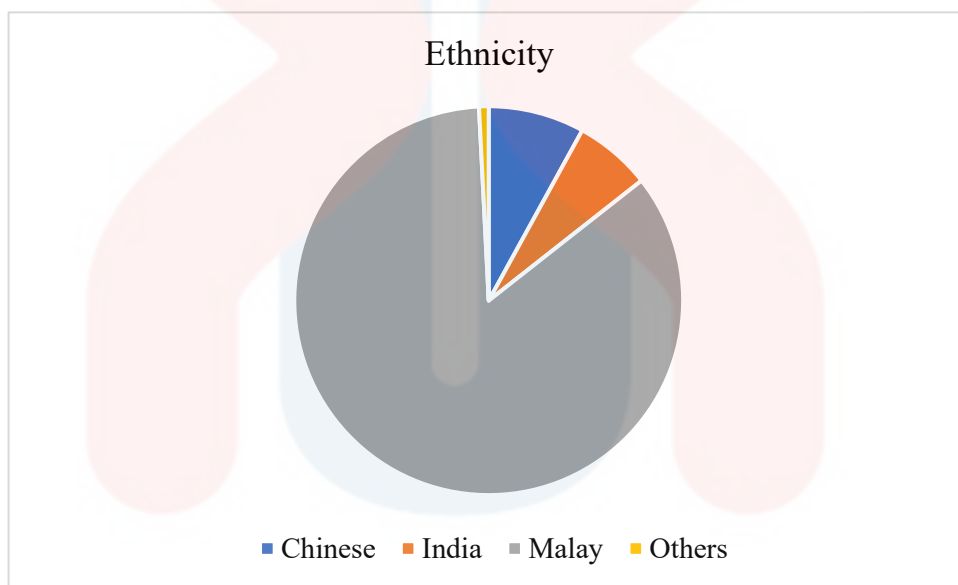
Figure 4.4: Percentage of ethnicity

Table 4.5 above shows the frequency data of respondents by ethnicity for the study identifying the challenges and the level of effectiveness of campus wellness initiatives among students and staffs in the UMK City Campus. Respondents from the Malay ethnicity showed the highest percentage of 84.8 percent (n=307). Then followed by ethnic Chinese which is 8.0 percent (n=29). Furthermore, for the Indian ethnicity, a total of 23 respondents answered this questionnaire with 6.4 percent. Finally, other ethnicities with 0.8 percent (n=3). The data shows that there are more

ethnic Malays who answered this questionnaire because the majority of students at

UMK City Campus are ethnic Malays.

4.2.1.5 Employment

Table 4.6 shows employment distribution of a total 362 respondents collected from data collection through questionnaire.

Table 4.6: Employment of the respondents.

Employment	Frequency (n)	Percentage (%)
Staff	31	8.6
Student	331	91.4
Total	**362**	**100.0**
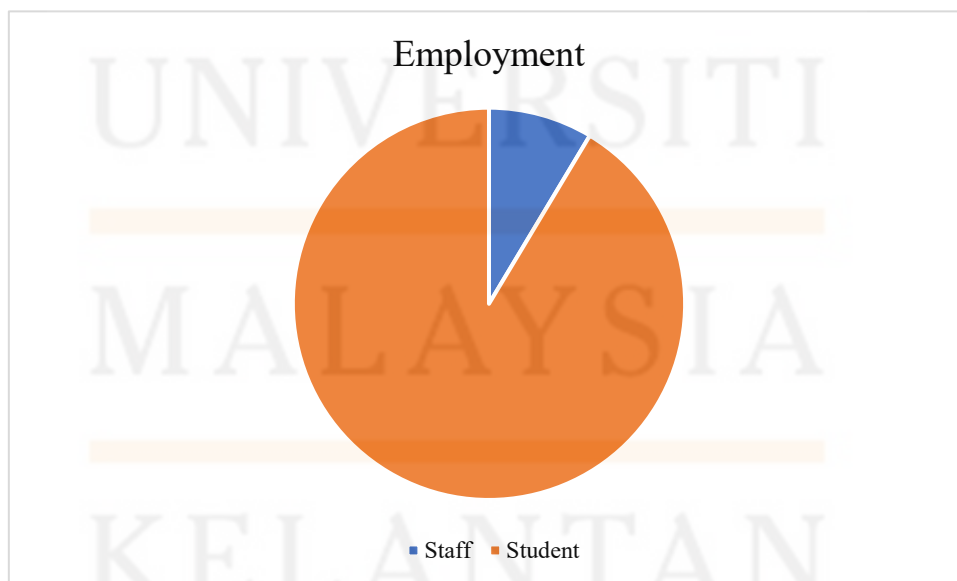
Figure 4.5: Percentage of employment.

Table 4.6 above shows the job data of the respondents for the study of identifying the challenges and the level of effectiveness of campus wellness initiatives among students and staffs in the UMK City Campus. Respondents from students show the highest percentage which is 91.4 percent (n=331). Then followed by staff which is 8.6 percent (n=31). The data shows that there are more students who answer the questionnaire than staff because students have more time than staff.

4.2.1.6 Faculty

Table 4.7 shows faculty distribution of a total 362 respondents collected from data collection through questionnaire.

Table 4.7: Faculty of the respondents.

Faculty	Frequency (n)	Percentage (%)
FHPK	276	76.2
FKP	53	14.6
FPV	33	9.1
Total	**362**	**100.0**
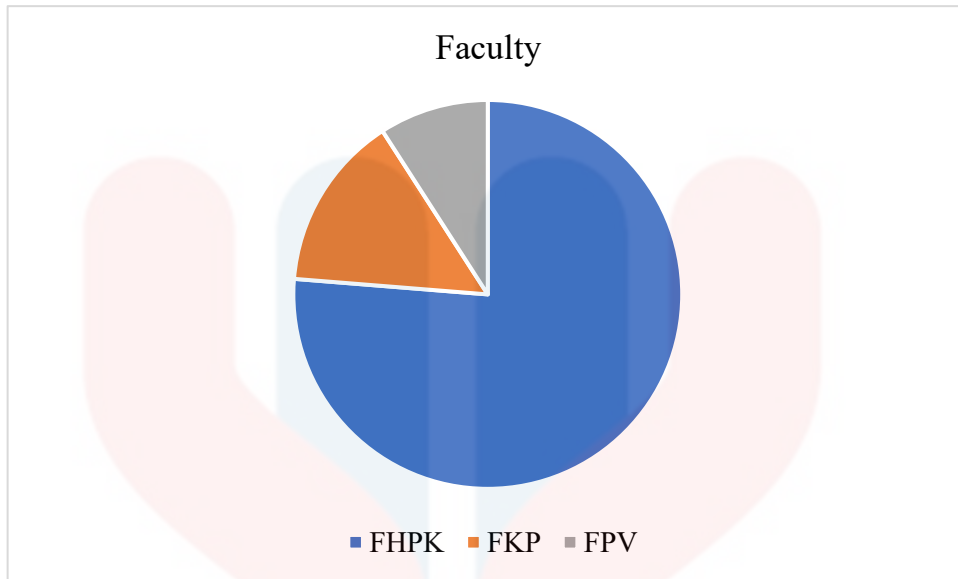
Figure 4.6: Percentage of the faculty.

Table 4.7 above shows the respondent's data for the study to identify the challenges and effectiveness of campus well-being initiatives among students and staffs at the UMK City Campus. Respondents from FHPK students showed the highest percentage of 76.2 percent (n=276). Then followed by FKP which is 14.6 percent (n=53) and last but not least are FPV students which is 9.1 percent (n=33). The data shows that more FHPK students answered the questionnaire than other students because there are more FHPK students than other students.

4.2.1.7 Semester

Table 4.8 shows semester distribution of a total 362 respondents collected from data collection through questionnaire.

Table 4.8: Semester of the respondents.

Semester	Frequency (n)	Percentage (%)
1	2	0.6
2	18	5.0
3	14	4.1
4	50	13.8
5	29	8.0
6	232	64.1
7	11	3.0
8	6	1.7
Total	**362**	**100.0**
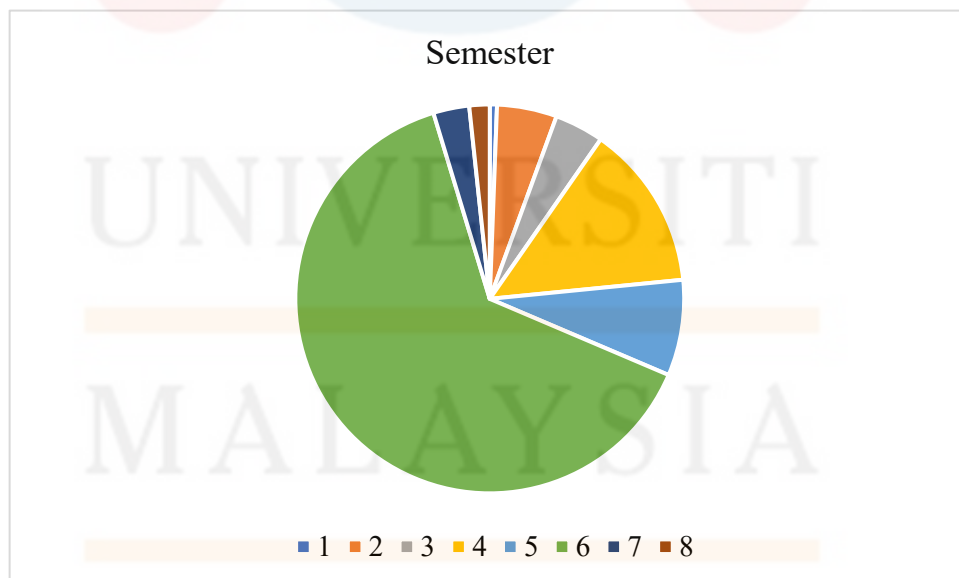
Figure 4.7: Percentage of the semester.

Table 4.8 above shows the universal data that became the respondents for the study to identify the challenges and effectiveness of campus well-being initiatives among students and staffs at the UMK City Campus. Respondents from semester 6 students showed the highest percentage of 64.1 percent (n=232). Then followed by the second highest semester 4 which is 13.8 percent (n=50) and then semester 5 the third highest which is 8.0 (n=29). Next, the fourth highest in semester 2 which is 5.0 percent (n=18). The fifth highest is semester 7 which is 3.0 percent (n=11) followed by semester 8 which is only 1.7 percent (n=6) and finally semester 1 which only gets 6 percent (n=2).

Concerning that, the highest number of respondents were from semester 6 students because most of the researcher's peers were from the same semester which made it easier for the researcher to distribute questionnaires and obtain data for this study. However, semester 1 became the lowest frequency of respondents due to their lack of exposure to this questionnaire.

4.2.1.8 The frequency of respondents attending wellness programs or activities at Universiti Malaysia Kelantan City Campus

Table 4.9 shows the frequency of respondents attending wellness programs or activities at UMK City Campus distribution of a total 362 respondents collected from data collection through questionnaire.

Table 4.9: The frequency of respondents attending wellness programs or activities at Universiti Malaysia Kelantan City Campus

Frequency of respondents attending wellness programs or activities at University of Malaysia Kelantan	Frequency (n)	Percentage (%)
Everyday	27	7.5
Not sure	81	22.4
Several times a month	152	42.0
Several times a week	102	28.2
Total	**362**	**100.0**
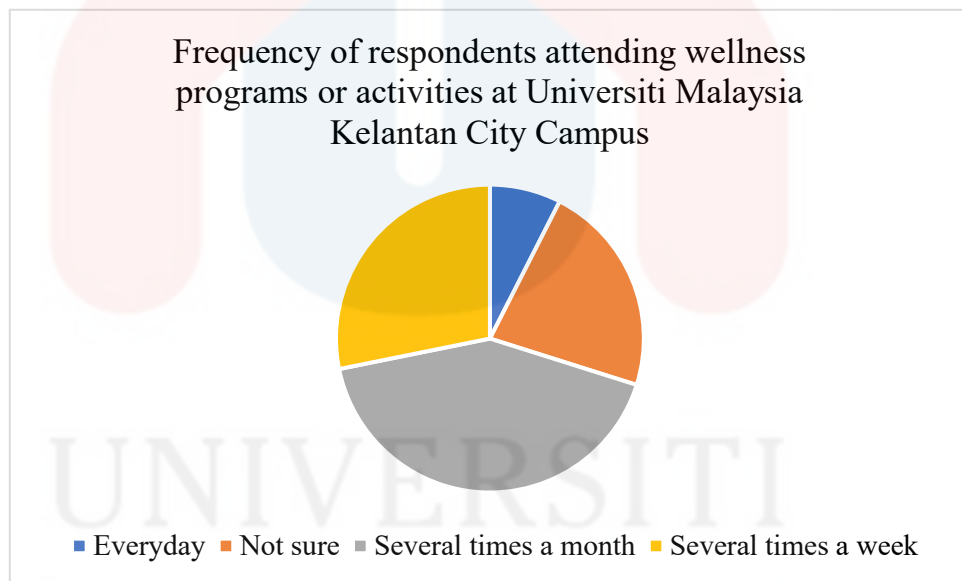
Figure 4.8: The frequency of respondents attending wellness programs or activities at Universiti Malaysia Kelantan City Campus

Table 4.9 above shows the frequency data of respondents attending wellness programs or activities at the UMK City Campus for a study to identify the challenges and effectiveness of campus wellness initiatives among students and staffs at the UMK City Campus. The frequency of respondents attending wellness

programs or activities at the UMK City Campus for several times a month shows the highest percentage which is 42.0 percent (n=152). Next, 28.2 percent (n=102) for the frequency of several times a week. Then, the frequency of respondents attending wellness programs or activities at the UMK City Campus that is uncertain is as much as 22.4 percent (n=81), and finally, every day that attends wellness programs or activities at the UMK City Campus is as much as 7.5 percent (n= 27).

The frequency of respondents attending wellness programs or activities at the UMK City Campus several times a month shows the highest percentage of respondents because they want a healthy body. While the frequency of respondents attending wellness programs or activities at the UMK City Campus is every day because of the busyness that surrounds them.

4.2.2 CENTRAL TENDANCIES MEASUREMENT

4.2.2.1 Motivation

Table 4.10 was presenting the descriptive analysis for the motivation that has been collected from 362 respondents.

Table 4.10: Descriptive analysis for the motivation

Items		Frequency					Mean	S.D
		SD	D	N	A	SA		
Q1	I am not taking part in the wellness initiative programs because it can't improve my health.	170 47.0%	137 37.8%	20 5.5%	31 8.6%	4 1.1%	1.79	962

Q2	I am not taking part in the wellness initiative programs because it can't increase my productivity.	148 40.9%	163 45.0%	21 5.8%	25 6.9%	5 1.4%	1.83	917
Q3	I am not taking part in the wellness initiative programs because it can't improve my engagement with my friends.	83 22.9%	113 31.2%	124 34.3%	37 10.2%	5 1.4%	2.36	989
Q4	I am motivated to join wellness program.	21 5.8%	15 4.1%	20 5.5%	184 50.8%	122 33.7%	4.02	1.040
Q5	I am not taking part in the wellness initiative programs because it can't reduce my stress levels.	116 32.0%	163 45.0%	26 7.2%	45 12.4%	12 3.3%	2.10	1.087
Q6	I am not taking part in the wellness initiative programs because it can't improve teamwork.	81 22.4%	92 25.4%	43 11.9%	128 35.4%	18 5.0%	2.75	1.282

The table 4.10 shows the frequency, mean and standard deviation of the item used to measure the motivation. There are (6) questions that has been asked, and the highest mean is Q4 which is 4.02 with the 'I am motivated to join wellness program' statement. There are 122 respondents who are strongly agree (SA), 33.7% from 362 respondents. The lowest mean is Q1, 1.79 with the statement 'I am not taking part in the wellness initiative programs because it can't improve my health'. There are 170 people with 47.0% answers who strongly disagree (SD) from 362 respondents. The rest questions are Q2, Q3, Q5, and Q6 with 1.83, 2.36, 2.10 and 2.75 mean, respectively.

4.2.2.2 Leadership support

Table 4.11 presents the descriptive analysis for the leadership support collected from 362 respondents.

Table 4.11: Descriptive analysis for the leadership support

Items		Frequency					Mean	S.D
		SD	D	N	A	SA		
Q1	The faculty management and student representative council are not always taking part in the planning of wellness programs.	89 24.6%	154 42.5%	26 7.2%	76 21.0%	17 4.7%	2.39	1.198
Q2	The faculty management and student representative council are not always taking part in organizing wellness programs.	106 29.3%	136 37.6%	27 7.5%	69 19.1%	24 6.6%	2.36	1.265
Q3	The faculty management and student representative council does not make wellness programs an important agenda in faculty or students' programs.	83 22.9%	103 28.5%	28 7.7%	106 29.3%	42 11.6%	2.78	1.384
Q4	The faculty management and student representative council does not encourage the staffs and students to take	113 31.2%	170 47.0%	23 6.4%	43 11.9%	13 3.6%	2.10	1.081

	part in wellness programs.							
Q5	The faculty management and student representative council do not have a clear objective for faculty or students' wellness programs.	109 30.1%	123 34.0%	44 12.2%	69 19.1%	17 4.7%	2.34	1.223
Q6	The faculty management and student representative council does not always promote the importance of wellness programs.	71 19.6%	157 43.4%	26 7.2%	62 17.1%	46 12.7%	2.60	1.320

The table 4.11 shows the frequency, mean and standard deviation to measure the leadership support. There are (6) questions and the highest mean is Q3 with 2.78 mean and the statement is 'The faculty management and student representative council does not make wellness programs an important agenda in faculty or student's programs. There are 42 people from 362 respondents strongly agree (SA) with 11.6%. The lowest mean is the Q4 with the statement 'The faculty management and student representative council does not encourage the staffs and students to take part in wellness programs. The mean value is 2.10 and the strongly disagree (SD) are 113 people with 31.2% from 362 respondents.

4.2.2.3 Participant awareness

Table 4.12 presents the descriptive analysis for the participant awareness collected from the 362 respondents.

Table 4.12: Descriptive analysis for participant awareness

Items		Frequency					Mean	S.D
		SD	D	N	A	SA		
Q1	I didn't know that participating in campus wellness initiatives programmes can improve my health.	108 29.8%	148 40.9%	24 6.6%	75 20.7%	7 1.9%	2.24	1.146
Q2	I am not aware that by participate in campus wellness initiative programs can increase my productivity.	103 28.5%	141 39.0%	19 5.2%	87 24.0%	12 3.3%	2.35	1.216
Q3	I didn't know that participating in campus wellness initiative programs can improve my engagement with my friends.	81 22.4%	97 26.8%	110 30.4%	62 17.1%	12 3.3%	2.52	1.114
Q4	I am not aware that participating in wellness initiative programs can improve my engagement with my friends.	98 27.1%	140 38.7%	25 6.9%	74 20.4%	25 6.9%	2.41	1.270
Q5	I am not aware that participating in wellness initiative	106 29.3%	121 33.4%	28 7.7%	84 23.2%	23 6.4%	2.44	1.297

	programs can reduce my stress levels.							
Q6	I am not aware that participating in wellness initiative programs can improve teamwork.	63 17.4%	132 36.5%	53 14.6%	100 27.6%	14 3.9%	2.64	1.169

The table 4.12 shows the frequency, mean and standard deviation to measure the participant awareness. There are (6) questions, and the highest mean is 2.64, which is Q6 with the 14 respondents strongly agree (SA) 3.9% from 362 respondents. The statement is 'I am not aware that participating in wellness initiative programs can improve teamwork.' For the lowest mean is from Q1 with the mean value 2.24, with 108 people was answering strongly disagree (SD) 29.8% from 362 respondents. The statement is 'I didn't know that participating in campus wellness initiatives programmes can improve my health'. The rest of the questions Q2, Q3, Q4, and Q5 mean 2.35, 2.52, 2.41, and 2.44, respectively.

4.2.2.4 Participant interest

Table 4.13 presents the descriptive analysis for the participant interest collected from the 362 respondents.

Table 4.13: Descriptive analysis for participant interest

Items		Frequency					Mean	S.D
		SD	D	N	A	SA		
Q1	I am not interested in participating in wellness initiative programs if it is organized during the weekend.	167 46.1%	125 34.5%	24 6.6%	39 10.8%	7 1.9%	1.88	1.059
Q2	I am not interested in participating in wellness initiative programs if it is organized after the lecture/ working hours.	102 28.2%	135 37.3%	30 8.3%	60 16.6%	35 9.7%	2.42	1.313
Q3	I am not interested in participating in wellness initiative programs if it is conducted by external expertise.	130 35.9%	161 44.5%	26 7.2%	35 9.7%	10 2.8%	1.99	1.034
Q4	I am not interested in participating in wellness initiative programs if it is conducted by the faculty management/ student representative.	116 32.0%	145 40.1%	31 8.6%	50 13.8%	20 5.5%	2.21	1.190
Q5	I am not interested in participating in wellness initiative programs if it is conducted in a simple form.	116 32.0%	155 42.8%	22 6.1%	59 16.3%	10 2.8%	2.15	1.124
Q6	I am not interested in participating in wellness initiative programs if it is conducted in a fun way.	136 37.6%	156 43.1%	13 3.6%	46 12.7%	11 3.0%	2.01	1.094

The table 4.13 shows the frequency, mean and standard deviation to measure the participant interest. There are (6) questions and the highest mean is Q2 with 2.42 mean and the statement is 'I am not interested in participating in wellness initiative programs if it is organized after the lecture working hours. There are 35 people from 362 respondents strongly agree (SA) with 9.7%. The lowest mean is the Q1 with the statement 'I am not interested in participating in wellness initiative programs if it is organized during the weekend'. The mean value is 1.88 and the strongly disagree (SD) are 167 people with 46.1% from 362 respondents.

4.4.1.5 Facilities

Table 4.14 presents the descriptive analysis for the facilities collected from the 362 respondents.

Table 4.14: Descriptive analysis for facilities

Items		Frequency					Mean	S.D
		SD	D	N	A	SA		
Q1	The facilities for the wellness initiative programs provided by the university are not satisfactory.	50 13.8%	55 15.2%	23 6.4%	207 57.2%	27 7.5%	3.29	1.222
Q2	The facilities for the wellness initiative programs provided by the university are low.	37 10.2%	48 13.3%	25 6.9%	202 55.8%	50 13.8%	3.50	1.187
Q3	The facilities have not become the main factors to initiate wellness initiative programs at the	24 6.6%	56 15.5%	40 11.0%	183 50.6%	59 16.3%	3.54	1.133

	university/ faculty level.							
Q4	Inadequate facilities can lower the number of participants joining the wellness initiatives programmes at the faculty/ university level.	27 7.5%	53 14.6%	66 18.2%	166 45.9%	50 13.8%	3.44	1.125
Q5	Staff/ students should have not been informed about the facilities provided at the university/ faculty level to attract more participants to join the campus wellness initiative programs.	94 26.0%	78 21.5%	29 8.0%	120 33.1%	41 11.3%	2.82	1.419
Q6	There is a need to improve the wellness facility in the campus area.	13 3.6%	19 5.2%	22 6.1%	130 35.9%	178 49.2%	4.22	1.020

The table 4.14 shows the frequency, mean and standard deviation to measure the facilities. There are (6) questions, and the highest mean is 4.22, which is Q6 with the 178 respondents strongly agree (SA) 49.2% from 362 respondents. The statement is 'There is a need to improve the wellness facility in the campus area'. For the lowest mean is from Q5 with the mean value 2.82, with 94 people was answering strongly disagree (SD) 26.0% from 362 respondents. The statement is 'Staff and students should have not been informed about the facilities provided at the university or faculty level to attract more participants to join the campus wellness initiative programs. The rest of the questions Q1, Q2, Q3, and Q4 mean 3.29, 3.50, 3.54 and 3.44, respectively.

4.2.2.6 Level of the Initiatives Effectiveness

This table shows the descriptive statistics for the level of the initiative's effectiveness from the 362 respondents.

Table 4.15: Descriptive analysis for the level of the initiative's effectiveness

Items		Frequency					Mean	S.D
		SD	D	N	A	SA		
Q1	Each wellness initiative programs I participated in has not defined the desired outcomes.	112 30.9%	135 37.3%	35 9.7%	66 18.2%	14 3.9%	2.27	1.190
Q2	Each wellness initiative programs I participated in do not mention clear goal of a healthy and well-being lifestyle.	125 34.5%	117 32.3%	32 8.8%	69 19.1%	19 5.2%	2.28	1.262
Q3	All of the wellness initiatives programmes are complicated to participate.	136 37.6%	133 36.7%	31 8.6%	49 13.5%	13 3.6%	2.09	1.150
Q4	There are more than 5 wellness initiatives programmes conducted every semester.	83 22.9%	74 20.4%	76 21.0%	88 24.3%	41 11.3%	2.81	1.336
Q5	Staff and students are not well informed about the wellness initiatives programmes conducted in the university/ faculty.	99 27.3%	106 29.3%	27 7.5%	94 26.0%	36 9.9%	2.62	1.380
Q6	I am not satisfied with the wellness	89	131	30	91	21	2.51	1.264

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	initiatives programs conduct in the university/ faculty level.	24.6%	36.2%	8.3%	25.1%	5.8%		
Q7	The wellness initiatives programmes schedule is not flexible.	91 25.1%	119 32.9%	67 18.5%	64 17.7%	21 5.8%	2.46	1.207
Q8	The wellness initiatives programmes that I join has not benefited me.	134 37.0%	136 37.6%	26 7.2%	46 12.7%	20 5.5%	2.12	1.199

The frequency, mean, and standard deviation for the item are utilized in table 4.15 to calculate the effectiveness of the initiative. The results of the (8) measured questions show that question number four has the highest mean, 2.81. There are more than five health initiatives programs run each semester, is the query. 41 out of 362 respondents, or 11.3%, said they strongly agreed with the question. The question with the lowest mean, number 3, is "All of the wellness initiatives programmes are complicated to participate," and it has a mean of 2.09. A total of 136 people responded, and of the 362 that did, 37.6% strongly disagreed with the assertion. The mean values were 2.27, 2.28, 2.62, 2.51, 2.46, and 2.12 for Q1, Q2, Q5, Q6, Q7, and Q8, respectively.

4.3 RESULTS OF RELIABILITY TEST.

The reproducibility of research results is referred to as the reliability of research technique. Your research procedures are probably reliable and unaffected by outside factors if they produce consistent results. The stability or consistency of test results is measured by reliability. Additionally, consider the repeatability of a test or a study's findings (Glen, 2016). The Cronbach's alpha coefficient assesses the internal consistency or reliability of a set of survey items. Use this statistic to aid in determining whether a set of items consistently measures the same feature. Cronbach's alpha measures the degree of agreement on a typical 0–1 scale. Greater agreement is indicated by items with higher values. A series of questions with a high Cronbach's alpha value has consistent participant response rates (Frost, 2022). Based on the value outcomes, researchers can determine what the questionnaire meant and if the respondents understood it.

Table 4.16: Result of Cronbach's Alpha Coefficient

Variables	N of item	Cronbach Alpha Coefficient	Internal Consistency
Motivation	6	.733	Acceptable
Leadership Support	6	.900	Excellent
Participant Awareness	6	.885	Good
Participant Interest	7	.897	Good
Facilities	6	.798	Acceptable
The Level of Effectiveness	8	.923	Excellent

The reliability coefficient alpha based on the independent variable and dependent variable is displayed in Table 4.16. One dependent variable and five independent variables are present. First, six questions are used to assess the reliability and validity of the independent variable, which is motivation. Internal consistency is acceptable with a Cronbach's Alpha score of 0.733, and the Likert Scale question is trustworthy.

The second variable, leadership support within 6 question is used to test the reliability and validity. The Cronbach's Alpha result is 0.900 which the level is excellent so that the question is strength and high positive.

The third independent variable are participant awareness also within 6 question is used. The result of Cronbach's Alpha is 0.885 with good of internal consistency level. This reliability test means strength is a high positive.

Next variable is participant interest which is have 7 questions, different with other variables. The result is good with Cronbach's Alpha Coefficient is 0.897. So that, with this internal consistency is considered as more reliable.

The last for independent variable is facilities which is have 6 questions is used to test reliability and validity. The Cronbach's Alpha Coefficient result is 0.798 with the level of internal consistency is acceptable and the question of this variable is reliable.

Meanwhile, in measuring dependent variable the researcher provides 8 questions to test the reliability and validity about the level of effectiveness in UMK City Campus. The result of Cronbach's Alpha Coefficient is 0.923 with the level of internal consistency is excellent and it considered as more reliable.

4.4 RESULT OF INFERENTIAL ANALYSIS

4.4.1 PEARSON CORRELATION ANALYSIS

A measure of a link between variables is the Pearson's Correlation Coefficient. In correlated data, a change in one variable's magnitude is correlated with a change in another variable's magnitude, either in the same direction (positive correlation) or the opposite direction (negative correlation). The Pearson product-moment correlation is the most common way to define a linear relationship between two continuous variables when the term "correlation" is used (Schober et al., 2018). Because it is based on the method of covariance, it is the best way to measure the relationship. The table 4.17 Pearson's Correlation show below :

Table 4.17: Pearson's Correlation Table

Correlation Coefficient	Interpretation
1.00 – 0.90	Very Strong Correlation
0.89 – 0.70	Strong Correlation
0.69 – 0.40	Moderate Correlation
0.39 – 0.10	Weak Correlation
0.10 – 0.00	Negligible Correlation

Source: (Schober et al., 2018)

By using Pearson's Correlation analysis, the researcher should avoid the problem between the variables. The coefficient value should not exceed from 0.90. If r is greater than 0.00 but less than 1.00, there is positive relationship between two variables. A higher number indicates a stronger association. It follows that better forecasts can be made when the number is larger. Pearson Correlation was chosen because it allows for the

measurement of the linear relationship's strength using a single value that falls within the range of 1.

Table 4.18: Result of Pearson Correlation between Motivation with Level Effectiveness.

Correlations		Motivation	Level effectiveness
Motivation	Pearson Correlation	1	.458**
	Sig. (2-tailed)		.000
	N	362	362
Level effectiveness	Pearson Correlation	.458**	1
	Sig. (2-tailed)	.000	
	N	362	362
**. Correlation is significant at the 0.01 level (2-tailed).			

Source: Developed from SPSS.

Table 4.18 shows the relationship between motivation and the level of effectiveness in student and staff UMK City Campus. The result shows moderate correlation with a correlation coefficient value of .458**. The p value of the motivation with the level of effectiveness in UMK City Campus is .000 which is less than the very significant level at .001.

Table 4.19: Result of Pearson Correlation between Leadership Support with Level
Effectiveness.

Correlations		Leadership support	Level effectiveness
Leadership support	Pearson Correlation	1	.692**
	Sig. (2-tailed)		.000
	N	362	362
Level effectiveness	Pearson Correlation	.692**	1
	Sig. (2-tailed)	.000	
	N	362	362
**. Correlation is significant at the 0.01 level (2-tailed).			

Source: Developed from SPSS.

Table 4.19 shows the relationship between leadership support and the level of effectiveness in student and staff UMK City Campus. The result shows moderate correlation with a correlation coefficient value of .692**. The p value of the leadership support with the level of effectiveness in UMK City Campus is .000 which is less than the very significant level at .001.

Table 4.20: Result of Pearson Correlation between Participant Awareness with Level Effectiveness.

Correlations		Participant awareness	Level effectiveness
Participant awareness	Pearson Correlation	1	.666**
	Sig. (2-tailed)		.000
	N	362	362
Level effectiveness	Pearson Correlation	.666**	1
	Sig. (2-tailed)	.000	
	N	362	362
**. Correlation is significant at the 0.01 level (2-tailed).			

Source: Development from SPSS

Table 4.20 shows the relationship between participant awareness and the level of effectiveness in student and staff UMK City Campus. The result shows moderate correlation with a correlation coefficient value of .666**. The p value of the participant awareness with the level of effectiveness in UMK City Campus is .000 which is less than the very significant level at .001.

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Table 4.21: Result of Pearson Correlation between Participant Interest with Level Effectiveness.

Correlations		Participant interest	Level effectiveness
Participant interest	Pearson Correlation	1	.777**
	Sig. (2-tailed)		.000
	N	362	362
Level effectiveness	Pearson Correlation	.777**	1
	Sig. (2-tailed)	.000	
	N	362	362
**. Correlation is significant at the 0.01 level (2-tailed).			

Source: Developed from SPSS.

Table 4.21 shows the relationship between participant interest and the level of effectiveness in student and staff UMK City Campus. The result shows strong correlation with a correlation coefficient value of .777**. The p value of the participant interest with the level of effectiveness in UMK City Campus is .000 which is less than the very significant level at .001.

Table 4.22: Result of Pearson Correlation between Facilities with Level Effectiveness.

Correlations		Facilities	Level effectiveness
Facilities	Pearson Correlation	1	-.023
	Sig. (2-tailed)		.662
	N	362	362
Level effectiveness	Pearson Correlation	-.023	1
	Sig. (2-tailed)	.662	
	N	362	362

Source: Developed from SPSS.

Table 4.22 shows the relationship between facilities and the level of effectiveness in student and staff UMK City Campus. The result shows negligible correlation with a correlation coefficient value of -.023. The p value of the facilities with the level of effectiveness in UMK City Campus is .662 which is the result is not significant at $p < 0.05$.

4.5 DISCUSSION BASED ON RESEARCH OBJECTIVES

Table 4.23: Shows the summary for hypothesis testing

	Hypothesis	**Pearson Correlation Result**	
H1	A moderately positive correlation between the motivation among student and the effectiveness of the wellness initiatives.	$(r = .458, p < 0.01)$	Supported
H2	A moderately positive correlation between the leadership support and the effectiveness of wellness initiatives effectiveness.	$(r = .692, p < 0.01)$	Supported
H3	A moderately positive correlation between participant awareness and the effectiveness of wellness initiatives.	$(r = .666, p < 0.01)$	Supported
H4	A strong positive correlation between the participant interest and the effectiveness of wellness initiatives.	$(r = .777, p < 0.01)$	Supported
H5	A weak negative correlation between the facilities and the effectiveness of wellness initiatives.	$(r = -.023, p > 0.05)$	Not significant

As can be seen from the table below, the researcher used Pearson correlation analysis to test the relationship between the hypothesis on the significant relationship such as motivation, leadership support, participant awareness, participant interest, and facilities with the effectiveness of wellness initiatives. The results show that all except facilities, the hypotheses have been accepted at a significance level of 0.01. Meanwhile, the facilities the result show that is not significant and p value more than 0.05 which is 0.662.

4.6 SUMMARY

As a result, Chapter 4 reviews all of the conclusions drawn from the study of the researcher's data set using several techniques, including descriptive analysis, reliability analysis, inferential analysis, and Pearson correlation analysis. This chapter also contains a discussion that is supported by research objectives. Based from the study, it shows the factors that influence the Effectiveness Level of Campus Wellness Initiatives Among Students and Staff at UMK City Campus. The influencing factors are effectiveness and motivation, leadership support, participant awareness, participant interest and facilities.

In this study, the researcher discovered that female respondents made up (70.2%) of the sample while male respondents made up (29.8%). The majority of responses (83.1%) are between the ages of 22 and between 25 years,(84.8%) are Malay,(92.0%) are single,(91.4 %) are students, (76.2 %) are from FHPK faculty, and (64.1%) are in semester 6. The respondents received the questionnaire. Statistical Package for the Social Science (SPSS) was used to do descriptive analysis on the survey questionnaire data. It shows effectiveness and motivation, leadership support, participant awareness, participant interest, and facilities have their respective correlation coefficients of 0.458, 0.692, 0.666, 0.777 and -0.023. The following are all the stated hypotheses that have been accepted except facilities.

CHAPTER 5

CONCLUSION

5.1 INTRODUCTION

The recapitulated findings from the preceding investigation are covered in this chapter. In addition, this chapter includes and explains the study's limits, contributions, and suggestions for further research.

5.2 RECAPITULATION OF THE FINDINGS

5.2.1 MOTIVATION

Table 5.1: Research objectives 1, Research Question 1 and Hypothesis 1

Research Objectives 1	To explore the effectiveness that motivate students and staff to participate in campus wellness initiatives.
Research Questions 1	How does motivation impact the level of participation in campus wellness initiatives among students and staff in UMK City Campus?
Hypothesis 1	There is a relationship between the motivation among student and the effectiveness of the wellness initiatives.

Based on the research objectives and hypothesis, the potential conclusion is that there is a positive association between student motivation levels and the effectiveness of campus wellness initiatives. This suggests that highly motivated students are more likely to participate in wellness activities, and that such initiatives are more effective in attaining their intended goals when students are driven to participate. Conversely, low motivation

among students may result in less effective wellness activities and a lower participation rate. Motivation has a moderately positive correlation, as determined by Pearson Correlation analysis in Table 4.18. The outcome displays .458** correlation coefficient, which is considered to be moderate.

This study proven that there is positive relationship between the motivation among student and staff, and the effectiveness of the wellness initiatives. According to Seifert et al.,(2017) incentives are being used to increase motivation for health promotion programs at the cutting edge. The purpose of wellness incentives is to encourage people who lack intrinsic motivation to engage in wellness programs and practice healthy behaviors. When we apply this lesson to health promotion and wellness programs, many of the components in this motivational process are already in place.

The factors that motivate and hinder student participation in health and wellness programs on college campuses, including factors such as convenience, social support, perceived benefits, and individual motivation. The author suggests that understanding these factors can inform the development of more effective and engaging wellness initiatives, particularly those that focus on motivation and behaviour change among student populations (Hoffman et al. 2018).

5.2.2 LEADERSHIP SUPPORT

Table 5.2: Research Objectives 2, Research Question 2 and Hypothesis 2

Research Objectives 2	To assess the extent of support provided by campus leadership support towards wellness initiatives.
Research Questions 2	To what extent does leadership affect the effectiveness of campus wellness initiatives in UMK City Campus?
Hypothesis 2	There is relationship between leadership support and the effectiveness of wellness initiatives effectiveness.

Based on the research objectives and hypothesis presented above, the potential conclusion is that there is a positive association between campus leadership support and the effectiveness of wellness initiatives. This indicates that when campus leadership strongly supports wellness initiatives, the likelihood of their success and efficacy increases. In contrast, a lack of support from campus leadership may result in decreased effectiveness and overall impact of wellness efforts.

Motivation has a moderately positive correlation, as determined by Pearson Correlation analysis in Table 4.19. The outcome displays .692** correlation coefficient, which is considered to be moderate. The efficiency of wellness initiatives is positively correlated with student and staff leadership support, according to this study. Campus wellness programs indicated higher levels of leadership support for health promotion, as well as higher levels of wellness activity participation, lower job stress, and higher levels of health behaviour (Hoert et al., 2018).

According to the (Rajkumar et al. 2019), this study examines the impact of leadership support on employee participation and outcomes in workplace health promotion programs, including wellness initiatives. The authors suggest that leadership support and engagement are critical components of successful workplace wellness

initiatives and can positively influence employee health behaviours, job satisfaction, and overall productivity. The findings of this study may be relevant to understanding the importance of leadership support for wellness initiatives on college campuses, as well.

5.2.3 PARTICIPANT AWARENESS

Table 5.3: Research Objectives 3, Research Question 3 and Hypothesis 3

Research Objectives 3	To determine the level of awareness of students and staff regarding the available campus wellness initiatives.
Research Questions 3	What is the level participant awareness regarding campus wellness initiatives in UMK City Campus?
Hypothesis 3	There is a relationship between participant awareness and the effectiveness of wellness initiatives.

The potential recapitulation of data based on the research objectives, research question, and hypothesis may be that the level of participant awareness regarding campus wellness efforts has a substantial impact on the effectiveness of these activities at UMK City Campus. This means that if students and staff are aware of the wellness initiatives offered, they are more likely to participate, resulting in more engagement and better outcomes.

Table 4.20 Pearson Correlation study revealed that motivation has a moderately positive correlation. The outcome displays .666** correlation coefficient, which is considered to be moderate. The efficiency of wellness initiatives is positively correlated with participant awareness among students and staff, according to this study.

The promoting participant awareness and understanding of the benefits of wellness initiatives is key to increasing engagement and promoting long-term behaviour change (Felknor et al. 2016) . This finding may be relevant in the context of college

student wellness programs, as increased awareness and understanding may lead to greater participation and adherence to wellness initiatives. That perceived engagement, or the individual's subjective experience of engagement, is a stronger predictor of positive health outcomes than program-defined engagement, or the degree of participation in program activities (Higgs et al. 2020). This finding may have implications for understanding the importance of participant awareness and perceived engagement in promoting the effectiveness of wellness initiatives among college students

5.2.4 PARTICIPANT INTEREST

Table 5.4: Research Objectives 4, Research Question 4 and Hypothesis 4

Research Objectives 4	To assess the level of interest among students and staff in participating in wellness initiatives.
Research Questions 4	How does participant interest influence the success of campus wellness initiatives in UMK City Campus?
Hypothesis 4	There is a relationship between participant interest and the effectiveness of wellness initiatives.

The potential recapitulation of findings based on the research objectives, research question, and hypothesis may be that there is a positive association between participant interest and the success of campus wellness initiatives at UMK City Campus. This means that if students and staff are enthusiastic about participating in wellness efforts, they are more likely to participate and achieve better results.

Motivation has a moderately positive correlation, as determined by Pearson Correlation analysis in Table 4.21. Strong correlation can be seen in the result, which has a correlation coefficient of .777**. The efficiency of wellness initiatives is positively correlated with participant awareness among students and staff, according to this study.

Factors that influence college students' health behaviours and interest in campus wellness programs, including the role of social support, perceived benefits, and self-efficacy. That fostering social support networks and enhancing self-efficacy beliefs can promote participant interest and participation in wellness initiatives among college students (Bélanger et al. 2019).

5.2.5 FACILITIES

Table 5.5: Research Objectives 5, Research Question 5 and Hypothesis 5

Research Objectives 5	To investigate the level of satisfaction among participants with the existing wellness facilities in the campus.
Research Questions 5	How does facilities impact the level of effectiveness in campus wellness initiatives among students and staff in UMK City Campus?
Hypothesis 5	There is a relationship between facilities and the effectiveness of wellness initiatives.

Based on the research objectives, research question, and hypothesis, the potential recapitulation of findings could be that facilities have a significant impact on the effectiveness of campus wellness initiatives at UMK City Campus. This means that the level of satisfaction among participants with the existing wellness facilities on campus impacts their willingness to take part in wellness initiatives and directly affects the perceived effectiveness of those initiatives. If the campus provides high-quality wellness facilities and receives positive feedback from participants, there is a greater likelihood that participants will continue to engage with the wellness initiatives offered.

Pearson correlation result in table 4.22 of -.023 suggests a weak, non-linear relationship between the facilities and the effectiveness of wellness initiative. That

accessibility and availability of wellness facilities on campus can have a positive impact on student physical activity levels and overall health, indicating the potential effectiveness of facilities in promoting wellness initiatives among college students (Melton et al. 2018). Campus recreation facilities can play a key role in providing opportunities for physical activity, socialization, and stress reduction among college students, indicating the potential effectiveness and importance of facilities in wellness initiatives targeting college students (Carpenter et al. 2019).

(Johnson, S., & Smith, K. 2018) talk about the connection between facilities and wellness programs for college students in their journal article. According to their research, they discovered a tenuous link between wellness program efficacy and the standard of the facilities. The essay makes the case that aspects like program design, staff involvement and training, and student engagement may be more important to the accomplishment of wellness efforts than facility quality.

5.3 LIMITATIONS

The research discussed identifying the challenges and the level of effectiveness of campus wellness initiatives among students and staff in UMK City Campus. Due to its convenience in the present day, Google Form was used to collect all the data for this research, which was based on the quantitative method. The 362 staff members and students at UMK City Campus received the Google Form. As with any other research, certain research has their own limitations during the course of the study. Among the limitations faced by the researcher is that it is difficult for the researcher to get superiors to become respondents. This happens as a result of the tight and different time constraints

they face. This point is more evident when the number of staff who have answered the Google Form is only 31 people which is 8.6% compared to the number of students who have answered as much as 91.4%. The time constraints faced by superiors have caused them to not have free time to answer every question given. In fact, some of them have to perform tasks according to the time and date that have been set. This has made the number of staff who answered the Google Form the least compared to the number of students.

Moreover, the challenge that researchers have to face while conducting research is not being able to meet students at UMK City Campus during the research process. This happened as a result of the Covid-19 epidemic that hit our country, so that it has made learning sessions for every institution have to be conducted online. In fact, everyone also needs to stay at home and keep their own distance to avoid contracting the Covid-19 epidemic. This matter will be a disadvantage for the researcher because the researcher cannot meet face to face with the students at UMK City Campus to conduct an open interview about the effectiveness of the wellness initiative program that have been run at UMK City Campus and collect data more effectively. In fact, students are also not able to know more deeply about the research being done by the researcher.

Lastly, the difficulty that the researcher has to go through while conducting this study is the difficulty in finding journals related to the research topic being studied. This is because, not many previous researchers have done research on the challenges and effectiveness of the wellness initiative program for university students. Searching for journals for the researcher's title also becomes difficult because the researcher has to search for journals that start from 2017 to 2023 to be a reference for the researcher's research title. Nevertheless, the researchers are able to assemble 362 participants to take part in the questionnaire.

5.4 RECOMMENDATIONS

This study can be used as a guide and a way to improve other investigations in the future. To improve the study and gather more useful data, some recommendations are made. The researcher can conduct in-person interviews or use an online platform to assure the effectiveness of this study. This entails distributing a Google form for responders to complete in exchange for an in-person interview. This is done to make it simpler for researchers to quickly and easily gather information that is more focused. It might expedite research even more.

The researcher needs to decide which respondents to interview in more detail at first. They must be directly related to the subject of the study because if the respondent is familiar with it, it may facilitate the search for relevant material and be faster. If the respondents comprehend the study's topic clearly, it may help to collect respondent data more accurately and fast. Finding the appropriate target respondents for the study is practical on the part of the researcher because problems may arise when the target respondents do not understand the given research topic clearly and it can make it complicated for the researcher to complete the future studies.

Next, to ensure that the findings of the study are fair and focused, the next researcher needs to focus on the target group of respondents which includes UMK City Campus staff and students. The expected results should be compatible with the title of the study, which is to identify the challenges and the level of effectiveness of campus well-being initiatives among students and staff at UMK City Campus. Based on the data results, it can be used as knowledge provided to students and staff at UMK City Campus to find out about work and study experiences while in such a situation.

Finally, when planning future investigations, researchers may consider other variables through perspective. The variables in this study that only have moderate relationship with the independent variable which is motivation, participant awareness, participant interest, leadership support, and facilities.

5.5 SUMMARY

In conclusion, this study was conducted for identifying the challenges and the level of effectiveness of campus wellness initiatives among students and staff in UMK City Campus. This study is focused on the relationship between five independent variables known as motivation, leadership support, participant interest, participant awareness and facilities and one dependent variable which is level of initiatives of effectiveness. All of the research questions for this study have been addressed, and all of the independent variables are significant and related to one another. It also explains the constraints and also suggestions in making this study smoother in the future. In short, according to the results, all independent variables are moderately positive and correlated with the dependent variable except facilities variables. In conclusion, the study's goal of determining the impact of campus wellness activities among UMK City Campus students and staff has been accomplished.

REFERENCES

Health Direct. (2018, March 9). *Motivation: How to get started and staying motivated*. Healthdirect.gov.au; Health direct Australia. https://www.healthdirect.gov.au/motivation-how-to-get-started-and-staying-motivated

Cherry, K. (2022, May 23). *Motivation: Psychological factors that guide behaviour*. Verywell Mind. https://www.verywellmind.com/what-is-motivation-2795378

Lowe, E. (2019, May 26). *The importance of supportive leadership*. Think Forward Consulting - Business Development; Think Forward Consulting - Business Development. https://thinkforwardconsulting.co.uk/the-importance-of-supportive-leadership/

Aldana, D. S. (2020, January 2). *The 7 Best Reasons to Have a Wellness Program: Benefits of Wellness*. Employee Wellness Programs. https://www.wellsteps.com/blog/2020/01/02/reasons-to-have-a-wellness-program-benefits-of-wellness/

Williams, L. (2019, May 29). *What Is Zumba?* Verywell Fit; Verywell Fit. https://www.verywellfit.com/zumba-pros-cons-and-how-it-works-4688722

Academy, W. (2021, June 13). Importance of Wellness Programs in Schools for Students. Walkertown Academy. https://www.walkertownacademy.com/importance-of-wellness-programs-in-school/

Rose, A., Khullar, L., & Zettervall, A. (n.d.). *Developing University Wellness Programs ULEAD 2017*. https://hr.unc.edu/wp-content/uploads/sites/222/2017/12/Developing-University-Wellness-Programs-ULEAD-2017.pdf

True Purpose of Employee Wellness Programs. (n.d.). Www.lark.com. Retrieved

    December 5, 2022, from https://www.lark.com/resources/true-purpose-of-

    employee-wellness-programs

Student Wellness: Action Plan. (n.d.). Division of Student Life. Retrieved December 5,

    2022, from

    https://studentlife.uiowa.edu/departments/air/improvement/departmental-

    program-review/action-plan/student-wellness-action-plan/

Popirtac, F. (2021, August 25). *Why is Student Wellbeing important?* SPARK.

    https://spark.school/why-is-student-wellbeing-important/

Benefits of wellness program for student in the school. (2020, July 20).

    https://www.sudhirmemorialinstituteliluah.com/benefits-of-wellness-program-

    for-student#:~:text=It%20gives%20us%20physical%20strength

Pfizer. (2022). What is Wellness? | Pfizer. Www.pfizer.com.

    https://www.pfizer.com/health-wellness/wellness/what-is-wellness

Rise Staff. (2019, July 3). 6 Great Examples of Workplace Wellness Programs. Rise;

    Rise. https://risepeople.com/blog/workplace-wellness-programs/

Popirtac, F. (2021, August 25). Why is Student Wellbeing important? SPARK.

    https://spark.school/why-is-student-wellbeing-important/

Ewing, B., Ryan, M., & Zarco, E. P. (2007). A campus wellness program: accepting the

    challenge. The Journal of the New York State Nurses' Association, 38(1), 13–

    16. https://pubmed.ncbi.nlm.nih.gov/17941614/

Christianson, J., Kattelmann, K., Moret, L., Riggsbee, K., Vilaro, M., Olfert, M. D.,

    Mathews, A., Barr, M., & Colby, S. (2018). College Campus Wellness

    Programs: Identifying and Addressing the Health Needs of College Students.

    Journal of Nutrition Education and Behavior, 50(7), S110.

    https://doi.org/10.1016/j.jneb.2018.04.146

campus noun - Definition, pictures, pronunciation and usage notes | Oxford Advanced

    Learner's Dictionary at OxfordLearnersDictionaries.com. (2022).

    Oxfordlearnersdictionaries.com.

https://www.oxfordlearnersdictionaries.com/definition/english/campus#:~:text=
campus-

SHRM. (2019, December 12). How to Establish and Design a Wellness Program.
SHRM; SHRM. https://www.shrm.org/resourcesandtools/tools-and-
samples/how-to-guides/pages/howtoestablishanddesignawellnessprogram.aspx

Kotera, Y., Ting, S.-H., & Neary, S. (2020). Mental health of Malaysian university
students: UK comparison, and relationship between negative mental health
attitudes, self-compassion, and resilience. Higher Education, 81.
https://doi.org/10.1007/s10734-020-00547-w

González-Saldivar, G., Rodríguez-Gutiérrez, R., Viramontes-Madrid, J. L., Salcido-
Montenegro, A., Álvarez-Villalobos, N. A., González-Nava, V., & González-
González, J. G. (2019). Participants' awareness of ethical compliance, safety and
protection during participation in pharmaceutical industry clinical trials: a
controlled survey. BMC Medical Ethics, 20(1). https://doi.org/10.1186/s12910-
018-0344-8

Makubuya, T., Kell, Y., Maro, C., & Wang, Z. (2020). Campus Wellness Facility,
Student Contentment and Health. Recreational Sports Journal, 44(1), 60–66.
https://doi.org/10.1177/1558866120927322

Grossmeier, J. (2018, June 5). Leadership Support and the Effectiveness of Wellness
Initiatives. HERO. https://hero-health.org/blog/leadership-support-and-the-
effectiveness-of-wellness-initiatives/

Rejeski, W. J., & Kenney, E. A. (1988). Fitness Motivation: Preventing Participant
Dropout. In Google Books. Human Kinetics.
https://books.google.com.my/books?hl=en&lr=&id=o4Ano9VrVeQC&oi=fnd&
pg=PR7&dq=participant+awareness+after+joining+wellness+program&ots=m2
e53U9DPi&sig=HF_mZV1_1DIwt7KOL5fghbtPNXs&redir_esc=y#v=onepage
&q=participant%20awareness%20after%20joining%20wellness%20program&f
=false

Mattke, S., Liu, H., Caloyeras, J., Huang, C. Y., Van Busum, K. R., Khodyakov, D., & Shier, V. (2013). Workplace Wellness Programs Study: Final Report. Rand Health Quarterly, 3(2), 7. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4945172/

Tapps, T., Symonds, M., & Baghurst, T. (2016). Assessing employee wellness needs at colleges and universities: A case study. Cogent Social Sciences, 2(1). https://doi.org/10.1080/23311886.2016.1250338

Herrington, J. D., Miller, J. S., Pandey, J., & Schultz, R. T. (2016). Anxiety and social deficits have distinct relationships with amygdala function in autism spectrum disorder. Social Cognitive and Affective Neuroscience, 11(6), 907–914. https://doi.org/10.1093/scan/nsw015

Baldwin, D. R., Towler, K., Oliver, M. D., & Datta, S. (2017). An examination of college student wellness: A research and liberal arts perspective. Health Psychology Open, 4(2), 205510291771956. https://doi.org/10.1177/2055102917719563

Staples, B. A., Shaheen, M., Mayhew, M. J., & Rockenbach, A. N. (2022). Challenge and Support: Worldview Champions Promote Spiritual Wellness. Journal of College and Character, 23(4), 313–332. https://doi.org/10.1080/2194587x.2022.2123826

Gieck, D. J., & Olsen, S. (2007). Holistic Wellness as a Means to Developing a Lifestyle Approach to Health Behavior Among College Students. Journal of American College Health, 56(1), 29–36. https://doi.org/10.3200/jach.56.1.29-36

Klepac, M. J. (1996). Theory and Practical Applications of a Wellness Perspective in Diabetes Education. The Diabetes Educator, 22(3), 225–230. https://doi.org/10.1177/014572179602200305

Lothes, J. E., & Nanney, L. (2019). Using the wellness inventory to assess health and well-being in college students at the end of the semester. Journal of American College Health, 68(3), 294–301. https://doi.org/10.1080/07448481.2018.1549047

Lister, K., Seale, J., & Douce, C. (2021). Mental health in distance learning: a taxonomy of barriers and enablers to student mental wellbeing. Open Learning: The Journal of Open, Distance and E-Learning, 1–15. https://doi.org/10.1080/02680513.2021.1899907

Franzidis, A. F., & Zinder, S. M. (2019). Examining Student Wellness for the Development of Campus-Based Wellness Programs. Building Healthy Academic Communities Journal, 3(1), 56. https://doi.org/10.18061/bhac.v3i1.6575

Conley, C. S., Kirsch, A. C., Dickson, D. A., & Bryant, F. B. (2014). Negotiating the Transition to College. Emerging Adulthood, 2(3), 195–210. https://doi.org/10.1177/2167696814521808

Oswalt, S. B., Lederer, A. M., Chestnut-Steich, K., Day, C., Halbritter, A., & Ortiz, D. (2018). Trends in college students' mental health diagnoses and utilization of services, 2009–2015. Journal of American College Health, 68(1), 1–11. https://doi.org/10.1080/07448481.2018.1515748

Nesterchuk, N., Grygus, I., Kudriavtsev, A., & Sokołowski, D. (2020). Original Article Impact of the wellness program on the quality of life of students. Journal of Physical Education and Sport ® (JPES), 20, 929–938. https://doi.org/10.7752/jpes.2020.s2132

Baldwin, D. R., Towler, K., Oliver, M. D., & Datta, S. (2017). An examination of college student wellness: A research and liberal arts perspective. Health Psychology Open, 4(2), 205510291771956. https://doi.org/10.1177/2055102917719563

Amaya, M., Donegan, T., Conner, D., Edwards, J., & Gipson, C. (2019). Creating a Culture of Wellness: A Call to Action for Higher Education, Igniting Change in Academic Institutions. Building Healthy Academic Communities Journal, 3(2), 27. https://doi.org/10.18061/bhac.v3i2.7117

Davidson, C. (n.d.). THE EFFECTS OF A WORKSITE WELLNESS PROGRAM ON THE EFFECTS OF A WORKSITE WELLNESS PROGRAM ON PRESCRIPTION CLAIMS PRESCRIPTION CLAIMS https://orcid.org/0000-0002-8080-760X. https://doi.org/10.13023/ETD.2017.214

Gunnell, K. E., Mosewich, A. D., McEwen, C. E., Eklund, R. C., & Crocker, P. R. E. (2017). Don't be so hard on yourself! Changes in self-compassion during the first year of university are associated with changes in well-being. Personality and Individual Differences, 107, 43–48. https://doi.org/10.1016/j.paid.2016.11.032

Ng, P., Su, X. S., Lai, G., Chan, D., Ho, E., Chan, V., Leung, H., Kwan, V., & Li, C. (2016). A Holistic Model of Student Development. Measurement and Evaluation in Counseling and Development, 074817561562574. https://doi.org/10.1177/0748175615625748

Wager, K. A., Lee, F. W., & Glaser, J. P. (2021). Health Care Information Systems: A Practical Approach for Health Care Management. In Google Books. John Wiley & Sons. https://books.google.com/books?hl=en&lr=&id=io1SEAAAQBAJ&oi=fnd&pg=PR15&dq=(What+Is+Healthcare+Management+and+Why+Does+It+Matter+%3F

McDonald-Yale, E., & Birchall, S. J. (2021). The built environment in a winter climate: improving university campus design for student wellbeing. Landscape Research, 1–15. https://doi.org/10.1080/01426397.2021.1881768

Guan, T., Meng, K., Liu, W., & Xue, L. (2019). Public Attitudes toward Sustainable Development Goals: Evidence from Five Chinese Cities. Sustainability, 11(20), 5793. https://doi.org/10.3390/su11205793

Gacek, M., Smoleń, T., & Pilecka, W. (2017). Consequences of Learned Helplessness and Recognition of the State of Cognitive Exhaustion in Persons with Mild Intellectual Disability. Advances in Cognitive Psychology, 13, 42–51. https://doi.org/10.5709/acp-0205-6

Yilmaz, E., Şahin, M., & Turgut, M. (2017). Variables Affecting Student Motivation Based on Academic Publications. Journal of Education and Practice, 8(12). https://files.eric.ed.gov/fulltext/EJ1140621.pdf

Ryan, R., & Deci, E. (n.d.). Brick by Brick: The Origins, Development, and Future of Self-Determination Theory. https://selfdeterminationtheory.org/wp-content/uploads/2019/06/2019_RyanDeci_BrickByBrick_PrePrint.pdf

Shek, D., & Lin, L. (2016). Changes in University Students after Joining a Service Leadership Program in China. The Journal of Leadership Education, 15(1), 96–109. https://doi.org/10.12806/v15/i1/a2

Lumpkin, A., & Achen, R. (2019). Leadership Education: Assessment of Learning in a Sport Leadership Course. Journal of Leadership Education, 18(2). https://doi.org/10.12806/v18/i2/r7

Kelly, A., & Azaola, M. C. (2015). The benefits of Student involvement in leadership: An annotated bibliography of underpinning research.

Grossmeier, J., Chapman, L., Moorefield, R., Kenney, C., Toussaint, L., Luskin, F., Aberman, R., & DeLorenzo, A. (2019). Editor's Desk: Addressing Spiritual Well-Being in the Workplace. American Journal of Health Promotion, 33(7), 1081–1093. https://doi.org/10.1177/0890117119866957

Tapps, T., Symonds, M., & Baghurst, T. (2016). Assessing employee wellness needs at colleges and universities: A case study. Cogent Social Sciences, 2(1). https://doi.org/10.1080/23311886.2016.1250338

Wong, E. M. L., Leung, D. Y., Tam, H. L., Wang, Q., Yeung, K. W., & Leung, A. Y. (2021). The Effect of a Lifestyle Intervention Program Using a Mobile Application for Adults with Metabolic Syndrome, versus the Effect of a Program Using a Booklet: A Pilot Randomized Controlled Trial. Clinical Interventions in Aging, Volume 16, 633–644. https://doi.org/10.2147/cia.s303920

Collazos, C. A., Gutiérrez, F. L., Gallardo, J., Ortega, M., Fardoun, H. M., & Molina, A. I. (2018). Descriptive theory of awareness for groupware development. Journal

of Ambient Intelligence and Humanized Computing, 10(12), 4789–4818. https://doi.org/10.1007/s12652-018-1165-9

Lipson, S. K., & Eisenberg, D. (2017). Mental health and academic attitudes and expectations in university populations: results from the healthy minds study. Journal of Mental Health, 27(3), 205–213. https://doi.org/10.1080/09638237.2017.1417567

Bourdon, J. L., Moore, A. A., Long, E. C., Kendler, K. S., & Dick, D. M. (2018). The relationship between on-campus service utilization and common mental health concerns in undergraduate college students. Psychological Services, 17(1). https://doi.org/10.1037/ser0000296

Oswalt, S. B., Lederer, A. M., Chestnut-Steich, K., Day, C., Halbritter, A., & Ortiz, D. (2018). Trends in college students' mental health diagnoses and utilization of services, 2009–2015. Journal of American College Health, 68(1), 1–11. https://doi.org/10.1080/07448481.2018.1515748

Dieringer, D. D., Lenz, J. G., Hayden, S. C. W., & Peterson, G. W. (2017). The Relation of Negative Career Thoughts to Depression and Hopelessness. The Career Development Quarterly, 65(2), 159–172. https://doi.org/10.1002/cdq.12089

Lederer, A. M., & Oswalt, S. B. (2017). The Value of College Health Promotion: A Critical Population and Setting for Improving the Public's Health. American Journal of Health Education, 48(4), 215–218. https://doi.org/10.1080/19325037.2017.1316692

Franzidis, A. F., & Zinder, S. M. (2019). Examining Student Wellness for the Development of Campus-Based Wellness Programs. Building Healthy Academic Communities Journal, 3(1), 56. https://doi.org/10.18061/bhac.v3i1.6575

Makubuya, T., Kell, Y., Maro, C., & Wang, Z. (2020). Campus Wellness Facility, Student Contentment and Health. Recreational Sports Journal, 44(1), 60–66. https://doi.org/10.1177/1558866120927322

Kampf, S., Haines, S. G., & Gambino, S. (2018). The Impact of New or Renovated Collegiate Recreation Centers on Recruitment and Retention. Recreational Sports Journal, 42(1), 18–32. https://doi.org/10.1123/rsj.2017-0005

Lokman, A., Hassan, F., Ustadi, Y. A., Ab, F. A., Rahman, Z. M. Z., & Rahmat, N. H. (2022). Investigating Motivation for Learning Via Vroom's Theory.

Prebensen, N. K. (2017). The mediating effect of real-life encounters in co-writing tourism books. Tourism Management, 62, 1–9. https://doi.org/10.1016/j.tourman.2017.03.008

Wong, R. (2020). When no one can go to school: does online learning meet students' basic learning needs? Interactive Learning Environments, 1–17. https://doi.org/10.1080/10494820.2020.1789672

Lee, J., Lee, H. J., & Bong, M. (2021). Boosting Children's Math Self-Efficacy by Enriching Their Growth Mindsets and Gender-Fair Beliefs. Theory into Practice. https://doi.org/10.1080/00405841.2021.1932156

Cho, M.-H., Park, S. W., & Lee, S. (2019). Student characteristics and learning and teaching factors predicting affective and motivational outcomes in flipped college classrooms. Studies in Higher Education, 1–14. https://doi.org/10.1080/03075079.2019.1643303

Ruegg, R. (2018). The effect of peer and teacher feedback on changes in EFL students' writing self-efficacy. The Language Learning Journal, 46(2), 87-102.

CFI Team. (2022, October 13). Supportive Leadership. Corporate Finance Institute. https://corporatefinanceinstitute.com/resources/management/supportive-leadership/

Mattke, S., Kapinos, K., Caloyeras, J. P., Taylor, E. A., Batorsky, B., Liu, H., Van Busum, K. R., & Newberry, S. (2015). Workplace Wellness Programs: Services Offered, Participation, and Incentives. Rand Health Quarterly, 5(2), 7. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5158287/

Mattke, S., Liu, H., Caloyeras, J., Huang, C., Van Busum, K., Khodyakov, D., Shier, V., & Health, R. (n.d.). Workplace Wellness Programs Study Final Report. Retrieved December 6, 2021, from https://www.dol.gov/sites/dolgov/files/EBSA/researchers/analysis/health-and-welfare/workplace-wellness-programs-study-full-text.pdf

Äikäs, A., Absetz, P., Hirvensalo, M., & Pronk, N. (2020). Eight-Year Health Risks Trend Analysis of a Comprehensive Workplace Health Promotion Program. International Journal of Environmental Research and Public Health, 17(24), 9426. https://doi.org/10.3390/ijerph17249426

Monica, 1776 M. S. S., & California 90401-3208. (n.d.). Workplace Wellness Programs Study. Www.rand.org. https://www.rand.org/pubs/periodicals/health-quarterly/issues/v3/n2/07.html

Meng, L., Wolff, M. B., Mattick, K. A., DeJoy, D. M., Wilson, M. G., & Smith, M. L. (2017). Strategies for Worksite Health Interventions to Employees with Elevated Risk of Chronic Diseases. Safety and Health at Work, 8(2), 117–129. https://doi.org/10.1016/j.shaw.2016.11.004

Butterfield, A., Ngondi, G. E., & Kerr, A. (2016). A Dictionary of Computer Science. In Google Books. Oxford University Press. https://books.google.com.my/books?id=MFU0CwAAQBAJ&pg=PA437&lpg=PA437&dq=At+a+finer+level

Jasemi, M., Zamanzadeh, V., Valizadeh, L., Keogh, B., & Taleghani, F. (2015). Effective factors in providing holistic care: A qualitative study. Indian Journal of Palliative Care, 21(2), 214–224. https://doi.org/10.4103/0973-1075.156506

SAMHSA. (2016). CREATING A HEALTHIER LIFE, A STEP-BY-STEP GUIDE TO WELLNESS. https://store.samhsa.gov/sites/default/files/d7/priv/sma16-4958.pdf

Burns, D., Dagnall, N., & Holt, M. (2020). Assessing the Impact of the COVID-19 Pandemic on Student Wellbeing at Universities in the United Kingdom: A

Conceptual Analysis. Frontiers in Education, 5.

https://doi.org/10.3389/feduc.2020.582882

USC Libraries. (2018). Research Guides: Organizing Your Social Sciences Research

Paper: Types of Research Designs. USC Libraries.

https://libguides.usc.edu/writingguide/researchdesigns

Explorable. (2019). Research Population - The Focus Group of a Scientific Query.

Explorable.com. https://explorable.com/research-population

Admin. (2022, November 6). Data Analysis in Research | Types of Data Analysis |

Process of Data Analysis in Research. Library & Information Management.

https://limbd.org/data-analysis-in-research-types-of-data-analysis-process-of-

data-analysis-in-research/

Loeb, S., Dynarski, S., McFarland, D., Morris, P., Reardon, S., & Reber, S. (2017).

Descriptive Analysis in Education: A Guide for Researchers. NCEE 2017-4023.

In ERIC. National Center for Education Evaluation and Regional Assistance.

https://eric.ed.gov/?id=ED573325

Holcomb, Z. (2016). Fundamentals of Descriptive Statistics. Routledge.

https://doi.org/10.4324/9781315266510

Gupta, A., Mishra, P., Pandey, C., Singh, U., Sahu, C., & Keshri, A. (2019). Descriptive

Statistics and Normality Tests for Statistical Data. Annals of Cardiac

Anaesthesia, 22(1), 67.

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6350423/

Mohajan, H. K. (2017). TWO CRITERIA FOR GOOD MEASUREMENTS IN

RESEARCH: VALIDITY AND RELIABILITY. Annals of Spiru Haret

University. Economic Series, 17(4), 59–82.

https://www.ceeol.com/search/article-detail?id=673569

de Winter, J. C. F., Gosling, S. D., & Potter, J. (2016). Comparing the Pearson and

Spearman correlation coefficients across distributions and sample sizes: A

tutorial using simulations and empirical data. Psychological Methods, 21(3),

273–290. https://doi.org/10.1037/met0000079

Elliott, R. (2021, January 26). Likert Scale Examples and Definition. GeoPoll.

    https://www.geopoll.com/blog/likert-scale-examples-definition/

Hayes, A. (2021, July 28). Demographics. Investopedia.

    https://www.investopedia.com/terms/d/demographics.asp

Swetha Amaresan. (2019). 19 Questionnaire Examples, Questions, & Tips to Help You

    Create Your Own [Templates]. Hubspot.com.

    https://blog.hubspot.com/service/questionnaire

Taherdoost, H. (2017). Determining Sample Size; How to Calculate Survey Sample

    Size. International Journal of Economics and Management Systems.

    https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3224205

Kretzschmar, A., & Gignac, G. E. (2019). At what sample size do latent variable

    correlations stabilize? Journal of Research in Personality, 80, 17–22.

    https://doi.org/10.1016/j.jrp.2019.03.007

UCLA. (2021). What does Cronbach's alpha mean? | SPSS FAQ. Stats.oarc.ucla.edu.

    https://stats.oarc.ucla.edu/spss/faq/what-does-cronbachs-alpha-

    mean/#:~:text=Cronbach

TheBMJ. (2019). 11. Correlation and regression | The BMJ. Bmj.com.

    https://www.bmj.com/about-bmj/resources-readers/publications/statistics-

    square-one/11-correlation-and-regression

CFI Team. (2022, December 6). Descriptive Statistics. Corporate Finance Institute.

    https://corporatefinanceinstitute.com/resources/data-science/descriptive-

    statistics/

Seifert, C. M., Chapman, L. S., Hart, J. K., & Perez, P. (2017). Enhancing Intrinsic

    Motivation in Health Promotion and Wellness. *American Journal of Health

    Promotion*, *26*(3), 1–12. https://doi.org/10.4278/ajhp.26.3.tahp

Hoert, J., Herd, A. M., & Hambrick, M. (2018). The Role of Leadership Support for

    Health Promotion in Employee Wellness Program Participation, Perceived Job

    Stress, and Health Behaviors. *American Journal of Health Promotion*, *32*(4),

    1054–1061. https://doi.org/10.1177/0890117116677798