

**INFLUENCE OF PERCEIVED POSITIVE LIFESTYLE ON ORGANIZATIONAL  
COMMITMENT AMONG EMPLOYEES OF KENYA BROADCASTING  
CORPORATION, NAIROBI, KENYA**

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## DECLARATION

This research project is my original work and has not been presented for the award of degree in any other University or Institution for any other purpose

Signature..... Date.....

Adeola Ajayi

D61/72089/2011

This research project has been submitted for examination with my approval as University supervisor

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## **DEDICATION**

This work is dedicated to the glory of God to my late Parents (ELDER JEREMIAH AND MRS ESTHER ADEMUYIWA) and my late Parents –in law (Pa DAVID AND MRS OLA AJAYI). Mum, you laid the foundation when you taught me in Primary Two.

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## **ABBREVIATIONS AND ACRONYMS**

CNCD	-	Chronic Non Communicable Disease
CNCDs	-	Chronic Non Communicable Diseases
HIV & AIDS	-	Human Immunodeficiency Virus & Acquired Immunodeficiency Syndrome
KBC BH	-	Kenya Broadcasting Corporation Broadcasting House
KBC	-	Kenya Broadcasting Corporation
SCA	-	State Advisory Act
SCAC	-	State Advisory Committee
SCS	-	State Advisory Sector
SPSS	-	Statistical Package for Social Sciences

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## **ABSTRACT**

Lifestyle is about all habits, attitudes and ways of life developed by an individual that could either promote (when positive) or deteriorate (when negative) health over time. It involves norms, values and interests that are developed over the years as an individual grows into maturity and beyond. The main objective of the study was to establish the influence of perceived positive lifestyle on commitment among employees at Kenya Broadcasting Corporation. The design for this study was a descriptive survey. The target population of this study was 988 employees of Kenya Broadcasting Corporation. A sample size of 150 employees was regarded adequate in this study. Primary data was gathered directly from respondents and for this study, the researcher used a questionnaire. Quantitative data collected using questionnaires was analyzed using descriptive statistics using SPSS (Statistical Package for Social Sciences). From the findings, the study found out that there is a positive correlation between perceived positive lifestyle and organizational commitment. It found out that employees at Kenya Broadcasting Corporation perceived daily consumption of vegetables and foods high in fiber important for healthy living. The study found out that employees preferred teaching their family about positive lifestyle in order to protect future lifestyle related diseases. The study concluded that employees of Kenya Broadcasting Corporation are committed to the corporation to the extent that they are willing to be involved in any program organized by the corporation. The study concludes that employee commitment is well measured by the extent employees are willing to be involved in any program organized by their employers, the extent they feel part of the organization and the extent employees feel that their employers deserves their loyalty. It concludes that there is a significant relationship between perceived positive lifestyle and organizational commitment.

## CHAPTER ONE: INTRODUCTION

### 1.1 Background of the Study

Lifestyle refers to all habits, attitudes and ways of life developed by an individual that could either promote (when positive) or deteriorate (when negative) health over time. It involves norms, values and interests that are developed over the years as an individual grows into maturity and beyond (Health, Wellness, Fitness and Healthy Lifestyles). It is not only important to feel well but it is equally necessary to be able to function effectively as wellness expands an individual's potential to live, work effectively and make a significant contribution to the society. Many organizations have therefore device different means to ensure the safety and health of their employees. Studies (Baptiste, 2007; Tehrani et al, 2007; Manna 2008) have shown that the management of employees and taking care of their interest must be at the center of activities in the organization and this must be felt (Soupata, 2005) owing to the fact that it directly or indirectly affects return on investment (Goetzel, 2005). Some of the initiatives include free or subsidized gym memberships, exercise groups, fitness classes and walking meetings. These initiatives have also been devised with the top managers leading in those activities to encourage the entire members in the organization of their support and ensure their participation (Goetzel, 2005). Issues of lifestyle is critical to organizations because of its many benefits and the return on investment (\$3-\$6) that employers can have over a specified period of 2-5 years as reported by Koffman et al, (2005).

Risk factors are smoking, drinking, poor diet, lack of physical activities/ sedentary lifestyle, high sugar and salt intake, obesity, etc. The risk factors can also be considered as negative lifestyles and smoking for instance is considered a deadly epidemic (K'Obonyo 2001) which when practiced over long period develops into CNCDS such as stroke, type 2 diabetes, cancer and other diseases. It has become necessary for all individuals to be aware of the risk factors

that leads to sicknesses and that every individual become responsible for their health as they adopt positive lifestyles. This issue has been the public health concern that most risk factors are associated with lifestyle practices (Anderson, 2004). While many illnesses are manageable and have only limited effects on total health, others such as diabetes are incurable but can be managed with proper eating, physical activity and sound medical supervision (Health, Wellness, Fitness and Healthy Lifestyles). Some of these diseases were termed by Azevedo and Alla (2008) as ‘disease of affluence’ but this term is no longer relevant today as it is now prevalent in most developing Countries and the authors raise an alarm that diabetes has the potential severity that epidemiologists have predicted that its economic impact and death toll will surpass that of HIV&AIDS in the near future and that it will affect mostly those in working age. The need then is not only for Organizations to intervene but for employees also to be committed to the organization in every bid to fight this menace. However, organizational commitment does not come easy, it is a culture by both the organization and the employees.

There are many State Corporations in Kenya established under the State Corporations Act Cap 446([www.scac.go.ke](http://www.scac.go.ke)). The State Corporation Sector has a Committee called SCAC which is established under S.26 of the State Corporations Act Cap 446. The SCAC is a department of the Cabinet Office mandated to advice Government on all matters pertaining to the general Administration of SCS. Many Kenyans are employed in these Corporations and their perceptions about their employers and their commitment to the goals set by the employers are crucial. For example Kenya’s vision 2030 gives the Government’s long term objectives for the Country. The Ministry of Public Health and Sanitation drawing from the Government objectives came up with the Vision to make Kenya ‘a nation free from preventable disease and ill health’ through facility levels. The increasing productivity of people and processes will determine the achievement of the development goals outlined in

Vision 2030. Thus employers as well as employees can play critical supportive roles in maintaining the healthy workforce necessary for the increased labour productivity that Kenya requires in order to match its global competitors (Ministry of Public Health and Sanitation, 2008).

### **1.1.1 Concept of Perception**

Perception is about our response to what we sense around us or in our environment. It is a unique way in which we understand our environment and the people around us. It is a process through which we have access to information about properties and elements of the environment that are vital to our survival. In addition to creating our experience of the world around us; perception allows us to act within our environment. Two people exposed to the same situation may perceive and react to the situation differently. For example while someone sees a product advertisement as simple another person may consider it as not addressing the need. This is as a result of having different interpretation, judgment and evaluation to what they experience, see or observe (Kendra, 2013).

The five senses such as touch, sight, taste, smell and hearing ability are needed in order to perceive. It also includes a set of senses involving the ability to detect changes in body positions and movements. It involves the cognitive processes required to process information, such as the ability to recognize the face of a friend/someone you have met somewhere before or detecting a familiar scent ( Kendra, 2013: Rummel, 1975).

### **1.1.2 Positive Lifestyle**

Positive Lifestyle refers to all positive habits that an individual needs to develop for healthy living. Living a positive lifestyle involves eating right, engaging in physical exercises/physical activities, and positive thinking about life issues which leads to emotional

well-being. Lifestyle has been the focus of discussion of recent research and has become a subject of so much importance that the principal public health goal of Western nations is to improve the healthy life span of all individuals. Presently the average life expectancy in the Western world is slightly more than 76 years of which an average person can expect 64 years of healthy life while approximately 12 years are characterized as dysfunctional or lacking in quality of life (www.mhhe.com). Lifestyle change more than any other factor is considered to be the best way of preventing illness and early death in our society. This is so because there is no secure treatment for people with some types of diseases but most incidents are preventable through changes in health behaviors (Lucettek et al,1996). This establishes the fact that healthy lifestyles are critical to wellness and awareness of one's risk for diseases and understanding factors that are associated with positive lifestyle changes in people who are told of their risk may be helpful in planning successful lifestyle interventions (Okosun et al, 2012).

### **1.1.3 Organizational Commitment**

Commitment is an important factor in making success and in performing tasks. It is a focus on a certain purpose or course that ignites an action in an individual (Vance 2006). It can be persistent belief in a thing or an issue. There are two conditions necessary for commitment namely, a sound set of beliefs and faithfully holding on to those beliefs by one's action or behavior. Employees' commitment is considered in terms of their devotion to the organization, to their job or to the programs organized in the interest of the employees. People that have succeeded in business or in their endeavor are known to have visions and to hold firmly to their belief or goal. Committed people are grounded in their beliefs which can be expressed in the form of values, principles or beliefs, confidence in oneself, concern for customers, concern for results, concern for people, concern for and loyalty to the organization. The three dimensional framework of commitment based on employee mindsets

are affective commitment, continuance commitment and normative commitment (Meyer and Herscovitch, 2001).

#### **1.1.4 Kenya Broadcasting Corporation**

Kenya Broadcasting Corporation (KBC) is owned by the state and it was established by an Act of Parliament, CAP 221 of the laws of Kenya to provide public services. It is one of the Commercial/ Manufacturing Corporations. It handles broadcasting of news and communication within the country and outside Kenya. The Corporation is a body corporate with perpetual succession and a common seal and have the power to sue and to be sued in its corporate name and to acquire, hold and dispose of movable and immovable property for the purposes of the Corporation. The Headquarters of the Corporation is in Nairobi. KBC aims to inform, educate and entertain the public through radio and television services and thereby propagate all that consolidates national unity, peace, love and development. The Station broadcasts both in English and Swahili (a language spoken in most parts of Eastern Africa) as well as in other languages in Kenya. The Corporation started broadcasting in 1928 under the British Colonial rule. KBC was named 'Voice of Kenya' in 1964 when the nation became independent and was renamed KBC through an act of Parliament. The levels of Management at KBC starts from the Board of Directors, the Senior Managers (comprising of all the Head of departments), the Supervisors, the line managers (comprising of the head of sections) and the Junior employees (Assistant head of sections, Chief, etc). KBC has about 1000 employees with the following departments: Administration, Advertising, Directorate, Editorial Services, Human Resources, Information, Communication &Technology, Independent, Marketing, Radio, Technical Services, Television Services and Finance departments (www.kbc.ac.ke; KBC, 2013)

The Corporation is under the Ministry of Information, Communication and Technology. With a working population of about 1000 employees it is place fit for the study in that the population is large enough for data collection on the perceived positive lifestyle of employees and commitment. One of the aims of the Corporation is to increase the understanding of government development policies and strategies by the public ([www.kbc.ac.ke](http://www.kbc.ac.ke)). This caught the attention of the researcher in that the Corporation is a good medium that can impart knowledge through communication with key publics on the importance of employees' health and commitment in organizations.

## **1.2 Research Problem**

Positive lifestyle is becoming a critical issue in the public health circles and among the Employers of labor which calls for adequate and timely intervention by employers. The importance stems from the fact that employees' health and safety affect the bottom line in any organization as many literatures have reported the effect of healthcare cost ( Ladki et al, 1998; Burton et al, 2001; Goetzel et al, 2011) on the profits. Employees with positive lifestyles will have fewer reasons for abstaining from their duties and when they are present will give their best in terms of their contribution to the organization's success, will perceive organizational programs with positive attitudes and are likely to be more committed than those with negative lifestyles. What stands clear in the literature is that employees trust in management affect their commitment (Soupata, 2005; Baptiste, 2007) while their commitment is influenced by their perception of the organization's behavior (Ensher et al, 2001). While many Private organizations have considered the importance of the strategic human resources management practices of incorporating employees healthcare costs and benefits in their policies as a way of motivating the workers and taking care of their health, most public service workers do not have such luxury. Ironically, organizations where such facilities are provided are facing different challenges ranging from unenthusiastic employee,

privacy and discrimination concerns and skepticism about return on investment by some Chief Executive Officers (CEOs).

The Management of KBC conducts an annual internal survey every financial year in order to know and capture information from the employees which covers information about the employees' satisfaction, employees' capacity building needs, the welfare of the employees. ([www.kbc.ac.ke](http://www.kbc.ac.ke)). Syengo (2007) conducted a study on Kenya State Corporations about the relationship between pay, job satisfaction and organizational commitment. He found out that in the majority of State Corporations, the employees are satisfied with their job and are committed to their organization but the only limiting factor is pay level which the majority of the employees are not satisfied with. From the data analysis it was found that the salary paid to the employees was not attractive vis-à-vis what was on offer in the market and that the pay on offer in the majority of the organizations was not commensurate with qualifications, skills and experience. This limiting factor affects organisational employee commitment and their lifestyle since they cannot be able to afford balanced diet required to improve their health.

Over the past two to three decades, research interest had been considering and demonstrating the relationship between employees' poor health and employer costs. Studies by Goetzel et al, (2011); Goetzel et al (1998) confirmed that there is an association between workers modifiable health risks and increased health care costs. Ike et al, (2010) recommended that comprehensive treatment of Blood pressure should include educational and social awareness strategies that encourage healthy lifestyle measures. This is buttressed by Kusuma et al (2009) who found that prevention of hypertension requires a life-long adoption of healthy lifestyles. These realities have placed a high value on wellness programs and policies that promote the healthy state of employees as a way for reducing absenteeism, presenteeism and employee turnover as well as offering a benefit that is appealing to many current as well as prospective employees ([www.healthaffairs.org](http://www.healthaffairs.org)). Hunter and O'Dea (1999) considered

perception of future health risks in middle aged women with consideration on estimating behavioral changes (with or without) and hormone replacement therapy. The study recommends that in the development of effective health promotion strategies for mid-aged women there is need to have information and understand their perceptions of future health risks. It was also reported that the extent to which they are perceived to be modifiable by health behavior change or hormone replacement therapy was also a crucial information. None of the studies reviewed above considered the influence of perceived positive lifestyle on employee commitment. This research is therefore intended to fill this gap in knowledge. Specifically, the study will focus on the influence of employees' perceived personal positive life on their commitment. The study will answer the question: What is the influence of perceived personal positive lifestyle on commitment of employees at Kenya Broadcasting Corporation?

### **1.3 Research Objective**

To establish the influence of perceived positive lifestyle on commitment among employees at Kenya Broadcasting Corporation

### **1.4 Value of the Study**

The study is concerned with the way employees perceive positive lifestyle and how their perception affects commitment. The result of which will be useful to different stakeholders. Kenya Broadcasting Corporation will top the list as study will give the details of the views of employees at the different management levels in the Corporation and how the Corporation policies can be modified to meet the specific needs in terms of the positive lifestyles of workers which can add value and place the organization in a competitive position.

This study will be of added value to academicians in that it will provide a fundamental basis on which other studies on employees perceived positive lifestyle and commitment' can be conducted. It will equally provide insight into the effectiveness of organizations interventions on positive lifestyles. Investors will gain an insight into the way employees perceive positive lifestyle and how this can affect their commitment and investment viability.

Government ministries and agencies will find study useful in the formulation of policies and framework on commitment of employees in relation to interventions by employers.

## **CHAPTER TWO: LITERATURE REVIEW**

### **2.1 Introduction**

This chapter will review studies that have been done in the past that are relevant to this research study on the influence of perceived positive lifestyle and commitment among employees. The chapter will explore the concept of positive lifestyle, commitment and finally link positive lifestyle and commitment.

### **2.2 Positive Lifestyle**

Many studies have shown that most chronic diseases are associated with lifestyle practices (Anderson, 2004; Montano et al, 2008; Monge- Rojas et al, 2009; Ike et al, 2010; Okosun et al, 2012; Rolando et al, 2013). Lifestyle changes is considered to be the best way of preventing illness as the major causes of early death have shifted from infectious diseases to chronic lifestyle related conditions (Tawa et al, 2011; Lokuruka, 2010). Statistics suggest that modest changes in physical activity and nutrition can prevent more than 200,000 premature death annually (Health, Wellness, Fitness and Healthy Lifestyles).

The issue of positive lifestyle (which involves participation in frequent physical activities, eating less of fatty foods and more of fibrous diets and veggies, reduction in drinking and smoking habits etc) becomes critical when one considers that most people are not aware (Fakunaga et al, 2011) of their disposition to diseases and are not taking measures of prevention. Among those that are aware and are taken measures of prevention a good number are not regular in taking their medications (Ike et al, 2010). Okosun et al, (2012) posit that awareness of one's risk for diseases and understanding factors that are associated with positive lifestyle changes in people who are told of their risk may be helpful in planning successful lifestyle interventions in groups. The importance of awareness (Ladki et al, 1998;

Anderson, 2004; Fortier et al, 2007; Kusuma et al, 2009; Ike et al, 2010;) have been stressed as it brings people face to face with the reality of their situation and the risks involved in not facing it.

The high occurrence of risk factors which can also be called negative lifestyles (such as drinking, substance use, smoking, overeating, high cholesterol levels, lack of exercise) leading to chronic non-communicable diseases has called for the need for an intervention by employers which can be done through creation of awareness among workers. Such health compromising habits can be eliminated by self-regulatory efforts and health enhancing behaviors such as physical exercise, weight control, preventive nutrition and accident prevention (Tulchinsky and Varavikova, 2010). Awareness is called for as a result of both the direct and indirect costs of healthcare borne by employers. Organizations spend huge amounts of money to create awareness among its workers, to train and to teach them all in the bid to ensure safety. Personal health resources (enabling healthy worker lifestyle practices) is enforced as more and more organizations are realizing the importance of this factor to their competitive edge and are encouraging positive lifestyles among workers. The introduction of the right Organizational culture through which employers create a positive work environment that enables employee engagement and the integration of health and safety behaviors is another step in the right direction taken by organizations. Alberta Centre for Active Living reported that physically fit workers have fewer injuries and those injuries tend to heal faster and cost less and that physical activity program can reduce the number of injuries in the workplace by 25% (<http://www.centre4activeliving.ca/workplace/beforestart/benefits-bottom-line.html>).

The occurrence of Chronic non-communicable diseases (CNCDs) such as heart diseases, stroke, type 2 diabetes, cancer etc account for 47% of the global burden of disease in the study by Tawa et al (2011). Consequently, studies by Koffman et al, (2005); Tawa et al,

(2011); Fakunaga et al, (2011); Okosun et al, (2012) have therefore called for the need for awareness and education among the populace as well as interventions to curb these risk factors. Interestingly, the Private sector and non- governmental organizations have incorporated wellness Programs to influence employees' lifestyles and work environment but Government establishments and Parastatals have not followed. With the studies by Ike et al, (2010); Fakunaga et al (2011) which reveals that more than 50% of blood Pressure patients and 25% of diabetic cases respectively are unaware of their condition and of those that are aware more than 50% have not been treated (Ike et al 2010) the need for an intervention at all levels is imminent.

Furthermore, both the direct and indirect costs associated with the spread of non-communicable diseases is a risk to investment that has drawn the attention of employers to this issue. The health of employees and the organizational finances are intertwined. Employees' healthy conditions demand a financially strong organization and a financially healthy organization also needs healthy and productive workers. According to Shi et al, (2013); a 5% reduction in total count of well-being risks was significantly associated with 0.74% reduction in absenteeism, 2.38% reduction in presenteeism and 0.24% increase in performance. High Blood pressure, recurring pain, unhealthy diet, inadequate exercise, poor emotional health, poor supervisor relationship, not utilizing strengths doing jobs and organizational unsupportive of well- being have been reported as having greater independent contributions in explaining productivity impairment. The result of the study by Rolando et al, (2013); concluded that weight reduction observed over a long period can result in clinically important reductions in diabetes incidence. The authors advised that Workplace health promotion programs may prevent diabetes among workers by encouraging weight loss and adoption of healthy lifestyle habits.

Health promotion Programs such as health fairs, health education, medical screenings, health coaching, weight management programs, wellness newsletters, on-site fitness facilities and educational programs are among the measures taken by firms to promote healthy behavior of employees. Workplace wellness policies are designed to facilitate employee health including flextime for exercise. However, the effectiveness of these health promotion programs have been facing challenges such as lack of enthusiasm among employees where such facilities are provided. The new trend by employers who offer multiple health plans are to allow participation in a comprehensive plans only by employees who agree to participate in the wellness program as a way of incentive to encourage employees to participate. Employees who do not participate in the wellness program are offered less comprehensive plan or are asked to pay more in cost sharing on healthcare benefits ([www.healthaffairs.org](http://www.healthaffairs.org)). Such decisions are taken with a view to improve on the participation of employees in wellness programs in the organizations.

Organizations need to encourage employees to be physically and psychologically healthy as both employees and employers could benefit (Brian and Dixon, 1982; Fortier et al, 2007); from efforts to support better health habits. Gilford, (2013) established that employers could improve their productivity if their workers adopt healthier lifestyles while the study by Jain et al, (2013) posit that Presenteeism was positively associated with severity of depression while absenteeism was significantly positively associated with severity of depression.

High unemployment rate in developing nations as found in Nigeria-24% (2011 est.), Kenya - 40% (2008 est.) (- CIA World Fact Book) calls for commitment in employees. However, the reality is that commitment involves time, energy and loyalty thus employees expect there will be some pay back from the employers. The pay back may not always be in form of cash but instead it could be any form of appreciation for example occasional gifts from simple T-shirts to cash that is commensurate with employees' take home, attention, favors, money etc.

Where the employer fails to pay back and show that they appreciate what the employees' offer commitment declines and productivity is affected. Employees as stated by Vance, (2006) have realized that they can no longer count on working for a single employer long enough to retire. And with reduced expectations of reciprocity, workers have felt less commitment to their employers. The lack of commitment will affect all programs proposed by the organization.

A vibrant, satisfied and encouraged public sector workforce will run with the visions and goals set by the Kenyan Government and accomplish them. However the productivity of the workforce is affected by their wellbeing which in turn is determined by their lifestyles. Lokuruka (2010) reported that in 2002 cerebrovascular disease, ischaemic stroke and other cardiovascular diseases (CVD) were responsible for 32, 37 and 31% respectively of 20000 deaths attributed to CVD in males, 37, 28 and 36% respectively of 24000 female deaths in Kenya. Poulter, (1988), Poulter et al (1984) cited by Mbewu and Mbanya (2006) posit that among the Luo of Kenya, increasing blood pressure within months of migrating from the rural areas to the city had been reported with concomitant increase in their dietary sodium and declines in their dietary potassium. Kenya is said to record a 12% rate of prevalence ([www.Korogocho.org](http://www.Korogocho.org)) in diabetes with random sampling in Korogocho and Viwandani indicating that one in seven people aged 18 years and above are either diabetic or hypertensive. Tawa et al (2011) reported in the study they conducted that 9% of their sample population were smokers, 5% were risky drinkers, 42% were physically inactive, 24% hypertensive while 11% were overweight or obese. This calls for an intervention particularly when one considers that majority of people with these diseases are unaware of their state of health and many are not aware of the lifestyle modification measures. Meanwhile these lifestyle modification measures are cheap and effective, without side effects and improve the sense of well-being of people (Ike et al, 2010).

### **2.3 Organizational Commitment**

Commitment is crucial to success. An individual's commitment determines the importance that is attached to the issue under consideration and the sacrifice that the person is willing to make in order to achieve a goal, objective or target set. Employee commitment to the Organization will determine the success and achievement of aims, goals, objectives and targets set in the programs of organizations. The general objective of all employers is to project their positive image as attractive employers to attract and retain a highly skilled and motivated workforce. Companies do this because they know that their success and performance is directly linked to the quality of their workforce (Ehnert, 2008). Soupata (2005) explained that good management is taking a sincere interest in the welfare of the people you work with. It is the ability to make people feel that you and they are the company – not merely the employees of the Company. The author further explained that Company success depends on a commitment to building trust and improving employee relations by relying on integrity, ability and character.

The organization expects employees to contribute to its success and deliver proactively without being pushed or forced. Commitment to the organization however is a 'work attitude' which is affected and determined by a number of factors. Allen & Meyer (1990) describe it as 'a psychological state that binds individual to the organization'. When there is lack of motivation, commitment of employees even in simple job functions drops and this is a threat to the organization's success. Kreisman, (2002) reported that level of commitment is related to satisfaction, turnover, cognitive resonance between different hierarchical levels and performance on the job. Brum (2007) defined a committed employee as the one that will remain with the organization for longer periods of time. In the literature not much has been done on the commitment of employees in relation to lifestyle much of the studies done are on the organizational commitment. Meyer and Herscovitch (2001) proposed that the force of

commitment is experienced as mindset that play a role in shaping behavior, a frame of mind or psychological state that compels an individual towards a course of action. Meyer and Herscovitch (2001) further suggested that the three dimensional framework based on employee mindsets are affective, continual and normative commitments.

### **2.3.1 Affective Commitment**

This refers to the employee's mindset expressing the affective, affiliative and constructive emotional bonding towards the organization. It is characterized by the employee's personal involvement in the activities and processes in the organization. An Employee with affective commitment gets attached to the organizational goals and seeks to stay with it because s/he has chosen to do so, Jaros (2007). In this type of commitment there is an emotional attachment to the organization expressed by the employee. Such employees identifies with, is involved in and enjoys membership in the organization (Allen & Meyer, 1990). Commitment here is described as maintaining a relationship because one wants to.

### **2.3.2 Continuance Commitment**

An Employee here is not yet decided but perceives that it is costly to loose organizational membership. It is a calculative mindset. The reason for this perception varies from financial cost of salary and benefits to social costs of ties and reputation. The employee with this kind of commitment stays in the organization because s/he is tied in and has no choice (Bergman et al, 2013). Continuance commitment is described as maintaining a relationship because one has to.

### **2.3.3 Normative commitment**

Employee here feels an obligation to stay when s/he considers the value commitment the organization has made in him/her. Here relationship is maintained with the employers

because the employee feels s/he should. There is few work reported on employee's commitment as related to positive lifestyle. Meyer and Maltin (2010) acknowledged that affective commitment tends to relate positively to well-being and negatively to strain. They reported that studies of other components of commitment are less common, but Continuance commitment appears to relate positively to strain in many cases. This project is largely to consider the commitment of employees to actions and programs (Neubert & Wu, 2009).

## **2.4 Positive Lifestyle and Organizational Commitment**

Commitment to a physically active lifestyle is of utmost importance as it is the step that can help to achieve and bring many out of health problems (Hansen-Ketchum et al, 2011; Yoo et al, 2012). Fortier et al, (2010) reported that people are personally motivated when they engage in an activity or cease an activity for reasons that come from within the individual and are freely chosen. The authors further explained that in a physical activity contexts, patients are autonomously motivated if they choose to initiate physical activity for enjoyment because they think physical activity is important and will help them attain valued goals and or because of personal commitment to improve their health or quality of life.

The provision of positive environmental cues helps in boosting the behavioral change in employees, for instance an intervention designed to increase stair walking rather than elevator use should provide cues in employees offices and cubicles as well as near the elevator as expresses in the study by Unsworth et al, (2013) while Hansen-Ketchum et al, (2011) explained that lifestyle behaviors are shaped by available resources, social and economic circumstances. These authors quoted Hartig et al (2001) who suggested that engaging with nature can encourage people to learn about the natural world and to adopt pro-environmental behaviors.

Choi and Tang, (2009) defined a committed person as one that believes strongly in the goal and values of the organization, complies with expectations voluntarily, execute considerable effort for the good of the organization and has a strong desire to remain affiliated with the organization. Evidence suggest that having a strong Affective commitment to one's organization might have positive health benefits as reported by Meyer and Maltin (2010). It is important to note that the relationship employees have with their employers has a great impact on their productivity and the acceptance of goodwill from the Organization. Line Managers must therefore appreciate that their actions affect their workers trust which in turn affect worker's commitment.

The perception of every action taken by management is very crucial. Where the employees perceive trust and support in management they find it easy to reciprocate by being motivated and committed towards goals in the organization but where the opposite prevails they also react consciously or unconsciously with low performance. Baptiste (2007); recommended that the principal concern in local government organizations especially its agents (line managers) should be to promote the opportunity for employee involvement, training and career development as well as to ensure that employees are dealt with fairly and given support. This is also emphasized by Carlford et al (2012) who concluded that intervention method or tools perceived by staff as compatible have a potential to be successfully implemented.

The labor force in Kenya was estimated to include about 12 million workers which is a high percentage of the total population and this makes their wellbeing of utmost importance. There is the dire need that more awareness be created as an intervention and remedy towards these vices in the society. This awareness should not only be limited to Hospitals but also to places of employment with the messages given wide publicity to ensure it sinks into all and sundry. Interventions vary from Organization to organization with Awareness taking the top position.

Others are promoting the habit of consumption of balanced diet by supporting restaurants that supplies fruits and vegetables, provision of gyms in the working places with participation from management, providing training sessions on the importance of healthy lifestyles, monitoring and counselling etc. Montano et al, (2008); recommend that policy intervention should support production and supply of healthy foods.

## **CHAPTER THREE: RESEARCH METHODOLOGY**

### **3.1 Introduction**

This chapter set out various stages and phases that were used in completing the study. The following subsections were included; research design, target population, sampling technique, data collection and instruments and finally data analysis.

### **3.2 Research Design**

The design for this study was a descriptive survey. This design was considered appropriate for the study because of the need to collect cross-sectional data. It reported the practice as it was done with no adjustment to the data. It also represented the situation that prevailed in the organization of study on the employees' perceived positive lifestyle and commitment among employees of Kenya Broadcasting Corporation.

### **3.3 Target Population**

According to Ngechu (2004), a study population is a well-defined or specified set of people, group of things, households, firms, services, elements or events which were being investigated. The target population of this study was about 988 employees of KBC.

**Table 3.1: Population size**

<b>Employees' Department</b>	<b>Total Population</b>	<b>Percentage (%)</b>	<b>Population frequency in Nairobi</b>	<b>Percentage (%)</b>
Finance & Administration Directorate	255	26%	138	23%
Editorial service	82	8%	71	12%
Human Resources	41	4%	37	6%
ICT	20	2%	19	3%
Independent	20	2%	11	2%
Sales & Marketing	36	4%	26	4%
Radio	163	16%	139	24%
Technical services	287	29%	80	14%
Television services	58	6%	48	8%
	<b>988</b>	<b>100%</b>	<b>591</b>	<b>100%</b>

Source- KBC, 2013

### 3.4 Sample Design

The sampling design that was used in this study is a scientific formula in determining the sample size.

$$n = \frac{N}{1 + Ne^2}$$

Where

n= desired sample size for the study area

N=total no. of employees in the study area

e = desired margin error

Source: (Israel, 1992)

A margin error of 0.075 is selected since it is logistically difficult to deal with a larger sample size (Mugenda et al., 2003).

$$\text{Thus } n=988/(1+988*0.075^2)$$

$$n=150$$

Therefore the sample size was 150 employees of KBC. Sampling was done using proportional sampling where each department was given equal chance of participation. Mugenda and Mugenda (2003) describe simple random sampling as a probabilistic sampling technique that ensures each subject, object or respondents have an equal chance of representation. Data was collected on the total population of the KBC employees and this data was used as a sampling frame for the study.

**Table 3.2: Sample size**

Employees' Department	Population frequency in Nairobi	Sample Size
Finance & Administration	138	34
Directorate	22	6
Editorial service	71	18
Human Resources	37	9
ICT	19	5
Independent	11	4

Sales & Marketing	26	7
Radio	139	35
Technical services	80	20
Television services	48	12
<b>Total</b>	<b>591</b>	<b>150</b>

### **3.5 Data collection**

The study used primary data, which was collected through a structured questionnaire and administered by the researcher. The choice of a questionnaire was because it allowed respondents to freely and clearly express their opinions. The researcher sought permission from the management informing and assuring them of the safety of information collected and the details about the research. The questionnaires were in three parts with the first set covering the Bio-data while the second and third part addressing questions on perceived influence of positive lifestyle and Commitment of employees at the KBC.

### **3.6 Data analysis**

Data analysis is the whole process, which started immediately after data collection and ended at the point of interpretation and processing of data. The researcher perused the completed research instruments and document analysis-recording sheets.

Descriptive statistics using SPSS (Statistical Package for Social Sciences) was done to summarize and relate variables which were obtained from the administered questionnaires.

Data was classified, tabulated and summarized using descriptive statistics such as percentages

and frequency distribution tables. The standard deviation as well as the mean scores was used. The researcher used Pearson's product moment correlation technique to determine the relationship between employee positive lifestyle and organisational commitment.

## **CHAPTER FOUR: DATA ANALYSIS AND FINDINGS**

### **4.1 Introduction**

This chapter presents the analysis, findings and interpretations of the data collected. The research was conducted on a sample of 150 respondents from Kenya Broadcasting Corporation to which questionnaires were administered. However, out of the issued questionnaires, 118 were returned duly filled in making a response rate of 79%, which was sufficient for statistical reporting.

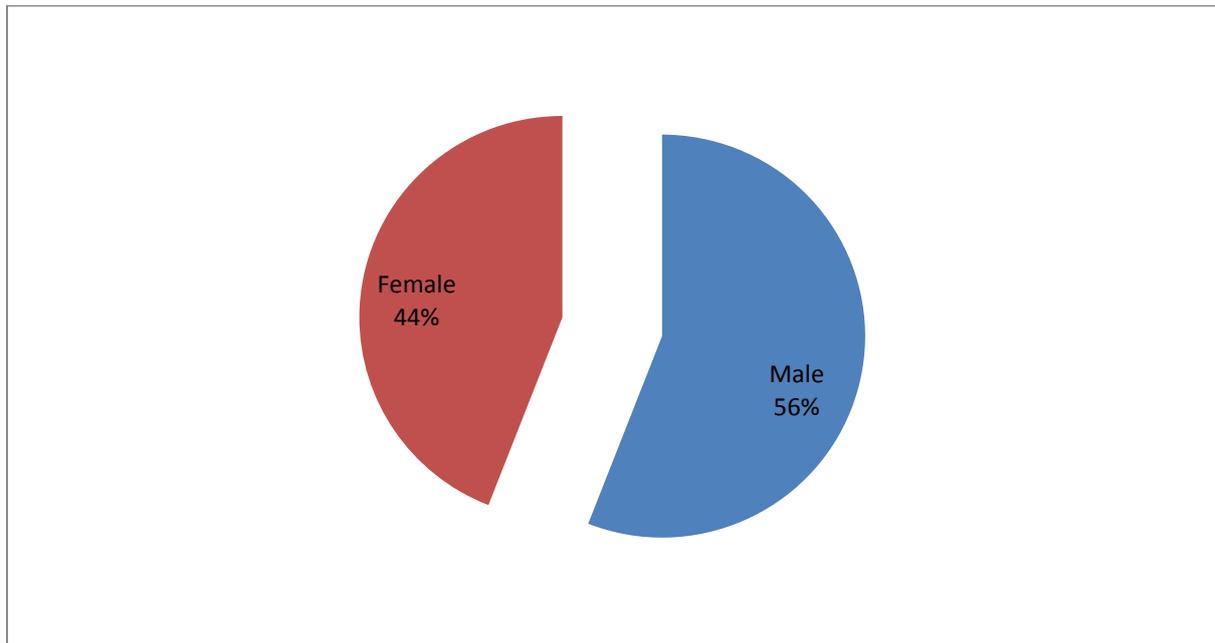
### **4.2 Demographic Information**

The study sought to ascertain the demographic information on the respondents involved in the study. This involved the gender, age, marital status, length of service, rank, and academic qualification. The bio data points at the respondents' suitability to participate in the study. Details are presented below.

#### **4.2.1 Gender**

The study requested the respondents to state their gender. Figure 4.1 presents gender of the respondents.

**Figure 4.1: Gender Distribution of the Respondents.**



(Source: Research Data, 2013)

From the findings in figure 4.1, 56% of the respondents were male and 44% were female. This implied that Kenya Broadcasting Corporations has more males than female in their various levels of management and consequently, most of the responses emanated from the males. However gender distribution at the corporation is above the minimum threshold of 30% for any of the genders set by the constitution of Kenya, 2010.

#### **4.2.2 Age of the Respondents**

In order to understand the respondents' age distribution, the respondents were asked to indicate the age category in which they fell. Table 4.1 indicates staff age distribution represented by the respondents

**Table 4.1: Distribution by Age Bracket of the Respondents**

	<b>Frequency</b>	<b>Percent</b>
Less than 21 years	2	1.7
21 – 30 Years	22	18.6
31 – 40 Years	27	22.9
41 - 50 Years	38	32.2
51 - 60 Years	26	22
Did not respond	3	2.5
<b>Total</b>	<b>118</b>	<b>100</b>

(Source: Research Data, 2013)

Majority of the respondents (32.2%) were within age groups 41 - 50 years, 22.9% within 31 – 40 years, 22% within 51 – 60 years, 18.6% within 21 – 30 years while 1.7% were less than 21 years. However, 2.5% did not indicate their age groups. This indicated that majority of employees at Kenya Broadcasting Corporation are more than 31 years.

#### **4.2.3 Respondents' Marital Status**

The study sought information on the marital status of the respondents. Table 4.2 presents the findings on the same.

**Table 4.2: Distribution of the Respondents by Marital Status**

	<b>Frequency</b>	<b>Percent</b>
Single	16	13.6
Married	92	78
Separated	7	5.9
Single Mother	1	0.8
Single Father	2	1.7
<b>Total</b>	<b>118</b>	<b>100</b>

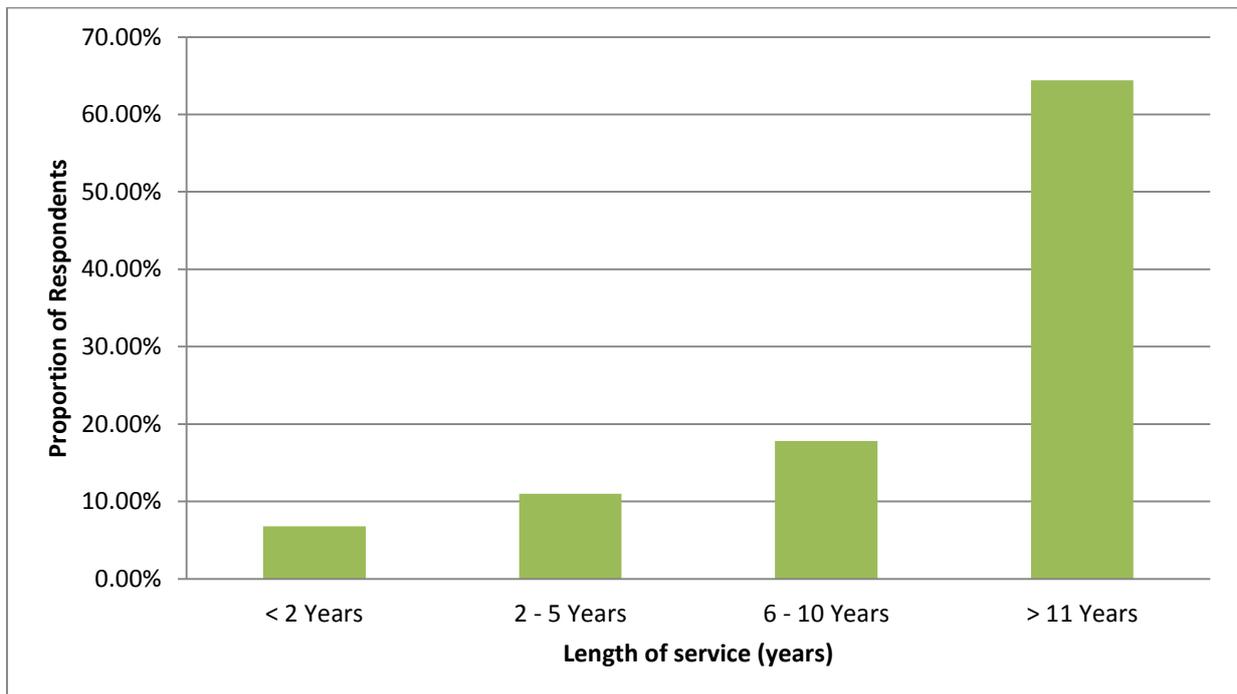
(Source: Research Data, 2013)

As shown in table 4.2, majority of the respondents (78%) are married. Respondents who were single constituted 13.6% of the respondents, 5.9% were separated, 1.7% of them were single fathers and 0.8% of the employees were single mothers. The findings indicated that there were more married employees at KBC than unmarried ones.

#### **4.3.4 Respondents' Length of Service**

The respondents were asked to indicate the duration their tenure at KBC. Findings are presented in figure 4.2

**Figure 4.2: Respondents' Lengthy of Service**



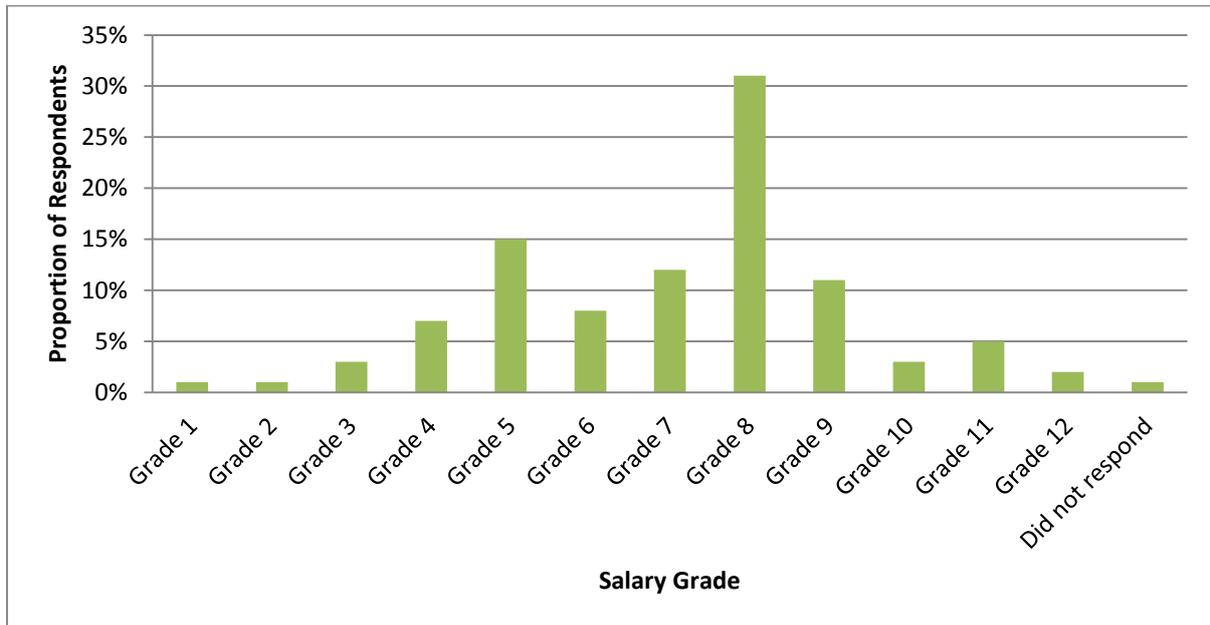
(Source: Research Data, 2013)

From the results in figure 4.2, majority of the respondents (64.40%) had worked at Kenya Broadcasting Corporation for more than 11 years, 17.80% for 6 to 10 years, 11% for 2-5 years and 6.80% for less than 2 years. These findings mean that most of the employees at Kenya Broadcasting Corporation had worked for a long duration of more than 6 years, and hence had rich information on influence of perceived positive lifestyle on organisational commitment amongst them at Kenya Broadcasting Corporation.

#### **4.3.5 Distribution of Respondents by Rank**

Respondents were asked to indicate their grades. Results are presented in figure 4.3 below

**Figure 4.3: Distribution of Respondents by Rank**



(Source: Research Data, 2013)

From the findings in figure 4.3, majority of the respondents (31%) were in grade 8, 15% in grade 5, 12% in grade 7 while 11% in grade 9. Grades 1 and 2 consisted 1% of the respondents, 2% in grade 12 and 3% in grades 3 and 10. The study implies that majority of the employees in Kenya Broadcasting Corporation were in middle management level.

#### **4.3.6 Respondents' level of education**

The respondents were requested to indicate their level of academic qualification. Table 4.3 illustrates the study findings.

**Table 4.3: Classification of Respondents by Level of Education**

<b>Education Level</b>	<b>Frequency</b>	<b>Percent</b>
Secondary Certificate	12	10.2
National Certificate	7	5.9
National Diploma	48	40.7
Higher National Diploma	15	12.7
Bachelors	25	21.2
Masters	9	7.6
Did not indicate	2	1.7
	<b>118</b>	<b>100</b>

(Source: Research Data, 2013)

Table 4.3 shows that majority of respondents (40.7%), had a national diploma, 21.2% had bachelors, 12.7% indicated their highest level of education as Higher National Diploma, 10.2% had a secondary certificate, 7.6% had masters, 5.9% had national certificate while 1.7% did not indicate their education level. This shows that majority of employees at Kenya Broadcasting Corporation have attained national diploma and above thus had rich information and knowledge on influence of perceived positive lifestyle on organisational commitment amongst them at Kenya Broadcasting Corporation.

#### **4.3 Perceived Positive Lifestyle**

The study further sought to establish the level of agreement of the respondents on the statements concerning their lifestyles. A five point Likert comprising strongly agree, agree, neutral, disagree and strongly disagree. Findings are presented in Table 4.4 below.

**Table 4.4: Means and Standard Deviation for Measures of Positive Lifestyle**

<b>Perceived Positive Lifestyle</b>	<b>Mean</b>	<b>Std. Deviation</b>
Drinking, Smoking, Physical activity, high sugar/salt intake, poor diet, obesity etc. are risk factors to health.	4.29	1.119
I have the habit of practicing one or two of the above listed risk factors.	2.57	1.397
I have a medical condition that requires continuous medical checkup.	1.71	0.983
Medication is not necessary as long as I feel good.	2.93	1.455
The risk factors can lead to Non-communicable diseases	3.78	1.168
My health condition is good because I feel well	2.85	1.196
It is my habit to participate in physical activity at least three times a week and I will love to make it a practice	3.83	0.990
Daily consumption of vegetables and foods high in fiber is compulsory for healthy living.	4.51	0.837
Smoking and / drinking has become a habit for me.	1.38	0.790
Fried foods taste better so I prefer my foods fried than boiled/ grilled.	2.60	1.211
Lifestyles changes are the best way to avoid illnesses.	3.85	1.237
Awareness forums in organizations can lead to prevention of lifestyle diseases.	4.38	0.818
Most chronic diseases are associated with lifestyle practices.	4.15	0.916
If KBC should provide lifestyle training sessions/ opportunities	4.42	0.631

for physical activities, I will be willing to participate.

Health care cost at KBC can be reduced if there is lifestyle	4.26	0.767
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trainings for employees.

I will teach my family about positive lifestyle.	4.44	0.700
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The level of education can affect an individual's lifestyle.	3.88	1.228
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It is possible to stop the risk factors that lead to non-	4.27	0.867
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communicable diseases.

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(Source: Research Data, 2013)

From table 4.4, majority of the respondents were in agreement that daily consumption of vegetables and foods high in fibre is compulsory for healthy living which had a mean score of 4.51, I will teach my family about positive lifestyle had a mean score of 4.44, if KBC should provide lifestyle training sessions/opportunities for physical activities, I will be willing to participate had a mean score of 4.42, awareness forums in organizations can lead to prevention of lifestyle diseases had a mean score of 4.38, drinking, Smoking, Physical activity, high sugar/salt intake, poor diet, obesity etc. are risk factors to health had a mean score of 4.29 while it is possible to stop the risk factors that leads to non- communicable diseases had a mean score of 4.27.

Respondents were neutral on the effect of the level of education on individual's lifestyle which had a mean score of 3.88, Lifestyles changes is the best way to avoid illnesses, lifestyles changes is the best way to avoid illnesses (3.85), it is my habit to participate in physical activity at least three times a week and I will love to make it a practice (3.83) while the risk factors can lead to Non-communicable diseases had a mean score of 3.78. Very few respondents were in agreement that smoking and / drinking has become a habit for them

which had a mean score of 1.38; I have a medical condition that requires continuous medical check-up had a mean score of 1.71 while I have the habit of practicing risk factors had a mean score of 2.57.

The findings imply that employees at Kenya Broadcasting Corporation perceived daily consumption of vegetables and foods high in fiber are compulsory for healthy living. The study further established that employees preferred teaching their family about positive lifestyle, participating in lifestyle training sessions/opportunities for physical activities and awareness forums in organizations can lead to prevention of lifestyle diseases among employees and their families.

#### **4.4 Commitment**

The study in this part sought to determine the level of commitment employees have towards Kenya Broadcasting Corporation. This section was divided into four sub-sections namely: organisational commitment; affective commitment; continuance commitment and normative commitment. A five point Likert scale consisting of strongly agree, agree, neutral, disagree and strongly disagree was used to capture responses on commitment.

##### **4.4.1 Organisational Commitment**

Respondents were asked to rate the extent to which they agree with the organisational commitment statements provided by the researcher. Table 4.5 presents respondents' commitment level.

**Table 4.5: Means and Standard Deviation for Measures of Respondents' Commitment Level**

<b>Statements on organizational commitment</b>	<b>Mean</b>	<b>Std. Deviation</b>
I know the management of KBC defends my interest.	3.42	1.120
My values are in tandem with the values of this organization.	3.77	0.911
I feel I am a part of this organization.	3.88	0.850
I am willing to be involved in any program organized by KBC.	4.21	0.783
My organization allows me to do the things I know how to do well	3.39	1.085

(Source: Research Data, 2013)

It is evident from the findings in table 4.5 that majority of the respondents were in agreement that they are willing to be involved in any program organized by KBC. This had a mean score of 4.21. Those who felt that they feel part of the organization had a mean score of 3.88; their values are in tandem with the values of the organization (3.77); they know the management of KBC defends their interest (3.42) while their organization allows them to do the things they know how to do well scored a mean score of 3.39. The study found that employees of KBC are willing to be involved in any program organized by the corporation. Findings on the three dimensions of commitment are presented below.

#### **4.4.2 Affective Commitment**

Respondents were asked to rate the extent to which they agree with each statement measuring affective commitment. Table 4.6 presents respondents' affective commitment.

**Table 4.6: Means and Standard Deviation for Measures of Affective Commitment**

Affective Commitment Statements	Mean	Std. Deviation
I will not mind spending the rest of my career at KBC	3.23	1.234
I consider any problem at KBC as my own problem	3.44	1.086
KBC is part of me, I have a sense of belonging there.	3.77	0.972
I have always believe in staying in an organization till I retire.	2.56	1.241
The management of KBC has invested so much in me.	2.94	1.199

(Source: Research Data, 2013)

As shown in table 4.6, majority of the respondents (3.77) were in agreement that their organisation is part of them while those who felt that they consider any problem of KBC as their own problem had a mean score of 3.44. The respondents depict affective commitment to the point that they will not mind spending the rest of their career at KBC with a mean score of 3.23. Those who felt that the management of KBC has invested so much in them scored a mean score of 2.94 while those who always believe in staying in an organization till they retire scored a mean score of 2.56. The findings imply that employees of KBC believe that their organisation is part of them.

### 4.4.3 Continuance Commitment

Respondents were asked to rate the extent to which they agree with the continuance commitment statements provided in the questionnaire. Table 4.7 presents results on continuance commitment.

**Table 4.7: Means and Standard Deviation for Measures of Continuance Commitment**

<b>Continuance Commitment Statements</b>	<b>Mean</b>	<b>Std. Deviation</b>
Staying at KBC is a matter of necessity.	3.12	1.082
I find it hard to leave my organization now.	3.21	1.154
My life will be disrupted if I should decide to leave KBC now.	2.90	1.158
It would be hard for me to leave KBC now even if I want to	2.59	1.164
Right now staying with KBC is a necessity, I have no other option	2.66	1.091

(Source: Research Data, 2013)

As reflected in table 4.7, majority of the respondents were in agreement that they find it hard to leave the organisation (a mean score of 3.21). Those who depict continuance commitment to the extent that staying at KBC is matter of necessity scored a mean score of 3.12. There are respondents who agreed that leaving the organisation will disrupt their life scored a mean of 2.90. This shoes that employees at KBC will stay at the organisation because it is necessary that they do so.

#### 4.4.4 Normative Commitment

Respondents were asked to rate the extent to which they agree with the normative commitment statements provided by in the questionnaire. The findings are presented in table 4.8.

**Table 4.8: Means and Standard Deviation for Measures of Normative Commitment**

<b>Normative Commitment Statements</b>	<b>Mean</b>	<b>Std. Deviation</b>
I owe a great deal to KBC	3.54	1.062
KBC has invested so much in me that I will feel guilty leaving it.	2.70	1.129
KBC deserves my loyalty	3.78	1.011
I do not feel any obligation to remain with KBC.	2.98	1.155
Even if it were to my advantage, I do not feel it would be right to leave my organization now.	3.14	2.874

(Source: Research Data, 2013)

As shown in table 4.8, it was found that majority of the respondents agrees that the corporation deserves their loyalty. This had a mean score of 3.78. There are respondents who agreed that they owe a great deal to KBC with a mean score of 3.54 while those who agreed that even if it were to their advantage, they do not feel it would be right to leave the organization now had a score of 3.14. This implies that employees of KBC are in the opinion that the corporation deserves their loyalty and they owe a great deal to the corporation.

#### 4.5 Descriptive Statistics

The study conducted a descriptive statistics on positive lifestyle and organisational behaviour.

Findings are presented in table 4.9 below

**Table 4.9: Descriptive Statistics**

	Mean	Std. Deviation
Positive Lifestyle	3.38	0.336
Organizational Commitment	3.21	0.680

(Source: Research Data, 2013)

From the findings, positive lifestyle has a mean score of 3.38 while organisational commitment has a mean of 3.21.

#### 4.6 Relationship between Perceived Positive Lifestyle and Organizational Commitment

The strength and significance of the relationship between perceived positive lifestyle and commitment was tested using Pearson Correlation analysis. Results are presented in table 4.9.

**Table 4.10: Results of Correlation Analysis**

		Positive Lifestyle	Organizational Commitment
Pearson Correlation	Positive Lifestyle	1	0.119
	Organizational Commitment	0.119	1

(Source: Research Data, 2013)

As shown in Table 4.10, there is a weak positive correlation between perceived positive lifestyle and organizational commitment ( $r = 0.119$ ) which is not significant at  $p < 0.05$ .

## **CHAPTER FIVE: SUMMARY, CONCLUSIONS AND RECOMMENDATIONS**

### **5.1 Introduction**

This chapter presents the summary of the findings, and it provides the conclusions and recommendations of the study based on the objective of the study. The main objective of this study was to establish the influence of perceived positive lifestyle on commitment among employees at Kenya Broadcasting Corporation.

### **5.2 Summary of the Findings**

From the findings, the study found out that there is a positive correlation between perceived positive lifestyle and organizational commitment. It found out that employees at Kenya Broadcasting Corporation perceived daily consumption of vegetables and foods high in fiber are compulsory for healthy living. It found out that employees preferred teaching their family about positive lifestyle in order to protect future lifestyle related diseases. Employees were willing to participate in lifestyle training sessions/opportunities for physical activities and awareness forums in organizations that can lead to prevention of lifestyle diseases among them and even extend the teachings to their families. However, the study found out that there are few employees who felt that smoking and/or drinking has become a habit for them which mean that the habit does not affect employees of KBC. It found out that few employees have a medical condition that requires continuous medical check-up.

The study further found out that employees of Kenya Broadcasting Corporation are committed to the extent that they are willing to be involved in any program organized by KBC, employees feel part of the organization and that the corporation deserves their loyalty. It found that the corporation has become part of the employees and they have a sense of belonging there. It finally found out that employees feel that their values are in tandem with

the values of the organization and they owe a great deal to KBC. Not many employees who believe in staying in an organization till they retire.

### **5.3 Conclusions of the Study**

The study concludes that there is a positive correlation between perceived positive lifestyle and organizational commitment. It concludes that daily consumption of vegetables and eating foods rich in fiber are compulsory for a healthy living. It concludes that teaching families about positive lifestyle plays a major role in protecting loved ones against lifestyle related diseases. The study concludes that participation in lifestyle training sessions/opportunities for physical activities and awareness forums in organizations that can lead to prevention of lifestyle diseases is key to a healthy living. However, the study concludes that smoking and/or drinking once become a habit leads to risks of lifestyle related diseases.

The study further concludes that employee commitment is well measured by the extent employees are willing to be involved in any program organized by their employers, the extent they feel part of the organization and the extent employees feel that their employers deserves their loyalty. It concludes that employee commitment is about how organisations have become part of the employees. It finally concludes that employees at KBC feel that their values are in tandem with the values of the organization and they owe a great deal to the corporation.

### **5.4 Recommendations**

The study recommends Lifestyle Behaviour Change programs at KBC. This program will identify employees who are current smokers, who are ready to make a change are invited to participate in healthy lifestyle coaching sessions. The health coach will be able to identify a number of factors including the employee's existing barriers to change and their readiness to

change. The health coach then helps the employee set achievable short-term and long-term goals so they can make a permanent change in health behaviour.

The study recommends for a health risk assessment tool which is composed of a variety of questions which include, traditional medical history, preventive services (immunizations, cancer screenings), emotional health (depression, stress), and lifestyle choices (exercise, smoking). Once the assessment is completed, employees receive a personalized health report that identifies their potential health risks and offers preventive recommendations for employees.

The study recommends that KBC set up exercise groups. This groups will enable employees who can't walk alone be motivated by others and exercise with others.

### **5.5 Recommendation for Further Research**

The study recommends that research be replicated in other State Corporations and results compared in order to confidently establish consistency among the State Corporations on relationship between lifestyle and commitment. Future research should endeavour to establish the medical conditions of the employees which this study did not delve into. This is important in order to establish that the respondents' response to the question on their medical condition is not because they are ignorant of the same.

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## APPENDICES

### Appendix One: Questionnaire

#### SECTION A: DEMOGRAPHIC INFORMATION

Instruction: Kindly respond to the questions as honestly as possible.

Tick (√) inside the box to indicate your choice of answer.

1. What is your gender?

- a. Male [ ]      b. Female [ ]

2. What is your age bracket?

- a. Less than 21 years [ ]    b. 21 – 30 [ ]    c. 31 – 40 [ ]

- d. 41-50 [ ]      e. 51-60 [ ]    f. Above 60 [ ]

3. What is your marital status?

- a. Single [ ]      b. Married [ ]    c. Separated [ ]

- d. Single Mother [ ]    e. Single father [ ]

4. For how long have you worked in Kenya Broadcasting Corporation?

- a. Less than 2 years [ ]    b. 2-5 years [ ]    c. 6-10 years [ ]

- d. 11 years and more [ ]

5. What is your designation/rank? .....

6. What is your highest level of education/ qualification?

a. Primary Certificate [ ] b. Secondary Certificate [ ]

c. National Certificate [ ] d. National Diploma [ ]

e. Higher National Diploma [ ] f. Bachelors [ ]

g. Masters [ ] h. Others .....

**SECTION B: PERCEIVED POSITIVE LIFESTYLE**

Instruction: Please respond to the following items by a tick [√] in front of each statement to show your Lifestyle.

	This is my thinking about:	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
7.	Drinking, Smoking, Physical activity, high sugar/salt intake, poor diet, obesity etc are risk factors to health.					
8.	I have the habit of practicing one or two of the above listed risk factors.					
9.	I have a medical condition that requires continuous medical checkup.					
10.	Medication is not necessary as long as I feel good.					
11.	The risk factors can lead to Non-communicable diseases					

12.	My health condition is good because I feel well					
13.	It is my habit to participate in physical activity at least three times a week and I will love to make it a practice					
14.	Daily consumption of vegetables and foods high in fiber is compulsory for healthy living.					
15.	Smoking and / drinking has become a habit for me.					
16.	Fried foods taste better so I prefer my foods fried than boiled/ grilled.					
17.	Lifestyles changes is the best way to avoid illnesses.					
18.	Awareness forums in organizations can lead to prevention of lifestyle diseases.					
19.	Most chronic diseases are associated with lifestyle practices.					
20.	If KBC should provide lifestyle training sessions/ opportunities for physical activities, I will be willing to participate.					
21.	Health care cost at KBC can be reduced if there is lifestyle trainings for employees.					
22.	I will teach my family about positive					

	lifestyle.					
23.	The level of education can affect an individual's lifestyle.					
24.	It is possible to stop the risk factors that leads to non- communicable diseases.					

**SECTION C: EMPLOYEE COMMITMENT**

**Instruction:** The following statements expresses the ways employees may possibly have about their Organization. Please feel free to express your feelings about Kenya Broadcasting Corporation by indicating your level of agreement or disagreement with each statement by ticking ( √ ) one of the possible responses provided.

Scale	Strongly agree	Agree	Neutral	Disagree	disagree	
25	I know the management of KBC defends my interest.					
26	My values are in tandem with the values of this organization.					
27	I feel I am a part of this organization.					
28	I am willing to be involved in any program organized by KBC.					
29	My organization allows me to do the things I know how to do well					
30	I will not mind spending the rest of my					

	career at KBC					
31	I consider any problem at KBC as my own problem					
32	KBC is part of me, I have a sense of belonging there.					
33	Staying at KBC is a matter of necessity.					
34	I find it hard to leave my organization now.					
35	My life will be disrupted if I should decide to leave KBC now.					
36	It would be hard for me to leave KBC now even if I want to					
37	Right now staying with KBC is a necessity, I have no other option					
38	I owe a great deal to KBC					
39	KBC has invested so much in me that I will feel guilty leaving it.					
40	KBC deserves my loyalty					
41	I do not feel any obligation to remain with KBC.					
42	Even if it were to my advantage, I do not feel it would be right to leave my organization now.					
43	I have always believe in staying in an organization till I retire.					

44	The management of KBC has invested so much in me.					
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