

**THE MEDIATING ROLE OF PSYCHOLOGICAL WELL-BEING ON
MINDFULNESS AND JOB PERFORMANCE AMONG PUBLIC HOSPITAL-
BASED NURSES IN POLOKWANE LOCAL MUNICIPALITY AREA**

BY

MONYAI M

(11574620)

A research project submitted for the fulfilment of the requirements of

MASTER OF COMMERCE DEGREE

IN

HUMAN RESOURCES MANAGEMENT

in the

**DEPARTMENT OF HUMAN RESOURCE MANAGEMENT AND LABOUR
RELATIONS**

FACULTY OF MANAGEMENT, COMMERCE AND LAW

UNIVERSITY OF VENDA

SUPERVISOR: PROF. N. NKUNA

CO-SUPERVISOR: PROF. H. NGIRANDE

DECLARATION

I, Mosutoa Monyai student number 11574620 hereby declare that the dissertation; the mediating role of psychological well-being on mindfulness and job performance among public hospital-based nurses in Polokwane Provincial Hospital, Seshego, and Mankweng public hospitals in Polokwane Local Municipality for the Masters of Commerce in Human Resource Management submitted to the Department of Human Resource Management and Labour Relations at the University of Venda has not been submitted previously for any degree at this or another university. It is original in design and execution, and all reference material contained therein has been duly acknowledged.

Student: Monyai M

Signature:



Date: 22-02-2022

ACKNOWLEDGEMENTS

I thank God for providing me with the strength and well-being I needed to finish this dissertation. Second, I want to express my gratitude to Prof. Nkuna and Prof. H. Ngirande, my supervisor and co-supervisor, respectively. Their dedication and support will never be forgotten. I'd also like to thank my family for their unwavering support.

ABSTRACT

In South Africa, nurses carry the responsibility of providing health care services to all communities. It is, therefore, crucial that the healthcare sector provides quality service to those who need it. Some of the human resources management factors that may help improve quality healthcare service are to ensure the mindfulness and psychological well-being of nurses. These factors may ultimately improve the job performance of the nurses. This study sought to investigate the relationship between mindfulness and job performance: the mediating role of psychological well-being on the relationship between mindfulness and job performance among public hospital-based nurses in Polokwane Local Municipality. The study followed a positivism paradigm. A quantitative approach was employed, using a cross-sectional design. The population of the study comprised 1287 nurses which include, professional and assistant nurses from all three public hospitals in Polokwane Local Municipality. A purposive sampling method was utilised to select the three hospitals. A stratified random sampling method was used to select participants. A minimum recommended sample size of 297 nurses from the two strata of professional nurses and assistant nurses was used. This was determined by the Raosoft sample size calculator. A self-administered questionnaire was used to solicit data. Descriptive statistics was used to describe and summarise the demographic information of respondents and the levels of the nurse's mindfulness, psychological well-being, and job performance. Pearson product-moment correlation coefficient was used to specify the relationship between mindfulness, psychological well-being, and job performance. A multiple linear regression analysis was also used to determine the prediction between the study variables. Mediated multiple regression analysis was also performed to determine the mediating role of psychological well-being on the relationship between mindfulness and job performance. This analysis was done using Statistical Package for Social Sciences (SPSS) version 26, with Hayes Process add-in software for mediation. The findings reveal there is a relationship between mindfulness and job performance among public hospital-based nurses in Polokwane Local Municipality ($r=.393^{**}$; $p=.000$). The regression results further showed that mindfulness does influence job performance $\beta = 1.09$, $+ (298) = 1.09$, $p = .000$. In terms of mediation, the findings showed that psychological well-being does mediate the relationship between mindfulness and job performance among public hospital-based nurses in Polokwane Local Municipality ($\beta = .359$, $SE = .060$, $95\% CI = (.228, .465)$). It is therefore concluded that psychological wellbeing does play a positive role in the relationship between mindfulness and job performance as it will, even more, enhance job performance among public hospital-based nurses in Polokwane Local Municipality. It is recommended that further research on a similar study should make use of a mixed-methods research design which will help to capture the experiences of respondents in giving more details about their mindfulness and

psychological well-being. Questionnaires and in-depth interviews with respondents would gather more specific information.

Keywords: Mindfulness, psychological well-being, job performance, mediating role, nurses.

TABLE OF CONTENTS

CHAPTER ONE: INTRODUCTION AND BACKGROUND	1
1.1 Introduction	1
1.2 Background of the study.....	1
1.3. Problem Statement	4
1.4. Aim of the study.....	5
1.5. Research objectives	5
1.6. Research hypotheses	5
1.7. Significance of the study	6
1.8. Delimitation of the study.....	6
1.9. Definitions of key terms.....	6
Mindfulness:.....	7
Psychological well-being:	7
Job performance:	7
1.10. Chapter outline.....	7
1.11 Chapter summary	8
CHAPTER TWO: LITERATURE REVIEW.....	9
2.1 Introduction.....	9
2.2 Theoretical framework.....	9
2.3. Review of the study concepts.....	10
2.3.1 The concept of psychologicalwell-being	10
2.3.2 The concept of mindfulness.....	154
2.3.3 The concept of job performance.....	185
2.3.4 The relationship between the variables.....	18
2.4. Conceptual framework.....	22
2.5. Chapter summary.....	22
CHAPTER THREE: RESEARCH METHODOLOGY.....	244

3.1 Introduction.....	24
3.2. Research philosophy.....	24
3.2.1 Interpretivism research philosophy.....	24
3.2.2 Realism research philosophy.....	24
3.2.3 Pragmatism research philosophy.....	25
3.2.4 Positive research philosophy.....	2.5
3.3. Research design.....	25
3.3.1. Descriptive research design.....	26
3.3.2. Explanatory research design.....	26
3.3.3. Correlation research design.....	26
3.3.4. Cross sectional research design.....	27
3.4 Research approach.....	27
3.4.1 Qualitative research.....	27
3.4.2 Quantitative research.....	28
3.4.3 Mixed method research.....	28
3.5. Study population.....	29
3.6. Sample and sampling procedure.....	29
3.6.1 Simple random sampling.....	29
3.6.2 Cluster random sampling.....	30
3.6.3 Systematic random sampling.....	30
3.6.4 Stratified random sampling.....	29
3.7. Data collection method.....	311
3.8. Research procedure.....	322
3.9. Data analysis.....	333
3.10. Ethical considerations.....	333
3.10.1 Ascertaining that all participants have given their informed permission.....	333
3.10.2 Assuring that the participants are not harmed.....	344
3.10.3 Ensuring transparency, confidentiality and anonymity.....	344

3.10.4 Assuring that permission has been granted.....	344
3.10.5 Data protection.....	35
3.11 Chapter summary.....	35
CHAPTER FOUR: PRESENTATION OF RESULTS	366
4.1. Introduction	36
4.2. Demographic characteristics of respondents.....	36
4.2.1 Gender.....	36
4.2.2 Age of respondents.....	37
4.2.3 Highest qualification of respondents.....	38
4.2.4 Length of Service	38
4.2.5. Rank	39
4.2.6. Job status.....	40
4.3. Item analysis	40
4.3.1. Mindfulness.....	42
4.3.2 Psychological wellbeing.....	43
4.3.3. Job performance.....	44
4.3.4. Summary of reliability analysis for the overall questionnaires.....	46
4.4. Descriptive statistics (Measure of central tendency, dispersion and normality).....	46
4.5. Pearson correlation.....	47
4.6. Regression analysis.....	49
4.7. Chapter summary.....	50
CHAPTER FIVE: DISCUSSION OF RESULTS, CONCLUSIONS, LIMITATIONS AND RECOMMENDATIONS OF THE RESEARCH REFERENCES.....	51
5.1. Introduction.....	51
5.2. Discussion of results.....	51
5.2.1. Demographic characteristics of response.....	51
5.2.2. Discussion of the questionnaires` reliability.....	52
5.2.3 Discussion of Descriptive statistics.....	53
5.2.4. Discussion of correlation analysis.....	53
5.2.5. Discussion of the Regression analysis results.....	55
5.3. Conclusions.....	56
5.4. Limitations of the study.....	57

5.5. Practical implications.....	57
5.6. Recommendations for future study.....	58
5.7. Chapter summary.....	58
References.....	59
Annexure A Informed consent form	75
Annexure B Research questionnaire.....	76
Annexure C Ethical clearance certificate and letter of approval to collect data.....	83
Annexure D Editor's letter.....	84
Annexure E Turn it in report.....	86

LIST OF FIGURES

Figure 2.1 Conceptual framework of the mediating role of psychological well-being on the relationship between mindfulness and job performance.....	22
Figure 4.1 Gender of respondents.....	37

LIST OF TABLES

Table 4.1 Age of respondents.....	37
Table 4.2 Highest qualification of respondents.....	38
Table 4.3 Length service of respondents.....	39
Table 4.4 Rank of respondents.....	39
Table 4.5 Job-status of respondents.....	40
Table 4.6 Rule of thumb for labeling Cronbach’s alpha coefficient.....	40
Table 4.7 The reliability analysis of the mindfulness questionnaire.....	41
Table 4.8 The reliability analysis of the psychological well-being questionnaire.....	42
Table 4.9 The reliability analysis of the job performance questionnaire.....	44
Table 4.10 Cronbach’s alphas of each scale.....	45
Table 4.11 Descriptive statistics showing measures of central tendency, dispersion and normality of data.	47
Table 4.12 The Rule of thumb of the correlation values.....	47
Table 4.13 Pearson correlation analysis results among the variables.....	48
Table 4.14 Regression analysis results among the variables.....	49

ANNEXURES

ANNEXURE A: INFORMED CONSENT FORM.....	75
ANNEXURE B: PROPOSED QUESTIONNAIRE.....	76
ANNEXURE C: ETHICAL CLEARANCE CERTIFICATE AND LETTER OF APPROVAL TO COLLECT DATA.....	83
ANNEXURE D: EDITOR’S LETTER.....	85
ANNEXURE E: TURN IT IN REPORT.....	86

CHAPTER ONE

INTRODUCTION AND BACKGROUND

1.1 INTRODUCTION

The primary goal of this study is to look into the relationship between mindfulness and job performance and whether psychological well-being mediates this relationship among nurses in three public hospitals within the Polokwane Local Municipality. Therefore, this section presents the background and literature of mindfulness, psychological well-being, and job performance of nurses. The problem statement, the study aim, the research objectives, and the research hypotheses are also discussed. The significance of the study and delimitations of the study is also discussed. The definitions of key terms namely, mindfulness, psychological well-being, and job performance that have been used throughout the chapters are also given.

1.2 BACKGROUND OF THE STUDY

In South Africa, nurses carry the responsibility of providing health care services to all communities (Petersen, Fairall, Bhana, Kathree, Selohilwe, Brooke-Sumner & Patel, 2016). Therefore, the healthcare service must provide quality service to those who need it. With this said, it needs to be understood how human resource management factors such as mindfulness and psychological well-being may work together to contribute to excellent job performance.

In any organisation, job performance is key to the organisation's growth and success (Budhwar & Debrah, 2013). The concept of job performance refers to acts that help an organisation achieve its objectives those are under the authority of the individual (Bin, 2015). According to Marchington and Wilkinson (2012), over the last decade, there has been a significant improvement in the knowledge of the relationship between human resource management approaches and job performance. The human resource management (HRM) practices contribute to the improvement and the capability for quality healthcare services. A study done by Budhwar and Debrah (2013) found that 65.9 percent of the companies that started implementing human resource management practices performed better compared to the previous years. Hospitals are being pushed to explore HRM practices as a way to improve quality and productivity.

Pillay (2017) agrees with Baernholdt and Mark (2009) that nursing turnover continues to be one of the major challenges in the health sector which leads to low job performance as it has the highest rates for professional groups. Mphephu (2019) supports Tshitangano (2013) that contributions to nursing turnover in the province of Limpopo are factors such as lack of workplace resources and working

hours. Hence there are about 300 nurses every month leaving South Africa to go to work in other countries (Tshitangano, 2013). Budhwar and Debrah (2013) reported that the United States may have faced a scarcity of nurses by 2020. A study done by Baernholdt and Mark (2009) found that within three years, 43 percent of newly qualified nurses working in hospitals resign. Furthermore, in two years, 33.5 percent of employees leave, and 17.5 percent stay for only a year. The nursing profession increases by 10 percent a year, whereas South Africa's population rises by 14 percent, resulting in a progressive scarcity of properly qualified nursing professionals across the country. When there is a high turnover in hospitals, fewer nurses will be left to deal with a high workload which might affect their job performance. South African nurses intend to leave the country for greener pastures, which will increase the nursing shortages in the country (Uhunamure, 2018). According to the South African Nursing Council (2017), over 18 percent of nurses are no longer in practice. Another 18 percent are registered with agencies and relying on part-time work in private hospitals, while some are employed full-time. According to the Department of Health, one nurse should be accountable for four patients per shift; yet, due to a nursing shortage in rural areas like Limpopo, one nurse is responsible for 40 patients during a night shift. (Uhunamure, 2018).

Mphephu (2019) reported that 79 percent of respondents in a few Vhembe District public hospitals felt overburdened by nursing tasks in a recent survey. Mphephu (2019) also adds that non-professional responsibilities such as delivering and retrieving meal trays, housekeeping, and patient transportation are expected of nurses. All these responsibilities are performed together with their professional job. This increased workload causes nurses to have accidents such as medication errors and procedural errors in the workplace. For nurses to minimise accidents in the workplace, they must be mindful when they are performing their work. Ngo, Nguyen, Lee and Andonopoulos (2020) define mindfulness as a state of actively being able to focus on the immediate moment and practice acceptance in the absence of judgment. If the nurses are mindful of what they are doing, accidents in the workplace may be minimised and performance improves. In a similar view, Dane (2011) suggests that mindfulness assists people to cope better with a variety of experiences, including those involving powerful emotions, which could lead to improved job performance.

According to Lee, Tzeng and Chiang (2019), the high workload can also cause stress to the nurses which will ultimately affect their psychological well-being. Edwards and Titman (2011) define psychological well-being as the degree to which people experience good emotions and sensations of happiness. According to Bergh, Botha, Kiley and Wemer (2017), psychologically healthy employees contribute to reduced absenteeism and accidents, show higher retention, commitment, and engagement, and show improved work performance and productivity. Hence, one can argue that nurses

can perform better if they are psychologically well. In addition, the South African Nursing Council (2017) reported that out of a total of 147 nurses who underwent wellness screening and assessment, 104 presented various conditions, such as stress and high depression. This shows that psychologically, the nurses are not well since stress and depression are closely linked with psychological well-being. The study that investigated the reasons behind the migration of South African nurses to other countries, Oosthuizen (2007) and Mavodza (2017) found that poor working conditions in South African hospitals such as poor psychological well-being, were some of the contributing factors which lead to a decrease in low performance of the nurses.

According to the Annual Inspection Report (2016/17), the public hospitals in Limpopo Province reflects performance in percentage score looking at the following three categories: Category 1, human resource practices and development which includes “staff working hours were not monitored to ensure compliance with the Basic Conditions of Employment Act” scored 44 percent. Category 2, staff welfare and employee well-being which includes “evidence that staff has participated in formal initiatives planned within the employee wellness program” scored 15 percent (Annual Inspection Report, 2016/17). Category 3, effective leadership which includes “there was no evidence that managers had undergone leadership and management development training nor competency assessment within the last 2 years” scored 32 percent. All these categories are essential to improve healthcare services, yet they did not even reach the target of 80 percent.

With category 1 stating that the nurses work long, this will negatively affect the nurse’s psychological well-being. Mbombi, Mothiba, Malema and Malatji (2018) agree with Roussel (2009) that nurses who work while tired make mistakes for which they are blamed. As a result, they tend to get stressed and this affects their psychological well-being. However, the psychological wellness challenge faced by the nurses of not being psychologically well may not even improve because the hospitals do not put into place the remedies provided to them according to category 2 of the report. According to Category 3, managers had not received leadership and management development training and competency assessment. Also, management does not support nurse mindfulness because the nursing managers are not given the appropriate leadership and management development training for their jobs. Thus, the public hospitals score only 15 percent in this category. To introduce mindfulness to the workplace, senior management must go through leadership and management development training (Dane & Brummel, 2013; Witschel, 2019).

According to the Office of Health Standards Compliance (OHSC) guidelines, or a health facility to be regarded as being up to 'acceptable standard', it should score a minimum of 80 percent (Annual Inspection Report (2016/17)). However, 59 hospitals that were inspected by the Office of Health Standards Compliance (OHSC) in Limpopo Province show that only 3 percent of the hospitals are performing at the expected 50 percent or above, with none performing above 60 percent. This raises some questions about whether nurses are mindful of their job or are psychologically well. Hence there is a need to carry out a study of this nature.

Several studies have been conducted on nurse's mindfulness and job performance (Dane, 2011 (USA), Lomas, Medina, Ivztan, Rupperecht & Eiroa-Orosa, 2017 (Europe), Van Gordon, Shonin, Zangeneh & Griffiths, 2014 (Switzerland). In addition, various studies have been conducted on nurse's psychological well-being and job performance (Wadhawan, 2016 (India), Sun, Zhao, Yang & Fan, 2012 (china)). However, through the extensive literature search, it is established that there is little information known about studies that have been conducted looking at all three variables in the South African health sector as well as in the Limpopo Province in particular. Therefore, all these variables must be explored since 80 percent of the population in the Limpopo Province based in rural areas and the majority of them relying on the public health facilities for their health care.

1.3 PROBLEM STATEMENT

While Good, Lyddy, Glomb, Bono, Brown, Duffy and Lazar (2016) pointed out that there has been an increase of growth in the literature on mindfulness, psychological well-being, and job performance, there is still limited understanding of how mindfulness could be applied in the nursing profession. It has been found that to introduce mindfulness in the workplace, managers must undertake leadership and management development training (Dane & Brummel, 2013; Witschel, 2019). In the South African context, the Department of Health report found that only 15 percent of nursing managers have attended the leadership and management development training (Annual Inspection Report, 2016/17). The nursing education, training, and practice strategic plan (2016/17) mentions that in South Africa, the number of official, dedicated nursing leadership posts has decreased, while the number of non-nurse practitioners in leadership and management positions have increased.

According to literature, it has been found that due to various unfavourable working conditions such as high workload many nurses are found not to be psychologically well and poor working condition ultimately leads to poor job performance (Lee et al., 2019; Taiwo, 2017). In addition to what has been found in literature, certain work environment factors in South Africa that contribute to low job

performance for nurses, include hostile physical and psychological environment, a lack of supervisory assistance, and extended working hours (Edwards & Titman, 2011).

Nurses are in short supply at the Department of Health in Limpopo Province, particularly in the tertiary hospitals in Polokwane and Mankweng (Mbombi et al., 2018; Shipalana, 2013). Tshitangano (2013) attributed some factors of nursing turnover in Limpopo province to lack of workplace resources and long working hours. Shipalana (2013) and Ramarope (2015) indicate that poor management, lack of career growth, insufficient working environment, workload, and poor incentives are all contributing to health care professionals departing their positions. All these factors such as high workload, high turnover, and lack of training eventually lead to the low job performance of nurses in the Limpopo Province (Makunyane, 2012; Ramakuela, Mundalamo & Ndou, 2018).

1.4 AIM OF THE STUDY

This study aims to investigate the relationship between mindfulness and job performance and whether psychological well-being mediates this relationship among nurses in three public hospitals within the Polokwane Local Municipality area to improve the job performance of the nurses.

1.5 RESEARCH OBJECTIVES

The objectives of the study were:

- To establish the relationship between mindfulness and job performance among nursing staff in three public hospitals in the Polokwane Local Municipality.
- To examine the relationship between mindfulness and psychological well-being among nursing staff in three public hospitals in the Polokwane Local Municipality.
- To determine the relationship between psychological well-being and job performance among nursing staff in three public hospitals in the Polokwane Local Municipality.
- To establish the mediating role of psychological well-being on the relationship between mindfulness and job performance among nursing staff in three public hospitals in the Polokwane Local Municipality.

Recommendations were also given to the relevant stakeholders based on findings of the above-investigated objectives.

1.6 RESEARCH HYPOTHESES

The study hypothesises that:

H1: There is a significant relationship between mindfulness and job performance among nursing staff in three public hospitals in Polokwane Local Municipality.

H2: There is a significant relationship between mindfulness and psychological well-being among nursing staff in three public hospitals in Polokwane Local Municipality.

H3: There is a significant relationship between psychological well-being and job performance among nursing staff in three public hospitals in Polokwane Local Municipality.

H4: Psychological well-being mediates the relationship between mindfulness and job performance among nursing staff in three public hospitals in Polokwane Local Municipality.

1.7 SIGNIFICANCE OF THE STUDY

The study aims to investigate the relationship between mindfulness and job performance on nurses in three public hospitals in the Polokwane Local Municipality and whether this relationship is mediated by employee psychological well-being. This study could lead to the development of intervention programs that improve mindfulness, psychological well-being, and job performance of nurses in the health sector. It is also expected that the study will identify factors that will improve mindfulness in the nursing profession. It will also contribute to the existing knowledge concerning the variables in the health sector. The research would be significant in assisting the healthcare department in determining the success of mindfulness and psychological well-being. The nursing management could also understand the importance of putting into place human resource management practices such as employee health and wellness, employee mindfulness, performance management, working condition and training, and development as they contribute to the improvement and the capability for quality healthcare service. The study will further shed more light on the policymakers to understand how the relationship between these variables would improve the health sector. The policymakers will then take into consideration that for the nurses to perform their job better, they have to be mindful and be psychologically well.

1.8 DELIMITATION OF THE STUDY

The study was delimited to the selected public hospitals in Polokwane Local Municipality. The hospitals were chosen because they are amongst the largest hospital in the Limpopo province. Large hospitals face many challenges which helped the researcher to capture the relevant information.

1.9 DEFINITIONS OF KEY TERMS

The relevant terms that were used throughout this study were briefly defined below.

Mindfulness: Brown and Ryan (2012) define mindfulness as the state of being attentive to and aware of what is taking place in the present moment. Ngo et al. (2020) also define mindfulness as a state of actively being able to focus on the immediate moment and practice acceptance in the absence of judgment. The mindfulness questionnaire will be measured with a measure consisting of 15 items (Brown & Ryan, 2003). The 15-items measure will be scored on a five-point Likert scale. Kotzé and Nel employed this questionnaire in their study in the Free State, South Africa among a total of 497 participants in 2016.

Psychological well-being: Edwards and Titman (2011) define psychological well-being as the extent to which people experience good emotions and sensations of happiness. Wadhawan (2016) also defines psychological well-being as an individual's total efficacy of psychological functioning as it relates to major aspects of their lives. The measure will be measured with a psychological well-being questionnaire (PWB) (Ryff, 1995). The measure consists of 6 dimensions namely, autonomy, environmental mastery, personal growth, positive relations with others, purpose in life, and self-acceptance. The 18-items measure will be scored on a five-point Likert scale. Gao and McLellan (2018) employed this questionnaire in their study from three junior high schools in a city in East China.

Job performance: Job performance is defined as actions that contribute to organisational goals and that are under the individual's control (Bin, 2015). The measure consists of three dimensions namely, altruism, conscientiousness, and task performance. The 25-items measure will be scored on a five-point Likert scale. Yusoff, Khan and Azan employed this questionnaire in Pakistan with university teachers in 2013.

1.10 CHAPTER OUTLINE

The following are the five chapters that will make up this research:

Chapter 1: INTRODUCTION AND BACKGROUND OF THE STUDY

This chapter provides an overview of the background of the study and the problem statement. Definitions of terms and the significance of the study are presented.

CHAPTER 2: LITERATURE REVIEW

This chapter provides a literature review of various scholars related to the topic of the study. This chapter provides different findings from other researchers.

CHAPTER 3: RESEARCH METHODOLOGY

The chapter entails a clear research process of the study. The chapter also includes research design, population, sampling and sampling procedures, data collection methods, questionnaire administration, and data analysis of the study. It explains the data gathering procedures as well as the ethical standards applied.

CHAPTER 4: DATA PRESENTATION AND INTERPRETATION OF RESULTS

The chapter presents the study results. The chapter presented descriptive statistics on the measures of central tendency, dispersion, and normality of data. Furthermore, Pearson`s correlation analysis was used to test the relationship between the constructs. Multiple linear regression testing to test the strength of the relationship between the constructs. Finally, the results on mediated regression analysis are presented to determine the mediation role of psychological well-being on the relationship between mindfulness and job performance.

CHAPTER 5: DISCUSSION, CONCLUSIONS, AND RECOMMENDATIONS FOR FUTURE RESEARCH

The chapter present the findings presented in Chapter 4. Conclusions, recommendations for future studies, and study limitations were also given.

1.11 CHAPTER SUMMARY

The introduction and background of the study were outlined in this chapter. The chapter include the topic and positioned subjects of the study. Furthermore, the problem statement was conversed and justified. The objectives of the study have also been developed and testing research hypotheses. The definition of the key terms for the study was also outlined in the chapter. Furthermore, the significance of the study was explained. The next chapter will look at previous literature of the study variables. It will also look at the theoretical framework and the conceptual model based on the study variables.

CHAPTER TWO

LITERATURE REVIEW

2.1 INTRODUCTION

This chapter covers the theoretical framework that underpins the study. It also reviews the literature on the concept of mindfulness, psychological well-being, and job performance. The dimensions of psychological well-being and job performance are also presented. Furthermore, the conceptual literature review covers the relationship of the variables and the empirical literature review of the related variables of the study. The chapter ends with the conceptual model based on the variables.

2.2 THEORETICAL FRAMEWORK

This study is based on affective events theory (AET) by Weiss and Cropanzo (1996) which states that there is a relationship between employee's internal influence, for example, emotions and mental state, and their reactions to incidents that happen during their workdays that affect their job performance. Weiss and Cropanzo (1996) and Luo and Chea (2018) define effective events as the day-to-day experiences that employees come across in the workplace of which these particular experiences can have a favorable or bad impact on their employment. These events at work can have a psychological influence on an employee's job performance.

In other words, positive work events instil positive outcomes. The theory highlights that when nurses experience positive work events they will be more productive which leads to high job performance. Li, Liu, Zheng, Liu, Wang, Miner Ross and You (2020) found that negative work events, such as burnout, may activate nurses' affective responses, resulting in a change in work attitudes and behaviour. This means that the mindfulness and psychological well-being of nurses in the healthcare services relay in the hands of the healthcare management for the nurses to produce high performance.

Thus, for the sake of this study, nurses who experience good working conditions like normal workload then will affect their attitude on how they perform. However, negative psychological events such as depression and stress also influence the productivity of the nurses. These positive and negative events can result in long-term emotional reactions that can affect job performance.

Hülshager, Alberts, Feinholdt and Lang (2013) and Ghasemy, Erfanian and Gaskin (2020) both agree that employee affective reactions are triggered by work events, and these reactions predict job performance. Niklas and Dormann (2005) found that this theory does apply in the service industry, like health care workers and educators. With this said, the theory proposes that if the nurses are

experiencing positive psychological events with a good mental state (mindfulness), then they would develop a positive attitude and behaviour towards their work. But most importantly, the experience of positive events will promote the high job performance of nurses.

2.3 THE REVIEW OF STUDY CONCEPTS

A literature review's purpose is to contribute to a better understanding of the overview and significance of the problem that has been discovered (Bolderston, 2018). Thus, it documents published and unpublished data in the areas of specific interest to the researcher.

The concepts of the study variables are therefore discussed. The relationship between mindfulness, psychological well-being, and job performance is also reviewed.

2.3.1 The concept of Psychological well-being

Ahmadi (2009) indicates that the healthcare service relies on the nurses to carry through the day-to-day duties in ensuring service delivery. Because nurses have the most direct contact with patients, it is vital to maintain that they are psychologically well at all times. Klopper, Coetzee, Pretorius and Bester (2012) pointed out that given the important role that the nurses play in ensuring the efficiency, efficacy, and long-term success of the health services, it is crucial to comprehend the significance of nurse's psychological well-being. Psychological well-being refers to the degree to which people experience good emotions and sensations of happiness (Edwards & Titman, 2011). Therefore, for the nurses to perform the expected standard performance of the hospitals, the management should put in place the practices that can enhance the psychological well-being of the nurses.

The goal of a literature review is to aid in a clearer understanding and importance of the problem that has been discovered (Tshikovhele, 2015). Furthermore, psychological well-being is shaped by a mix of emotional control, personality traits, self-identity, and life experience (Tshikovhele, 2015). Age, education level, and self-awareness have all been demonstrated to increase psychological well-being (Edwards & Titman, 2011). Therefore, for the nurses to be able to experience psychological well-being, their working environment and working conditions must be in good condition. Aligning the working condition of the hospitals with the Basic Condition of Employment Act must also be taken into consideration by management. With this said, support from management is important for nurses to be psychologically-well.

According to Penque (2019), nurses psychological well-being determines their productivity. It is well known that positive mental strength has an important role in the workplace. Research is constantly establishing a significant correlation between psychological well-being and job performance (Usman,

2017). Jackson, Schuler and Jiang (2014) mention that human resource practices, in particular those which maintain an increase in employee psychological well-being, have gained much attention from scholars and practitioners, especially given their claimed benefits to both staff and the organization in terms of job performance.

Employees who are psychologically well are more productive, efficient and are more loyal to the organizations that they are working for (Jackson et al., 2014). Jackson et al. (2014) further explain that these continuous positive job experiences let employees establish positive relationships with their colleagues. Therefore, embracing nurse's psychological well-being can lead to a healthy working relationship among the nurses which can improve the standard of care for the patients and most importantly also improve job performance. Furthermore, nurses who have a good working relationship will lead them as a team to tackle the challenges they face daily.

According to Penque (2019), nurses must be in excellent physical and mental health to provide the best possible care to patients and family members. Employees who are not psychologically well can also contribute negative factors to the organizations. Guest (2017) argues that employees who lack psychological well-being will experience negative effects such as absenteeism, turnover, loss of productivity, and conflicts with other colleagues. All these factors lead to employees not performing to the best of their ability. The nurse's jobs are emotionally and physically demanding, because of that, nurses experience post-traumatic stress disorder, depression, and burnout (Mealer, Jones, Newman, McFann, Rothbaum & Moss, 2012). Work-related stress is said to be the cause of 17 percent turnover among new American graduate nurses in their first year of work (Penque, 2019). All these disorders if they are not managed, will lead to absenteeism and turnover (Mealer et al., 2012). Nurses who are psychologically well tend to be loyal to the organisation they work for. Therefore, psychologically well nurses decrease labour turnover. Nurses will be retained and feel satisfied in their respective workplaces and this will minimise the shortage of staff in the hospitals. Lack of absenteeism is experienced in the workplace when employees are satisfied. With this said, having a lack of turnover and absenteeism in the hospitals will increase the productivity and job performance of the nurses.

There are various dimensions of psychological well-being namely; self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life, and personal growth. These dimensions are discussed below (Guest, 2017).

2.3.1.1 Self-acceptance

Self-acceptance is described as a feeling of contentment with oneself regardless of flaws and independent of past actions and decisions (Dodge, Daly, Huyton & Sanders, 2012). It includes self-contemplation, a realistic understanding of one's own or one's abilities and limitations. This is accomplished by ceasing to criticize and fix one's shortcomings and then accepting them. (Dodge et al., 2012). Villarosa and Ganotice (2018) state that high levels of self-acceptance lead to a more optimistic outlook and increased life satisfaction. Moderate levels of self-assurance lead to more accomplishment and acceptance (Usman, 2017). Furthermore, Usman (2017) found that self-acceptance is essential for self-actualization, improved mental wellbeing, and growth. Therefore, if the nurses experience self-acceptance, they will learn to accept their weaknesses and work more on improving themselves which will lead to the improvement of job performance. Nurses who experience confidence will be able to tackle challenges and achieve their goals in the workplace. This will ultimately lead to greater job performance.

2.3.1.2 Positive relations with others

Positive interpersonal relationships are described as having a healthy, productive connection with the people in your circle e.g. family, friends, and colleagues (McNulty & Fincham, 2012). This entails being able to love and empathize with others. Ahmed and Malik (2019) conclude that a peaceful and calm demeanour demonstrates maturity, and it leads to better communication and concern for others. While healthy connections lead to mutual understanding, bad relationships can lead to conflict (Kundi, Aboramadan, Elhamalawi & Shahid, 2020).

According to Park, Kim, Yoon and Joo (2017), one of the most important aspects of mental wellness is solid interpersonal relationships. Kundi et al. (2020) state that positive relationships with people typically lead to increased growth, empowerment, and improved sporting performance in a group or team situation. Good communication is an important part of the interaction. Nurses who experience good relationships with their colleagues have good communication with their colleagues. They will also solve their conflicts and work problems without the interjection of their managers. Moreover, nurses who experience good communication practice positive relations with others tend to learn more from their colleagues and improve their job performance.

2.3.1.3 Autonomy

Nurius, Green, Logan-Greene and Borja (2015) characterise autonomy as the ability to think for oneself and make decisions, giving one some control or authority over the events that occur in one's

daily life. It emphasises attributes like self-deficiency, self-encouragement, and internal behavioural control. Usman (2017) state that employees with high autonomy does not seek approval from others, they concentrate on their own beliefs and are less influenced by the opinions of others. Autonomy in participation is also linked to self-determined motivation. (Nikbin, Iranmanesh & Foroughi, 2020). Based on the above literature, the nurses are most likely to be more independent with their work and focus more on their duties. If the nurses can take charge of their duties and wait for no one to make the decision, they will experience high job performance.

2.3.1.4 Environmental mastery

According to Mealer et al. (2012), environmental mastery is described as active involvement in, and control of the environment. These incorporate the ability to customize an environment to meet a person's specific demands. It needs an individual to control the environment, taking environmental opportunities where appropriate (Ahmed & Malik, 2019). Nurius et al. (2015) state that while a high level of environmental mastery demonstrates control in one's surroundings, a low level indicates an inability to effectively regulate one's environment.

Lohapan and Ussahawanitchakit (2016) state that a mature human is generally capable of interacting and relating to a diverse group of people in a variety of situations, as well as adjusting to new situations on demand. It frequently necessitates a willingness to leave one's comfort zone when striving for optimal performance (Villarosa & Ganotice, 2018). The challenge that is faced by the nurses in hospitals that affect their job performance is the lack of resources (Ramakuela et al., 2018). Therefore, nurses who experience environmental mastery will take advantage of the resources that they have at hand and make full use of them. One of the challenges that affect the job performance of nurses is that they lack the necessary resources. Therefore, they will be able to accept what the environment offers and perform to the best of their ability.

2.3.1.5 Purpose in life

The core motivating goals of your life form your life's purpose. Purpose can impact behaviour and drive life decisions, shape goals and offer a sense of direction (Jackson, et al., 2014). Kundi et al. (2020) found that achievements are the key part of striving for success. In a similar view, Park et al. (2017) state that the people who plan their goals and achieve them can be inspirational and motivational. Another part of mental health is purpose in life, which is defined as ideas that provide an individual the sense of having a purpose and meaning in life. (Neto, Ferreira, Martinez & Ferreira, 2017). Jackson et al. (2014) support Neto et al. (2017) by stating that mental health improves motivation by making one feel as if they have a bigger aim and purpose in life. With this said, nurses who have a

purpose in life are more motivated in achieving personal and organizational goals. When employees are motivated, organizations tend to gain a lot from the employees. Nurses with a purpose in life will be able to perform to the best of their ability, which will lead to improved job performance.

2.3.1.6 Personal growth

According to Guest (2017), personal development necessitates the attainment of the mentioned attributes as well as the continuing development of individual self-potential, which will aid in the achievement of objectives. Nikbin et al. (2020) refer to personal growth as the ability to grow and expand oneself, to develop into a properly functioning individual, to realise one's potential, and to fulfil one's goals. To achieve optimal psychological functioning, people must continue to progress in all areas of their lives (Villarosa & Ganotice, 2018). Usman (2017) mentions that a high level of personal development indicates continuing development, whereas a low level indicates stagnation. Nikbin et al. (2020) state that employees that are humble but assured are always working for personal improvement and advancement. Therefore, nurses who take into consideration personal growth will strive to improve their selves in terms of improving their skills and knowledge, and this will lead to the improvement of their job performance. They will apply their new understanding and abilities to the challenges that they come across in the workplace.

2.3.2 The concept of mindfulness

In the last two decades, mindfulness has become a popular concept in health care and has gotten a lot of attention from researchers (Creswell, 2017; Heidegger, 2016; Mindfulness Research Guide, 2011). Over the years, a number of authors have helped in the growth of mindfulness in the modern Western culture (Glomb et al., (2011), Louise, Fitzpatrick, Strauss, Rossell and Thomas, (2018), Shapiro, Carlson, Astin and Freedman, (2006) Williams, Teasdale, Segal and Soulsby, (2000)). Mindfulness is now regarded as a natural feature of human consciousness. Wigelsworth and Quinn (2020) define mindfulness as paying attention in a particular way in the present moment and nonjudgmentally.

Creswell (2017) has indicated that since the 1970s, Psychiatry and clinical psychology have created a variety of mindfulness-based therapy applications to aid people suffering from a wide range of psychological conditions. Mindfulness-based programs have been implemented in schools, correctional services, and healthcare facilities to enhance the job performance of employees (Slagter, Davidson & Lutz, 2011). One example of this program is mindfulness-based stress reduction (MBSR). This program was established by Jon Kabat-Zinn (1979) at the University of Massachusetts Medical Center, and it combines mindfulness meditation, physical coordination, and yoga to help people become more conscious. Improved situational awareness, stress reduction and higher calm moods help

nurses make better decisions (Penque, 2019). According to Slagter et al., (2011), mindfulness practice has been used to alleviate depression symptoms, as well as stress and anxiety. Since the work of a nurse is demanding and stressful, practicing mindfulness in the hospitals will help the nurses to reduce their stress and can work under pressure. This will improve the job performance of the nurses resulting in the hospital attaining its goals and objectives.

Goodman and Schorling (2012) state that mindfulness training has been identified as a means of minimising the nurse's burnout and increasing satisfaction. Therefore, having nurses experience satisfaction with their jobs will lead to improving patient care and job performance. Employees who practice mindfulness in their organisations pay more attention to details which this minimises accidents and improves productivity (Gehart, 2012). These employees embrace the relationships between colleagues to create team success. Karunamuni and Weerasekera (2019) also add other benefits of employees who experience mindfulness including the lower level of stress and anxiety and hostility and increase resilience and emotional maturity, as well as improved workplace communication. All these factors above act as an influence on the employees to be more productive and this leads to increased job performance. Janssen, Van Strydonck, Decuypere, Decramer and Audenaert (2020) mentions that nurses who practice mindfulness at a high level may have better control over their attentional resources and use them more efficiently. This will therefore, help to minimise the accidents that occur in the hospitals. Furthermore, Janssen et al. (2020) add that nurses who are being conscious of what is happening around them in the workplace tend to perform to their full potential.

Louise et al. (2018) report that employees who are not mindful will experience creating accidents in the workplace as they are not paying full attention to what they are doing. Employees may also find it difficult to work under pressure and stress. Nurses who experienced psychological well-being in the workplace tend to have excellent service and have happy clients (Janssen et al., 2020). Employees who experience stress in the workplace end up being absent from work and ultimately leaving the job permanently. Therefore, high turnover and absenteeism in the workplace will leave those remaining in the workplace with a high workload. If hospitals are in short of staff, this will affect their productivity and job performance.

2.3.3 The concept of job performance

South African health care system has undergone a restructuring process aimed at the introduction, implementation, and maintenance of a comprehensive primary health care system (Ahmadi, 2009). Part of this restructuring was the introduction of the Occupation Specific Dispensation. With the changes, health care facilities are now becoming increasingly demanding complex, and stressful work

environment for the nurses, which lead to the low job performance of nurses (Sibisi, 2012). Hee and Kamaludin (2016) mention that a successful healthcare organisation should tailor the patient experience and employee performance to the patient's demands. Hee and Kamaludin (2016) further add that excellent job performance lowers labor expenses, improves organisational profits, and enhanced patient loyalty. Job performance is defined as actions that contribute to organizational goals and that are under the individual's control (Bin, 2015). Hellqvist (2011) states that in the late 1980s job performance became popular as a way to evaluate work that had previously been done by individual workers. Job performance has become one of the most important concepts in organizations as it assists employers to ensure that employees take ownership and accountability for their tasks. Moreover, employees who show high job performance in the workplace, the organization tend to increase their profit and decrease the organization costs.

For employees execute their job to the best of their abilities, they have to maintain three factors which are skills, effort, and the nature of the work condition (Abdulla, 2013). Employee skills comprise their knowledge, abilities, and capabilities. The nature of the work situation is the state in which the employee works, and this state determines the employee's productivity. Therefore, the productivity and success of organisations depend on these factors.

Task and contextual performance are the two categories of job performance (Samson, Waiganjo & Koima, 2015). The actions that contribute to the transformation of inputs into goods and services are known as task performance. They are the tasks that are included in job descriptions. Examples include selling clothes, drilling holes, or teaching a class. On the other hand, the contextual performance includes activities that promote the growth of the social organisational network and enhance the psychological climate (Samson et al., 2015). Nurse task and contextual performance are critical in ensuring high-quality clinic treatment and achieving intended patient outcomes (Şahin, Arıcı Özcan & Arslan Babal, 2020). These two types of performance enhance the high performance of nurses in the workplace. Task performance enhances nurses to perform their responsibilities and duties. This ensures a smooth business cycle. Whereas contextual performance ensures co-cooperativeness and voluntary activities daily. Nurses should assist other nurses who are dealing with a particularly heavy workload.

Bonebright (2010) points out that organisations with a high-performance culture focus on the attainment of long-term success while delivering on actionable short-term objectives. In addition, Bonebright (2010) has indicated that these organizations are focused on customer satisfaction operated on highly efficient teams, and are flexible. The culture and management of these organizations prefer

and support less hierarchal organizational structures, a diverse workforce enhances teamwork as well as the ability to adapt to the everchanging environment. High-performing organizations were also able to adapt to the recent Corona Virus pandemic and transitioned to the new normal with minimal hassles. On the contrary, organisations with low performance experience dysfunctional communication between employers and employees. There is also mistrust between employers and employees. Employees do not know what is expected of them which leads to unproductivity and inefficiency.

Hunter (2017) has indicated that there are three dimensions of job performance which are altruism, consciousness and task performance. These are discussed below;

2.3.3.1 Altruism

Altruism can be defined as a selfless concern for the well-being of others (Steinberg, 2010). It is the moral principle and practice of caring for other people's pleasure, resulting in a higher quality of life, both material and spiritual (Olsen, Bjaalid & Mikkelsen, 2017). According to Dyrbye, Shanafelt, Johnson, Johnson, Satele and West (2019), altruism entails employees doing duties simply out of a desire to help, not because you feel obligated to out of duty, loyalty. Altruism can be differentiated from feelings of loyalty (Olsen, Bjaalid & Mikkelsen, 2017). Therefore, nurses who practice altruism are likely to execute their duties and responsibilities without being followed around by their supervisors. They are also loyal to the objectives of the organisation, which enhances job performance. Nurses who practice altruism in the workplace will assist each other as nurses are known to be overloaded with their work. This practice will enable nurses to be productive and increase their job performance.

2.3.3.2 Consciousness

Consciousness can be described as being aware of, and responsive to, one's surroundings (Argonov, 2014). These surroundings may include thoughts, memories, feelings, sensations, and the environment. Awareness is subjective and unique to any individual. Auzoult and Personnaz (2016) report that consciousness is a powerful force in business. Auzoult and Personnaz (2016) continue to add that consciousness at the workplace is the best predictor of its growth and sustained success. Higher levels of consciousness allow employees to have more accountability, responsibility and energy (Neal, 2018). Therefore, with this said, conscious nurses are likely to discipline themselves without the supervisor getting involved. Conscious nurses adhere to the rules and regulations of the hospital, for example, punctuality to work. One of the challenges affecting nurse's job performance is the accidents that occur in the workplace. However, if the nurses are aware and conscious of their surroundings, they are most

likely to avoid making accidents in the workplace, and thus enhancing their effectiveness and productivity in the workplace. Therefore, nurses will improve their job performance.

2.3.3.3 Task performance

Task performance can be defined as the actions that contribute to transforming raw materials into goods and services (Samson et al., 2015). This category includes employee behaviours that are closely engaged in the translation of organisational resources into the goods or services that the organisation generates (Olsen et al., 2017). Nurses who perform their day-to-day duties and responsibilities increase their job performance. Task performance is closely linked to the implementation of the organisational goals. Furthermore, nurses who are likely to perform task performance conduct their day-to-day duties and responsibilities. Therefore, nurses will increase their job performance and ultimately reach the hospital goals which is good service delivery.

2.3.4 The relationship between study variables

The empirical literature was discussed in this section. The empirical literature includes relationship between mindfulness and job performance, the relationship between mindfulness and psychological well-being and the relationship between psychological well-being and job performance.

2.3.4.1 The relationship between mindfulness and job performance

According to Amiresmaili and Moosazadeh (2013), a nurse plays a variety of functions on a health care team, including caring, supporting, treating, coordinating, advising, managing, educating, and conducting research. Thus, a nurse is in charge of patient care and support, ward management chores, prioritising patient visits, and making prompt judgments about emergency patients are all responsibilities that must be completed. (Amiresmaili & Moosazadeh, 2013; Kexian, Tingting & Qu, 2020). Therefore, the health care departments must ensure that the nurses are mindful to execute all these tasks.

Dane and Brummel (2013) and King and Haar (2017) found that Workplace mindfulness is associated with improved job performance in a dynamic work setting. Van Gordon et al. (2014) argue that certain mindfulness-based interventions (MBIs) have now been advocated by both the British National Institute for Health and Care Excellence (BNICE) and the American Psychiatric Association (APA). This shows organisations depend on mindfulness to be the tool that promotes psychological well-being and job performance. Thus, nurses who practice mindfulness will be more valuable to the hospital since they will be more productive and perform better at their jobs. When the nurses increase their job performance, the hospital will reach its objectives and enhance service delivery. Dane and Brummel (2013) and King and Haar (2017) claim that mindfulness improves flexibility and alertness while also

defending against distractions and performance blunders, according to research. Taken together, these data suggest that workplace mindfulness can help employees perform better.

Moreover, Vaculík, Vytásková, Procházka and Zalis (2016) revealed that more mindful nurses seem to be more productive at work. Mindfulness teaches people how to deal with difficult or stressful situations proactively and adaptively. Şahin, Özcan and Babal (2020) mentioned that nurses who are practice mindfulness are more focused and pay more attention to their work and patients. Mindfulness enables individuals to effectively cope with a range of experiences which enhances job performance (Dane, 2011). Dane and Brummel (2013) build on the work of Dane (2011) who maintains that mindfulness can help with task performance in a variety of ways. White (2014) found that nurses who are mindful can work in a stressful situation which leads to job performance. Thus, the nurses who are mindful are likely to be focused considering the pressure that comes with the job. In this way, accidents such as giving incorrect medications to the patient will be minimised.

Şahin et al. (2020) conducted a study on mindfulness and job performance on nurses from various hospitals in Turkey. They found a positive relationship between the two variables. Another study by Penque, S. (2019) also found a positive relationship between mindfulness and task performance on nurses in the United State of America. This relationship implies that when employees are mindful, they are most likely to perform better.

In contrast, a study conducted by Baas, Nevicka and Ten Velden (2014) found that mindfulness is highly significant but negatively related to the task performance of nurses in the Netherlands. Another study conducted by Hafenbrack and Vohs (2018) also showed a negative relationship between mindfulness and task performance on nurses in Portugal.

Literature has shown that there is the inconstancy of results on the relationship between mindfulness and job performance. Therefore, it is necessary to conduct this study. Furthermore, these studies were not conducted on the nurses in Limpopo. Hence, a study of this nature needs to be conducted.

2.3.4.2 The relationship between mindfulness and psychological well-being

Research conducted by Brown, Ryan and Weinstein (2009) reported that the processes through which mindfulness has effects on psychological well-being have received very limited empirical attention to date. It is, therefore, vital for the study of this nature to be conducted as the study will fill the identified gap by exploring more about the relationship between the variables.

However, Brown, Ryan and Creswell (2007) and MacDonald and Baxter (2017) found that the tendency to be aware in everyday life is negatively connected with psychological symptoms and

distress, and positively correlated with psychological health and wellbeing. In other words, mindfulness has a positive relationship with psychological well-being. However, it has a negative relationship with psychological symptoms and distress. Thus, nurses who are mindful are more likely to be psychologically well and they will also be able to lower psychological symptoms and distress.

Whitehead, Bates, Elphinstone, Yang and Murray (2019) agree with Brown et al. (2007) that because mindfulness represents a non-critical, yet actively involved in the thoughts and feelings that are occurring at the time, it has been shown to reduce stress and improve well-being. Therefore, if nurses practice mindfulness in their workplace, they will be able to work under stressful situations as mentioned according to literature, for example, low resources. Low resources could affect nurse's productivity, but mindfulness can ensure that nurses still work to the best of their ability considering the challenge of lack of resources at work.

Fazil and Ghahari (2017) also conducted a study in Iran on nurses reporting that mindfulness techniques would minimise negative emotions and thoughts from patients. The obtained results of a study indicated the beneficial effects of mindfulness on reducing stress, anxiety, and depression. This indicates that mindfulness positively impacts the nurse's psychological health.

Furthermore, a study conducted by White (2014) in Canada found that nurses who learn mindfulness can lead to a greater experiential understanding of the connection of mind, body, and emotions, and these can lead to increased health and wellness. Based on this research, one would, therefore, argue that there is a relationship between mindfulness and psychological well-being; and that there is indeed a positive relationship between mindfulness and psychological well-being.

However, such studies were conducted in the Western and Northern America. Little research is known about this concept in South Africa, Limpopo Province to be specific. Therefore, this study will explore more and fill the identified literature gap about the variables.

2.3.4.3 The relationship between psychological well-being and job performance

Improving the quality of health care, particularly in hospitals, necessitates a strong commitment from each member organization and hospital management (Ahmadi, 2009). Non-productivity was also influenced by personal issues and a lack of physical or mental fitness to work (Price, 2000). Kundi et al. (2020) support Wright and Cropanzano (2004) that psychological well-being not only significantly predicted and continue to enhance employee performance but also ensure supervisory performance ratings several years in the future.

Moreover, Supervisors Employees who reported experiencing a greater balance of positive emotional symptoms over negative emotional symptoms received higher performance ratings than those who reported experiencing more negative than positive emotional symptoms (Harter, Schmidt & Keyes, 2003). Clausen, Meng and Borg (2019) build on the work of, Harter et al. (2003) who maintains that the psychological well-being of employees and their satisfaction with their work and workplace affects citizenship at work, turnover rates, and of course performance rating. The findings highlight the level to which psychological well-being can affect the productivity of employees in the workplace. Employees will stay loyal and be effective when they are psychologically well. Mphephu (2019) reported a high turnover of nurses in the Limpopo Province. Thus, if psychological well-being promotes loyalty, then nurse turnover will decrease if they become psychologically well.

A study conducted by Dlamini and Visser (2017) in Mpumalanga on nurses found that nurses who experience psychological well-being are more likely to avoid making mistakes and accidents which will enhance job performance. A positive relationship between psychological well-being and job performance was found. Mphephu (2019) also revealed a positive relationship between psychological well-being and job performance on nurses in the Vhembe district. Taken together, these two attributes suggest that putting in place practices of psychological well-being in the workplace could enhance the job performance of nurses as fewer mistakes will occur.

However, all these variables are mostly conducted individually on nurses. Little research was done on the relationship of variables on nurses, especially in Limpopo Province. Furthermore, the fact that the existing researches was not conducted in the area of interest of this work makes the current study, very important and deserving of attention.

2.3.5 The mediating role of psychological well-being on the relationship between mindfulness and job performance

Literature has shown inconsistencies in the relationships between the study variables (Nevicka & Ten Velden, 2014; Hafenbrack & Vohs, 2018). Literature also highlighted that most research related to the study variables and area have been conducted in the Western areas, which leaves a gap that this research tries to fill.

Literature has also shown by evidence that there is a relationship between mindfulness and job performance Dane and Brummel (2013); Van Gordon et al. (2014), psychological well-being and job performance Wright and Cropanzano (2004); Dlamini and Visser (2017) and mindfulness and psychological well-being Harrington, Loffredo and Perz (2014); Fazil and Ghahari (2017). However, little literature has shown that psychological well-being plays an important role in the relationship between mindfulness and job performance. Therefore, this is another important reason why this study must be conducted.

2.4 PROPOSED CONCEPTUAL FRAMEWORK

The following proposed conceptual model is informed by the research hypotheses. The relationship between these variables (mindfulness, psychological well-being and job performance) is depicted in Figure 1.

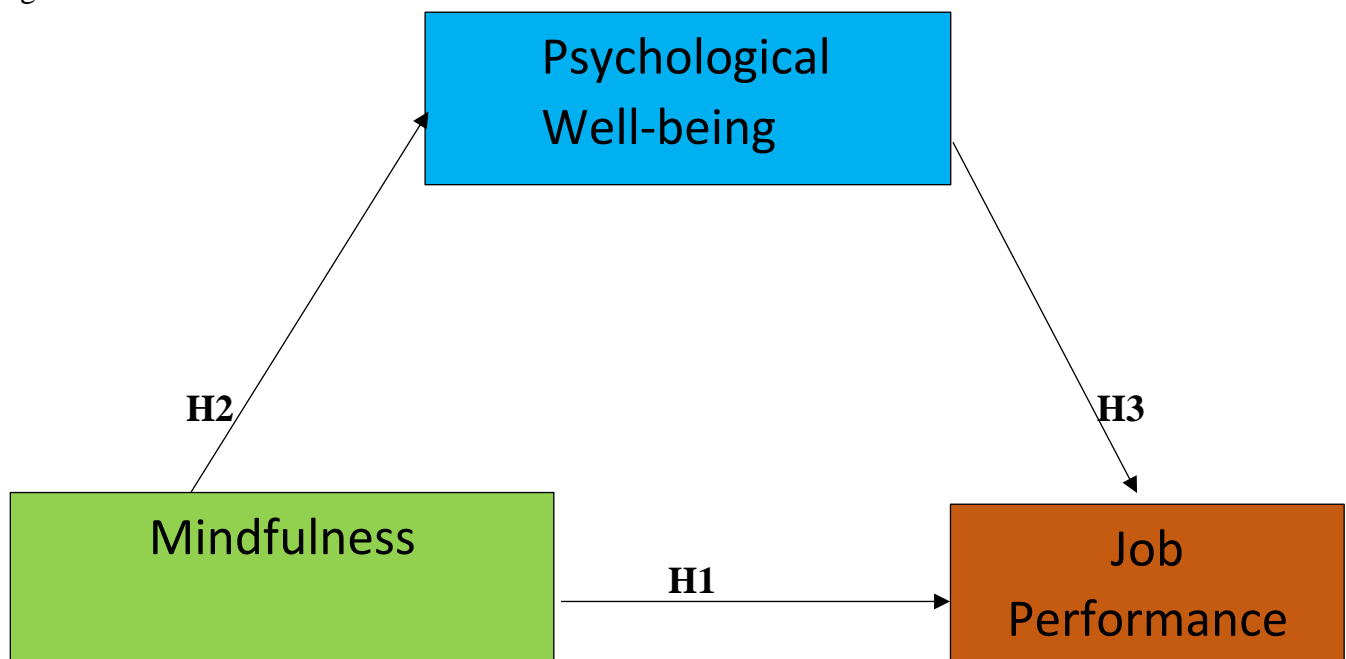


Figure 2.1

Conceptual framework of the mediating role of psychological well-being on the relationship between mindfulness and job performance.

2.5 CHAPTER SUMMARY

The chapter discussed the theoretical framework that aligns with the study. The chapter also includes conceptual review of mindfulness, psychological well-being and job performance. The empirical review of the relationship between the variables of the study are also discussed. Lastly, the conceptual framework was also illustrated based on the findings. The next chapter includes different stages of the research processes including research design, population, sampling and sampling procedures, data

collection methods, questionnaire administration, and data analysis. The chapter will also give clarification on why the chosen research processes were suitable for the current study.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 INTRODUCTION

According to Creswell (2018), research methodology can be defined as the specific procedures or techniques used to identify, select, process, and analyse information about a topic. Therefore, this chapter provides information concerning the methods and approaches that were used and as well as the justification for choosing them. It also covers different stages of the research processes including research design, population, sampling and sampling procedures, data collection methods, questionnaire administration, and data analysis. The chapter also discussed the importance of reliability and validity in a research study. Ethical considerations taken into consideration by the researcher and chapter summary is also discussed.

3.2 RESEARCH PHILOSOPHY

Research philosophy is defined as a belief about how data on a phenomenon should be gathered, analysed, and used (Jensen, 2013). Žukauskas, Vveinhardt and Andriukaitienė (2018) claim that research comes from assumptions. In simple terms, a research philosophy is what the researcher perceives to be true. This means that different researchers may have different assumptions about the truth and knowledge of research. Four types of research philosophies which enable the decision of what approach should be adopted by the researcher, namely, interpretivism, positivism, realism, and pragmatism are discussed next (Saunders, Lewis & Thornhill, 2016).

3.2.1 Interpretivism research philosophy

Interpretivism research philosophy emphasises qualitative analysis over quantitative analysis. It is also referred to as anti-positivism (Flick, 2014). According to Collins (2010), this research philosophy uses qualitative methods to capture various interpretations of phenomena such as natural observation, interviews, and knowledge. Interpretivism relates to subjectivity and has great room for bias (Wilson, 2014). As a result, because interpretivist investigations are dependent on personal viewpoints and beliefs, the data obtained cannot be generalised (Wang, 2019). Therefore, the data's reliability and representativeness are compromised to some level.

3.2.2 Realism research philosophy

Realism research philosophy depends on the concept of self-reliance of reality from the mind of an individual. According to Saunders, Lewis and Thornhill (2012), this philosophy is based on the

assumption that knowledge is developed scientifically. Realism are divided into two groups: direct and critical. Quantitative or qualitative research methods must be appropriate for the subject. It depicts the world through the eyes of a single person (Saunders, Lewis & Thornhill, 2012). However, humans, do experience the emotions and visuals of the real world, according to critical realism. According to Saunders, Lewis and Thornhill (2012), true-world sensations and pictures can be deceiving, because they rarely depict the real world.

3.2.3 Pragmatism research philosophy

Shusterman (2016) states that the pragmatic research philosophy considers only concepts that aid action to be relevant. Pragmatists recognise that there are many ways to perceive the world and conduct research, that no single point of view can ever present the entire picture, and that different realities may exist (Collis & Hussey, 2014). According to Shusterman (2016), pragmatists can be a combination of both, positivist and interpretivism positions within single research according to the nature of the research question. Therefore, the philosophy supports mixed-methods research.

3.2.4 Positivism research philosophy

Positivism research philosophy is founded on the notion that science is the only way to discover the truth. According to Fulford and Hodgson (2016), positivism is a methodological philosophy in quantitative research where we will apply natural science approaches to uncover the results of the study. Positivism is based on quantifiable data that can be analysed statistically and then become generalisable (Tsang, 2016). Hence, it is more appropriate for quantitative studies. The positivism approach believes that knowledge can be revealed or discovered through the use of the scientific method. According to Hammersley (2013), positivism approach will assist in discovering the relationship between an independent variable and one or more dependent variables and may have high-quality standards of validity and reliability (Tsang, 2016).

Based on the discussion above, positivism research philosophy was adopted in this study as this permits the researcher to use questionnaires to collect data from the respondents. Furthermore, adopting this research philosophy also allowed the researcher to measure facts or data using statistical analysis. But most importantly, positivism approach will assist in discovering the relationship between study variables.

3.3 RESEARCH DESIGN

The research approach is a set of steps that range from generalisations to specific information collecting, analysis, and interpretation methodologies, and it is predicated on the nature of the research

problem being addressed (Creswell & Creswell, 2017). There are different kinds of research designs which are, descriptive research design, explanatory research design, correlation research design, and cross-sectional research design. These are discussed next.

3.3.1 Descriptive research design

Malhotra (2010) defines descriptive research as a type of research design that is distinguished by the aim of the study and research objectives. It is typically organised and tailored to measure the features mentioned in the study questions (Saunders, Lewis & Thornhill, 2012). However, according to Collis and Hussey (2013), the "what" of the research subject, rather than the "why," is the focus of descriptive research design. For example, with the present study, a descriptive research design will be able to uncover what the relationship between mindfulness and job performance is without covering any investigation on why the relationship exists.

3.3.2 Explanatory research design

Saunders, Lewis and Thornhill (2012) indicate that explanatory research is conducted on a topic that has previously received little attention and that it determines priorities, provides operational definitions, and results in a more extensively studied model. It is used to discover and report certain connections between various components of the event under investigation (Tsang, 2016). Although Isaacs, Roman and Savahl (2019) argued that explanatory research design does not provide conclusive evidence, it does aid in a better understanding of the situation. The researcher can employ quantitative research to test the relationship between variables. Moreover, the findings on the quantitative research can be supplemented by qualitative research to thoroughly explain the qualitative results.

3.3.3 Correlation research design

According to Pelham, Carvallo and Jones (2011), the correlational research design is one in which the researcher analyses two variables and evaluates the statistical relationship between them with little or no effort to control for extraneous variables. However, the correlation research design is limited in that it is only useful for determining the statistical relationship between two variables (Curtis, Comiskey & Dempsey, 2016). Hence, correlation research design cannot be used to establish a relationship between more than two variables. Krause (2018) proposed that correlational research is not experimental because it does not use scientific methodology to manipulate variables to collaborate or dispute a hypothesis. In other words, correlation research design lets the researcher observe and measure the natural relationship between the two variables.

3.3.4 Cross-sectional research design

A cross-sectional study design is one in which researchers look at the condition of affairs in a population at a specific point in time (Abdullahi & Micheni, 2018). It is a research design that analyses data from the representative of the population at one moment in time. This approach is commonly used to assess health outcomes, comprehend health factors, and define demographic characteristics (Gray, 2016). The participants in a cross-sectional research design are chosen from an available population of potential relevance to the study.

In a cross-sectional study, the researcher assesses the study subjects' (participants') outcomes and exposures at the very same time. Thus, questionnaires are distributed to the participants at the same time to obtain data. Moreover, there is no follow-up with the participants since this process is treated with confidentiality.

Once the participants are selected, the researcher will collect the data and assess the association between the variables. Hence, the researcher will be able to identify the relationship between the variables. According to Collis and Hussey (2013), the data collected from this research design is statistically analysed to draw meaningful research conclusions.

Therefore, the cross-sectional research strategy was used for this study since it allowed the researcher to collect data from a wide group using questionnaires. The data collection is performed in a short time without the need for follow-up of the participants. The design also enabled the researcher to verify the hypotheses and objectives of the study by finding the relationship between variables.

3.4 RESEARCH APPROACH

The research approach is a strategy and procedure that includes everything from generalisation of assumptions to detailed data collect, analysis, and interpretation of the findings. It is also determined by the nature of the problem study at hand (Creswell, 2018). There are three types of research approaches namely, qualitative, quantitative, and mixed methods research approach as discussed below.

3.4.1 Qualitative research

Qualitative research is a scientific method that collects non-numerical data and seeks to interpret the meaning and understanding of these data from the targeted population (Gill, 2014). Malhotra (2010) also defines the qualitative approach as an unstructured approach, based on a small sample to gain the right information about the topic. The method is used to dig deeper into the problem by uncovering

thoughts and opinions. Focus groups (group talks), individual interviews, and participation/observations are some of the most prevalent ways of gathering information. In addition, sample sizes are typically small.

3.4.2 Quantitative research

The quantitative research approach is used to quantify the issue by creating numerical or informational data that can be converted into meaningful statistics (Chaubey, 2013). Yerlikaya (2019) suggests that quantitative research is useful in gathering empirical data and those findings can help one gain a better understanding of the research. According to Park and Park, (2016), quantitative research is carried out on a representative sample size of the target market. For this purpose, the findings and conclusions can represent the whole target market. Goertzen (2017) argues that the quantitative approach uses questionnaires to collect data from the participants.

Furthermore, Goertzen (2017) argues that tables, charts, graphs, or any other non-numerical form are used to depict quantitative data. As a result, the information acquired is easy to understand. According to Chaubey (2013), the quantitative approach is more appropriate for the survey, correlation, and experimental research. Therefore, all these types of research will determine the conclusions and findings which will be generalised to the targeted population or subject.

3.4.3 Mixed method research

Mixed method research is a method of investigation that includes both quantitative and qualitative data collection. The method combines the two types of information and employs different designs that may include philosophical assumptions and theoretical frameworks (Bryman & Bell, 2015). Therefore, because both methods (quantitative and qualitative) have been employed, the researcher will collect and analyse both quantitative (closed-ended) and qualitative (open-ended) data. According to Gibson (2017), mixed methods are especially useful in understanding contradictions between quantitative results and qualitative findings. However, Ramlo (2016) argues that mixed methods studies are difficult to plan and carry out. Furthermore, when one style of research (qualitative or quantitative) is insufficient to solve the research problem or answer the research questions, mixed-method research should be considered (Gibson, 2017).

This study adopts the quantitative approach. This approach assisted in getting more insight into the research problem and obtaining solutions to the problem. The approach adopted this assisted in determining the relationship among variables and testing the hypotheses. Moreover, the quantitative approach was appropriate for this study to enable the researcher to obtain information from a wide

number of people in a short period. Therefore, it will be possible and creditable to generalise the findings and conclusions.

3.5 STUDY POPULATION

A research population is a group of people or items who are the subject of a scientific inquiry (Ghotbabadi, Feiz & Baharun, 2015). The population of this study comprised of 1287 nurses (professional nurses and nursing assistants) employed in three public hospitals in the Polokwane Municipality. The hospitals included Polokwane Provincial hospital (professional nurses 356 and 217 nursing assistants), Seshego hospital (professional nurses 98 and 120 nursing assistants), and Mankweng hospital campus (professional nurses 327 and 169 nursing assistants) (Limpopo department of health, 2018/2019). These hospitals were chosen because several previous studies conducted on nurses in the Limpopo Province were done around the Vhembe district (Makhado, 2011; Mphephu, 2019; Mulaudzi, 2019; Rasalanavho, 2016).

3.6 SAMPLE AND SAMPLING PROCEDURE

Sampling is a portion of the entire group called a population. A sampling procedure is a method of selecting a subset of a population to participate in a research study (Ferguson, 2017). Hence, it is the process of choosing a group of people for research in such a way that the people chosen will be representative of the larger group from which they were selected (Ferguson, 2017). This study adopts two types of sampling procedures, namely; probability sampling and non-probability sampling (Etikan & Bala, 2017). The probability sampling method allows everyone to have an equal chance of being selected to participate in the study. On the contrary, the non-probability sampling method does not give everyone in the selected population an opportunity to be chosen (Liu, Benson & Charikar, 2019). Four types of sampling procedures associated with probability samples are discussed below, namely; simple random sampling, cluster sampling, systematic sampling, and stratified random sampling (Etikan & Bala, 2017).

3.6.1 Simple random sampling

Simple random sampling is a procedure whereby each element of the population has the same characteristics and has an equal opportunity of being used as a sample (Lance & Hattori, 2016). Etikan and Bala (2017) mention that simple random sampling is the most straightforward method of probability sampling. In simple random sampling, each individual in the population has an equal probability of being chosen for the sample (Elfil & Negida, 2017). Hence, this sampling removes bias from the selection procedure. Even though this sampling method is more suitable when the targeted

population is large, it is however not ideal for studies involving face-to-face interviews across a large geographic area due to cost and time constraints (Lance & Hattori, 2016)

3.6.2 Cluster random sampling

Cluster sampling is a method whereby the population will be divided into subgroups called clusters based on their geographical allocation (Ghotbabadi, Feiz & Baharun, 2015). A specified area can be partitioned into clusters, and data obtained from each cluster can be used to represent the entire area. Lance and Hattori (2016) suggest that cluster sampling requires fewer resources for the sampling process because it selects only specific groups from the total population. As a result, it is usually a less expensive sampling method. The method is open to bias. Hence, Ghotbabadi, Feiz and Baharun (2015) suggest if the clusters that represent the whole population are generated based on a biased viewpoint, the conclusions regarding the entire population will also be biased.

3.6.3 Systematic random sampling

Systematic sampling is a probability sampling strategy in which sample members from a wider population are selected based on a random beginning point but with a fixed, periodic interval (Taherdoost, 2016). This method of sampling is usually used for a homogeneous population. This method guarantees the extension of the sample to the whole population (Ferguson, 2017). The researchers must consider how they systematically organise the population as it may affect the findings of the research, . Elfil and Negida (2017) suggest that the sample may be biased if the population on the list is organised straightforwardly or simply that matches the sampling interval.

3.6.4 Stratified random sampling

Stratified random sampling procedures is one of the procedures associated with probability samples (Etikan & Bala, 2017). Stratified sampling divides the entire population into smaller groups or strata to finish the sampling procedure (Ghotbabadi, Feiz & Baharun, 2015). The stratum or subgroup is created using common traits found in the population data. The population is split into numerous categories such as age, gender, nationality, job profile, and educational level (Etikan & Bala, 2017). According to Ferguson (2017), stratified sampling is used when researchers want to draw results from multiple subgroups or strata. Ferguson (2017) continues to say that stratified sampling is employed when a researcher wants to look at an existing link between two groups.

Therefore, three hospitals were purposely chosen for this study. The rationale for purposely choosing these hospitals was because they are the only public hospitals in Polokwane Municipality. A stratified random sampling method was employed to select the sample in this study. The nurses were grouped

into two different strata (professional nurses and assistant nurses). Then the respondents were randomly selected from each stratum. The sampling method was employed because the researcher had two specific strata in mind based on the job position namely; all professional nurses and nursing assistants in three public hospitals.

The minimum recommended sample size of this study was 297 respondents, determined by the online Raosoft sample size calculator (Sample size calculator, 2019). This number of respondents represents the minimum recommended sample size. However, to increase the representativity of the sample and the response rate, 500 questionnaires were distributed.

3.7 DATA COLLECTION METHOD

An online google questionnaire was conducted to collect data from the respondents. According to Couper (2017), a self-administered questionnaire was designed for the respondents to complete without any intervention from the researcher when collecting the information. The questionnaire consisted of the demographic information of the respondents and three measuring questionnaires, namely; mindfulness, psychological well-being, and job performance.

Mindfulness was assessed using the mindful attention awareness scale (MAAS) (Brown & Ryan, 2003). The scale consisted of 15- items which were scored on a five-point Likert scale with anchors rating from (1) *almost always* to (5) *never*. Examples of items used in this questionnaire include; ‘I could be experiencing some emotion and not be conscious of it until sometime later’ and ‘I break or spill things because of carelessness, not paying attention, or thinking of something else’. A previous study which was conducted in Turkey among nurses found a reliability coefficient of .82 for this questionnaire (Sahin et al., 2020). Cronbach's alpha coefficient of .95 is regarded as excellent (Hair, Money, Samouel & Babin, 2003). Furthermore, another study at the university in South Africa on student nurses was conducted. The overall reliability coefficient of MAAS was .85, which is considered as very good (Hair et al., 2003).

The psychological well-being was measured using the psychological well-being questionnaire (PWB) (Ryff, 1995). The instrument consisted of 6 dimensions namely, autonomy, environmental mastery, personal growth, positive relations with others, purpose in life, and self-acceptance. This self-report questionnaire was designed to assess an individual's psychological well-being at a particular moment in time within each of these 6 dimensions. The questionnaire consists of 18- items. Each item was scored on a five-point Likert scale with anchors ranging from (1) *strongly agree* to (5) *strongly disagree*. Examples of items used in this questionnaire include; ‘In general, I feel I am in charge of

the situation in which I live” and “I am not interested in activities that will expand my horizons” and ‘most people see me as loving and affectionate’.

The study by Dlamini and Visser (2017) in Mpumalanga on nurses found fair Cronbach's alpha coefficient of all 6 dimensions namely; autonomy .65; environmental mastery .77; personal growth .71; positive relations with others .78; purpose in life .78, and self-acceptance at .75. The overall reliability coefficient of PWB was .88 which is considered very good (Hair et al., 2003).

A study was conducted using this questionnaire for which 474 clinical nurses were recruited from a medical center in Taipei, Taiwan (Lee, Sun & Chiang, 2019). The Cronbach's alpha coefficient of all 6 dimensions are as follows with their scores; autonomy .57 environmental mastery .72 personal growth .81 positive relations with others .75, purpose in life .77 and self-acceptance at .75. The overall reliability coefficient of PWB was .88 which is considered good. Cronbach's alpha coefficient of .88 is regarded as very good (Hair et al., 2003).

Job performance was measured using a job performance questionnaire (Goodman & Svyantek, 1999). The questionnaire consists of 25 items covering three dimensions: altruism, conscientiousness, and task performance. Each item was scored on a five-point Likert scale with anchors ranging from (1) *strongly disagree* to (5) *strongly agree*. Examples of items used in this questionnaire include; “help other employees with their work when they have been absent” and “achieve the objectives of the job”. In the study by Khamisa, Peltzer, Ilic and Oldenburg (2017) in Johannesburg in private and public hospitals around nurses found an acceptable Cronbach's alpha coefficient of all dimensions namely; altruism .82, conscientiousness .89 and task performance at .96. The Cronbach's alpha coefficient for the overall scale was found to be .83 (Khamisa, Peltzer, Ilic, & Oldenburg, 2017). Cronbach's alpha coefficient of .83 is regarded as very good (Hair et al., 2003).

3.8 RESEARCH PROCEDURE

Before conducting the research, the Department of Health, Polokwane was approached to obtain permission to conduct the research. The information about the main aim of the research and how this research can contribute to the development of the nurses was provided. A consent form was also designed and given to the participants before the research was conducted.

The questionnaires were prepared and sent out to the participants. Brace (2018) states that a questionnaire is a kind of communication between the researcher and the subject, which is occasionally conducted by an interviewer on the researcher's behalf. The participants were requested to return the completed questionnaires within 14 working days.

3.9 DATA ANALYSIS

Data analysis is defined as a process of filtering, transforming, and structuring data to discover relevant information for decision-making (Tabachnick & Fidell, 2014). Therefore, the data collected in this study were analysed through the Statistical Package for Social Sciences (SPSS) version 28. Descriptive statistics was used to summarise and describe the levels of the nurse's mindfulness, psychological well-being, and job performance. Descriptive statistics was also used to check the sample profile such as gender and age. The information was presented in graphical form, showing frequencies and percentages. Leedy and Ormrod (2014) explain that descriptive statistics examine a situation as it is. Thus, the descriptive statistic was used to give insights into the levels of the nurse's mindfulness, psychological well-being, and job performance.

In addition, Pearson's product-moment correlation coefficient was used to specify the relationship between mindfulness, psychological well-being, and job performance. Before mediation multiple regression analysis is conducted, there are predictions of the relationship between variables that the researcher must test. Therefore, regression was also employed. Multiple linear regression analysis was used to check the variance explained by mindfulness and psychological well-being in predicting job performance. Mediated regression analysis was employed to determine the mediation role of psychological well-being on the relationship between mindfulness and job performance.

3.10 ETHICAL CONSIDERATIONS

Ethical consideration can be defined as a set of ideas and principles that address the topic of what is right and wrong in human affairs (Leibovici, 2016). When conducting research, the concept of ethics comprises a collection of widely considered normal behaviour (De Vos, 2014; Cooper, 2014; Babbie, 2010). Saunders and Lewis (2016) describe ethics as the code of behaviour that governs the conduct of research concerning study participant's rights. Ethics, according to Denzin and Lincoln (2011), are commonly understood as moral principles. Informed permission, non-deception, absence of psychological or bodily harm, privacy, and secrecy, as well as a commitment to collecting and presenting trustworthy and valid scientific evidence, are all examples of ethical research practices.

3.10.1 Ascertaining that all participants have given their informed permission

Informed consent means that each study participant understands how the study may affect them and hence agrees to participate voluntarily after granting the researcher the consent to use them in the study. According to Leibovici (2016), informed consent is a research technique that necessitates the researcher to expand and clarify the investigation's aim and procedures to possible research participants. The researcher informed the participants about the purpose of the study and voluntary

consent was obtained. Participation was voluntary, and the researcher distributed and then collected the questionnaire completed later. Participants were informed about the nature and consequences of the research in which they were involved. The consent form stated the rights of the research participants who participated in the study. Before the beginning of the data gathering process, all respondents gave their informed consent. All of the participants' dignity, rights, and safety were safeguarded by obtaining their agreement. All data collection procedures were preceded by obtaining written consent from the subjects. Participants were made aware that taking part in the study was completely voluntary, and if they were uneasy during the interview, they could end it and withdraw. Each participant was asked to ask questions regarding the study before completing the consent form.

3.10.2 Assuring that the participants are not harmed

All subjects were protected from danger and unethical behaviour by the researcher. The researcher explains the study's objective and ensures the participants that they will be secure, limiting any psychological or emotional harm that may occur because of the study. The subjects were shielded from physical or psychological injury, such as the loss of independence, dignity, or self-esteem.

3.10.3 Ensuring transparency, confidentiality, and anonymity

Transparency, anonymity, and confidentiality describe a situation in which a researcher is aware of a research subject's identity but takes precautions to prevent that information from being revealed to others (Hai, Baroutjian & Elkbuli, 2020). Transparency about the procedures and risks involved in the research project was communicated with the participants. Participants were also assured that their information will be held with absolute confidentiality by informing them not to mention or write their names on the questionnaires provided to them. Participation was also done based on anonymity by allowing them to complete the questionnaire at a place where they feel comfortable. All respondents were assured of the confidentiality of their responses. Respondents were instructed not to include their details on the questionnaire. All data was gathered in an anonymised manner. Participants were not obliged to supply any personal information, and all participants were given pseudonyms. The participants' information was kept in strict confidence.

3.10.4 Assuring that permission has been granted

Under the supervision of the University of Venda Research Ethics Committee, the researcher created research instruments. The institution's ethical committee gave its approval. Permission to gain access to the nurses in public hospitals involved in the study was sought from the Department of Health in Limpopo Province as well as from the relevant hospital's management of the selected public hospitals.

3.10.5 Data protection

According to Glegg (2019), data protection entails respect for individuals and their rights regarding privacy and the use of information about them. Data was stored in a lockable cabinet and on a laptop or hard driver with access/security code to documents. To ensure adherence to legal standards and ethical principles, original copies or written materials of the data were maintained in a safe cupboard in a locked room with no other access.

3.11 CHAPTER SUMMARY

This chapter provided an outline of the processes and procedures used to collect data from nurses in public hospitals in Limpopo Province. The cross-sectional descriptive design, the positivism research paradigm, and the quantitative data analysis were explained. The chapter further presented the target population, sample, random sampling technique, research instruments, ethical considerations that guided the researcher, and data collection procedure. The next chapter will reveal the results of the data analysis. The chapter will give in details the results and what the results mean.

CHAPTER FOUR

PRESENTATION OF RESULTS

4.1 INTRODUCTION

This chapter presents the study results. As mentioned in Chapter 1, this study aimed to investigate the relationship between mindfulness and job performance: the mediating role of psychological well-being on the relationship between mindfulness and job performance among public hospital-based nurses in Polokwane municipality. Data was collected from a sample of 300 nurses among public hospital-based nurses in Polokwane local municipality, South Africa. Statistical Package for Social Sciences (SPSS) version 28 was used to compute data collected in the form of numbers into the meaningful information useful for the discussions. The demographic characteristics are described using descriptive statistics followed by item analysis to check the internal consistency of each questionnaire. The chapter also presented descriptive statistics on the measures of central tendency, dispersion, and normality of data. Furthermore, Pearson`s correlation analysis was used to test the relationship between the constructs. Multiple linear regression testing to test the strength of the relationship between the constructs. Finally, the results on mediated regression analysis are presented to determine the mediation role of psychological well-being on the relationship between mindfulness and job performance.

4.2 DEMOGRAPHIC CHARACTERISTICS OF RESPONDENTS

A total of 300 respondents participated in this study. Descriptive statistical analysis was employed to obtain the frequency distribution of demographic variables such as gender, age, qualification, length of work, rank, and job status of the respondents.

4.2.1 Gender

Results in Figure 4 show that between the participants, 189(63%) were females, whereas 111(37%) were males. This indicates that most of the participants were females.

The results of the respondents' gender are represented in Figure 4.1. next.

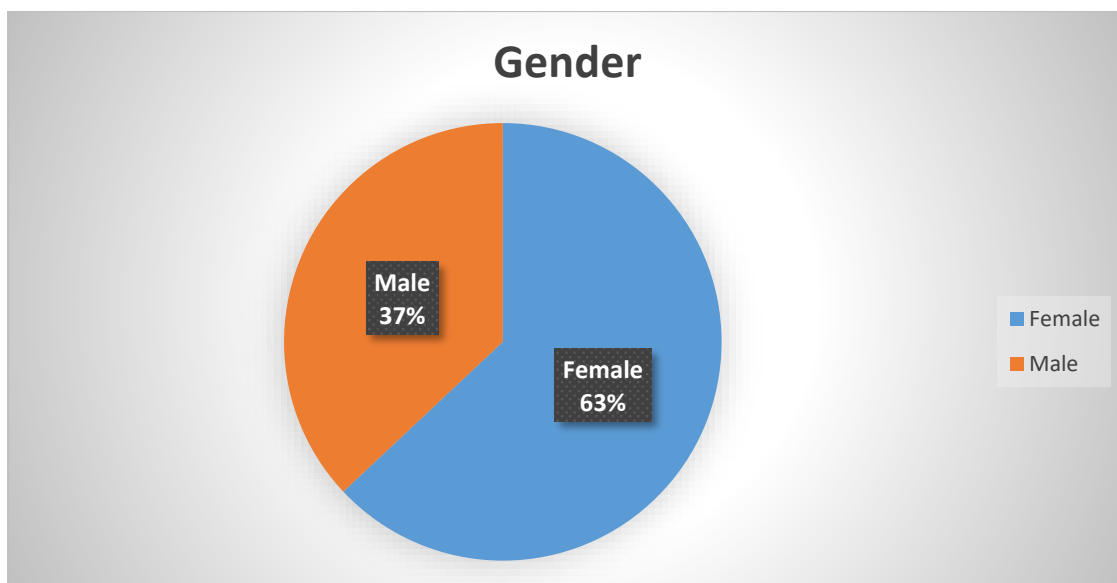


Figure 4.1

Gender of respondents

4.2.2 Age of respondents

Results in Table 4.1 show that most 94(31.3%) participants in the sample were in the age category of 31-35. Those between 36-40 were the second-highest 73(24,3%), followed by 68(22.7%) in the age category of 41+ years. Results further show that those who were in the age category 26-30 years were 60(20%) and the smallest number of participants 5(1.7%) were those between the ages 20-25.

Table 4.1

Age of respondents

Age (in years)	Frequency	Percentage
20-25	5	1.7
26-30	60	20
31-35	94	31.3
36-40	73	24,3
41+	68	22.7
Total	300	100

4.2.3 Highest qualification of respondents

The qualifications of respondents were also investigated. Results in Table 4.2 show that most respondents 165(55%) had obtained a Diploma as their highest qualification. This was followed by Degree holders with 73(24,3%). The results further show that respondents with a Certificate were 51(17%) followed by 10(3,3%) respondents with a post-graduate degree. Only one participant 1(0,3%) had other qualifications.

Table 4.2

Highest qualification of respondents

Qualification	Frequency	Percentage
Certificate	51	17
Diploma	165	55
Degree	73	24,3
Post-graduate	10	3,3
Any other qualification	1	0,3
Total	300	100

4.2.4 Length of service

Results in Table 4.3 show that 85(28,3%) of the respondents had served in the nursing profession for 6 to 10 years, followed by 84(28%) who had been in the nursing profession for 16+ years. The results further show that 76(25,3%) had been working for a period of 11-15 years, while only 55(18,3%) respondents had been working in the nursing profession for 0-5 years.

Table 4.3
Length service of respondents

Years of work experience	Frequency	Percentage
0-5 years	55	18,3
6-10 years	85	28,3
11-15 years	76	25,3
16+	84	28
Total	300	100

4.2.5 Rank

Results in Table 4.4 show that most 236(78,7%) participants in the sample were registered nurses, followed by 55(18,3%) who were nursing assistants. Enrolled nurses who participated in this study were 4(1.3%). Results further show that only 3(1%) Licensed professional nurses took part in the study, while the smallest number of respondents 2(0.7%) were Advanced practice.

Table 4.4
Rank of respondents

Rank of respondents	Frequency	Percentage
Nursing assistant	55	18,3
Licensed professional nurse	3	1
Registered nurse	236	78,7
Advanced practice	2	0,7
Enrolled nurse	4	1,3
Total	300	100

4.2.6 Job status

Results in Table 4.5 show that majority of the participants 249(83%) were permanently employed, whereas 51(17%) were on contract. This indicates that a larger number of the participants were the permanent nursing staff.

Table 4.5

Job status of respondents

Job status	Frequency	Percentage
Permanent	249	83
Contract	51	17
Total	300	100

4.3 ITEM ANALYSIS

The reliability of the constructs was measured using Cronbach's alpha. The Cronbach alpha measures the internal consistency of each scale.

Table 4.6 shows the rule thumb for labeling Cronbach's alpha coefficient.

Table 4.6

The Rule of thumb for labelling Cronbach's alpha coefficients

Cronbach's alpha coefficient	Level of reliability
Above .90	Excellent
Above .80	very good
Above .70	Good
Above .60	Fair
Above .50	Poor

Source: Hair, Money, Samouel and Babin (2003).

Table 4.6. explains the Cronbach's alpha coefficient by (Hair et al., 2003). Hair et al., (2003) suggest that reliability levels range from above .90 is regarded as excellent, whereas a Cronbach's alpha coefficient above .80 represents a very good Cronbach's alpha. Furthermore, a Cronbach's alpha coefficient that ranges from above .70 is also regarded as good. A fair Cronbach's alpha coefficient ranges from above .60. Lastly, the Cronbach's alpha coefficient that is above .60 represents a poor Cronbach's alpha coefficient.

Table 4.7

The reliability analysis of the mindfulness questionnaire

Cronbach's alpha Based on					
Cronbach's alpha	Standardised Items		No of Items		
.630	.629		15		
	Scale Mean if Item Deleted	Scale Variance if Item Deleted	Corrected Item-Total Correlation	Squared Multiple Correlation	Cronbach's alpha if Deleted
MASS1	54.26	30.0073	.120	.062	.632
MASS2	55.03	28.086	.252	.195	.614
MASS3	54.73	29.356	.154	.197	.629
MASS4	54.65	28.932	.212	.251	.619
MASS 5	54.87	28.103	.307	.273	.605
MASS 6	54.75	28.335	.256	.276	.613
MASS 7	54.68	28.913	.207	.263	.620
MASS 8	54.83	28.124	.303	.242	.606
MASS 9	54.74	28.449	.260	.220	.612
MASS 10	54.73	28.633	.248	.252	.614

PWB4	68.09	83.524	.471	.269	.848
PWB5	68.12	86.751	.274	.176	.857
PWB6	68.05	87.188	.263	.177	.857
PWB7	68.01	87.154	.260	.170	.857
PWB8	68.24	82.732	.474	.306	.848
PWB9	68.17	80.654	.606	.478	.842
PWB10	68.18	84.255	.393	.245	.852
PWB11	68.15	79.341	.608	.525	.842
PWB12	68.17	79.678	.608	.488	.842
PWB13	68.25	80.444	.564	.413	.844
PWB14	68.03	86.899	.273	.193	.856
PWB15	68.04	83.159	.487	.316	.848
PWB16	68.15	85.301	.349	.222	.854
PWB17	68.10	82.793	.459	.303	.849
PWB18	68.18	81.107	.561	.406	.844

Note: PWB=Psychological Well-Being

4.3.2 Psychological well-being

An 18-items psychological well-being questionnaire obtained a very good Cronbach's Alpha of .856 as shown in Table 4.6. (Hair et al., 2003). All item values for corrected item-total correlations were above .30 except PWB4, PWB5, PWB6, PWB7, PWB10, PWB14 and PWB16. It was decided that the items below .30 be retained for further analysis because their removal would not greatly increase the scale's Cronbach alpha.

4.3.3 Job Performance

An excellent Cronbach's alpha of .935 is shown in Table 4.6. was found for the job performance questionnaire with 24 items. This reflects a very good coefficient as stipulated by Hair et al., (2003). As shown in Table 4.9. only JP12 was a bad item with a corrected item-total correlation of <.30. The deletion of item JP12 would slightly improve the questionnaire's Cronbach's alpha. However, it was retained for further analysis because of its insignificant improvement if deleted.

Table 4.9

The reliability analysis of the job performance questionnaire

Cronbach's alpha Based on					
Cronbach's alpha	Standardised Items		No of Items		
.935	.933		24		
	Scale Mean if Item Deleted	Scale Variance if Item Deleted	Corrected Item- Total Correlation	Squared Multiple Multiple Correlation	Cronbach's alpha if Deleted
JP1	90.86	223.369	.680	.497	.931
JP2	91.15	223.869	.667	.518	.931
JP3	91.14	223.100	.654	.512	.931
JP4	91.03	225.611	.594	.487	.932
JP5	91.05	222.673	.665	.536	.931
JP6	91.08	228.110	.539	.359	.933
JP7	91.06	226.532	.622	.457	.931
JP8	90.93	233.594	.405	.239	.934
JP9	91.00	231.211	.461	.349	.934
JP10	90.90	231.930	.466	.321	.934

JP11	91.12	221.801	.683	.551	.930
JP12	90.94	239.665	.191	.197	.937
JP13	91.03	227.320	.550	.388	.933
JP14	91.12	226.498	.594	.419	.932
JP15	91.08	228.034	.520	.364	.933
JP16	91.08	224.553	.615	.449	.932
JP17	91.08	222.465	.658	.519	.931
JP18	91.09	224.600	.644	.489	.931
JP19	90.98	223.555	.665	.520	.931
JP20	91.13	225.398	.625	.438	.931
JP21	90.99	223.863	.659	.514	.931
JP22	91.04	224.821	.650	.491	.931
JP23	91.17	225.018	.602	.415	.932
JP24	91.08	223.582	.670	.500	.931

Note: JB=Job performance

Table 4.10 present the Cronbach's alpha of the overall questionnaires.

Table 4.10

Cronbach's alphas of the study for the overall scale

Construct	No of items	Cronbach's alpha score	Level of reliability
MASS	15	.630	Fair
PWB	18	.856	Good
JP	24	.935	Very good

Note: MASS= Mindfulness; PWB= Psychological well-being; JP= Job performance

4.3.4 Summary of reliability analysis for the overall questionnaires

Table 4.10. summarises Cronbach's alpha coefficients of the overall questionnaires. From the mindfulness questionnaire, a fair Cronbach's alpha of .630 was found. The psychological well-being questionnaire obtained a very good Cronbach's Alpha of .856. Furthermore, Cronbach's alpha of .935 was found for the job performance questionnaire which reflects an excellent co-efficient as stipulated from Table 4.10. To conclude, the reliability coefficient attained by all constructs is satisfactory as they are above .60 thus showing the consistency and stability of the questionnaires (Hair et al., 2003). Therefore, it is acceptable to say all these questionnaires are reliable.

4.4 DESCRIPTIVE STATISTICS (MEASURE OF CENTRAL TENDENCY, DISPERSION, AND NORMALITY)

Table 4.10 shows the descriptive statistics on mindfulness, psychological well-being, and job performance. It measures the central tendency of the constructs by displaying the mean and standard deviation. It also illustrates the normality of the data set analysed using skewness and kurtosis.

The results in Table 4.10 show that on the mindfulness questionnaire, most respondents disagreed regarding this variable ($M = 4$; $SD = 5.64$). This shows that management in the healthcare sector should enhance mindfulness training of nursing staff in the three public hospitals in the Polokwane Municipality as this may cause nurses not to be mindful of their job.

Nursing staff in three public hospitals in the Polokwane Municipality again showed that most of them were not psychologically well in the workplace ($M = 4$; $SD = 9.61$). This implies that the management in the healthcare sector should improve the mental wellness of the nursing staff. However, the average score for job performance shows that most respondents were performing well in their jobs even under different challenges they face such as not being mindful and psychologically well ($M = 4$; $SD = 15.57$).

Normality of data

Descriptive statistics analysis was also carried out to understand the normality of the data collected by providing short summaries of the sample. The analysis checks the normality of data. Hair, Black, Babin and Anderson (2010) argued that data is considered to be normal if skewness is between -2 to +2 and kurtosis is between -7 to +7.

Therefore, data can be considered to be normally distributed because Skewness and Kurtosis values are between -2 to +2 and -7 to +7.

Table 4.11

Descriptive statistics showing measures of central tendency, dispersion, and normality of data

Constructs	<i>M</i>	<i>SD</i>	Skewness	SE	Kurtosis	SE
MASS	4	5.64	-1.32	.141	3.20	.281
PWB	4	9.61	-1.59	.141	2.30	.281
JP	4	15.67	-2.03	.141	4.03	.281

Note: MASS= Mindfulness; PWB= Psychological well-being; JB= Job performance; M= Mean; SD = Standard deviation; SE= standard Error.

4.5 PEARSON CORRELATION

Pearson correlation analysis was carried out to test hypotheses one, two, and three. The results of this analysis are presented in this section. Table 4.11 shows the interpretation of levels of correlation values.

Table 4.12

The rule of thumb of correlation value

R- value	Interpretation
$\pm .91$ to ± 1.00	Very strong
$\pm .71$ to $\pm .90$	High
$\pm .41$ to $\pm .70$	Moderate
$\pm .21$ to $\pm .40$	small but definite relationship
$\pm .00$ to $\pm .20$	Slight, almost negligible

Source: Hair, Money, Samouel and Page (2007)

Given the rule of thumb for correlation values, the following conclusions were made about the relationship between variables.

Hypothesis one: There is a significant relationship between mindfulness and job performance among nursing staff in three public hospitals in Polokwane Municipality.

Results in Table 4.12 show that there is a relationship between mindfulness and job performance ($r=.393^{**}$; $p=.000$). Therefore, it can be concluded that as mindfulness improves, job performance among nursing staff in three public hospitals in Polokwane Municipality also improves. Therefore, hypothesis one is supported.

Hypothesis two: There is a significant relationship between mindfulness and psychological well-being among nursing staff in three public hospitals in Polokwane Municipality.

A statistically moderate relationship was found between mindfulness and psychological well-being ($r=.443^{**}$; $p=.000$), as shown in Table 4.12. This means that if nursing staff in three public hospitals in Polokwane Municipality practice mindfulness in the workplace, the more they will experience psychological well-being. Therefore, hypothesis two is supported.

Hypothesis three: There is a significant relationship between psychological well-being and job performance among nursing staff in three public hospitals in Polokwane Municipality.

The correlation analysis between psychological well-being and job performance shows a significant relationship ($r=.825^{**}$; $p=.000$) as well. This shows that for nursing staff in three public hospitals in Polokwane Municipality to improve their job performance, their psychological well-being must also improve. Therefore, hypothesis three is supported.

Table 4.13

Pearson correlation analysis results among the variables

Variables		MASS	PWB	JP
MASS	Pearson Correlation	1		
	Sig. (2-tailed)			
PWB	Pearson Correlation	.443**	1	
	Sig. (2-tailed)	.000		
JP	Pearson Correlation	.393**	.825**	1
	Sig. (2-tailed)	.000	.000	

***Correlation is significant at the 0.01 level (2-tailed)*

Table 4.14

Regression analysis results among the variables

Steps	Variables	β	T	DF	P
Step 1	MASS predicting JP	1.09	7.372	298	.000
Step 2	MASS predicting PWB	.755	8535	298	.000
Step 3	PWB predicting MASS	1.321	22.18	297	.000
	as a control				
Step 4	MASS predicting JP, with PWB as a control	.093	.920	297	.358

Indirect effects: $\beta = 0.359$, SE = 0.060, 95% CI = (.228, .465)

Note: MASS = Mindfulness; PWB = Psychological well-being; JP = Job performance; β = Beta; t = t -value; df = degrees of freedom; p = level of significance.

4.6 REGRESSION ANALYSIS

Hypotheses four: To explore the mediating role of psychological well-being on the relationship between mindfulness and job performance among nursing staff in three public hospitals in the Polokwane Municipality.

Regression analysis was carried out using Process Version 4 by Hayes (2013) to explore the mediating role of psychological well-being on the relationship between mindfulness and job performance among nursing staff in three public hospitals in the Polokwane Municipality. In the 1st step of the mediation model, the regression of mindfulness and job performance was carried out in the absence of the mediator, which was significant, $\beta = 1.09$, $+ (298) = 1.09$, $p = .000$.

Step 2 reveals that the regression of mindfulness on mediator (psychological well-being) was also significant, $\beta = .755$, $+ (298) = 8535$, $p = .000$. Step 3 of the mediation process showed that the mediator (psychological well-being), controlling for mindfulness, was significant, $\beta = 1.321$, $+ (297) = 22.18$, $p = .000$. Step 4 of the analyses revealed that, controlling for the mediator (psychological well-being), mindfulness scored an insignificant predictor of job performance, $\beta = .093$, $+ (297) = .920$, $p = .358$.

The mediating effect was assessed with non-parametric bootstrapping. In this case, the null of 0 is within the 95% confidence interval (CI) of the lower and upper limit, therefore, the indirect effect is 0 for the observed population. On the other hand, if 0 is outside the confidence interval limit, the indirect effect is regarded as non-zero. In this study, the indirect coefficient was statistically significant, ($\beta = .359$, $SE = .060$, $95\% CI = (.228, .465)$). This shows that there is evidence of mediation. Therefore, it is accurate to state that hypothesis four, Psychological well-being mediates the relationship between mindfulness and job performance is supported.

4.7 CHAPTER SUMMARY

This chapter focused on the statistical analysis and presentation of results. The chapter presented descriptive statistics on the measures of central tendency, dispersion, and normality of data. Demographic information and results were presented in the form of Figures and Tables. The results showed the Cronbach's Alpha coefficients of the variables studied. The Cronbach's Alpha coefficients of the variables were all above .60, which means that the questionnaires were reliable (Hair et al., 2003). The Pearson product-moment analysis of correlation was used to assess the significant relationship between the variables. The results showed a significant relationship between mindfulness, psychological well-being, and job performance. The analysis of regression indicated a significant positive relationship between mindfulness and job performance among nursing staff in three public hospitals in the Polokwane Municipality. Furthermore, the results also showed that psychological well-being mediates the relationship between mindfulness and job performance. The next chapter will present the findings of the study. Conclusions, recommendations for future studies, and study limitations will also be covered in the next chapter.

CHAPTER FIVE

DISCUSSION OF RESULTS, CONCLUSIONS, LIMITATIONS AND RECOMMENDATIONS OF THE RESEARCH

5.1 INTRODUCTION

In this final chapter of the study, the research findings presented in Chapter 4 will be discussed with insight on how they relate to the literature review. Conclusions, recommendations for future studies, and study limitations will be given. The main aim of the study was to determine whether mindfulness relates to job performance and whether this relationship is influenced by psychological well-being.

5.2 DISCUSSION OF RESULTS

The following section discusses the descriptive statistics, reliability analysis, Pearson's correlation, and regression analysis results.

5.2.1 Discussion of demographic characteristics of respondents

The results revealed that most of the participants were females 189 (63%). These findings agree with Tshitangano (2013)'s study which revealed that 70% of the nurses in Limpopo Province hospitals are females. The results further revealed that the age group that participated the most in the study was between 31 to 35 (31.3%) years. This means that most of the nursing staff in three public hospitals in the Polokwane Municipality are in their mid-thirties, which is the young adulthood age. The hospitals are mostly occupied by nurses who are in their thirties because those who are in their forties end up leaving seeking greener pastures. According to the South African Nursing Council (2017), over 18 percent of nurses are no longer in practice. Another 18 percent are registered with agencies and relying on part-time work in private hospitals.

The results further showed that most participants hold a diploma qualification 165(55%). This can be expected because registered nurses qualification is the minimum requirement for one to enter into the nursing profession. Similarly, Mbombi et al. (2018) conducted a study among nurses in a tertiary hospital in Limpopo province. The results showed that 275(78,7%) registered nurses participated in the study, which was the highest number of participants compared to other nursing professions.

As far as work experience is concerned, most participants 85(28.3%) had 6 to 10 years of working experience in the healthcare service. These results are in line with Mphephu (2019) s' findings which revealed that a large percentage of nurses in the healthcare sector have 5 to 10 years of experience.

Those under 5 + years of experience mostly end up resigning and moving to other countries seeking better working conditions. The study that investigated the reasons behind the migration of South African nurses to other countries found that poor working conditions such as long working hours and non-professional responsibilities such as delivering and retrieving meal trays were the cause (Mavodza, 2017).

According to the Department of Health, one nurse should be accountable for four patients per shift; yet, due to a nursing shortage in rural areas like Limpopo, one nurse is responsible for 40 patients during a night shift. (Uhunamure, 2018). Another study done by Baernholdt and Mark (2009) found that within three years, 43 percent of newly qualified nurses working in hospitals resign. Furthermore, 33.5 percent of employees leave after two years, and 17.5 percent stay for only one year.

The results also showed that the majority of respondents were permanent employees 249 (83%). This might be influenced by the shortage of nursing staff in the healthcare sector. The nursing profession increases by 10 percent a year, whereas South Africa's population rises by 14 percent, resulting in a progressive scarcity of properly qualified nursing professionals across the country (Uhunamure, 2018).

5.2.2 Discussion of the questionnaires` reliability

A rule of thumb for labelling Cronbach's alpha coefficient by Hair et al. (2003) which suggests that reliability levels ranging from between .60 and over .90 are reliable was followed in the current study. Reliability results revealed that the variables' Cronbach Alpha coefficients were between .630 and .935. The Cronbach's Alpha coefficient for mindfulness scale was .630 which was considered as fair. A study at a university in South Africa on student nurses was conducted using the mindfulness questionnaire. The overall reliability coefficient of MAAS was .85, which is considered very good (Hair et al., 2003). Based on these findings, the scale is reliable and applicable in this study.

On the other hand, psychological well-being scored a Cronbach alpha of .856, which is regarded as very good. A previous study on 474 clinical nurses in Taipei, Taiwan also found a very good alpha coefficient of .88 using the same scale (Lee, Sun & Chiang, 2019). Therefore, one can argue that the psychological well-being scale was internally consistent. Another excellent Cronbach's alpha coefficient of .935 was found on the job performance scale. A study conducted by Khamisa, Peltzer, Ilic and Oldenburg (2017) on private and public hospitals nurses in Johannesburg found a very good level of reliability of 0.83 (Hair et al., 2003). Based on these findings, all instruments used were reliable and can be adopted in future studies in the South African context (Hair et al., 2003).

5.2.3 Discussion of descriptive statistics

Table 4.11 in chapter four shows the descriptive statistics of mindfulness, psychological well-being, and job performance dimensions through mean scores and standard deviations. Mindfulness found a mean score of ($M = 4$; $SD = 5.64$). The findings showed that most nursing staff in three public hospitals in the Polokwane Municipality were not mindful of their job. This means that the management needs to put in place practices to enhance the mindfulness of the nursing staff.

The findings further showed a mean score of ($M = 4$; $SD = 9.61$) for psychological well-being. This implies that most of the nursing staff also disagreed with the statement that they are psychologically well. This may be caused by a low percentage of the nursing staff not attending the wellness programs provided by the management. The annual Inspection Report (2016/17) only 15 percent of the nursing staff attended these wellness programs. The management must make such programs mandatory for everyone to participate in them.

However, they agreed to the statement that they are performing with a mean score of ($M = 4$; $SD = 15.57$). This might be caused by a monthly report that their supervisors must write about their performance (Hellqvist, 2011). The nursing staff are therefore forced to perform under such difficult conditions. Therefore, one can argue that the nursing staff still perform as even though they are not mindful and psychologically well. One can also argue that they are able to perform because they rely on their educational background and years of experience. However, they would further improve their performance if they were mindful and psychologically well.

5.2.4 Discussion of correlation analysis

The main objectives of the study were to investigate the relationship between mindfulness and job performance and whether this relationship is mediated by psychological well-being among nursing staff in three public hospitals in the Polokwane Municipality. Pearson correlation analysis was conducted to test hypotheses one to three. The findings are discussed next.

Hypothesis one: There is a significant positive relationship between mindfulness and job performance among nursing staff in three public hospitals in Polokwane Municipality.

Pearson correlation analysis indicated a significant relationship between mindfulness and job performance ($r = .393^{**}$; $p = .000$). This indicates that when the mindfulness of the nursing staff improves, the more they will perform better at their job. These employees will minimise accidents in the workplace such as giving the wrong prescription to the patients.

These results are in agreement with findings by Şahin et al. (2020) on nurses from various hospitals in Turkey, which also, found a positive relationship between the two variables. Thus, nurses who practice mindfulness are valuable to the hospital since they will be more productive and perform better at their jobs.

Hypothesis two: There is a significant relationship between mindfulness and psychological well-being among nursing staff in three public hospitals in Polokwane Municipality.

A significant positive relationship between mindfulness and psychological well-being was found ($r=.443^{**}$; $p=.000$). This means that as the nursing staff becomes more mindful of their jobs, their mental well-being improves. Whitehead, Bates, Elphinstone, Yang and Murray (2019) agree with Brown et al. (2007) that mindfulness is recognised to relieve stress and improve mental well-being in part because it reflects a non-critical quality of consciousness while currently involved in the thoughts and emotions that are present at the time.

Similarly, a study conducted by White (2014) in Canada found that nurses who are mindful understand the connection between their mind, body, and emotions better. In turn, improves their physical and psychological wellness. This indicates that mindfulness positively impacts the nurse's psychological health. One would, therefore, argue that there is a relationship between mindfulness and psychological well-being being as is supported by the literature.

Hypothesis three: There is a significant relationship between psychological well-being and job performance among nursing staff in three public hospitals in Polokwane Municipality.

The third hypothesis states that there is a positive and significant relationship between psychological well-being and job performance ($r=.825^{**}$; $p=.000$). The current study is in agreement with Dlamini and Visser (2017)'s on nurses in the Mpumalanga Province of South Africa which revealed that nurses who experience psychological well-being are more likely to avoid making mistakes and accidents which will enhance job performance.

Mphephu (2019) also revealed a positive relationship between psychological well-being and job performance on nurses in the Vhembe district. All the variables showed a positive significant relationship with each other. This means that when mindfulness and psychological well-being are both experienced can enhance the job performance among nursing staff in three public hospitals in Polokwane Municipality.

5.2.5 Discussion of the Regression analysis results

Regression analysis was performed to test the mediating role of psychological well-being on the relationship between mindfulness and job performance among nursing staff in three public hospitals in the Polokwane Municipality (Hypothesis four).

Results revealed that mindfulness does significantly influence job performance. In contrast, a study conducted by Baas, Nevicka and Ten Velden (2014) found that mindfulness is highly significant but negatively related to the task performance of nurses in the Netherlands. Another study conducted by Hafenbrack and Vohs (2018) also showed a negative relationship between mindfulness and task performance on nurses in Portugal. Literature has shown that there is the inconstancy of results on the relationship between mindfulness and job performance. Furthermore, these studies were not conducted on the nurses in Limpopo. With the findings, above, it is evident that mindfulness of the nursing staff in three public hospitals in Polokwane Municipality enhances their job performance.

The results also revealed that mindfulness also significantly influence psychological well-being. Furthermore, Similarly, a study conducted by White (2014) in Canada found that nurses who learn mindfulness can lead to a greater experiential understanding of the connection of mind, body, and emotions can lead to increased health and wellness. The findings of the two studies are the same. However, the current shows how mindfulness predicts psychological well-being specifically among the nursing staff in three public hospitals in Polokwane Municipality. The findings show that when the nursing staff in three public hospitals in Polokwane Municipality are mindful, this tends to enhance their psychological well-being.

The results also showed that psychological well-being influences mindfulness. This implies that the nursing staff mindfulness depends on the their psychological well-being. However, the analysis also revealed that controlling for the mediator (psychological well-being) mindfulness scored an insignificant predictor of job performance. The results are contradicting a study by Ugwu and Asogwa (2017) among telecommunication workers from the four major telecommunication companies in Nigeria. The results showed that mindfulness does predict job performance.

Finally, the results also showed psychological well-being influences the relationship between mindfulness and job performance. The indirect coefficient was statistically significant, ($\beta = .359$, $SE = .060$, $95\% CI = (.228, .465)$).

Therefore, the results suggest that the relationship between mindfulness and job performance among nursing staff in three public hospitals in the Polokwane Municipality does exist.

These results are in line with Gandi, Beben and Gyarazama (2011)'s findings among Nigerian Nurses in Bauchi State which revealed that psychological well-being does affect the relationship between mindfulness and job performance.

Therefore, the results suggest that the relationship between mindfulness and job performance among nursing staff in three public hospitals in the Polokwane Municipality does exist. Furthermore, the results also show that this relationship is influenced by psychological well-being. With the support of the above findings, one can argue that psychological wellbeing does play a positive role in the relationship between mindfulness and job performance as it will, even more, enhance job performance among nursing staff in three public hospitals in the Polokwane Municipality. With this said hypothesis four was supported.

The South African Nursing Council (2017) reported that out of a total of 147 nurses who underwent wellness screening and assessment, 104 presented various conditions, such as stress and high depression. Furthermore, in the annual inspection report (2016/17), the public hospitals in Limpopo Province reflect performance in percentage score looking at different categories.

All these categories are essential to improve healthcare services, yet they did not even reach the set standard of 80 percent. This implies that the management of the health sector needs to do better in improving mindfulness training and psychological well-being practices to improve the job performance of the nursing staff.

5.3 CONCLUSIONS

The demographic characteristics of the respondents were interpreted in this chapter. The findings showed that most females in their thirties participated in the study. The findings further showed that most registered nurses with diplomas are the ones who took part in this current study. The nurses who participated in this study were mostly permanent with 6 to 10 years of experience. The finding also showed that all questionnaires used in this current study proved to be reliable. The descriptive statistics results showed that most nursing staff in three public hospitals in the Polokwane Municipality disagreed that they are mindful and psychological well. While, on the other hand agreeing that they are performing. The current study found a direct relationship between mindfulness and job performance. Therefore, the healthcare sector management must expose their nursing staff to mindfulness training to advance their job performance. The results further revealed that psychological well-being does influence the relationship between mindfulness and job performance among nursing staff in three public hospitals in the Polokwane Municipality. With this said, the management should

also take into consideration the importance of the mental well-being of the nursing staff as this will also enhance their job performance.

5.4 LIMITATIONS OF THE STUDY

This section highlights the limitations of this study. It should be made aware that the current study was conducted in only one Municipality in the Limpopo Province of the Republic of South Africa. Therefore, the results of the study can only be generalised by looking at the Polokwane Municipality.

Furthermore, only three hospitals were also sampled in this study. The findings of this study are, therefore, only representative of a small percentage of selected hospitals in Polokwane Municipality which are Polokwane Provincial hospital, Seshego hospital, and Mankweng hospital campus.

Some respondents were not interested in partaking the research. For example, some of the employees complained that they were occupied due to the pandemic. Other wards did not have enough nursing staff to oversee all the responsibilities. This resulted in a slow response of participants. Hence the collection of data was done in the early morning as it is not busy at that time.

Furthermore, a quantitative research methodology was used because of the nature of the study aims; nonetheless, quantitative research designs have their own set of limitations. In this study, for example, respondents were not given the opportunity to clarify their responses because structured questionnaires with closed-ended questions were used. As a result, the breadth of the responses is restricted.

5.5 PRACTICAL IMPLICATIONS

The findings of the current study also make contributions significantly to the healthcare sector.

Hospitals, through their human resources management department, should develop policies that bind them to adhere to the implementation of mindfulness training, psychological well-being practices, and other human resource management practices that can benefit the healthcare sector. Budhwar and Debrah (2013) found that 65.9 percent of the companies that started implementing human resource management practices performed better compared to the previous years.

Most of the respondents who participated in this study are women. Thus, it is evident that most of the nursing staff are females. Therefore, free and accessible support services should be made available for the nursing staff when there is a need for psychologist services and social worker services. This will assist the nursing staff to enhance their mental well-being as they have so many responsibilities including household responsibilities.

The healthcare care sector should put into place better working resources and create a conducive working environment for the nursing staff. South African nurses intend to leave the country for better working conditions and better salaries (Uhunamure, 2018). If the nursing staff are exposed to better working conditions, this will enhance their mental well-being and reduce turnover.

5.6 RECOMMENDATIONS FOR FUTURE STUDY

The findings in this study showed a positive relationship between mindfulness and job performance. In addition, psychological well-being proved to mediate the relationship between mindfulness and job performance. Therefore, future research should investigate other variables that can enhance the job performance of the nursing staff.

Furthermore, a mixed-methods research design will be highly useful for future research in this field of study, as it will aid in collecting, thoroughly, the experiences of respondents in providing more details about their mindfulness and psychological well-being. The use of questionnaires and in-depth interviews with respondents enables one to acquire more detailed information.

To make the conclusions of the study more appropriate to the entire population of Limpopo Province's hospitals, future researchers sample different hospitals in different Municipalities around the Limpopo Province. This will result in a much broader sample that is more representative of the entire study population.

5.7 CHAPTER SUMMARY

The main aim of the study was to explore the relationship between mindfulness and job performance. Furthermore, the study also investigated whether psychological well-being mediates the relationship between mindfulness and job performance among nursing staff in three public hospitals in the Polokwane Municipality in South Africa. The chapter also discussed the demographic information of respondent's results. These demographic characteristics include gender, age, highest qualifications, length of services, and job status. Discussion of descriptive analysis, correlation coefficients, regression analysis were also made. limitations, recommendations for future research were given. Lastly, the practical implications of the study, and conclusions of the study were discussed.

REFERENCES

- Abdullah, M. (2013). Impact of Job Performance Level on Nurses in Public Sector Hospital. *Journal of Applied Science* 10(9), 222-234.
- Abdullai, H. M., & Micheni, E. M. (2018). Effect of internet banking on operational performance of commercial banks in Nakuru County, Kenya. *International Journal of Economics, Finance and Management Sciences*, 6(2), 60-65.
- Ahmad, M. (2009). Workplace violence by patients and their families against nurses: literature review. *International Journal of Nursing and Health Science*, 2(4), 46-55.
- Ahmad, M. M. (2019). Correlates and predictors of stigmatization of patients with mental illness among nursing students. *Journal of Psychosocial Nursing and Mental Health Services*, 57(1), 43-51.
- Ahmed, N., & Malik, B. (2019). Impact of Psychological Empowerment on Job Performance of Teachers: Mediating Role of Psychological Well-being. *Review of Economics and Development Studies*, 5(3), 451-460.
- Amiresmaili, M., & Moosazadeh, M. (2013). Determining job satisfaction of nurses working in the hospital of Iran. *Iranian Journal of Nursing & Midwifery Research*, 18(5), 343-348.
- Argonov, V. Y. (2014). Experimental Methods for Unraveling the Mind-body Problem: The Phenomenal Judgment Approach. *The Journal of Mind and Behavior*, 10(5), 51-70.
- Auzoult, L., & Personnaz, B. (2016). The role of organizational culture and self-consciousness in self-objectification in the workplace. *TPM: Testing, Psychometrics, Methodology in Applied Psychology*, 23(3), 88-100.
- Baas, M., Nevicka, B., & Ten Velden, F. S. (2014). Specific mindfulness skills differentially predict creative performance. *Personality and Social Psychology Bulletin*, 40(9), 1092-1106.
- Baernholdt, M., & Mark, B. A. (2009). The nurse work environment, job satisfaction and turnover rates in rural and urban nursing units. *Journal of Nursing Management*, 17(8), 994-1001.
- Babbie, E.. (2010). *The Practice of social research*. Los Angeles: Sage Publications.

- Bergh, Z., Botha, E., Kiley, J., & Werner, A. (2017). *Introduction of Work Psychology* (2nd ed.). Cape Town: Oxford University Press.
- Bin, A. S. (2015). The relationship between job satisfaction, job performance and employee engagement: An explorative study. *Issues in Business Management and Economics*, 4(1), 1-8.
- Bolderston, A. (2018). The education and practice environment for medical radiation science professionals caring for lesbian, gay, bisexual, and transgender patients: an analysis of a #MedRadJClub tweet chat. *Journal of Medical Imaging and Radiation Sciences*, 49(4), 428-435.
- Bonebright, D. A. (2010). 40 years of storming: a historical review of Tuckman's model of small group development. *Human Resource Development International*, 13(1), 111-120.
- Brace, I. (2018). *Questionnaire design: How to plan, structure and write survey material for effective market research*. Dublin: Kogan Publishers.
- Brown, K. W., & Ryan, R. M. (2012). The benefits of being present: Mindfulness and its role in psychological well-being. *Journal of Personality and Social Psychology*, 84(4), 822-856.
- Brown, K. W., & Ryan, R. M. (2003). Perils and promise in defining and measuring mindfulness: Observations from experience. *Clinical Psychology: Science and Practice*, 11(3), 242-248.
- Brown, K. W., Ryan, R. M., & Creswell, J. D. (2007). Mindfulness: Theoretical foundations and evidence for its salutary effects. *Psychological Inquiry*, 18(4), 2112-37.
- Brown, K. W., Ryan, R. M., & Weinstein, N. (2009). A multi-method examination of the effects of mindfulness on stress attribution, coping, and emotional well-being. *Journal of research in personality*, 43(3), 374-385.
- Bryman, A. (2017). Quantitative and qualitative research: further reflections on their integration. In *Mixing methods: Qualitative and quantitative research* (pp. 57-78). London: Routledge.
- Bryman, A., & Bell, E. (2015). *Business Research Methods*. New York: Palgrave Macmillan.
- Budhwar, P. S., & Debrah, Y. A. (Eds). (2013). *Human resource management in developing countries*. London: Routledge.

- Clausen, T., Meng, A., & Borg, V. (2019). Does social capital in the workplace predict job performance, work engagement, and psychological well-being? A prospective analysis. *Journal of occupational and environmental medicine*, 61(10), 800-805.
- Collis, J., & Hussey, R. (2013). *Business research: A practical guide for undergraduate and postgraduate students*. USA: Oxford University Press.
- Collins, K. M. (2010). Foreword: Using Bronfenbrenner's ecological systems theory to frame quantitative, qualitative, and mixed research. *International journal of multiple research approaches*, 7(1), 2-8.
- Cooper, J. A. (2014). *Fundamentals of silicon carbide technology: growth, characterization, devices and applications*. New Jersey: John Wiley & Sons.
- Creswell, J. D. (2017). Mindfulness interventions. *Annual review of psychology*, 68(4), 491-516.
- Creswell, J. W. (2018). Journal article reporting standards for qualitative primary, qualitative meta-analytic, and mixed methods research in psychology: The APA Publications and Communications Board task force report. *American Psychologist*, 73(1), 26.
- Curtis, E. A., Comiskey, C., & Dempsey, O. (2016). Importance and use of correlational research. *Nurse researcher*, 23(6), 67-89.
- Couper, M. P. (2017). New developments in survey data collection. *Annual Review of Sociology*, 43(1), 121-145.
- Dane, E., & Brummel, B. J. (2014). Examining workplace mindfulness and its relations to job performance and turnover intention. *Human Relations*, 67(1), 105-28.
- Dane, E. (2011). Paying attention to mindfulness and its effects on task performance in the workplace. *Journal of Management*, 37(4), 997-1018.
- Dane, E., & Brummel, B. J. (2013). Examining workplace mindfulness and its relations to job performance and turnover intention. *Human Relations*, 67(1), 105-128.
- Department of Health. (2013). *The National Strategic Plan for Nurse Education* (Publication no. 13-6543). Retrieved from <http://www.health.gov.za/>.
- Department of health. (2015). *Annual Inspection Report* (Publication no. 15-7548). Retrieved from <http://www.health.gov.za/>.

- Department of health. (2016). *Annual Inspection Report* (Publication no. 16- 8446). Retrieved from <http://www.health.gov.za/>
- De Vos, M. S. (2014). Fertility preservation in women with cancer. *The Lancet*, 384(9950), 1302-1310.
- Dlamini, B. C., & Visser, M. J. (2017). *Challenges in nursing: The psychological needs of rural area nurses in Mpumalanga*, (Doctoral dissertation, Gauteng: University of Pretoria).
- Dodge, R., Daly, A. P., Huyton, J., & Sanders, L. D. (2012). The challenge of defining wellbeing. *International Journal of Wellbeing*, 2(3), 37-55.
- Dyrbye, L. N., Shanafelt, T. D., Johnson, P. O., Johnson, L. A., Satele, D., & West, C. P. (2019). A cross-sectional study exploring the relationship between burnout, absenteeism, and job performance among American nurses. *BMC Nursing*, 18(1), 1-8.
- Edwards, D. J., & Steyn, B. J. (2008). Sport psychological skills training and psychological well-being. *South African Journal for Research in Sport, Physical Education and Recreation*, 30(1), 15-28.
- Edwards, M., & Titman, P. (2011). *Promoting psychological well-being in children with acute and chronic illness*. London: Jessica Kingsley Publishers.
- Elfil, M., & Negida, A. (2017). Sampling methods in clinical research; an educational review. *Emergency*, 5(1), 78-89.
- Elliott, M. R., & Valliant, R. (2017). Inference for nonprobability samples. *Statistical Science*, 32(2), 249-264.
- Etikan, I., & Bala, K. (2017). Sampling and sampling methods. *Biometrics & Biostatistics International Journal*, 5(6), 11-49.
- Fazli, Z., & Ghahari, S. (2017). The relationship between mindfulness and psychological well-being and coping strategies with stress among female basketball athletes in Tehran. *Learning and Memory*, 4(5), 88-110.
- Ferguson, T. S. (2017). *A course in large sample theory*. Oxfordshire: Routledge.
- Flick, U. (2014). Mapping the field. *The SAGE Handbook of Qualitative Data Analysis*, 3(4), 170-198.

- Fulford, A., & Hodgson, N. (Eds.). (2016). *Philosophy and Theory in Educational Research: Writing in the margin*. New York: Routledge.
- Gandi, J. C., Beben, W. W., & Gyarazama, Y. (2011). Nurse's roles and the mediating effects of stress on job performance in low and developing economies. *Psychology*, 2(04), 323-354.
- Gao, J., & McLellan, R. (2018). Using Ryff's scales of psychological well-being in adolescents in mainland China. *BMC psychology*, 6(1), 17-69.
- Gehart, D. R. (2012). *Mindfulness and acceptance in couple and family therapy*. Newbury Park, California: Sage publications.
- Ghasemy, M., Erfanian, M., & Gaskin, J. E. (2020). Affective events theory as a theoretical lens for improving the working environment of academics in developing economies. *Journal of Applied Research in Higher Education*, 7(4),37-77.
- Ghotbabadi, A. R., Feiz, S., & Baharun, R. (2015). Service quality measurements: a review. *International Journal of Academic Research in Business and Social Sciences*, 5(2), 267.
- Gibson, C. B. (2017). Elaboration, generalization, triangulation, and interpretation: On enhancing the value of mixed method research. *Organizational Research Methods*, 20(2), 193-223.
- Gill, M. J. (2014). The possibilities of phenomenology for organizational research. *Organizational Research Methods*, 17(2), 118-137.
- Glegg, S. M. (2019). Facilitating interviews in qualitative research with visual tools: A typology. *Qualitative Health Research*, 29(2), 301-310.
- Glomb, T. M., Duffy, M. K., Bono, J. E., & Yang, T. (2011). Mindfulness at work. In *Research in Personnel and Human Resources Management*, 26,(5), 44-78.
- Goertzen, N., & Melissa, J. (2017). Introduction to quantitative research and data. *Library Technology Reports*. 53(4), 2-18.
- Good, D. J., Lyddy, C. J., Glomb, T. M., Bono, J. E., Brown, K. W., Duffy, M. K., & Lazar, S. W. (2016). Contemplating mindfulness at work: An integrative review. *Journal of Management*, 42(1), 114-142.

- Goodman, M. J., & Schorling, J. B. (2012). A mindfulness course decreases burnout and improves well-being among healthcare providers. *The International Journal of Psychiatry in Medicine*, 43(2), 119-128.
- Goodman, S. A., & Svyantek, D. J. (1999), Person-Organization Fit and Contextual Performance: Do Shared Values Matter. *Journal of Vocational Behaviour*, 3(5), 254-275.
- Gray, D. E. (2016). *Doing Research in the Business World*. New Delhi: Sage Publications.
- Griffiths, P., Maruotti, A., Saucedo, A. R., Redfern, O. C., Ball, J. E., Briggs, J., & Smith, G. B. (2019). Nurse staffing, nursing assistants and hospital mortality: a retrospective longitudinal cohort study. *BMJ Quality & Safety*, 28(8), 44-50.
- Guest, D. E. (2017). Human resource management and employee well-being: Towards a new analytic framework. *Human Resource Management Journal*, 27(1), 22-38.
- Hafenbrack, A. C., & Vohs, K. D. (2018). Mindfulness meditation impairs task motivation but not performance. *Organizational Behaviour and Human Decision Processes*, 47(1), 1-157.
- Hai, S., Baroutjian, A., & Elkbuli, A. (2020). Challenges and ethical considerations for trainees and attending physicians during the COVID-19 pandemic. *Journal of the American College of Surgeons*, 231(2), 301-324.
- Hair Jr, J. F., Money, A. H., Babin, B., & Samouel, P. (2003). *Essentials of business research methods*. 4th Edition. New Jersey: Johns Wiley & Sons. Inc.
- Hair, J. F., Money, A. H., Samouel, P., & Page, M. (2007). Research methods for business. *Education and Training*, 4(1), 144-166.
- Hair, J. F., Black, W. C., Babin, B. J., & Anderson, R. E. (2010). *Multivariate data analysis: International version*. 3rd Edition. New Jersey: Pearson.
- Hammersley, M. (2013). *The myth of research-based policy and practice*. London: Sage Publications.
- Harrington, R., Loffredo, D. A., & Perz, C. A. (2014). Dispositional mindfulness as a positive predictor of psychological well-being and the role of the private self-consciousness insight factor. *Personality and Individual Differences*, 71(4,) 15-18.

- Harter, J. K., Schmidt, F. L., & Keyes, C. L. (2003). Well-being in the workplace and its relationship to business outcomes: A review of the Gallup studies. *Flourishing: Positive Psychology and the Life well-lived*, 2(3), 205-224.
- Hayes, A. F. (2013). *Mediation, moderation, and conditional process analysis. Introduction to mediation, moderation, and conditional process analysis: A regression-based approach* New York: Guilford Publications.
- Hee, O. C., & Kamaludin, N. H. B. (2016). Motivation and Job Performance among Nurses in the Private Hospitals in Malaysia. *International Journal of Caring Sciences*, 9(1), 76-98.
- Heidegger, M. (2016). *Mindfulness*. New York: Bloomsbury Publishing.
- Hellqvist, N. (2011). Global performance management: a research agenda. *Management Research Review*, 10(5), 110-159.
- Hülshager, U. R., Alberts, H. J., Feinholdt, A., & Lang, J. W. (2013). Benefits of mindfulness at work: the role of mindfulness in emotion regulation, emotional exhaustion, and job satisfaction. *Journal of Applied Psychology*, 98(2), 310-322.
- Hunter, J. E. (2017). A causal analysis of cognitive ability, job knowledge, job performance, and supervisor ratings. In *Performance Measurement and Theory*, 10(4), 257-266.
- Hyman, Michael & Sierra, Jeremy. (2016). Selecting a sample size for your customer survey. *Management Research Review*, 41(6), 89-98.
- Inspection report. (2017). Annual report (2017). <https://ohsc.org.za/OHSC-2016-17-ANNUAL-INSPECTION-REPORT>.
- Isaacs, S. A., Roman, N. V., & Savahl, S. (2019). An exploration of the family resilience needs of a rural community in South Africa: A sequential explanatory mixed methodological study design. *Current Psychology*, 38(6), 1634-1648.
- Jackson, S. E., Schuler, R. S., & Jiang, K. (2014). An aspirational framework for strategic human resource management. *The Academy of Management Annals*, 8(1), 1-56.
- Janssen, E., Van Strydonck, I., Decuypere, A., Decramer, A., & Audenaert, M. (2020). How to foster nurses' well-being and performance in the face of work pressure? The role of mindfulness as personal resource. *Journal of Advanced Nursing*, 48(2), 55-98.

- Jensen, K. B. (Ed.). (2013). *A handbook of media and communication research: Qualitative and quantitative methodologies*. London: Routledge.
- Karunamuni, N., & Weerasekera, R. (2019). Theoretical Foundations to Guide Mindfulness Meditation: A Path to Wisdom. *Current Psychology*, 38(3), 627-646.
- Khamisa, N., Peltzer, K., Ilic, D., & Oldenburg, B. (2017). Effect of personal and work stress on burnout, job satisfaction and general health of hospital nurses in South Africa. *Health SA Gesondheid*, 2(5), 252-258.
- Kexian, L., Tingting, Y., & Qu, S. (2020). Relationships between sleep quality, mindfulness and work-family conflict in Chinese nurses: A cross-sectional study. *Applied Nursing Research*, 15(1), 12-50.
- Kim, J. K., & Wang, Z. (2019). Sampling techniques for big data analysis. *International Statistical Review*, 87(4), 177-191.
- King, E., & Haar, J. M. (2017). Mindfulness and job performance: a study of Australian leaders. *Asia Pacific Journal of Human Resources*, 55(3), 298-319.
- Klopper, H. C., Coetzee, S. K., Pretorius, R., & Bester, P. (2012). Practice environment, job satisfaction and burnout of critical care nurses in South Africa. *Journal of Nursing Management*, 20(5), 685-695.
- Kotzé, M., & Nel, P. (2016). The psychometric properties of the Mindful Attention Awareness Scale (MAAS) and Freiburg Mindfulness Inventory (FMI) as measures of mindfulness and their relationship with burnout and work engagement. *SA Journal of Industrial Psychology*, 42(1), 1-11.
- Krause, M. (2018). Psychological interventions to reduce positive symptoms in schizophrenia: Systematic review and network meta-analysis. *World Psychiatry*, 17(3), 316-329.
- Kundi, Y. M., Aboramadan, M., Elhamalawi, E. M., & Shahid, S. (2020). Employee psychological well-being and job performance: exploring mediating and moderating mechanisms. *International Journal of Organizational Analysis*, 32(8) 55-84.
- Lance, P. M., & Hattori, A. (2016). Sampling and evaluation. *Measure Evaluation*, 44(6), 37-55.

- Lee, T. S. H., Tzeng, W. C., & Chiang, H. H. (2019). Impact of Coping Strategies on Nurses' Well-Being and Practice. *Journal of Nursing Scholarship*, 51(2), 195-204.
- Lee, T. S. H., Sun, H. F., & Chiang, H. H. (2019). Development and validation of the short-form Ryff's psychological well-being scale for clinical nurses in Taiwan. *Journal of Medical Sciences*, 39(4), 157-177.
- Leedy, P. D., & Ormrod, J. E. (2014). Qualitative research. *Practical Research*, 9(3), 34-67.
- Leibovici, L. (2016). Addressing resistance to antibiotics in systematic reviews of antibiotic interventions. *Journal of Antimicrobial Chemotherapy*, 71(9), 2367-2369.
- Li, M., Liu, J., Zheng, J., Liu, K., Wang, J., Miner Ross, A., ... & You, L. (2020). The relationship of workplace violence and nurse outcomes: Gender difference study on a propensity score matched sample. *Journal of Advanced Nursing*, 76(2), 600-610.
- Liu, P., Benson, A. R., & Charikar, M. (2019, January). Sampling methods for counting temporal motifs. In *Proceedings of the twelfth ACM international conference on web search and data mining*, 5(2), 294-302.
- Lohapan, N., & Ussahawanitchakit, P. (2016). Psychological well-being and job success: An empirical research of tax auditors in Thailand. *The Business & Management Review*, 7(5), 9-30.
- Lomas, T., Medina, J. C., Ivtzan, I., Rupperecht, S., & Eiroa-Orosa, F. J. (2017). The impact of mindfulness on the wellbeing and performance of educators: A systematic review of the empirical literature. *Teaching and Teacher Education*, 61(9), 132-141.
- Louise, S., Fitzpatrick, M., Strauss, C., Rossell, S. L., & Thomas, N. (2018). Mindfulness-and acceptance-based interventions for psychosis: Our current understanding and a meta-analysis. *Schizophrenia Research*, 192, 57-63.
- Luo, M. M., & Chea, S. (2018). Cognitive appraisal of incident handling, affects, and post-adoption behaviors: A test of affective events theory. *International Journal of Information Management*, 40(5), 120-131.
- MacDonald, H. Z., & Baxter, E. E. (2017). Mediators of the relationship between dispositional mindfulness and psychological well-being in female college students. *Mindfulness*, 8(2), 398-407.

- Makhado, L. (2011). *Knowledge and psychosocial wellbeing of nurses caring for people living with HIV/AIDS at a regional hospital in Vhembe district Limpopo Province, South Africa* (Doctoral dissertation): Klerksdorp, North West University,
- Makunyane, C. M. (2012). *Factors influencing performance of nurses in the Makhuduthamaga Sub-District, Sekhukhune District, Limpopo Province, South Africa* (Doctoral dissertation): Polokwane, University of Limpopo.
- Malhotra, N. K. (2010). An applied orientation. *Marketing Research*, 2(4), 109-122.
- Marchington, M. k., & Wilkinson, H. N. (2015). Human resource management (HRM): Too busy looking up to see where it is going longer term?. *Human Resource Management Review*, 25(2), 176-187.
- Mavodza, C. (2017). *Gender analysis: Sub-Saharan African nurses' migration experiences-a systematic review* (Doctoral dissertation): Rondebosch, University of Cape Town.
- Mbombi, M. O., Mothiba, T. M., Malema, R. N., & Malatji, M. (2018). The effects of absenteeism on nurses remaining on duty at a tertiary hospital of Limpopo province. *Curationis*, 41(1), 1-5.
- McNulty, J. K., & Fincham, F. D. (2012). Beyond positive psychology? Toward a contextual view of psychological processes and well-being. *American Psychologist*, 67(2), 101-111.
- Mealer, M., Jones, J., Newman, J., McFann, K. K., Rothbaum, B., & Moss, M. (2012). The presence of resilience is associated with a healthier psychological profile in intensive care unit (ICU) nurses: results of a national survey. *International Journal of Nursing Studies*, 49(3), 292-299.
- Mphephu, A. G. (2019). *Effects of nursing workloads on patients safety in the selected public hospitals in Vhembe District of Limpopo Province, South Africa* (Doctoral dissertation): Thohoyandou, University of Venda.
- Mulaudzi, M. P. (2019). *Experiences of professional nurses working in the Maximum Security Ward- A Case study of Hayani Hospital, Vhembe District, South Africa* (Doctoral dissertation): Thohoyandou, University of Venda.
- Narayanan, J., Chaturvedi, S., Reb, J. M., & Srinivas, E. (2014). Examining the role of trait mindfulness on turnover intentions and job performance: *International Journal of Information Management*, 53(4), 595-624.

- National Institute for Occupational Safety and Health, Stress at Work, U.S. Department Of Health and Human Services. (2017). *Public Health Service Centers for Disease Control and Prevention* (Publication No. 99–101).
- Neal, J. (2018). Overview of workplace spirituality research. *The Palgrave Handbook of Workplace Spirituality and Fulfillment. 1st ed. Switzerland Cham: International Journal of Information Management, 35(6), 3-57*
- Neto, M., Ferreira, A. I., Martinez, L. F., & Ferreira, P. C. (2017). Workplace bullying and presenteeism: The path through emotional exhaustion and psychological wellbeing. *Annals of Work Exposures and Health, 61(5), 528-538.*
- Nevicka, B., Ten Velden, F. S. & Hafenbrack, H. T. (2014). Specific mindfulness skills differentially predict creative performance. *Personality and Social Psychology Bulletin, 40(9), 1092-1106.*
- Ngo, L. V., Nguyen, N. P., Lee, J., & Andonopoulos, V. (2020). Mindfulness and job performance: Does creativity matter?. *Australasian Marketing Journal, 30(3), 66-80.*
- Nikbin, D., Iranmanesh, M., & Foroughi, B. (2020). Personality traits, psychological well-being, Facebook addiction, health and performance: testing their relationships. *Behaviour & Information Technology, 44(8), 1-17.*
- Niklas, C. D., & Dormann, C. (2005). The impact of state affect on job satisfaction. *European Journal of Work and Organizational Psychology, 14(4), 367-388.*
- Nurius, P. S., Green, S., Logan-Greene, P., & Borja, S. (2015). Life course pathways of adverse childhood experiences toward adult psychological well-being: A stress process analysis. *Child abuse & neglect, 45(5), 143-153.*
- Olsen, E., Bjaalid, G., & Mikkelsen, A. (2017). Work climate and the mediating role of workplace bullying related to job performance, job satisfaction, and work ability: A study among hospital nurses. *Journal of Advanced Nursing, 73(11), 2709-2719.*
- Oosthuizen, M. (2007). Factors that may influence South African nurses' decisions to emigrate. *Health SA Gesondheid, 12(2), 121-222.*
- Park, J. G., Kim, J. S., Yoon, S. W., & Joo, B. K. (2017). The effects of empowering leadership on psychological well-being and job engagement. *Leadership & Organization Development Journal. 33(5), 55-89.*

- Pelham, B. W., Carvalho, M., & Jones, J. T. (2011). Implicit egotism. *Current Directions in Psychological Science*, 14(2), 106-110.
- Penque, S. (2019). Mindfulness to promote nurses' well-being. *Nursing management*, 50(5), 38-67.
- Petersen, I., Fairall, L., Bhana, A., Kathree, T., Selohilwe, O., Brooke-Sumner, C., & Patel, V. (2016). Integrating mental health into chronic care in South Africa: the development of a district mental healthcare plan. *The British Journal of Psychiatry*, 20(6), 29-39.
- Pillay, Z. (2017). Measures to improve retention of nurses in a KwaZulu-Natal hospital: Nurse managers' views (Masters Dissertation), Pretoria: University of South Africa.
- Price, A. 2000. *Principles of the Human Resource Management*. An active learning approach. California: Sage publications.
- Ramarope, J. (2015). *Factors contributing to staff turnover among professional nurses in selected hospitals of Vhembe District* (Doctoral dissertation): Thohoyandou, University of Venda.
- Ramakuela, N. J., Mundalamo, R. N., & Ndou, N. D. (2018). Factors affecting quality patient care in paediatric units of Vhembe district, Limpopo province, South Africa. *African Journal for Physical Activity and Health Sciences (AJPHEs)*, 24(1), 16-27.
- Ramlo, S. (2016). Mixed method lessons learned from 80 years of Q methodology. *Journal of Mixed Methods Research*, 10(1), 28-45.
- Rasalanavho, R. N. (2016). *Challenges confronting professional nurses implementing the nurse-initiated and managed antiretroviral treatment programme in Vhembe District, South Africa* (Doctoral dissertation): Thohoyandou, University of Venda.
- Reb, J., Narayanan, J., & Chaturvedi, S. (2014). Leading mindfully: Two studies on the influence of supervisor trait mindfulness on employee well-being and performance. *Mindfulness*, 5(1), 36-45.
- Roussel, S. T. (2009). National competencies for registered nurses in primary care: A Delphi study. *Western Journal of Nursing Research*, 42(12), 1078-1087.
- Ryff, C. (1998). Scale of Psychological Well-being: *Social Science Research*, 35(4), 1103-1119.

- Şahin, S., Arıcı Özcan, N., & Arslan Babal, R. (2020). The mediating role of thriving: Mindfulness and contextual performance among Turkish nurses. *Journal of Nursing Management*, 28(1), 175-184.
- Samson, G. N., Waiganjo, M., & Koima, J. (2015). Effect of workplace environment on the performance of commercial banks employees in Nakuru town. *International Journal of Managerial Studies and Research (IJMSR)*, 3(12), 76-89.
- Saunders, M., & Lewis, P. (2016). In thornhill adrian. *Research methods for business students*. Harlow: Pearson Education.
- Saunders, M. N. K., Lewis, P., & Thornhill, A. (2012). *Research methods for business students*. Harlow. England: Pearson Education.
- Saunders, M., Lewis, P., & Thornhill, A. (2016). *Research methods for business students (Seventh)*. *Nueva York*: Pearson Education.
- Shao, R., & Skarlicki, D. P. (2009). The role of mindfulness in predicting individual performance. *Canadian Journal of Behavioural Science/Revue Canadienne des Sciences du Comportement*, 41(4), 195-199.
- Shapiro, S. L., Carlson, L. E., Astin, J. A., & Freedman, B. (2006). Mechanisms of mindfulness. *Journal of Clinical Psychology*, 62(3), 373-386.
- Sharma, G. (2017). Pros and cons of different sampling techniques. *International Journal of Applied Research*, 3(7), 749-752.
- Shipalana, M. L. (2013). *Turnover of health care professionals at Polokwane and Mankweng Tertiary Hospital in Limpopo Province, South Africa* (Doctoral dissertation): Polokwane: University of Limpopo.
- Shusterman, R. (2016). *Practicing philosophy: Pragmatism and the philosophical life*. London: Routledge.
- Slagter, H. A., Davidson, R. J., & Lutz, A. (2011). Mental training as a tool in the neuroscientific study of brain and cognitive plasticity. *Frontiers in Human Neuroscience*, 5(17), 55-66.
- South African Nursing Council. (2017). *Annual statistics* (Publication no- 17- 8657). Retrieved from <https://www.sanc.co.za/>.

- Steinberg, D. (2010). Altruism in medicine: its definition, nature, and dilemmas. *Cambridge Quarterly of Healthcare Ethics, 19*(2), 249-257.
- Sun, T., Zhao, X. W., Yang, L. B., & Fan, L. H. (2012). The impact of psychological capital on job embeddedness and job performance among nurses: a structural equation approach. *Journal of Advanced Nursing, 68*(1), 69-79.
- Tabachnick, B. G., & Fidell, L. S. (2014). *Using multivariate statistics*. New York: Pearson.
- Taherdoost, H. (2016). Sampling methods in research methodology; how to choose a sampling technique for research. *Sampling Methods, 5*(10), 77-95.
- Taiwo, O. A. (2017). Quality of sleep and well-being of health workers in Najran, Saudi Arabia. *Indian journal of psychiatry, 59*(3), 347-389.
- Tavakol, M., Dennick, R. (2011). Making sense of Cronbach's alpha. *International Journal of Medical Education, 2*(3), 53-55.
- Thabane, L., Ma, J., Chu, R., Cheng, J., Ismaila, A., Rios, L. P., & Goldsmith, C. H. (2015). A tutorial on pilot studies: the what, why and how. *BMC Medical Research Methodology, 10*(1), 1-10.
- Tiwari, V. K., Chaubey, A. K., & Jain, C. (2015). Quality in higher education and research in india: present scenario. *Editorial Board, 4*(5), 91-99.
- Tsang, E. W. (2016). *The philosophy of management research*. United Kingdom: Taylor & Francis.
- Tshikovhele, K. L. (2015). *The influence of exercise on depression and psychological well-being amongst students at the University of Limpopo (Turfloop Campus)* (Doctoral dissertation): Polokwane, University of Limpopo).
- Tshitangano, T. G. (2013). Factors that contribute to public sector nurses' turnover in Limpopo province of South Africa. *African Journal of Primary Health Care & Family Medicine, 5*(1), 6-17.
- Ugwu, F., & Asogwa, F. (2017). Examining the moderating role of mindfulness in the relationship between perceived job insecurity and psychological well-being among telecommunication workers in Nigeria. *GOUni Journal of Management and Social Sciences, 3*(1), 72-88.

- Uhunamure, N. S. (2018). *Exploring factors influencing nursing staff turnover at a selected public hospital in KwaZulu-Natal, South Africa* (Doctoral dissertation): Durban, University of KwaZulu- Natal.
- US Department of Health and Human Services. (2013). Health resources and services administration. *National Center for Health Workforce Analysis. Projecting the supply and demand for primary care practitioners through, 2020.*
- Usman, A. (2017). The effect of psychological wellbeing on employee job performance: Comparison between the employees of projectized and non-projectized organizations. *Journal of Entrepreneurship & Organization Management*, 6(1), 8-12.
- Vaculík, M., Vytásková, J., Procházka, J., & Zalis, L. (2016, May). Mindfulness, job satisfaction and job performance: Mutual relationships and moderation effect. In *21st International Scientific Conference Economics and Management*, 3(1), 48-156).
- Van Gordon, W., Shonin, E., Zangeneh, M., & Griffiths, M. D. (2014). Work-related mental health and job performance: Can mindfulness help?. *International Journal of Mental Health and Addiction*, 12(2), 129-137.
- Vehovar, V., Toepoel, V., & Steinmetz, S. (2016). Non-probability sampling. *The Sage Handbook of Survey Methods*, 4(7), 29-345.
- Villarosa, J. B., & Ganotice, F. A. (2018). Construct validation of Ryff's psychological well-being scale: Evidence from Filipino teachers in the Philippines. *Philippine Journal of Psychology*, 51(1), 1-20.
- Voci, A., Veneziani, C. A., & Fuochi, G. (2019). Relating mindfulness, heartfulness, and psychological well-being: the role of self-compassion and gratitude. *Mindfulness*, 10(2), 339-351.
- Wadhawan, K. (2016). Psychological well-being as a predictor to job performance and job satisfaction. *International Journal of Academic Research and Development*, 1(3), 1-3.
- Wang, Y. Y. (2019, June). The possibility of the third approach to marketing research: Critical realism. In *Kidmore End: Academic Conferences International Limited*, 1(3), 349-357.
- Weinstein, N., Brown, K. W., & Ryan, R. M. (2009). A multi-method examination of the effects of mindfulness on stress attribution, coping, and emotional well-being. *Journal of Research in Personality*, 43(3), 374-385.

- Weiss, H. M., & Cropanzano, R. (1996). Affective events theory. *Research in Organizational Behavior*, 18(1), 1-74.
- Wigelsworth, M., & Quinn, A. (2020). Mindfulness in schools: an exploration of teachers' perceptions of mindfulness-based interventions. *Pastoral Care in Education*, 55(7)1-18.
- White, L. (2014). Mindfulness in nursing: An evolutionary concept analysis. *Journal of Advanced Nursing*, 70(2), 282-294.
- Whitehead, R., Bates, G., Elphinstone, B., Yang, Y., & Murray, G. (2019). Nonattachment mediates the relationship between mindfulness and psychological well-being, subjective well-being, and depression, anxiety and stress. *Journal of Happiness Studies*, 20(7), 2141-2158.
- Williams, J. M. G., Teasdale, J. D., Segal, Z. V., & Soulsby, J. (2000). Mindfulness-based cognitive therapy reduces overgeneral autobiographical memory in formerly depressed patients. *Journal of Abnormal Psychology*, 109(1), 150.
- Wilkinson, L. (2012). The grammar of graphics. In *Handbook of Computational Statistics*, Heidelberg, Springer Publications.
- Wilson, V. (2014). Research Methods: Sampling. *Evidence Based Library and Information Practice*, 9(2), 45-47.
- Witschel, N. K. M. (2019). *The relationship between mindfulness and specific workplace outcomes* (Doctoral dissertation, Cape Town: University of Cape).
- Wright, T. A., & Cropanzano, R. (2004). The role of psychological well-being in job performance: A fresh look at an age-old quest. *Organizational Dynamics*, 33(4), 338-351.
- Yerlikaya, T. (2019). Critical discourse analysis and social media: New approaches in critical discourse analysis studies. *Igdir University Journal of Social Sciences*, 10(18), 44-61.
- Yusoff, Khan., & Azam. (2013). Job Stress, Performance and Emotional Intelligence in Academia. *Basic & Applied Science Research*, 3(6), 1-8.
- Žukauskas, P., Vveinhardt, J., & Andriukaitienė, R. (2018). Philosophy and paradigm of scientific research. *Management Culture and Corporate Social Responsibility*, 5(3), 121-222.

ANNEXURE A: INFORMED CONSENT FORM

SCHOOL OF MANAGEMENT SCIENCES

DEPARTMENT OF HUMAN RESOURCE MANAGEMENT AND LABOUR RELATIONS

In terms of the ethical requirements of the University of Venda, you are invited to complete this form as an indication of your permission to voluntarily participate in this study.

I hereby confirm that I have been fully informed about the purpose, procedures, and activities of the study. The rights and the risks of employees' participation have also been fully explained to me. I was given full opportunity to ask any questions and I understand that participants can withdraw from the study at any stage and time, without giving any reasons.

I therefore hereby freely **GIVE/Do not give** my consent to voluntarily take part in the study as outlined **(Delete the inapplicable)**.

Signature: **Date:**

ANNEXURE B: Research questionnaire

Dear participant

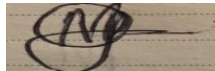
My name is Mosutoa Monyai student number (11574620), pursuing a master's degree in Human Resource Management (HRM) at the University of Venda. As a partial fulfillment for the award of this degree, I am required to conduct a research work titled “The mediating role of psychological well-being on the relationship between mindfulness and job performance among nurses in public hospitals in the Polokwane Municipality”. You are invited to complete the following survey which should take you approximately 15 minutes.

Please note:

Participation is voluntary, and you are free to withdraw from the study at any point. Your responses will be fully anonymous, and the information collected will only be used for academic purposes and will remain private. Also, note that there are no right or wrong answers.

By completing this survey, you confirm that you have understood the above and consent to participation in this study.

Researcher's signature:



Date: 22-02-2022

Section A: Biographical data.

For each of the items below, please indicate the option that applies to you with an X or supplies the required detail.

1. Gender

Male		Female	
------	--	--------	--

2. Age in years

20-25		26-30		31-35		36-40		41+	
-------	--	-------	--	-------	--	-------	--	-----	--

3. Highest academic qualification

Certificate		Diploma		Degree		Postgraduate		Any other. Specify	
-------------	--	---------	--	--------	--	--------------	--	--------------------	--

4. Length of service

0-5 years		6-10 years		11-15 years		16 years and above	
-----------	--	------------	--	-------------	--	--------------------	--

5. Rank/Designation

Nursing Assistant	Licensed professional Nurse/Licenced vocational nurse	Registered Nurse	Advanced Practice Registered Nurse	Enrolled Nurse
-------------------	---	------------------	------------------------------------	----------------

6. Job-status

Permanent		Contract	
-----------	--	----------	--

Section B: Mindfulness questionnaire.

Below are various statements related to mindfulness. Carefully read each statement and indicate the extent to which you agree or disagree with each statement.

(Key: 1= Almost always, 2= Very frequently, 3= somewhat frequently, 4= Very infrequently, 5= Never).

Mindfulness questionnaire	Almost Always	Very Frequently	Somewhat Frequently	Very Infrequently	Never
1. I could be experiencing some emotion and not be conscious of it until some time later.					
2. I break or spill things because of carelessness, not paying attention, or thinking of something else.					
3. I find it difficult to stay focused on what's happening in the present.					
4. I tend to walk quickly to get where I'm going without paying attention to what I experience along the way.					
5. I tend not to notice feelings of physical tension or discomfort until they really grab my attention.					
6. I forget a person's name almost as soon as I've been told it for the first time.					
7. It seems I am "running on automatic," without much awareness of what I'm doing.					

8. I rush through activities without being really attentive to them.					
9. I get so focused on the goal I want to achieve that I lose touch with what I'm doing right now to get there.					
10. I do jobs or tasks automatically, without being aware of what I'm doing.					
11. I find myself listening to someone with one ear, doing something else at the same time.					
12. I drive places on 'automatic pilot' and then wonder why I went there.					
13. I find myself preoccupied with the future or the past.					
14. I find myself doing things without paying attention.					
15. I snack without being aware that I'm eating.					

Section c: Psychological well-being questionnaire.

Below are various statements related to psychological well-being. Carefully read each statement and indicate the extent to which you agree or disagree with each statement.

(Key: 1= Strongly agree, 2= Somewhat agree, 3= Either agree or disagree, 4= Somewhat disagree, 5= Strongly disagree).

Psychological well-being questionnaire	Strongly agree	Agree	Either agree or disagree	Disagree	Strongly disagree.
1. I like most parts of my personality.					
2. When I look at the story of my life, I am pleased with how things have turned out so far.					
3. Some people wander aimlessly through life, but I am not one of them.					
4. The demands of everyday life often get me down.					
5. In many ways I feel disappointed about my achievements in life.					
6. Maintaining close relationships has been difficult and frustrating for me.					
7. I live life one day at a time and don't really think about the future.					
8. In general, I feel I am in charge of the situation in which I live.					
9. I am good at managing the responsibilities of daily life.					
10. I sometimes feel as if I've done all there is to do in life.					
11. For me, life has been a continuous process of learning, changing, and growth.					
12. I think it is important to have new experiences that challenge how I think about myself and the world.					
13. People would describe me as a giving person, willing to share my time with others.					

14. I gave up trying to make big improvements or changes in my life a long time ago.					
15. I tend to be influenced by people with strong opinions.					
16. I have not experienced many warm and trusting relationships with others.					
17. I have confidence in my own opinions, even if they are different from the way most other people think.					
18. I judge myself by what I think is important, not by the values of what others think is important.					

Section D: Job performance questionnaire.

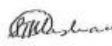
Below are various statements related to job performance. Carefully read each statement and indicate the extent to which you agree or disagree with each statement,


(Key: 1= Strongly agree, 2=Agree, 3=Either agree or disagree, 4= Disagree, 5=Strongly disagree).

Job Performance questionnaire	Strongly agree	Agree	Either agree or disagree	Disagree	Strongly disagree
Altruism					
1. Helps other employees with their work when they have been absent.					
2. Volunteers to do things not formally required by the job.					
3. Takes initiative to orient new employees to the department even though not part of his/her job description.					
4. Helps others when their workload increases (assists others until they get over the hurdles) assists me with my duties.					
6. Makes innovative suggestions to improve the overall quality of the department.					

7. Willingly attends functions not required by the organization but helps in its overall image.					
Conscientiousness					
1. Exhibits punctuality arriving at work on time in the morning and after lunch breaks.					
2. Takes undeserved work breaks.					
3. Exhibits attendance at work beyond the norm, for example, takes fewer days off than most individuals or fewer than allowed					
4. Coasts toward the end of the day.					
5. Gives advance notice if unable to come to work.					
6. Spends a great deal of time in personal telephone conversations.					
7. Does not take unnecessary time off work.					
8. Does not take extra breaks.					
9. Does not spend a great deal of time in idle conversation					
Task Performance					
1. Achieves the objectives of the job					
2. Meets criteria for performance					
3. Demonstrates expertise in all job-related tasks					
4. Fulfills all the requirements of the job					
5. Could manage more responsibility than typically assigned					
6. Appears suitable for a higher-level role					
7. Is competent in all areas of the job, handles tasks with proficiency					
8. Performs well in the overall job by carrying out tasks as expected					
9. Plans and organizes to achieve objectives of the job and meet deadlines					

ANNEXURE C: -ETHICAL CLEARANCE CERTIFICATE - LETTER OF APPROVAL TO COLLECT DATA

<p><small>ETHICS APPROVAL CERTIFICATE</small></p> <p style="text-align: center;">RESEARCH AND INNOVATION OFFICE OF THE DIRECTOR</p> <p style="text-align: center;">NAME OF RESEARCHER/INVESTIGATOR: Ms M Monyai</p> <p style="text-align: center;">STUDENT NO: 11574620</p> <p style="text-align: center;">PROJECT TITLE: <u>The mediating role of psychological well-being on mindfulness and job performance among public hospital- based nurses in Polokwane municipality.</u></p> <p style="text-align: center;">ETHICAL CLEARANCE NO: SMS/20/HRM/07/0505</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th colspan="3">SUPERVISORS/ CO-RESEARCHERS/ CO-INVESTIGATORS</th> </tr> <tr> <th>NAME</th> <th>INSTITUTION & DEPARTMENT</th> <th>ROLE</th> </tr> </thead> <tbody> <tr> <td>Prof N Nkuna</td> <td>University of Venda</td> <td>Supervisor</td> </tr> <tr> <td>Dr H Ngrande</td> <td>University of Venda</td> <td>Co - Supervisor</td> </tr> <tr> <td>Ms M Monyai</td> <td>University of Venda</td> <td>Investigator – Student</td> </tr> </tbody> </table> <p style="text-align: center;">Type: Masters Research Risk: Minimal risk to humans, animals or environment (Category 2) Approval Period: May 2021 – May 2023</p>	SUPERVISORS/ CO-RESEARCHERS/ CO-INVESTIGATORS			NAME	INSTITUTION & DEPARTMENT	ROLE	Prof N Nkuna	University of Venda	Supervisor	Dr H Ngrande	University of Venda	Co - Supervisor	Ms M Monyai	University of Venda	Investigator – Student	<p>The Research Ethics Social Sciences Committee (RESSC) hereby approves your project as indicated above.</p> <p><small>General Conditions</small> While this ethics approval is subject to all declarations, undertakings and agreements incorporated and signed in the application form, please note the following:</p> <ul style="list-style-type: none"> • The project leader (principal investigator) must report to the RESC: <ul style="list-style-type: none"> - Annually (or as otherwise requested) on the progress of the project, and upon completion of the project - Within 48hrs in case of any adverse event (or any matter that interrupts sound ethical principles) during the course of the project. - Annually a number of projects may be randomly selected for an external audit. • The approval applies strictly to the protocol as stipulated in the application form. Would any changes to the protocol be deemed necessary during the course of the project, the project leader must apply for approval of these changes at the REC. Would there be deviation from the project protocol without the necessary approval of such changes, the ethics approval is immediately and automatically forfeited. • The date of approval indicates the first date that the project may be started. Would the project have to continue after the expiry date; a new application must be made to the REC and new approval received before or on the expiry date. • In the interest of ethical responsibility, the RESC retains the right to: <ul style="list-style-type: none"> - Request access to any information or data at any time during the course or after completion of the project, - To ask further questions; Seek additional information; Require further modification or monitor the conduct of your research or the informed consent process; - withdraw or postpone approval if: - Any unethical principles or practices of the project are revealed or suspected; - It becomes apparent that any relevant information was withheld from the REC or that information has been false or misrepresented; - The required annual report and reporting of adverse events was not done timely and accurately; - New institutional rules, national legislation or international conventions deem it necessary
SUPERVISORS/ CO-RESEARCHERS/ CO-INVESTIGATORS																
NAME	INSTITUTION & DEPARTMENT	ROLE														
Prof N Nkuna	University of Venda	Supervisor														
Dr H Ngrande	University of Venda	Co - Supervisor														
Ms M Monyai	University of Venda	Investigator – Student														
<p style="text-align: center;">ISSUED BY: UNIVERSITY OF VENDA, RESEARCH ETHICS COMMITTEE Date Considered: April 2021</p> <p>Name of the RESSC Chairperson of the Committee: Prof Takalani Mashau</p> <p>Signature: </p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;"> UNIVERSITY OF VENDA OFFICE OF THE DIRECTOR RESEARCH AND INNOVATION 2021-05-03 Private Bag X5050 Thohoyandou 0950 </td> </tr> </table>	UNIVERSITY OF VENDA OFFICE OF THE DIRECTOR RESEARCH AND INNOVATION 2021-05-03 Private Bag X5050 Thohoyandou 0950														
UNIVERSITY OF VENDA OFFICE OF THE DIRECTOR RESEARCH AND INNOVATION 2021-05-03 Private Bag X5050 Thohoyandou 0950																



UNIVERSITY OF VENDA
PRIVATE BAG 5050, THOHOYANDOU, 0950, LERONG, FREDRICKS, SOUTH AFRICA
TEL: 018 232 1000, 018 232 1001
"A quality driven, financially sustainable, and learner centric Comprehensive University"



LIMPOPO
PROVINCIAL GOVERNMENT
REPUBLIC OF SOUTH AFRICA

Department of Health

Ref : LP_2021-05-001
Enquires : Ms PF Mahlokwane
Tel : 015-293 6028
Email : Phoebe.Mahlokwane@dhsd.limpopo.gov.za

Mosutoa Monyai


PERMISSION TO CONDUCT RESEARCH IN DEPARTMENTAL FACILITIES

Your Study Topic as indicated below;

The mediating role of psychological well-being on mindfulness and job performance among public hospital-based nurses in Polokwane municipality

1. Permission to conduct research study as per your research proposal is hereby Granted.
2. Kindly note the following:
 - a. Present this letter of permission to the institution supervisor/s a week before the study is conducted.
 - b. In the course of your study, there should be no action that disrupts the routine services, or incur any cost on the Department.
 - c. After completion of study, it is mandatory that the findings should be submitted to the Department to serve as a resource.
 - d. The researcher should be prepared to assist in the interpretation and implementation of the study recommendation where possible.
 - e. The approval is only valid for a 1-year period.
 - f. If the proposal has been amended, a new approval should be sought from the Department of Health
 - g. Kindly note that, the Department can withdraw the approval at any time.

Your cooperation will be highly appreciated


pp **Head of Department**

08/06/2021
Date

Private Bag X9302 Polokwane
Fidel Castro Ruz House, 18 College Street, Polokwane 0700. Tel: 015 293 6000/12. Fax: 015 293 6211.
Website: <http://www.limpopo.gov.za>

The heartland of Southern Africa – Development is about people!

ANNEXURE D: EDITOR'S LETTER

UNIVERSITY OF VENDA, THOHOYANDOU, SOUTH AFRICA



University of Venda
Creating Future Leaders

Desmond Osaretin ORIAKHOGBA, PhD
Senior Lecturer, Queen Elizabeth Scholar
F05, School of Law, University of Venda
Thohoyandou 0950, South Africa

+27639849638

desmond.oriakhogba@univen.ac.za

24 February 2022.

TO WHOM IT MAY CONCERN

This is to certify that edited the Master of Commerce dissertation written by Monyai M (11574620) entitled,

THE MEDIATING ROLE OF PSYCHOLOGICAL WELL-BEING ON
MINDFULNESS AND JOB PERFORMANCE AMONG PUBLIC HOSPITAL-
BASED NURSES IN POLOKWANE LOCAL MUNICIPALITY AREA

The dissertation is submitted to the Department of Human Resource Management and Labour Relations, Faculty of Management, Commerce and Law, University of Venda in fulfilment of the requirements for the Degree of Master of Commerce.

Please do not hesitate to contact me if you have any questions.

Thank you.

Yours sincerely



Dr Desmond Oriakhogba

ANNEXURE E: TURN IT IN REPORT

THE MEDIATING ROLE OF PSYCHOLOGICAL WELL-BEING ON
MINDFULNESS AND JOB PERFORMANCE AMONG PUBLIC
HOSPITAL-BASED NURSES IN POLOKWANE LOCAL
MUNICIPALITY AREA

ORIGINALITY REPORT

20%	15%	7%	12%
SIMILARITY INDEX	INTERNET SOURCES	PUBLICATIONS	STUDENT PAPERS

PRIMARY SOURCES

1	Submitted to Higher Education Commission Pakistan Student Paper	1%
2	Submitted to Mancosa Student Paper	1%
3	Submitted to University of Venda Student Paper	1%
4	Submitted to Midlands State University Student Paper	<1%
5	su-plus.strathmore.edu Internet Source	<1%
6	wagner.radford.edu Internet Source	<1%
7	erepository.uonbi.ac.ke:8080 Internet Source	<1%
8	www.ijsrp.org Internet Source	<1%