Wellbeing management in project-based firms: is strategic leadership the missing piece?

Abstract

The specific characteristics of project organising impose leadership challenges for promoting employee wellbeing in project-based firms (PBFs). Existing studies in project management have predominantly focused on leadership in project teams and its impacts on workers' wellbeing. Less emphasis has been on strategic leadership within PBFs, which is pivotal in shaping the broader organisational context, including the strategies, organisational structures and systems. This study aims to explore how strategic leadership is enacted to promote employee wellbeing in PBFs. Data were collected from 24 semi-structured interviews with a diverse group of participants, including senior managers, heads of functional departments as well as project workers such as project managers and designers. The findings uncover various wellbeing management practices in PBFs, including showing, enabling, telling, bonding and supporting. Nevertheless, these wellbeing management practices are developed and implemented in isolation by different functional departments, namely, senior management, human resource management, health and safety management, project management and line management. There is a noticeable absence of strategic leadership in PBFs to align and address competing initiatives, develop a firm strategy to integrate wellbeing into operations and projects, and create structures and systems to facilitate cooperation and knowledge sharing between functions and projects. Wellbeing is not well embedded in the project management practices. There is a lack efforts to reform organisational practices in ways that would more effectively support the wellbeing of employees and supply chains. This paper contributes to wellbeing management in projects by revealing various wellbeing management practices and examining the enactment of strategic leadership for employee wellbeing in PBFs. It links strategic leadership with employee wellbeing that have not been explicitly connected previously in project management research.

Keywords: employee wellbeing, project worker, strategic leadership, wellbeing management

Introduction

The projectification in both firms and society has led to projects becoming a prevalent form of organising work (Lundin et al., 2015). Accompanying the emergence of projects and project-based firms is the growing concerns over the wellbeing of project workers (Cheung et al., 2019; Xu & Smyth, 2023). The project work environment has

been associated with various wellbeing issues such as fatigue, stress, anxiety and burnout (Pinto et al., 2014; Smyth et al., 2019; Zika-Viktorsson et al., 2006). The transient nature of project work, along with its physical, organisational and social decoupling from parent organisations, poses challenges for workers in establishing a stable self-identity, gaining recognition and developing a long-term career in project-based firms (Asquin et al., 2010; Keegan et al., 2018). In some industries heavily reliant on subcontracting, self-employment and temporary contracts, such as construction, project workers also constantly face job insecurity (Hanna & Markham, 2019). The poor state of wellbeing not only reduces productivity but also threatens the quality of life for individuals and undermines their commitment and performance within organisations.

Leadership is crucial to employee wellbeing. It impacts the level of employee consultation and engagement, the effectiveness of communication, organisational culture and employee behaviour. Transformational leaders make people feel good in their work as they care for others and align collective goals to individuals' own values and purpose (Hesketh & Cooper, 2019). Recent research has introduced the concept of healthy leadership, which focuses specifically on the health-related impacts leaders have on employees (Rudolph et al., 2020). However, leadership can also unreflexively enforce certain healthy lifestyles in organisations, which amplify the moral values of individual leaders rather than benefit employees (Johansson & Edwards, 2021).

In project environments, leadership can be either vertical, such as formally appointed project manager, or horizontal, emerging from day-to-day teamworking (Müller et al., 2018). Vertical leaders who show transformational leadership promote employee participation and extra-role behaviour to address health and safety concerns, while abusive supervision and leader incivility can erode employee psychological health and organisational climate (Mullen et al., 2024). Recognition as a horizontal leader can enhance workers' self-identity and self-worth and the presence of horizontal leadership fosters a collaborative team climate (Liu et al., 2021). The current focus in project management research has been on leaders in local projects. Yet it has been recognised that wellbeing issues are managed too far down the hierarchy of project organisations (Jones et al., 2019). Frontline managers in individual projects typically lack the authority to enact changes that address the root causes of wellbeing concerns. This points to the need for leadership engagement within the parent organisations to transform the practices and systems in more strategic ways.

This study focuses on strategic leadership for wellbeing in project-based firms (PBFs). Different from supervisory theories of leadership that emphasises task and person-oriented behaviours of leaders, strategic leadership concerns about practices and processes that are intended to have strategic implications for the organisation (M. Samimi et al., 2022). PBFs form a unique organisational phenomenon that influences leadership, work practice, and people management in ways different from other types of firms (Huemann et al., 2007; Keegan et al., 2018). They pose specific challenges

for nurturing employee wellbeing that requires a transformational approach as oppose to transactional to embed 'care' into management practices across various departments, within projects and at the project-firm interface (Asquin et al., 2010; R. Turner et al., 2008; Xu & Smyth, 2023). Understanding strategic leadership for wellbeing is key to moving towards this transformational approach in order to integrate wellbeing into organisational systems, practices and processes, hence nurturing a positive culture to support behavioural consistency within the firm and its projects.

This study aims to explore the enactment of strategic leadership for employee wellbeing in PBFs. The research questions are:

1. *How is employee wellbeing managed in PBFs?*
2. *How is strategic leadership enacted in wellbeing management in PBFs?*

The focus is on strategic leadership practices in relation to employee wellbeing, rather than specific leaders such as CEOs. PBFs organise activities at two levels – the firm and projects (Smyth, 2015; Winch, 2014). Project worker refers to workers in PBFs who typically transition to other projects upon task termination (Samimi & Sydow, 2021). They could be site-based, such as project managers and site operatives in a construction firm, or office-based such as designers and engineers in a consulting firm.

This paper contributes to the field of project management by revealing wellbeing management practices in PBFs and examining the enactment of strategic leadership for enhancing the wellbeing of project workers. It explicates practices that go beyond the project level towards the leadership within and *of* PBFs. The influence of firms and the strategic leadership of PBFs as the primary focus has been less common in project management research. By elucidating these practices, this study underscores the necessity of transforming systems where work practices are recreated to be more people-oriented and ethical.

Literature review

The wellbeing of project workers

Wellbeing is an inclusive concept and there is still a lack of commonly accepted definition. In general, wellbeing is perceived as a state of mind and a state of being, an aggregation of various life satisfactions. It has two characteristics: 1) meaning and purpose, and 2) happiness (Hesketh & Cooper, 2019). In the management field, Grant et al. (2007) differentiates psychological, physical and social wellbeing. Psychological wellbeing is related to subjective and affective experiences at work. The physical dimension relates to the level of fitness, physical comfort, safety and occupational health including injuries and diseases. Social wellbeing refers to the quality of relationships at work, including trust, organisational support, reciprocity and social exchange. In addition, Hesketh & Cooper (2019) includes financial wellbeing as a

dimension of wellbeing at workplace, which is closely related to job security, career development and work-life integration (Vakkayil et al., 2017).

In project management, scholars have revealed how the project setting and management practices adversely affected the health and wellbeing of workers. Projects are commonly recognised as a lotus for high levels of motivations to achieve goals, surpass oneself and develop professional competence (Pinto et al., 2014). Project work is fast-paced and highly dynamic. This pattern of work could induce excessive involvement and commitment, causing distress at work (Asquin et al., 2010). High job demands, goal ambiguity, role conflict and the lack of authority in project settings can result in emotional exhaustion and detached response to clients or other stakeholders, which are typical symptoms of burnout (Darling & Whitty, 2019; Pinto et al., 2014). Low involvement in decision making and low job control is closely related to the symptom of 'learned helplessness' (Love & Edwards, 2005). It is found that project members and managers who switch between separate tasks under tight schedules experience high levels of psychological stress, leading to sleeping problems, fatigue and inability to let go of problems (Zika-Viktorsson et al., 2006). Furthermore, to cope with the stressful situations, project workers are found to work longer hours, use substance to stay awake and are more likely to blame themselves or others (Smyth et al., 2019), which exacerbate their wellbeing.

Long work hours, overtime work and irregular shifts are associated with adverse effects on endocrine and immune functions, higher risk for hypertension and cardiovascular disease, sleep disturbances, increased accidents and injuries as well as depression and other psychological conditions (Dembe, 2009). They also bring about spillover and crossover effects to the life outside of work (Jugdev et al., 2018). For instance, it was found that construction project managers are more likely to draw on their family domain to manage the work-life interface, instead of work domain, which adversely impacted marital satisfaction and relationships with kids and friends (M. Turner & Mariani, 2016). The norm of work long hours can select against women working in projects as it cannot meet the caring responsibilities (Dainty & Lingard, 2006). Although the recent promotion of work-from-home can greatly alleviate fatigue by reducing commuting, it further blurred the boundaries between work and family and encouraged working beyond formal working hours (Gao & Sai, 2020). The gendered double-shift effect was observed in female home-based workers, which combines working very long daily hours with domestic and caring work (Wheatley, 2012).

Negative social environment and interpersonal relationships is a source of stress and anxiety in project work environment. Complex projects consist of networks of relationships and interdependent organisations to collaboratively deliver outcomes. Role ambiguity and conflict is regarded as part of the project work and may cause difficulties in maintaining work identities while achieving shared understanding among different professionals (Asquin et al., 2010). The temporary nature of project can reduce opportunities to develop trust and the sense of belonging, which are closely

related to social wellbeing. In male-dominated work environments, the competitive culture and peer pressures are the main drivers of the heavy work investment of male workers (E. Hanna et al., 2020). Moreover, women often encounter diminished networking opportunities within their profession and face significant challenges in achieving social integration in the workplace characterised by entrenched macho norms in interpersonal relations.

Project workers are continuously moved between projects and simultaneously engage with multiple organisations for a limited period of time. Their working lives involve an ongoing temporary and 'in-between' state that requires organisational support to deal with the negative consequences of the project-based career including reduced access to organisational knowledge and resources, devalued professional success (Jonas, 2010) and the precariousness to develop a long-term career based on series of intermittent project experiences (Asquin et al., 2010; Bredin & Söderlund, 2013).

Wellbeing leadership in project contexts

Leadership commitment at senior management level ensures investment in wellbeing initiatives, mental health and wellness services and childcare and eldercare assistance (Lingard et al., 2012). Nevertheless, it has been pointed out that many wellbeing initiatives and services are ineffective due to the lack of consideration about the specific contexts and needs of various workers (Xu & Wu, 2023).

Scholars have stressed the imperativeness of frontline managers in ensuring health, safety and wellbeing in project environment. Project managers and supervisors can directly influence workers' behaviour as they plan daily works, organise tasks, enforce rules, act as role models, monitor worker performance and provide feedback. For instance, a good supervisor-worker relationship encourages workers to comfortably raise health and safety risks, to talk about mental health concerns and to proactively undertake work safely (Oswald et al., 2022). Negative leadership behaviour demotivates project team members, leading to the dysfunction of project teams and a workplace prone to mistakes and inefficiencies (Oyedele, 2013). Leaders can also emerge in project teams as horizontal leaders (Müller et al., 2018). When the workgroup climate is collaborative and project members perceive that their organisation is supporting their career development, such as by recognised as horizontal leaders, they experience a stronger sense of well-being (Liu et al., 2021).

The effectiveness of project leadership relies on the organisational systems, resources and capabilities (Cheung & Zhang, 2020), which are structured, coordinated and configured by strategic leaders within PBFs. This will be the departure point of this paper, which aims to investigate the firm-level strategic leadership processes to enhance project workers' wellbeing. The mechanisms through which strategic leaders affect the practices and performance differ from frontline leaders. As discussed in the next section, strategic leadership concerns the creation and recreation of

organisational systems, routines and values to guide interactions and behaviour at project level. Meanings, roles and identities are in this way socially constructed and shared mental model formed to enable consistency and adaptability (Boal & Schultz, 2007).

Strategic leadership

How the behaviours and decisions of strategic leaders impact organisations has long been a focus of management studies, from classical works on executive behaviour to upper echelon theory and the extensive research on top management teams and boards of directors (Bromiley & Rau, 2016; Hambrick & Mason, 1984). According to this line of research, strategic leaders refer to those who occupy positions at the strategic apex of the organisation, such as chief executive offers (CEOs), top management members, boards of directors and general managers. Strategic leadership involves establishing meaning and purpose for the organisation, making sense of environmental turbulence and ambiguity, and maintaining organisational flexibility and integrity during uncertainties (Boal & Hooijberg, 2000; M. Samimi et al., 2022).

A different view is that strategic leadership can be exercised by managers at all levels of the organisation, as they anticipate and think strategically and work with others to initiate changes to create a viable future for the organisation (Ireland & Hitt, 1999). The essence of strategic leadership is the creation and development of organisational capabilities so that people in the organisation are capable to learn, improvise and attain the shared vision in an environment of ambiguity, uncertainty and complexity (Crossan et al., 2008).

A distinct feature of strategic leadership is that it includes the leadership of organisation, which involves nonhuman elements including strategy, structure, management systems, rules and procedures (Crossan et al., 2008). M. Samimi et al. (2022) points out that strategic leadership includes making strategic decisions, engaging with external stakeholders, performing human resource management activities, managing social and ethical issues and addressing conflicting demands. The effectiveness of those functions depends on the strategic leaders' ability to anticipate, learn and change so as to take the right action at a critical moment (Ireland & Hitt, 1999). It also requires social intelligence to understand social actors and their relationships and to work with others towards organisational goals and visions (Boal & Hooijberg, 2000). Essentially, exercising strategic leadership entails developing and mobilising human capital and social capital to increase organisational capabilities as the means to competitive advantages (Ireland & Hitt, 1999).

In summary, strategic leadership entails a process that is intended to have strategic consequences for the organisation, that is the leadership *of* the PBFs. The concept of strategic leadership has not been explored in detail in project management especially

concerning project workers' wellbeing. The focus has been on the role of frontline leadership in projects. The effectiveness of project leadership depends on strategic leadership in PBFs that offers organisational support in terms of systems, resources and processes.

Research methods

This study is explorative in nature and focused on understanding various experiences and perceptions of wellbeing management and strategic leadership for employee wellbeing in PBFs. To answer the research questions, this research adopts a qualitative methodology and an inductive approach that value authentic representation of people's experiences and perceptions (Eisenhardt et al., 2016; Gioia et al., 2013).

This paper is part of the research on care and wellbeing in project work environment. The focal study digs deeper into the wellbeing management practice and explores the strategic leadership for wellbeing promotion in PBFs. Findings reported in this paper are based on an analysis of 24 interviews conducted in the UK construction industry. Construction is a project-based industry and historically known for unsafe, unhealthy and bad for employee wellbeing (Smyth et al., 2019). Wellbeing is rising up the agenda in the global construction industries as alarming rates of work-related ill health, fatigue and suicide are observed across developed counties such as Australia, New Zealand the UK and the US (Bryson & Duncan, 2018; HSE, 2023; Milner, 2016; ONS, 2022).

Snowball sampling was used in the data collection (Goodman, 1961). Participants were selected from PBFs in the construction industry, including consultancies, main contractors and specialist subcontractors. The participants include various managerial roles ranging from managing director to human resource director and head of innovation, and to project managers and health and safety managers on site. Table 1 summarises the information about the interviewees.

Table 1 Interviewee Information

Organisation Type	Job Titles	Subtotals
Consultancy	Managing Director	1
	HR Lead	1
	Senior Designer	1
	Contracts Manager	1
Specialist Subcontractor	Managing Director	1
	Design Coordinator	1
	Technical Lead	1
	Procurement and Production Manager	1
	Assembly Lead	1
Main Contractor	Managing Director	1
	Head of Health and Wellbeing	1
	HR Director	1
	Head of Innovation/Modern Methods of Construction	2
	Technical Director	1
	Bid Manager	1
	Digital Designer	1

	Health, Safety and Wellbeing Manager	2
	Project Manager	2
	Contracts Manager	1
	Senior Design Manager	1
	Design Manager	1
Total		**24**

The average duration of interviews is around 50 minutes. Interviews were recorded and transcribed. An interpretative approach was used in the data analysis.

Findings

Wellbeing management practice

The interviews discovered that organisational responsibility for employee wellbeing in project-based firms (PBFs) is distributed among various departments, including senior management, human resource management (HRM), health and safety (H&S) management, project management and line management.

A 'showing' approach by some senior managers was found as impactful in terms of dismantling barriers to discussing mental health and wellbeing, an effort of particular important in male-dominated workplaces like construction. It involves senior leaders sharing personal experiences of mental health challenges both in the workplace and at home and revealing their vulnerabilities.

HRM typically leads an enabling approach, focusing on policies and programmes that help individual self-care and care for others. These initiatives encompass flexible working arrangements, promotion of healthy habits and positive life attitudes, increased health literacy and wellbeing awareness, and financial wellbeing through personal finance education. One HR stressed gendered differences in self-care and healthcare service access. Training in mental health first aid has been a growing trend in the construction industry to enable frontline managers to recognise early signs of wellbeing issues and engage in more thoughtful conversations. Senior leadership training also includes mental health awareness and support.

A lot of campaigns and health resources have been directed towards men's health and wellbeing due to high male suicide rate and lower health literacy. However, women's work experiences and wellbeing receive less attention, despite the growing focus on diversity and inclusion in the sector. Moreover, aligned with previous research (Xu & Wu, 2023), this study found that wellbeing measures in PBFs are often generic and do not always consider the diverse needs across different work natures, genders, ages or other demographic backgrounds. For instance, flexible working arrangements are not practical for some project-based workers such as site supervisors and operatives. Inflexibility was identified as a factor in employee turnover.

Wellbeing has also been managed from the H&S perspective. This approach focuses on telling the best practices, improving welfare facilities and reducing hazards in work environment to protect the physical wellbeing of site employees and supply chain workers. Site welfare for female workers is often set up without considering women's psychological needs. Having women taken the leadership role in projects brings different perspectives on H&S issues but also helps amplify women's voice and experience in construction sites including not only direct employees but also tradeswomen, female cleaners and others. Interviewees emphasised that proactive fatigue management is key to preventing accidents. However, it was noted that long work hours and abnormal shifts are inevitable in project work. To mitigate this, project managers require sufficient resources to create work rotation among workers, which can be challenging in some projects.

Bonding and supporting were found in line management and project management. This approach emphasises fostering the feeling of being recognised, valued and respected by building trust relationships and creating meaningful work. For example, keeping ties with their own professional department at the corporate headquarter helps reduce project workers' stress.

There is a gender-based difference in leadership styles, particularly in terms of creating a workgroup climate featured by psychological safety, openness and mutual care. While female leaders are good at maintaining open communication about work and family lives and in this way building shared identities (e.g., as a career at home), male leaders establish social ties with employees via shared hobbies such as sports clubs. It is essential to clarify that the point of this observation is not to suggest that the construction industry needs more women leaders because they may be perceived as more caring. Rather, our findings emphasise that all individuals, regardless of gender, possess the capacity to care for and support others. The value of leadership diversity lies in providing employees with varied approach to working and connecting with their managers and peers, which allows employees to choose interaction styles that best align with their individual needs and circumstances.

A bottom-up communication channel is critical to recognising the various needs of employees. Many companies have included wellbeing into their regular employee surveys. This is a reactive approach. We found more proactive approaches that encourage open conversation and knowledge sharing within and beyond projects. For instance, some main contractors set up consultation meetings onsite between workers and independent parties such as union representatives and wellbeing professionals to raise their concerns. Workgroup networks were noted as particularly useful for knowledge sharing across projects, functions and hierarchies. These networks attract employees sharing the same interests such as women in construction, health and wellbeing and LGBT and allow knowledge sharing and learning among employees of various professional backgrounds and organisational roles.

We identified good examples of organisational support for employee initiatives. These bottom-up initiatives empower employees and create a meaningful work life, which is different from one person to another. They also lead to the caring atmosphere, which is infectious and influences the work life of others, including supply chains, as well as life outside of work.

Lack of cooperation between functions and at firm-project interface

A significant challenge of wellbeing management we identified is poor cooperation between departments, notably between HRM and project management, and at firm-project interface (e.g., aligning organisational initiatives with project planning), which reduces the effectiveness of wellbeing management. Due to the lack of influence on projects, HRM largely relies on individual sites to proactively flag wellbeing issues. Yet project workers are predominantly efficiency-driven, often adhering to a 'must-do-it-now' mentality within a dynamic work environment. This focus can reduce the awareness and reporting of wellbeing issues. As a result, wellbeing management often operates within an informal system, leaving frontline managers and workers to bear the caring responsibilities.

Moreover, despite the wide recognition that current way of organising projects is a major contributor to mental health issues in the construction sector, most training sessions continue to emphasise organisational values and behaviour. There is a lack of efforts to change work practices in ways that would more effectively support the wellbeing of employees and supply chains.

Wellbeing initiatives are not effectively and consistently integrated into project plans and schedules. Some clients have included wellbeing management in the tendering process. However, they often regard wellbeing management a static criterion, for instance, inquiring about wellbeing events held or awards and accreditations obtained, rather than taking a future-oriented approach that assesses to what extent wellbeing is integrated into programmes.

There are tensions between various initiatives such as mental health, EDI and sustainability. Project teams often find themselves overwhelmed by the additional time required to implement these initiatives, without adequate allocation of time within the project schedules to address them effectively. Each site potentially adopting different approaches to wellbeing and other organisational priorities, or when lacking resources or time, neglecting some of them. In addition, these initiatives are not monitored and reported back to the corporate centre. The fragmented approach leaves management without a comprehensive understanding of the implementation or the effectiveness of wellbeing management across different sites.

Discussion: A lack of (shared) strategic leadership for wellbeing management in PBFs

Strategic leadership is multifaceted, encompassing strategic, structural and symbolic components (Crossan et al., 2008). Symbolically, senior leaders' involvement in mental health talks exemplifies organisational values, potentially influencing the attitudes and behaviour of other managers and employees. A key finding of this study is the isolated management of employee wellbeing by different functional departments, indicating an absence of strategic leadership in strategic and structural aspects. Specifically, the leadership is weak in PBFs to align and address competing initiatives (e.g., EDI, sustainability and wellbeing), develop a firm strategy to integrate wellbeing into operations and projects, and create structures and systems to facilitate cooperation and knowledge sharing between functions and across projects. In other words, stronger strategic leadership is needed to establish a more robust social and relational infrastructure to support intra-organisational collaboration, employee engagement and thus good health and wellbeing of project workers. Weak systematic guidance and procedures can lead to behavioural blockages that frustrate strategic initiatives (Smyth, 2015).

Echoing the findings of Keegan et al. (2012), this study observes that in PBFs, the people management responsibilities are distributed across multiple functions and organisational levels. Specifically, in the context of employee wellbeing, these responsibilities fall on senior management, human resource management, project management and line management. However, due to the lack of structures and systems for cooperation, there is no 'shared' strategic leadership for employee wellbeing among these entities. Shared leadership at multiple levels of organisation can enhance the effectiveness of strategies and initiatives at the top level of firm (Scott-Young et al., 2019); yet this requires a good social and relational infrastructure within the firm. Such an infrastructure is essential to clarify roles, boundaries and interrelations between hierarchies, functions and projects, and to guide interactions so as to nurture trust and respect within the firm and its projects.

Turner et al. (2008) pointed out a range of HRM practices that can positively influence project workers' wellbeing, such as actively managing staff transitioning and project team deployment, providing opportunities for learning and personal development, matching project to career development and using structured appraisal system. This study acknowledges the limited influence of HRM in PBFs and identifies the lack of cooperation between HRM and projects as a major challenge in wellbeing management in PBFs. This aligns with Smyth et al. (2019) who noted that at the firm-project interface, siloed working between functions inhibits the formal and informal knowledge and experience sharing particularly about incidents, near misses and mental health concerns.

Conclusion

The aim of the study is to explore the enactment of strategic leadership for employee wellbeing in PBFs. The findings identify a range of wellbeing management practices including showing, enabling, telling and bonding and supporting. While these practices are well intended, they were developed and implemented in isolation by different functional departments, namely, senior management, human resource management, health and safety management, project management and line management.

A significant concern is the lack of integration of wellbeing into project management practices. It was found that wellbeing initiatives are inconsistently and ineffectively adopted across projects. Furthermore, there is a noticeable shortfall in efforts to improve organisational practices to effectively support the wellbeing of employees and the wider supply chain. Simply promoting positive behaviour is insufficient to bring about continuous improvement, especially when organisational factors that cause long working hours and time pressures remain unaddressed.

Effective leadership for employee wellbeing in PBFs is a complex, multilevel and cross-functional challenge. It requires strategic decisions on systems, resources and processes to synergise the efforts, embed practices and align behaviour. This falls within the remit of strategic leadership. The lack of strategic leadership to create a good social and relational infrastructure to support employee engagement, knowledge sharing, and collaboration has caused the fragmentation between functions and at the firm-project interface, reducing the effectiveness of wellbeing management in projects. This study highlights the necessity for strategic leadership in PBFs to move from operating in silos towards system improvements for the wellbeing of project workers. Such a leadership is essential to encompassing changes not just individual practices but also the broader organisational and institutional culture and structures.

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