



BINDURA UNIVERSITY OF SCIENCE EDUCATION

**DEVELOPING A HUMAN RESOURCE FRAMEWORK TO ENHANCE
EMPLOYEE WELLBEING AMONG ZIMBABWE CARE WORKERS
IN THE UK: CASE STUDY OF MARBLESIDE CARE**

BY

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**THIS DISSERTATION IS SUBMITTED TO THE GRADUATE SCHOOL
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GRADUATE SCHOOL OF BUSINESS**

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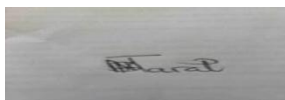
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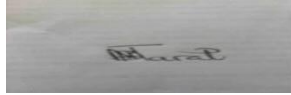
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DECLARATION

I, Hazvineyi Delina Tabu, hereby declare that this dissertation is entirely original work of mine and referenced areas have been properly cited

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DEDICATION

I dedicate this research to the Lord, Almighty for his wisdom and guidance throughout the course of this study.

To my family, for the unwavering support and being my source of motivation during the academic journey. Your support and beliefs in my abilities inspired me to persevere despite the challenges encountered along the journey.

I also dedicate this to my lectures and supervisor who provided valuable guidance throughout the research journey.

Lastly, this research is dedicated to future researchers who seek to advance knowledge in this field. May this research be a useful resource and contribute meaningfully to future academic and professional endeavours.

ABSTRACTION

The study developed a Human Resources Framework to enhance employee wellbeing among care workers in the UK. The wellbeing of employees has become a critical concern, particularly among migrant care workers in the United Kingdom care sector. Zimbabwean care workers constitute a growing part of the UK care workforce in addressing workforce shortages however, they often face a combination of workplace and migration-related challenges that affect their wellbeing negatively. These challenges include working long hours, workplace discrimination, family separation, high workloads, cultural adjustment difficulties, visa -related problems and financial pressure arising from remittances obligations. Despite the migrant care worker contribution, existing Human Resources (HR) practices often fail to adequately address the unique needs and experiences of migrant care workers. The study was guided by five objectives and a mixed method approach was used in the study. The study targeted a total of 80 participants who are employed by Marbleside care and other stakeholders involved in the provision of care. Data was collected using questionnaires and interviews. The findings revealed that employee wellbeing is formed by the interaction of workplace factors and transnational pressures. Workplace factors included long working hours, high workloads, workplace discrimination and inadequate organizational support. Transnational pressures included family separation, remittance obligations, financial responsibilities towards family members in Zimbabwe, migration and visa-related uncertainty, and emotional strain associated with maintaining responsibilities across the UK and Zimbabwe. The interaction of these workplace and transnational pressures increased stress and negatively affected the wellbeing of Zimbabwean migrant car .Based on these findings, a Transformational Integrated Migrant Wellbeing Framework (TIMWF) was developed to address both workplace and transnational challenges. The study concluded that enhancing employee wellbeing among Zimbabwean care migrant workers involves an integrated and culturally responsive HR framework that appreciates the realities of work and migration. The study recommended an integrated approach involving UK care employers, policy makers, HR practitioners, and relevant Zimbabwean institutions. Within the UK context, care organizations should strengthen culturally responsive HR practices and provide wellbeing support for migrant care workers. Within the Zimbabwean context, relevant government and diaspora institutions should strengthen engagement with Zimbabwean care workers and develop accessible diaspora support service.

Keywords: Human Resources Framework, UK, Marbleside care, Transformational Integrated Migrant Wellbeing Framework, Cultural adjustment

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LIST OF ACRONYMS

WHO	World Health Organization
U. K	United Kingdom
N.H. S	National Health Service

CHAPTER 1

1.1 INTRODUCTION

The exodus of Zimbabwean care workers to the United Kingdom has been shaped by the conditions in both countries, and these conditions have a direct impact on employee wellbeing. In the UK, there is a high demand for care workers, mainly caused by an ageing population and a local workforce shortage. The workforce shortage has created many opportunities for migrant workers including Zimbabweans to fill in the workforce gap. However, care work in the UK has known to be demanding, characterised with long hours of work, social isolation, adapting to new culture, discrimination, emotional strain, low wages and insecure contracts. These working conditions have been known cause stress, burnout and poor mental health, if not properly managed. At the same time, the researcher noted that the situation in Zimbabwe plays an important role in shaping the migration decisions and overall wellbeing of Zimbabwean care workers in the UK.

Jaji (2024) highlighted that many Zimbabweans migrate due to economic difficulties, unemployment, and limited opportunities at home. However, studies have indicated that migration does not remove responsibilities at home. Many Zimbabwean migrant workers are expected to financially support their families through remittances, which creates continuous financial burden if not properly managed. In addition, being separated from close family members, including children and spouses, can lead to emotional stress, loneliness, and feelings of guilt. The researcher also acknowledged that our cultural values, and social expectations placed on migrant workers to develop at home and provide for the remaining family, can increase stress, burnout and anxiety. These challenges are further complicated by the need to adjust to a new culture, work environment, and lifestyle in the UK. As a result, Zimbabwean care

workers often carry both economic and emotional burdens from their home country, which significantly affects their overall wellbeing and ability to cope with work demands.

Because of these combined pressures from both UK work environment and life circumstances linked to Zimbabwe, Zimbabweans care workers may face greater wellbeing challenges than other workers (Tawodzera, 2024). The researcher submits that improving employee welfare is not just about better working conditions in the UK, but also about understanding Zimbabwean care workers personal and social realities. A robust human resources framework should therefore provide support that addresses, work load, fair pay, mental health, and also the unique experiences of migrant workers, helping them feel supported both at work and in their personal lives.

1.2. BACKGROUND OF STUDY

The United Kingdom's Health and Social care sector has experienced an increasing demand for care service, largely driven by demographic changes. The Office for National Statistics (2023) reported that the proportion of individuals aged 65 and above continues to rise placing pressure on healthcare and social care systems. The ageing population has intensified the need for long-term care and support services across the UK. Consequently, workforces' sustainability has emerged as a critical concern, with Skills for Care (2023) reporting over 110,000 vacancies in adult social care sector. The researcher acknowledged that such shortages adversely affect service delivery, quality of care and employee wellbeing. These shortages can have an impact on service delivery, quality of care, and staff wellbeing, making workforce sustainability a critical issue for policymakers and healthcare providers.

According to Department of Health and Social Care (DHSC) (2025), to address workforce shortages the UK has increasingly relied on migrant workers to fill essential roles within the health and social care sector. These workers contribute

significantly to the UK care system such as the NHS, residential homes, care homes, supported living and domiciliary care services. Migrant workers play a critical role in sustaining the health and social care workforce, filling essential roles that are difficult to recruit domestically. Among these migrant groups, the researcher identified that Zimbabwean care workers have become a significant part of the workforce due to their skills, English proficiency and professional training, making them well-suited to the demands of the UK care sector. According to NHS England (2025) Code of Practice for International Recruitment, international recruitment has become a critical strategy in sustaining the healthcare workforce, service delivery and ensuring continuity of care services in the UK. The researcher also found that Zimbabwean care workers have become a prominent group, particularly following changes in UK immigration policies such as the Health and Care Worker visa (Home Office, 2022).

The researcher also highlighted that the contemporary labour migration patterns between Zimbabwe and the UK cannot be fully understood without considering the historical and colonial ties between the two countries. According to Open University (2025), the colonial relationship created enduring socio-economic and cultural linkages that continue to influence labour migration patterns. At the same time the researcher observed that, one of the most significant legacies is the adoption of the English language and British-styled education and professional training systems. This has facilitated the mobility of Zimbabwe workers to the UK, as their skills and qualifications are often more easily transferable. The researcher noted that migration is not a recent phenomenon. Rather, it has been shaped by the historical, educational, and socio-cultural ties between the two countries.

According to World Bank (2022), Zimbabwe's post -independence trajectory has been marked by periods of economic instability, including hyperinflation, high unemployment, and declining public services. These challenges have

significantly contributed to outward labour migration, particularly among skilled professionals such as nurses and care workers (Chikanda, 2019). According to Mlambo, (2015) the country's health care system, once among the strongest in Africa, has experienced deterioration due to underfunding and staff shortages further encouraging migration. Zimbabwe's health sector policies also contributed to migration trends, as the country has experienced significant out-migration of healthcare professionals due to low wages, poor working conditions and limited career progression (Chikanda, 2019). As a result, the researcher observed that a significant number of Zimbabwean migrants employed as care workers in the UK possess professional qualifications in nursing or other healthcare-related professions. The researcher further noted that, despite their educational and professional backgrounds, many of these individuals are employed in lower skilled care roles, reflecting a pattern of occupational downgrading. The researcher argued that this mismatch may negatively affect job satisfaction and overall wellbeing, as workers may experience feelings of underutilisation, reduced professional recognition, and unlimited opportunities for career progression.

In addition to domestic economic challenges, Zimbabwe's increasing reliance on diaspora remittances has further shaped labour migration patterns. Records shown by World Bank (2023) and Reserve Bank (2024) indicated that remittances to Zimbabwe exceeds US\$2 billion annually. Tevera and Chikanda (2019) also highlighted that 61% of households receive money from migrant workers at least once a month and this an indication that remittances play a crucial role in sustaining household livelihoods. While remittances provide economic benefits, such as reducing poverty, food insecurity and supporting education and healthcare, they also place significant pressure on migrant workers to maintain financial support, often at the expense of their own financial stability and wellbeing (Leeds African Studies, 2013). The researcher argued that the financial obligations associated with remittance sending may

place considerable pressure on Zimbabwean migrant care workers, often requiring them to prioritise family needs over their own financial stability. Consequently, the researcher suggested that some workers may engage in long working hours without rest and delaying support in order to meet these obligations. The researcher observed that these transnational pressures may be compounded by family separation, which can lead to emotional stress, loneliness, and reduced overall wellbeing.

The Zimbabwean government's increasing emphasis on diaspora engagement further demonstrated the strategic importance of migrants to national development. The 4th Annual Zimbabwe Diaspora Conference held in Gweru April 2026, brought together Zimbabweans living abroad, government officials, diaspora representatives, and development partners to strengthen diaspora engagement in national development. The conference highlighted the significant contribution of Zimbabweans living abroad through remittances, skills transfer, investment, and knowledge exchange. The conference highlighted the government's commitment to harnessing the diaspora's financial resources, skills and knowledge to achieve Vision 2030. The conference demonstrated that migrant workers are increasingly viewed not only as labour migrants but also as important development partners. However, while these expectations create opportunities for national development, they may also intensify the financial and social obligations placed on migrant workers, potentially affecting their wellbeing

The researcher also observed that the introduction of the Health and Care Worker Visa in 2021 intensified these migration dynamics by providing a structured pathway for Zimbabwean workers to enter the UK care sector. Although this policy has been effective in addressing labour shortages, it has introduced new vulnerabilities. According to Migration Advisory Committee, (2022) visa sponsorship arrangements often tie workers to specific employers limiting their dependency on employers for continued legal status. The recent

changes to the care visa prohibit care workers on the visa to bring their family members (i.e. partners/children) directly affecting employee wellbeing (UK Government, 2024-2-25). The researcher also observed that these visa conditions can create a strain on marriages, affect parent-child bonding feelings of isolation and depression, hence affecting worker wellbeing.

Gov.wales (2018), shared the same insentient as it highlighted that most migrant families cannot live together due to strict immigration policies and migrants' workers have reported to have worry about partners and children left behind, affecting their mental wellbeing. Moreover, the researcher argued that the rapid expansion of international recruitment has not been matched by equally robust HR framework capable of supporting these transnational challenges.

Despite the growing presence of Zimbabwean care workers in the UK, the researcher observed that there remains a significant gap in both research and practice. Existing HR policies tend to adopt a generic, one size-fits all approach that fails to account for complex transnational factors shaping migrant worker experiences (Kline, (2014)). The researcher contended that there is limited recognition of colonial legacies, remittance obligations, visa conditions and Zimbabwe's domestic policy environment collectively influence employee wellbeing. As a result, current approaches to workforce management are insufficiently tailored to the needs of Zimbabwean care workers.

Existing literature suggested that improving employee wellbeing is essential for enhancing productivity, maintaining workforce, and ensuring high quality care. The researcher suggested that it is not only critical to improve workforce retention and organizational performance but also supporting the broader development of migrant communities and their home countries (World Health Organization, 2021). Whilst there is extensive research on the workforce shortages and migration in the UK health and social sector, the researcher

observed that there is limited evidence focusing specifically on the experiences and wellbeing of Zimbabwean care workers. Existing studies such as Spencer et al., (2018) tend to treat migrant as a homogeneous group and do not sufficiently disaggregate migrant populations. This lack of specificity represents a significant gap in the literature, as it overlooks the transnational factors that shape experiences of Zimbabwean care workers. As a result, current HR policies and wellbeing strategies may be inadequately designed to address their needs.

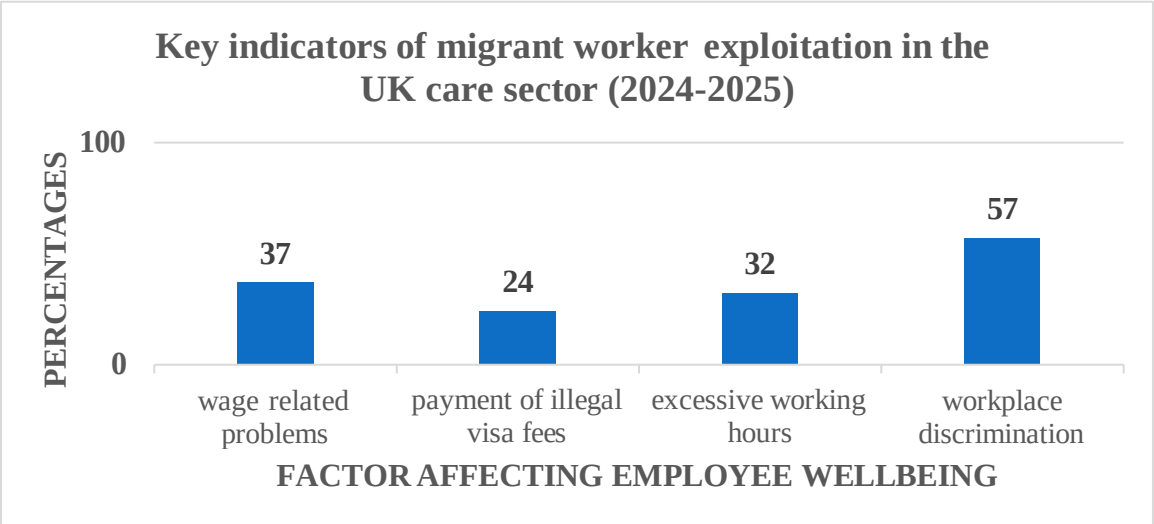
Given the above background, the researcher highlighted the importance of addressing this gap by developing more inclusive HR frameworks that can effectively enhance employee wellbeing among Zimbabwean care workers in the UK. By integrating insights from both the UK labour market and Zimbabwe's context, the study adopted a holistic and transnational perspective, recognising that migrant worker wellbeing is shaped not only by workplace conditions but also by broader factors extending beyond the immediate workplace.

1.3. STATEMENT OF THE PROBLEM

The United Kingdom's adult social care sector has become increasingly dependent on migrant labour to address persistent workforce shortages, with Zimbabwe among the leading source countries for international recruitment into the care sector (Home Office, 2024; Skills for Care 2024). Despite their significant contribution, migrant care workers continue to experience workplace conditions that may adversely affect their wellbeing. Evidence presented by UNISON (2025) demonstrated the scale of these challenges, with 37% of migrant workers reporting wage-related problems, 32% experiencing excessive working hours, and 24% reporting payment of illegal recruitment or visa-related fees. Furthermore, 57% experienced difficulties meeting household bills because of issues including late salary payments, unpaid travel

time and unauthorized wage deductions, while some workers reported poor employer-provided accommodation.

Figure 1.1: Supportive evidence for migrant worker exploitation in UK



Source: UNISON (2025)

For Zimbabwean care workers, workplace pressures may be further intensified by transnational responsibilities, particularly financial obligations to families in Zimbabwe. With Zimbabwe receiving approximately US\$2 - US\$2.5 billion annually in diaspora remittances. (World Bank, 2024), the pressure to maintain remittance flows may encourage some workers to undertake excessive overtime, tolerate unfavourable working conditions or remain in insecure employment. Despite these intersecting workplace and transnational pressures, UK social care workforce policies and practices remain primarily focused on recruitment, workforce expansion and regulatory compliance, with limited attention to migrant workers’ wellbeing. As a result, a clear gap exists in understanding how HRM can effectively address the combined impact of workplace conditions, migration-related vulnerabilities, cultural needs and transnational responsibilities. This study therefore addresses this gap by developing a Human Resource framework to enhance the wellbeing of

Zimbabwean care workers in the UK, integrating workplace, migration-related, and transnational factors into a context-specific HR response.

1.4. PURPOSE OF THE STUDY

The purpose of this study is to develop a Human Resource framework aimed at enhancing employee wellbeing among Zimbabwean care workers in the UK by adopting a transnational perspective that integrates both the Zimbabwean and UK contexts.

1.5. RESEARCH OBJECTIVES

1.5.1. Main objective

To develop a Human Resource framework to enhance employee wellbeing among Zimbabwean care workers in the United Kingdom within a transnational context.

1.5.2. Specific objectives

- a. To examine key challenges affecting employee wellbeing among Zimbabwean care workers in the UK.
- b. To examine the relationship between remittance obligations and employee wellbeing.
- c. To assess the impact of HR practices on employee wellbeing among Zimbabwean care workers in the UK.
- d. To identify gaps in HR support systems affecting Zimbabwean migrant workers care workers in the UK.
- e. To develop a human resource framework that addresses workplace and transnational challenges affecting employee wellbeing.

1.6 RESEARCH QUESTIONS

1.6.1. Main Research Question

How can a context-specific human resource framework be developed to enhance employee wellbeing among Zimbabwean care workers in the UK within a transnational context?

1.6.2. Research Questions

- a. What key factors affect employee wellbeing among Zimbabwean care workers in the UK.
- b. What is the relationship between remittance obligations and employee wellbeing among Zimbabwean care workers?
- c. How do existing human resource practices influence employee wellbeing among Zimbabwean care workers in the UK?
- d. What gaps exist in HR support systems for Zimbabwean migrant care workers in the UK?
- e. What context-specific HR framework can be developed to improve employee wellbeing among Zimbabwean care workers in the UK.

1.7 RESEARCH PROPOSITIONS

P1: Employee wellbeing among Zimbabwean care workers is shaped by interaction between workplace conditions and transnational pressures.

P2: Human resources practices in the UK care sector do not adequately address the unique needs of migrant workers.

1.8. ASSUMPTION OF THE STUDY

The study assumed that Zimbabwean migrant care workers can provide reliable insights into their lived experiences, that HR practices influence employee wellbeing and that migrant-related challenges significantly affect wellbeing outcomes. It further assumed that existing HR practices may not fully address

migrant-specific needs and that the findings can inform the development of an effective HR framework.

1.9. JUSTIFICATION OF THE STUDY

The justification for the study is grounded in both empirical and practical gaps within the UK adult social care sector. Despite ongoing workforce shortages, with high vacancy levels, the researcher noted a remaining persistently high and reliance on international recruitment increasing. Skills for Care (2023), and King's Fund (2023), noted that existing research has largely focused on recruitment and retention strategies rather than the wellbeing of migrant workers who sustain the sector.

Although migrant care workers constitute a significant proportion of the workforce, the researcher pinpointed that there is limited research specifically examining the experiences of Zimbabwean care workers in the UK, despite their growing presence following the expansion of the Health and Care Visa route (UK Home Office, 2023). Current studies tend to treat migrant workers as a homogenous group, overlooking the unique socio-economic and cultural challenges faced by specific nationalities.

The researcher also pinpointed a significant gap that exists in the literature regarding the role of remittances in shaping migrant worker wellbeing. While remittances are often studied from economic development perspective, there is limited empirical research examining how these financial obligations affect the wellbeing of migrant workers in host countries. The researcher highlighted a critical oversight, as remittances pressures may intensify stress, financial strain and work-related burnout.

Furthermore, the researcher noted inadequate institutional support from the Zimbabwean context in preparing and protecting migrant workers. Limited pre-departure training, lack of monitoring of workers abroad, and weak policy

frameworks mean that many Zimbabwean migrant workers navigate complex employment and social challenges without structured support systems. This reinforces their vulnerability and highlights the need for complementary organizational interventions in destination countries such as the UK.

Therefore, this study was justified by the need to address these gaps by developing a context-specific human resource framework that integrates migrated-related challenges into strategies aimed at improving the wellbeing of Zimbabwean care workers in the UK. By doing so, the study sought to bridge the disconnect between existing HR practices and the lived experiences of migrant workers within the care sector recognizing the transnational pressures shaping the lived experiences of Zimbabwean care workers.

1.10. SIGNIFICANCE OF THE STUDY

This study is significant to create practical and policy-relevant insights for multiple stakeholders connected to the migration and employment of Zimbabwean care workers in the UK.

1.10.1. Human Resource Practitioners

For HR practitioners, this study provided evidence on how workplace conditions and transnational pressures jointly affect employee wellbeing. By identifying gaps in the current HR practices, the study supported the development of more inclusive, culturally responsive and wellbeing-focused HR strategies.

1.10.2. Zimbabwean Care Workers

These are the primary beneficiaries of the study. For Zimbabwean care workers, the study highlighted the specific challenges they face, including remittance obligations, family separation, and workplace stress. By proposing a targeted HR framework, the study aimed to contribute better support systems, improved wellbeing, and more sustainable working conditions.

1.10.3. Labour and Migration Policy Institutions

Institutions responsible for labour export, migration management, and worker welfare can benefit from this study by gaining insights into

- The need for better pre-departure training
- Strengthening worker protection frameworks
- Enhancing monitoring and support systems abroad

The study also supported the NDSI objectives on human capital development and governance.

1.10.4. Households and families in Zimbabwe

Families in Zimbabwe who depend on remittances are also important stakeholders. While remittances improve livelihoods, they may come at the cost of family separation and emotional strain.

The study contributed by;

- Highlighting the social impact of migration on families
- Encouraging policies that balance economic benefits with family wellbeing

The study also aligned with NDS1's focus on poverty reduction and social protection.

1.10.5. Government and Policymakers in Zimbabwe

For Zimbabwe, the study was significant because remittances form a crucial part of the national economy and household survival. However, the research highlighted the hidden social and psychological costs associated with migration. The findings can inform policies aimed at

- Improving labour migration governance
- Strengthening diaspora engagement strategies

- Enhancing support systems for migrant workers and their families

The study also aligned with NDS1 priorities of leveraging the diaspora for national development while ensuring citizen welfare.

1.10.6. Policymakers in the United Kingdom

For UK policymakers, the study provided insight into how immigration policies and labour practices influence not only workforce supply but also employee wellbeing. The findings can inform policies that promote fair working conditions, family support mechanisms, and workforce stability within the care sector.

1.10.7. Academic community

From academic perspective, the study contributed to the literature by integrating human resources management, migration studies and transnational wellbeing. It addressed a gap by examining how remittances and migration-related pressures interact with workforce factors, offering a multidimensional understanding of employee wellbeing.

1.11. DELIMITATIONS OF THE STUDY

The study was delimited to specific geographical, conceptual and methodological boundaries to ensure clarity, focus and feasibility.

1.11. 1. Geographical Scope

The study focused on Zimbabwean migrant care workers in the United Kingdom, with particular emphasis on Marbleside Care and key stakeholders involved in care provision at Marbleside Care. It excluded migrant workers from other nationalities and those working outside the UK. The aim was to explore the unique experiences of Zimbabwean migrants within the UK care sector.

1.11.2. Time scope

The study was confined to data collected within the period 2024-2026 reflecting current working conditions, migration trends and visa policy changes affecting Zimbabwean care workers.

1.11.3. Conceptual Scope

The study was limited to examining the relationship between human resources practices, transnational pressures and employee wellbeing. The study did not include broader migration issues.

1.12. DISSERTATION CHAPTER LAYOUT

The dissertation is organized into five chapters, each addressing a specific aspect of the study.

1.12.1. Chapter One: Introduction and Background

Chapter one introduced the study by providing the background, outlining the problem statement, research objectives, research questions, hypothesis, significance, justification, and delimitation of the study, thereby establishing the foundation of the study.

1.12.2. Chapter Two: Literature Review

Chapter two presented empirical studies done by other scholars in regard to employee wellbeing and this covered the global, regional and local perspectives on migrant employee wellbeing. The chapter also covered sub topics on employee wellbeing concept, human resources practices, remittances obligations and also the introduction of the conceptual framework guiding the research.

1.12.3. Chapter Three: Methodology

Chapter three outlined the methodology, detailing the mixed-methods approach, research design, sampling techniques, data collection methods, data analysis procedures, limitation and ethical considerations of the study.

1.12.4. Chapter Four: Data Analysis

Chapter four presented and analysed the collected data from Zimbabwean care workers working at Marbleside Care, integrating both quantitative and qualitative findings and discussing them in relation with research objectives and existing literature.

1.12.5. Chapter Five: Conclusions and Recommendations

Chapter five provided the conclusions and recommendations of the study, including the development of context -specific human resources framework and suggestions for future research.

1.12. KEY WORDS

1.12.1. Employee Wellbeing

A holistic concept that includes the physical, mental, and emotional health of employees, as well as job satisfaction, work-life balance, and overall quality of work experience (Health and Safety Executive, 2023).

1.12.2. Migrant Workers

Individuals who move from their home country to another country for greener pastures (International Organization for Migration, 2020). In this study, it specifically refers to Zimbabwean care workers working in the UK care sector.

1.12.3. Workplace Challenges

Difficulties experienced within the work environment, such as high workload, discrimination, lack of support, and poor conditions. (Zimbabwe Ministry of Labor and Social Welfare, 2023).

1.12.4. Migrant -related Challenges

Difficulties associated with living and working in a foreign country, including cultural adjustment, immigration issues, financial obligations (WHO, 2023).

1.12.5. Transnational Context

These are situations, activities, or relationships that span across more than one country, where people, ideas, cultures, or economic activities are connected beyond national border (International Organization for Migration, 2020).

1.12.6. Remittances

Money sent by migrant workers to support family members in their home country, often creating financial and emotional responsibilities (Reserve Bank of Zimbabwe, 2023).

1.13. SUMMARY

The Chapter introduced the study by outlining the background and the context of the research, focusing on the wellbeing of Zimbabwean migrant workers in the United Kingdom within transnational context. It highlighted the increasing reliance on migrant labour in the UK care sector and the challenges faced by Zimbabwean workers, including workplace and migration-related pressures that affect their overall wellbeing.

The chapter presented the research problem emphasizing the limitations of existing HR practices in addressing the specific needs of migrant workers. The main objective of the study, which was to develop a human resource framework to enhance employee wellbeing was clearly outlined alongside the specific

objectives. These objectives were supported by corresponding research questions, reflecting both qualitative and quantitative dimensions of the study.

Furthermore, the chapter discussed the significance of the study, particularly its contribution to human resources management, policy development, and the broader Zimbabwean context including diaspora engagement and national development. Key assumptions, delimitations, and limitations of the study were also outlined to clarify the scope and potential constraints of the research.

Overall, this chapter provided a foundation for the study and set the stages for the subsequent review of relevant literature in Chapter Two.

CHAPTER 2

LITERATURE REVIEW

2.1. INTRODUCTION

The literature review examined the existing body of knowledge relevant to the development a Human Resource framework for enhancing employee wellbeing among Zimbabwean care workers in the United Kingdom within a transnational context. The review explored the concept of employee wellbeing and its significance in contemporary Human Resources Management, highlighting its relationship with employee performance, job satisfaction, and organizational sustainability. Employee wellbeing has become an important area of concern in modern management due to its strong influence on workplace outcomes, organizational, and national effectiveness.

According to World Health Organization (2020), employee wellbeing refers to the overall health and quality of life experienced by employees within the workplace. Employee wellbeing includes how employees feel about their work, the extent to which they can manage workplace demands, and their ability to maintain a healthy balance between work and personal life. The researcher observed that in the recent years, globalization, labour migration, technological changes, and increasing workplace pressures have intensified the need for organizations to promote employee wellbeing through supportive workplace practices and policies.

The concept of employee wellbeing is multifaceted and extends beyond the absence of illness or injury. According to NHS (2022), it includes physical wellbeing, which relates to workplace safety, health conditions, and access to healthcare services; psychological wellbeing, which concerns stress management, emotional stability, and mental health; and social wellbeing, which involves positive workplace relationships, inclusion, and organizational

support. Scholars such as Cary Cooper and Ivan Robertson (2021) emphasized that employee wellbeing is associated with employees' experiences at work, including their levels of satisfaction, motivation, and emotional health. Similarly, Armstrong (2022) argued that employee wellbeing is reflected in the extent to which employees experience positive emotions and low levels of work-related stress. Through these perspectives the researcher found that employee wellbeing is influenced by both workplace conditions and broader socio-economic factors affecting employees' lives.

Globally, employee wellbeing became particularly important within the health and social care sector, where employees often face emotionally and demanding work environments. According to NHS (2022), care workers frequently encounter high workloads, emotional labour, stress, and burnout due to the nature of caregiving responsibilities. In the United Kingdom, increasing labour shortages in the care sector have resulted in greater reliance on migrant workers, including Zimbabwean care workers. Research by Skill for Care (2022) indicated that migrant care workers often experience long working hours, low pay, job insecurity, workplace discrimination, and limited organizational support, all of which negatively affect their wellbeing. In addition, Migration Observatory (2023) reported that migrant workers frequently experience cultural adaptation, immigration status, and family separation, making their wellbeing more complex compared to local employees. Based on these findings, the researcher argued that Zimbabwean migrant care workers may face multiple workplace and personal challenges often contributed to stress and burnout among the migrant care workers.

Scholars such as Tavera and Crush (2019), highlighted that for Zimbabwean migrant workers employee wellbeing is further shaped by economic instability and socio-cultural expectations originating from their home country. According to research, Zimbabwe's prolonged economic challenges, including unemployment, inflation, and declining living standards, have encouraged

labour migration to countries such as the United Kingdom. Many Zimbabwean migrants work in low-paid care roles while simultaneously carrying financial obligations to support families through remittances. According to the World Bank (2024), remittances remain a major source of income for Zimbabwe households and contribute significantly to the national economy. The researcher observed that, the pressure to provide financial support often places emotional and financial strain on migrant workers, negatively affecting their wellbeing. Furthermore, the researcher noted, cultural values such as Ubuntu which emphasize collective responsibility, family support, and social connectedness, shape how Zimbabwean workers perceive wellbeing and workplace relationships.

Employee wellbeing is also closely linked to National Development Strategy 1 (NDS1), which seeks to promote inclusive economic growth, decent work, social protection, and improved living standards in line with Vision 2030 (Government of Zimbabwe, 2020). NDS1 recognizes the important contribution made by migrant workers through remittances, skills development, and economic participation. The strategy further highlighted the importance of improving labour conditions, strengthening social protection systems, and supporting vulnerable groups, including migrant workers. According to Diaspora for Development (2023), migrant worker wellbeing is essential for sustainable national development.

The researcher stressed the importance of physically and emotionally wellbeing as financially stable migrant workers are more productive and more capable of contributing to economic growth through remittances and investment. Therefore, the researcher observed that promoting employee wellbeing is not only important at organizational level but also critical for achieving broader national development goals.

The researcher concluded that employee wellbeing is a broad and dynamic concept influenced by workplace conditions, organizational support, socio-economic realities, and cultural expectations. In the context of migrant care workers, the researcher observed that wellbeing is designed not only by organizational practices but also by migration-related challenges such as remittance obligations, cultural adjustment, and family separation. Understanding these factors is essential for developing effective human resources policies and support systems that improve employee wellbeing, organizational performance, and national development outcome

2.2. THEORETICAL FRAMEWORK

The study adopted an integrated theoretical framework combining Human Capital Theory, Maslow Hierarchy of Needs, and Transnationalism theory. These theories will be discussed below;

2.2.1. Human Capital Theory

The Human Capital: Theory views employees as valuable assets whose skills, knowledge, and health have a direct impact on production and economic growth. This theory, was developed by Gary Becker (1964), and it emphasized in investing people through education, training, and health to improve employee efficiency and overall performance. In this context, employee wellbeing is the heart of human capital because it affects how effectively individuals can work and contribute to development.

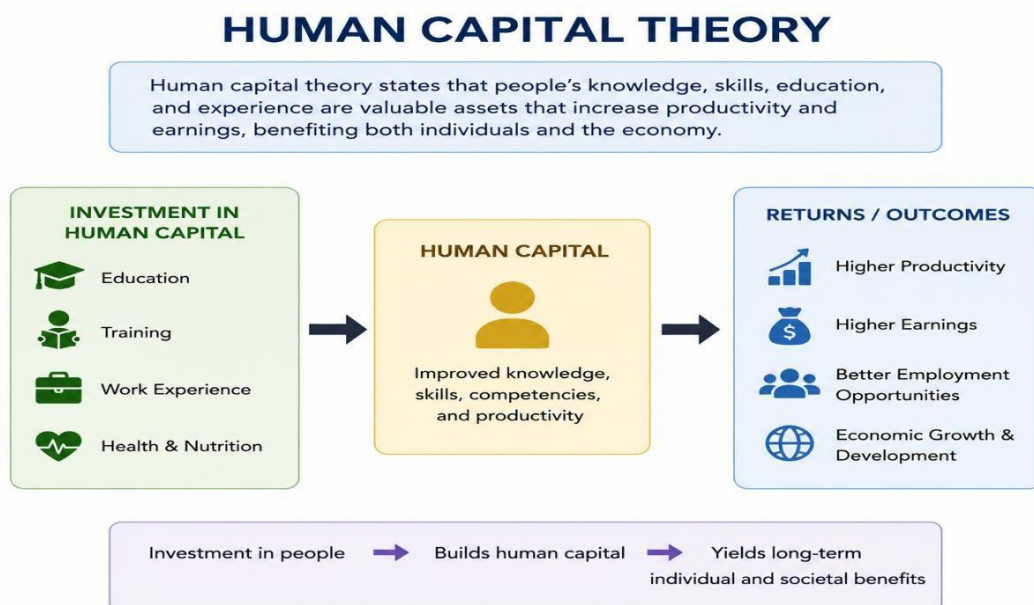


Figure 2. 1: Human Capital Theory

Source:(Becker, 1964)

According to Human Capital Theory, when organizations and governments invest in employee wellbeing, employees become more productive, motivated, and innovative. The researcher suggested that, healthy workers are less likely to be absent, while those with good mental wellbeing are more engaged and perform better at work.

Furthermore, Human Capital Theory suggested that neglecting employee wellbeing can lead to low productivity, high turnover, and brain drain. Poor working conditions may push skilled workers to leave the country or disengage from contributing to national development. Therefore, the theory highlighted that improving employee wellbeing is not only a social responsibility. The researcher observed that this theory can be used as an economic strategy that enhances human capital and supports sustainable development which aligns with the NDS1.

Despite the positive contributions of Human Capital Theory, the researcher noted that the theory is known of treating employee wellbeing as a means to economic ends-rather than as an outcome of intrinsic value, which may overlook broader social and cultural dimensions of wellbeing. Based on all the contributions made by the theory, the researcher gathered that the theory failed to capture the transnational use of human capital, where Zimbabwean migrants leverage their skills for both local employment and financial support of families back home which critical for Education 5.0.

2.2.2. Maslow's hierarchy of Needs

Maslow's Hierarchy of Needs below was developed by Abraham Maslow, and the theory explained that human beings are motivated by a progression of needs ranging from basic survival to personal fulfilment (Maslow, 1943). These needs include physiological, safety, social, esteem, and self-actualization needs. From the researcher point of view, this theory is highly relevant in the workplace as it understands employee wellbeing. It also suggested that employees perform best when their needs are adequately met.



Figure:2.2: Maslow's Hierarchy of Needs Source (Maslow, 1943)

In relation to employee wellbeing, Maslow's theory suggested that organizations must first ensure that employees' basic needs are satisfied. The

researcher pinpointed that for Zimbabwean care workers in the UK, this includes fair wages, rest, and manageable working hours (physiological needs), as well as job security and safe working conditions (safety needs), and when these needs are unmet, employees are more likely to experience stress and dissatisfaction, which negatively affects their wellbeing and performance.

At higher levels, Maslow highlighted that, social needs such as belonging and support are particularly important for migrant workers who may face isolation and cultural challenges. The researcher suggested supportive workplace relationships and inclusion policies as they are critical in improving emotional wellbeing of migrant workers. The researcher also highlighted that esteem needs, including recognition and respect, contributed to confidence and job satisfaction, while opportunities for training and development help employees achieve self-actualization.

The researcher concluded that Maslow's Hierarchy of Needs provided a useful framework for understanding that employee wellbeing is multi-dimensional and requires organizations to address both basic and higher-level needs. This is important in improving the wellbeing of Zimbabwean care workers in the UK, as meeting these needs enhances motivation, reduces turnover, and improves service delivery. The researcher acknowledged the failure of the theory to account for situations where higher level needs maybe deprioritized with unmet basic needs.

2.2.3. Transnationalism Theory

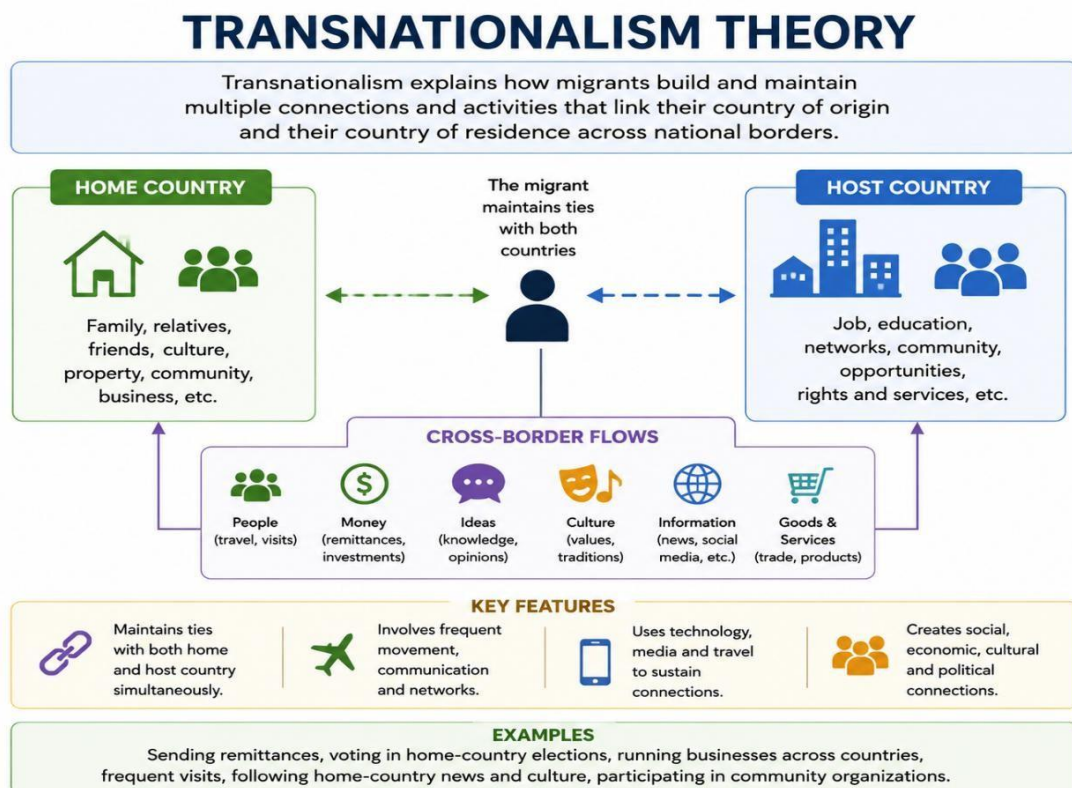


Figure: 2.3: Transnationalism Theory **Source (Nina Glick et al.1992**

The theory was developed by scholars such as Nina Glick, Linda Basch and Cristina Blan (1992). The researcher commended that the theory provided a critical framework for understanding the experiences of migrant workers by recognising that they live across multiple social, economic, and cultural contexts. The theory argued that migrants are embedded in transnational social fields, maintaining continuous connections with their home countries while participating in the host country's labour market. These connections often involve financial remittances, emotional ties, and cultural obligations, which shape individuals' lived experiences and wellbeing. The theory highlighted that worker wellbeing is not solely determined by workplace conditions but also influenced by cross-border responsibilities such as supporting families,

managing long-distance relationships, and navigating dual identities. This dual embeddedness can create additional pressure, including financial strain, emotional stress, and identity conflicts which are often overlooked in traditional HRM theories.

The researcher acknowledged transnationalism theory for providing valuable lens for understanding the broader dimensions of migrant workers, although it acknowledged cross border dynamics, the researcher criticized the theory for its rare integration of the into mainstream organizational wellbeing frameworks. The researcher observed that the theory does not fully explain how workplace factors in the UK interact with home country pressures, resulting in uneven understanding of employee wellbeing across both contexts.

The researcher concluded that existing theories remain fragmented and context-limited both in UK and Zimbabwean contexts, and they failed to provide an integrated explanation of how economic conditions, cultural values, workplace factors and transnational pressures simultaneously shape employee wellbeing. The researcher highlighted the need for a more contextually grounded framework.

2.3. Justification of main theory: Transnationalism theory

The researcher highlighted that although Human Capital theory, Maslow's Hierarchy of Needs, Herzberg's Two-Factor Theory, and Social Exchange theory provided additional insights into employee wellbeing, the researcher adopted Transnationalism theory as the main theory as it explored the unique realities faced by migrant workers who maintain connections across national boundaries. The theory enabled the researcher to study and understand how cross-border relationships shape the wellbeing experiences of migrant workers and how their experiences influenced their engagement, productivity and remittances. The theory therefore provided an appropriate lens for examining

interaction between employee wellbeing, remittances, family obligations and migration.

2.4. EMPIRICAL STUDIES OF MIGRANT CARE WORKER WELLBEING

2.4.1. Global studies of Migrant Care Worker wellbeing

The wellbeing of migrant care workers has gained global attention, particularly in regions experiencing high demand for migrant labour such as Europe, Asia and China. These studies highlighted how workplace conditions, migrant policies, and transnational pressures interact to shape the wellbeing of migrant workers.

2.4.2 The European Literature

The European literature on migrant care workers largely focused on the relationship between labour conditions, migration policies and worker wellbeing. According to Van Hooren (2017), he found that migrant care workers across European countries were often employed in low-paid and risky roles, with limited job security and restricted access to social protection. Similarly, Kuhlmann et al (2019) further identified that migrant workers in European health and social care experienced high levels of stress and burnout due to long working hours, understaffing, and emotional labour demands. From the literature, the researcher noted that existing studies consistently showed that migrant care workers are essential in addressing labour shortages within ageing European societies, particularly in health and social care sector. The literature consistently demonstrated that migrant care workers experience significant workplace and structural challenges that negatively affect their wellbeing

Further studies emphasized that the impact of immigration and labour policies on migrant wellbeing. Spencer et al (2021) argued that visa dependency and restrictive labour rights increase workers 'vulnerability by limiting their ability to challenge exploitation and poor working conditions. In addition, several

scholars noted that migrant workers often face discrimination, language barriers, and social exclusion, which further affect their psychological wellbeing and workplace experiences. These findings suggested that wellbeing is influenced not only by organizational factors but also by broader structural and political conditions within host countries.

Fiona Williams (2021), also brought up the issue of job inequality among females in the care sector in Europe. She highlighted the gendered nature of migrant care worker in Europe among female migrant workers is disproportionately represented in domestic and care giving roles, and this has resulted to informal employment arrangements and emotional expectations which has increased vulnerability to exploitation and emotional exhaustion. Studies by Isabel Shutes (2016) found that care work is often undervalued despite its importance to European healthcare systems, leading to limited recognition and inadequate institutional support for migrant workers.

Collectively, the researcher suggested that migrant wellbeing in Europe is shaped not only by workplace conditions but also by broader migration and labour policies. Although the literature provided substantial evidence on economic and psychological challenges, there remains limited focus on how migrant workers themselves negotiate these pressures within transnational family and social contexts, indicating an important gap for further research.

Based on the reviewed literature, the researcher concluded that the wellbeing of migrant care workers in Europe is mostly influenced by labour markets structures, migration policies, and workplace conditions, which shape their employment experiences and access to social protection.

2.4.3. Asian Literature

In Asia, literature on migrant wellbeing has increasingly highlighted the complex relationship between labour migration, economic survival, and psychological wellbeing. Studies by Siar (2018), Hall et al. (2019) and Yeoh

and Lam (2022) demonstrated that migrant workers often face emotional stress linked to family separation, remittance obligations, restrictive employment systems, and limited legal protection. Much of the Asia migration literature focused on migrant domestic and care workers from countries such as the Philippines, Indonesia, Bangladesh, and Sri Lanka who migrate to wealthier economies including Singapore, Hong Kong, Malaysia, and the Gulf States.

The researcher argued that these migration flows are strongly shaped by global labour demands and unequal economic development across the region. Scholars further emphasised the gendered nature of migration, explaining that women are disproportionately concentrated in domestic and caregiving sectors where emotional labour, exploitation, and social invisibility are common. Cheng and Choo (2015) further argued that transnational motherhood, isolation, language barriers, and insecure immigration status contribute to anxiety, depression and some emotional exhaustion among migrant workers. Similarly, Meissner (2021) highlighted that Filipino migrants' workers frequently experience loneliness, identity struggles, and social isolation despite the economic benefits associated with overseas employment. Studies by McGrath (2022)) also found that migration-related separation can negatively affect emotional wellbeing among migrant families, particularly children and spouses left behind.

Research by Killias (2018) explored how migrant domestic workers in Southeast Asia negotiated precarity, insecure employment, and dependency on employers, while Lindquist (2017) examined how recruitment systems and migration brokers contributed to worker vulnerability and exploitation. Further, Cheng and Choo (2015) argued that restrictive migration policies and weak labour protections across parts of Asia continue to reinforce inequality and psychological distress among migrant workers. Although many studies recognise that migration can improve household income, education opportunities, and social mobility, the researcher noted that the broader

literature suggested that these benefits are often accompanied by emotional sacrifice, insecurity, and unequal power relations. Consequential, current debates increasingly focus on balancing the economic benefits of migration with the structural vulnerabilities experienced by migrant workers across Asia.

From the reviewed literature, the researcher observed that migration patterns are mainly driven by global labour demands and recurring socio-economic inequalities within Asia. Scholars have also highlighted the gendered nature of migration, highlighting that women are disproportionately represented in domestic and caregiving roles which is characterised by emotional labour, exploitation, and social invisibility.

On the other hand, the literature review acknowledged that migration can enhance household income, educational opportunity and eradicate poverty, the researcher noted that these benefits are mostly accompanied by emotional sacrifices and employment insecurity. Consequently, the researcher concluded that migrant wellbeing in Asia is moulded by structural, social, and institutional factors that influence the lived experiences and quality life of migrant workers.

2.4.4. China Literature

In China, both internal and international migration studies have also provided important empirical insights into migrant worker wellbeing. Liang et al. (2019) found that migrant workers in urban China experience poor working conditions, job insecurity, and limited access to social welfare services, all of which negatively affect their mental health. Similarly, Chen et al. (2020) reported that long working hours, low wages, and lack of organizational support contribute to high levels of stress and job dissatisfaction among migrant workers. From these findings, the researcher observed that employment-related challenges remain the core determinants of migrant wellbeing in the Chinese literature.

Wang and Fan (2023) further highlighted that social isolation and limited supported networks worsened psychological strain, particularly among migrant workers separated from their families. Further studies done by Liu et al. (2021) argued that China's *hukou* (household registration) system continued to restrict migrant workers' access to healthcare, education, and social welfare, reinforcing social inequality and psychological insecurity. Zhang and Wu (2022) also highlighted that discrimination and social exclusion within urban communities reduce migrants' sense of belonging and increase anxiety and depression. The researcher noted that these scholars collectively demonstrated the inter-twinning nature of institutional barrier, social exclusion, and psychological wellbeing among migrant workers.

More recent studies in China emphasized the influence of broader economic conditions on migrant wellbeing. Sun and Chen (2023) argued that growing labour market competition and economic uncertainty in China place increasing pressure on migrants' workers to maintain productivity despite unstable working conditions and financial insecurity. The researcher therefore inferred that migrant wellbeing in China is shaped not only by individual circumstances but also by structural and economic factors that influence workers' access to opportunities and social protection.

Recent studies have explored the importance of digital communication in supporting migrant wellbeing and maintaining transnational family relationships. In support to this Wang and Fan (2023) argued that digital platforms such as WeChat and video-calling applications helped migrants workers reduce feelings of loneliness and social isolation by enabling regular communication with family members across long distances. Similarly, Zhang and Wu (2022) suggested that digital communication strengthens migrants' sense of belonging and social connectedness despite experiences of discrimination and exclusion with urban communities. The researcher observed that technological advancement has emerged as important coping mechanism

that help migrant workers navigate the emotional challenges associated with migration.

Based on the literature review, the researcher concluded that migrant worker wellbeing in China is shaped by interaction between labour market conditions, migration policies, social integration, and transnational family responsibilities. While the literature highlighted the adverse effects of social inclusion, social network, and community support in enhancing resilience and mitigating emotional stress. Overall, the researcher noted that improving migrant wellbeing requires holistic approach that address both structural inequalities and psychosocial support mechanisms.

2.4.5. Regional Studies of migrant worker wellbeing (Africa).

Employee wellbeing within the African context is increasingly conceptualised as a multidimensional construct encompassing psychological, physical and economic dimensions. However, unlike Western frameworks that emphasize individual satisfaction and autonomy, African perspectives situate wellbeing within collective and relational paradigm. According to Nyambegera, (2020); Nussabaum, (2023), employee wellbeing is understood as being intrinsically linked to social harmony, interconnectedness, and communal support, drawing on domestic philosophies, particularly Ubuntu. African scholars such as Godwin Dzansi further argued that wellbeing in African organizations must be interpreted through socio-cultural lenses that prioritize community over individuality, reinforcing the importance of culturally embedded HR frameworks, which are not common in the Western world.

Research by Lovemore Mbingi (2015) highlighted that the concept of Ubuntu, which is widely discussed in Southern African scholarship, plays a central role in shaping workplace wellbeing. He translated Ubuntu as ‘I am because we are’, hence promoting values of solidarity, compassion, and mutual care. Augustine Shutte (2020) also highlighted how Ubuntu values foster inclusive

organizational cultures that enhance employee morale and psychological wellbeing. These scholars emphasized that leadership grounded in Ubuntu encourages participative decision-making, dignity, and respect, all of which are essential drivers of employee wellbeing in African contexts.

From the reviewed literature, the researcher observed that employee wellbeing in Africa is conceptualized not only as an individual outcome, but as a collective and relational phenomenon grounded in communal values and social interconnectedness. The researcher further noted that indigenous values such as Ubuntu provide a culturally relevant framework for understanding wellbeing within African organizations.

Studies by Zhao (2023) also indicated that in addition to cultural values, social structures such as kinship systems and extended family obligations influence employee wellbeing in Africa. As propounded by Jackson, Louw & Zhao (2023), employees often bear financial and emotional responsibilities for extended families, which can act as both a source of support and stress. Jackson et al (2023) indicated that while these networks provide resilience and social capital, they also impose economic pressures that may negatively affect psychological wellbeing. Research highlighted that this duality is relevant in the case of Zimbabwean workers, who frequently engage in transnational caregiving and remittance practices, thereby extending these obligations beyond national borders.

The researcher evaluated that while kinship networks and extended family structures serve as important sources of emotional and social support, they may simultaneously generate that financial pressure that influence employee wellbeing. This suggested that wellbeing in African context is shaped by both supportive and demanding social relationships.

Kamoche et al. (2022), also highlighted how economic and structural conditions further shape the wellbeing outcomes across the African region. According to International Labour Organization (2022), many African labour markets are characterized by job insecurity, low wages, and unlimited access to formal benefits, all of which contribute to heightened stress levels and reduced wellbeing. In addition, weak institutional frameworks and under developed HR systems in many organizations limit the implementation of structured wellbeing programmes. Kamoche et al. (2022) further noted that labour market informality and underemployment remain critical barriers to achieving sustainable employee wellbeing across the continent. Debra et al (2022) concluded that employee wellbeing is often managed informally as it relies on interpersonal relationships rather than formal organizational policies.

Based on these findings, the researcher observed that structural labour market challenges, including informality, underemployment and limited institutional support remain a barrier to employee wellbeing across many African countries. The literature also suggested that organizational efforts to promote wellbeing can be constrained by broader socio-economic realities.

World Health Organization (2021) also highlighted that the mental health of employees remains critical but underexplored dimension of employee wellbeing in Africa. Evidence suggested that high prevalence of psychological distress across Africa is compounded by limited access to mental health services and persistent stigma. Workplace stressors such as heavy workload, resource constraints, and organizational inefficiencies further worsen these challenges particularly in sectors such as healthcare and public service (Vikram Patel, 2018). Despite this, mental health support systems within organizations remain underdeveloped, highlighting a significant gap in HR practices.

The researcher therefore noted that mental health remains an important underexplored dimension of employee wellbeing within African countries. The limited availability of workplace mental health interventions highlighted a critical need for more holistic and inclusive wellbeing strategies.

Research also indicated that work-life balance in African contexts is also shaped by cultural expectations and socio-economic realities. Unlike the West that emphasize on clear boundaries between work and personal life, African employees often experience an integration of these domains due to communal obligations and socio-economic pressures (Mokomane, 2012). Nussbaum (2023) provided a capabilities approach which provides useful lens for understanding how structural and cultural factors influence individuals' wellbeing, suggesting that access to resources alone is insufficient without considering contextual constraints. The researcher observed that conventional work-life balance models may not adequately capture African realities, where communal responsibilities and socio-economic obligations frequently intersect with work demands,

Recent literature highlighted the need and importance of culturally responsive HR interventions in improving employee wellbeing across African organizations. April & Shockey (2017) recommended participatory approaches that involve employee in the design and implementation of wellbeing initiatives as they have shown to be effective. The scholars highlighted that these interventions emphasize holistic wellbeing, incorporating physical health, mental resilience, meaningful work and social relationships. In addition, they also integrate indigenous knowledge systems and cultural values, thereby enhancing their relevance and effectiveness within local context. The researcher noted that culturally responsive HR practices are essential in promoting the wellbeing of employee. Such approaches acknowledge the importance of aligning organizational interventions with local cultural values, norms and employee experiences.

The researcher identified a significant gap in the existing literature regarding wellbeing experiences of African migrant workers, particularly Zimbabwean residing in diaspora such UK. This gap underscores the need for empirical studies that examine how migrant experiences, cultural identity, and organizational practices interact to shape wellbeing of migrant workers.

Drawing from the reviewed literature, the researcher concluded that employee wellbeing in African contexts is influenced by complex interaction of cultural, social, economic, and institutional factors. The researcher further inferred that employee wellbeing experiences of Zimbabwean migrant workers in the UK are likely shaped by both African cultural expectations and the organizational realities of the host country. Hence there is a need for context-specific research that explores how these intersecting influences affect migrant worker wellbeing and inform culturally responsive HR practices.

2.4.6. Case study 1.

Foglia, E., Ferrario, L. and Garagiola, E. (2026). *‘Enhancing healthcare workers’ safety and well-being through a comprehensive qualitative analysis across hospital settings.* **Scientific Reports, 16 (1) 5084.**

The research was developed in response to growing concerns about healthcare workforce pressures, including stress, burnout, heavy workloads, staff shortages, and long-term psychological effects associated with the demanding healthcare settings. Foglia’s work recognised that healthcare workers wellbeing extends beyond physical workplace protection. The study argued that organizations should adopt a broader approach that encompasses mental health support, supportive leadership, employee engagement initiatives, and technology-based solutions to strengthen workforce wellbeing. From these findings, the researcher observed that employee wellbeing is a multifaceted construct that required integrated organizational interventions rather than isolated workplace health measures.

The study further suggested that healthcare worker wellbeing directly influences organizational outcomes. They highlighted that poor employee wellbeing may contribute to burnout, reduced job satisfaction, absenteeism, workforce turnover, and lower quality of patient care, whereas supportive workplace environments can improve employee retention, motivation, healthcare service delivery. Foglia et al. (2026), emphasised that investing in employee wellbeing is not only beneficial for staff but also essential for maintaining effective and sustainable healthcare systems. The researcher noted that these findings reinforce the strategic importance of employee wellbeing as a determinant of both individual performance and effectiveness of the organization.

The research contributed to wider employee wellbeing literature by reinforcing that worker wellbeing is multidimensional, incorporating psychological health, workplace safety, emotional support, organizational culture and professional fulfilment. All of these dimensions influence employee performance and long-term organisational success. The researcher further observed that the study supported contemporary perspectives that position employee wellbeing as a critical organizational asset rather than merely an employee welfare concern.

Although the study provided a comprehensive analysis of health care workers' wellbeing, it mainly focused on general wellbeing dimensions and the study did not adequately explore, how wellbeing directly improves organizational performance and the study broadly discussed healthcare workers without focusing on specific professional groups such as nurses, care workers or doctors who may experience different wellbeing challenges. The researcher therefore identified a gap in the literature concerning the mechanisms through which wellbeing influenced productivity, organizational commitment, and overall organizational performance. This limitation highlighted the need for further research examining the relationship between employee wellbeing and organizational outcomes in different occupational and cultural contexts.

2.4.7. Case Study 2.

Hall, L.H., Johnson, J., Watt,I., Tsipa, A. and O'Connor, D.B.(2016) *Healthcare Staff Wellbeing, Burnout, and Patient Safety: A Systematic Review*'. PLOS ONE, 11(7).

The research examined the relationship between healthcare employee wellbeing, burnout, and patient safety outcomes. The researchers reviewed empirical studies involving healthcare professionals to understand whether employee wellbeing affects healthcare performance and patient care quality.

In their research, they showed that poor employee wellbeing, including stress, anxiety, depression, exhaustion, and burnout, was consistently associated with poorer safety outcomes. Healthcare workers experiencing burnout were more likely to report medical errors, lower work performance, and reduced quality of care. The researcher observed that the findings established a clear relationship between employee wellbeing and organizational performance outcomes. This suggested that employee wellbeing is not only a workforce concern but also a critical determinant of service quality and patient safety within healthcare organizations.

The research argued that healthcare organizations should view employee wellbeing as an organizational priority rather than solely an individual responsibility. Interventions such as mental health support, manageable workloads, supportive leadership, wellbeing programs and safer work environment were identified as important approaches to improving staff wellbeing and healthcare outcome. The researcher further noted that the study highlighted the importance of proactive organizational interventions in mitigating burnout and promoting employee wellbeing. These findings reinforce the view that organizations play a significant role in creating working environments that support both employee health and organizational effectiveness.

The researcher noted that this study links strongly to Foglia et al. (2026), as both studies emphasized that employee wellbeing among health professionals directly affects organizational effectiveness, staff retention, and service quality. Collectively, these studies demonstrated that wellbeing should be viewed as a strategic organizational resource rather than solely an individual responsibility.

Despite contributions made by this study, the researcher identified several gaps in literature. The review did not fully investigate the effectiveness of specific wellbeing interventions over time. There is also insufficient focus on organizational support and how the support can reduce burnout among employees. Additionally, the research did not sufficiently examine the impact of external crisis such as economic instability or workforce migration on employee wellbeing. The researcher therefore concluded that further research is required to explore how organizational and environmental factors interact to shape employee wellbeing across different occupation and cultural settings.

2.4.8. Case Study 3.

Ivlevs, A., Nikola, M., &Graham, C. (2019). *Emigration, remittance and the employee- wellbeing*. **Journal of Population Economics, 32(1), 113-151)**

Ivlevs, Nikola, and Graham (2019) examined the relationship between migration, remittances, and employee wellbeing among migrant workers and families who remained in their country of origin. The study moved beyond traditional economic indicators such as remittances and employment by emphasizing that migration outcomes should also be assessed through measures of life satisfaction, happiness, mental health, and emotional wellbeing. The researcher observed that this approach broadened the understanding of migrant wellbeing by recognizing the importance of non-economic dimensions in evaluating migration unique experiences.

The researchers explored how migration and remittances influenced the subjective wellbeing of migrant workers and those left behind. Their findings revealed that remittances often contribute positively to wellbeing by improving household living standards. However, the study also demonstrated that migration generates social and emotional consequences that financial resources alone cannot fully address. The researchers highlighted that while remittances strengthen economic wellbeing, migration, frequently produces emotional strain, loneliness and reduced social interaction. The researcher noted that these findings illustrated the complex and multidimensional nature of migrant wellbeing, where economic gains may coexist with emotional and emotional challenges.

The study contributed to the wellbeing literature by arguing that policy makers should consider both financial indicators and psychological outcomes when evaluating migration policies. The researcher further observed that the study provided important evidence that economic success does not necessarily translate into overall wellbeing, particularly when migration disrupts family and social networks.

Based on the reviewed literature, the researcher identified a need for further research examining how workplace environments, organizational practices, and migration policies interact to influence the wellbeing of migrant workers across different national and cultural contexts. These gaps are particularly relevant to studied of Zimbabwean migrant workers in the UK, whose wellbeing is shaped by migrated-related challenges, workplace conditions, cultural adjustment and family responsibilities across borders.

2.5 RESEARCH GAP

Many studies focus primarily on workplace conditions and organizational support, while giving limited attention to how these interact with transnational pressures. Although research acknowledge remittances, it often treats them as economic outcomes rather than ongoing sources of stress and obligation that shape migrants' daily wellbeing.

Secondly, current studies tend to examine factors influencing wellbeing in isolation. For example, research on working conditions, remittances or social relationships is often conducted separately, resulting in a fragmented understanding. There is limited research that integrates workplace factors and cross-border responsibilities within a single analytical framework.

Thirdly there is lack of context-specific research focusing on Zimbabwean migrant care workers in the United Kingdom. Much of the existing literature examines migrant workers as broad group, without accounting for country-specific cultural expectations, migrant histories, and remittance patterns that shape wellbeing differently.

Finally, existing theoretical applications remain limited. While theories such as Human Capital, Maslow's and transnationalism are widely used, they often fail to fully capture the complex realities of migrant workers balancing employment demands with family obligations across borders. Similarly, Transnationalism Theory is rarely integrated into organizational and human resources management studies.

This study seeks to address these gaps by providing an integrated analysis of employee wellbeing, combining workplace factors and transnational dynamics to better understand the lived experiences of Zimbabwean care workers in the UK.

2.6. A CONCEPTUAL FRAMEWORK: DEVELOPING A HUMAN RESOURCE FRAMEWORK TO ENHANCE EMPLOYEE WELLBEING ZIMBABWE CARE WORKERS IN THE UK.

The conceptual framework below illustrates how human resources practices influence the wellbeing of Zimbabwean care workers in the UK while recognizing the transnational and workplace pressures that influence their experiences. The framework identified HR practices as the independent variable and these include compensation, working conditions, training and development and organizational support systems. These practices are expected to positively influence employee wellbeing by creating supportive and inclusive work environments.

The framework also acknowledged that Zimbabwean migrant workers experience several contextual and transnational challenges, such as family separation, cultural adjustment difficulties and remittance obligations. These challenges directly affect both employee wellbeing and the effectiveness of HR interventions. The framework further explained that HR practices influence employee wellbeing through mediating mechanisms including job satisfaction, perceived organizational support, inclusion and motivation. Through these mediators, supportive HR practices improve employee wellbeing.

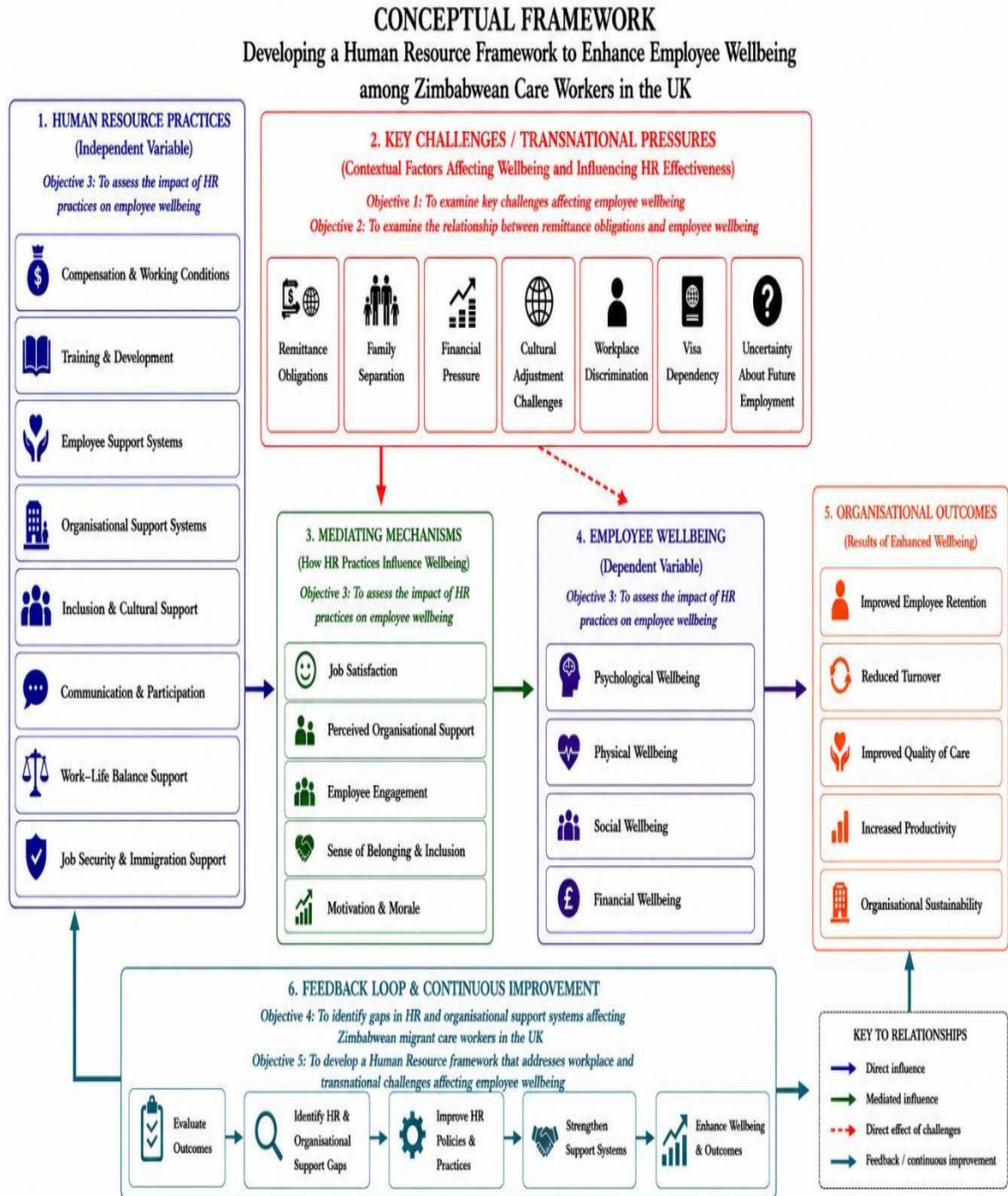


Figure 2.4. Conceptual Framework

Source: Researcher's own conceptualisation based on literature (2026)

The conceptual framework will be discussed under the following headings;

2.6.1 Human Resource Practices

The framework identified Human Resource Practices as the independent variable influencing employee wellbeing among Zimbabwean care workers in the UK. These practices include compensation, working conditions, employee support systems, cultural and immigration support, communication, work life balance and to mention a few. The framework proposed that these HR practices directly contribute to employee wellbeing and help employee manage workplace and migration-related challenges.

2.6.2 Transnational Pressures and Key Challenges

The framework recognized that Zimbabwean care workers experience unique transnational pressures that influence their wellbeing. These challenges include family separation, financial pressures, cultural adjustment difficulties, work place discrimination, visa dependency and uncertainty regarding future employment. These factors create additional stressors that may negatively affect employee wellbeing if not adequately addressed through organizational support.

2.6.3 Mediating Mechanisms

The framework proposed that relationship between HR practices and employee wellbeing is mediated through several psychological and organizational factors. These include job satisfaction, employee engagement, sense of belonging and inclusion, motivational and morale. Effective HR practices strengthen these mediating mechanisms, which in turn enhance employee wellbeing. Conversely, transnational pressures may weaken these mediating factors, reducing their positive impact on wellbeing.

2.6.4 Employee Wellbeing as the Central Outcome

The framework identified employee wellbeing as the primary outcome influenced by HR practices and transnational challenges experienced by Zimbabwean care workers in the UK. Wellbeing is conceptualized across four

dimensions; psychological wellbeing, physical wellbeing, social wellbeing, and financial wellbeing. Effective practices and organizational support enhance these dimensions of wellbeing, enabling employees to cope better with workplace and migrated-related challenges.

2.6.5 Organizational Outcomes of Enhances Employee Wellbeing

The framework proposed that improved employee wellbeing contributes to positive organizational outcomes. Employees who experience higher levels of wellbeing are more likely to remain with their employer, resulting in improved employee retention and reduced staff turnover. Enhanced wellbeing also promotes greater productivity and improves the quality of care delivered to clients. Consequently, organizations are better positioned to achieve long-term sustainability and organizational success.

2.6.6 Feedback Loop and Continuous Improvement

A key feature of the framework is the feedback loop and continuous improvement process. Organizations are encouraged to evaluate wellbeing outcomes and identify HR and organizational outcomes and identify HR and organizational support gaps affecting Zimbabwean migrant care workers. Findings from this evaluation can then be used to strengthen HR policies and support systems, ensuring that workplace practices remain responsive to both organizational needs and transnational challenges. This creates a continuous cycle of improvement that promotes employee wellbeing and organizational success.

2.6.7 Contribution of Migrant-Sensitive HR practices

Overall, the framework demonstrated that migrant-sensitive HR practices can effectively address the unique challenges experienced by Zimbabwean care workers in the UK. By strengthening mediation mechanisms such as job satisfaction, organizational support, engagement, belonging and motivation,

organizations can improve employee wellbeing while simultaneously enhancing organizational performance and sustainability.

2.7. SUMMARY

In conclusion, this chapter reviewed literature on human resources practices and employee wellbeing, indicating that supportive practices influence employee wellbeing through mechanisms such as job satisfaction and organisational support. It also highlighted the role of contextual factors like visa dependency, discrimination, and cultural adjustment. However, the review identified a key gap; existing frameworks largely ignore transnational pressures such as remittances, family separation, and financial strain-that significantly affect migrant worker's wellbeing.

To address these gaps, the study proposed a conceptual framework that integrates organizational factors and transnational pressures, providing a more comprehensive understanding of employee wellbeing among Zimbabwean care workers in the UK. The next chapter presents the research methodology adopted to investigate the study's objectives.

CHAPTER 3

RESEARCH METHODOLOGY

3.1. INTRODUCTION

This chapter outlined the research methodology used to investigate employee wellbeing among Zimbabwean care workers in the UK, using Marbleside Care as a case study. It explained the research philosophy using the research onion and it adopted a mixed-methods approach, combining both qualitative and quantitative techniques to provide a comprehensive understanding of the research problem. The chapter discussed the research design, philosophical assumptions, data collection methods, sampling techniques, data analysis, and ethical considerations guiding the study. The chapter also justified the methodological choices in relation to the research objectives.

3.2. MAIN OBJECTIVE

To develop a Human Resource framework to enhance employee wellbeing among Zimbabwean care workers in the United Kingdom within a transnational context.

3.3. RESEARCH PHILOSOPHY

The study adopted the Research Onion framework proposed by Mark Saunders to guide the methodological design of the research. At the outer layer of the research onion below, the research adopted the pragmatism philosophy, as the research combined both qualitative and quantitative methods to gain a comprehensive understanding of employee wellbeing among Zimbabwean care workers in the UK. The study used a mixed method approach incorporating both deductive and inductive reasoning. Deductive reasoning was applied in the quantitative phase through the use of structured questionnaires, while inductive reasoning was employed in the qualitative phase to explore participants' lived experiences through interviews.

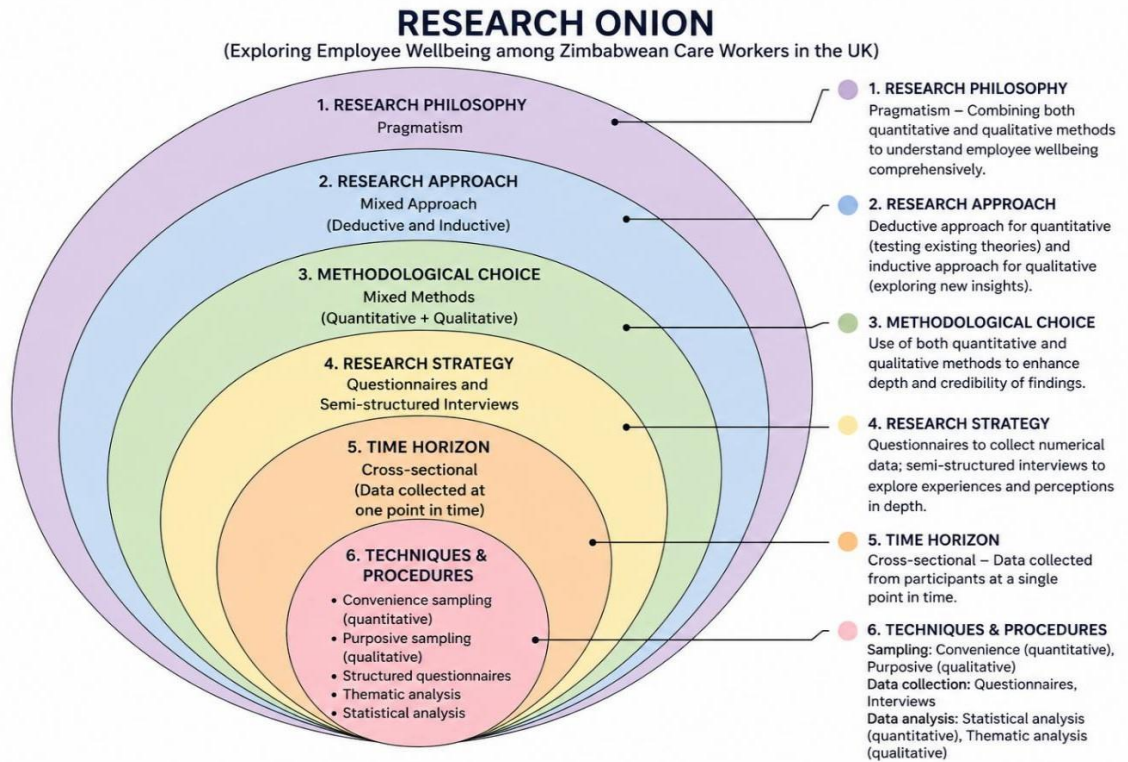


Figure: 3.1: Research Onion

Source: Mark Saunders (2026)

In terms of methodological choice, the study adopted a mixed methods methodology, combining quantitative and qualitative techniques to enhance the depth and credibility of the findings. The research strategy included the use of questionnaire and semi-structured interviews. Questionnaires were used to collect numerical data relating to employee wellbeing, while interviews provided in depth insights into participant's experiences and perceptions.

The study employed a cross -sectional time horizon, as data was collected from participants at a single point in time rather than over extended period. Finally, the techniques and procedures involved the use of convenience sampling for quantitative phase and purposive sampling for qualitative phase. Quantitative data was analysed using thematic analysis to identity key theme related to the wellbeing of migrant care workers in the UK.

3.4. RESEARCH APPROACH

The study adopted an abductive approach which integrated both inductive and deductive reasoning: On deductive, the researcher tested quantitative patterns on relationships between HR practices and wellbeing. On inductive, the researcher explored participants' lived experiences to generate insights.

3.5. RESEARCH DESIGN

A convergent parallel mixed method design was used that is quantitative and qualitative data were collected at the same time, data was analysed separately and the results were then merged for interpretation. This allowed the researcher with triangulation of findings, stronger validity and a more holistic HR framework.

3.6. TARGET POPULATION

The target population comprised Zimbabwean stakeholders involved the care sector in the UK. This included Zimbabwean care workers employed at Marbleside Care, management, representatives of UNISON (which is one of the largest trade unions in the UK representing workers across health and social care), and staff from the Zimbabwe Embassy involved in matters affecting Zimbabwean migrant workers. All staff were aged 18 years and above. The target population consisted approximately 80 participants, from which respondents for both the qualitative and quantitative phases of the study were selected.

3.7. SAMPLING STRATEGY

3.7.1. Sampling Techniques

A combination of convenience and purposive sampling was employed. Convenience sampling was used to select care workers who were readily available and willing to participate in the research. Purposive sampling was used to select management personnel, UNISON representatives, and Zimbabwe

Embassy staff based on their expertise and involvement in issues affecting Zimbabwean care workers.

3.7.2. Sample Size

A sample of 65 respondents was used on quantitative research and 15 for qualitative research. The sample size included employee employed by Marbleside Care and relevant stakeholders involved in the care sector.

3.8. DATA COLLECTION METHODS

3.8.1. Quantitative Data Collection (Questionnaires)

Structured questionnaires were used to collect numerical data on employee wellbeing. The researcher distributed some of the questionnaire online and some were printed and handed over to respondents. The questionnaires included Likert-scale questions, Sections on -Job satisfaction, work stress, remittance, HR and policy support and work -life balance.

3.8.2. Qualitative Data Collection (Interviews)

Fifteen semi structured interviews were conducted to gain deeper insights. Ten interviews were done face to face at an agreed time and in a setting which allowed the participants to speak freely. Five interviews were done virtually because of interviewees tight schedules. Before each interview, participants were informed about the purpose of the research, confidentiality, and their right to withdraw. Informed consent was also obtained before the interviews were recorded.

The interview questions focused on:

- Personal experiences of working in the UK care sector
- Cultural, workplace and immigration-related challenges
- Perceptions of HR policies and support
- Suggestions for improving wellbeing

Interviews lasted for about 30 minutes and were recorded with consent.

3.9. DATA ANALYSIS

3.9.1. Quantitative Analysis

Data was analysed using descriptive statistics (frequency and percentages).

3.9.2. Qualitative Analysis

Qualitative data was analysed using thematic analysis involving transcription of interviews, coding of responses, identification of themes and interpretation of findings.

3.9.3. Integration of Data

Findings from both data set was integrated by comparing results, identifying convergences and divergences and using qualitative insights to explain quantitative trends.

3.10. VALIDITY AND RELIABILITY

For the quantitative component reliability was ensured through the use of consistent measurement instruments and structured data collection procedures, while validity was enhanced by ensuring that the research instrument captured the constructs under the investigation.

For qualitative component, trustworthiness was established through credibility, dependability, and transparency in the research process. Semi -structured interviews allowed for in-depth exploration of participants' experiences, while probing and clarification enhanced the accuracy of responses. A systematic approach to thematic analysis was employed.

3.11. ETHICAL CONSIDERATIONS

Ethics are explained by Fouka and Manzorou (2017) as the guiding norms or requirements for conduct that distinguish between proper and wrong. Ethical considerations were carefully observed throughout the study to ensure the protection and dignity of all respondents. Prior to data collection, informed

consent was sought from each participant, with a clear introduction providing the purpose of the study, their voluntary participations, and their right to withdraw at any stage without penalty. Confidentiality and anonymity were strictly maintained by removing any identifying information from the data. Given the sensitive nature of the topic care was taken to conduct interviews in a respectful and non-intrusive manner, allowing participants to decline any questions they found uncomfortable. All data collected was securely stored and accessed only by the researcher. These measures ensured that the research adhered to established ethical research standards and safeguarding the wellbeing of participants.

3.12. LIMITATIONS

The research was subject to several limitations. First, the use of a qualitative approach with relatively small, purposively selected sample of Zimbabwean care workers in the UK limited the generalisability of the findings to wider populations, however this was addressed by providing a detailed and in-depth descriptions of participants' experiences, allowing the transferability of results to similar contexts.

Secondly, the reliance of self-reported data introduced response bias, this was mitigated the use of semi-structured interviews that allowed for probing and clarification of responses.

Third, given the sensitive nature of the topic, some participants were reluctant to fully disclose their experiences; this was addressed by the researcher strongly emphasized on anonymity and confidentiality, a safe, respectful interview environment was maintained.

3.13. SUMMARY

The chapter presented a mixed method approach combining qualitative and quantitative techniques to explore employee wellbeing among care workers in the UK. The study was guided by pragmatist research philosophy, which supports the integration of both qualitative and quantitative methods. A mixed-methods approach was used, specifically a convergent parallel design, enabling the concurrent collection and independent analysis of qualitative and quantitative data. Ethical considerations were adhered to and limitations were addressed. The researcher introduces Chapter 4 where the researcher drew data obtained through structured questionnaires and semi-structured interviews.

CHAPTER 4

FINDINGS AND ANALYSIS

4.1 INTRODUCTION

This chapter presents, analyses, and interprets the data collected from Zimbabwean care workers employed within the United Kingdom care sector and other stakeholders involved in the provision of care. The purpose of the analysis is to examine the factors influencing employee wellbeing and support systems available for Zimbabwean migrant care workers.

The chapter is structured according to the research objectives and questionnaire and interview sections. Descriptive statistical techniques are used to summarise demographic characteristics and respondents' perceptions of wellbeing and workplace experiences. The findings are presented using tables, charts, and narrative explanations to facilitate interpretation and understanding.

Qualitative responses obtained from the open-ended questions are analysed thematically to provide deeper insights into the lived experiences of Zimbabwean care workers and the support mechanisms they consider important for enhancing their wellbeing.

The analysis sought to identify major challenges affecting employee wellbeing and to evaluate the extent to which existing human resources practices address the needs of Zimbabwean migrant care workers. The findings generated in this chapter provided the empirical foundation for the development of a Human resources framework that aims to enhance employee wellbeing within the UK care sector. The chapter concluded by highlighting the major findings of the research and the development of a Human Resource framework that enhances the employee wellbeing among Zimbabwean care workers in the UK. These findings informed the recommendations and framework development presented in the subsequent chapter.

4.2 RESPONSE RATE

This section presents the response rate achieved during the collection of data. The questionnaires were distributed to Zimbabwean care workers employed within the United Kingdom care sector who met the study's inclusion criteria. A case study Marbleside Care was used. The response rate is essential as it provides an indication of the level of participation and the representativeness of the sample used in the study.

A total of 65 questionnaires were distributed to potential participants, of which 63 were successfully completed and returned, resulting in a response rate 96.92%. In addition, all 15 participants selected for interviews were successfully interviewed. According to research methodology literature, a higher response rate enhances the reliability and validity of study findings by reducing the likelihood of non-response bias. Therefore, the response rate achieved in this study indicated a high level of data quality and strengthened the credibility of the findings. Table 4.1 presents the study's response rate.

Table 4.1: Response Rate (Quantitative)

Category	Number
Questionnaire Distributed	65
Questionnaire Returned	63
Questionnaire Not Returned	3
Response Rate (%)	96.92%

The response rate obtained was considered adequate and satisfactory for the purposes of the study and provided sufficient data for subsequent analysis. The responses received formed the basis for examining the wellbeing experiences, workplace challenges, migration-related issues and human resource support needs of Zimbabwe care workers in the UK.

4.3 DEMOGRAPHIC CHARACTERISTICS OF RESPONDENTS

The section presents the demographic characteristics of the respondents who participated in the study. The analysis included age, gender, years of working in the UK, employment status, educational qualifications and immigration status. Understanding these characteristics is crucial as they provide context for interpreting findings relating to employee wellbeing among Zimbabwean care workers in the UK.

4.3.1 Age of Respondents

The table below presents the age group characteristics.

Table 4.2: Age Characteristics

Age Group	Frequency	Percentage (%)
18-25	3	4.8%
26-35	8	12.7%
36-45	35	55.6%
46+	17	27%
Total	63	100%

The table above shows the age distribution of respondents. The majority of respondents (55.6%) were aged between 36 and 45, followed by those aged 46 years and above (27%). Respondents aged 26-35 years constituted 12.7 % of the sample, while those aged 18-25 years represented the smallest group at 4.8%. These findings indicated that the study participants were predominately mature adults with considerable life and work experience, which influenced their perceptions of employee wellbeing and workplace challenges within the UK care sector.

4.3.2 Gender of Respondents

The bar graph below presents the statistics for gender of the respondents

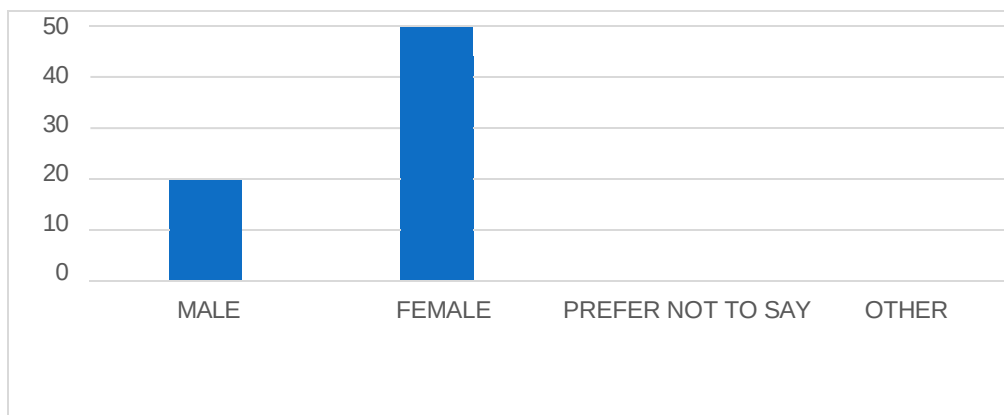


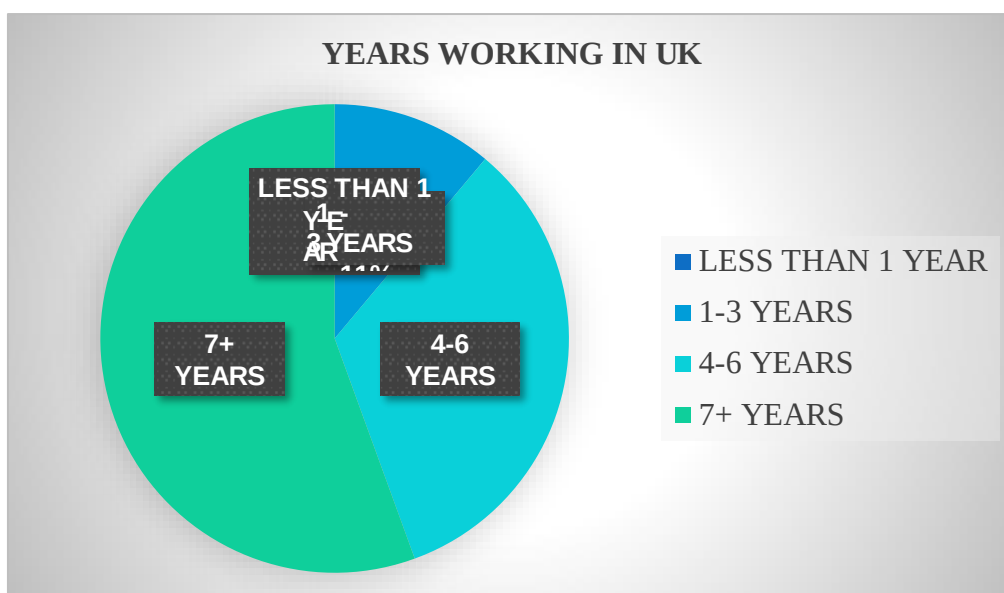
Figure 4. 3 Gender Distribution of Respondents

Figure 4.3 presents the gender distribution of respondents. The findings indicate that the majority of respondents were female, comprising of 44 participants (69.8%), while male respondents accounted for 19 participants (30.2%). No respondents selected either 'Other' or 'Prefer not to say'. The predominance of female respondents reflected the gender composition of the care sector, while traditionally characterized by higher representation of women. The researcher suggested that the experiences and perceptions captured in the study largely reflect those of female Zimbabwean care workers employed in the United Kingdom care sector. This is in support with Asia literature review which noted that women are mostly represented in domestic and caring occupations where emotional labour, exploitation, social invisibility are present.

4.3.3 Years Working in the UK

The chart below presents years working in the UK.

Figure 4.4 Years Working in the U.K



The figure above presents the distribution of respondents according to their years of working in the United Kingdom. The findings indicated that the majority of respondents, 35 (55.6%), had worked in the UK for more than seven years. This was followed by 21 respondents (33.3%) who had worked in the UK for between four and six years, while 7 respondents (11.1%) had worked in the UK for between one and three years. No respondents reported having

worked in the UK for less than one year. These findings suggested that most participants had substantial experience working within the UK care sector and were therefore well positioned to provide informed insights into employee wellbeing, workplace challenges and human resources practice.

4.3.4 Employment Status

Below is a table for employment status

Figure 4. 5. Employment Status

Employment Status	Frequency	Percentage (%)
Full - time	63	100%
Part - time	0	0
Agency	0	0
Other	0	0
Total	63	100%

Table 4.5 presents the employment status of respondents. The findings showed that all 63 respondents (100%) were employed on a full-time basis, while none reported working part-time, through an agency, or under any other employment arrangement. This indicated that the study participants were fully engaged in the UK care sector and were therefore likely to have substantial exposure to workplace practices, working conditions, and wellbeing -related issues. The uniformity in employment status also provides a consistent basis for examining the relationship between human resources practices and employee wellbeing among Zimbabwean care workers in the United Kingdom.

4.3.5 Educational Qualifications

The diagram below presents educational qualifications for respondents.

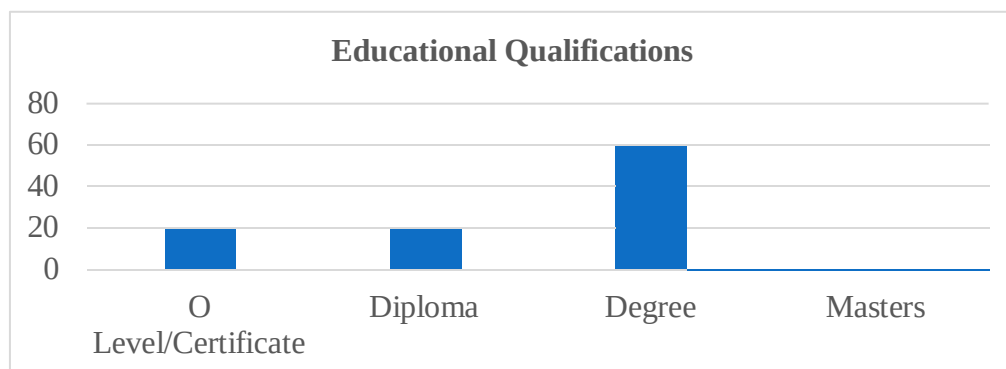


Figure 4.6. Educational qualifications

Figure 4.6 presents the educational qualifications of respondents. The findings revealed that the majority of respondents held a degree qualification, accounting for 37 respondents (58.7%). This was followed by respondents with diploma qualifications, who constituted 11 respondents (19%). Respondents with O' Level or Certificate qualifications only accounted 11 respondents (17.5%), while those with master's degree each represented 3 respondents (4.8%).

The findings indicated that the majority of Zimbabwean care workers participating in the study possessed tertiary qualifications. This suggested a relatively high educated workforce, which may influence expectations regarding career development opportunities, employee support systems, human resource management practices and perceptions of reward and recognition within the UK care sector. Consequently, employees with higher qualifications may have greater expectations of remuneration and participation in decision making process. If these expectations are not adequately addressed, there is a risk of reduced job satisfaction and lower organizational commitment.

The education profile of the respondents also suggested that a significant proportion of Zimbabwean care workers employed in the UK care sector

possessed qualifications beyond the minimum requirements typically associated with care work positions. The majority of respondents possessed degree qualifications. This finding indicated the presence of underutilised skills and competencies within the workforce. These findings highlighted the importance of implementing human resources practices that recognise employees; qualifications, provide opportunities for career advancement, and support the effective utilisation of their skills and expertise. The findings are consistent with evidence from African literature, which suggested that many highly qualified individuals migrate to other countries but are often employed in low-paid jobs that do not match their qualifications or professional expertise.

4.3.6 Immigration Status

The diagram below presents immigration status of the respondents

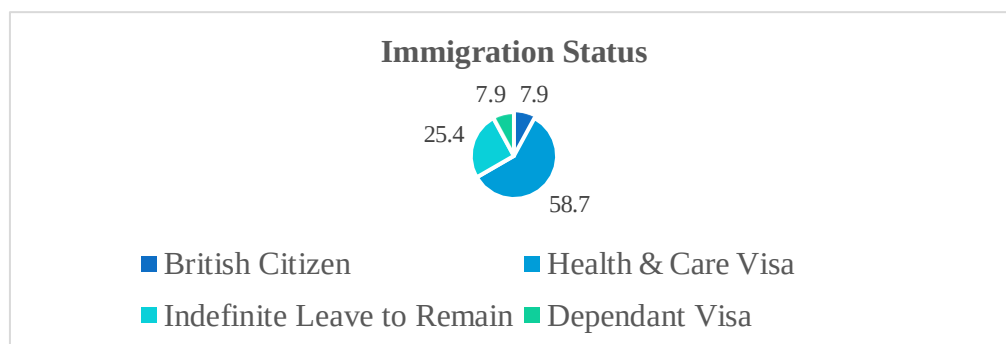


Figure 4.7. Immigration Status

Figure 4.7 presents the immigration status of respondents. The findings indicate that the majority of respondents, 37 (58.7%), were holders of Health and Care Worker Visa. Respondents with indefinite Leave to Remain accounted for 16 (25.4%) of the sample, while British citizens and those on dependent visas each constituted 5 respondents (7.9%).

The predominance of Health and Care Worker Visa holders suggested that many Zimbabwean care workers remain dependent on employer sponsorship and immigration regulations to maintain their legal right to work in the United

Kingdom. This may contribute to concerns relating to job security, employment mobility, and workplace wellbeing. Conversely, respondents with Indefinite Leave to Remain or British Citizenship may experience greater employment flexibility and stability.

These findings highlighted the importance of HR practices that recognise and support the unique challenges associated with different immigration statuses among migrant care workers.

4.3.7 Financial Support Responsibilities

The table below presents financial support by Zimbabwean care workers outside the UK.

Financially Support Family Outside the UK	Frequency	Percentage
Yes	58	92.1%
No	5	7.9%
Total	63	100%

Figure 4.8. Financial Support Responsibilities

Figure 4.8 presents the financial responsibility status of respondents. The findings indicate that the majority of respondents 58 (92.1 %) reported financially supporting family members outside the United Kingdom, while only 5 respondents (7.9 %) indicated that they did not have such responsibilities.

The findings suggested that remittance obligations are significant aspect of the lives of Zimbabwean care workers in the UK. Financial support to family members abroad may create additional economic pressures and influence employees' work decisions, including overtime participation and job retention. Such responsibilities may have implications for employee wellbeing, financial security, and work -life balance, highlighting the importance of supportive HR practices within the care sector. The findings are also supported by Asian and

African literature reviews which indicated how remittances can negatively affect employee wellbeing.

4.4 PRESENTATION AND ANALYSIS OF FINDINGS

4.4.1 Main objective

To develop a Human Resource framework to enhance employee wellbeing among Zimbabwean care workers in the United Kingdom within a transnational context.

4.4.2. Objective 1 To examine key challenges affecting employee wellbeing among Zimbabwean care workers in the UK.

4.4.2.1 Questionnaire findings

Respondents were asked to identify the key challenges affecting their wellbeing while working in the UK care sector. The results are presented in the table below

Figure 4.9. Percentage and Frequency table on Challenges Affecting the Wellbeing of Zimbabwean Care

Challenge	Frequency (n=63)	Percentage (%)
Emotional exhaustion	53	84.1
Work-life imbalance	50	79.4
Financial pressures	47	74.6
Long working hours	43	68.3
Workplace discrimination	38	60.3
Excessive workload	34	54.0
Staff shortages	24	38.1
Illegal migration fees	15	23.8
Visa uncertainty	43	68.25

Note: Multiple responses were permitted; therefore, percentages exceed 100%

The table above illustrates the major challenges affecting the wellbeing of Zimbabwean care workers in the UK. Emotional exhaustion was the most frequently reported challenge, cited by 53 respondents (84.1%), followed by visa uncertainty (68.25%), work-life imbalance (79.4%) and financial pressures (74.6%). Long working hours were reported by 68.3% of respondents, while workplace discrimination affected 60.3%. Excessive workload was identified by 54% of respondents, and staff shortages by 38.1%. The least frequently reported challenge was the payment of illegal migration fees, cited by 23.8% of respondents. These findings suggested that both workplace-related, psychological strain, and financial factors significantly affect the wellbeing of Zimbabwean care workers in the UK. Because respondents could report more than one challenge, the percentages add up to more than 100%.

4.4.2.2 Interview Findings

The interview participants were asked to describe the major challenges they experienced in their work lives.

The following themes emerged.

4.4.2.3 Workload and Long Working Hours

Interview participants consistently identified excessive workload and long working hours as major challenges affecting their wellbeing. Many participants reported working additional shifts due to financial pressure from home and staff shortages, resulting in physical fatigue, emotional exhaustion, and limited opportunities for rest and recovery.

Participant 1 stated:

‘There are times when we work continuous shifts because of staff shortage. At the end of the day, I feel physically and emotionally exhausted. I spent more time driving between clients than I do resting as some clients live far apart, and the mileage allowance does not cover my expenses. The cost of fuel, wear and

tear on my car has become a financial burden. I also fear for my life as am a lone worker and some of the clients are vulnerable’.

Participant 2 commented:

‘The workload can be overwhelming, especially when caring for residents with complex needs. I also work overtime to cover the financial demands from my family back home’.

The findings suggested that workload pressures are not limited to direct care responsibilities but also include travel-related demands. Long -distance travel between shifts increases working hours hence contributing to fatigue and reduces the time available for personal and family commitments.

4.4.2.4 Emotional Demands of Care Work

Participants highlighted that the emotional burden associated with caring for vulnerable individuals. Many respondents described the emotional challenges of supporting service users who were experiencing declining health, chronic illness, or end -of-life conditions. The bond that develops between care workers and service users made these experiences particular difficult to manage.

Participant 3 explained

‘Seeing residents become ill or pass away can be emotionally draining, but we are expected to continue working as normal. We are compelled to suppress our emotions in order to maintain professionalism and continue providing care as nothing happened. This emotional labour is also intensified by staffing shortages. We have limited opportunities for reflection, debriefing, or emotional support’.

Similarly, Participant 5 noted:

‘We become attached to the people we care for, so when something happens to them, it affects us emotionally. However, there is often little time or support to process these feelings.

Participants also highlighted the psychological pressure of managing challenging behaviours, responding to emergencies, and supporting service users with complex physical and mental health needs. These findings demonstrated the substantial emotional labour involved in care work and its impact on employee wellbeing. The results suggest that employers should implement appropriate support mechanisms to help employee manage their emotional demands.

4.4.2.5 Financial and Family Responsibilities

Several participants reported experiencing significant pressure arising from financial commitments and their obligations to support family members in Zimbabwe. Many respondents explained that, in addition to meeting their living expenses in the UK, they were expected to provide regular financial assistance to relatives back home. These transnational family responsibilities created considerable financial strain and contributed to stress, anxiety, and emotional exhaustion.

Participant 6 noted:

‘Apart from paying my bills here in the UK, I also send money home every month. Sometimes it becomes difficult to manage. My family back home does not understand that sometimes I do not have the money and, they keep calling making their demands. I feel like no one care about me, so I work on average six to seven days a week to ensure I met their demands. Money is not difficult to get in this country compared from Zimbabwe, but you work for it day and night’.

Participant 7 explained:

‘There is a lot of pressure because relatives expect you to help simply because you are living in the UK. Even when you are struggling financially yourself, people assume that you have enough money. In my case when I came here, my mum quitted her job voluntarily and, every pay day, I receive a message from her demanding money, she does not check me, and she does not see anything wrong in this. She normally indicates that some parents who have children in the diaspora are well taken of and developing back home, hence giving me the pressure to work without adequate rest. She does not understand my struggles here and I do not have anyone to share this with in the family’.

Participants reported that these expectations often resulted in feelings of guilt, frustration, and emotional distress, particularly when they were unable to meet the needs of the family members. Some respondents indicated that financial obligations influenced their decision to work additional shifts and overtime, which in turn contributed to fatigue and work-life imbalance. These findings highlighted the unique challenges faced by migrant care workers and demonstrate how family responsibilities across national borders can significantly influence employee wellbeing. It also supported the view that wellbeing is shaped not only by workplace conditions but also by broader social and economic pressures experienced outside the workplace.

4.4.2.6 Payment of Illegal Migration fees

Several participants reported experiencing financial hardship as a result of paying substantial migration-related fees before securing employment in the UK. Some respondents indicated that they had borrowed money, sold assets, or incurred debts to finance their migration journey. The pressure to repay these debts after arrival in the UK contributed significantly to financial stress and anxiety.

Participant 8 explained:

‘I paid a large amount of money to secure my move to the UK. After arriving, I spent months worrying about how I would repay the debt because most of my salary was already committed to bills and family responsibilities. I mostly use some credits cards to pay payments and am always in debt’.

Participant 9 stated:

‘I borrowed money from relatives and lenders to pay for my recruitment charges to my employer. The pressure to repay the money made me take on extra shifts, even when I was exhausted’.

Participants reported that the financial burden associated with migration costs affected their ability to save money, meet living expenses, and maintain a healthy work-life balance. In some cases, respondents felt compelled to work excessive hours in order to repay debts which further contribute to physical fatigue and emotional exhaustion.

The findings suggested that the payment of illegal migration fees represents a significant strain for some Zimbabwean care workers. The need to recover migration-related costs may increase vulnerability to exploitation and place additional pressure on workers to accept demanding working conditions. The finding highlighted the importance of stronger regulation of recruitment practices and greater protection for migrant workers to prevent exploitative charging practices and promote the wellbeing of care workers in the UK.

4.4.2.7 Workplace Discrimination

Several participants reported experiencing various forms of workplace discrimination while working in the UK care sector. Respondents described instances where they felt unfairly treated, excluded, or subjected to different standards compared to their colleagues. Some participants perceived that their nationality, ethnicity, accent, or migrant status influenced how they were treated by managers, colleagues, or service users.

Participant 10 explained:

‘Sometimes I feel that my concerns are not taken seriously because I am a migrant worker. It can be frustrating when you feel that you are treated differently from others. There are occasions when service users make negative comments about my accent, skin colour or background. At some point I was called a ‘baboon’. Although it may seem minor, these experiences can be upsetting and affect my confidence.

Some respondents reported feeling overlooked for training opportunities, promotions, or professional development activities. Others indicated that discriminatory attitudes created a sense of isolation and reduced their feeling of belonging within the workplace. Findings suggested that workplace discrimination remains a significant challenge for some Zimbabwean care workers in the UK. These findings highlighted the importance of fostering inclusive and supportive workplace cultures within the care sector. Employers should ensure that robust equality, diversity and inclusion policies are implemented and enforced, while providing training and support mechanisms to address discriminatory behaviours.

These findings are consistent with concerns raised by UNISON which emphasised that all workers are entitled to be treated fairly and equally in the workplace. UNISON official highlighted that many discrimination cases have been reported in form of unfair treatment, harassment, exclusion from opportunities, race and immigration status. The union further noted that migrant workers may experience discrimination linked to their immigration status and encouraged the affected employee to seek support and challenge discriminatory practices within the care sector. A worrisome concern shared was when the official highlighted how a lone care worker was butchered by a client with mental health issues and the care worker left behind a young family, this indicated the magnitude of challenges care workers face in the UK

4.4.2.8. Visa Uncertainty and Work Sponsorship

Several participants reported that concerns relating to visa status and employment sponsorship had a significant impact on their wellbeing. Respondents explained that their right to remain and work in the UK was closely linked to their sponsoring employer, creating feelings of uncertainty and vulnerability. Many participants expressed anxiety about the potential consequences of losing their job, as this could affect their immigration status and future residency prospects.

Participant 11 explained:

‘Because my visa is tied to my employer, I worry about what would happen if I lose my job. The uncertainty can be very stressful. Sometimes I feel unable to challenge unfair treatment because I depend on my employer for sponsorship, I am always thinking about protecting my visa status. Our life here is no longer certain as there are proposed policies to barn migrants in the country. It now just a wait and see game. We do not know what the future holds for us now’.

Participant 12 commented:

‘We acknowledge the important contribution that Zimbabweans are making in the UK economy and care sector. Many Zimbabweans care workers are relying on employer sponsorship to maintain their immigration status, however tighter rules could block or force current workers to leave if they do not meet the sponsorship requirement and the sponsorship issue extends beyond Zimbabwe and has become a significant concern for Zimbabwean migrant workers.

The official’s comment reinforces the concerns expressed by participants regarding visa uncertainty and employer sponsorship. The finding suggested that sponsorship dependency create a sense of insecurity among care workers, particularly where continued employment is directly linked to immigration status. This uncertainty may negatively affect psychological wellbeing and contribute to stress, anxiety and reduced job satisfaction. The results indicated

that immigration-related factors should be considered alongside workplace conditions when addressing the wellbeing of Zimbabwean care workers.

4.4.2.9 Discussion of Findings

The findings from both the questionnaire and interviews indicated that employee wellbeing among Zimbabwean care workers is affected by a combination of workplace and transnational challenges. Key challenges include heavy workloads, staff shortages, long working hours, emotional demands of care work, financial pressures, visa uncertainty, workplace discrimination and family obligations.

The interview findings supported the questionnaire results by providing deeper insight into how these challenges are experienced in daily work and personal life. The evidence suggested that improving employee wellbeing requires HR interventions that address not only workplace conditions but also the unique circumstances faced by migrant care workers.

4.4.3 Objective 2 To examine the relationship between remittance obligations and employee wellbeing.

4.4.3.1 Questionnaire Findings

Respondents were asked to indicate whether their financial obligations towards family members in Zimbabwe affected their wellbeing while working in the UK care sector. The findings revealed that a significant proportion of participants regularly send remittances to support family member, including parents, siblings, children, and extended relatives.

The result suggested that remittances obligations create both positive and negative outcomes for employee wellbeing. While respondents reported satisfaction from being able to support their families financially, many also indicated that these obligations increased financial pressure and stress. Participants reported concerns about meeting family expectations, rising living

costs in the UK, and maintaining regular remittance payments despite fluctuating income levels.

4.4.3.2 Interview Findings

Interview participants provided deeper insights into the impact of remittance obligations on their wellbeing.

Participant 13 explained:

'I left kids back home and I also have parents and relatives who depend on me. Every month it is a requirement that I send money, even when things are difficult here. I normally work 6-7 days a week to meet these financial obligations and I rarely rest and its now affecting my physically health'.

Participant 14 stated:

'When there is an emergency in Zimbabwe am the first one receive a call, I feel pressured to work extra shifts so that I send more money'.

Participant 14 noted:

'Supporting my family gives me purpose, we had nothing back home at least am now in a position to take care of the family back home'.

These responses demonstrated that remittance obligations are often viewed as both cultural responsibility and a source of emotional pressure and it is in line with *Ubuntu* and *huko* philosophies proposed by African and Asian literature review. However, it places a strain on the migrant worker.

4.4.3.3 Analysis and Discussion

The findings indicated that remittance obligations have a significant relationship with employee among Zimbabwean care workers in the UK. Remittances provide emotional satisfaction because workers are able to support family members and fulfil cultural and family expectations. However, the

financial burden associated with regular remittance payments can increase stress, anxiety, and work-related pressure.

Research on migrant wellbeing has similarly found that while remittances can improve the wellbeing of families in the country of origin, migrants often experience increased stress and emotional strain due to the responsibility of supporting relatives abroad. Studies have shown that migrants with family members overseas report higher levels of stress and depression despite positive feelings associated with financial support (Ivlevs,2018).

The findings demonstrated that remittance obligations are important factor influencing employee wellbeing among Zimbabwe care workers in the UK, however, they also contribute to financial stress, emotional pressure, and the need to work additional hours. Therefore, any HR framework designed to enhance employee wellbeing should recognise the unique transnational responsibilities faced by migrant workers and incorporate financial wellbeing initiative and flexible working arrangement to help employees manage these obligations effectively.

4.4.4 Objective 3 To assess the impact of HR practices on employee wellbeing among Zimbabwean care workers in the UK.

4.4.4.1 Questionnaire Findings

Respondents were asked to evaluate the extent to which HR practices influenced their wellbeing within their organization. The findings indicated that HR practices play a significant role in shaping employees' physical, psychological, and emotional wellbeing.

The majority of respondents identified supportive supervisions, access to training, effective communication and employee recognition. However, some respondents reported dissatisfaction with limited support service, inconsistency staff meetings and communication from management and also inadequate recognition of employee contributions.

These findings suggested that effective HR practices can positively influence employee wellbeing, while weaknesses in HR support may contribute to stress and job satisfaction.

4.4.4.2 Interview Findings

Interview participants provided further insights into how HR practices affect their wellbeing.

Participant 15 stated:

‘When managers listen to our concerns and provide support, it makes a big difference to how we feel at work’. However, I feel that there is minimal support from the management.

Participant 16 commented:

‘The training programmes helped me gain confidence in my role. I came from Zimbabwe with minimal training but the training that I got reduced my anxiety when dealing with difficult situations’.

Participant 17 explained:

‘Sometimes communication from management is poor I feel that there is selective communication in the organization, and employees feel that their concerns are ignored’.

Participant 18 also highlighted the importance of flexible scheduling and fair treatment:

‘Having flexibility with shifts helps me manage family responsibilities and reduces stress’.

These responses demonstrate that supportive HR practices contribute positively to employee wellbeing, while ineffective practices can negatively affect morale and job satisfaction.

4.4.4.3 Analysis and Discussion

The findings indicated that HR practices have a substantial impact on employee wellbeing among Zimbabwean care workers in the UK. Positive HR practices can contribute to improved job satisfaction, reduced stress, and enhanced wellbeing.

Research within the health and social care sector has consistently shown that supportive HR practices improve employee engagement, reduce burnout, and promote psychological wellbeing. Training and development opportunities also were identified as important factors influencing wellbeing. However, the findings also suggest that gaps in communication, inadequate support systems, and limited employee involvement in decision making can negatively affect wellbeing. For migrant care worker, supportive HR practices are particularly important because they help employees navigate both workplace demands and the additional challenges associated with migration, cultural adjustment, and family responsibility.

4.4.5 Objective 4 To identify gaps in HR and organizational support systems affecting Zimbabwean migrant workers care workers in the UK.

4.4.5.1 Questionnaire Findings

Respondents were asked to evaluate the adequacy of HR and organizational support systems available within their workplaces. The findings revealed that while some organizations had support system in place, several gaps remained that negatively affected employee wellbeing.

The most commonly identified gaps included poor communication, insufficient recognition of employee contributions, and lack of culturally sensitive support for migrant workers. Some respondents also reported that existing wellbeing programmes were not tailored to the unique needs and experiences of migrant care workers. The findings suggest that current and organizational support

mechanism may not fully address the challenges faced by Zimbabwean care workers in the UK.

4.4.5.2 Interview Findings

Interview participants provided further insight into the shortcomings of existing support systems.

Participant 19 stated:

‘The organization talks about wellbeing, I think they try to cover the general wellbeing of all employees however, I feel it is too generalized. There are support services available but most of them do not cover us when employees for example, I came under the Health and Care visa and I was a new driver and I was not supported with any refresher courses to drive in the UK roads or any induction on life in the UK’.

Participant 20 commented:

‘As migrant workers, we face challenges that many local workers do not experience, but there is little support specifically designed for us. We have company policies but there are too general’.

Participant 21 participant explained:

‘Sometimes it is difficult to discuss personal or work-related problems because there is no confidential support system available’

Participant 22, who came under the Health and Care Visa highlighted:

‘Management rarely asks employees for feedback about challenges we are facing. For example, upon arriving in the country, we experienced difficulties accessing suitable accommodation, enrolling our kids in schools, and understanding unfamiliar administrative systems.’

Participant 23, explained:

We try to support international staff as much as possible through induction programmes and ongoing guidance. However, there are limits to the assistance we provide, particular regarding housing, school placements, and other personal matters that fall outside the employer' direct responsibility. Communication is also important, and we encourage employees to raise concerns. However, operational demands and staffing shortages can sometimes make it difficult to provide the level of support that employees expect.

These responses indicated that employee perceive significant gaps in organizational support structures, communication processes, and employee wellbeing initiatives.

4.4.5.3 Analysis and Discussion

The findings revealed several deficiencies in HR and organizational support systems that affect the wellbeing of Zimbabwe migrant care workers. Although many organizations have implemented general wellbeing policies, employees reported that these measures are often insufficient to address their specific needs as migrant workers.

A major gap related to cultural sensitivity within organizational support systems. Participants indicated that HR policies are often designed for a general workforce and may fail to recognise the unique experiences of migrant employees. This can result in employees feeling misunderstood, unsupported, and excluded from organizational wellbeing initiatives. Addressing these shortcomings is essential for enhancing employee wellbeing.

The identified gaps provided important insights that inform the development of the proposed Human Resources Framework presented in the next chapter. The framework incorporated culturally sensitive support mechanisms, accessible wellbeing services, effective communication strategies and targeted

interventions that recognise the unique challenges faced by Zimbabwean migrant care workers in the UK.

4.5. SUMMARY OF FINDINGS

The findings revealed that employee wellbeing is influenced by workplace, individual and transnational factors.

The first objective examined the challenges affecting employee wellbeing. The findings identified workload, emotional demands of the work, staff shortages, travelling distances between clients, workplace discrimination and emotional labour as the major challenges affecting wellbeing. These factors were found to contribute to stress, fatigue and burn out.

The second objective explored the relationship between remittance obligations and employee wellbeing. The findings showed that remittances and family responsibilities created both fulfilment and financial pressure. Themes of financial stress, family obligations, and transnational responsibilities emerged as important influences on employee wellbeing.

The third objective assessed the impact of HR practices on employee wellbeing. The findings revealed that supportive leadership, effective communication, employee recognition and training opportunities positively influenced employee wellbeing and job satisfaction.

The fourth objective identified gaps in HR and organizational support systems. The findings highlighted inadequate mental health support, limited culturally responsive interventions, poor communication and insufficient recognition of migrant -specific challenges as key gaps affecting wellbeing.

Overall, the findings demonstrated that employee wellbeing in the UK is shaped by the interaction of workplace conditions, human resources practices, and transnational responsibilities. These findings informed the development of

Transformational Integrated Migrant Wellbeing Framework (TIMWF), which provides a holistic approach to enhancing employee wellbeing.

4.6 PROPOSITION EVALUATION

The propositions presented in this study were evaluated using the empirical findings obtained from the questionnaire and interview data. The purpose of the evaluation was to determine the extent to which the study findings supported the proposed relationships regarding the wellbeing of Zimbabwe care workers in the UK.

4.6.1 Evaluation of Proposition 1

Employee wellbeing among Zimbabwean care workers is shaped by the interaction between workplace conditions and transnational pressures.

The findings provide strong support for this proposition. Participants identified workplace-related challenges such as excessive workload, long working hours, emotional exhaustion, workplace discrimination, and inadequate organizational support. In addition, respondents highlighted transnational pressures, including financial obligations, family responsibilities, migration-related debts, and visa uncertainty. The evidence demonstrated that both workplace and external factors interact to influence employee wellbeing. **Therefore, Proposition 1 is supported by the findings.**

4.6.2 Evaluation of Proposition 2

Human resources practices in the UK care sector do not adequately address the unique needs of migrants' workers.

The findings largely supported this proposition. Participants reported shortcomings in communication, employee involvement, settlement support, and wellbeing initiatives. Many respondents felt that existing organizational practices failed to address challenges associated with migration, sponsorship arrangements, family separation, and integrating into UK society. These findings indicated that current HR practices may not sufficiently respond to the

specific circumstances of migrant care workers. **Consequently, Proposition 2 is supported by the empirical evidence.**

4.6.3 Summary of Proposition Evaluation

Overall, the empirical findings supported both propositions. The results confirmed that the wellbeing of Zimbabwean care workers is influenced by a combination of workplace and migration-related factors and that existing HR practices require greater responsiveness to the specific needs of migrant employees. The validated propositions therefore provided the foundation of the development of the Transformational Integrated Migrant Wellbeing Framework (TIMWF) presented in the next chapter.

4.7. RELIABILITY ANALYSIS

Variable	Mean	SD	Interpretation
Wellbeing (WB)	2.60	0.53	Moderate
Transnational Pressure (TP)	4.81	0.67	Very High
Human Resources Management Practices (HRM)	3.32	0.51	Moderate-High

Table :4.11 Statistical analysis

The table above indicated that there was a satisfactory consistency for all constructs after measurement. Cronbach's alpha values exceeded the recommended threshold of 0.7, demonstrating an acceptable reliability and validity for subsequent analysis

4.8. SUMMARY

This chapter presented and analysed the study findings in relation to the research objectives. The findings revealed that employee wellbeing among Zimbabwean care workers in the UK is affected by workplace challenges, as well as transnational pressures including remittance obligations and family responsibilities.

The study further found that supportive HR practices positively influence employee wellbeing, while gaps in organizational support systems limit employees' wellbeing experiences. Based on these findings, the Transformational Integrated Migrant Wellbeing Framework (TIMWF) was developed to integrate organisational, individual, and transnational factors affecting wellbeing. The chapter provides the empirical foundation for the conclusions and recommendations presented in Chapter Five.

CHAPTER 5

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.1 INTRODUCTION

This chapter presents a summary of the research findings, conclusions drawn from the research objectives, recommendations for practice and policy, the contribution of the study, limitations of the research, and suggestions for future research. The study sought to develop a Human Resource Framework to enhance employee wellbeing among Zimbabwean care workers in the United Kingdom.

5.2 SUMMARY OF FINDINGS

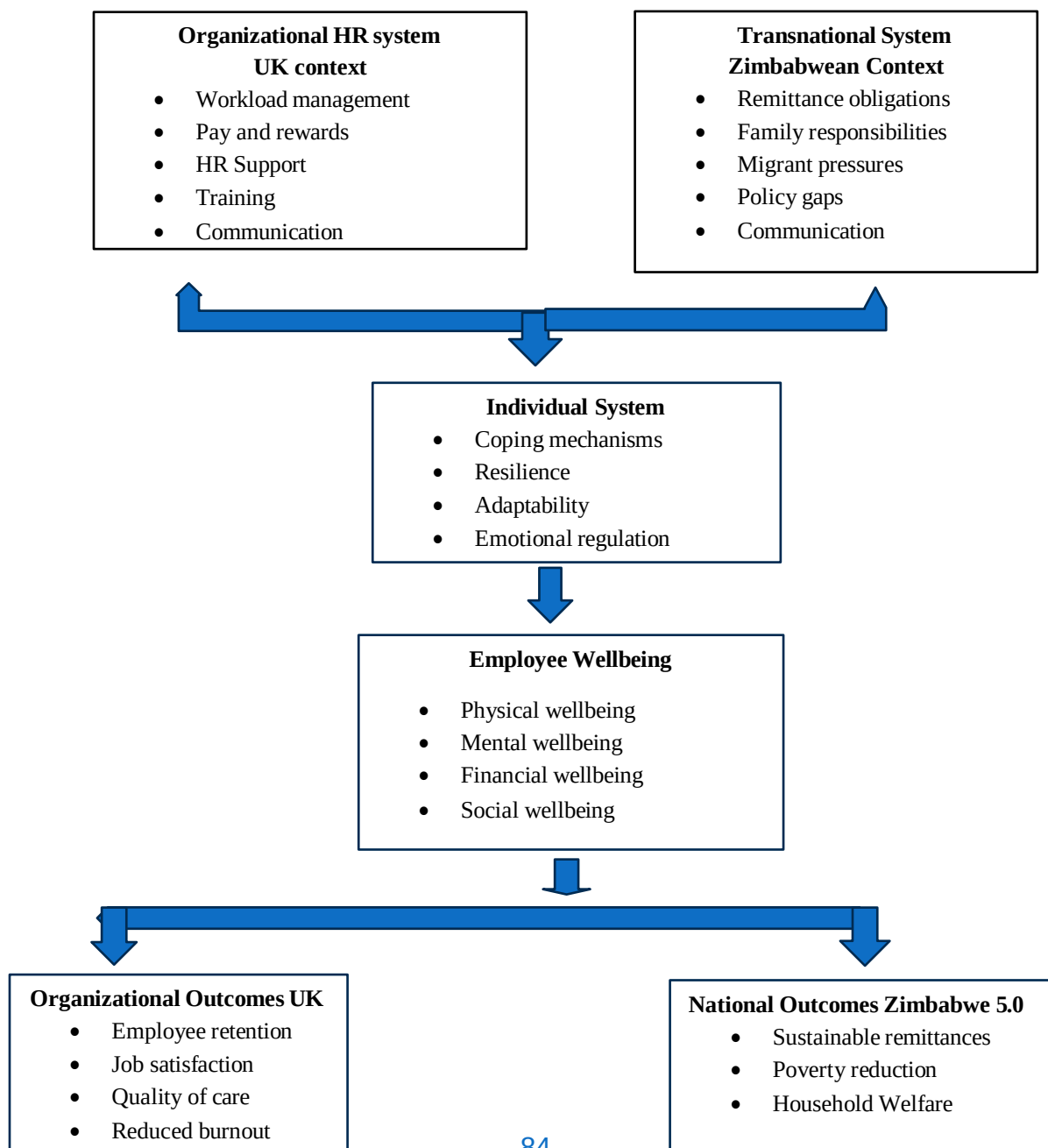
The study examined the factors affecting employee wellbeing among Zimbabwean care workers in the UK and developed the Transformational Integrated Migrant Wellbeing Framework (TIMWF) which shall be discussed below.

The findings revealed that employee wellbeing is affected by workplace challenges including excessive workload, long working hours, emotional demands of care work, staff shortages, and work-life imbalance. These challenges contribute to increased stress, burnout, and reduced wellbeing.

The findings also demonstrated that Human Resources practices such as supportive leadership, effective communication, employee recognition, training opportunities, and flexible work arrangements positively influence employee wellbeing. However, several gaps were identified in organizational support systems, including inadequate mental health support, limited culturally responsive interventions, poor communication, and insufficient employee involvement in decision-making.

Based on these findings, the study developed the Transformational Integrated Migrant Wellbeing Framework (TIMWF), which integrates organizational, individual, and transnational factors affecting employee wellbeing among Zimbabwean care workers in the UK.

5.3. TRANSFORMATIONAL INTEGRATED MIGRANT WELLBEING FRAMEWORK (TIMWF) Figure 5.1



5.4. THE TRANSFORMATIONAL INTEGRATED MIGRANT WELLBEING FRAMEWORK (TIMWF).

The findings highlighted from objective 1 to 4 revealed that employee wellbeing among Zimbabwean care workers in the UK is influenced by a complex interaction of organizational, individual, and transnational factors. Key challenges identified were excessive workloads, long working hours, emotional exhaustion, remittance obligations, family responsibilities, policy related challenges related with migration, limited organizational support and gaps in existing HR practices. The findings further highlighted the importance of individual coping mechanisms and resilience in managing these challenges.

The evaluation of the study propositions provided further evidence that employee wellbeing cannot be adequately understood through organizational factors alone. Proposition one established that employee wellbeing is shaped by the interaction between workplace conditions and transnational pressures, while proposition two demonstrated that existing HR practices do not fully address the unique wellbeing needs of migrant workers. These findings highlighted the need for a more comprehensive and context-specific framework capable of integrating the multiple dimensions influencing migrant employee wellbeing.

In response to these findings, the study developed the Transformational Integrated Migrant Wellbeing Framework (TIMWF) for enhancing employee wellbeing among Zimbabwean care workers. The framework recognises that migrant employee wellbeing is shaped by the interaction of organizational, individual, and transnational factors rather than workplace conditions alone. These interactions will be discussed below:

5.4.1. Organizational HR System

The framework proposes that the **Organizational HR System** plays a critical role in influencing employee wellbeing. The findings from Objectives 1,3, and

4 demonstrated that excessive workloads, lack of communication and inadequate support negatively affected employee wellbeing. Consequently, effective HR Systems are critical in promoting positive employee experiences. Therefore, organizations that implement supportive HR practices are more likely to promote positive wellbeing outcomes.

5.4.2 Individual System

The **individual system** acts as a mediating factor within the framework. Employees utilise coping mechanisms, resilience, adaptability, and emotional regulation strategies to manage the demands arising from both organizational and transnational systems. The findings indicated that many participants relied on personal resilience to navigate workplace stress and family obligations. Consequently, the framework recognises that employee wellbeing is not solely determined by external conditions but also influenced by individual capabilities and coping resources.

5.4.3 Transnational System

The framework further highlighted the importance of the **Transnational System**, which reflects the unique realities of migrant care workers. The transnational system recognises that migrant wellbeing extends beyond the workplace and is influenced by obligations and relationships in the country of origin. The findings under Objective 2 showed that remittance obligations created both motivation and stress among participants. Employees often experiences pressure to provide financial support to family members in Zimbabwe, affecting their financial wellbeing and work-life balance.

Unlike non-migrant employee, Zimbabwean care workers often maintain strong social, emotional, and financial ties with family members in their home country. Remittance obligations, family responsibilities, migrant-related challenges, and policy constraints were found to influence employee wellbeing significantly. While remittances provide a sense of fulfilment and contribute to

family welfare in Zimbabwe, they also create financial pressure and emotional strain that may negatively affect wellbeing. The inclusion of the transnational dimension distinguishes the TIMWF from conventional employee wellbeing frameworks that primarily focus on workplace factors.

5.4.4. Employee Wellbeing

At the centre of the framework is employee wellbeing, which is influenced by interactions between organizational, individual and transnational systems. The framework proposes that employee wellbeing improves when supportive HR practices, effective coping mechanisms and manageable transnational responsibilities operate together. The framework encompasses physical, mental, social and financial wellbeing. The framework suggests that wellbeing is achieved when there is a balance between workplace demands, personal coping resources, and transnational responsibilities. Conversely, wellbeing is likely to deteriorate when pressures from these systems exceed an individual's capacity to cope.

5.5.5 Expected Outcomes of the Framework

The TIMWF proposes that enhanced employee wellbeing produces benefits at both organizational and national levels.

5.5.5.1 Organizational Outcomes (U.K)

At the organizational level, enhanced wellbeing contributes to increased employee retention, reduced turnover intentions, increased job satisfaction, improved quality of care and enhanced organizational performance. These outcomes are particularly important in the UK care sector, which continue to face workforce shortages and high staff turnover.

5.5.5.2 National Outcomes (Zimbabwe 5.0)

At the national level, the TIMWF recognises that improved wellbeing among Zimbabwean migrant care workers has the potential to generate broader socio-economic benefits for Zimbabwe. The framework recognizes that Zimbabwean

migrants care workers constitute an important component of the country's diaspora community and contribute significantly to national development through remittances and knowledge transfer. By enhancing employee wellbeing, migrant workers are better positioned to sustainable remittance flows, improved household welfare, poverty reduction, finance education and health, and increased diaspora participation in the national development initiatives.

Furthermore, improved wellbeing among migrant workers may strengthen diaspora engagement and participation in national development initiatives aligned with Zimbabwe's Vision 2030 and Zimbabwe 5.0 development agenda. The framework therefore positions employee wellbeing as a strategic development resources that can generate economic and social benefits beyond the individual worker, through enhanced productivity, financial stability, and psychological wellbeing, migrant workers are more likely to contribute meaningfully to local community development projects, entrepreneurship initiatives, investment opportunities, and skills transfer programmes within Zimbabwe.

This positions migrant wellbeing not only as an organizational concern but also as a strategic development outcome with implications for Zimbabwe's socio-economic transformation. TIMWF also offers a practical and theoretical foundation for policy makers and diaspora stakeholders seeking to leverage migrant wellbeing as a catalyst for development in Zimbabwe.

5.5. DISCUSSION OF THE FRAMEWORK (TIMWF)

The TIMWF extends existing employee wellbeing theories by integrating workplace, individual and transnational dimensions within a single framework. Unlike conventional HR models that concentrate primarily on organizational factors, the TIMWF acknowledges that migrant workers operate across multiple social and economic systems simultaneously.

The framework demonstrates that employee wellbeing among Zimbabwean care workers cannot be fully understood without considering both UK workplace conditions and responsibilities towards families and communities in Zimbabwe. Therefore, organizations seek to improve employee wellbeing should adopt holistic HR interventions that address workload, pay, support systems, resilience building and financial wellbeing.

5.6. SIGNIFICANCE OF THE TRANSFORMATIONAL INTEGRATED MIGRANT WELLBEING FRAMEWORK (TIMWF)

The significance of TIMWF lies in its ability to provide a comprehensive understanding of the factors influencing employee wellbeing among Zimbabwean care workers in the UK. The framework extends traditional employee models by recognising that migrant workers operate within organizational, individual, and transnational systems that collectively shape their wellbeing experiences.

The framework is particularly significant because it acknowledges the unique transnational realities faced by Zimbabwean migrant care workers. Unlike conventional HR frameworks that focus primarily on workplace factors, the TIMWF incorporates remittance obligations, family responsibilities, and migration-related pressured as important determinants of employee wellbeing. This provides a more holistic and context-specific approach to understanding migrant employee wellbeing.

The framework offers practical guidance for employers and HR practitioners by identifying key areas for intervention, including workload management, employee support, communication, training, and wellbeing programmes. The framework therefore provides a foundation for developing HR strategies that enhance employee wellbeing, improve job satisfaction, and strengthen workforce retention within the UK care sector.

At national level TIMWF highlights the developmental significance of migrant wellbeing within Zimbabwean context. Improved wellbeing among migrant care workers enhances their capacity to provide sustainable remittances, support households and strengthen the socio-economic welfare of families and communities in Zimbabwe. The framework therefore positions migrant wellbeing as an important contributor to national development through the diaspora's economic and social contributions.

TIMWF also contributes to academic knowledge by introducing an integrated perspective that links employee wellbeing, migration, and transnationalism. It provides a theoretical foundation for future research on migrant worker wellbeing and offers a framework that may be adapted and applied to other migrant populations in different contexts.

Overall, the framework demonstrated that enhancing employee wellbeing among Zimbabwean care workers has implications that extend beyond organizational performance to broader developmental outcomes within Zimbabwe. It therefore serves as a valuable tool for researchers, policy makers, employers, and diaspora stakeholders seeking to promote sustainable wellbeing and development outcomes.

5.7 CONCLUSIONS

5.7.1 Objective 1: Challenges Affecting Employee Wellbeing

The study concludes that Zimbabwean care workers face multiple workplace challenges that negatively affect their wellbeing. Workload pressures, long working hours, and emotional demands remain significant source of stress within the care sector.

5.7.2 Objective 2: Remittance Obligations and employee wellbeing

The study concludes that remittance obligations have both positive and negative effects on employee wellbeing. Although remittances strengthen family welfare

and provide emotional satisfaction, they also create financial strain and increase psychological pressure on migrant workers.

5.7.3 Objective 3: Impact of HR practices on Employee Wellbeing

The study concludes that effective HR practices contribute significantly to employee wellbeing. Organizations that provide supportive leadership, training opportunities, recognition, and flexible work arrangement are more likely to promote positive employee wellbeing outcomes.

5.7.4 Objective 4: Gaps in HR and organizational Support Systems

The study concludes that existing organizational support systems do not adequately address the unique needs of migrant care workers. Significant gaps exist in communication systems, employee engagement mechanisms, and culturally responsive wellbeing interventions.

5.7.5 Objective 5: Development of the TIMWF

The study concludes that employee wellbeing among Zimbabwean care workers can be enhanced through the implementation of the Transformational Integrated Migrant Wellbeing Framework. The framework provides a holistic approach that recognises the interaction between organizational HR systems, individual coping resources, and transnational responsibilities.

5.8. RECOMMENDATIONS

Based on the findings of the study, the following recommendations are proposed:

5.8.1 Policy Makers in Zimbabwe

5.8.1.1 Promote Job Creation and Economic Opportunities in Zimbabwe

The Government of Zimbabwe should prioritise policies that promote sustainable job creation and economic growth to reduce the factors that compel skilled workers to seek employment abroad. Many participants in this study migrated to the UK primarily because of limited employment opportunities, low

wages and economic challenges in Zimbabwe. Expanding employment within healthcare, social care and other productive sectors may reduce dependence on labour migration as livelihood strategy.

The government should encourage investment, entrepreneurship, and skills development programmes that create decent work opportunities for young people and skilled professionals. In addition, improving remuneration and working conditions within Zimbabwe economy may help retain skilled workers and reduce loss of human capital through migration.

5.8.1.2 Enhance Pre-Departure Orientation and Training

Policymakers should develop comprehensive pre-departure orientation programmes for Zimbabwean seeking employment abroad. These programmes should provide information on employment rights, visa requirements, sponsorship arrangements, living conditions, cultural adaptation, and available support services in destination countries. Improved preparation may reduce uncertainty and facilitate smoother integration into host countries.

5.8.1.3 Promote Financial Literacy and Migration Awareness

Government agencies should provide financial literacy programmes to prospective migrant workers to help them understand the costs and risks associated with migration. Such programmes should include information on budgeting, debt management, remittances, and the dangers of borrowing or selling assets to finance migration.

5.8.1.4 Strengthen Bilateral Cooperation with Destination Countries

The Government of Zimbabwe should strengthen cooperation with governments and employers in destination countries such as the UK to promote welfare and protection of Zimbabwean migrant workers. Bilateral agreements could include provisions relating to ethical recruitment, employment standards, worker protection, and access to support services.

5.8.1.5 Recognise Wellbeing as a Key Migration Policy Issue

The findings of this study demonstrated that migrant wellbeing is influenced by workplace, financial, social, and immigration-related factor. Policy makers should therefore incorporate wellbeing considerations into labour migration policies to ensure that Zimbabweans working abroad are adequately protect and supported throughout the migration process.

5.8.2 Zimbabwe Care Workers

5.8.2.1 Seek Reliable Information Before Migration

Prospective care workers intending to migrate to the UK should get information from legitimate sources regarding recruitment agencies, sponsorship requirements, visa requirements and employment conditions. This reduces the risk of exploitation and minimise migration-related financial burdens.

5.8.2.2 Build Social Support Networks

Participants in this study highlighted the importance of social support in managing migration related challenges. Zimbabwean care workers should develop positive relationships with colleagues, friends, and community groups to reduce feelings of isolation and strengthen emotional resilience.

5.8.2.3 Prioritise Physical and Mental Wellbeing

Zimbabwean care workers should actively prioritise their physical and mental wellbeing by maintaining a healthy work-life balance, seeking adequate rest, and accessing available wellbeing support services.

5.8.3 Zimbabwean Households

5.8.3.1 Promote Realistic Expectations of Migrant Workers

Families should develop realistic expectations regarding the financial capacity of relatives working abroad. The findings of this study indicate that many Zimbabwean care workers experience significant pressure from family

members who assume that employment in the UK automatically guarantee financial prosperity. Families should recognise the high cost of living and financial obligations faced by migrant workers and avoid placing excessive financial demands.

5.8.3.2 Encourage Shared Family Responsibilities

Households should promote the sharing of financial and caregiving responsibilities among family members rather than rely solely on relatives living abroad. This reduces the emotional and financial burden experienced by migrant workers

5.8.3.3 Develop Alternative Sources of Household Income

Families should explore income-generating activities and entrepreneurial opportunities to supplement household income. Diversifying sources of income may reduce reliance on remittances and contribute to greater financial stability.

5.8.3.4 Recognise the Human Cost of Migration

Households should acknowledge that migration often involves emotional sacrifices, family separation, work-related stress, and adjustment challenges. Greater understanding of these realities may help families provide more effective support and reduce pressures placed on migrant workers.

5.8.4 Care organizations

5.8.4.1 Develop Comprehensive Employee Wellbeing Programmes

Care organizations should implement comprehensive wellbeing programmes that address both the physical and psychological wellbeing of employees. Such programmes should include mental health support, access to counselling service, and employee assistance programmes. Given the high levels of emotional exhaustion reported by participants, organizations should prioritise interventions that help employees cope with the emotional demands of care work.

5.8.4.2 Improve Workforce Planning and Workload Management

Care providers should strengthen workforce planning to reduce excessive workload, staff shortages, and long hours of work. Adequate staffing levels would lessen the need for employees to work excessive overtime and help prevent burnout. Organizations should regularly monitor workloads and ensure that duties are distributed evenly among staff members.

5.8.4.3 Enhance Support for Migrant Care Workers

Care organizations should recognise the unique challenges faced by migrant care workers and provide targeted support during recruitment and induction. This support may include assistance with accommodation, orientation to UK systems, access to community resources, and guidance on schooling, healthcare, and financial services. Dedicated support officer or migrant worker mentors could help employees adjust more effectively to life and work in the UK.

5.8.4.4 Strengthen Communication and Employee Involvement

Care organizations should establish effective communication channels that encourage employees to express concerns and provide feedback regarding workplace issues. Regular staff meetings, wellbeing forums, employee surveys and open-door management policies can improve employee engagement and ensure that workers feel valued and heard.

5.8.4.5 Promote Equality, Diversity, and Inclusion

Organizations should implement robust equality, diversity, and inclusion policies to address workplace discrimination. Regular training should be provided to managers and employees to promote cultural awareness, respect, and inclusive workplace practices. Effective reporting mechanisms should also be established to report discriminatory behaviour without fear of victimization.

5.8.4.6. Provide Support Relating to Visa Sponsorship

Given the concerns surrounding visa uncertainty, organizations should provide clear and transparent information regarding sponsorship arrangements, visa renewal processes, and immigration-related changes. Regular communication on sponsorship matters may reduce anxiety and increase employees' sense of security and organizational support.

5.8.4.7 Adopt the Transformational Integrated Wellbeing Framework (TIMWF)

Care organizations should adopt a holistic wellbeing approach that addresses workplace, social, financial, and migrated-related challenges. TIMWF developed in this study provides a practical model that organizations can adopt to enhance employee wellbeing hence strengthening workforce retention and

5.8.5 Policy makers in United Kingdom

5.8.5.1 Strengthen Protection for Migrant workers

Policy makers should introduce stronger safeguards to protect migrant care workers from exploitation and unfair employment practices. This should include enhancing monitoring of employers sponsoring migrant workers and stricter enforcement of employment rights within the care sector.

5.8.5.2 Review Sponsorship and Visa Arrangements

The UK Government should review visa sponsorship arrangements to reduce the vulnerability associated with employer-dependant visas. Consideration should be given to introducing greater flexibility within sponsorship systems to enable migrant care worker to change employers without jeopardising their immigration status.

5.8.5.3 Address Workforce Shortages in the Care Sector

Policy makers should implement long-term workforce strategies to address staffing shortages within the care sector. Increased investment in recruitment,

training, and retention initiatives would help reduce excessive workloads and improve employee wellbeing.

5.8.5.4 Improve Support for Migrant Worker Integration

National and local government agencies should collaborate with employers and community organizations to provide support services for migrant workers and their families. Such support may include information on housing, education, healthcare, financial management and, community integration.

5.8.5.5 Support the Adoption of Holistic Wellbeing Frameworks

Policy makers should encourage the implementation of evidence-based wellbeing frameworks that recognise the integration between workplace conditions, migration experiences and social responsibilities. TIMWF developed in the study provides a model that can inform future policy and practice aimed at supporting migrant care workers.

5.8.6 Academic Community

The findings of this study highlight the need for further research on the wellbeing of migrant care workers. Future studies should explore the experiences of migrant care workers from different nationalities and cultural backgrounds to determine whether similar wellbeing challenges exist across diverse migrant populations. Further research is also needed to examine the long-term effects of migration on employee wellbeing. Longitudinal studies could provide valuable insights into how migrant wellbeing evolves overtime and how they adapt to changing workplace and social environments. Such studies may contribute to the development of more comprehensive wellbeing models that recognise the interconnected nature of workplace and family-related pressures

5.9. RESEARCH CONTRIBUTION

This study contributes to Education 5.0 philosophy through its attention on developing practical and context-specific solutions to address real-world

challenges affecting Zimbabwean migrant workers, The study moved beyond knowledge generation by developing the Transformational Integrated Migrant Wellbeing Framework (TIMWF), which provides an innovative framework for enhancing employee wellbeing among Zimbabwean care workers in the UK.

The study contributes to the innovation and industrialisation pillars of Education 5.0 by generating a framework that can be applied by organizations, policymakers, and diaspora stakeholders to improve the wellbeing and productivity of migrant workers. Through the incorporation of organizational, individual, and transnational factors, the framework offers practical interventions that support sustainable workforce development and human capital enhancement.

The study also contributes to national development by stressing the role of migrant wellbeing in strengthening sustainable remittance flows, improving house -hold welfare, reducing poverty, and enhancing diaspora participation in economic development. By recognising migrant wellbeing as a strategic development resource, the study aligns with Zimbabwe's vision 2030 objectives of achieving an upper-middle-income economy through human capital development, innovation, and diaspora engagement.

Furthermore, the development of the TIMWF represents a context-specific body of knowledge that contributes to the growing scholarship on migration, employee wellbeing, and human resources management within the Zimbabwean context. This framework may serve as a foundation for future research, policy development, and organizational practice aimed at maximising the developmental contributions of the Zimbabwean diaspora.

5.10. AREAS FOR FUTURE RESEARCH

Future studies may:

- Examine the applicability of the TIMWF among other migrant workers groups in the UK.
- Investigate the long-term impact of remittance obligations on employee wellbeing.
- Evaluate the effectiveness of specific HR interventions designed to improve migrant employee wellbeing.
- Conduct comparative studies between migrant and non-migrant care workers.

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APPENDICES 1

RESEARCH ETHICS COMMITTEE



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BINDURA UNIVERSITY OF SCIENCE EDUCATION [BUSE]

11 June 2026

Bindura University of Science Education
Graduate School of Business
P. Bag 1020
Bindura

Dear Hazvineyi D Tabu

**RE: INSTITUTIONAL RESEARCH COMMITTEE ETHICAL CLEARANCE-
APPROVAL NUMBER: BUSEREC/0258/2026**

Your application for research ethical clearance related to the topic, '**Developing a human resources framework to enhance employee wellbeing among Zimbabwean care workers in the UK: A case study of Marbleside Care** inte has been approved and allocated approval Number: **BUSEREC/0258/2026**. You are to quote this approval number for all correspondences inclusive of consent forms and any other documents as and when appropriate. The approval period is as stated below:

Type of Meeting :	19 th Research Ethics Committee meeting
Approval Date :	11/06/2026
Expiry date :	10/06/2027

The project will automatically discontinue on the expiry date. You can apply for renewal three months before the expiry date. The renewal application should be accompanied by a progress report.

You are not expected to make any changes/adjustments to the protocol including the consent documents. Any trials involving drugs, devices and biologics require approval of the Medicines Control Authority of Zimbabwe before commencement. All problems to do with the safety of participants must be reported to BUSEREC within three (3) working days.

Upon termination of the study, a report has to be submitted to BUSEREC.

Yours sincerely

BUSEREC CHAIRPERSON

Appendices 2: Questionnaire

My name is Hazvineyi Tabu, am a postgraduate student at Bindura University of Science Education. I am currently conducting a research study entitled:

‘Developing a Human Resource Framework to Enhance Employee Wellbeing Among Zimbabwean Care Workers in the United Kingdom’.

The purpose of this study is to explore the experiences, workplace challenges and wellbeing needs of Zimbabwean care workers employed within the UK care sector. The research aims to identify human resources practices and mechanisms that can contribute to improved employee wellbeing and ultimately inform the development of a practical human resources framework tailored to this workforce.

You are being invited to participate because your perspectives and experiences are important to this topic. Your contribution will help strengthen evidence-based recommendations for employers, policy makers, and human resource practitioners.

Please note that participation is voluntary, and any information shared will be treated confidentially and anonymised to protect your identity. You may withdraw from the study at any stage without consequences. Your participation would be greatly appreciated and will contribute meaningfully to advancing knowledge and improving employee wellbeing within the care sector.

Thank you for considering to participate in this study.

Yours Sincerely,



Hazvineyi D.Tabu

Employee Well-Being Questionnaire for Zimbabwean Care Workers in the UK.

This questionnaire aims to understand the experiences of Zimbabwean migrant care workers in the UK, focusing on workplace challenges, migration-related issues, and wellbeing. Your responses are confidential and for academic purposes only.

Instructions:

Please tick (✓) the appropriate response.

Section A: Demographic Information.

1. Age

☐18-25 ☐26-35 ☐36-45 ☐46+

2. Gender

☐Male ☐Female ☐I prefer not to say ☐Other

3. Years working in the UK

☐Less than 1 year ☐1-3 years ☐4-6 year ☐7+

4. Employment status

☐Full- time ☐Part-time ☐Agency ☐Other

5. Highest educational qualification:

☐Secondary education

☐Diploma

☐ Bachelor's degree

☐ Master's degree

☐ Other

6. What is your immigration status?

☐ Skilled Worker Visa

☐ Health and Care Visa

☐ Permanent Residency

☐ Other

7. Do you financially support family members outside the UK?

☐ Yes

☐ No

Section B: General Well-Being

Instructions:

Please indicate how much you agree or disagree with each statement by ticking the appropriate box.

(1 = Strongly Disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, 5 = Strongly Agree)

Statement	1	2	3	4	5
1.I feel stressed because of my job	☐	☐	☐	☐	☐

2. My job negatively affects my mental health ☐ ☐ ☐ ☐ ☐

3. I am satisfied with my work-life balance ☐ ☐ ☐ ☐ ☐

4. I feel emotionally exhausted after work ☐ ☐ ☐ ☐ ☐

5. I feel supported at work ☐ ☐ ☐ ☐ ☐

Section C: Migration-Related Challenges.

1. I experienced difficulties adapting to life here ☐ ☐ ☐ ☐ ☐

2. Immigration policies affect my job security ☐ ☐ ☐ ☐ ☐

3. I have experienced nationality discrimination ☐ ☐ ☐ ☐ ☐

4. I feel socially isolated in the UK ☐ ☐ ☐ ☐ ☐

5. find it difficult to access support services ☐ ☐ ☐ ☐ ☐

Section D: Workplace Challenges

1. My workload is excessive ☐ ☐ ☐ ☐ ☐

2. I feel valued by my employer ☐ ☐ ☐ ☐ ☐

3. I have experienced workplace discrimination ☐ ☐ ☐ ☐ ☐

4. Communication with management is effective ☐ ☐ ☐ ☐ ☐

5. Staffing levels are adequate ☐ ☐ ☐ ☐ ☐

Section E: Transnational Pressure (Remittances and Migration)

1. I regularly send money to my family ☐ ☐ ☐ ☐ ☐

2. Sending money home is important for my sense of responsibility and identity ☐ ☐ ☐ ☐ ☐

3.I sometimes struggle financial due to remittance commitment ☐ ☐ ☐ ☐ ☐

4.I sometimes work overtime to fulfil remittance obligations ☐ ☐ ☐ ☐ ☐

5.My remittance obligations affect my ability to save ☐ ☐ ☐ ☐ ☐

6. Family separation negatively affects me ☐ ☐ ☐ ☐ ☐

7.Remittance responsibilities influence my decision to stay and work in the UK ☐ ☐ ☐ ☐ ☐

Section F: Cultural and Social Adaptation

1.I feel my cultural identity is respected ☐ ☐ ☐ ☐ ☐

2.I can express my views without fear of discrimination ☐ ☐ ☐ ☐ ☐

3.I have good social connections with Colleges ☐ ☐ ☐ ☐ ☐

4.My employer understands the unique challenges faced by Zimbabwean care workers ☐ ☐ ☐ ☐ ☐

5.Cultural adjustment in the UK has not been easy ☐ ☐ ☐ ☐ ☐

Section G: Human Resources Management (HRM Practices)

1. My organization offers adequate support for employees. ☐ ☐ ☐ ☐ ☐
2. I get sufficient training to perform my job effectively. ☐ ☐ ☐ ☐ ☐
3. There are clear policies supporting migrant workers ☐ ☐ ☐ ☐ ☐
4. I have opportunity for career progression ☐ ☐ ☐ ☐ ☐
5. HR policies supports my wellbeing needs ☐ ☐ ☐ ☐ ☐
6. I receive adequate information about my rights a migrant worker in the UK ☐ ☐ ☐ ☐ ☐

Section H: Moderating Factors (Support Systems)

1. Organizational policies adequately protect migrant workers ☐ ☐ ☐ ☐ ☐
2. My organization supports immigration issues ☐ ☐ ☐ ☐ ☐
3. I have access to mental health support ☐ ☐ ☐ ☐ ☐
4. There are systems for reporting workplace issues ☐ ☐ ☐ ☐ ☐
5. I have coping strategies for managing stress ☐ ☐ ☐ ☐ ☐
6. Social support helps me manage work-related- stress ☐ ☐ ☐ ☐ ☐

Section I: HR Gaps

- | | | | | | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. My organization understands challenges faced by migrant workers | ☐ | ☐ | ☐ | ☐ | ☐ |
| 2. HR policies consider the needs of migrant care workers | ☐ | ☐ | ☐ | ☐ | ☐ |
| 3. My organization provides support for migrant-related challenges | ☐ | ☐ | ☐ | ☐ | ☐ |
| 4. More targeted HR support is needed for migrant workers | ☐ | ☐ | ☐ | ☐ | ☐ |

Section J: Open -Ended Questions

1. **What are the main challenges you face as a Zimbabwean care worker in the UK**

.....
.....

2. **How do sending money home (remittances) affect your wellbeing**

.....
.....

3. **What support would improve your wellbeing?**

.....
.....

Thank you for being part of this research

Interview Questions

A. Employee Well-Being

Can you briefly describe your role and how long you have worked in the UK care sector?

1. What motivated you to come to the UK to work in care?

B. Employee wellbeing

3. How would you describe your overall wellbeing working in the UK care sector
4. What aspects of your job positively or negatively affect your wellbeing?
5. Do you experience work related stress? If yes, what are the main cause?

C. Human Resource Practices

6. How would you describe the support you receive from your employer or management?
7. Are you satisfied with training, supervision, and working conditions: Why or Why not
8. In what ways does your organization support your wellbeing?

D. Cultural and Social Experiences

9. How easy or difficult has it been to adapt to UK work culture?
10. Do you feel that your cultural background is understood and respected by colleagues?
11. How do you connect with other Zimbabwean or African care workers?

E. Transnational pressures (Migration and Remittance)

12. Can you describe your experience with sending money home to your family?

13. How does sending remittances affect your financial situation and well-being?

14. How has being away from your family affected you emotionally?

15. Have you experienced challenges adjusting to life and work in the UK?

F. Coping and Support Systems

16. How do you cope with stress related to work and financial responsibilities?

17. What kind of support do you receive from friends, family or community networks

18. Does your workplace provide any support for mental health or wellbeing?

G. Gaps and challenges

19. What challenges do you think Zimbabwean care workers face that employers may not fully understand?

20. What support do you think is missing for Zimbabwean care workers in the workplace?

H. Recommendations

21. What kind of support would improve your wellbeing at work?

22. What changes would you recommend to employers or management in regard to employee wellbeing?

23. What would an ideal support system for Zimbabwean care workers look like?