

A Study on the Relationship between Health Behaviour Self-Efficacy and Well-Being: The Big-Five Personality Traits as Moderator

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This study, quoting Backer's (1993) arguments on the self-efficacy of health behaviour, aims to examine healthy behaviour self-efficacy for independent variables, with well-being as a dependent variable, through regulating effect of the big-five personality traits, and to explore its associated properties. This research takes the Taiwan area enterprise lecturer as the object of study, carries on the adjustment effect analysis by the multi-dimensional social stratum return, the discussion of health behaviour self-efficacy to well-being and the big-five personality traits. The findings discovered that the healthy behaviour self-efficacy has a notable influence on the country young lecturer's well-being. Furthermore, the big-five personality traits confronts the healthy behaviour self-efficacy, and the relation to well-being has a notable adjustment effect. Based on the results, further follow-up study of management practices and implications of the proposal are suggested.

Key words: *Big-Five Personality Traits, Well-Being, Health Behaviour Self-Efficacy.*

Introduction

Albert Bandura, the founder of social learning theory, put forward the "self-efficacy theory" in 1982. "Self-efficacy" refers to the subjective assessment of an individual's ability to perform a certain aspect of his or her work. Self-efficacy is also linked with individual motivation which then shapes individual behaviour. In the past, many domestic and foreign studies have focused on the fields of medicine and health. However, the application of management science has been relatively small. In the past, relevant research results show that "self-efficacy" is an important issue in the study of various specific behaviours. Predicting

variables is a strong predictor of “healthy behaviour” (Heather Becker, 1993, Sadik, 2016, Ambikai & Ishan, 2016). "Healthy behavioural self-efficacy" refers to the degree to which an individual can self-identify to perform healthy behaviours (Becker, Stuifbergen, Oh, & Hall, 1993, Thiangthung, 2016, Joonlaoun, 2017); in many health behaviour studies it is said that self-efficacy is an important factor affecting whether individuals engage in healthy behaviour. Hence, the level of "health behaviour self-efficacy" will affect, directly or indirectly, personal well-being, health behaviour. With lower self-efficacy, fear leads to a physical and mental state or quality of life, meaning poor life satisfaction and well-being, and will also lead to depression, having many negative effects on individuals.

Office workers or workers faced with many different lives and intangible pressure on the workplace, however personality may play a major role in dealing with work pressure and certain personality traits enable individuals to deal with the pressure effectively. Office workers are counting on the small fortunes in life to rule out the root causes of stress and maintain the state of spiritual joy, the so-called well-being. People with better feelings of well-being are often more healthy people. Reviewing past literature, those who have a better feeling of being a happy person, are usually, mentally, relatively healthy people (Ko Yong River, 1993; Shi Jianbin, 1995, Masuo & Cheang, 2017, Rebollo, 2018). The effective energy of staff concentrates in those who will pay attention to and deal with individual emotional problems, those who can also freely control their psychological and emotional well-being (Marcussen, 1997, Rerkklang, 2018). In addition to highlighting the effectiveness of work and affecting performance outcomes, well-being also has a chain reaction to individual physiology and psychology, and its importance is self-evident. In other words, an unhealthy state of mind, character, words and deeds, etc., may affect learning and cause hidden concerns in personality development (Wang Shu Zhen, 1998). In addition, one study (Patricia, 2001) also found that many workers tend to show their good side, hiding their real side, making psychological problems more difficult to detect.

A personality trait is the trait of an individual's reaction under the interaction of congenital and acquired environments. It will affect the person's inner thinking mode and emotion, and it will also manifest itself in the behavioural interaction with the environment, making the individual's thinking and action patterns unique and thus having a unique relationship with others. Several studies (Chen Yu Ping, 2004, Teik Ee, & Aman, 2015, Nuchso, Tuntivivat, & Klayklung, 2016; Rerkklang, 2017) found that the sense of well-being and personality traits were significantly positively correlated with extroversion, kindness, rigorous self-discipline, and dexterity and openness, but negatively correlated with neurotic traits. Different personality traits have a considerable impact on well-being, and this begs the question; does this effect have different interference effects on "healthy behavioural self-efficacy" and "well-being"? Furthermore, different personality traits demonstrate differences in self-efficacy (Chen Yu Ping, 2004; Rerkklang, 2017). In other words, for different personality

traits, their self-efficacy may be different, and may cause the aforementioned self-efficacy of healthy behaviour for well-being.

This study is based on the above motivations, with teachers as the research object, since teachers are symbolic for the society, and serve as a source of learning and imitation. At the same time, in the characteristics of daily life, they have the same or even more fixed lifestyles and patterns as office workers. Overall, this study attempts to explore the relationship between health self-efficacy and well-being of teachers, while also regulating their effect through the five-big personality traits. PCT would be clear whether self-efficacy and health behaviours affect well-being. This study will further the domain of organizational behaviours by highlighting the impact of healthy living practices of workers.

Literature Review

Well-Being

When a country's economy develops to a certain extent and people's lives are rich, they will begin to think about the true meaning of well-being, to redefine the meaning of life, and avoid becoming excessively driven by external materials to ensure the quality of life (Lu Luo, 1998). Four terms arise from studies of the range of well-being from the social science point of view, such as well-being, SWB (subjective well-being), psychological well-being, life well-being (life satisfaction) and so on. Lu Luo (1998) proposed that well-being is constructed in life satisfaction, positive and negative emotions, and includes cognitive and emotional parts. It is an inseparable concept. When individuals feel differently in the subjective mind concerning an event, it will affect well-being. Veenhoven (1994) pointed out that well-being comes from the sum of positive emotions, with less negative emotions, and the degree to which individuals like their lives. According to Keyes and Waterman (2003), well-being is a combination of three dimensions: emotional well-being, psychological well-being and social well-being. Well-being is a broader concept consisting of a number of sub-components. When you are satisfied with your life, you have a sense of subjective well-being. Previous scholars' arguments describe well-being from the perspectives of emotion, cognition and psychology. According to their different connotations, these can be summarised into four of the more common theories: 1) meet the demand theory (Need Satisfaction Theory); 2) trait theory (Trait Theory); 3) judgment theory (Judgment Theory); and 4) dynamic equilibrium theory (Dynamic Equilibrium Model).

In recent years, Chinese scholars of well-being found: social support for well-being, there are significant positive effects on teaching effectiveness, the effect on well-being has intermediary between social support and teaching effectiveness (GRAPHIC, 2013). Work stress and well-being have a significantly low negative correlation, leisure satisfaction and well-being have a significant moderate positive correlation, work stress and leisure satisfaction have a predictive power of well-being (Tang Shunde, 2011, Don, Puteh, Nasir,

Ashaari, & Kawangit, 2016). Life style and leisure participation have significant predictive powers of well-being (Yang Ruru, 2011). Interpersonal conflict has a negative direct influence on well-being, and the leisure adjustment strategy can play a buffer role for the conflict between roles and well-being (Yan Liangmou, 2009). The higher the social support, the better the well-being sense; this was significantly positively related to extraversion, and goodness, rigorous self-discipline, and intelligent openness in personality tendencies and well-being; and neuroticism traits and well-being were significantly negatively correlated (Chen Yu Ping, 2004). The study found that different research factors produced different results, so that there was no consistent conclusion, and the factors affecting well-being were many and complicated. From the relevant theories, it was found that the change of working environment and the change of social support may be due to individuals. Participating activities or links to old experiences affect perception of work, and the response to well-being will vary from person to person. This study defines well-being as "the response to overall life satisfaction and the perception of the frequency and intensity of positive emotions."

Health Self-Efficacy

"Self-efficacy (self-efficacy)" is Bandura's (1977) proposal based on the cognitive behavioural school and psychology school, with "self-adjustment (self-regulation)" as the core of social learning theory, which Bandura believed is "mainly by the behaviour." The result is expected to be influenced by "utility expectation". "Utility expectation" can be seen as "self-efficacy", its theory being that individuals in specific contexts will be born of a construct; this construct determines whether they can complete a task behaviour to the success of faith and self-confidence. Self-efficacy determines the individual's ability to face stress and dilemma, regardless of the initial behaviour, the individual believes that he or she has sufficient ability to generate motivation, cognitive resources and actions to meet the requirements of a situation and try to achieve the goal (Bandura, 1977, 1997, 2005). Self-efficacy is the main foundation of human motivation leading to the generation of action, action is the most basic factor and is the individual's own in the face of completing a specific task to the success of faith. Bandura (2005) applies the concept of self-efficacy to personal health management, emphasising that in addition to the method of drug intervention, individuals should be managed by good health habits to improve physical and mental health.

According to Kasl and Cobb (1966), the health behaviours (health-behaviour) are divided into three categories: preventive health behaviours, disease behaviour and sick role behaviour. The study by Andrews and Withey (1976) found that factors affecting the health of the four elements are: lifestyle, environmental, genetic and health care. One important component of healthy lifestyle behaviours, and health behaviours, are divided into "health-promoting behaviours" and "health hazard behaviour". That is, the more health promoting

behaviours such as exercise, diet and regular life, the better the health; on the contrary, the more smoking, betel nuts and other harmful behaviour, the health status worsens. Harris and Guten (1979) extend Kasl And Cobb's (1966) insights, asserting that "health protection behaviour (HPB), refers to any protection, promotion or maintenance of an individual's conscious health and of ultimately achieving an objective state of health. The behaviour of health, regardless of the individual's conscious or actual health status, the actions taken by the individual to protect, promote or maintain health, whether or not the goal is achieved, can be called healthy behaviour (Harris & Guten, 1979). Gochman (1982, 1997) believes that health behaviours should not only be through observations or specific explicit actions, but should also include activities and feelings at the inner psychological level. Parkerson (1993) argues that healthy behaviour is related to the activities of individuals, groups, organisations, and their decisions, related personnel and outcomes.

Previous studies have pointed out that individuals in the process of engaging in healthy behaviour will gain positive emotional feelings and reduce stress. Since Bandura (1977) proposed that "self-efficacy" is the most explanatory variable in human behaviour, domestic and foreign scholars have widely applied self-efficacy to the study of many general or specific behaviours. Óleary's (1985) review of past research in the use of self-efficacy theory made the discovery that for compliance control and preventive health plans, such as diet and body weight, in pain treatment, "self-efficacy" plays an important role (Qiu Shujuan, 1998). Conn (1997) also pointed out that the improvement of self-efficacy has a significant effect on behaviour change. In 1988, Rosenstock, Strecher and Becker added the concept of self-efficacy to the health belief model, and its evaluation factor, that is, performance expectations (Efficacy Expectation) and result expectation (Outcome Expectation), which increases self-efficacy and has a better explanatory power in the health belief model. The results of medical research points out that for individuals under pressure, there is a significant negative correlation with the degree of their physical condition; when the pressure is too large, they are prone to various diseases, and thus accidents, their work productivity reduced, absenteeism increases and they are prone to enhanced turnover (McVicar, 2003).

Reviewing domestic and foreign scholars' research findings, self-efficacy is generally applied to health behaviour-related aspects to effectively predict individual health behaviours. Individuals with healthy behavioural self-efficacy are more likely to continue to perform healthy behaviours and also demonstrate healthy self-management capabilities. This affects the individual's influence. Overall health behaviours, as well as research on health behaviour self-efficacy is one of the study variables explored, finding factors like self-realisation, interpersonal support, nutrition, performance, income, perceived health, marriage, comfortable performance and level of education have an influence on well-being. There is a significant positive correlation between a health promoting lifestyle and individual self-efficacy of self-conscious health behaviour; there is a significant positive correlation between

health behavioural self-efficacy and a health promoting lifestyle. Enhancing behavioural intent expectation through self-efficacy allows regularised health behaviour to continue and benefit the duration of action expectations (Purdie & McCrindle, 2002).

Big-Five Personality Traits

"Personality" can be said to be a unique and stable state of a person's inner psychology, thinking mode and external behaviour, a dynamic psychological structure that governs individual thoughts, emotions, and behaviours. Stability makes the individual's thoughts, emotions, and behaviours show a unique appearance. The "personality trait" is the individual's consistent pattern in thought, emotion, and behaviour. Gareth and Charles (2000) point out that the so-called "big-five personality traits" affect the long-term performance of self-reflection, feelings and behaviour. Monte and Sollod (2003) believe that personality is a set of personality or habits, so that a body of thought or behaviour has been sustained; the individual in the course of their life, in relation to people, to things, has to adapt to that environment as a whole, and at the time, shows a unique personality. In the past, many research results pointed out that personality traits have considerable situational influence in many causal relationships.

In 1985, Paul Costa and Robert McCrae extended the qualities of their cluster-oriented design, the NEO Personality Inventory (NEO-PI-R), which was based on the work of previous scholars, and put forward the five-big personality traits model (Five-Factor model, FFM). Saucier (1994) argues that the five factors proposed by Costa and McCrae are the most basic structures of personality traits. The five personality trait structures have been produced in different cultures and assessments, proving the inheritance and sustainability of the five-factor model (Judge, Cable, 1997; Zhuang Cui, 2012). In recent years, many studies supporting cross-cultural preliminary tests also confirmed the five major personality traits; the East-West structural model is consistently compatible, and it is universally applicable architecture (Shen Cong Yi, 2003). Since the development of the NEO Personality Questionnaire (NEO-PI-R) by Costa and McCrae, it has been revised several times. The latest revision of the scale consists of 204 questions to measure the level of the five-big personality traits (Ye Guanghui, 2005). In addition, Saucier also used the factor analysis method to extract the Mini-Markers scale of the same five factors in 1994. This scale has 40 questions. Mooradian and Nezlek measured the NEO-PI-R and Mini-Markers scales in 1996 and found that the measurements were very similar. Since the effects are similar, the Mini-Markers scale has the advantages of being short, reliable and easy to understand (Dwifht, Cumming, & Glenar, 1998), and Mini-Markers has become a measurement tool for many FFM- related empirical studies (Zhuang Xianyan, 2013).

In summary, the five-big personality traits refer to the five most representative individual differences in personality traits, namely emotional stability, extroversion, openness, pleasantness and rigor. To understand and describe an individual's unique personality traits, it is necessary to adopt a tool that is broad, stable and consistent; the five-big personality traits of McCrae and Costa are useful for their meaning and connotation that covers the personality, and possess high stability and widely accepted properties. Therefore, this study intends to explore the interference results of personality traits in this study based on their five-big personality traits model.

The Relationship between Health Self-Efficacy and Well-Being

Health behaviour self-efficacy is one of the factors affecting the quality of life. The lower the efficacy, the poorer the physical and mental state. In addition to lowering the quality of life and life satisfaction, lower health behaviour self-efficacy will also lower well-being, and its unhappy teaching atmosphere will also infect students in their development of personality. Effective teachers will pay attention to and deal with the individual problems of students, and also cater for psychological and emotional well-being of its pupil (Marcussen, 1997). In recent years, relevant research on well-being and self-efficacy of healthy behaviours pointed out that well-being and conscious health, life integrity and family relationship are highly correlated; well-being directly affects the health level, whereas family support and conducive environments improve the growth and development of individuals. The relationship between well-being and teaching effectiveness is moderately positive; leisure participation and well-being are predictive of teaching effectiveness. The overall spiritual health is positively correlated with overall well-being, and the spiritual health of the different levels is positively correlated with the well-being of the government (Zhou Shang Zhi, 2012). In addition, self-realisation has a positive impact on well-being (Wu You Wei, 2010), and the well-being of the primary school children is significantly related to physical and mental health (Hong Li Hui, 2010). At the same time, self-realisation, interpersonal support, nutritional effectiveness, income, conscious health, marriage, safety and education have an impact on well-being. In a study of the relationship between teachers' health self-efficacy, well-being and teacher professional development attitudes in Taoyuan County National Middle School, there is a significant positive correlation between teacher health self-efficacy and well-being. The forecasting effect is work achievement, optimistic performance, general teaching performance and physical and mental health.

Studies have shown that improvements in health self-efficacy or healthy behaviour have a significant impact or positive correlation on well-being. However, although many literature findings have been explored, the research is limited to the relationship between individual performance variables and well-being, such as teaching effectiveness, school effectiveness,

etc., or individual health behaviours such as diet, exercise or leisure and mental health behaviour. For overall health behaviour research on health self-efficacy and sense of well-being the literature is silent, forming a research gap; this study will explore this gap and endeavour to verify the relationship between health self-efficacy and well-being of health behaviour, the promotion of which may serve the well-being of workers as it provides practical advice. Therefore, the following research hypotheses are proposed:

Hypothesis 1: Health self-efficacy has a positive impact on well-being

Each adult personality trait is acting in a personal style, and relationships, consistent expression or specific behaviour patterns present what is commonly known as the "character" or "personality." When and well-being is the combined effect through events and personality traits of life, therefore, to explore the form and factor of well-being, the impact of life events and personal qualities still needs to be considered in order to put forward a more complete explanation. Costa and McCrae (1985) first proposed that well-being is a stable trait, that is, their "personal trait theory" (Personality Theory). Personality trait theory takes the point of view of the personal qualities of well-being, such as using personality traits to emphasise different things, that different attitudes will lead to different behavioural responses and differing degrees of feelings. The sense of well-being depends on the individual's mentality or way of looking at the world, and the formation of this kind of well-being may be related to the physiological mechanism that innately triggers the pleasure nerve, such as: individual congenital inheritance or acquired learning outcomes (Veenhoven, 1994).

The Moderator Effect of Big-Five Personality Traits to Health Self-Efficacy and Well-Being

Many past studies have examined the relationship between happiness and the five personality traits, such as: Liu Fangqi (2013), who found that for the personality traits of "extraversion", "open", "rigor", "and goodness," and so on, the sense of well-being was significantly positively correlated; while the "nervousness" of personality traits was significantly negatively correlated with happiness. The personality traits and work self-efficacy of female office workers will influence their career well-being through career-oriented intermediary work (Zhou Jie, 2012). In addition, research on the relationship between the happiness of drama school students and their academic achievement shows that there is a significant moderate positive correlation between the "smart openness" personality traits and happiness; the internal and external controls of beliefs and happiness are both present. There was a significant moderate positive correlation between interpersonal relationships and well-being. The results of the research conducted by Lin Jia Ping (2010) found that "friendliness", "extroversion", "rigor" and "experience openness" were significantly positively correlated

with happiness; while "nervology" and well-being were significantly negatively correlated. In addition, personality traits are positively related to happiness; personality traits, emotional management, etcetera, are relatively predictive of happiness (Zheng Yi Ting, 2008).

According to some scholars' research, individuals whose personality traits are neurotic are more likely to have fears, optimism, and emotional instability, which have a negative impact on life, so their feelings of happiness will be lower; on the contrary, personality traits are outward. People who are sexual, pleasant, rigorous, and open will use social support strategies, so they are more likely to feel happiness and have a positive correlation with happiness. It follows that for an individual with feelings of happiness of individual differences, different personality traits and feelings of happiness are also very different. People with positive personality traits can have more happiness. Therefore, this study intends to use the five personality traits as a regulatory variable to explore the relationship between self-efficacy and the well-being of healthy behaviour. Based on this, the following assumptions are:

Hypothesis 2: The five personality traits have a regulating effect on the self-efficacy and well-being of healthy behaviour.

Hypothesis 2-1: the open personality trait enhances the positive impact of healthy behavioural self-efficacy on well-being.

Hypothesis 2-2: the emotional stability personality trait enhances the positive impact of healthy behavioural self-efficacy on well-being.

Hypothesis 2-3: the extroverted personality trait enhances the positive impact of healthy behavioural self-efficacy on well-being.

Hypothesis 2-4: the pleasant personality trait enhances the positive impact of healthy behavioural self-efficacy on well-being.

Hypothesis 2-5: the strict personality trait enhances the positive impact of healthy behavioural self-efficacy on well-being.

Research Method

Research Scale

Research investigating self-efficacy and happiness or well-being of teachers is limited; specifically researchers have least investigated the health well-being of educational workers i.e., teachers. This study covers the academic year to 102 in Taiwan City Elementary School served as the official teaching of the master teachers.



Well-Being Scale

The well-being questionnaire measured positive and negative feelings and overall life satisfaction; collected on four scoring scale (1 to 4), respectively, higher scores were obtained, showing the overall personal well-being High; and low scores meant low well-being. This scale is adopted from the study of Lu Lo's (1997) where Cronbach's α is .95.

Health Self-Efficacy Scale

This questionnaire was developed using the Self-Rated Abilities for Health Practices Scale developed by Becker (1993). The scale Cronbach's α value is .94. The tabulated amount of factor loadings for each question item is between .589 to .844, consisting of various dimensions reliability between the range of .788 to .912.

Five-Big Personality Traits Scale

This questionnaire uses Deng Jing Yi (2010) Traditional Chinese version of the International Development English Big-Five Mini-Markers personality traits scale. Each factor has loadings between .51 to .88, the composite reliability is between .77 and .87.

Research Results and Discussion

Using the questionnaire survey method, 500 questionnaires were distributed. The actual number of effective questionnaires was 472, with an effective recovery rate of 94.4%. The main variables are: the correlation coefficient between well-being, healthy self-efficacy and the big-five personality traits are less than .8. It is preliminarily determined that there is no multi-collinearity problem between variables.

The Relationship between Healthy Self-Efficacy and Well-Being

The survey showed that the overall average of "Healthy Self-Efficacy" was 4.07, indicating that the status of the "Healthy Self-Efficacy" of the subjects was in the moderate to upper level; the average score of self-efficacy of health behaviours at each level were: exercise 4.02, psychological comfort 4.14, nutrition 4.10, health responsibility 4.02; among them, the state of "psychological comfort" is the highest.

The Moderator Effect by Big-Five Personality Traits

Mode 1 places the control variable as a reference value. Mode two independent variables added health self-efficacy, based on the cumulative explained variance analysis model of R2, they are .029 and .23, respectively.

Mode 2, of R2 changes the amount of .20. $P < .001$, with a significant change in health behaviour self-efficacy analysis on well-being β value .466, reaching $P < .001$ at a significant level, showing healthy self-efficacy has a positive effect on well-being, that is, when health self-efficacy is greater, the higher the feeling of well-being, so the research *hypothesis 1* is supported. Mode 3, after adding the interaction between healthy self-efficacy and extroversion personality traits, the R2 change was .047, $P < .001$, with significant change; the interaction variable β value was .269, which was significant for $P < .001$, therefore *hypothesis 2-1* is supported. Mode 4, after adding the interaction between healthy self-efficacy and open personality traits, the R2 change was .028, $P < .001$, with significant change; the interaction variable β value was .206, which was significant for $P < .001$, therefore, the research *hypothesis 2-2* is supported. Mode 5, self-efficacy added health behaviour and personality trait emotional stability interaction variables, R2 change amount of .031, $P < .001$, with significant changes; the interaction variables β is .216, of $P < .01$ of significant level, thus the research *hypothesis 2-3* is supported. Model 6, after adding the behavioural interaction between healthy self-efficacy and rigor from the big-five personality traits, the R2 change was .017, $P < .001$, with significant change; the interaction variable β value was .158, which was significant for $P < .001$, thus *hypothesis 2-4* is supported. Mode 7, adding the behavioural interaction between healthy self-efficacy and big-five personality traits, the R2 change was .021, $P < .001$, with significant change; the interaction variable β value was .175, which was significant for $P < .001$, concluding that *hypothesis 2-5* is supported.

Table 1: Interference Effects of Five Personality Traits on the Self-Efficacy of Health Behaviors

DV : well-being							
Predictive variable	Mode 1	Mode 2	Mode 3	Mode 4	Mode 5	Mode 6	Mode 7
1. Control variable							
Sex	0.081	0.114**	0.0103*	0.135**	0.128**	0.111**	0.118**
Age	-0.007	0.057	0.091	0.051	0.038	0.069	0.048
Marital status	-0.081*	-0.001*	0.006	0.019	0.003	0.001	0.006
Qualification	-0.031	-0.025	-0.021	-0.018	-0.028	-0.025	-0.028
Education	0.071	0.116**	0.098*	0.110**	0.112**	0.121**	0.116**
Position	-0.049	-0.020	-0.023	-0.010	-0.027	-0.014	-0.016

Term of office	-0.067	-0.022	-0.057	-0.031	-0.024	-0.027	-0.036
Seniority	0.067	-0.021	-0.038	-0.010	-0.074	-0.040	-0.017
School size	-0.070	-0.077	-0.066	-0.074	-0.087*	-0.087*	-0.086*
2. Main effect variables		Mode 2	Mode 3	Mode 4	Mode 5	Mode 6	Mode 7
Health self-efficacy		0.466***	0.268***	0.352***	0.349***	0.381***	0.373***
3. Interaction			Mode 3	Mode 4	Mode 5	Mode 6	Mode 7
Extroversion			0.269***				
Openness				0.206***			
Love promise stability					0.216**		
Rigor						0.158***	
Pleasant surname							0.175***
R ²	0.029	0.232	0.279	0.260	0.263	0.249	0.253
△ R ²			0.047***	0.028***	0.031***	0.017***	0.021***
F	1.52*	13.93***	16.22***	14.67***	14.92***	13.86***	14.16***
N = 472 ; *P < .05 , **P < .01 , ***P < .001							

Conclusion and Recommendations

- (1) Self-efficacy of health behaviour has a positive impact on well-being.
- (2) Extroversion personality traits will enhance the positive impact of healthy behaviour self-efficacy on well-being.
- (3) Open personality traits will enhance the positive impact of healthy behaviour self-efficacy on well-being.
- (4) Emotional stability personality traits will enhance the positive impact of healthy behaviour self-efficacy on well-being.
- (5) Strict personality traits will enhance the positive impact of healthy behaviour self-efficacy on well-being.
- (6) Pleasant personality traits will enhance the positive impact of healthy behaviour self-efficacy on well-being.

Management Implications

Talent is the biggest asset of an employer. In addition to providing employees with a healthy, friendly, stable and safe workplace environment to help employees achieve performance



goals, employers should also improve the health and mental health of employees, and promote their well-being; employees will be more willing to work. In turn, work performance is achieved. The internal human resources units of the company can also introduce health education courses such as health management, leisure sports, psychological counselling and emotional management in the workplace training stage of employees. Additionally, employers promoting related research, refresher courses related to health and management or related seminars and activities, help employees manage self-health, to notice their own health status and adjust their physical and mental condition, health situation, thereby actively improving the health behaviour self-efficacy among employees. This would promote feelings of well-being for employees, and at the same time, the implementation of employee health behaviour self-efficacy health management and promotion activities, so that employees can enjoy a healthy work environment, serving to reach higher performance goals and assist employers more effectively. For the workplace and for workers, in addition to this recommendation that employees be self-aware of their personality, that they observe their physical and mental condition and develop good health habits, it should be noted that this also provides long-term protection for the daily life of the family, and at the same time personally, to serve the body and mind, to be filled with happiness, puts health and happiness into the workplace.



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