Developing Soft Skills: Exploring the Feasibility of an Australian Well-Being Program for Health Managers and Leaders in Timor-Leste

Komla Tsey¹, Siu Man (Carrie) Lui¹, Marion Heyeres¹, Josephine Pryce¹, Li Yan³, and Sharee Bauld¹

Abstract
The article aims to describe the Family Wellbeing Program (FWB), a program that sets out to facilitate the enhancement of soft skills and to explore the relevance and acceptability of the FWB in the context of health managers and leaders in Timor-Leste. This article presents the fundamental principles of the FWB approach to facilitating soft skills in the context of trauma-informed training for managers and leaders. It describes how a participatory social learning approach advances deep, transformative, and long-lasting impacts. An exploratory mixed-methods design was adopted. Qualitative data were gathered from workshop participants through an evaluation form with open-ended questions allowing participants to provide comments on the program and how it could be enhanced. In addition, attendees participated in an online survey, which sought to capture data relating to demographics, soft skills for managers/leaders, personal well-being, and program satisfaction. Overall, the results show that the FWB program is both relevant and acceptable. The findings indicate that participants' understanding of concepts of management and well-being, particularly as it is applied to the workplace, was improved. This outcome is important because it highlights how the FWB program can contribute to the development of more accomplished managers and leaders in the future. The results of this exploratory study will be useful in informing future management and leadership training for the Timorese health workforce.

Keywords
leaders, managers, well-being, soft skills, postconflict, trauma-informed, training

Introduction
Research into the cultivation of management and leadership skills highlights that the main challenges are similar across developed and developing countries (Chhokar, Brodbeck, & House, 2013; Gentry, Eckert, Stawiski, & Zhao, 2014). Within any effective organization, managers and leaders are required to lead and motivate a diverse group of people, improve efficiency, achieve growth, and meet institutional requirements and the expectations of stakeholders, while remaining competitive (Whetten & Cameron, 2014). These common challenges require managers and leaders to develop a very strong focus on and skill set in a range of areas, including time management, prioritization, strategic thinking and decision making, managing change, managing people and performance, and being effective at work (Reece & Reece, 2016; Whetten & Cameron, 2014). However, across the developing world, where 80% of the world’s population resides, managers and leaders face additional challenges stemming from a variety of socioeconomic, institutional, political, and cultural issues (Aycan, 2002; Chhokar et al., 2013). For example, in developing countries where the family is of high importance, work and family lives are thus firmly intertwined to the extent that organizations are expected to take care of its workers as well as their families (Aycan, 2002). Equally, an emphasis on relationship-forming may seem an appropriate strategy to effective teamwork (Reece & Reece, 2016).
In practice, such relationships and in-group dynamics can hinder effectiveness, particularly when maintaining interpersonal harmony within the team becomes more important than accomplishing tasks (Aycan, 2002; Reece & Reece, 2016). Accordingly, managers and leaders in developing countries, such as Timor-Leste, require an additional set of skills that accommodate greater sensitivity of sociocultural norms and consider their well-being (Reece & Reece, 2016).

The Aboriginal Australian Family Wellbeing Program (FWB) is well documented as a program designed to empower participants to take greater responsibility and control of their social and emotional well-being (McEwan, Tsey, McCalman, & Travers, 2010; Tsey et al., 2005; Whiteside, Tsey, Cadet-James, & McCalman, 2014). Its success is enhanced by the utilization of a participatory social cognitive learning approach that advances deep, transformative, and long-lasting impacts (Bandura, 2011; McCalman, Bainbridge, Brown, Tsey, & Clarke, 2018; Onnis, Klieve, & Tsey, 2018; Tsey et al., 2005; Whiteside et al., 2014; Yan, Yinghong, Lui, Whiteside, & Tsey, 2018). The delivery of the FWB in Timor-Leste provided an opportunity to explore the feasibility of FWB as a program for the development of soft skills for managers and leaders. The transfer and implementation of effective services and programs across settings is potentially a cost-effective strategy for using scarce resources. However, it is necessary when transferring interventions from one cultural context to another to first conduct exploratory studies (Kitau, Kinchin, Whiteside, Hane-Nou, & Tsey, 2016). This type of study is a valuable first step for stakeholders to gain a deeper understanding of the acceptability and potential impact of an intervention, especially in areas where few published studies exist.

The FWB program focuses on the fostering of soft skills and the application of these to manage challenges in life and the workplace. The aim of this exploratory study was, first, to describe a program that sets out explicitly to facilitate the enhancement of soft skills and, second, to explore the feasibility of the FWB in the context of health managers and leaders in Timor-Leste. We asked ourselves the question whether the trauma-informed Aboriginal FWB program was feasible as soft skills training for health managers and leaders in Timor-Leste. With this study, we hope to contribute to developing a much-needed evidence base for the important but poorly understood nature of soft skills, and how this might be facilitated in the context of workforce development. The article is therefore not a typical leadership study but rather an exploration of the FWB soft skills training and its transferability in the context of Timor-Leste. The results of this study will be useful in informing future management and leadership training for the health workforce.

Background

For recent postcolonial, postwar societies such as Timor-Leste embarking on the process of nation-building, public sector management and leadership brings its own peculiar set of challenges. After 24 years of occupation and the long struggle for independence from Indonesia, building the management and leadership capacity of Timorese health professionals has been an ongoing challenge. This venture is particularly challenging if they are to assume full responsibility for running their own affairs. In an effort to rehabilitate the health system of Timor-Leste, a Health Sector Rehabilitation and Development Program (Alonso & Brugha, 2006) was rolled out in 2002. Its aim was to support ongoing service delivery, improve the quality and scope of service, and develop policy, regulations, and administrative systems.

A review of the health system a decade later noted significant improvements in reconstruction efforts (Asante, Hall, & Roberts, 2011). It also urged decision makers to accelerate service delivery by focusing on building strong and effective health managers and leaders. A Health Information Monitoring and Evaluation Program internal assessment in 2015 reported similar strengths and challenges using a Strengths, Weaknesses,Opportunities, and Threats (SWOT) analysis (Dr. Murali Krishna, personal communication, January 18, 2016). It was one catalyst for this exploratory study. Importantly, as with most postconflict societies, the analysis found that the country’s workforce continued to suffer the after effects of violence and trauma associated with foreign occupation and post independent armed conflicts.

The assessment highlighted a crucial need for health and other public-sector workers to become more informed about the dynamics and effect of trauma as part of their daily practice (Silove et al., 2014). Trauma-informed interventions address the psychosocial dimensions of trauma. They are physically, emotionally, and culturally safe, and take a strengths-based approach whereby people regain a sense of empowerment and control over their lives (Bamblett & Lewis, 2007). This helps people develop win-win rather than win-lose mindsets, which in turn strengthens capacity to rebuild trust and confidence that may have been damaged by loss and hurt associated with conflicts (Wolpe et al., 2004).

Yet the SWOT analysis found a lack of evidence of trauma-informed workforce training for health managers and leaders in Timor-Leste. Consequently, the analysis recommended the need for trauma-informed “soft” capacities training for the workforce to complement conventional hard capacities. A subsequent search for an appropriate soft skills training by Timor-Leste Ministry of Health (MoH) prompted an Australian health consultant, working in Timor-Leste at the time, to draw attention to the Aboriginal FWB program. In response, MoH requested information from the authors of this article. This was subsequently used to obtain funding from the Australian Embassy to explore the feasibility of the FWB program.

The Importance of Developing Soft Skills

Hard capacities comprise teachable skills, acquired through means of self-study, work experience, education, or training.
and practice of the knowledge. It utilizes social cognitive theory (Bandura, 2011) to empower participants from unique contextual circumstances such as health managers and leaders from Timor-Leste (McEwan et al., 2010; Tsey, 2008; Whiteside, Tsey, McCalman, Cadet-James, & Wilson, 2006). Social cognitive theory, initially social learning theory, explains how people acquire knowledge and competencies, how they motivate and regulate their behavior and create social systems to organize and structure their lives, taking into account cognitive processes to human motivation, affect, and action (Bandura, 2011).

“Well-being” has received increased attention internationally in recent years, with many debates over its definition and measurement (Forgeard, Jayawicke, Kern, & Seligman, 2011). Despite growing recognition of the importance of being mindful of well-being, it is often only fleetingly incorporated into programs seeking to develop soft skills (Krautzel, 2016; Reece & Reece, 2016). This exploratory study places well-being as a critical aspect in the development of soft skills for managers/leaders and so, makes a key contribution to research and the literature. It describes an active, practice-based approach to teaching psychological and behavioral skills that enhance the well-being of participants.

Individual well-being is associated with choices and activities aimed at achieving physical vitality, mental zeal, social fulfillment, a sense of accomplishment, and personal and professional satisfaction (Naci & Ioannidis, 2015). In that sense, maintaining a healthy body that has the energy to get through daily activities without unnecessary fatigue or physical stress, while coping with life’s challenges, is paramount to the fulfillment of physical and emotional well-being. People’s social well-being is measured by how well they relate, connect, and maintain positive relationships with family, friends, and coworkers (Chobdee, 2014). In addition to physical, emotional, and social well-being, it is understood that individual well-being is defined by the complex mix of spiritual, environmental, occupational, emotional, social, financial, cultural, physical, and intellectual attributes (Chobdee, 2014; Hettler, 1980). Cowen (1994) argues that “contexts, settings, and policies” impact on individual wellness. Hence, this exploratory study is important as it takes into account the environment within which managers and leaders operate in the development of soft skills.

**Overview of the FWB Program**

The FWB program, which forms the framework for the development of soft skills in this exploratory study, was developed for Aboriginal Australians to empower them to deal with the after effects of colonization and other problems associated with rapid social change. The program exemplifies a trauma-informed approach to healing. Topics covered include group agreements, human qualities, basic human needs, human relationships, beliefs and attitudes, violence and abuse, addictions, crisis and emotions, loss and grief,
conflict resolution, and caring for ourselves and others (Tsey & Every, 2000). FWB works from the premise that as humans, no matter our age, class, ethnicity, gender, or sexual orientation, we have basic physical, emotional, mental, and spiritual needs, without which we cannot heal from hurt, let alone flourish as individuals and/or communities of people.

The FWB program focuses on four types of basic human needs, namely physical, emotional, mental, and spiritual needs. Physical needs encompass food, exercise, shelter, sexual expression, and adequate sleep. To satisfy our emotional needs we must feel safe, receive respect, give and receive love, and feel valued and appreciated. Mental needs include curiosity about the world, the opportunity to learn throughout life, and being allowed to make mistakes and to learn from them. On a spiritual level, we need to be connected to something bigger than ourselves. For some, this may be religion, and for others, it may be their world view or their culture, land, or place of birth. Ideally, we ought to enjoy a life of beauty, creativity, peace, and tranquility (Tsey, 2000).

One of the strengths of FWB is that it seeks to create safe learning environments, which are based on negotiated group agreements. As the program progresses, initially shy or hesitant participants tend to feel more comfortable to ask critical questions. They ask about what their basic human needs are, and whether these needs are being met, and if their meets are not being met, what they can do without disadvantaging others. This aspect expounds FWB’s potential as a straightforward and generally effective tool to engage and enable people of diverse backgrounds. It encourages them to have challenging but respectful conversations about their rights and responsibilities toward themselves and others. Although FWB was developed primarily in response to the special needs of Indigenous Australians, it can be adaptable to the needs of all cultures and social groups.

Since 2000, the authors of this article have applied FWB in a wide variety of contexts. These include health promotion among school children (Tsey et al., 2005), to engage young Aboriginal men to participate in learning and employment (Whiteside et al., 2016), to promote university student well-being in Australia and Papua New Guinea (Kitau et al., 2016; Whiteside et al., 2016), in workforce training in Australia (McEwan et al., 2010; Whiteside et al., 2006) and soft skills training for university students in China (Yan et al., 2018). This record of the universal application and adaptability of the FWB soft skills learning to diverse issues and contexts influenced the decision by the Timorese Ministry of Health (MoH) to invite the Australian FWB researchers to conduct the exploratory study.

The FWB Approach to Facilitate Soft Skills Development

A partnership between the MoH, the Australian Embassy in Dili, and James Cook University (JCU) resulted in a 5-Day FWB soft skills training course in Dili in 2016 for 20 managers and directors from across the MoH. The workshops were conducted in English and interpreted in real time by two local Timorese, both of whom had undertaken tertiary studies in Australia. The interpreters also translated the learning hand-outs from English to Tetum prior to the workshops and provided cultural support and guidance to the Australian facilitator.

As with previous deliveries of the FWB program, the approach taken consisted of a combination of conceptual and theoretical understanding with practical application. The focus for participants was on experiential learning (Kolb & Kolb, 2009). This approach has been used successfully for over 35 years in management and leadership education (Kolb & Kolb, 2009). It is considered to be holistic and relevant to practitioners because it focuses on problem-solving and decision-making through learning, application, reflection, and development (Kolb & Kolb, 2009).

A participatory social cognitive learning approach (Bandura, 2011; Culver & Bertram, 2017) was also adopted. It sought to create an environment where people of diverse backgrounds and belief systems can be confident that all points of view would be treated with respect. This approach establishes a setting where people can agree to disagree. Apart from the language translation, both the FWB program content and the facilitation process in Timor-Leste were largely the same as the Australian delivery. This is because no matter the context in which FWB is delivered, participants’ own lived experiences serve as the primary resource for the learning process.

A key focus of the program involves negotiated learning agreements and peer support relationships. These are based on confidentiality, respect, empathy, sharing, and trust. Within this environment, people share personal stories and are introduced to theoretical concepts which enable them to critically reflect on topics including human qualities, basic human needs, and beliefs and attitudes. These key concepts are then applied to practical issues such as grief and loss; violence and abuse as a basis for developing skills to address these issues at personal, family, and community levels. Through this process, participants gain new positive stories of themselves as people with strengths and resilience, rather than people defined by past trauma (Whiteside et al., 2018).

The rest of the workshops encouraged participants to explore ways in which to use the knowledge gained to plan and bring about changes in their own personal and professional life. A range of resources such as mindfulness techniques, frameworks for analyzing relationships, guides for resolving conflict, and priority setting tools were provided to participants to support them in the change process. The FWB topic areas and approach thus are commensurate with extant programs that focus on the development of soft skills for managers and leaders. Such programs generally address personal, interpersonal, and group skills (Whetten & Cameron, 2014). The uniqueness of the FWB is that it covers these
topics, but its delivery includes sensitivity to the challenges and issues of managers and leaders in developing countries and communities.

**Method**

**Design and Data Collection**

An exploratory mixed-methods design was adopted, where quantitative impact data were collected at the end of the workshop to complement qualitative workshop evaluation data (Whiteside et al., 2017). All 20 workshop participants answered online questionnaires at the end of the 5-day workshops to provide data in four areas: their demographic details, their level of soft skills before and after the workshop, their personal well-being before and after the training, and workshop evaluation feedback. In addition to the online feedback, participants provided handwritten responses to the workshop evaluation questions, allowing them to reflect more deeply on aspects they liked and did not like, and suggest improvements in more detail. All responses were anonymous.

The study was approved by the Human Research Ethics Committee at James Cook University (JCU).

Given a lack of resources and limited Internet access outside Dili for follow-up online data collection at the time of the study, it was not feasible to implement a conventional pre/post design. A pragmatic retrospective “post-then-pre” design (Klatt & Taylor-Powell, 2005) was implemented, whereby at the end of the workshops, participants were asked (a) to rate their current soft skills “after” as a result of the program and (b) then to reflect back and rate that same measure “before” participating in the program (Howard, 1980; Lam & Bengo, 2003; Pratt, McGuigan, & Katzev, 2000; Rockwell & Kohn, 1989).

The strengths of the approach are that it takes less time, is less intrusive, and, for self-reported change, avoids pretest sensitivity and response shift bias that results from pretest overestimation or underestimation (Hooogstraten, 1982; Howard, 1980; Klatt & Taylor-Powell, 2005; Lam & Bengo, 2003; Pratt et al., 2000; Rockwell & Kohn, 1989). The approach, however, has limitations such as recall difficulties and social desirability underestimation (Howard, 1980; Klatt & Taylor-Powell, 2005; Lam & Bengo, 2003; Pratt et al., 2000; Rockwell & Kohn, 1989), which we sought to minimize through the use of multiple data sources.

**Questionnaires**

**Demographics.** The demographics data collected were gender, age group, years of management/leadership experience, and level of educational achievement. The results indicated that participants’ ages ranged from 25 to 55. Nine were female and 11 were male. All 20 participants had at least a bachelor’s degree, with most having less than 3 years of management/leadership experience.

**Soft skills for managers/leaders.** Respondents’ soft skills for managers/leaders were measured using the MindTools leadership questionnaire (Mind Tools, n.d.). This online scale was selected because it has been validated and widely used across many countries, including by the authors of this article (Yan et al., 2018). The competencies measured are similar to well-being soft skills, the main outcomes of interest for the exploratory study (Yan et al., 2018). Eight subgroups of soft skills for managers/leaders across three domains of management/leadership were measured: self-confidence, positive attitude and outlook, emotional intelligence, providing a compelling vision of the future, motivating people to deliver the vision, being a good role model, managing performance effectively, and providing support and stimulation. Each item was measured on a 5-point scale recording the relevance of the management/leadership behaviors.

**Personal well-being.** The Australian Unity Personal Wellbeing Index (PWI) measures people’s perceptions of satisfaction with their quality of life in eight different domains: satisfaction with life as a whole, satisfaction with standard of living, health, achievement in life, personal relationships, feeling of safety, feeling part of your community, and future security. The online survey poses questions in each domain to be answered on a 0 to 10 scale of satisfaction (Deakin University, 2016).

**Program Satisfaction.** There were five items addressing program satisfaction. The first four were open-ended questions asking respondents to provide details about what they liked about the training program, what they did not like, how they plan to use the knowledge they have gained, and any other comments they wanted to make. The fifth item measured their overall satisfaction with the training on a 5-point scale (from 1 for very dissatisfied to 5 for very satisfied).

**Data Analysis**

Data, both quantitative and qualitative, were analyzed by the coauthors who were not involved in the training sessions. The aim was to minimize potential bias arising from facilitators evaluating their own workshop.

**Quantitative data analysis.** Data from the questionnaires were processed in MS Excel and then imported into SPSS v24 for analysis. Means and standard deviations were generated for the overall management/leadership score, the eight subskills, the overall well-being score, and the eight personal well-being subscores. A paired t-test was conducted to assess differences in overall management/leadership scores and well-being scores as well as subscores before and at the end of the training. Since the lack of a control group and randomized design may cause results in a statistical phenomenon referred to as “regression to mediocrity” (Marsden & Torgerson, 2012), a paired t-test was conducted to assess differences
in overall soft skills for managers/leaders scores, overall well-being scores, and all subscores for before and after training scores. A median split of the group to lower/higher well-being score and lower/higher soft skills for managers/leaders score was used for analyzing differences in perceived improvements of these two groups.

**Qualitative data analysis.** Qualitative data from the online survey were recorded online in an Excel spreadsheet and supplemented by data obtained from the more detailed handwritten reflections. The collective data were imported into NVivo 11 for thematic analysis. Participants’ responses to the evaluation questions were combined and thematically analyzed using a process proposed by Braun and Clarke (2006): close examination of the data, generating codes, proposing and reviewing themes, naming and defining the themes, and producing a short report.

**Results**

**Overall Satisfaction With the Course**

Eighteen out of the 20 (90%) participants were very satisfied with the training, one was somewhat satisfied, and one somewhat dissatisfied.

**Impacts of the Program**

**Well-being scores.** Overall, respondents had high scores for all aspects of well-being (Table 1). Mean scores for the eight different aspects of perceptions of well-being before the workshop ranged from 7.15 to 8.20, out of a possible 10. The paired-test results indicated that differences between perceptions before and after for well-being were highly significant ($p \leq .001$), indicating that all aspects of perceived well-being after the workshop had improved. Seven of the eight results have a very strong effect size ($d > 0.7$), the other (“difference in standard of living scores”) has a medium effect size ($d = 0.622$).

**Soft skills for managers/leaders.** Table 2 presents descriptive statistics for perceptions before and after the training, indicating a greater understanding of soft skills for managers/leaders at the end of the workshop. Differences between means for subskills relating to personal characteristics show a highly significant ($t$ value, 5.146, $p \leq .003$) improvement in understanding of the skills after the training. Before and after scores for two of the five subskills in the transformational leadership category (“being a good role model” and “managing performance effectively”) did not show a statistical difference; scores for all of the other aspects were highly significant ($t$ values: 4.333, 4.925, 5.894, $p = .000$). Similarly, differences in scores for emotional intelligence were significant ($t$ value: 7.855, $p = .025$).

**Improvement over baseline.** Independent sample $t$ tests were conducted to compare means for improvements in both well-being and soft skills for managers/leaders, between participants with lower than median before scores and participants with higher than median before scores for both well-being (Table 3), and soft skills for managers/leaders (Table 4). When groups were compared on the basis of their “before scores” in well-being, the results showed significant differences in improvement in both soft skills for managers/leaders and well-being. When groups were compared on the basis of their initial soft skills for managers/leaders scores, the differences in improvement between the two groups were not statistically significant.

**Qualitative Results**

Feedback responses focused on two main areas: potential program impact and suggestions to improve program delivery. The following shows that participants reported a range of outcomes associated with their participation in the FWB program that indicated the potential impact of the program. These outcomes related to the process of self-inquiry, the extent to which they felt well prepared to become good leaders, and their intention to apply the learned material. In general, people stated they were very satisfied with the program.
Comments on the delivery of the program covered participants’ focus in more respect for ground rules during the training, choice of venue, resources, and recommendations for future training.

Quotes from the two data sets used in the following analysis are identified as follows: “O” for feedback received online, and “H” for handwritten feedback (hardcopy). Codes were followed by a sequence number for the respective participant, that is, H.2 identified feedback from handwritten responses of respondent “2.”

Self-inquiry. Participants experienced a strong sense of learning through the process of self-inquiry. A realistic sense of self is vital in management and leadership (Reece & Reece, 2016), and participants were able to connect the concept of self-awareness with being a good leader: “What we specifically liked was the basic human needs topic, especially on knowing ourselves better” (O.12); and “This leadership course is a really good one, as I was able to reflect on my leadership performance so far, and also an eye-opening for what I can improve or change in an effort to be a better leader” (O.5).

Participants reported that the link between the life journey topic and learning of management and leadership was also revealing, as was the realization that to be a good leader, one must be aware of one’s own and others’ human qualities: “The thing that I really liked is how to be a better leader by knowing our own qualities and how to know other people’s...”

Table 2. Soft Skills for Managers/Leaders (n = 20).

| Items                                      | Before training | After training | Paired t test |
|--------------------------------------------|-----------------|----------------|---------------|
|                                            | M   | SD  | M   | SD  | p value | Effect size (d) |
| Personal characteristics                   |     |     |     |     |         |                |
| Self-confidence                            | 3.40 | 0.912 | 4.325 | 0.712 | .003     | 0.990          |
| Positive attitude and outlook              | 3.325 | 0.467 | 4.000 | 0.538 | .000     | 1.119          |
| Emotional intelligence                     | 3.500 | 0.628 | 4.025 | 0.803 | .025     | 0.691          |
| Transformational leadership                |     |     |     |     |         |                |
| Providing a compelling vision of the future| 3.425 | 0.568 | 4.075 | 0.613 | .000     | 0.970          |
| Motivating people to deliver the vision   | 3.400 | 0.384 | 4.075 | 0.591 | .000     | 1.127          |
| Being a good role model                   | 3.550 | 0.510 | 3.800 | 0.733 | .086     | 0.393          |
| Managing performance effectively          | 3.225 | 0.525 | 2.900 | 0.788 | .131     | -0.477         |
| Providing support and stimulation         | 3.088 | 0.558 | 3.625 | 0.620 | .000     | 0.836          |
| Overall                                    | 60.000 | 3.866 | 68.900 | 4.315 | .000     | 1.470          |

Table 3. Mean and SD of Improvement in Soft Skills for Managers/Leaders and Well-Being Scores (Median Split by Before Training Well-Being Score).

| Group with lower before training well-being score (n = 10) | Group with higher before training well-being score (n = 10) | Independent samples t tests (equal variances not assumed) |
|------------------------------------------------------------|-----------------------------------------------------------|----------------------------------------------------------|
| M   | SD  | M   | SD  | t   | df  | p value |
| Improvement of soft skills for managers/leaders            | 8.90 | 4.358 | 8.90 | 5.933 | 0.000 | 16.520 | 1.000 |
| Improvement of well-being                                  | 9.80 | 3.994 | 4.60 | 3.471 | 3.108 | 17.656 | .006  |

Table 4. Improvement in Soft Skills for Managers/Leaders and Well-Being Scores (Median Split by Before Training Soft Skills for Managers/Leaders Score).

| Group with lower before training soft skills for managers/leaders score (n = 10) | Group with higher before training soft skills for managers/leader score (n = 10) | Independent samples t tests (equal variances not assumed) |
|-------------------------------------------------------------------------------|---------------------------------------------------------------------------------|----------------------------------------------------------|
| M   | SD  | M   | SD  | t   | df  | p value |
| Improvement of soft skills for managers/leaders                              | 10.90 | 5.384 | 6.90 | 4.040 | 1.879 | 16.695 | .078  |
| Improvement of well-being                                                    | 7.70  | 4.084 | 6.70 | 5.078 | 0.614 | 12.969 | .550  |
qualities” (O.5). Self-inquiry increased awareness of the purpose of understanding others; “The important thing is . . . to have deep knowledge of human basic needs to identify each individual’s qualities” (O.11). Group discussion and self-reflection exercises were positively received.

**Feeling well prepared.** Overall, participants felt inspired and motivated about their management/leadership roles and responsibilities. The program content was perceived to be useful by participants: “This is a very good training and it has helped us to learn many things” (H.4); and “I will make an effort for maximum implementation of what I have obtained from this course, in my workplace” (H.6).

The training was seen to inspire and motivate participants to reflect on their individual management and leadership goals: “this leadership course is a really good one . . . an eye-opening for what I can improve or change in an effort to be a better leader” (5.0). Another participant noted, “All course materials that I have learned during the week will inspire, motivate and serve as a good standard for me to be able to apply in my working area” and “. . . the course materials help me to be more confident in performing my work and provide the services; and build my emotional intelligence in both the administrative and functional areas of services” (H.9).

**Applying the learned.** Participants realized benefits of applying what they had learned to all aspects of life: “I will use these skills in my whole life—family, small community, and workplace, based on Timor-Leste’s situations and context” (H.8); and “I will use the course material to lead my family as well as my work” (H.5). They confidently articulated their future approaches to leading their teams:

First, I will need to sit together with my staff member to introduce myself and develop the ground rules/internal regulations. Second, I need to understand the skills and qualities of my staff members to know them better. Third, try to make them part of my leadership by inspiring them with my good thoughts/ideas. Fourth, when needed, we will decide as a team and in a democratic manner. (O.15)

Other comments showcasing approaches to future application of the learning include, “Make regular or periodic evaluation to identify failures or obstacles facing the team and try to find ways to solve them” (O.13); “I will use some of the tools to identify my staff members’ qualities which will facilitate me to allocate and delegate tasks to all staff members” (H.5); and “I want to listen and analyze what my staff want, and hope to be able to make good and fair decisions in my workplace” (H.4).

**Participant behavior, venue, delivery style, and resources.** The majority of participants agreed that future training should be held away from the workplace, outside Dili, or overseas. A variety of reasons were given: “. . . consider doing it outside Dili, in a quiet place to ensure that participants can participate fully and are able to concentrate on the training” (H.7); and “I would like to suggest to organise the training overseas as we can compare the leadership practice in that country and our own” (H.18).

The two interpreters who ensured that everyone understood the proceedings were highly appreciated by all participants, “. . . appreciate the help of the two ladies which have helped me to have a better understanding of the course. Good translator both in English and Tetum” (O.1); and “The training went well and we would like to thank Dr Komla and mana Dina and Nina who have made extra efforts to help us understand the training course well” (H.4).

To improve future delivery, a range of suggestions were made. While some wanted the training to be related more to specific Timor-Leste organizational contexts, others wanted to learn more about the application of management and leadership skills in other countries. Similarly, some suggested a need to have bi-lingual handouts while others, by contrast, felt there was no need to translate materials and preferred using original versions so they could improve their English language proficiency.

Other suggestions included use of PowerPoint to expedite learning; role-plays as strategies to improve engagement and participation; the need for the facilitator to provide references and relevant websites accessible to participants; the format of handouts be more professional; more theoretical information and research on successful leaders from different countries; and a need for participants to respect the ground rules and not interrupt when someone was speaking and to ensure that feedback was kept positive but at the same time not running away from discussing difficult issues.

**Moving forward.** Unanimously, participants suggested that more time to be allocated for the course: “I think one week is not sufficient” (O.20). “Longer period will allow us to have a deeper understanding as well as inspire us to learn more” (H.11). Follow-up sessions to deepen knowledge and further improve management and leadership skills and confidence were requested: “If possible, I would like to suggest the continued implementation of this course, and implement it over two weeks, instead of one week” (H.8).

Continuation of the training was regarded as important: “We need a follow-up course on management and leadership as we might need to learn other steps apart from what this course has offered” (H.3); “We hope that the training will not stop here but will be organised to our other friends who have not had a chance to attend” (H.4); and “If possible, organise an exchange program with overseas institution to gain better experiences.” These comments reflect the fact that 1 week of training may not be enough and highlights the need to perhaps engage a more sustainable, longer-term approach to the development of leadership capacity.

Participants’ overall satisfaction with the program led to suggestions to extend opportunities to colleagues and other
leaders, including senior executive within the Timor-Leste Health sector and beyond: “If possible, the training should also involve the senior leaders to promote harmony” (O.8); and “I would like to suggest, if possible, this leadership training should also be done for other leaders to reduce ambition and selfishness” (O.19). This reflects not only the nature and current context of Timor-Leste’s postconflict society but also the impact that the training may have on the characteristics that leaders may adopt in such a society. A further comment evidences this idea: “This training should be extended to all managers at the national, municipalities, submunicipalities level, and to all colleagues responsible for the program, to set the standard in good leadership principles within the Ministry of Health in Timor-Leste” (H.10).

Importantly, it was suggested that coordination of future training should involve the National Health Institute, which is the agency responsible for coordinating professional development training courses across the health system: “For the future, this type, of course, could be done in coordination with the National Health Institute to implement based on the decree-law no. 9/2011, the regulation for training within the institution” (H.8).

The need for follow-up support to the training was also considered important in ensuring that intended changes are carried through, and questions or problems can be discussed, as mentioned by one participant:

Create a group in social media in order to have more exchange with the facilitator and for the facilitator to share more experiences and ask for his inputs when facing difficulties (e.g., Facebook, Twitter, etc.). If possible, organise an exchange program with the overseas institution in order to gain better experiences. (H.13)

Discussion

The aim of the study was, first, to describe a program that sets out explicitly to facilitate the enhancement of soft skills and, second, to explore the feasibility of the FWB in the context of health managers and leaders in Timor-Leste. Overall, the results show that the FWB program is both relevant and acceptable. The findings indicate that participants’ understanding of concepts of management and well-being, particularly as it is applied to the workplace, was improved. This outcome is important because it highlights how the FWB program can contribute to the development of more accomplished managers and leaders in the future.

The results support the case that management and leadership training should embrace a focus on the well-being of managers and leaders (Byrne et al., 2014) as part of the soft skills set. There were statistically significant improvements from baseline on all eight well-being domains and six of the eight soft skills for managers’/leaders’ subscales. Despite the small sample size and the short-term nature of assessed outcomes, results have at least medium or large effect sizes.

This provides evidence for the perceived improvements that resulted from this training program. The outcomes support the literature that indicates positive interpersonal relationships have positive impacts on individuals’ well-being (Reece & Reece, 2016; Whetten & Cameron, 2014). The findings from this exploratory study extend this thinking by indicating that being able to understand and control or flex one’s soft skills contributes to one’s well-being. Further research should target this suggestion and specifically test for relationships between mastery of soft skills and well-being through longer term studies.

The literature supports an extended approach to cultivation of soft skills for leaders and their well-being that is worthy of consideration in future FWB research. For example, Grimard and Pellerin (2018) suggest that classroom-based programs can be complemented by an action learning approach. With the former, participants gain knowledge and understanding about soft skills and leadership. The latter allows them time to develop the skills, especially within the context of their practice. This inductive approach fosters learning from real-life experiences and extends the learnings from the classroom. The FWB would be enhanced by adopting an action learning approach.

Improvements in soft skills for managers/leaders’ subskills, “being a good role model” and “managing performance effectively,” were not statistically significant but this may be due to a couple of factors. The first is the inherent research design in that the study uses a post-only measurement design where perceived outcomes were assessed immediately after the workshop, with limited opportunity for participants to put some of the skills into practice. Adoption of an action learning approach in future with pre- and post-measurements should lend greater insights into the impact of the FWB on improvements regarding the above aspects.

The second contributing factor is the sample pool. The literature highlights that it is “experienced managers” who know how to role model and effectively manage performance (Reece & Reece, 2016; Whetten & Cameron, 2014). This contention is consistent with demographic data, which shows that most participants (n = 16) had less than 3 years of management/leadership experience. These aspects suggest that future studies should be extended beyond a single-respondent category approach and include more experienced managers and lower level employees.

Also, in terms of future research, the findings relating to soft skills for managers/leaders’ subskills in this exploratory study highlighted that there is an opportunity to explore “leadership development in developing economies” and not just “development of soft skills for managers and leaders.” A study of this nature would also consider the traits, characteristics, and leadership styles of leaders and would need to be over a longer timeframe so as to capture the impact of training on behaviors (Whetten & Cameron, 2014).

It could also consider the value of “distributed leadership” in advancing change. Nzinga, McGivern, and English (2018)
utilize distributed leadership in the context of leadership in health systems (clinical leadership) in Kenya. Distributed leadership “provides a holistic sense to leadership as a product of leaders and followers co-constructing performance in collective and group context, and provides a dynamic, non-linear frame on how people and events interact in organizations” (Nzinga, McGivern, & English, 2018, p. ii28). Nzinga et al. (2018) provide insights into the value of soft skills for doctors in leadership roles. Importantly, their work demonstrated the power of distributed leadership in bringing about change. Lessons from this study in Kenya have bearing on approaches that can be taken in the future for the FWB program.

Although all participants perceived the training to be beneficial, those who rated their “before workshop perceptions of well-being” and “soft skill for managers/leaders” scores at the lower end of the scale appeared to benefit more than those who rated theirs at higher levels. Bearing in mind the limitations of this study, this outcome is important because it highlights how the program can contribute to the development of more accomplished managers and leaders in the future. More particularly, this finding means that participants’ understanding of the concepts of management, leadership, and well-being, particularly as it is applied to the workplace, was most improved for those with least knowledge and understanding of soft skills.

With 16 of the 20 participants having less than 3 years of management experience, the FWB program is of fundamental importance in assisting such leaders to develop their full potential. This outcome is reasonable and consistent with the literature. For example, Seidle, Fernandez, and Perry (2016) highlight how leaders can benefit from “a combination of coaching, classroom instruction, feedback, and experiential training.” Conn et al. (2016) identified the empowering nature of leadership training for participants to effect change, develop networks, and build thinking that is “reflective, critical, and strategic.” This comment also leads to consideration for future FWB studies, where adoption of an action learning approach that captures longer term perceptions and changes in behavior (as suggested above) is worthwhile. Such studies could use techniques from other studies, such as Nzinga et al. (2018) and utilize participant observation, respondents’ reflective journals, interviews, and focus groups.

The quantitative impact results are supported by the qualitative findings. Participants found the FWB emphasis on cultural and group context, and provides a dynamic, non-linear frame on how people and events interact in organizations” (Nzinga, McGivern, & English, 2018, p. ii28). Nzinga et al. (2018) provide insights into the value of soft skills for doctors in leadership roles. Importantly, their work demonstrated the power of distributed leadership in bringing about change. Lessons from this study in Kenya have bearing on approaches that can be taken in the future for the FWB program.

Findings relating to well-being were of particular interest because it is in this area that this exploratory study contributes to the literature. The challenges facing modern managers and leaders, especially those responsible for rebuilding and strengthening public sector institutions in postconflict situations such as Timor-Leste, make it essential that management leadership training providers place well-being at the forefront of their approach (Bamblett & Lewis, 2007; Silove et al., 2014; Wolpe et al., 2004). Unfortunately, most research interest in management and leadership and well-being has focused on the effects of “good” or “bad” management and leadership on the well-being of subordinates; there has been limited interest in managers’ or leaders’ well-being in its own right (Byrne et al., 2014). However, managers’ and leader’s well-being, particularly psychological well-being, is an important factor in sound management and leadership (Reed, 2011).

Depressed or emotionally stressed managers and leaders have limited ability to manage themselves, their workloads, or their employees effectively. They may experience negative moods and distress, nervousness, or hostility (Reed, 2011), any of which may contribute to abusive supervision (Byrne et al., 2014). This exploratory study indicated that well-being needs to be taken seriously as a component of soft skills training for managers/leaders. It highlighted that a more considered approach needs to be taken in future research in relation to the careful construction of the “well-being” concept and other soft skills concepts so that better inferences and assessment of outcomes can be made.

Despite the findings, this exploratory study has limitations. It is a small exploratory study involving 20 health managers/leaders with no control group. A pragmatic retrospective “post-then-pre”-design (Klatt & Taylor-Powell, 2005) was used, with no opportunity for follow-up due to a lack of dedicated resources. These limitations make it difficult to generalize the findings beyond the study participants. However, as an exploratory study, the reported perceptions of the potential value of the FWB soft skills outcomes (both quantitative and qualitative) resonate strongly with the type of soft capacity Seligman (2011) calls “human flourishing in positive psychology” (Reed, 2011; Seligman, 2011; Whiteside et al., 2017). Social determinants of health analysts call these outcomes empowerment and control (Reed, 2011; Seligman, 2011; Tsey, 2008; Whiteside et al., 2014), while education for sustainability advocates have referred to them as 21st-century competencies (Reed, 2011; Whiteside et al., 2017).
At the core of soft capacity is a person’s mind-set or attitude toward a range of aspects, e.g., to creativity, initiative, self-reliance, and other generic and universally applicable competencies that enable people to collaborate, share power, problem-solve, adapt, change, live with uncertainty, and even thrive in a complex world (Gabriel-Petit, 2014; Tee, 2004; Tsey, Whiteside, Deemal, & Gibson, 2003). Reed (2011) notes that a person’s mind-set “is about what you see, think, and believe. . . . It is the internal lens through which you see and navigate life. Mindset influences everything you see, as well as everything you do” (Reed, 2011).

As technical skills are forever evolving, employers are increasingly hiring people with the right mind-set over those with the right technical skill set (Reed, 2011). Such evidence confirms the value of explicit soft skills training through programs such as FWB described in this article, especially as a foundation upon which to build hard capacity management and leadership workforce development. It also suggests a need for longitudinal studies to theorize the nature of soft skills, how to routinize their development in workforce training, and to assess what works, for whom and under what circumstances.

Because the exploratory workshops were conducted in 2016, the authors of this article have been working collaboratively with the Timor-Leste Ministry of Health and other project partners to implement and evaluate a sustainable management and leadership training that addresses both the hard and soft skills needs of the health and other public sector workforce.

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Note

1. Quotes from the two data sets used in the following analysis are identified as follows: “O” for feedback received online, and “H” for handwritten feedback (hardcopy). Codes were followed by a sequence number for the respective participant, for example, H.2 identified feedback from handwritten responses of respondent “2.”

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**Author Biographies**

**Komla Tsey** is a research professor (education for social sustainability) at The Cairns Institute and College of Arts Society and Education, James Cook University, Cairns Campus, Australia. His research interests include wellbeing promotion, research impact assessment and participatory learning-by-doing approaches to understanding and dealing with complex problems.

**Siu Man (Carrie) Lui** is an adjunct senior research fellow at The Cairns Institute, James Cook University in Australia and a master of Statistics student at the Department of Statistics and Actuarial Science, the University of Hong Kong. Current research interests include big data and statistical analysis.

**Marion Heyeres** is research officer at the Cairns Institute and College of Arts Society and Education, James Cook University, Cairns Campus, Australia. Her research interests include systematic literature reviews, evaluation research and wellbeing promotion.

**Josephine Pryce** (CBLG JCU) is head of management academic group, College of Business Law and Governance at James Cook University. She has over thirteen years’ experience of conducting research relating to individuals’ wellbeing, especially people in their workplaces.

**Li Yan** is an associate professor at the College of Economics and Management, Shenyang University of Chemical Technology, Liaoning Province, China. Her research interests include well-being promotion, country sustainability, economics and management.

**Sharee Bauld** is research officer at the Cairns Institute and College of Arts Society and Education, James Cook University, Cairns Campus, Australia. Her research interests include sustainable tourism development and management research.