

GENERATIONAL WELLNESS

.....

*An Analysis of Generational Attitudes
Toward Health Improvement*

American Institute for
Preventive Medicine

Generational Attitudes toward Wellness Programs

PREPARED BY: AMERICAN INSTITUTE FOR PREVENTIVE MEDICINE

There are more Millennials in the workforce than any other generational cohort. Additionally, for the first time in history, there are four, very distinct generations working side by side. The way in which these different generations respond to technology, education, communication, and their own health is vastly different. Expecting these diverse groups to respond equally to wellness programs is outdated thinking.

The following research is focused on the intersection of two very important issues facing our country: generational differences and health. Independently, these are two well-researched subjects. However, there is relatively little available research combining both issues.

Given the lack of research it is not very surprising that most health promotion efforts do not take age-related factors into account. Corporate wellness programs, for example, generally offer a single program for its entire workforce.

Programs have become more sophisticated over the years. Health risk factors are considered when delivering targeted, tailored follow-up education and programming. Different groups respond to different programs. We don't assume that a diabetic will benefit from an asthma program. Why, then, do we assume that a 25-year-old will benefit from the same program as a 55-year-old?

Perhaps this disconnect comes from a lack of awareness or available information. Our goal is to make neither of those excuses valid.

***We want to raise the
collective level of
awareness and education
on how a person's age
affects the way in which
he or she relates to
health and any programs
designed to help them
improve their health.***



Executive Summary

This investigation of attitudes and preferences toward wellness revealed variation among age groups. This summary will highlight significant differences observed as well as significant commonalities in responses. Complete results for every survey question can be found later in this report (see Complete Survey Results).

ATTITUDES

Importance of Today's Choices

Among all respondents, the strongest agreement was for the following statement: "The choices I make today have a big impact on my health in the future." 94.3% indicated they agreed or strongly agreed with this statement.

Nutrition & Exercise Affect Productivity

Younger individuals agreed more often with the statement "Good nutrition and regular physical activity can help me be more productive at work" (18-24: 90%; 25-32: 92%; and 33-49: 92%) compared with older age groups (50-69: 79%; 70+: 73%).

Reducing Risk Becomes a Higher Priority with Age

Older individuals were more likely to agree that "Improving my health and reducing risk is currently one of my biggest priorities" (50-69: 82%; 70+: 87%) compared with younger groups (33-49: 74%; 25-32: 72%; 18-24: 63%).

WELLNESS TOPICS

Nutrition & Physical Activity Top Choices

Respondents selected nutrition and physical activity/exercise as top topics of interest more frequently than any other topics (78% and 77%, respectively). Among the four younger groups, this preference was equivalent.

Interest in Disease Prevention Increases with Age

Individuals 50-69 were significantly more likely (81%) to select prevention of cardiovascular disease, cancer, diabetes, Alzheimer's/dementia as a topic of interest compared with other age groups (18-24: 66%; 25-32: 56%; 33-49: 66%; 70+: 73%).

RESPONSE TO ILLNESS

Doctor First, then Internet

Among all groups, individuals said they were most likely to speak with a doctor when ill (32%) than any other response. The second most common response to illness was to search the internet (23%). Younger groups (25-32 and 33-49) were significantly more likely to search the internet when ill than individuals 50-69.

FAVORITE WELLNESS PROGRAM COMPONENTS

Assessments & Challenges King

There was no significant difference between the top two choices, health risk assessments (26%) and health challenges (25%). However, these two choices were significantly more likely to be a favorite than the other choices offered. Older groups (50-69 and 70+) were more significantly more likely to like the health risk assessments (31% and 57%, respectively) than younger groups.

Weight Loss a Favorite for Younger Groups

Younger individuals (18-24) were significantly more likely to select a weight loss program as a favorite component (36%) compared with all groups.



LEARNING ABOUT HEALTHY LIFESTYLES

Seeking Information Online

Among all groups, health/medical websites were the top way individuals wanted to learn about health and lifestyle information (53%). Health screenings, health/fitness magazines, and on-site workshops or speaker events tied for the second most common way.

Learning In-Person

On-site workshops or speaker events were more popular as age increased: Individuals 70+ were most likely to want information in this way (47%), followed by 50-69 (43%), 33-49 (36%) and 25-32 (33%). Individuals 18-24 were least likely to desire information this way (15%).

Magazines a Go-To Source for Younger Groups

Health and fitness magazines were more popular sources of health and lifestyle information in younger groups. Individuals 18-24 (49%) and 25-32 (49%) were more likely to select this medium than other groups. Individuals 70+ were least likely (17%) to choose health and fitness magazines.

Mobile Apps Used by Younger Groups

Mobile apps for health and fitness information were used more by younger groups than older groups. Individuals 25-32 (32%) and 18-24 (34%) were most likely to use a mobile app for this purpose compared with individuals 33-49 (26%), 50-69 (17%) or 70+ (0%).

INCENTIVES

Lowered Premiums Biggest Lure

The most frequently selected incentive to get healthier was a lower insurance premium (34%). Cash was the second most desired incentive (26%).

Fitness Device Preferred in Youngest Group

The youngest generation group (18-24) was more likely to choose a Fitbit®/fitness device over other incentives. This likelihood significantly decreased with each subsequent age group.

PARTICIPATION IN PROGRAMS

Gym Discount, Please!

Among all participants, a gym membership discount (47%) and health screenings (46%) were the top choices. Gym membership discounts were most popular among younger groups. Individuals 18-24 were significantly more likely to participate in a gym membership discount (71%), followed by individuals 25-32 (64%), individuals 33-49 (49%), 50-69 (39%) and 70+ (33%).

Lunch & Learns for Mid-Age Groups

Individuals 33-49 and 50-69 were more likely to participate in a Lunch & Learn on-site with an expert speaker (34% and 37%, respectively), than other groups (18-24: 14%; 25-32: 24%; 70+: 27%).

Younger Attendance for On-Site Exercise

Younger groups were most likely to participate in an on-site exercise class. This interest was most expressed by those 18-24 (51%) followed by individuals 25-32 (40%) and 50-69 (34%) and 33-49 (31%). Individuals 70+ were least likely to participate in an on-site exercise class (20%).





Survey Respondents & Methodology

A survey was conducted online in early 2015. Only one response per person was allowed through an online form. Eleven organizations participated in the survey, spanning a variety of industries. Health care organizations, health care facilities, county government offices, law firms, and other corporate groups are represented in these survey results.

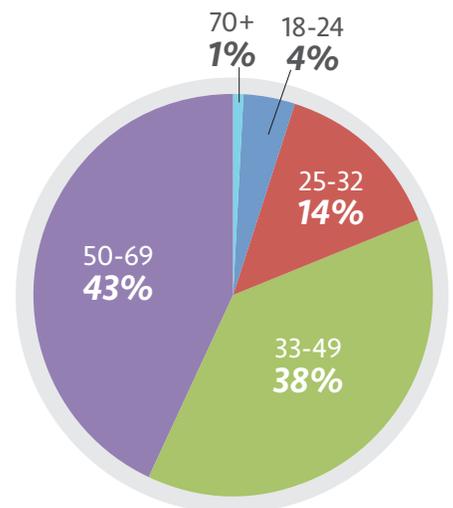
Most participants were between 50–69 years old (43%) or 33–49 years old (38%). The least data was collected for those in the oldest (70+, 1%) and youngest (18–25, 4%) groups. Females were more represented in the survey (82% of total participants) compared with men (18%). A total of 1647 participants completed the survey.

Significant differences between groups accounted for the size of each group using independent t-tests.

SUMMARY OF RESPONDENTS

Total:	1647
Male:	300 (18.2%)
Female:	1347 (81.8%)
18-24:	59 (3.6%)
25-32:	238 (14.5%)
33-49:	621 (37.7%)
50-69:	714 (43.4%)
70+:	15 (0.9%)

PARTICIPANTS BY AGE GROUP



Survey Results



Survey Results, continued

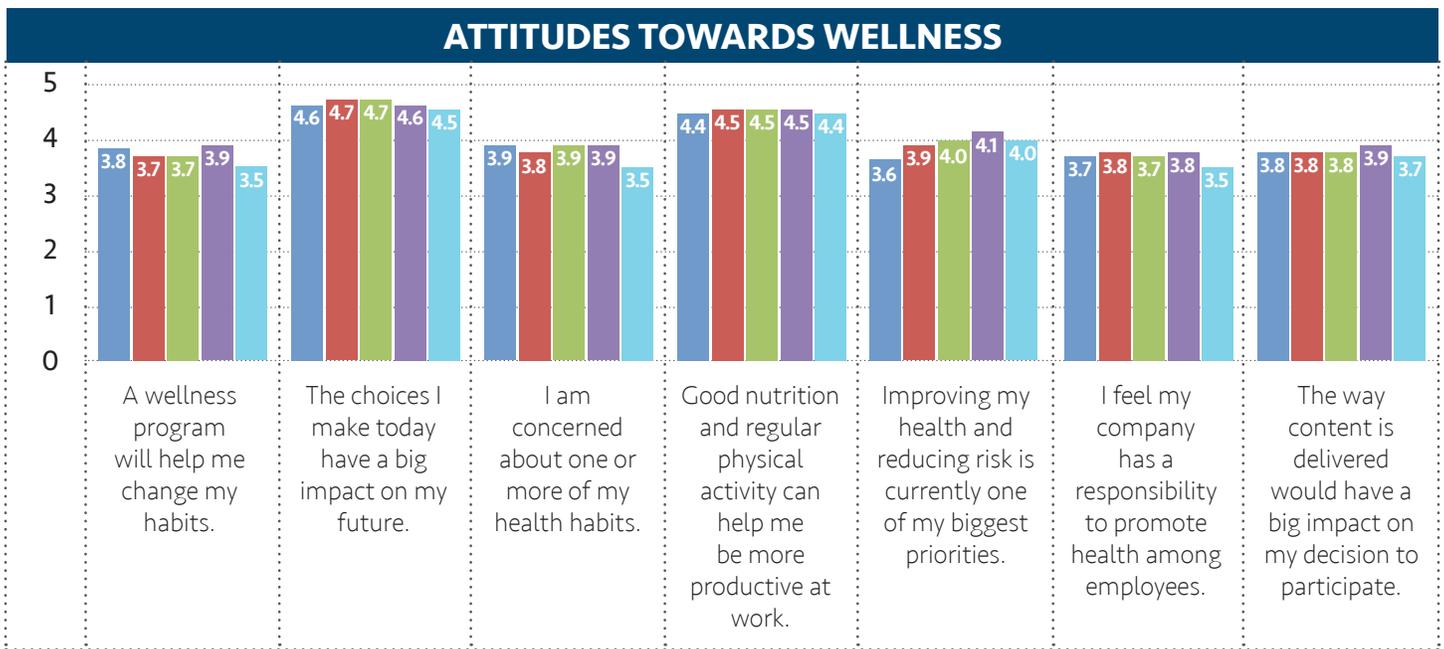
QUESTION:

Please indicate how strongly you agree or disagree with the following statements:

Response Key (1 – 5 scale):

- 1 – Strongly Disagree
- 2 – Somewhat Disagree
- 3 – Neither Agree or Disagree
- 4 – Somewhat Agree
- 5 – Strongly Agree

Ages 18-24 25-32 33-49 50-69 70+



Significant Differences for Attitude & Belief Statements

With all participants pooled, the strongest agreement was for the following statement: “The choices I make today have a big impact on my health in the future.” Among the most represented groups (18-69), agreement (those indicating agree or strongly agree) was between 93.2% and 97.1%.

Opinions varied on the following statement: “A wellness program will help me change my habits.” Individuals 18-24 were more likely to agree with this statement (80%) than individuals 25-32 (69%) or 33-49 (67%). Individuals 50-69 agreed with this statement (75%) more than individuals 33-49 (67%).

Individuals 50-69 (74.1%) and 70+ (100%) of individuals agreed that “I am concerned about one or more of my current health habits.” The 70+ group was significantly more likely to be in agreement with this statement than younger groups.

Younger individuals agreed more often with the statement “Good nutrition and regular physical activity can help me be more productive at work” (18-24: 90%; 25-32: 92%; and 33-49: 92%) compared with older individuals (50-69: 79%, 70+: 73%).

Older individuals were more likely to agree that “Improving my health and reducing risk is currently one of my biggest priorities” (50-69: 82%; 70+: 87%) compared with younger groups (33-49: 74%; 25-32: 72%; 18-24: 63%).

There were no significant differences observed between groups for the following two statements: “I feel my company has a responsibility to promote health among employees” and “The way content is delivered (e.g. on-site, online, or telephonic) would have a big impact on my decision to participate.”

Survey Results, continued

QUESTION:

How interested you would be in the following wellness topics?

Response Key (1 – 5 scale):

1 – Not Interested to 5 – Very Interested

Ages

18-24

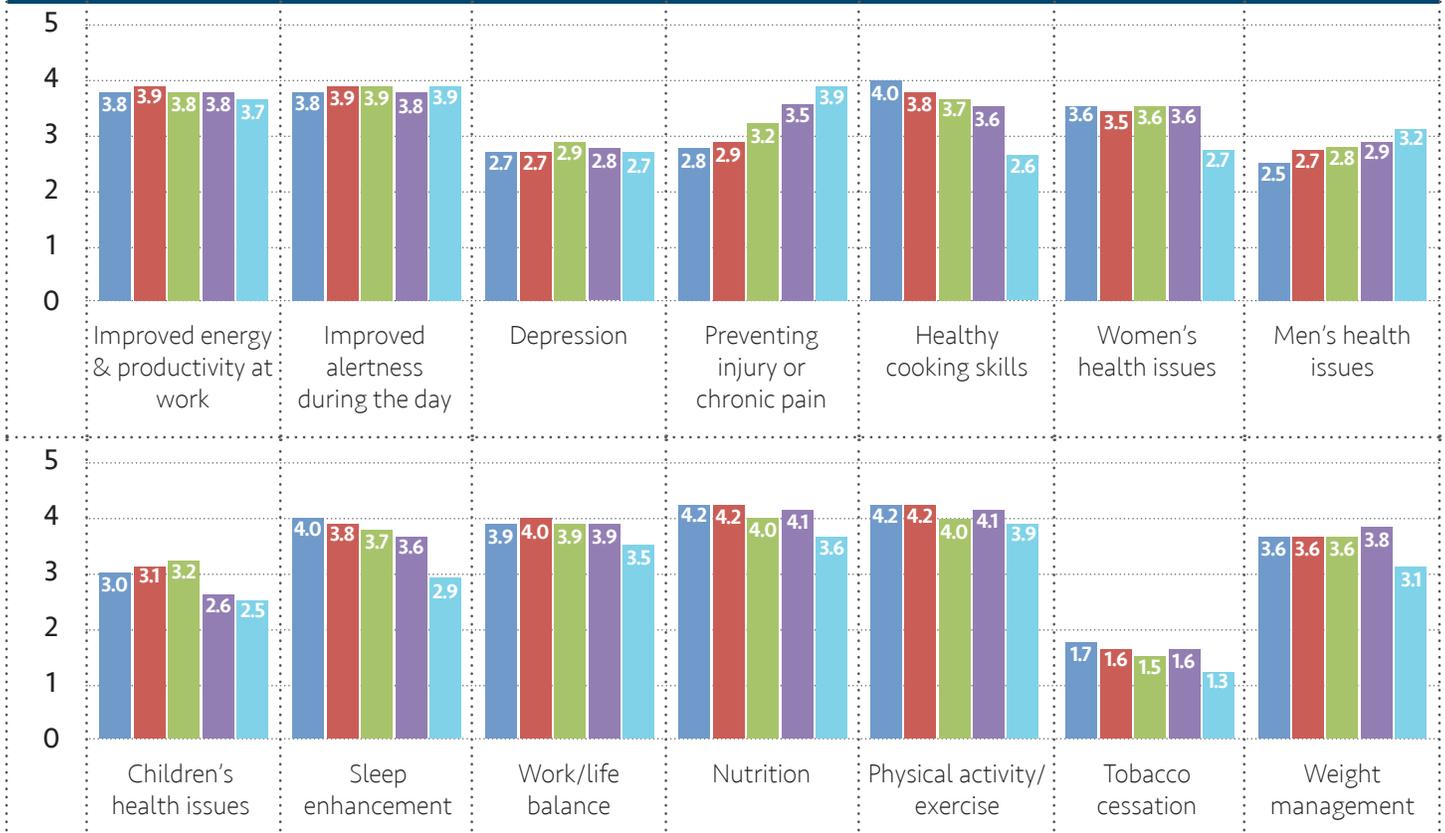
25-32

33-49

50-69

70+

INTEREST IN WELLNESS TOPICS



Significant Differences: Interest in Wellness Topics

With all participants pooled, nutrition and physical activity/exercise were selected as top topics of interest more frequently than any other topics (78% and 77%, respectively). Among the four younger groups, this preference was equivalent.

The second-most selected topic of interest was a five-way tie with all respondents pooled: Prevention of cardiovascular disease, cancer, diabetes or Alzheimer's/dementia (71%), improved alertness during the day

(70%), work/life balance (69%), stress management (68%), and improved energy & productivity at work (68%).

Individuals 50-69 were significantly more likely (81%) to select prevention of cardiovascular disease, cancer, diabetes, Alzheimer's/dementia as a topic of interest compared with other age groups (18-24: 66%; 25-32: 56%; 33-49: 66%; 70+: 73%).

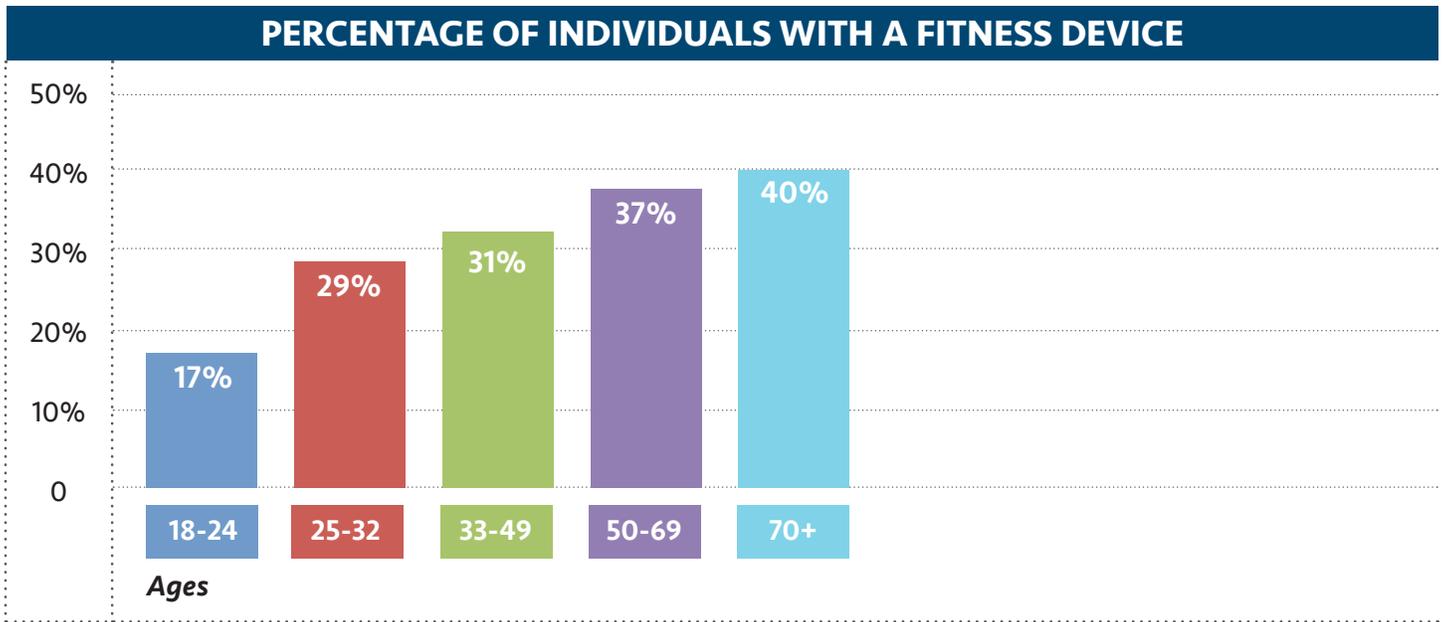
Individuals 70+ were significantly less interested in stress management (47%) compared with all other groups.

Survey Results, continued

QUESTION:

Do you have a portable fitness device (Fitbit®, Jawbone®, pedometer, etc.)?

Percentage responding 'Yes'



Significant Differences Between Groups

Individuals 70+ were most likely to identify as having a portable fitness device. Individuals 18-24 were least likely to identify as having a portable fitness device. Ownership of a portable fitness device increased with age.

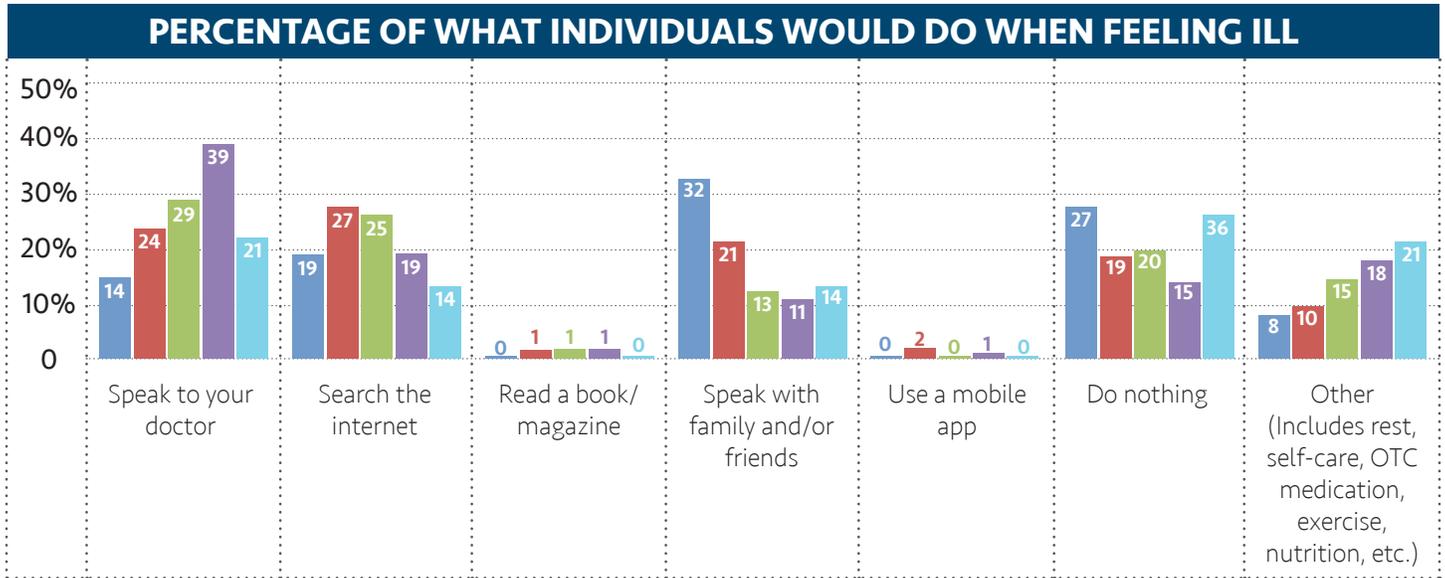
Survey Results, continued

QUESTION:

When you feel ill, what are you most likely to do?

Percentage selecting each response
(multiple selection was allowed)

Ages 18-24 25-32 33-49 50-69 70+



All numbers represent %

Significant Differences Between Groups

Individuals 50-69 were most likely to speak to a doctor when feeling ill (39%) compared with the three younger groups. Individuals 18-24 were least likely to speak with a doctor when feeling ill (14%). No significance could be determined for 70+ individuals for this measure.

Individuals 25-32 and 33-49 were more likely to search the internet when ill than individuals 50-69.

Younger groups were more likely to speak with family and/or friends when ill. Respondents ages 18 to 24 were most likely (32%), followed by respondents ages 25 to 32 (21%). This tendency was significantly lower in older groups.

Individuals 70+ were more likely to do nothing in response to illness (36%) relative to younger groups.

Survey Results, continued

QUESTION:

Does your company offer a wellness program?

Ages

18-24

25-32

33-49

50-69

70+

Percentage responding "Yes"

86%

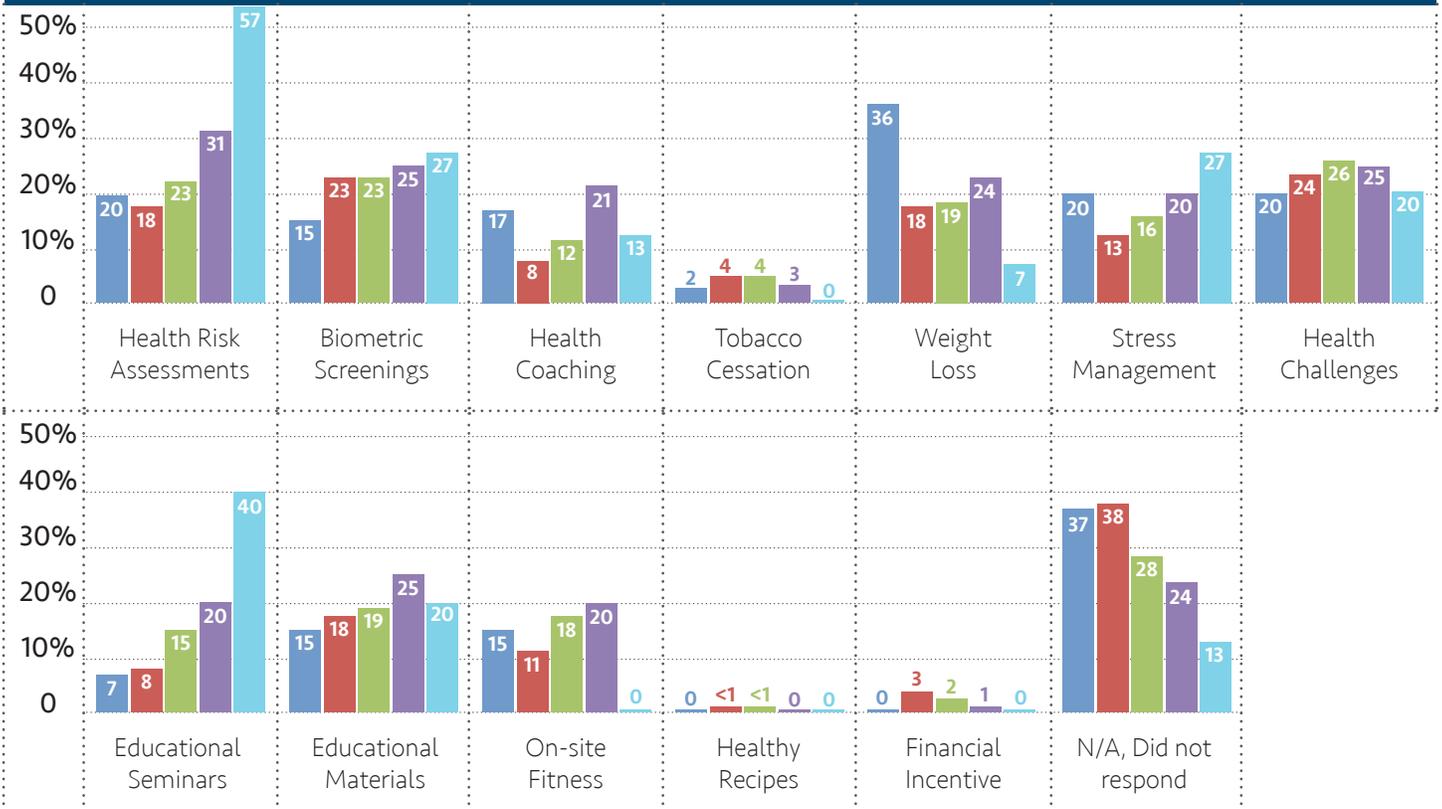
84%

91%

92%

93%

IF SO, WHAT ARE YOUR FAVORITE PARTS OF THE WELLNESS PROGRAM?



All numbers represent %. Multiple selection was allowed.

Significant Differences Between Groups

Age groups were not equally likely to select the same favorite wellness program components.

Older groups (50-69 and 70+) were significantly more likely to like health risk assessments (31% and 57%, respectively) than younger groups. The older groups (50-69 and 70+) were also more likely to be interested in educational seminars (20% and 40%, respectively) compared with younger groups.

Individuals 50-69 were more favorable towards health coaching and stress management than other groups (significantly different from 25-32 and 33-49).

Younger individuals (18-24) were significantly more likely to select a weight loss program as a favorite component (36%) compared with all

groups. Individuals 50-69 were also more likely to favor weight loss as compared with the 33-49 group.

There were no significant differences between groups for biometric screenings, health challenges, tobacco cessation, or the write-in options.

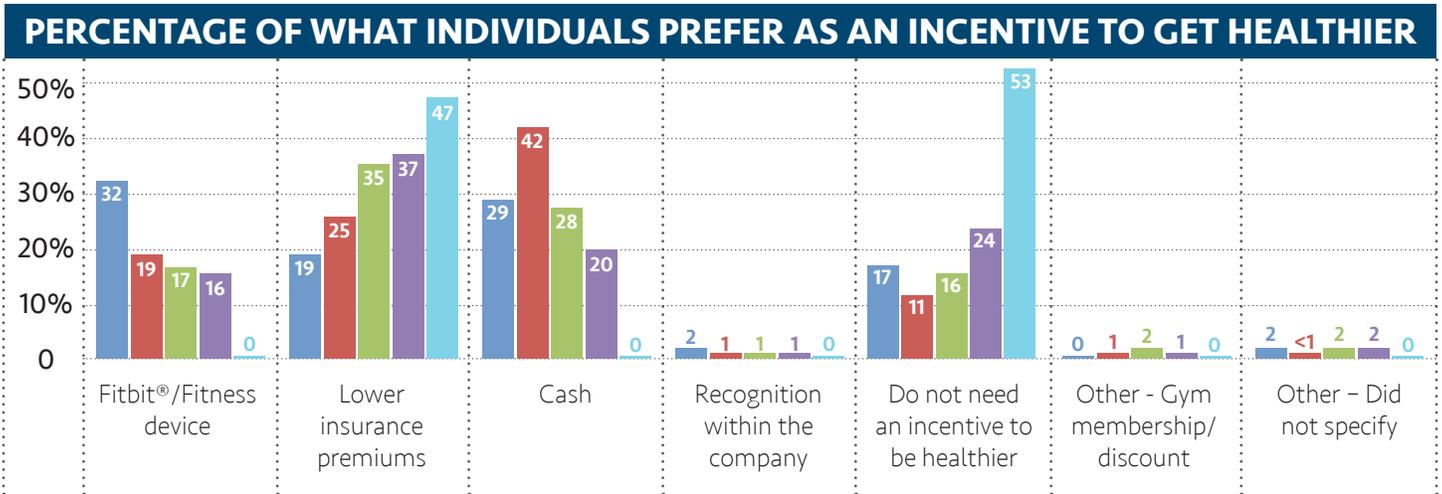
Survey Results, continued

QUESTION:

Which would you prefer to receive as an incentive to get healthier?

Percentage selecting each response
(multiple selection was allowed)

Ages 18-24 25-32 33-49 50-69 70+



All numbers represent %

Significant Differences Between Groups

The most frequently selected incentive to get healthier was a lower insurance premium (34%). Cash was the second most desired incentive (26%). There was no significant difference between those choosing a Fitbit/fitness device and not needing an incentive to get healthier.

The youngest group (18-24) was more likely to choose a Fitbit/fitness device over other incentives. This likelihood significantly decreased with age group.

Older groups were more likely to choose a lower insurance premium as a preferred incentive (47%).

Individuals 25-32 were most likely to choose cash as an incentive compared with other groups. All groups were more likely to choose cash than individuals 70+.

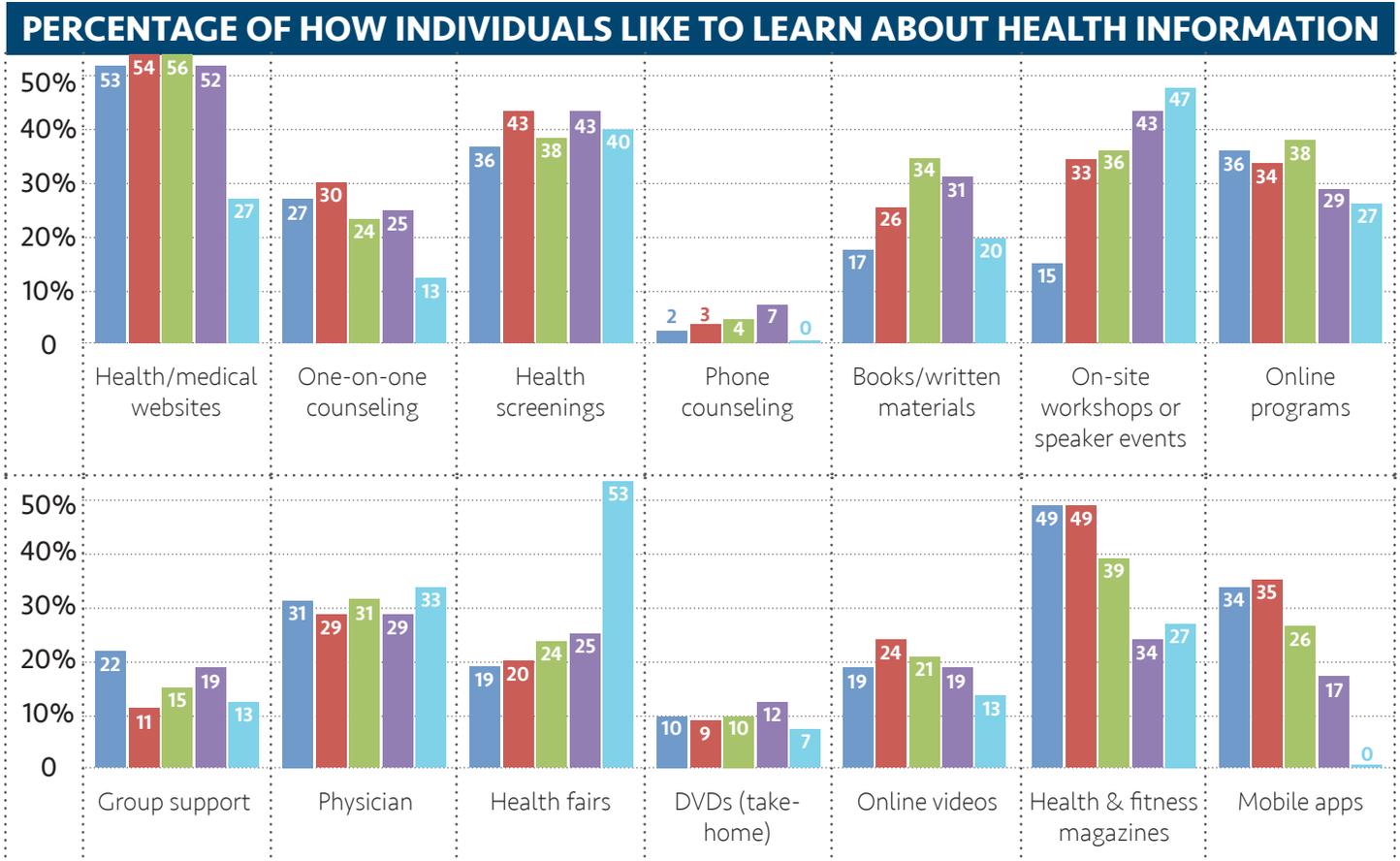
Survey Results, continued

QUESTION:

How do you like to learn about health and lifestyle information?

Percentage selecting each response
(multiple selection was allowed)

Ages 18-24 25-32 33-49 50-69 70+



All numbers represent %.

Significant Differences Between Groups

Individuals 70+ preferred to seek information at health fairs more than all other groups.

On-site workshops or speaker events were more popular as age increased: Individuals 70+ were most likely to want information in this way (47%), followed by 50-69 (43%), 33-49 (36%) and 25-32 (33%). Individuals 18-24 were least likely to desire information this way (15%).

Individuals 50-69 were more likely to choose phone counseling (7%) than individuals 25-32 (3%) or 33-39 (4%).

Individuals 18-24 were significantly more likely to seek information through group support (22%) compared with individuals 25-32 (11%). Individuals 50-69 were also more likely to seek information through group support (19%) than individuals 25-32 (11%).

Individuals 18-24 were less likely to seek health and lifestyle information from books/written materials (17%) compared with older age groups (25-32: 26%; 33-49: 34%; 50-69: 31%).

Health & fitness magazines were more popular sources of health and lifestyle information in younger groups. Individuals 18-24 (49%) and 25-32 (49%) were more likely to select this medium than other groups. Individuals 70+ were least likely (17%) to choose health and fitness magazines.

Mobile apps were used more by younger groups than older groups. Individuals 25-32 (32%) and 18-24 (34%) were most likely to use a mobile app for this purpose compared with individuals 33-49 (26%), 50-69 (17%) or 70+ (0%).

Survey Results, continued

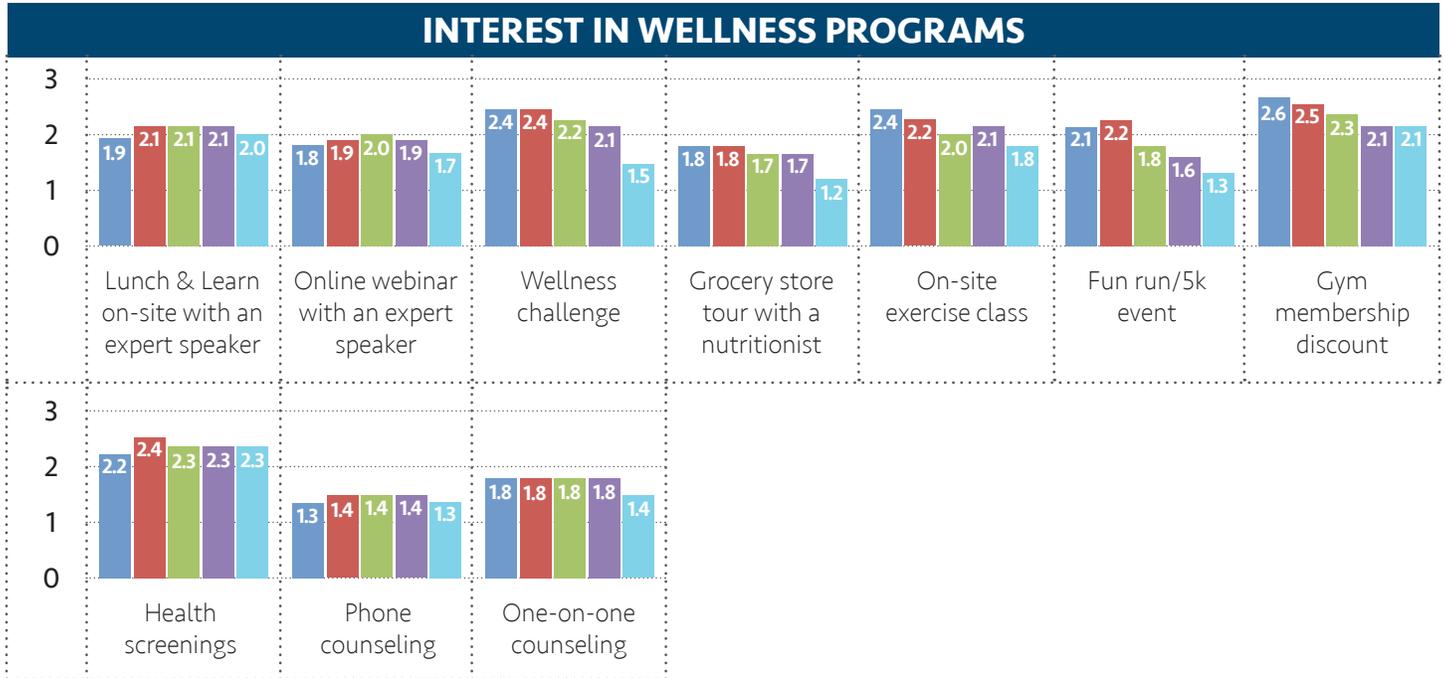
QUESTION:

How likely you are to participate in the following wellness programs?

Response Key (1 – 3 scale):

- 1 – Not at all likely
- 2 – Somewhat likely
- 3 – Very likely

Ages 18-24 25-32 33-49 50-69 70+



Significant Differences Between Groups

Likelihood to participate in different elements of a wellness program differed between groups.

Gym membership discounts were most popular among younger groups. Individuals 18-24 were significantly more likely to participate in a gym membership discount (71%), followed by individuals 25-32 (64%), individuals 33-49 (49%), 50-69 (39%) and 70+ (33%).

Individuals 33-49 and 50-69 were more likely to participate in an on-site Lunch & Learn with an expert speaker (34% and 37%, respectively), than other groups (18-24: 14%; 25-32: 24%; 70+: 27%).

Younger groups were more likely to indicate participation in a wellness challenge. Individuals 24-32 were the most likely (52%); followed by individuals 18-24 (49%) and individuals 33-49 (41%).

Younger groups were also most likely to participate in an on-site exercise class. This interest was most expressed by those 18-24 (51%) followed by individuals 25-32 (40%) and 50-69 (34%) and 33-49 (31%). Individuals 70+ were least likely to participate in an on-site exercise class (20%).

Participation in a 5k was also more likely among younger groups. While there was no difference between participation among individuals 25-32 or 18-24, both of these groups were significantly more likely to participate than individuals 33-49 (23%), 50-69 (15%) or 70+ (13%).

Individuals 25-32 were more likely to participate in a grocery store tour with a nutritionist (26%) than individuals 50-69 (19%). Individuals 50-69 were more likely to participate in phone counseling (9%) than individuals 33-49 (6%).

There was no significant difference between the groups for whether they prefer an online webinar with an expert speaker, one-on-one counseling or health screenings.



EMPLOYEE WELLNESS

Discussion

During the course of our analysis we found some results consistent with reasonable expectations. For example, reducing health risk factors is more of a priority for older adults as compared with their younger counterparts. Older adults experience the onset of chronic disease based on age-related factors much more readily than do younger adults. So this finding is intuitive.

You may expect to find younger people more likely to search the internet as a response to illness compared to older people, and our research supports that notion. However, the responses “Do nothing” and “Speak with family and/or friends” were actually ranked even higher than “search the internet” for individuals 25-32.

When asked about what wellness program components people enjoy most, we found some things we’d expect (health challenges) and others we may not have expected (health assessments). In fact, those were the top two choices when looking at all age groups.

There were also many findings that may go against conventional wisdom. Contrary to our hypothesis, the percentage of individuals with a fitness device was positively correlated with age. Upon review, it may make sense that younger individuals have apps on their mobile phones that function in the way many fitness devices do.

Another interesting finding was that incentives are not essential for motivating people to be healthy. Among all age groups, given a list of possible incentives, the third highest ranked option was “Do not need an incentive to be healthier,” slightly above receiving a Fitbit®/ fitness device. This would support the notion that strong cultural support is more important than incentives to drive behavior change.

When asked about how they like to learn health information, responses varied drastically across the generations. The best practice in this regard is to offer a variety of options. Don’t assume that because you have an elaborate online program that all employees will enjoy it. Provide options for printed materials, on-site and telephonic programming. When we provide options and allow employees to choose the option best for them, they are much more likely to engage and be successful.

Acknowledgements

Thank you to the organizations participating in this survey:

Barton County Memorial Hospital

Fallon Benefits Group

Graham Hospital

Heartland Area Education Agency

Hawaii National Bank

Lewis & Clark County

Beaumont Hospital (Formerly Oakwood)

Pima Medical Institute

Polk County

Step toe & Johnson PLLC

Utah County Health Department



30445 Northwestern Highway
Suite 350
Farmington Hills, MI 48334

800.345.2476
www.HealthyLife.com
aipm@healthylife.com



Laura Bonhard, MSPH, CHES
Director of Behavior Change Programs &
Health Coaching Services
American Institute for Preventive Medicine
LBonhard@healthylife.com

Brett Powell, CWPC
Wellness Consultant, Vice President
American Institute for Preventive Medicine
BPowell@healthylife.com