



Cornell University
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Barriers to Employee Participation in Health and Wellness Programs

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Trends

- A recent survey of 2,137 non-federal public and private employers found that 58% of small firms (3-199 workers) and 85% of large firms (200+ workers) offer at least one health and wellness program (e.g., smoking cessation, weight management, behavioral or lifestyle coaching) (Claxton et al., 2017).
- Growing adoption of programs has been fueled by a desire to control healthcare costs, increase employee performance and engagement, and attract the best talent.



Research Findings

- Prior research has linked health and wellness programs to a number of benefits, including improved employee health indicators, positive financial returns, and gains in employee job satisfaction, absenteeism and turnover (e.g., Arena et al., 2013; Parks & Steelman, 2008).
- However, research also suggests several challenges:
 - The benefits of health and wellness programs are significantly reduced when participation is made voluntary (DeGroot & Kiker, 2003)
 - Participation rates are quite low on average
 - A high percentage of “at risk” employees do not participate (Gebhardt & Crumpt, 1990)



Encouraging Participation

- Recent research has raised questions about the efficacy and fairness of many of the methods that have been used to improve employee participation.
- Wellness reimbursement and incentive schemes, for example, have been criticized as “sticks dressed up as carrots” that disadvantage those most in need of health improvement (Schmidt et al., 2010).
- Studies have also yielded mixed findings regarding the impact of health coaching (Wolever et al., 2013).



Current Study

- Part of a research program aimed at identifying interventions that organizations can use to increase participation in health and wellness programs, particularly employees who are most at risk.
- Current study designed to examine the barriers that employees perceive to their participation in health and wellness programs.
- Follow-up research will then test interventions designed to alleviate or eliminate most salient barriers.



Study Background

- Large health care company
- Surveyed across bands and locations
 - Call centers
 - Functions (marketing, finance, HR, IT)
 - Commercial/sales
 - Managers
- 2617 total participants
- Self-identified level of participation, health condition, and perceptions of barriers to participating in healthy eating and exercise/movement programs sponsored by the company



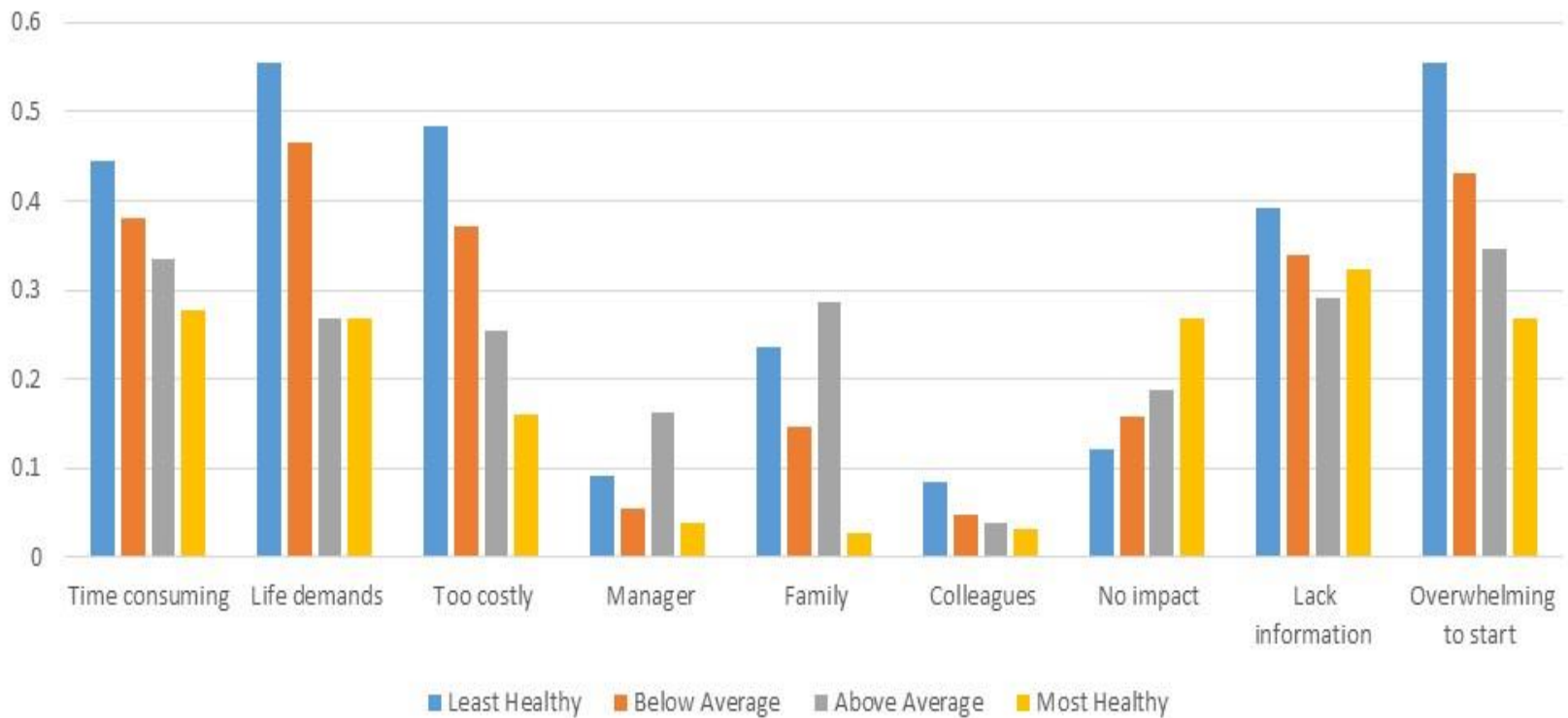
EXAMINING BARRIERS TO PARTICIPATING IN HEALTHY EATING PROGRAMS

Health condition: 420 self-identified as least healthy, 1053 identified as below average, 740 identified as above average, and 404 identified as most healthy

Participation level: 986 identified as never participating, 844 identified as infrequently participating, 508 identified as frequently participating, 278 identified as always participating

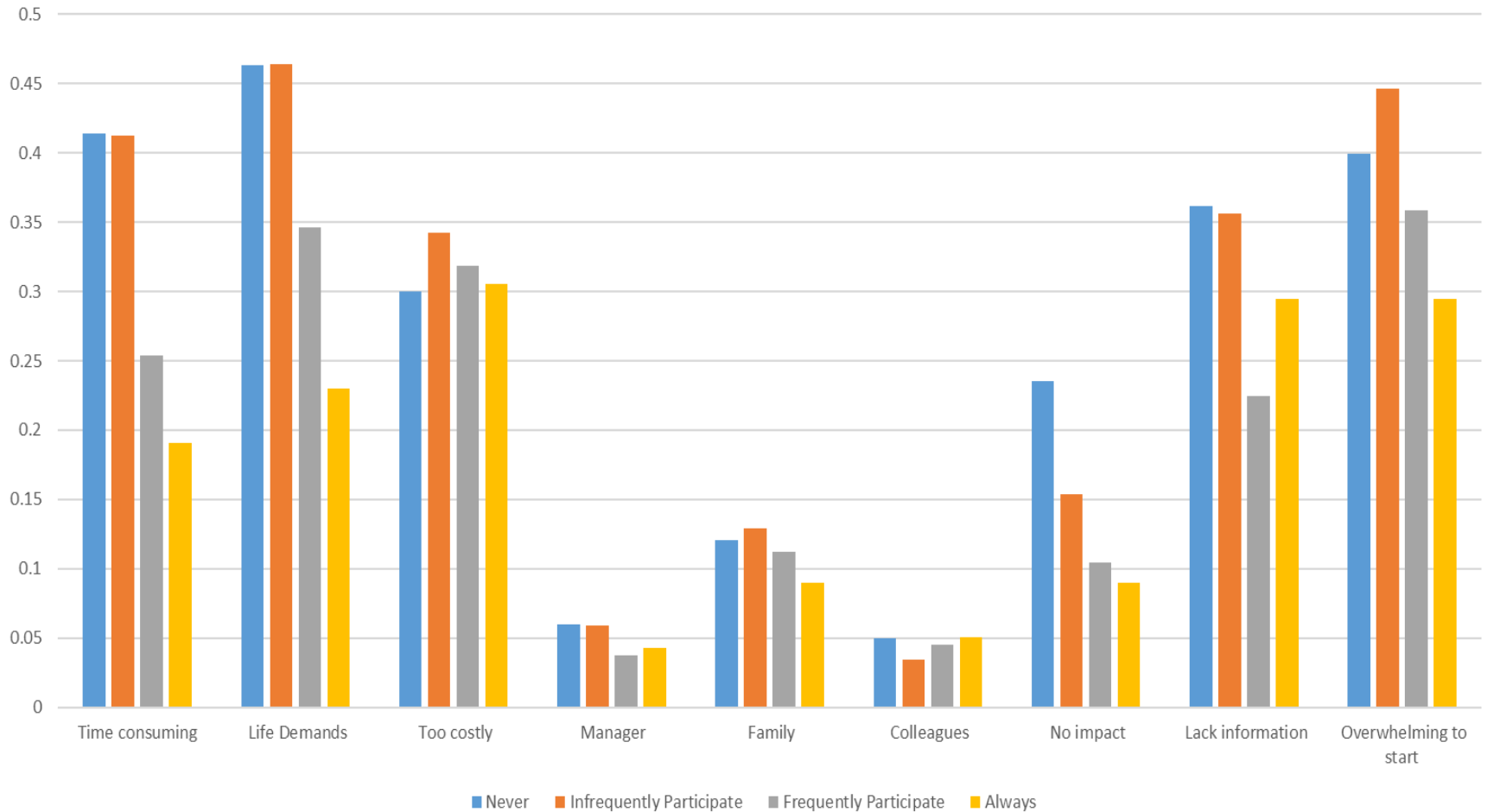


% of Respondents Reporting Barriers to Participation in Healthy Eating





Barriers Based on Level of Participation in Healthy Eating Programs





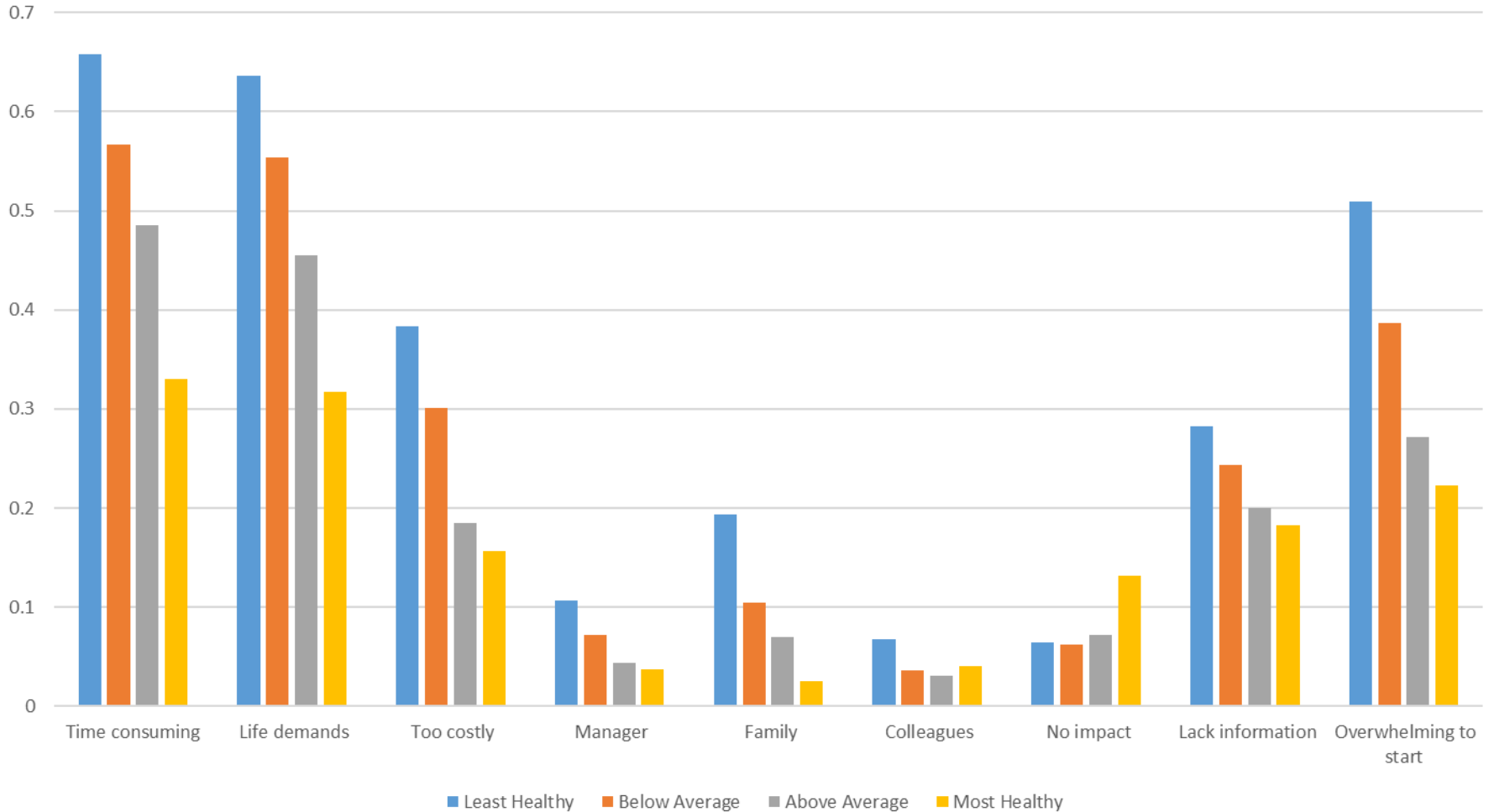
EXAMINING BARRIERS TO PARTICIPATING IN EXERCISE AND MOVEMENT PROGRAMS

Health condition: 357 self identified as least healthy, 1000 identified as below average, 952 identified as above average, and 318 identified as most healthy

Participation level: 887 identified as never participating, 874 identified as infrequently participating, 475 identified as frequently participating, 380 identified as always participating

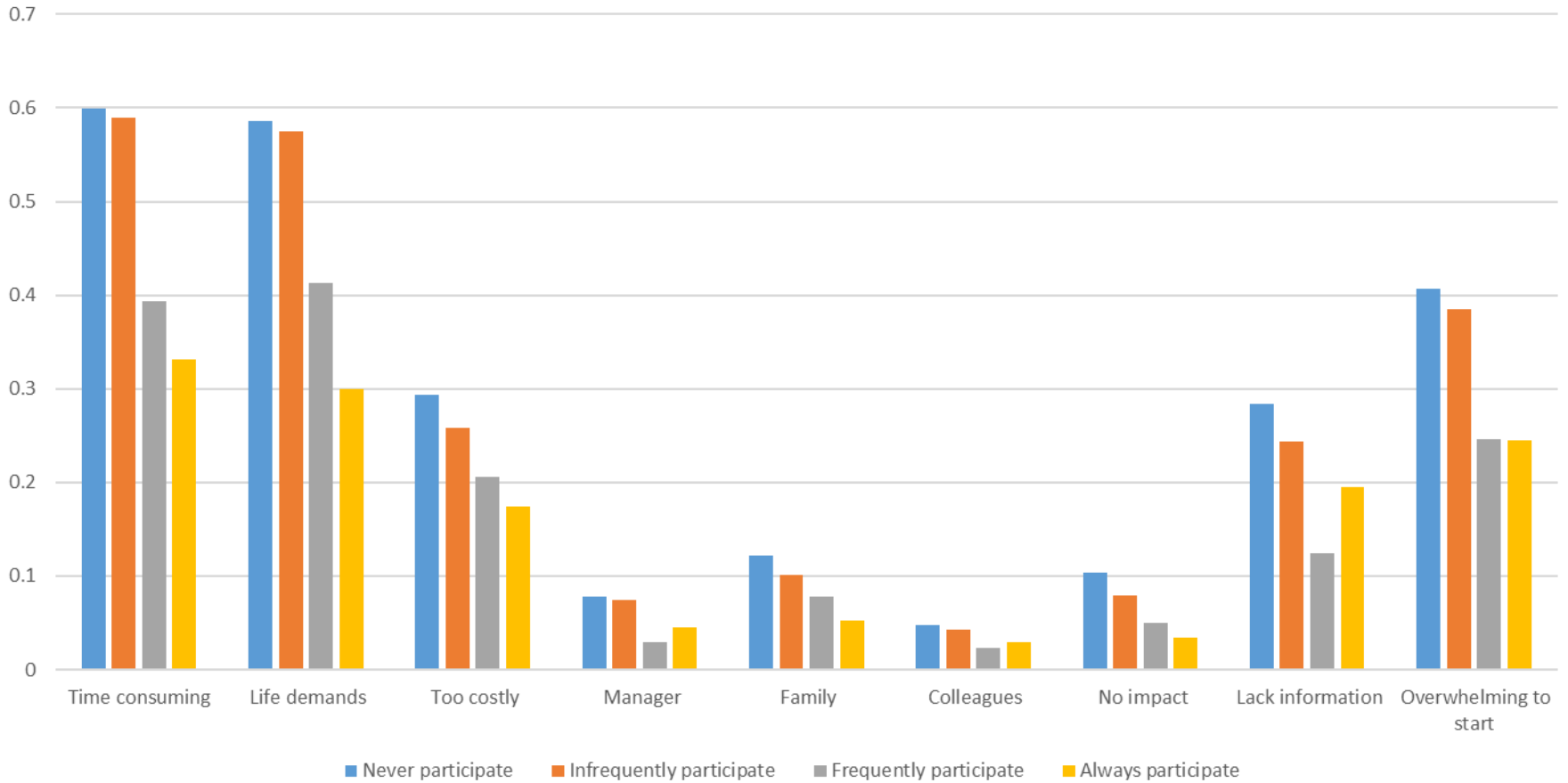


% of Respondents Identifying Barriers to Participation in Exercise Programs





Barriers Based on Level of Participation in Exercise Programs





Discussion

- How do these findings align with what you have observed in your organization?
 - Are the primary barriers to employee participation time/life demands, cost, and awareness/information?
 - What other important barriers have you identified beyond those we examined?



Discussion

- What types of interventions have you tried in your organization in an effort to boost participation?
 - What has worked well?
 - What has not worked well?
 - Have you found any interventions that are particularly effective for engaging at risk populations?



Next Steps

- Test interventions designed to target key barriers and improve employee participation rates.
 - Examine their effectiveness across different types of health and wellness programs and different types of employees (e.g., healthy vs. at-risk, remote vs. office-based).
- If you have data on interventions you have tried at your organization and/or are interested in partnering on a new intervention study, please contact us at cjc53@cornell.edu or brad.bell@cornell.edu.



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Thank You!