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ORGANIZATIONAL STRATEGIES USED IN THE DEVELOPMENT
OF HEALTH PROMOTION PROGRAMS

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ABSTRACT

With the increasing cost of health care, more and more corporations, government agencies, and other organizations are initiating health promotion programs. It is imperative that these programs be well planned, properly implemented, and carefully evaluated if they are to be successful. Although either a management initiated program or an employee initiated program can be effective, the best approach is a joint management, employee initiated program. In such a joint approach the advantages of both the management initiated and employee initiated approaches are maximized while disadvantages of the two approaches are minimized. If at all possible, a trained health promotion expert should be hired to manage this program regardless of where the program is initiated.

ORGANIZATIONAL STRATEGIES USED IN THE DEVELOPMENT
OF HEALTH PROMOTION PROGRAMS

Health promotion programs in corporations, government agencies and other organizations have generated a great amount of enthusiasm in recent years. This enthusiasm has not always translated into actual programs, but the numbers are starting to grow. For example, in a recent survey of Fortune 500 companies, almost 30% of the respondents indicated they currently had some health promotion programming while an additional 5% indicated they were starting a program (2). With over one-third of the nation's top corporations either having a health

promotion program in place or intending to initiate one, there is significant interest in the concept.

The initial motivating force for companies offering health promotion programs was economical. The cost of medical care has skyrocketed. From less than \$40 billion in 1965, medical costs reached 320 billion dollars in 1982 and are expected to top \$500 billion around the middle of the decade (3). About one-fourth of the nation's medical bill is paid for by employers and this amounts to more than 10% of an average U.S. company's total operating budget (9). It has been anticipated that corporate health promotion programs will help to decrease some of these escalating medical costs by reducing health care costs, worker's compensation costs, life insurance premium costs, employee absenteeism, and turnover (6).

An additional motivating force for many companies to initiate health promotion programs is that it is good public relations. Offering health promotion programs clearly demonstrates to employees that the employer is interested in their health and well being. Further, having a health promotion program and a reputation for good employee relations may allow employers to attract and retain high quality personnel. As Wilbur notes, however, if better employee relations is the primary purpose of a health promotion program, there is likely to be little improvement in overall employee health (12). To really impact health and consequently costs, a well planned, ongoing, comprehensive program is required.

COMPONENTS OF A HEALTH PROMOTION PROGRAM

Health promotion programs across the United States vary in terms of approach and content; however, there appears to be some commonalities addressed by many programs. Basically there appear to be five common interrelated components. They are: 1) planning and assessment; 2) information; 3) motivation; 4) activities; and 5) evaluation. The extent to which all or any of these components will be used depends on the overall purpose of the health promotion program. We can view the health needs of a corporation, government agency or other organization on a continuum varying in degree of complexity. At one end of the continuum there is the need for increased awareness and knowledge. This may involve providing information to people in the form of newsletters, posters, etc. At the other end of the continuum there is the need for a reduction in morbidity and mortality (in other words the lives of employees are directly at risk) and there may be a need for more direct intervention, e.g. for substance abuse. The types of health promotion programs undertaken will be dependent upon the initial planning or assessment that takes place within an organization.

Planning and Assessment

Before any programs are developed and offered to employees a great deal of planning needs to take place (1). Probably the most important and most often neglected component of a health promotion program is planning.

The first step in program planning is conducting a needs assessment (11). Using current epidemiological data on the workplace, pertinent health problems can be identified. Surveys, questionnaires, and/or interviews should also be conducted with the employee population to determine special areas of interest.

Using the information from the needs assessment, specific program objectives can be made (4). These program objectives must be congruent with the actual health promotion goals of the corporation. If, for example, the corporate goals for health promotion are to improve employee relations and provide a general increase in employee awareness of health related issues the specific program objectives would look quite different than if the corporate goals were to improve employee health status and decrease medical costs.

Once objectives have been established, it will probably be necessary to prioritize them. It is usually neither feasible nor desirable to initiate too many programs at once. Employee interest and organizational goals should be used as criteria for establishing priority programs.

Before program implementation begins it is important to identify specific outcome measures to be used in evaluating the programs. Once again the overall corporate objectives for health promotion must be considered in this process. Some possible outcome measures include health knowledge, health attitudes, health behavioral intentions, health behavior, physiological measures of health status, percent of employee participation, health costs, and job satisfaction. Any or all of these outcome measures may be appropriate depending on corporate goals and program objectives.

The final step in planning is to actually plan the programs. Here budgets need to be examined and resources identified. Often current employees of the company have skills that can be used in some programs. Community agencies such as the American Cancer Society or Heart Association, may offer programs to companies for nominal costs. For the overall organization and development of the health promotion program, however, it is recommended that a trained health promotion expert be hired if at all possible.

A very important component of planning is to determine when and where the actual programs will be offered. From a participation point of view it is best to offer programs during the employee's workday. Programs offered before or after work on employee time will decrease participation. It is also best to offer programs right on the company grounds. Programs offered even a short distance from the company will show a decrease in participation rate.

Information

One of the key factors in organizing and implementing a successful health promotion program is providing information to employees. People need to have educational materials that will lead to an increased awareness of health and its relationship to individual lifestyle management and also benefits to organizational goals. We live in a society where we are bombarded with information. There is a tremendous need to help individuals sort out information that can be useful and get it to them in an appropriate manner.

There are two approaches that can be used in providing information to individuals. One is to provide direct information to individuals regarding selected topics via tapes, lectures, newsletters, and so on. For example, the Xerox Corporation has an outstanding newsletter series entitled Take Charge. This newsletter is a part of Xerox's "Take Charge of Your Life Program" and consists of promotional campaigns, presentations and educational resources communicated through a network of volunteers. The Take Charge newsletter is an eye appealing, tasteful newsletter featuring facts, recipes, checklists for assessing health and other informational items. A second type of information that can be provided to employees is that which can be termed referral services. This is especially important in smaller organizations that are dependent upon community resources to assist in a health promotion program. Employees can be given information regarding the type, location, and cost of health-related services for both public and private agencies. This can be done in a variety of ways, including verbal counseling or, for example, through the creation of a booklet listing such agencies.

Motivation: Encouraging Participation and Adherence

For health promotion programs to be effective, it is imperative that employees participate in program offerings and adhere to at least some of the recommended lifestyle changes. Worksite health promotion programs have shown greater participation and adherence among participants than similar community based programs (5), but even so they are not exceedingly high. Both participation and adherence vary greatly from company to company and from program to program. For example, first

year participation targets for Johnson and Johnson varied from 20% of all employees who smoke to 75% of all hypertensives (12). Since health promotion programs require monetary and time commitments from both employees and employers, it is essential to identify ways that both participation rate and adherence can be improved (1).

Numerous methods have been tried to increase participation and adherence rates. Free computerized health risk appraisals and medical screenings have been used to help employees identify high risk areas and hopefully motivate them to take part in appropriate programs. Contests have been held between various divisions of a company to see which division can obtain the greatest participation rates. Free drawings and door prizes have been used to attract employees to introductory meetings. Including family members in health promotion programs can provide additional social support that may increase participation and compliance. Perhaps one of the best ways to increase participation and adherence is to follow the results of the needs assessment and offer those programs that employees need and want. Using visible progress logs to chart employee progress and providing visible rewards such as T-shirts, buttons, and/or plaques may also help provide incentives to become involved in health promotion programs.

The above listing is certainly not exhaustive. Many other techniques can be used to increase participation and adherence. The point is to try various techniques and to continually work on improving participation and adherence. It is unrealistic to think that 100% participation will ever be achieved, but it is equally unrealistic to think that maximum participation and adherence rates can be achieved without a concerted effort toward that end.

Health Promotion Activities

Health promotion activities can be divided into a variety of different categories. There are numerous activities that can be organized and implemented. The eight categories that we offer are:

Substance Abuse. Substance abuse programs can include activities organized in the areas of smoking, alcohol abuse and drug abuse. Smoking cessation clinics are an example of this type of program.

Nutrition, Diet and Weight Control. These types of programs focus on weight control, eating disorders, diets, tips for eating on the go, healthy snacks, and how to budget for balanced meals.

Stress Management. These types of programs emphasize identifying "stressors" and developing strategies for coping with life events and daily routines. Further, stress management activities present

individuals with opportunities for developing personal coping skills such as relaxation techniques.

Leisure Activities. These programs focus on providing recreation activities and helping people to formulate leisure values, develop leisure skills, and understand the role of leisure in their lives.

Self Concept. A number of programs focus on helping individuals build their sense of self esteem and self worth. These programs often emphasize how to help individuals communicate more effectively and operate in work groups more effectively.

Fitness Management. These programs include the provision of fitness activities as well as helping individuals analyze body composition, strength, flexibility and endurance. Fitness management also involves helping people plan individualized fitness programs.

Personal Health. These programs involve helping individuals control blood pressure, reduce the risk of cancer, engage in glaucoma screening, and engage in lower back pain prevention and heart attack risk reduction.

Safety. Safety programs help reduce accidents on and off the job. They often include training in First Aid, CPR, and Heimlich maneuver, as well as how to spot hazardous conditions.

Numerous programs can be operated by organizations using these eight general categories. Further, the formats can vary from classes, to clinics, to filmstrips, to discussion groups, to lectures. They can be conducted within the organization, or can be identified as opportunities outside the organization.

Evaluation

The final component of a health promotion program is evaluation. All health promotion efforts should be evaluated. This is necessary for planning future health promotion programs as well as establishing credibility in the field. The actual procedures for evaluation should be decided upon in the planning stage and are based on the corporate goals and the program objectives.

Three levels of evaluation need to occur in a comprehensive health promotion program designed to reduce health care costs and enhance productivity. The first level is program evaluation. Here questions regarding the actual programming efforts are answered, such as: Is the

program reaching the target population? Was the program well implemented? Was the program appropriate to meet its stated goals? Do workers like the program? Are they learning anything new? Are they attending? Do they want the program to continue?

The second level of evaluation looks at changes made in the employees that attended the program. Were there changes in health knowledge, attitudes, and/or behaviors? Was there any improvement in appropriate physiological measurements of health status such as blood pressure, cholesterol levels, or body composition?

The third and final level of evaluation looks at what are called outcome or "bottom line" measures. Has there been a decrease in absenteeism and/or turnover? Have health claims and/or health care costs decreased? Has there been an increase in job satisfaction or employee morale? Obviously this type of evaluation should only be conducted after a comprehensive program has been in place over a significant period of time. These are not the type of changes that will occur overnight or with a one-shot program.

If the results of the evaluation are to have any credibility, it is imperative that a well developed research design be used. Randomly assigned control groups should be compared to program participants, and intervening variables such as the Hawthorne effect must be controlled for.

STRATEGIES IN ORGANIZING HEALTH PROMOTION PROGRAMS

As indicated, health promotion programs in corporations, government agencies and other organizations have grown within the past several decades. Studies conducted in large corporations have indicated that health promotion programs have produced beneficial results, including increased job satisfaction, reductions in corporate health-related costs, and actual improvement in the health of employees (7). Many health promotion programs in corporations, government agencies and other organizations have been initiated by top management as a way of reducing health insurance costs, the cost of absenteeism, and stress-induced loss of productivity.

While at the same time that top management has been concerned with increasing health related costs, there has been an increase in consciousness regarding good health practices among the general population. In discussing the fitness boom, Time magazine has reported that the ". . . boom has grown for a decade, and improving the body has become an enduring, and perhaps historically significant national obsession. On any given day in the Republic this year, a record 70 million Americans - almost half the adult population - will practice some form of corporeal self betterment" (8, p. 95). There is

obviously great interest among the American population at this time in health and well being. Today, in many ways, we have a situation that exists that can be potentially mutually beneficial to both management and employees. Management is concerned with reducing costs related to poor health and stress and improving productivity, while at the same time employees are concerned with improving their health. There are several scenarios that have emerged out of this situation that may affect the strategies that a corporation, government agency or other organization will use in the development and implementation of a health promotion program. Three strategies that could be employed within an organization to organize and implement an employee wellness program include:

- * A management-initiated strategy
- * An employee-initiated strategy
- * An integrated management/employee strategy

A Management-Initiated Strategy

In many settings, top management takes the initiative and responsibility for providing the leadership to organize and implement health promotion programs. Many of these types of programs are initiated within an organization's Department of Personnel and are viewed as an essential benefit provided to employees. A large number of corporations across the United States are engaged in such programs and during the past several decades such programs have changed very dramatically. Discussing the development of management-initiated health promotion programs, Rosen has written:

During the past 40 years worksite health promotion programs have undergone significant changes. First-generation programs were initiated for a variety of reasons unrelated to health. Smoking policies, safety regulations and recreation programs were implemented for morale and product quality reasons, not for health benefits . . . The second-generation of worksite health programs expanded this focus by emphasizing the importance of health benefits and risk factor intervention but were characterized by attention to a single illness such as alcoholism or by programs offered to a specific sector of the work force such as executives. In recent years the work place . . . provides broad range employee assistance programs, health risk appraisals, behavior modification classes, and educational programs (10, p. 26).

Most health promotion programs that are management initiated are a

combination of educational, organizational and environmental activities (7). The purpose of such activities is to create opportunities for individuals in the work place to pursue activities that will result in greater overall health both physically and mentally. The program objective of AT&T for example is to "improve the health of employees by encouraging them to voluntarily adopt healthy lifestyles." They offer a variety of health promotion programs, including providing counseling and referral for substance, alcohol and emotional/behavioral problems. AT&T's program uses both medical staff from within and local community resources (7, p. 67). IBM also operates a health promotion program. The objectives of this program are to encourage individual responsibility for health, provide voluntary health education and assessment programs, and to encourage employees to become involved in health system agencies external to the organization. Their program, A Plan for Life, includes such activities as exercise, smoking cessation, stress and weight management, alleviation and prevention of back problems, first aid, cardiopulmonary resuscitation, and nutrition (7, pp. 82-83).

Perhaps the two most important advantages of a management-initiated program are the strong philosophical commitment that executives can bring to bear and financial and other resources that can be used in implementing a well organized program. Some of the disadvantages might include a question of the motives of management on the part of employees, as well as a lack of sense of involvement and ownership by employees. Table 1 presents a list of the advantages and disadvantages of management-initiated activities.

An Employee-Initiated Strategy

One's lifestyle, health and well being is a very personal matter. Today, more than ever, we are experiencing a great desire by individuals to be in control of their own lives, to have input into the decisions that affect them. This concern has extended to the work place. Individuals may experience a greater sense of job satisfaction when they are involved in decisions that affect their work. Health promotion programs operated within the work environment can have a direct or dramatic impact upon people's lives. The need for input and control in this area is as viable as in other areas influencing job satisfaction. Therefore, an employee initiated strategy for the provision of health promotion programs may be an alternative to a management-initiated one.

What does it mean to have an employee-initiated program? Basically, an employee-initiated program suggests that employees assume the responsibility for assessing risk factors and developing and managing programs and services. This can include the location of human resources, fiscal resources within the organization as well as the identification of community resources. An excellent example of an employee-initiated health promotion program is that of the work of the Wellness Committee of the Springfield (Oregon) Public School System.

This health promotion program was initiated by the work of employees within the organization. It did not emanate from the top down within the organization, but rather occurred because of concerns expressed by the staff itself. As a result of the formulation of the committee, a number of projects have been initiated by the staff including a newsletter, a fitness run, a weight reduction group, recommendations to change menus in the school cafeteria program, cooperative arrangements for programs with the Willamalane (Oregon) Park and Recreation District, blood pressure clinics, creation of a resource library and bibliography, training of staff members in CPR, acquisition of a grant, health and leisure assessments, and inservice training programs for staff members on the topic of wellness, lifestyle management and health promotion. This was quite a number of significant achievements for a group of concerned employees operating with little support from management.

Table 2 presents advantages and disadvantages of employee-initiated programs. Perhaps the strongest advantage is that it produces a stronger commitment on the part of employees; a sense of ownership. Further, the larger the pool of human resources from which the organization can draw, the greater the possibility for ideas, innovations and talent. The major disadvantage seems to lie primarily in the fact that there is a need to have management committed to programs. When management is not committed, it is a potential barrier and can create conflicts between management and labor.

An Integrated Approach

From an ideal standpoint, the best possible approach to providing health promotion programs is to have an integrated approach. An integrated approach would have support from management at the top with all of the advantages that this brings to the organization of health promotion programs. The same could be said of programs that are organized from the bottom up within organizations. Health concerns must be shared by both management and employees. To effectively change attitudes, values and behavior, people must be given control over those things that affect their lives. Thus, it seems appropriate that employees have a great deal to say about how programs are to be planned, organized and implemented.

How would an integrated approach to providing health promotion programs work? From an organizational standpoint, health promotion groups could be established by either employees or management to attack specific areas of health concern or to guide the overall strategy that could be employed by the corporation. These groups, or perhaps we might call them health councils, within an organization could be made up of individuals representing all levels administrative, supervisory, workers. The idea would be to build commitment from the top and the bottom simultaneously - to build a sense of appreciation for the impact

of good health on the individual, while at the same time understanding how it also contributes to the achievement of organizational goals. In many corporations, such a model has existed over the past several decades, via the development of employee recreation associations.

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TABLE 1

ADVANTAGES AND DISADVANTAGES OF MANAGEMENT-INITIATED
HEALTH PROMOTION PROGRAMS

ADVANTAGES

- * Stronger philosophical commitment by management to health promotion programs
- * Financial support for programs
- * Role modeling by top executives for other employees
- * Facilitation of the use of organizational resources - physical, human and technological
- * Strong managerial leadership focused on health promotion programs
- * Possible stronger program identity
- * Fostering of positive communication between management and employees

DISADVANTAGES

- * Employees questioning the motives of management
- * Management-initiated programs may not foster the desired degree of employee involvement since some programs require major lifestyle modifications
- * Lack of a sense of ownership of programs on the part of employees
- * Possible philosophical incompatibility of organization with health programs desired by employees
- * Can foster dependence on management or organization, plan and implement health promotion programs

TABLE 2

ADVANTAGES AND DISADVANTAGES OF EMPLOYEE-INITIATED
HEALTH PROMOTION PROGRAMS

ADVANTAGES

- * Potentially stronger commitment by employees to health promotion programs
- * Sense of ownership of programs and services
- * Health promotion programs wedded to employee needs, interests and concerns
- * Broad based leadership; opportunities for employees to demonstrate leadership skills and abilities
- * Potential to pool the talent of individual employees to help in the actual implementation of programs
- * A larger source of creative ideas, inventiveness, and problem solving for programs and innovations
- * Peer pressure to participate in programs and influencing others to practice positive health habits

DISADVANTAGES

- * Possible lack of philosophical commitment from management
 - * Lack of financial support from the organization
 - * Lack of access to other organizational resources - physical, human and technological
 - * Possible conflict with management over types of programs to be offered
 - * Can take time away from primary job functions
-

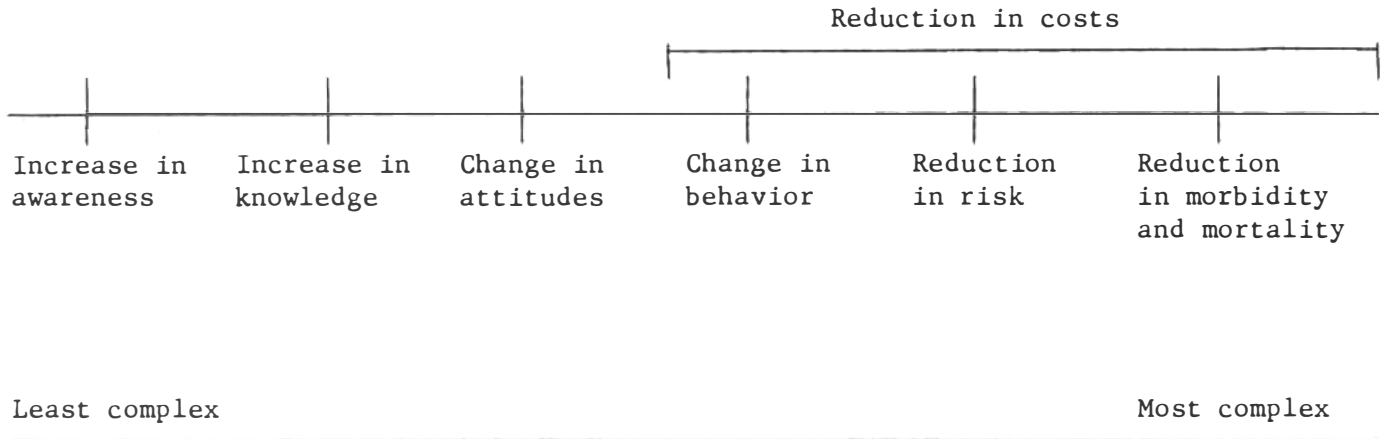
TABLE 3

ATTRIBUTES AND CHARACTERISTICS OF AN INTEGRATED APPROACH
TO PROVIDING HEALTH PROMOTION PROGRAMS

- * A strong philosophical commitment on the part of both management and employees
- * Maximum utilization of organizational resources
- * Opportunities for leadership for all levels within organization as well as contribution of ideas and concepts
- * Broader base of financial support, both from management and employees
- * An integrated approach reinforces the concept that the organization is a holistic entity
- * Provides opportunities for increased communication between management and employees
- * Creates a corporate atmosphere of concern and welfare for others throughout the entire organization
- * Provides opportunities for role modeling by both management and employees
- * Provides positive peer pressure to assist individuals in changing or modifying their behavior
- * Individual employees, management and workers view themselves as valued human beings in a larger context, that is they are contributing to the well being of each other

Figure 1

Determining Health Promotional Needs*



*Source: Rebecca S. Parkinson. Managing Health Promotion in the Workplace. Palo Alto, California: Mayfield Publishing, 1982, p. 19.

