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PROFILE OF THE CORPORATE AND COMMERCIAL
FITNESS INDUSTRY

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Bachelor of Science in Education

Cleveland State University

June, 1984

Submitted in partial fulfillment of requirements for the degree

MASTER OF EDUCATION IN PHYSICAL EDUCATION

at the

CLEVELAND STATE UNIVERSITY

June, 1987

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FITNESS INDUSTRY

COLLEEN G. GAVELEK

A thesis submitted in partial fulfillment of the requirements for the
Master of Education Degree, College of Education, Cleveland State
University.

June 1987

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ABSTRACT

This investigation surveyed program directors and staff members of commercial wellness and/or fitness clubs, and corporate wellness/fitness programs in major United States cities. It assessed the five following areas: qualifications and certifications, salary, programs and facilities, in-service and staff development, and exercise programs. A total of 489 questionnaires were sent to program directors in 21 cities across the United States. The applicable percent of return was 19%. The information was coded and then analyzed using descriptive statistics. Five of the seven hypotheses were supported. Unexpected results, where variations could occur, were found within the hypotheses.

The findings included: Whereas program directors in the corporate area had more formal education than commercial program directors, commercial directors had more ACSM certifications. The staff in both sectors had equivalent formal education, but commercial staff had more ACSM certifications. Bonuses are used as incentives for increased membership sales in the majority of commercial sectors. Over half of the corporate sector required a physical exam before starting an exercise program. Less than half of the commercial sector required some form of fitness evaluation. Whereas each sector used different techniques of assessment, both sectors regularly assessed their programs and clients. The commercial sector offered more initial/orientation and inservice programs for their staff than the corporate sector. There were differences in many areas between corporate and commercial program directors (age, years in present position, salary, recommendations). Even though the survey had a small return rate, the study indicated trends within the fitness industry.

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CHAPTER I

INTRODUCTION

Since the 1970's, the fitness industry has been "off and running." It is estimated to be a \$20 billion annual business in the United States, growing at a rate of 10 percent each year (An outline for, 1986). New centers open monthly, and more and more individuals are employed to administer exercise and health programs. Certification programs at various levels (American College of Sports Medicine, and International Dance Exercise Association) and degree programs at colleges and universities (physical education, and exercise physiology) have been established to ensure proper training and competency skills for fitness personnel. In the corporate area, recent studies (Breuleux, 1982; Mattia, 1984) have shown that program directors and staff members are well qualified. But information is not available on qualifications and/or certifications of the program directors and staff members of the commercial clubs.

As noted in Shape magazine (Sharkey, 1985), the Federal Trade Commission has received complaints from many individuals who regularly use fitness clubs. The most frequent complaints concern misrepresentations about services and facilities, clubs that go out of

business, and high-pressure sales tactics. Such complaints may be in part related to poorly trained personnel. Personnel are considered a crucial element of an effective wellness/fitness program: accordingly this survey will investigate the educational background and training of program directors and staff members.

STATEMENT OF PROBLEM

This investigation will assess five major areas in wellness/fitness programming in corporate and commercial programs, to determine the current qualifications, programming and overall operations in the wellness/fitness industry. It will examine these variables to determine how to provide the safest and most effective programs for the wellness/fitness industry. More specifically seven hypotheses will be addressed.

HYPOTHESES

1. Program directors and staff members in corporate programs have a higher level of formal education than program directors and staff members at commercial clubs.
2. In commercial clubs, employee bonuses are used as incentives for increased membership sales while corporate programs do not use incentives.
3. The majority of corporate programs require a physical exam, whereas the majority of commercial clubs do not require a physical exam before starting a new exercise program.
4. The majority of corporate programs require a fitness evaluation, whereas the majority of commercial clubs do not require a fitness evaluation before an individual begins a new exercise program.

5. The majority of corporate programs base all their programming on the results of the fitness evaluation for the prescription, whereas the majority of commercial clubs do not utilize an exercise prescription.
6. Corporations, unlike commercial clubs, regularly assess their programs and clients.
7. Corporations offer more workshops/wellness programs than commercial clubs.

SCOPE OF STUDY

The study will survey program directors and staff members of commercial wellness and/or fitness clubs, and corporate wellness/fitness programs in major United States cities. It will assess the five following areas: qualifications and certifications, salary, programs and facilities, inservice and staff development, and exercise programs.

LIMITATIONS

1. Survey limited to corporations and clubs in major United States cities, based upon regional distributions.
2. Survey limited to corporations associated with the Association for Fitness in Business.
3. Survey limited to commercial clubs with more than 2 clubs within a city; if less than 2 clubs within a city, then have additional clubs in other cities.
4. Survey limited to corporations with only on-site programs.

ASSUMPTIONS

1. The questionnaire is a valid and reliable instrument.
2. The program directors will answer honestly and to the best of their knowledge.

OPERATIONAL DEFINITIONS

Fitness programs: Exercise programs designed for general body conditioning, including cardiorespiratory endurance, muscular strength and endurance, flexibility, and body composition.

Wellness programs: Programs that teach practical skills in behavior modification (smoking cessation, weight control, stress management) and/or educational programs that provide health information (CPR, heart disease risk factors).

Corporations: Those businesses who offer on-site wellness/fitness programs to their employees and are affiliated with the Association for Fitness in Business (AFB).

Commercial Clubs: Those facilities offering comprehensive wellness and/or fitness programs to the public for a fee and have more than 2 clubs within a city; if less than 2 clubs within a city then have additional clubs in other cities.

Professional Corporate Member: Shall be an individual dues paying member who is employed by a company and serves as a fitness director, coordinator, or instructor of a fitness/health program operated by said company. The principal business of that company shall be other than selling physical fitness equipment, services or systems to other corporations or organizations (AFB, 1986).

Professional Associate Member: Shall be an individual dues paying

member employed by an educational, governmental, medical, private agency or other organization, and who is responsible for the educational development, management, and/or evaluation of a business related fitness/health program, but does not qualify as an AFB "Professional Corporate" member. The business of the aforementioned shall be the selling or providing of physical fitness equipment, materials, services or systems to other corporations or organizations (AFB, 1986).

General Member: Shall be an individual dues paying member not involved in the leadership of a company, educational, governmental, medical, private agency, or other organizational fitness/health program, but who does have an active interest in fitness, health or recreation (AFB, 1986).

Student Member: Shall be a full-time undergraduate or graduate student who has active interests in fitness, health, physical education, or related fields (AFB, 1986).

American College of Sports Medicine: The ACSM offers certification procedures for Fitness Instructor, Preventive and Rehabilitative Exercise Test Technologist, Exercise Specialist, and Exercise Program Director. There are progressive expectations of knowledge base, skills, and competencies for each of the categories. The fitness instructor must demonstrate an adequate knowledge in the areas of health appraisal and risk factor identification. The exercise test technologist must demonstrate competence in graded exercise testing. The exercise specialist in addition to the competency expected of the exercise technologist, must demonstrate competence in executing an exercise prescription and in leading exercise. The program director,

in addition to the competencies expected of the exercise technologist and exercise specialist, must demonstrate competence in administering preventive and rehabilitative programs, designing and implementing exercise programs and the education of staff and community. The expectation is that competency in each category of certification for preventive and rehabilitative exercise program presupposes competency in the same areas in programs designed for healthy persons (ACSM, 1986).

SIGNIFICANCE

In a nation where half of the consumers are involved in some type of fitness or diet program to maintain or improve their health (Jensen, 1986), it is essential that they receive up-to-date, professional, and quality information for effective, injury-free, and enjoyable programs. There is an epidemic of club injuries directly related to instruction. Even the instructors are suffering injuries (Weider, 1986). This is due not only to the lack of knowledge of the instructors, but the lack of appreciation of a knowledge base on the part of management. Although a number of training programs have been developed, a specific set of guidelines for training wellness/fitness professionals does not exist at the present time. New information from corporations and commercial clubs is needed to assist in developing quality personnel and programs within the fitness industry. It is hoped that this survey will assist in observing what is currently available to the public.

CHAPTER 2

REVIEW OF LITERATURE

Epidemiologic research has indicated that an individual's habits and lifestyle contribute significantly to his/her state of health and duration of his/her life span (Bowne, 1984). Health care expenditures in the United States reached 9.8% of the gross national product in 1981 (Bowne, 1984). Heart attacks account for 52 million days of lost output each year at a cost to employers of \$50 billion. Nearly 60 percent of the losses to the American economy due to chronic ill health can be prevented by healthful lifestyles (Fitness Systems, Inc., 1984).

Many studies suggest that vigorous fitness and lifestyle programs reduce the evidence of fatal heart attacks by as much as 50 percent (Shepherd, 1984). With this in mind individuals are now concentrating on the beneficial effects of regular exercise, a prudent diet and the avoidance of obesity, and the risks associated with cigarette smoking and alcohol abuse. In fact, half of the nation's consumers are involved in some type of ongoing fitness, exercise or diet program (Jensen, 1986).

What used to be an individual endeavor has now become part of

the workplace. With the first corporate physical fitness program initiated in 1894 by John H. Peterson, president of National Cash Register Company (NCRC) of Dayton, Ohio, businesses began to recognize that the strategy of lifestyle modifications can combat the ever-rising costs of employee health care (McKendrick, 1982). Today the President's Council on Physical Fitness and Sports estimates that some 50,000 businesses sponsor organized recreation programs. The Association for Fitness in Business which started with 40 members in the early 1970's, has grown to more than 1,000 corporate members (Howell, 1985).

Corporate programs have come a long way since those morning and afternoon exercise breaks at the NCRC company. Those breaks have now turned into million dollar facilities and bottom-line values. Health club memberships are given out the way they used to bestow country-club memberships. A meeting after work over a drink, or during a round of golf has changed to 5-mile jogs and games of squash.

CORPORATE PROGRAMS

As previously mentioned, it is estimated that some 50,000 businesses in the United States sponsor recreation programs. But Canada has played a major role in fitness research and practice. In 1974, The Canadian Fitness and Amateur Sport Branch hosted the National Conference on Employee Fitness. One recommendation from this conference stated in part:

The Federal Government should develop and fund research programs designed to evaluate existing employee fitness programs, and analyze the cost benefits of these programs to the employers (Peepre, 1980).

The Canadian Fitness and Lifestyle Project began in September, 1977 with two main objectives:

Part I - to develop and implement a "model" program in a large business.

Part II - to measure the effects of such a program on a variety of parameters.

Two sites in Toronto were used for the project: The Canada Life Assurance Co. as the experimental group, and the North American Life Assurance Co. as the control group. The experimental group received thirty minute fitness classes, while the control group had no organized activities.

Culminating in June 1978, the results showed a number of significant findings. The most positive were in improved general fitness among participants, substantial decrease in absenteeism and employee turnover, and the improvement in morale and attitudes of participants in regard to their personal health and work environment.

Recently here in the United States similar results have been found. The Prudential Insurance Co. in Houston reported a 45.5% reduction in average major medical costs one year after implementing a fitness program. A savings of \$1.93 was realized for each \$1 invested in the program (Bowne, 1984). The Lockheed Missles and Space Co. estimates that since 1978, it has saved \$1 million in life insurance costs (FSI, 1984). A five-year intervention program involving New York state employees found sick leave among fitness participants was reduced 43% (Bjurstrom, 1978). And as of 1987, John Hopkins University estimates that a \$30,000 investment in a health promotion program can substantiate a savings of \$400,000 in reduced absenteeism alone (The Corporate Heart, 1987).

Company statistics are vital, but quantifying an individual's productivity is extremely difficult. What must also be considered is job attitude, work performance, and overall morale--all factors critical in enhancing productivity. Since it is believed that individuals who exercise are more productive, then it would be worth a company's investment to make a program available for employees who already exercise and to attract new employees as well. Whether a company makes people exercisers or whether they hire more exercisers, the statistics will suggest a more productive company.

Pepsico has had a fitness program since the 1950's (Redding, 1986). And during the 1960's Xerox Corp., Rockwell International Corp., and Phillips Petroleum were frontrunners with corporate programs (Breuleux, 1982). Now in the 1980's more and more companies can be considered leaders by offering quality programming to their employees. The programs are as diversified as the companies that sponsor them, but most offer programs geared toward cardiovascular fitness, muscular fitness, and flexibility. Additional programming may include nutrition, weight control, stress management, smoking cessation, and substance abuse--something for everyone.

As Breuleux (1982) found, the primary emphasis of the corporate fitness programs surveyed was overall or health related physical fitness with cardiovascular conditioning ranking second. Within the corporate setting, it seems that a broader assessment of successful fitness programs is needed: One that includes worker productivity, absenteeism, turnover, and health insurance costs. It should include the fitness of the individual, the work team, and the organization as a whole (Clemons, 1980).

According to Jason Convisor, director of executive fitness of Oscar Meyer Foods, Inc., appearance alone can not make up for knowledge, experience, and the ability to help individuals attain realistic goals (Halcomb, 1984). The program director must be one step ahead in the areas of health, recreation, and fitness services to provide excellent programs to keep employees interested. Irregular compliance and lack of participant adherence are the greatest problems encountered by corporate fitness directors. Competence in programming and motivational skills is crucial in fitness leadership (Breuleux, 1982). This is vitally important since the majority of the future labor force will be white-collar workers who have stronger educational backgrounds, have greater expectations for their jobs, and demand more participation in the workplace (Sawyer, 1986).

COMMERCIAL CLUBS

With extensive research available on corporate programs, less is available on the hundreds of thousands of privately owned and publicly used facilities. What research is available is not necessarily good news.

With the age of automation, it was assumed that Americans would perform less daily physical activity. In daily routines this was true, but with increased leisure time, physical fitness became a leading concern. But the fitness industry's explosive growth has occurred without federal guidelines or regulations, and some of the results have been disastrous. Complaints became so numerous that in the late 1970's, the Federal Trade Commission (FTC) decided to look into the matter. Public hearings were held in Atlanta, San Francisco,

and New York. Some 135 members testified, identifying six areas of abuse. "Health spas", as that term is defined in the proposed rule:

1. Have used false, deceptive, and misleading advertising and sales presentations.
2. Have misrepresented the extent and nature of the contractual obligations of consumers whom they have persuaded to enroll in or join a health spa.
3. Employed cancellation and refund policies which are unfair to consumers who elect to cancel their respective memberships because of the impossibility of continued participation in spa activities or because they discover that the services to be provided by the spa are not what they were represented to be in the sales presentation or in advertising.
4. Have sold memberships in spa facilities which are not opened and available for use at the time such memberships are sold, and which in fact, do not open at the time promised or do not open at all.
5. Have closed facilities or gone out of business without providing, or making provision to provide, consumers with the services for which they have contracted and paid.
6. Have sold membership contracts to consumers who are not physically qualified to participate in the activities of the spa.

By 1978, Dr. Jimmy D. Johnson, Executive Director of the APFC (Association of Physical Fitness Facilities), felt that these abuses were no longer typical of the industry (Dietrich, 1982).

The FTC's published report seems to have had no impact on the fitness industry. In 1981, Dr. Johanna K. Lemlech, Associate Professor of Education at the University of Southern California visited eight health clubs within a five-mile radius of her home. She found many commonalities among the clubs:

- equipment rooms and pool areas unsupervised.
- all of the instructors were young women dressed in leotards and high-heeled shoes.
- each instructor/mgr. asked "How did you hear about us?" and not "What are your special needs?"
- no one discussed the club's fitness philosophy.

In 1985, in Ohio, Scandinavian Spas (owned by Bally, with 21 spas in Ohio) was charged with violating Ohio consumer protection laws by selling illegal life memberships, called "permanent memberships." Scandinavian was required to pay a \$15,000 civil penalty, reimburse the state \$5,000 in legal fees and contribute an additional \$10,000 toward a state fund to investigate consumer-protection problems (Scandinavian Spas, 1986). In 1987 Scandinavian was again under fire for bugging rooms where potential customers were recruited. Spa officials removed the listening devices in 33 clubs in Florida, Indiana, Pennsylvania, and Ohio (Davis, 1987).

The Association of Physical Fitness Center (APFC), established in 1975, is the only national trade association for the full service physical fitness center. It is a privately funded, nonprofit organization. Provisions recommended by APFC include:

1. The prohibition of "lifetime contracts".
2. Contracts sold for "planned facilities" (preopening sales) should be voidable in the event the facility and promised services are not available within 12 months of the contract signing.
3. A surety bond or an acceptable statement of financial responsibility should be posted and retained until a facility opens in those instances where the health spa operator is selling preopening memberships.
4. Spa members should be permitted to cancel their contracts if they:
 - a. become permanently disabled;
 - b. relocate to more than 25 miles from a facility;
 - c. expire (the estate cannot be held liable.)

The association also developed an advertising and sales practices review program where members of the industry, and the consumer public, can bring questionable advertising practices to the attention of APFC (APFC, 1987). Concerns that Dr. Johnson, Executive

Director of APFC, felt were no longer typical of the fitness industry in 1978, are still happening today with the organization's own members.

Two different major organizations (ACSM and IDEA) offer accreditations for their programs, but no government agency (President's Council on Physical Fitness and Sport) or educational organization (American Alliance of Health, Physical Education, Recreation, Dance) has taken the initiative to advocate the nation wide licensing of health clubs or instructors. But recently a new organization, Professionals Against Fitness Fraud (PAFF) was formed in Colorado by concerned professionals who want to upgrade fitness instruction and to secure the future of the physical education profession (PAFF, 1986). Dr. Marc Rabinoff, spokesperson for PAFF, recommends that members become educated consumers. They should check with professionals in physical education departments at local universities, or the Better Business Bureau for updated information of any fitness/wellness clubs, spas, etc. (Rabinoff, 1986).

PROFESSIONAL PREPARATION

Licensing of fitness professionals is eminent, but not necessarily a new issue. In 1900 an announcement was made of a written examination of applicants for licenses as teachers of physical training in any or all of the boroughs of the city of New York. The qualifications were as follows: "at least 18 years of age and of good moral character, a graduate of high school or equal or higher rank school, and a graduate from a professional course of at least one year in the teaching of physical training, with at least one year of successful teaching experience in physical training" (Nixon, 1964).

Today in 1986 we see want ads for fitness instructors with the following qualifications: no experience necessary, sales helpful, come dressed to exercise.

What has happened in the last 86 years? Has health and fitness become so common place that anyone can be an effective fitness instructor? Health and fitness professionals say NO! They recommend that qualified personnel have degrees in physical education, sports medicine, health, or other programs studying the concepts of human movement science. In-house certification should not be considered (Rabinoff, 1986).

In September of 1978, Business Week published three pages on "How to Select a Health Club." It recommended that exercise instructors should have college degrees in physical education: and Dr. Frank W. Jobe, an orthopedic surgeon and team doctor for the Los Angeles Dodger's, suggested that one trainer and two or more technicians be on duty at all times. The February, 1985 issue of Shape magazine contained a 22 page mini-handbook on selecting health clubs. They suggested joining clubs with available staff certified in CPR, and have credentials in the fitness field. Since as much as 50% of a program is dependent on leadership (administration, role models, etc.), the success or failure of a program stems directly from the educational background and training of the personnel (Russell, 1985).

Breuleux (1982) and Mattia (1984) both found that the majority of the corporate fitness directors surveyed held master's degrees along with previous experience in the fitness area. In addition, according to Breuleux, the following were suggested essential job skills for a program director: knowledge of fitness; expertise in exercise

prescription; programming; ability to motivate; leadership and administrative talent; skill in communication, promotion, and public relations. Seventy-two percent of the corporate fitness directors surveyed recommended the American College of Sports Medicine certification as an exercise technologist or program director.

Although a number of training programs have been developed, a specific set of guidelines for training wellness/fitness professionals does not exist at the present time. That is why in 1983 the National Association for Sport and Physical Education (NASPE) began to collect information from colleges and universities about physical education curriculum. The revised September 1986 Standards for Programs Preparing Undergraduate Students for Careers in Fitness recommend a multi-disciplinary approach. Basic courses include human anatomy and physiology, exercise physiology, kinesiology, measurement and evaluation, motor learning, teaching methodology, care and prevention of fitness injuries, and individual activities focusing on fitness. Additionally, courses in psychology, sociology, health, business, and nutrition are to be provided (NASPE, 1986). To complete the overall experience, the programs should include job-related or clinical experiences. All of these skills then combine to form a competent fitness director.

Every fitness director plays three basic leadership roles. The Behavior Change Agent acts as an educator, counselor, supervisor, motivator, and assessment specialist. The Program Manager functions as a planner, promoter, and evaluator. The Model leads by example. The fitness leader is to be an example of a healthy, active lifestyle. (Collingwood, 1982).

Individuals interested in fitness/wellness careers have a few options available to them. The first is an undergraduate or graduate degree in physical education, sports medicine, health or other program studying the concepts of human movement science. Another option is the ACSM certifications for Fitness Instructor, Preventive and Rehabilitative Exercise Test Technologist, Exercise Specialist and Exercise Program Director. IDEA (International Dance-Exercise Association) now has nationwide aerobic certification. Within a few years the U.S. Fitness Academy is to be built in California. The academy's purpose will be threefold: to train instructors in fitness, health and nutrition; to provide instructors with leadership training; and to be a national clearinghouse for the most up-to-date information on health (National fitness, 1986).

The need to license health clubs and exercise instructors is becoming increasingly evident. And it seems exercise instructors will be the first on the agenda.

SUMMARY

Epidemiologic research has indicated that an individual's habits and lifestyle contribute significantly to his/her state of health and duration of his/her life span (Bowne, 1984). Businesses have begun to recognize that the strategy of lifestyle modifications can combat the ever-rising costs of employee health care (McKendrick, 1982). The corporate programs have become as diversified as the companies that sponsor them, but most offer programs geared toward cardiovascular fitness, muscular fitness, and flexibility.

With extensive research available on corporate programs, less is

available on the hundreds of thousands of privately owned and publicly used facilities. The fitness industry's explosive growth has been without federal guidelines or regulations, and some of the results have been disastrous. Both the Federal Trade Commission and State Attorney Generals have received numerous complaints from individuals who regularly use fitness centers.

No government agency or educational organization has taken the initiative to advocate the nation wide licensing of health clubs or instructors. Professionals in the fitness field recommend essential job skills for a program director which can be obtained through certification programs at various levels (American College of Sports Medicine) and degree programs at colleges and universities (physical education and exercise physiology).

Fitness is obviously big business. And whether it is to make money or save money, the main focus is still the same: to change unhealthy lifestyle behaviors. In an attempt to follow the Surgeon General's national goal for 1990 to have 60% of all adults engage in regular vigorous physical activity (AFB, 1986), the following characteristics should be included in all fitness programs (FSI, 1985):

- Screening as a prerequisite for participation.
- Direction by a person skilled in prescribing exercise.
- Individually tailored, non-competitive exercise programs.
- Periodic fitness evaluation.
- Techniques for encouraging ongoing participation.
- Reinforcement of other positive health maintenance activities.

All programs should consist of something for everyone to contribute to a long, healthy life.

CHAPTER 3

RESEARCH METHODS AND MATERIALS

INTRODUCTION

This investigation surveyed program directors and staff members of commercial wellness and/or fitness clubs, and corporate wellness/fitness programs in major United States cities, to determine the current qualifications and training of personnel in the wellness/fitness industry. The questionnaire included the following factors: qualifications and certifications, salary, programs and facilities, in-service and staff development, and exercise programs.

SELECTION OF SUBJECTS

In an attempt to include major cities throughout the United States in this study, a form was sent to all faculty in the Physical Education department at Cleveland State University. Each faculty member was asked to identify three representative cities within the following sections of the country: northeast, southeast, midwest, central, southwest, northwest, and west coast. The most frequently recognized cities were chosen: Boston, New York City, Philadelphia, Miami, Atlanta, New Orleans, Chicago, Indianapolis, Minneapolis/St. Paul, St. Louis, Denver, Kansas City, Dallas/Ft. Worth, Phoenix,

Houston, Seattle, Portland, Salt Lake City, Los Angeles, San Francisco, San Diego.

Once major cities were identified, corporations and commercial facilities were chosen as follows. Individuals with corporate membership in the Association for Fitness in Business were selected from AFB's 1985-1986 Annual Information Directory and Resource Guide in each given city. Local telephone directories for each city were used to identify commercial facilities with more than 2 clubs within a city; if less than 2 clubs within a city, then had additional clubs in other cities. Questionnaires were sent directly to the program directors.

DESIGN

The questionnaire was based on two previous studies that focused strictly on corporate fitness programs (Breulex, 1982, Mattis, 1984). Faculty within the Physical Education department of Cleveland State University were asked to respond to major categories to be included in the questionnaire. The questionnaire was then compiled from the two studies, faculty, thesis committee, and personal responses. (See Appendix). A pilot study was conducted in the Cleveland/Akron area for additional suggestions and revisions.

The questionnaire contained six categories: staff information, in-service and staff development, programs, exercise prescription, facilities and equipment, and program director. All questions were answered with a check mark or short answer.

ASSESSMENT TOOL

The assessment tool was the questionnaire (See Appendix).

PROCEDURES

1. Questionnaire sent to Physical Education faculty to determine cities and categories on May 7, 1986.
2. Major cities chosen for representative sample.
3. Major categories developed for questionnaire.
4. AFB directory and local phone directories used for addresses.
5. Pilot study conducted in the Cleveland/Akron area from September 29, 1986-October 10, 1986.
6. Revised questionnaire.
7. Questionnaires sent to corporate and commercial program directors in selected major U.S. cities on November 7 and 11, 1986.
8. Follow-up letter sent one month later on December 8, 1986.
9. Last date of acceptance of questionnaires on January 22, 1987.

ANALYSIS OF DATA

Analysis of data included the following: descriptive analysis, analysis of variance, and chi square analysis. All inferential testing was conducted at .05 level of significance.

CHAPTER 4

RESULTS

A total of 489 questionnaires (113 corporate and 376 commercial) were sent to program directors of corporate and commercial fitness facilities throughout the United States. A total of 109 were returned. The total percent of return of 22%. Of these, 15 (3 corporate and 12 commercial) were returned unopened, one was returned unidentifiable between corporate and commercial, and 11 were not applicable to the survey (7 corporations had no programs, one commercial facility had no program director, and 3 corporations had no facilities). A total of 82 questionnaires were applicable to the survey, with 51 from the corporate sector and 31 from the commercial sector. Applicable percent of return was 17%, with a 45% rate from the corporate sector and an 8% rate from the commercial sector. Two commercial facilities responded with one questionnaire for all of their facilities. All of this data was included, but an increased percent of return was not calculated. According to the number sent to each region, the largest percent of responses in the corporate area was the Southeast at 78%, and in the commercial area were the Central, Northwest, Southwest and Midwest at 11% each.

ANALYSIS OF HYPOTHESES

The data were analyzed using descriptive statistics of frequency, means, range, and chi square. These allowed for a comparative view of both corporate and commercial fitness programs and personnel. Each of the seven hypotheses will be reviewed separately.

1. PROGRAM DIRECTORS AND STAFF MEMBERS IN CORPORATE PROGRAMS HAVE A HIGHER LEVEL OF FORMAL EDUCATION THAN PROGRAM DIRECTORS AND STAFF MEMBERS AT COMMERCIAL CLUBS.

The hypothesis was supported. The table below indicates all degrees reported for program directors including degrees in recreation, physical education, business, psychology, biology, sociology, bio-engineering, public relations, biochemistry, and, advertising. A variety of other backgrounds included health education/counseling, public health/nutrition, and fine art/commercial jewelry.

TABLE 1

EDUCATIONAL DEGREES OF PROGRAM DIRECTORS			

	COMMERCIAL	CORPORATE	

AA	2	1	
BA/BS	9	29	
MA/MS/MEd	6	29	NUMBER OF
PhD/EdD	1	3	RESPONSES
NO DATA	8	0	

Bachelor of Science in Physical Education appeared most frequently for program directors with 7 in corporate and 2 in commercial settings. Master's degrees (MA/MS/MEd) in Exercise Physiology/Science appeared most frequently with 15 in corporate and

one in commercial facilities. Doctoral degrees (PhD/EdD) in Exercise Physiology appeared most frequently with 2 in corporate and 1 in commercial. Evidence supported the hypothesis that program directors in the corporate area had completed a higher level of education in all degrees and in health/fitness related degrees (physical education, exercise physiology/science).

The table below indicates all degrees reported for staff members. A variety of other backgrounds included marketing, business administration, and floral design.

TABLE 2

EDUCATIONAL DEGREES OF STAFF			
	COMMERCIAL	CORPORATE	
AS	1	5	
BA/BS	286	65	
MA/MS/MEd	29	49	NUMBER OF
Phd/EdD	5	3	RESPONSES
MD	0	4	
NO DATA	13	1	

Bachelor of Science in Physical Education appeared most frequently with 172 in commercial and 39 in corporate. Master's degrees (MA/MS/MEd) in Exercise Physiology appeared most frequently with 14 in commercial and 30 in corporate. Doctoral degrees (Phd/EdD) appeared most frequently with 3 in commercial and 2 in corporate.

Associate degrees were earned in business, nursing, science, and recreation management. Bachelor degrees for staff were earned in health and fitness, kinesiology, exercise science, nursing, health and lifestyle management, recreation, health education, physical

education, psychology, business, architecture, community health, science, and marketing. Master's degrees for staff were earned in health, physical education and dance, rehabilitative counseling, psychology, business, nursing, kinesiology, education, public health, fitness, and nutrition. Doctoral degrees for staff were earned in child development, health and physical education, counseling, law, chiropractic. Other certifications for staff included registered nurse, physical therapist, occupational therapist, and medical technician.

Evidence supported the hypothesis in that the staff in the corporate area had completed a higher level of education in health/fitness related degrees (physical education, exercise physiology/science) for staff in MA/MS/MEd and MD. Support was not found for all other degrees. Commercial staff completed a higher level of education in health/fitness related degrees in BA/BS and PhD/EdD.

2. IN COMMERCIAL CLUBS, EMPLOYEE BONUSES ARE USED FOR INCREASED MEMBERSHIP SALES WHILE CORPORATE PROGRAMS DO NOT USE INCENTIVES.

Significant differences were found between corporate and commercial programs concerning the use of bonuses ($p.05$, $df=1$, $\chi^2=150.88$). In the commercial area 24 responses, 86%, answered yes as using incentives. None of the corporate programs responded yes to the question. The hypothesis was supported.

3. THE MAJORITY OF CORPORATE PROGRAMS REQUIRE A PHYSICAL EXAM, WHEREAS THE MAJORITY OF COMMERCIAL CLUBS DO NOT REQUIRE A PHYSICAL EXAM BEFORE STARTING A NEW EXERCISE PROGRAM.

The hypothesis was partially supported. Fifty eight percent of

the corporate community answered yes they required a physical exam, compared to 33% of the commercial who responded the same. This was significant at level $p < .05$ ($df=1$, $\chi^2=12.60$). Accordingly, the hypothesis was supported. Both were comparable when asked if their clients complete a medical history questionnaire. Corporate responded yes with 80% and commercial with 85%.

4. THE MAJORITY OF CORPORATE PROGRAMS REQUIRE A FITNESS EVALUATION, WHEREAS THE MAJORITY OF COMMERCIAL CLUBS DO NOT REQUIRE A FITNESS EVALUATION BEFORE AN INDIVIDUAL BEGINS A NEW EXERCISE PROGRAM.

The hypothesis was supported. The questionnaire listed three different types of stress tests: treadmill, step test, and bicycle ergometer. In the commercial area 0% use a treadmill, while 33% of the corporate reported using one. Both were comparable with the step test (26% commercial, 18% corporate) and bicycle ergometer (19% commercial, 27% corporate). Four different protocols were listed: maximal, submaximal, continuous, discontinuous. Using the maximal limit as a protocol, 0% of the commercial responded for its use, with a 27% response of use from the corporate sector. The submaximal limit was most frequently used by corporate - 65%, as opposed to 29% by commercial. Other corporate testing included a 5-lead ECG on the bike, strength and endurance in upper body and abdominal, percent body fat, flexibility, and computerized health risk appraisal. Other commercial program testing reported included percent body fat and a questionnaire.

When reviewing total numbers of responses, it was found that less than half of the commercial programs require some type of stress test, and all of the corporate programs use one of the three types. This

information supported the hypothesis. It was significant at the $p < .05$ level for the treadmill ($df=1$, $\chi^2=39.52$), maximal ($df=1$, $\chi^2=31.21$) and submaximal ($df=1$, $\chi^2=26.01$) protocol. The table below indicates type of test and protocol used in fitness evaluations.

TABLE 3

TYPES OF FITNESS EVALUATIONS			
	COMMERCIAL	CORPORATE	
TREADMILL	0	33	
STEP TEST	26	18	
BICYCLE	19	27	IN
MAXIMAL	0	27	PERCENTAGES
SUBMAXIMAL	29	65	
CONTINUOUS	10	20	
DISCONTINUOUS	0	2	

5. THE MAJORITY OF CORPORATE PROGRAMS BASE ALL THEIR PROGRAMMING ON THE RESULTS OF THE FITNESS EVALUATION FOR THE PRESCRIPTION, WHEREAS THE MAJORITY OF COMMERCIAL CLUBS DO NOT UTILIZE AN EXERCISE PRESCRIPTION.

Support was found for the hypothesis in that the majority of corporate programs utilize an exercise prescription. Exercise prescriptions were written by 78% of the corporate and 61% of the commercial community. This was significant at level $p < .05$ ($df=1$, $\chi^2=6.81$).

6. CORPORATIONS, UNLIKE COMMERCIAL CLUBS, REGULARLY ASSESS THEIR PROGRAMS AND CLIENTS.

The hypothesis was rejected. The commercial community responded (74%) using membership renewal to evaluate their programming while

only 29% of corporate use this method. This was significant at level $p < .05$ ($df=1$, $\chi^2=40.54$). The majority of corporate, 67%, used some type of fitness assessment. The next form of evaluation used most frequently was client attendance, with both corporate and commercial responding at 61%. In the corporate area 14% responded that they assessed their programming through company absenteeism. As other forms of program evaluations, corporate listed health care costs in dollar amounts, worker compensation costs, research study, and health risk appraisal. Commercial listed word of mouth and results (undefined by respondent). Overall support was not found for this hypothesis. What was found was that the corporate community used different techniques of program and client assessment compared to the commercial community. The table below indicates all types of program assessments.

TABLE 4

TYPES OF PROGRAM ASSESSMENTS			
	COMMERCIAL	CORPORATE	
FITNESS ASSESSMENT	52	67	
ATTITUDE SURVEY	32	41	
CO. ABSENTEEISM	0	14	IN
MEMBERSHIP RENEWAL	74	29	PERCENTAGES
CLIENT ATTENDANCE	61	61	
INTERVIEWS	16	24	
NO EVALUATION	0	8	

As in hypothesis 2, it was discovered that 86% of the commercial sector use incentives for membership sales. And as stated above membership renewal was the most frequently (74%) used form of assessing programs and clients. If membership renewal is the basic

form of evaluation of programs, then naturally sales becomes a number one priority. Bonuses are a business selling point, and as one program director stated "I'm here to run the club and make it profitable".

7. CORPORATIONS OFFER MORE WORKSHOPS/WELLNESS PROGRAMS THAN COMMERCIAL CLUBS.

There were significant differences in workshops offered with corporate programs offering more: nutrition/diet ($df=1$, $\chi^2=8.79$ $p<.05$), CPR ($df=1$, $\chi^2=18.26$ $p<.05$), smoking cessation ($df=1$, $\chi^2=77.21$ $p<.05$), CHD risk factors ($df=1$, $\chi^2=49.42$ $p<.05$), and stress management ($df=1$, $\chi^2=65.78$ $p<.05$). None of the commercial programs offered substance abuse workshops ($df=1$, $\chi^2=42.42$ $p<.05$). Self defense was the only non-significant difference with low percent responses from both communities. Corporations also listed first aid, parenting, women's issues, sports therapy, cholesterol management, low back care, cancer screening, and safety (car and home) as additional workshops available. Commercial listed cosmetics, food for life, blood cell analysis, and running as additional programs available to their clients. Accordingly, the hypothesis was supported in that the corporate sector offer a wider variety of workshops/wellness programs than commercial clubs. The table below indicates workshops/wellness programs available to clients.

TABLE 5

TYPES OF WORKSHOPS/ WELLNESS PROGRAMS			
	COMMERCIAL	CORPORATE	
NUTRITION/DIET	55	35	
CPR	29	59	
SMOKING CESSATION	10	71	IN
SELF-DEFENSE	19	29	PERCENTAGES
SUBSTANCE ABUSE	0	35	
CHD RISK FACTORS	13	61	
STRESS MGMT.	16	73	

After reviewing the seven hypotheses, it was discovered that other data yielded interesting results. The following discussion includes this data.

OTHER SIGNIFICANT FINDINGS

STAFF DEVELOPMENT. In investigating the educational preparations of staff, it was unexpectedly discovered that commercial facilities offer more initial training/orientation for their staff. Could this be because their personnel have less formal education? Even though commercial personnel had higher percentages in the ACSM certifications of program directors and fitness instructors, CPR, and first aid, it is not clear when these certifications were attained (before or after employment). Results indicated that every area of initial training/orientation was significant at $p < .05$ in favor of commercial. The same was also true for inservice programs offered to staff. Except for stress testing and new research findings on fitness/wellness, commercial facilities offered significantly ($p < .05$) more training programs. One question emerges, though, how does the corporate sector train and provide their staff with new information?

In both initial and inservice programs, public relations and sales/marketing were rated the lowest category by the corporate community. Is this an assumption on the part of the corporate sector that their staff is already well versed in public relations and sales/marketing? Corporate also listed other programs offered to staff as report writing, computer training, and business skills. Commercial listed aerobic training, CPR, and first aid.

EMPHASIS OF PROGRAM. The majority (74%) of commercial facilities cited the main emphasis of their fitness programs as general physical fitness. Only 49% of the corporate responded similarly ($df=1$, $\chi^2=13.20$ $p<.05$). The main emphasis in the corporate area was cardiovascular conditioning with a 72% response, compared with a 58% commercial response ($df=1$, $\chi^2=4.31$ $p<.05$). This finding may indicate a change in the corporate setting. In 1982 Breuleux reported the main emphasis of corporate programs as overall or health related physical fitness, with cardiovascular conditioning ranking second. A few of the corporate directors considered their programs as wellness and one commercial director indicated the main emphasis of his program was to make money.

PROFILE OF PROGRAM DIRECTORS. The last section of the questionnaire asked questions specific to the program directors. Compiling the information allowed for a profile of both types of program directors to emerge for this population.

The average program director in the commercial sector was a 29 year old male or female, has been in the present position for 2 years, worked an average of 47 hours per week and earns between \$15-19,999

annually. The average program director in the corporate sector was a 33 year old male or female, has been in the present position for 4 years, worked an average of 40 hours per week and earns between \$25-39,999 annually.

When asked if their professional preparation was aimed toward a career in fitness programs, the corporate directors answered yes with a 78% response and the commercial directors responded with a 69%. In the corporate area, those answering no were basically aimed toward education. In the commercial area it was basically a business orientation.

What does a program director do with his/her time? The largest percent of time was spent on administrative tasks with the corporate responding with 36% and commercial with 32%. Supervision followed with 21% by corporate and 26% by commercial. The third largest amount of time spent by corporate was 19% in teaching, and commercial in public relations (19%).

As with the staff, the program directors in the commercial area have more certifications from the ACSM, and there were also more Certified Athletic Trainers. But in the areas of CPR certification, CPR Instructor, Water Safety Instructor, and first aid, the corporate community had more trained personnel.

When asked what professional associations/organizations they have membership in, the top three responses were: Association for Fitness in Business (AFB) with 32 corporate and 1 commercial member, American College of Sports Medicine (ACSM) with 25 corporate and 2 commercial members, and American Alliance of Health, Physical Education, Recreation, Dance (AAHPERD) with 4 corporate and 2

commercial members. Sixty three percent of the directors belong to at least one professional association/organization.

The program directors were asked to recommend academic course areas for someone preparing for a position similar to their own. Three areas will be discussed: fitness and testing, communications, and business administration.

As can be seen, in the table, the corporate program director significantly ($p < .05$) recommended seven out of the ten academic courses. The corporate community also recommended courses in athletic training, injury rehabilitation, sports conditioning, strength training and nutrition. The commercial community recommended courses in aerobic and weight training. With less formal education than the corporate director, did the commercial program director feel these academic course can be replaced by ACSM certification?

TABLE 6

FITNESS AND TESTING		

	COMMERCIAL	CORPORATE

Human Physiology	58	75
Kinesiology	48	69
Exercise Physiology	65	76
Athletic Training	45	57
Adult Fitness	45	75
Stress Testing	42	75
Cardiac Rehab.	52	57
Tests & Measurements	45	69
Research Methods	16	57
Exercise Leadership	61	75

IN
PERCENTAGES

In the communications area, public speaking is the only course in which a significance difference occurred ($p < .05$). Other corporate program directors recommended report writing. Some commercial program directors recommended sales and drama.

TABLE 7

COMMUNICATIONS			
	COMMERCIAL	CORPORATE	
Interpersonal Comm.	74	75	
Non-Verbal Comm.	42	47	IN
Public Speaking	52	73	PERCENTAGES

In the business administration area, surprisingly, only one course had greater than a 50% recommendation by both sectors-- personnel management. And the corporate only highly recommended one other course--principles of computers. But looking at their other individual recommendations they suggested bookkeeping, business ethics, statistics, and health service marketing. Other commercial recommendations included sales, time management, and publication/journalism.

TABLE 8

BUSINESS ADMINISTRATION			
	COMMERCIAL	CORPORATE	
Personnel Mgmt.	68	57	
Marketing Mgmt.	45	47	
Financial Mgmt.	35	37	
Economics	16	18	IN
Business Law	26	18	PERCENTAGES
Principles of Actg.	23	39	
Organizational Behavior	39	55	
Principles of Computers	35	69	

Further comments regarding their positions were handwritten, and a few are listed below:

Maintain a flexible, understanding attitude of the people under your supervision.

Exercise physiology with business combination is ideal.

There is too much emphasis on certification and degrees rather than on human qualities of personal relations, and all the credentials in the world will not sell memberships which are the lifeblood of the industry.

SUMMARY

In summary, five of the seven hypotheses were supported.

Unexpected results, where variations could occur, were found within hypotheses. Overall this investigation allowed for a comparative study of both the corporate and commercial fitness industries. The following chapter will discuss implications and offer recommendations for further research.

CHAPTER 5

DISCUSSION AND IMPLICATIONS

The purpose of this study was to investigate five major areas in wellness/fitness programs in corporate and commercial programs to determine current qualifications, programming and overall operations in the wellness/fitness industry. Even though the survey had a small return rate, the study indicated trends within the fitness industry.

1. There was a difference between corporate and commercial personnel in degrees and certifications. Whereas the program directors in the corporate area had more formal education than commercial program directors, the commercial directors had more ACSM certifications. The staff in both sectors had equivalent formal education, but commercial staff had more ACSM certification. Does the commercial sector feel academic courses can be replaced by ACSM certifications? What makes for a better qualification a degree in a cognitive field or a certificate from an accrediting agency (ACSM) ?
2. Bonuses are an important aspect of the commercial sector. In the commercial sector it has been noted that the Federal Trade Commission received complaints from many individuals who regularly

used fitness clubs. The most frequent complaints concerned misrepresentations about services and facilities, clubs that went out of business, and high-pressure sales tactics. As part of this survey a total of four questionnaires were returned because the facility moved and left no forwarding address. Another nine questionnaires were returned with address unknown (misrepresentation in the phone book or out of business?).

Considering that only 8% of the commercial sector responded to the questionnaire many results yielded interesting information concerning high-pressure sales tactics. The survey discovered that 86% of the commercial community used bonuses for incentives to increase membership sales and their major assessment (74%) of programs and clients was membership renewal. High-pressure sales tactics and membership renewal may be the reason personnel being hired are replying to the following want ad:

SALES

Begin exciting new career with one of America's leading fitness facilities. Excellent opportunity for self motivated, enthusiastic individuals. \$20,000 comm. + first year salary. Training provided. Sales experience helpful but not necessary. Call today. (Sales, 1987).

To an untrained individual the above ad sounds like a great opportunity, but according to this survey it was discovered that the majority of full-time staff (218 responses) earned between \$10-14,999 annually. There seems to be a discrepancy between what is possible and what is reality.

3. Over half of the corporate sector required a physical exam before starting a new exercise program. Less than half of the commercial sector required some form of fitness evaluation. Both sectors utilized some form of an exercise prescription for programming. Exercise prescriptions, like a doctor's prescription, should be personal. With this in mind, how can 61% of the commercial sector recommend an exercise prescription when only 33% require a physical exam and approximately 25% require a fitness evaluation?
4. Both sectors regularly assessed their programs and clients. The difference occurred in how this assessment was conducted. The corporate sector used client attendance and some form of fitness assessment; whereas the commercial sector used membership renewal and client attendance. Considering that commercial facilities are for profit and their bottom line is to stay in business, can they become more high-touch and quality oriented rather than high-tech and quantity concerned?
5. The corporate community offered more workshops/wellness programs than the commercial community. The bottom line of corporate programs is to save money by employing healthy individuals. This means a healthy person both physically and mentally. This is achieved by offering additional programming, such as workshops, in CPR, substance abuse, and stress management. Could these additional types of programs be beneficial (for both client and management) in the commercial facilities?
6. The commercial sector offered more initial training/orientation and inservice programs for their staff than the corporate sector. A question that can be raised is that with a more formal education

is less initial training/orientation required? But with the inservice programs how does the corporate sector train and provide their staff with new information?

7. There were differences in many areas between corporate and commercial program directors. The corporate director had been profiled in other studies, but not compared to the commercial director. In this survey, compared to the corporate director, the commercial program director was a few years younger, in the present position a few years less, worked an average of more hours per week, and made less money. The commercial director also had less formal education, their careers were aimed toward business, and they belonged to less professional associations/organizations. Even though they had more ACSM certifications than the corporate program director, they had less recommendations for academic courses in the fitness and testing area. What makes for a better qualification an academic degree or a (ACSM) certified individual? Maybe the solution is to attain both the degree and the certification to provide for a comprehensive qualification.

So what do the program directors have to say about the fitness industry? One corporate director responded as follows: "Limited opportunities exist in corporate fitness. The trend is clearly towards comprehensive health promotion programs with an emphasis on health care cost management." A commercial program director felt that "In the fitness industry we tend to look at the next membership and what it takes to get it instead of looking at current members and basing our plans on helping them achieve results." After hearing from program directors in two different

settings, overall questions emerged: What is the future direction of the fitness industry and what will become its main thrust? Will the focus be to save money as in the corporate sector, to make money as in the commercial sector, or to educate and generate a fit individual? It is hoped that through this survey, these two different but equal segments of the same industry can learn from and with each other to offer the best possible programming an individual wants and needs.

FURTHER QUESTIONS

1. Can the commercial sector focus on the quality of programming rather than on quality and sales.
2. With a more formal education is less initial/orientation required?
3. How does the corporate sector train and provide their staff with new information?
4. Could additional programs (workshops) be beneficial (for both client and management) in the commercial facilities?
5. Does the commercial sector feel academic courses can be replaced by ACSM certification?
6. Does the corporate sector feel ACSM certification may not be needed?
7. What makes for a better qualification an academic degree or a (ACSM) certified individual?
8. Why was there a low return percentage return rate from the commercial sector?

RECOMMENDATIONS FOR FURTHER RESEARCH

1. An extensive survey of the commercial sector, to determine what is available for the general public, how it is marketed and what improvements may be needed.
2. An opinion poll of the public's wants, needs and expectations of the fitness industry. This could help implement appropriate programming.
3. Investigate which type of organization (ACSM, IDEA, educational association, government agency) can provide the most qualified accreditation program for fitness personnel. Determine if one organization is possible of achieving this type of programming or if it should be a joint venture between organizations for one accreditation.

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APPENDIX



College of Education

Department of Health, Physical Education
and Recreation
Euclid Avenue at East 24th Street
Cleveland, Ohio 44115
Telephone: (216) 687-4870

November 7, 1986

Dear Program Director,

As you are aware the interest in fitness is still growing and diversifying. To meet the public's interests and to prepare individuals for a fitness career, it is important to contact fitness facilities for the most recent information. In partial fulfillment of my Master's degree, I am surveying private and corporate facilities as to their overall operations.

Information supplied will be coded with no individual response being identified - unless with permission. Any additional comments can be included on the back of the questionnaire. Enclosed you will find a prepaid return envelope. Please return the questionnaire by November 26, 1986.

Thank you for your time and cooperation.

Sincerely,

A handwritten signature in cursive script, reading "Colleen Gavelek".

Colleen G. Gavelek, B.S.
Graduate Student

A handwritten signature in cursive script, reading "Susan G. Ziegler".

Susan G. Ziegler, Ed.D.
Associate Professor,
Thesis Advisor

Profile of Fitness Programs

Please complete the following questionnaire and return in the enclosed envelope by November 26, 1986.

Name of Organization (optional) _____

If this questionnaire is not applicable please indicate and return to sender: _____ no fitness program

_____ no program director

_____ other, please specify _____

STAFF INFORMATION (please exclude yourself as program director when answering the questions in the following section.)

1. How many staff members are employed in your fitness facility:
_____ Male _____ Female

2. Please indicate the average number of hours worked by a full-time employee _____ part-time employee _____

3. Please indicate the number of full-time and part-time staff:
_____ Full-time male _____ Part-time male
_____ Full-time female _____ Part-time female

4. Please indicate the annual salary range of full-time staff members by numbering according to total number of staff:
_____ \$5,000-9,999 _____ \$20,000-24,999
_____ \$10,000-14,999 _____ \$25,000-29,999
_____ \$15,000-19,999 _____ more than \$30,000

5. Please indicate the hourly wage range of part-time staff members by numbering according to total number of staff:
_____ \$3.35-5.00 _____ \$7.00-9.00
_____ \$5.00-\$7.00 _____ more than \$9.00

6. Do staff members receive any bonus as an incentive for signing new members: _____ Yes _____ No

7. Please indicate any of the following certifications the staff have by checking all that apply, according to total number of certifications:

ACSM

_____ Program Director
_____ Exercise Specialist
_____ Exercise Technician
_____ Fitness Instructor

OTHER

GENERAL

_____ CPR Instructor
_____ CPR Certification
_____ Cert. Athletic Trainer
_____ Water Safety Instructor
_____ First Aid

- Part-time

(indicate)

No

(indicate)

- No

- (indicate)

- No

Other

PROGRAMS

1. Please indicate the main emphasis of your fitness program:
☐ General Physical Fitness
☐ Cardiovascular Conditioning
☐ Strength
☐ Rehabilitation
☐ Weight Loss
☐ Other _____
(indicate)
2. Please indicate the components of your fitness program:
☐ Flexibility ☐ Cardiovascular Conditioning
☐ Weight Training ☐ Other _____
(indicate)
3. Are your programs coed: ☐ Yes ☐ No
4. Does your program offer special activities for various groups:
☐ Yes ☐ No
If yes, please specify _____
5. Does your program offer any of the following workshops:
☐ Nutrition/Diet ☐ Substance Abuse
☐ CPR ☐ CHD Risk Factors
☐ Smoking Cessation ☐ Stress Management
☐ Self Defense ☐ Other _____
(indicate)
6. Please indicate the form of evaluation(s) used to determine the effectiveness of your programs:
☐ Fitness Assessment ☐ Client Attendance
☐ Attitude Survey ☐ Interviews
☐ Company Absenteeism ☐ No Evaluation
☐ Membership Renewal ☐ Other _____
(indicate)
7. Does your facility offer internship/practical opportunities to college students: ☐ Yes ☐ No
If so, are they: ☐ Undergraduate ☐ Graduate

EXERCISE PRESCRIPTION

1. Do your clients complete a medical history questionnaire:
☐ Yes ☐ No
2. Are initial physical exams required before starting an exercise program: ☐ Yes ☐ No

3. If a fitness evaluation is used, which of the following are included:
- Stress Test: _____ Treadmill
 _____ Step Test
 _____ Bicycle Ergometer
- Protocol(s) used: _____ Max
 _____ Submax
 _____ Continuous
 _____ Discontinuous
- Other _____
 (indicate)
4. Is an exercise prescription given after the fitness evaluation and/or stress test: _____ Yes _____ No
5. If an exercise prescription is used, which of the following are recommended:
- Frequency of exercise _____ days/week
 (indicate)
- Intensity of exercise _____ %MHR
 (indicate)
- Duration of exerice _____ mins. continuous
 (indicate) aerobic activity
6. If a strength training prescription is used, which type is used and how often is it recommended:
- | | | | | |
|--------------------|-----------------|------------|------------|------------------|
| _____ Nautilus | _____ days/week | _____ sets | _____ reps | _____ resistance |
| _____ Universal | _____ days/week | _____ sets | _____ reps | _____ resistance |
| _____ Free Weights | _____ days/week | _____ sets | _____ reps | _____ resistance |
| _____ Other | _____ days/week | _____ sets | _____ reps | _____ resistance |
7. If Body Composition is evaluated, indicate the procedure used:
- | | |
|----------------------------|---------------------------|
| _____ Skinfold Calipers | _____ Underwater Weighing |
| _____ Electrical Impedence | _____ Other _____ |
| | (indicate) |

FACILITIES AND EQUIPMENT

1. Does your facility provide any of the following? Check all that apply:
- | | |
|--------------------------------------|--------------------------------------|
| <input type="checkbox"/> Locker Room | <input type="checkbox"/> Sauna |
| <input type="checkbox"/> Towels | <input type="checkbox"/> Whirlpool |
| <input type="checkbox"/> Sundries | <input type="checkbox"/> Suntan Beds |
| <input type="checkbox"/> Massage | |
2. Do you have an all-purpose exercise room:
- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

3. Please indicate any of the following equipment you have and how many:

	How Many
<input type="checkbox"/> Stationary Bicycle	<input type="text"/>
<input type="checkbox"/> Rowing Machine	<input type="text"/>
<input type="checkbox"/> Motorized Treadmill	<input type="text"/>
<input type="checkbox"/> Nonmotorized Treadmill	<input type="text"/>
<input type="checkbox"/> Nautilus Machines	<input type="text"/>
<input type="checkbox"/> Free Weights	<input type="text"/>
<input type="checkbox"/> Universal Machines	<input type="text"/>
<input type="checkbox"/> Indoor Track	<input type="text"/>
<input type="checkbox"/> Outdoor Track	<input type="text"/>
<input type="checkbox"/> Indoor Pool	<input type="text"/>
<input type="checkbox"/> Outdoor Pool	<input type="text"/>
<input type="checkbox"/> Racquetball Court	<input type="text"/>
<input type="checkbox"/> Tennis Court	<input type="text"/>
<input type="checkbox"/> Squash Court	<input type="text"/>
<input type="checkbox"/> Other <input type="text"/>	<input type="text"/>

(indicate)

PROGRAM DIRECTOR

1. Title of your position:
 Full-time Part-time
2. Age:
3. Sex: Male Female
4. Number of years in present position: years
5. Please indicate your academic degree(s) attained:
- | Degree | Major Area of Study |
|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |
6. Was your professional preparation aimed toward a career in fitness programs: Yes No
If no, please indicate in what direction your professional plans initially started:
7. Please indicate your salary range:
- | | |
|--------------------------------------|---|
| <input type="text"/> under \$10,000 | <input type="text"/> \$20,000-24,999 |
| <input type="text"/> \$10,000-14,999 | <input type="text"/> \$25,000-29,999 |
| <input type="text"/> \$15,000-19,999 | <input type="text"/> \$30,000-39,999 |
| | <input type="text"/> more than \$40,000 |
8. How many hours per week do you work: hours/week

9. Please indicate any of the following certifications you have by checking all that apply:

ACSM

____ Program Director
____ Exercise Specialist
____ Exercise Technician
____ Fitness Instructor

GENERAL

____ CPR Instructor
____ CPR Certification
____ Cert. Athletic Trainer
____ Water Safety Instructor
____ First Aid

OTHER

(indicate)

10. What percent of your working time is (total of 100%):

____ % Administrative
____ % Testing/monitoring
____ % Research
____ % Consulting
____ % Teaching
____ % Supervision
____ % Public Relations
____ % Other _____
(indicate)

11. What is the title of your immediate supervisor:

12. Please list the names of any associations/organizations in which you belong:

13. How many conferences, seminars, exhibitions did you attend within the past year: _____ total attended

_____ local _____ state _____ national

14. Please check the academic course areas you would recommend for someone preparing for a position similar to yours:

Physical Education

____ Principles of Physical Education
____ Organization and Administration of Physical Education
____ History of Sport and Physical Education
____ Adapted Physical Education
____ Psycho/Social Implications of Sport and Physical Education
____ Human Anatomy
____ Facilities and Management
____ Other _____
(indicate)

Fitness and Testing

- ☐ Human Physiology
 - ☐ Kinesiology
 - ☐ Exercise Physiology
 - ☐ Athletic Training
 - ☐ Adult Fitness
 - ☐ Stress Testing
 - ☐ Cardiac Rehabilitation
 - ☐ Tests and Measurements
 - ☐ Research Methods
 - ☐ Exercise Leadership
 - ☐ Other _____
- (indicate)

Recreation

- ☐ Leisure and Society
 - ☐ Leadership in Recreation
 - ☐ Outdoor Recreation
 - ☐ Community Recreation
 - ☐ Industrial and Commercial Recreation
 - ☐ Evaluation of Recreation Programs
 - ☐ Other _____
- (indicate)

Communications

- ☐ Interpersonal Communication
 - ☐ Non-verbal Communication
 - ☐ Public Speaking
 - ☐ Other _____
- (indicate)

Education

- ☐ Human Relations
 - ☐ Philosophy of Education
 - ☐ Educational Psychology
 - ☐ Education Administration
 - ☐ Guidance and Counseling
 - ☐ Safety Education
 - ☐ Public Relations
 - ☐ Other _____
- (indicate)

Psychology

- ☐ Social Psychology
 - ☐ Small Group Behavior
 - ☐ Behavior Modification
 - ☐ Motivation
 - ☐ Psychology of the Adult
 - ☐ Anxiety/Stress Management
 - ☐ Other _____
- (indicate)

Business Administration

☐ Personnel Management
☐ Marketing Management
☐ Financial Management
☐ Economics
☐ Business Law
☐ Principles of Accounting
☐ Organizational Behavior
☐ Principles of Computers
☐ Other _____

(indicate)

☐ Other _____
☐ Other _____
☐ Other _____

(indicate)

15. Any further comments regarding your position which might be helpful to others:

Thank you for your assistance

Please return this questionnaire by November 26, 1986 to:
Cleveland State University
Department Health, Physical Education, Recreation
East 24th and Euclid
Cleveland, Ohio 44115
Attention: Colleen Gavelek PE 227



College of Education

Department of Health, Physical Education
and Recreation
Euclid Avenue at East 24th Street
Cleveland, Ohio 44115
Telephone: (216) 687-4870

December 8, 1986

Dear Program Director,

Recently you received a questionnaire which you were asked to complete to assist in my thesis requirement. This second letter is being sent to still allow you the opportunity to participate in the survey entitled "Profile of Fitness Programs." If you have completed and returned the questionnaire, thank you for your cooperation. If you have not PLEASE DO SO IMMEDIATELY. Your assistance is essential for the completion of this study.

Information supplied will be coded with no individual response being identified - unless with permission. Please return the questionnaire by December 22, 1986.

Thank you for your time and cooperation.

Sincerely,

A handwritten signature in cursive script, reading "Colleen Gavelek".

Colleen G. Gavelek, B.S.
Graduate Student

A handwritten signature in cursive script, reading "Susan G. Ziegler".

Susan G. Ziegler, Ed.D.
Associate Professor,
Thesis Advisor