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CLEVELAND STATE UNIVERSITY (CSU) EMPLOYEE'S PERCEPTIONS
OF WELLNESS AT THE WORKPLACE

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Bachelor of Arts in Urban Studies

Cleveland State University

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at the

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SEANDER C. GARNER

ABSTRACT

Purpose: The purpose of this study was to assess office workers perceptions of workplace wellness programs (WWP).

Significant: The significance of this study is to determine the relationship between workplace wellness and the influence it has on employees.

Methods: An email was sent to 365 employees that participated in the Workplace Wellness Program at Cleveland State University (CSU). Flyers were posted on campus and participants were solicited by word-of-mouth. The fifteen (N=15) respondents were interviewed to assess their attitudes and perceptions regarding a workplace wellness program.

Findings: Two –thirds (66%) of the participants interviewed described their overall health as good but needs improvement. Over half (60%) of the participants described wellness as being physically active or fit with three participants indicating that wellness is a holistic concept. Nearly all (87%) of the participants believe that employers should provide health and wellness programs. Over half (53%) of the respondents stated that they believe that a culture of wellness exists at CSU.

Conclusions: The majority of the respondents believe that a workplace wellness program has an impact on the perceptions of employees at Cleveland State University.

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CHAPTER 1

INTRODUCTION

Workplace wellness programs can have a dynamic impact on health problems related to premature death. Obesity a growing problem in the United States and people are suffering grave consequences, such as diabetes, heart disease, cancer and chronic obstructive pulmonary disease that result in death. “Obesity is a major public health problem contributing to 112,000 preventable deaths each year.” (AMA, 2013, p. 1) Employers can help prevent these deaths by improving the health and productivity of their employees through a workplace wellness program. A workplace wellness program has been considered one of the most viable solutions to health problems in America. A workplace wellness program is an efficient way to influence a large population like the workforce; thus capturing the majority of society with a strategic plan to combat chronic illnesses associated with obesity. Recently, the American Medical Association officially recognized obesity as a disease, stating that obesity is a “multimetabolic and hormonal disease state”. The country is in the midst of an obesity epidemic, which has impacted children as well as adults. The increase in obesity rates, disease rates and health care costs is prevalent in every state. Trust for America and the Robert Wood Foundation (2012) reported that “if obesity rates continue on their current trajectory, it’s estimated

that obesity rates for adults could reach or exceed 44 % in every state and exceed 60% in 13 states”. The obesity rates and chronic conditions have ignited the attention of healthcare providers and employers to develop interventions or strategies that provide screenings and health promotion to aid in the reduction of risk factors. Some risk factors associated with obesity are chronic diseases such as coronary heart disease, type 2 diabetes, cancers, hypertension, stroke, and respiratory disorders that increase as weight increases. The U.S. health care spending for people with chronic conditions is extremely high. The Centers for Disease Controls reported that chronic diseases such as heart disease, stroke, cancer, diabetes, and arthritis – are among the most common, preventable and costly of all health problems in the U.S. The National Institute for Health Care Management, (NIHCM, 2011) reported “Spending for health care has been on a relentless upward path – reaching \$2.5 trillion in the aggregate, \$8,100 per person, and 17.6 % of the Gross Domestic Product in 2009”. People are sick for a longer length of time, living with one or more chronic diseases that may be temporarily relieved by expensive medication. Most illnesses or diseases that a person would normally not survive are now deemed a chronic condition that a person can live with for the rest of their lives. Chronic conditions contribute to the lack of productivity and the increase in absenteeism of employees from work. According to the Bureau of Labor and Statistics (2013), the workforce consists of about 155.7 million workers in the U.S. population. Based on this information, the workplace is an opportunistic sector to begin the challenge of shaping up the country by sculpting strategies into practical interventions.

These interventions include techniques that are tailored to fit the working class. They consist of online health and assessments information, onsite fitness sessions

or activities, nutrition education and wellness seminars or programs that can be used to accommodate multiple levels within a workplace. These interventions can reduce the number of chronic diseases that are preventable by changing health habits. Interventions may accommodate different populations and health issues that are prevalent in that specific region or sector, but it is in the development of these interventions that a specialized culture is created in the form of a workplace wellness program. A workplace wellness program is defined as any worksite that provides and promotes activities or organizational policies designed to support healthy behaviors in the workplace. The development of programs can shape, stabilize and redirect the healthcare system. A workplace wellness program can be woven into an organization's framework by utilizing a model that will account for the successful diffusion of multiple approaches.

The Transtheoretical Model (TTM) explains how people change their behaviors (Prochaska & DiClemente, 1983); this concept moves people through behavior change progressively, over-time. During this time a person may also work through cognitive and emotional processes leading into new behavior or the cessation of an old behavior. Behavioral strategies or interventions can be established to evoke new behavior patterns. There are many models that support the goal of promoting health in the workplace; however there is one model that is flexible enough to support other model constraints without losing its purpose or shifting the grid of an organization structure, the Stages of Change Model (SOC). The SOC model can implement constructs that move individuals through different levels or phases and produce positive outcomes. The Stages of Change Model is unique for a workplace wellness program because it not only guide employees at different levels, but it also supports the employers' structural framework

when developing and evaluating programs. Several journals have been written validating the advantage of having a workplace wellness program. Baicker, Cutler and Song (2010, p. 1) published a metastudy in the *Journal of Health Affairs* on cost savings of a worksite wellness program that indicated medical cost had fell an average of \$3.27 for every dollar spent on wellness programs and absenteeism cost fell by \$2.73 for every dollar spent. Workplace wellness programs can provide access to concise and relevant prevention information that can influence healthy decisions for employees and their family members. There must be an aggressive means in the treatment of health problems, when faced with statistics such as

“...the number of preventable deaths associated with smoking (465,000 per year), hypertension (395,000), obesity (216,000), physical inactivity (191,000), high blood glucose levels (190,000), high levels of cholesterol (113,000), and other dietary risk factors...” (Murray, Phil and Frenk, 2010, p. 98)

These conditions are preventable by changing health habits. A balanced diet, educational awareness and screening along with physical activity can help control risk factors that lead to chronic conditions. People with chronic conditions have been found to exhibit one or more daily activity limitation that prevents physical exercise.

“In 2010, 50% of adults 18 years of age and over met neither the aerobic activity nor the muscle-strengthening physical activity according to federal guidelines.”(CDC, 2012.a)

Although exercise is a vital part of fitness, controlling the risk factors are usually a decision based on environmental, economic or social status. A person may choose not to ride a bike or walk to the store because of the lack of safety within the community. A person may have greater access to a corner store than a supermarket where fresh produce can be purchased. These subtle situations serve as barriers that may detour good health

decisions. There must be a practical approach to promoting fitness and making good food choices to reduce obesity across each state in the presence of these barriers. The prevalence of obesity continues to climb among men and women. Individuals with modifiable health conditions continue to pay more for insurance and health care. The employers continue to strive for lower health care cost and increased efficiency from employees. Chronic illnesses continue to cost companies billions in medical fees and loss of productivity, which increases absences and physician's visits. Chronic illness in employees encompasses over half the U.S. workforce, thus driving the scope of employers to examine work conditions. The work conditions of sedentary positions such as office personnel raises great concerns about risk factors among this population. Risk factors such as long hours spent in a setting that requires extended immobility, long business hours, unhealthy eating habits and the lack of sleep and exercise promote chronic illness.

"A shift towards more sedentary lifestyles and occupations and increased reliance on and use of labor-saving devices may be associated with the increased prevalence of obesity and chronic disease." (Pronk & Kottke, 2009, p.317)

Sedentary behavior along with an inactive lifestyle plays a significant role in a person's health. In fact, there are those who state that lifestyle is more important than we believe. Hours of inactivity generate concern and fuels debates about unhealthy behaviors amongst office workers. Epidemiologist Steven Blair stated that

"...men who reported more than 23 hours a week of sedentary activity had a 64 percent greater risk of dying from heart disease than those who reported less than 11 hours a week of sedentary activity." (Neighmond, 2011, para 9)

Sedentary jobs increase the need to create healthy public policies and implement prevention strategies that will facilitate employees in becoming more active in their current positions without compromising job duties. Prevention is a key factor in improving lifestyle changes. An investment in keeping a workforce healthy and productive is seen through prevention.

“Researchers believe that hundreds of thousands of lives could be saved annually if people stopped smoking, lost weight, exercised regularly and consumed a healthy diet... “(Alliance for Health Reform, 2009, p. 1)

Preventive measures are being employed by businesses in the form of health promotion in an effort to contain the escalating costs of employee healthcare and reduce unhealthy behaviors among employees. The work site is an ideal setting for health promotion because, “...130 million Americans are employed and spend one third of their time at work.” (Thompson, Smith & Bybee, 2005, p. 267). Employment-based health insurance premiums are increasing and employers and employees are paying a larger portion of the country's healthcare bill. In an effort to preclude health related problems, prevention is sought to front-run a healthier nation. Prevention is at the heart of a workplace wellness program because it functions to decrease health problems and healthcare cost while increasing awareness by providing three levels of prevention, primary, secondary and tertiary. Primary prevention seeks to reduce incident or prevent the onset of a disease through altering behavior or lessening exposure that lead to disease or illness. In a workplace wellness program, this would target the sedentary workforce to improve health behaviors such as increasing mobility. The secondary prevention detects and treats illness or disease; such as screening to detect high or low blood pressure. The tertiary prevention focuses on lightening the impact caused by the illness or disease by

using referrals and rehabilitation clinics. Strategies for prevention should highlight realistic and achievable goals that can help improve health by changing behavior; increasing productivity and reducing healthcare costs, and improving physical activity. In an attempt to implement effective prevention methods, health care professionals are focusing on workplace wellness programs in an attempt to relieve chronic disease among Americans. Since

“most adults may spend more time during the day at work than anywhere else; it is determined that the workplace is an excellent place to promote health and wellness...” (Person, Colby, Bulova & Eubanks, 2010, p. 150).

Research Questions

The area of research addressed in this qualitative study is the employee's perceptions of wellness in the workplace. What are the perceptions behind participating in a workplace wellness program? Are employees engaged or ignoring the fact that there is a workplace wellness program at Cleveland State University (CSU)? Is CSU promoting a culture of health for its employees? Specifically, the following research questions are addressed: What are the participants' perceptions of health and wellness? What are the participants' perception of the employer's role in facilitating employee health and wellness? To what extent, if any, do you believe that a culture of wellness exist at Cleveland State University?

Purpose of the Study

The purpose of this study is to assess office workers perceptions regarding the impact of a workplace wellness program. The main goal of a workplace wellness program is to decrease the costs of healthcare, increase productivity and create a healthier lifestyle for employees. Workplace activities by themselves do not change behaviors;

employees need encouragement and motivation to engage in healthy behaviors and practices whether at work or at home. It is a complex process to create a culture that promotes the concept of making a conscious effort to be proactive about healthy choices. There are common elements in creating a health conscious culture that focuses on health promotion such as health education for awareness, program integration for inclusiveness, health screenings for prevention, and support groups for encouragement. All of these elements can also aid in evaluating or measuring the effectiveness of a workplace wellness program.

Significance of Study

The significance of this study is to determine the employee's perceptions of workplace wellness and the influence it has on the lifestyle of employees that hold professional office staff positions. Motivation and adhering to a routine will aid in creating a healthier lifestyle, which is not an easy task. Employers can motivate individuals to practice healthier behaviors such as maintaining healthier blood pressure levels, smoking cessation, decreasing alcohol consumption and maintaining a balanced diet by developing supportive programs that raise awareness. Employers must establish continuity with employees to build a supportive system by which a successful program can be implemented. "Nearly 1 in 3 Americans suffers from high blood pressure and more than half don't have it under control" reports a recent study from the Centers for Disease Control and Prevention (CDC, 2012.b). Hypertension increases the risk for cardiovascular disease, heart attacks and strokes. There are many adults with hypertension that currently take medication to lower their blood pressure. A workplace

wellness program can be that missing component that assists hypertensive patients in achieving and maintaining the goal of lower blood pressures.

CIGNA, (2010) reports that by creating a health conscious workforce and laying the groundwork or a plan to encourage healthy habits can be accomplished by forming a worksite wellness program that supports health improvement. The World Health Organization, (2012) reports that “a sedentary lifestyle is one of the 10 leading causes of death and disability. It accounts for 300,000 premature deaths each year in the United States alone.” In an effort to overcome premature deaths, an attempt to build or improve health strategies is pivotal. Developing health strategies that influence health belief among populations can nurture a health conscious culture. Culture, for this study has been defined as a group that share patterns of behaviors and interactions. These groups can participate in a variety of health promotional programs that will encourage awareness, education and motivation. Health promotion assists in recognizing the provisions of a population by evaluating cultural needs. However, a “meaningful behavior change depends on a person’s readiness to change, as well as the support they receive along the continuum of engagement.” (CIGNA, 2010)

Research Design

This study used in this research was a descriptive research design to determine employees’ perceptions of health and wellness. The primary method of data collection was interviews.

Population/Sample:

The population for this study was CSU employees. This study used a convenience sample of 15 respondents that were solicited by word of mouth, email and posted flyers. Participants were male and female adults (age 20 or older) and work at CSU full time or more than 20 hours a week in a clerical or a professional office staff position.

Data Collection Methods (Interviewing)

Once approved by Cleveland State University (CSU) Institutional Review Board for Human Subjects (IRB), recruitment was completed and interviews were scheduled according to participant's availability over a two to three month period. The interviews were audio recorded and transcribed by researcher. Data was transcribed into a word document and analyzed for emerging thinking patterns. Interviews were conducted in a private area where confidentiality was secured, such as an office or classroom in CSU, School of Nursing. Data collection was completed on the weekdays, during the lunch hours (12-2p) or during the evening hours (5p-7p) in the Julka Hall Building, 2nd Floor, Rm 234. The researcher solicited study participants by email, verbally or contact by posted flyer during the month of January. The interview consisted of a 28-item questionnaire and nine demographic profile questions.

Delimitations

1. The sample was a sample of convenience and results reflected the opinions of employees.

2. Delimitations are restrictions that the researcher imposes on the research to limit the scope or define boundaries of the study.

Limitations

1. The researcher has no control over the individual's definition of health.
2. The opinions may be based on participant's current health condition, which varies from person to person and from time to time.

Summary

This study assesses the attitudes and perceptions of CSU employees regarding the workplace wellness program. This was achieved by interviewing 15 CSU employees using a questionnaire that solicited the employee's perception of a workplace wellness program.

Assumption

My assumption is that the Stages of Change Model is a relevant and applicable model for assessing employee's perception of a workplace wellness program.

Glossary

For the purpose of this study, definitions have been assembled to guide the reader in understanding the meaning of specific terms used within this study.

Health Promotion: Health Promotion is the art and science of helping people discover the synergies between their core passions and optimal health, enhancing their motivation to strive for optimal health, and supporting them in changing their lifestyle to move toward a state of optimal health. (O'Donnell, 2009)

Culture of Wellness: An environment that supports shared values and cultural norms that promote prevention and wellness to help people live longer and healthier lives.

(Wellness Proposals, 2013a)

Wellness: Wellness is considered to be an active process of becoming aware of and learning to make healthy choices that lead toward a longer and more successful existence.

(Wellness Proposal, 2013b)

Culture of Health: A culture of health is a workplace culture that supports health improvement. (CIGNA, 2010, p.1)

Workplace Wellness: Workplace wellness is a broad term for programs and initiatives in the workplace that support the health, safety and wellbeing of your employees, and often their families. (O'Neill, 2013, para. 1)

CHAPTER II

LITERATURE REVIEW

Introduction

This literature review is divided into three main parts. The first part of the literature review defines the professional office workers perceptions of health and wellness, which can be intertwined to create a collage of working premises that will aid in establishing a successful workplace wellness program. The second part examines the employer's role in promoting healthy programs for its employees. This section briefly discusses obligations and commitments recommended to promote healthy employees while lowering health care cost. The third part examines a theory that supports a flexible workplace wellness program. Finally, the last part gives an overview of program design as it relates to the Stages of Change Model (SOC). The Stages of Change Model determines an individual's readiness to move towards changing a health behavior or a condition and the recommended action for preventing or managing that condition.

Professional Office Worker's Perceptions of Health and Wellness

Professional office workers have an array of perceptions regarding health and wellness.

“As Americans become more involved in their own health, they want new ways to improve their health while at work, as evidenced by their increasing demand for health coaches and preventive screenings,” (Dukes, 2011, para. 4).

There is a need for healthier lifestyle models in an organization that actively supports workplace wellness. Workplace wellness programs can help employees feel better and increase productivity. Workplace wellness programs offer a different health perspective for workers who have sedentary positions. Employees need to understand the personal benefits of a workplace wellness program, “they need to receive incentives for participation, have control over participation and fears concerning wellness need to be addressed...” (Drake, 2013, p. 1) This will create a mental picture of how improving one’s health can be achieved. Health has a multi-dimensional schematic that draws from various angles based on an individual’s social, economic and cultural background; consequently, the largest impact can occur within the realm of where that person spends most of their time. Health is the fundamental guide that gives meaning and direction to a person’s social, personal and professional lives. Each person has an organized system of values that are developed in response to cultural or environmental well-being; therefore, behavior manifests or is a consequence of health. The maintenance of health is contingent on beliefs and attitudes that stem from environmental and socioeconomic factors; however, health does determine our choices about life. Health has been described as levels of functional efficiency and the general condition of being sound in mind, body and spirit. Health has also been characterized as the absence of illness and disease. The perception of health varies and may derive from a predisposed family history to a newly acquired diagnosis, therefore, creating a fluid meaning of health each

time. Each definition of health has its limitations; it merely offers a way to express a condition at that moment for that person.

Wellness is defined as a positive approach to living. It has many characteristics that mimic the features of health. McKinley Health Center (2013, para. 1) states that wellness is a state of optimal well-being that is concerned with maximizing an individual's potential. This is a life-long process of enhancing physical, intellectual, emotional, social, spiritual, and environmental well-being. It is often considered to be an active process of awareness, not just a state of being, but a vigorous effort to make choices based on health. The Holistic Coalition (2013, para.2) refers to wellness as "the dynamic state of the person, wherein there is harmonious functioning of enough aspects of that being, enabling that being to enliven the highest Quality of Life feasibly capable." Wellness has also been described as living in a manner that permits consistent, balanced growth in the emotional, intellectual, physical, psychological and social dimension; this definition integrates health and wellness in the workplace. Employee wellness involves broad spectrum programs that include a number of workplace virtues such as engagement, productivity, and commitment. Workplace wellness programs involve developing healthy choices and promoting these choices by providing options for lifestyle changes; thus birth the concept of health promotion. An environment that is focused on making these changes can make a difference in how health is perceived. The idea that a workplace wellness program can make a positive difference in someone's health status or lead to a desirable outcome is a motivating factor for employee participation. A wellness program should create a healthy attitude about improving health and participating in programs; however, employee participation has also been the most frequently cited barrier for workplace

wellness programs. Some other barriers are fear of the unknown, lack of energy, lack of support, demotivation, inconvenient scheduling of programs and lack of education.

These barriers can work against incentives; employees need options that are convenient, do not interrupt their work assignments and motivates participation. One overlooked barrier in a workplace wellness program is the lack of upper level management support. If the support is absent, then the program will not succeed. The employee needs to feel that senior level administration approve of them participating in a program. Most programs are held during lunch hours; however, employees may feel guilty about their personal commitment to participate at work. Interference with the time set aside for the workplace program may also signify lack of support. If the employee has the support of the senior administrative level, the employee will develop a sense of accountability when joining activities at work. This in turn creates a unified positive sense of health promotion and contributes to the development of a culture wellness at the workplace.

Employers Role in Promoting Health & Wellness

What is the employer's role, if any, in the promoting of health for its employees? What is accomplished by offering a workplace wellness program? Workplace wellness programs are not just a perk; it is an effective way to address the rising trend of chronic diseases such as diabetes, the reduction in productivity of employees along with the rising health care costs that are draining companies' right out of business.

"People with diabetes lose more than eight days per year from work, accounting for 14 million disability days. In 2003, cardiovascular disease costs businesses more than \$142 billion in lost productivity annually, due to absences and premature death." (Health Advocacy, 2012, p. 4)

Most chronic diseases are lifestyle related leading employers to take action and adopt preventative measures. Detection of health issues in the early stages reduces the

risk of illness, disability, early death and high medical cost. The impact of some wellness programs varies and can be difficult to measure, but a well-designed workplace wellness program can generate positive responses for both the employer and employee. Having a wellness program at the workplace can significantly reduce absenteeism, illness and hospital visits while increasing productivity and healthier employees. Concentrating on developing programs that will help employees' lead healthier lives is pertinent.

Customizing these programs to an organization's specific workforce or conducting a need assessment can determine the effectiveness of the programs offered by a workplace wellness program. The ability to reach people and provide an environment that is conducive to change or improvement of health is a complicated yet honorable task that requires an engaging attitude from the employers that reflects a flexible and functional view. The employer has the role of creating an environment that supports health. This environment can provide employees with the necessary tools to maintain good health, such as health screening, health education classes, weight loss plans, stress-reduction techniques and fitness activities. These tools require team effort and participation that will build comradely among employees and contribute to the dynamics of developing a culture of wellness.

"Company cultures are the result of a combination of employee demographics, industry type and management styles. A company culture establishes and controls expectations for healthy behavior and lifestyle choices." (Wellness Proposals, 2013, para. 1).

A healthy lifestyle can be achieved by employees, their families and employers who "values individual and community health, vitality and wellness" (CSU, 2013). Cultures of wellness derive because of common beliefs and values of wellness. If wellness is an accepted value, the culture will develop its own internal or external

rewards, consequences and limits for health behavior. The employer can make small changes that will make a big difference in encouraging employees to recognize the value and the significance of a workplace wellness program. Such changes can range from providing healthy snack options in vending machines at the workplace to marking a walking trail around the workplace to denote mileage completed. These strategies bring attention to the wellness of people and promote a culture of wellness by concentrating on a disease management and living healthy. Health promotion in a workplace wellness program will be the virtual image for motivation and social influence that will amplify health awareness.

Workplace Wellness Programs

A workplace wellness program serves as a network of interventions that propose strategies to influence health behavior change in the workplace. Workplace wellness programs encompass a range of program elements that support health promotion within the workplace. Ultimately, workplace wellness programs translate into fewer on-the-job injuries, less human error and a more pleasant and stress free environment.

Effective workplace wellness programs begin with the fundamental aspect of health promotion and awareness education. A workplace wellness program can reduce risk factors among employees and provide a cost effective program for employers. In order to provide strategies for reduction and prevention of risk factors, employers must address a number of elements that will give the workplace wellness program its design. This design will blend a number of programs that will provide the bases for a culture of wellness.

A culture of wellness is presented by linking health promotional activities with employer incentives to create a flexible framework. This framework should consist of some major concepts such as providing a safe and appropriate environment, offering preventative screening, the integration of programs, and maintaining viable partnerships or collaborations with outside entities. A supportive environment is an essential element that offers workplace wellness programs the vision of organizational values and policies that support a culture of wellness. The vision is important to the program because this is what people grasp. Integration is another element whereas health promotion is coiled within the organizational structure to provide a multitude of programs. The element of collaboration connects health promotion to other services on and off site, such as a recreation center or health insurance providers to allow for discounts, personal incentive or space for employee educational sessions. Finally, programs that include preventative screening can provide early detection for at risk employee population. Workplace wellness programs can also measure how beneficial the program is to the employer with respect to low cost program maintenance, reduction in medical expenses, and illness related absenteeism. Today, most American's businesses have some form of health promotion strategy. Workplace wellness programs are an alternate solution to health care reform that works. There has been many evidence based health care savings due to the formation of workplace wellness programs. The Wellness Councils of America (WELCOA, 2012.b) reported that the Travelers Corporation claimed \$3.40 return for every dollar investments in health promotion which yielded a savings of \$146 million in benefits costs. Absences from illness among 45,000 blue-collar workers dropped 14% at 41 industrial sites where health promotional programs were held. In 2002, a study by the

Michigan Fitness Foundation showed that physical inactivity costs business nearly 48.9 billion annually, the study also noted that if only one in 20 sedentary adults became physically active and remained active for five years, the savings would pay for more than 15, 400 new employees in Michigan. The return on investment is important however,

*“many other outcome measures may also be relevant including worker productivity and ability to work, patient empowerment and ability to manage their own care, behavior changes and clinical outcomes, employee satisfaction, recruitment/ retention, and corporate image.”
(NIHCM, 2011, p. 13)*

Health Advocates Inc. (2012) reported, “despite dire statistics, chronic conditions are often preventable and frequently manageable through early detection, diet and exercise – the cornerstones of workplace wellness programs”.

Health Behavior Theories and Workplace Wellness

A workplace wellness program can greatly benefit from utilizing the Stages of Change Model (SOC) as an approach to improving the health behavior of employees. The Stages of Change Model has been used in guiding interventions and programs based on behavior change. The Stages of Change Model also called the Transtheoretical Model (Prochaska & DiClemente, 1983) supports individuals at different stages of behavior change. This model addresses each individual on a continuum that will lead to the next step of progress for each person; this will determine the extent of behavioral changes derived from the workplace wellness program. The Stages of Change is not just a model, it is a process. SOC model is a set of principles that can complement a workplace wellness program whether the employer has hundreds of employees or five employees. This model is a guide to promoting unique practices that will engage different actions to maintain or develop good health behaviors.

“What is needed to advance health behavior intervention is theory that addresses relationships between modifiable aspects of the environment and behavior” (Jeffery, 2004, p.7).

There are many theories that support a positive outcome when attempting to change health behavior, consequently, a workplace wellness program can utilize some or all of the constructs of a model to exhibit flexibility, evaluate effectiveness and encourage the movement of an individual at any level or stage of cognitive behavior. The terms model and theory are meant to preserve a system of working methods. These methods are not necessarily meant to stand alone, but can be consolidated as a multifaceted framework to capture large and diverse populations with a variety of concerns. Stages of Change Model (SOC) are used to understand the stages and process that individual's progress through in order to facilitate a change in behavior. This process can be lengthy and may take several stages to achieve a successful outcome. The Stages of Change provides the framework that will recognize health behavior at any level and facilitate positive behavior change. (Prochaska & DiClemente, 1983 p. 390) This model is flexible enough to support a workplace wellness program that will target and serve a variety of employees at many different stages or levels.

These stages are known as pre-contemplation, where a person has not given any thought towards doing something different and not interested in changing. The contemplation stage is where the person has heard of a better way and is thinking of change. The action stage is where the person is ready for change and willing to try it out. The maintenance stage is when the person incorporates change into their lifestyle, more than six months. Finally, the relapse stage, where a person tries the change but then returns to original practices or reverts back to the previous stage.

Most people do not instantly decide that they need to be more active or eat balanced meals, these are life changing events that occur over time and requires a model that supports the movement throughout the behavior changes in each stage. The Stages of Change Model focuses on encouraging health decision that promotes change. This model helps to explain the impact on employees due to the implementation of a workplace wellness program.

Program Design

The Stages of Change model has six constructs that works with at risk populations whether people are considering improving their health or have no intention of changing their lifestyle. The incomparable feature about the SOC model is that it supports populations that are scattered along a continuum. This is important attribute, especially within an organization that has numerous employees who are all at various levels of health. No matter what stage a person is in, this model support their movement to the next stage. There are several motivating factors that facilitate the movement along the continuum; such as awareness, confidence building and strategies that reinforce social liberation to manage change. Awareness affords the knowledge of being able to weigh the disadvantages against advantages of making a change. Confidence or self-efficacy allows for a person to resist the temptation of reverting to unhealthy habits. Different strategies such as online seminars to aerobic classes are required for different stages along the continuum; it is pertinent to have a workplace wellness program that provides an array of strategies or interventions to accommodate an employee at any level or stage of change.

In the Stages of Change Model, the first construct is the pre-contemplation stage where the employee has given no thought in participating in a workplace wellness program and no intention on participating within next six months. In this stage employees are not eating a balanced diet or exercising. The employee does not see where a workplace wellness program will benefit them or even fit in their schedules. This person would probably not even open the email or read the flyer on their desk. They may have tried diets and self-restraint but found it to be very inconvenient. They began to experience some health problems or risk factors associated with their unhealthy lifestyle that moves the employee into the contemplation stage, where the initial cognitive process begins.

In the contemplation stage the employee tends to begin the workplace wellness program within six months. The employee reads information about when the wellness programs are held and what is required to enroll. The employee begins to ask the opinions of co-workers who have joined the program and gather the proper forms to be filled out for participation. In an effort to entertain the thought of joining the workplace wellness program, the employee begins to think about how they would like to look by the summer time or the thought of not taking medication due to good blood pressure readings. After talking to a co-worker who has joined the wellness program and swears that it has given them a better life, the employee would then move to the preparation stage.

In the preparation stage, participant seeks support from other co-workers by mentioning their plans of joining the workplace wellness program. They are showing interest in sessions and thinking about what programs or sessions they can successfully

complete. The employee thinks of how the program or participating would help make a lifestyle change in their health behavior, this would usually happen within the next thirty days. This moves the employee into the action stage.

The action stage is where the employee has changed their health behavior. All forms are filled out and submitted, this person has a wellness partner that is also participating in the program with them and they have purchased any necessary supplies. They have substituted television time after dinner with a brisk walk. The employee should also reward themselves for changing and avoiding temptation; this is part of moving to the maintenance stage.

The maintenance stage is when the employee participates for more than six months. The employee is confident in participating in the workplace wellness program and has developed healthy ways to engage in activities at work and away from work. This employee has to be cautious of stressors, must have skills to cope with stress without compromising healthy habits.

The Stages of Change Model has some limitations in regards to looking at an individual and considering the circumstances surrounding that person. This may be organizational or environmental issues that restrict a person's ability to absorb and change a behavior such as medication. Another limitation is that the relationship between stages is not always clear when a person is moving from one stage to another or reverts to a previous stage.

The SOC model can be appropriate for any population; however, a comprehensive need assessment will prove to be very beneficial in creating the initial program structure.

CHAPTER III

METHODS

The methodology is presented in this chapter. The research questions explore perceptions of CSU employees and the workplace wellness program. The research questions are followed by an introduction of the sample used for this study which gives an overview of the participants. The population section follows which defines the target audience for the study. The acknowledgment for the approval of human subject by Cleveland State University, Institutional Review Board is stated followed by details of the instruments used for the interview session. The recruitment of participants' section provides the order by which the process of selecting participants is completed. The data collection portion outlines the procedures used to capture the interview responses along with securing a time and location for the interviews. An overview of the advantages and disadvantages of interviewing is recorded. The procedure explained the actual interview process. Finally, the instrument section clarified the material used to conduct the study.

Research Questions

This study attempted to answer the following research questions:

1. What are the participants' perceptions of health and wellness?

2. What are the participants' perception of the employer's role in facilitating employee health and wellness?
3. To what extent the participants believe that a culture of wellness exist at Cleveland State University?

Sample

This study used a convenience sample of 15 persons that are employed at Cleveland State University. Participants were male and female adults (age 20 or older) and work at CSU at least 20 hours or more per week.

Inclusion Criteria

The participants were at least 20 years of age or older, male or female, and worked at least 20 hours or more per week at CSU. The employee could participate in this study whether or not they have participated in a CSU wellness program on campus. All participants completed a consent form.

Population

The sample consisted of the professional staff that responded to the request for an interview regarding the perception of a workplace wellness program. The participants were CSU professional staff employees that work 20 hours or more and are at least 20 years of age or older.

Human Subjects Approved

Approval for this study was granted by Cleveland State University (CSU) Institutional Review Board for Human Subjects (IRB) prior to scheduling of interviews (see Appendix) at a mutually convenient time between January and March.

Recruitment of Participants

Participants were recruited in three ways. First, an email was sent to the CSU community requesting anyone who wishes to participate in the study for perception of the workplace wellness program on campus. The second approach was posting recruitment flyers throughout CSU campus, asking for volunteers to be interviewed. A third way was by word of mouth. Participants were compensated with a gift card after the completion of the interview.

Data Collection

Data was recorded then transcribed on a laptop to record all responses during the interview. The laptop was password protected. Interviews were conducted in an office area where confidentiality can be secured. The participants were known as subject one, two etc. to protect their identity. The participants were interviewed in a quiet classroom reserved in CSU, School of Nursing. Interviews were completed on a weekday during the lunch hours (12-2p) or during the evening hours (5p-7p) in the Julka Hall Building, 2nd Floor, in Rm 234 during the months of January thru March of 2014. The researcher solicited study participants by email, posted flyer or by word-of-mouth.

Advances and Disadvantages of Interviews

There are several advantages to conducting interviews. One is that interviewing adds a much needed personal touch to questioning someone about their health habits. Participants can express their concerns and feel that someone really care about the impact that the workplace wellness program has on their life. Secondly, the response rate is typically higher for interviews than for surveys. Employees will usually put off a survey

or start it and not return to complete the surveys. Third, an interview can serve as a therapeutic experience, by which an employee can express his or her concerns or recommendations at the end of a workplace wellness session or program. There are some disadvantages to interviewing such as when the assurance of anonymity and confidentiality are provided; some employees have very little trust in anyone within the company. Another disadvantage is that some people have a hard time verbalizing their dissatisfaction and prefer to be passive about their answers. Finally, it is a skill to objectively quantify data when the interviewer must avoid their own interpretation on what they are told.

Procedure

Once the participants arrived at the meeting room, an introduction was made and the participants were thanked for agreeing to be interviewed. The participants were given two copies of the consent form and a confidentiality form for a signature on both forms and one consent form was retained for the researcher's records and the other was given to the participant. The participants were given a demographic profile form to be completed and returned to the researcher. Participants were asked if they had any questions regarding the study. The participants were reminded that the interview process was audio recorded and could last from 30 minutes to an hour based on the responses. Participants were then told that the interview would begin after pressing record on the audiotape.

Instruments

The instruments utilized for this study were a nine-question demographic profile form and a 28-item questionnaire for the face-to-face interview. Also included was a

“Demographic Profile” (see appendix A), a one-page form given to participants prior to the interview to be completed and returned to the researcher. The interview questionnaire consisted of a set of questions soliciting the participant’s perception of workplace wellness. Responses were recorded onto a Microsoft Office Word document designed to obtain demographic information on participants. The questionnaire consisted of questions regarding perceptions of health, wellness and activity surrounding the workplace wellness program. This information was compiled and formatted into a document and/or a chart that displays a collective perception of employees in a workplace wellness program. Participants signed two copies of the consent form; one for their own records and the other for the researcher’s records.

All interviews were audio recorded and answers were stored in a password protected laptop.

CHAPTER IV

RESULTS

Introduction

This chapter describes the results of the study, which is divided into two sections. The first section will give an overview of the demographic profile obtained from the participants along with the interview procedure. The second part will describe the research questions that were asked in the interviews and the responses that derived from the participants.

The participants were asked to complete a demographic profile form that consisted of nine questions. The questions were geared towards soliciting information regarding the participants' education, social and economic background. The participants were asked interview questions that were based on the primary research questions; all response was then recorded.

Summary of the Study

This study focused on determining the perceptions of employees regarding workplace wellness at Cleveland State University. This was achieved by interviewing 15 CSU employees using a questionnaire that solicited the employees' perception of a workplace wellness program. Demographic profiles were collected from each CSU

employee who responded to the study in order to obtain a full range of employee characteristics. Qualitative methods were used to answer the research questions that directed this study. Interviews were conducted using the development of a set of sub-research questions by which data was collected. The sub-research questions support the primary research question. The data was transcribed and analyzed into a Word document under the appropriate sub-questions. Each response was arranged into categories and themes. The categories and themes derived from common patterns that emerged in responses from each question. The themes for this study were analyzed by using a word-based technique that identified abstract constructs such as word repetition and key words from the participant's responses. The themes draw on simple observation. Any deviations from these patterns might explain circumstances that are specific to the individual participant.

Demographic Profile

The demographic profiles indicate that 50% of the respondents were between the ages of 30-49 year old while 40% were over age 50 years old. The respondents were 60% Caucasian and 30 % African American and the majorities (80%) of the participants were female. A little under half (40%) of the participants have been employed at CSU less than five years. Nearly all (93%) of the participants had taken part in at least one health promotion program offered at CSU. Nearly all (80%) of the participants reported that blood pressure and BMI readings are the most commonly used preventative services offered through CSU workplace wellness programs.

Findings

The participants were solicited by an email sent to 365 employees in the CSU workplace wellness program and by word-of-mouth. This study used a convenience sample, with a total of (n=15) participants who completed a 9-question demographic profile and a 28-itemed subset research questionnaire (See Appendix C).

The sample consisted of 15 respondents of which 80% were female and 20% were male participants, and all were CSU staff employees. The average age of the participants was 40 years old. A little under half (40%) of the participants have been at CSU less than five years. Nearly all (93%) of the participants had taken part in at least one health promotion program offered at CSU. Nearly all (80%) of the participants reported that blood pressure and BMI readings are the most commonly used preventative services offered through CSU workplace wellness programs. To facilitate a non-biased sample, (not just in health related departments) participants recruited worked in several buildings across campus. (See Table 1) This was a convenience sample representing CSU staff from across the University.

Table 1. Participant Office Buildings at CSU

Julka Hall	Rhodes Tower	Adm. Center	Health Science	Main Classroom	Law Building	Urban Affairs	Union Bldg.
3	4	3	1	1	1	1	1
15/3= 20%	26%	20%	6%	6%	6%	6%	6%

Discussion of Research Questions

Themes and categories were used to sort interview responses. The themes identified were based on word repetition or word frequency, which recognize unique

words in a set of responses stated by the respondents. Such words for this study were physical activity, healthy lifestyle, eating habits and wellness. The categories were defined by using the key-word technique. This was based on simple observation of understanding the concept or context for which a word was used; then organizing the word under its proper meaning. Such words that fell into this category were “workplace wellness, incentives, health policy and management”. Overall, themes were sorted into stacks of similar meanings while categories were sorted into piles of similar concepts. Each question is typed in bold followed by respective responses.

1. What are your perceptions of health and wellness?

Most of the respondents reported their overall health status as “good”. Many respondents noted they were attempting to be more physically active. Nationally, Healthy People 2020 reported that “in 2007, 9.5 percent of individuals in the United States reported their health to be fair or poor”. Over half, of the participants described wellness as being physically active or fit; additionally, three-fifteenths (30%), indicated they viewed wellness in a holistic manner, not just physical health or the absence of disease. Other themes noted included self-care practices such as doctor visits, balanced diet, and exercising. Life-work balance such as spending time on relationships and obtaining enough sleep was also mentioned.

Over half of the respondents when asked “what are your perceptions of health and wellness” reported that healthy eating and physical activity are important to a healthy lifestyle. Participants were allowed to choose as many health related answers as they wish, when asked an open-ended question during the interview. The participants had a wide range of responses that contribute to living a healthy

lifestyle from stress management to finding life-work balance. Respondents noted that routine visits to their physician's office for wellness screening also contribute to healthy lifestyle.

More than three-fourths (80%) of the respondents stated that exercise was the top selected means for maintaining good health. Mostly all of the respondents stated that eating habits help to manage good health. For example, one participant stated, *"Downloading the fitness pal apps to track my eating habits is really important..."*

Respondents reported that their activities relate to health by engaging in physical fitness such as dancing, gardening, exercise and making healthy eating choices. One participant stated that, *"health is reflective of not only in physical but also environmental and mental status..."* There were several positive benefits mentioned such as fitness for life and the health challenge programs offered through CSU workplace wellness program that help to improve and maintain a healthy outlook about wellness. These programs serve as reinforcement in addressing problem areas such as poor eating habits and lack of exercise.

When asked the question, "what are you presently doing to facilitate good health; one participant stated *"that they are facilitating good health by taking certain measures in their daily activity..."* The top two categories selected in facilitating good health by the participants were exercise and eating habits.

Table 2. Components of Facilitating Good Health as Reported by Respondents

Exercise	Eating Habit	CSU Programs	Sleep	Doctor's Visit	Other
11	7	5	3	1	1
11/15 = 73%	7/15 = 47%	5/15 = 33%	3/15 = 20%	1/15 = 7%	1/15 = 7%

Participants reported that exercise was their main source of good health and along with eating habits, however, one-third of the participants attribute their improved health condition to the workplace wellness programs at CSU. The respondents stated that conversations with other people often influence others and promoted good health. Exercise was noted as the most proactive way of promoting good health by over half (53%) of the respondents. Two-thirds of the respondents stated that diabetes is the top condition that they are concerned about developing. Nearly half (47%) of the participants believed that they were at risk for high blood pressure and heart disease. Another one-third (33%) was concerned about obesity followed by a little over one-tenth (13%) of the participants expressing concerned about the potential to develop arthritis.

2. What are your perception of the employer's role in facilitating employee health and wellness?

Nearly all (87%) of the participants believe that employers should provide health and wellness programs to promote healthy employees. According to a RAND 2012 survey: more than three-quarters (77 percent) of employers with a wellness program offer lifestyle management and over half (56 percent) offer disease management.

(Mattke, et.al, 2013) One respondent stated "*that all types of classes should be*

offered with a focus on basic “how-to classes”. Participants believe that participation would improve if perks and incentives continued; if more flexible time was given and if competition or contest was presented. Respondent’s stated that the employer can increase their role in facilitating health and wellness by offering a number of incentives, such as free admission to recreation center, propose prizes for achievements throughout the program, encouraging attitude from superiors, time to clean up and return to work area after a workout and extend programs to immediate family members. Over half of the respondents (67%) believe that employers should reward employees rather than penalize them for efforts to live a healthy lifestyle.

3. To what extent, if any, do you believe that a culture of wellness exist at Cleveland State University?

“A healthy workplace culture has employees who are given every opportunity to take care of their physical health” (Mooney, 2014). Over half (53%) of the respondents stated that they believe that a culture of wellness exist at CSU in the form of physical activity. One-fifth (20%) of the participants believe that a culture of wellness exists because of the health and wellness programs offered through CSU workplace wellness programs. One-third (33%) of the participants stated that CSU promotes healthy lifestyles by offering incentives and one-fifth (20%) favored health promotion and health and wellness programs offered by CSU. Along with recognition of programs, participants also noted the policies on campus help to develop a culture of wellness. Over half (53%) of the respondents recognized that CSU has a health policy for a smoke-free campus. Two-fifths (40%) of the participants stated that available resources would support health policies on campus.

“Policies that are implemented within the workplace (including tobacco-free policies, fitness breaks, healthy catering policies, and many others) help to enforce healthy behaviors that will improve the overall well-being, happiness, and productivity of your employees. Additionally, employer support for employee health builds employee loyalty and reduces turnover rates.” (Manatee County Health Department, 2011)

The ability to have flex time was also mentioned by over a quarter (33%) of the participants as a way to support a healthy environment. Participants stated that the best way to disseminate information is by word of mouth, noted by over one-half (53%) of the participants. Two-fifths (40%) of the participants stated that email was a good way to provide employees with information regarding health initiatives. Over a quarter (33%) of the participants reported that having flyers posted was effective in disseminating information. All (100%) the participants agreed that there are benefits to having wellness programs on CSU campus. The majority (73%) of the participants reported that there are no disadvantages of having a wellness program on campus. A little more than one-fifth (27%) of the respondents believe that there are some disadvantages. One respondent reported, *“Placing emphasis on employee’s health may impede on employee’s personal life and confidentiality of the wellness program...”*

CHAPTER V

CONCLUSION

Over the last several decades, an epidemic of chronic diseases has been developing in the United States (Pollard, 2008). These chronic diseases such as diabetes, heart disease and pulmonary conditions are the primary causes of illness. The Centers for Managing Chronic Disease reported that 11.9% of U.S. adults age 20 and older have diabetes; 26.5 million adults have heart disease and 18.9 million adults in U.S. have a pulmonary condition. In addition, the cost of treating people with chronic disease is “estimated to account for over 75 percent of national health expenditures” (CDC, 2010). In a technology driven workforce overloaded with sedentary behaviors and negative physical and emotional state of minds, the need for health promotion is essential. In order to decrease the prevalence of chronic illnesses, employers have implemented various health promotion strategies under the umbrella of concepts called workplace wellness. Workplace wellness programs often offer incentives that are used to promote employee participation and attain desired program goals, which

“represents the shift in focus from the treatment of illness and disease to the proactive process of maximizing potential by balancing positive thoughts, feelings and behaviors associated with quality of life” (Sidman, D’Abundo and Hritz, 2009).

This study combined interview responses with literature review to assess employees' perceptions of workplace wellness programs to promote a culture of wellness. Based on the findings of this study, the interview responses found that successful programs appear to have an influence on employee perceptions and attitudes regarding workplace wellness. This study aligns with the literature reviews that showed that workplace wellness program have "emerged as a common employer-sponsored benefit, available to about half of the U.S. employers with 50 or more employees..."(Mattke, et al., 2013). The strategies of a workplace wellness program moves far beyond changing individual behavior towards building social and environmental interventions. It begins the process of transforming attitudes and perceptions of people in the workforce, developing a culture of wellness. As operationalized for this study, a culture of wellness is an environment that supports shared values and cultural norms that encourage prevention and wellness. (Wellness Proposal, 2013a) Wellness programs are based on the belief that unhealthy lifestyles can be changed with the right structure and a supportive community,

"...whether the issues involve smoking cessation, stress management, obesity and depression; targeted programs based on the latest advances in behavioral health research and technologies are providing employers with increasingly effective and affordable methods for improving workforce health and productivity." (Infinite Wellness Solutions, 2013, para. 2).

The workplace wellness program offers support to employees who wish to live healthier lives. Providing support in the form of interventions such as improved nutrition, exercise, counseling, smoking cessation and health related behaviors will offer employees a variety of choices. These programs or interventions should target all members in an organization or the individual employees at one level or another. The

programs aim to promote health awareness and provide options for behavior change for the entire organization. Program strategies aim to prevent chronic illness by addressing the onset of a disease using primary prevention or to diagnosis, treat or manage an illness by implementing effective secondary and tertiary strategies. Workplace wellness programs are complementary health resources that rely heavily on group and organizational catalysts in dealing with health problems.

“Employers appear to have accepted a role in addressing overweight and obesity in the workplace, but they clearly do not believe that they should act along...” (Gabel, Whitmore, Pickreign, Ferguson, Jain, KC and Scherer, 2009).

To create a culture of wellness, organizations should evaluate the combination of wellness programs, workplace policies and environmental considerations to develop a culture of wellness. The definition of a culture of wellness for the purpose of this study is “shared values and cultural norms in promoting prevention and wellness to help people live longer and healthier lives.” (Wellness Proposals, 2013a) This concept was evident by one of the respondents who stated that, *“since I’ve been walking with the lunch time group, my energy level has increased and I want to do more to benefit my health...”* Also, one-third of the participants in this study attributed their improved health condition to the workplace wellness programs at Cleveland State University. Workplace wellness provides valuable and potentially influential opportunities to facilitate positive health beliefs of employees and employers. The employer benefits through lower insurance premiums, reduction in absenteeism and an increase in employee productivity. Workplace wellness programs are much more than exercise, education and empowerment; it is an investment that benefits employees, employers and societies.

Implications and Recommendations

Workplace wellness programs were established to encourage individuals to adopt positive habits and behaviors that will improve the quality of life. Learned behaviors are transferable, a person's work life can affect the family as well as the community in which one lives. The reliance on health promotion through education and interventions that assist in facilitating behavior change can enhance health. The Wellness Councils of America (WELCOA, 2012.a) stated that "the principles that evolve around building a healthier America comes by building healthier working environments." The CDC, 2013 reported that

"employers can benefit from workplace health programs through lower health care and disability costs, enhanced employee productivity, reduced employee absenteeism, decreased rates of illness and injuries, enhanced corporate image, improved employee morale, improved employee recruitment and retention, increased organizational commitment and creation of a culture of health."

The first recommendation is that more research be conducted in evaluating the perceptions of employees regarding workplace wellness. Second, it is also important to turn the evaluation responses into action, for example one respondent stated that, *"she would like to have the option of using flex time while participating in the workplace wellness program to compensate for additional time needed to shower or get back to work area."* This response could be utilized to develop policies that will account for travel and shower time. In addition to flex time policies, smoking policies on campus need to be visually stronger; maybe instead of a plain poster of text, there could be the

universal picture of the cigarette with the red line crossing it out posted at every entrance. Only thirty-three percent of the participants recognized that the smoking signs on campus were a CSU policy. Third, the increase in social support and the development of a curriculum, such as beginning programs during two different lunch-hour times, (e.g. noon and 1 p.m.), so that employees who relieve each other for lunch are not restricted in the programs offered and offices are still staffed. Fourth, building incentives into wellness programs that keep the value of health at the forefront is essential. One respondent in the wellness program stated that *“it wasn’t just the monetary benefit; it was time to take charge of her health.”* The fifth recommendation is that more evidence based research should be conducted to look at what employees view as a challenge to living healthy and what programs are more helpful in motivating a healthy lifestyle at work and at home. For example, the CSU Health Challenge using the Fitbit was a good example of motivating employees at work and at home. This challenge or intervention extended further than counting accumulating steps on the job; it also counted steps that were made after work hours.

The structure of a workplace wellness program is important; there are many critical components that allow the wheel spin. A workplace wellness program should be health centered and employee focused. The secret to the success of workplace wellness programs are submerged within the thoughts, concerns and opinions of the people who are participating in them, the employees.

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LIST OF APPENDICES

- A. Recruitment Flyer (see attached)
- B. Demographic Profile (see attached)
- C. Research Questionnaire (see attached)
- D. Letter of Informed Consent (see attached)
- E. Interview Script Questions (see attached)
- F. IRB Approval (see attached)

VOLUNTEERS WANTED

A research study regarding the perception of CSU employees and the role of the employer in a workplace wellness program is being conducted.

Only the first 20 to respond will be guaranteed opportunity.

Who can participate?

- All full and part time CSU employees

What does the study involve?

- 45 - 60 minutes
- Completion of a brief written Demographic Profile
- Completion of an audio recorded interview

What would happen if I took part in the study?

If you decide to take part and complete the study you will receive a \$5.00 gift card to Subway

Interview will be confidential

**If you would like to take part in this study, please contact
Seander Garner at 216-924-0092 or email at
s.garner14@csuohio.edu to schedule an appointment.**

APPENDIX B.
DEMOGRAPHIC PROFILE

1. What is your age?
 - a. 20 – 29 years old
 - b. 30 - 39 years old
 - c. 40 – 49 years old
 - d. 50 - 59 years old
 - e. 60 years or older

2. Please specify your ethnicity.
 - a. American Indian or Alaska Native
 - b. Asian
 - c. Black or African American
 - d. Native Hawaiian or other Pacific Islander
 - e. White
 - f. Other, please list _____

3. What is your gender?
 - a. Male
 - b. Female

Socioeconomic Status

4. What is your highest level of education obtained?
 - a. High school graduate or Equivalent
 - b. Some college, no degree
 - c. Associate's degree
 - d. Bachelor's degree or higher
 - e.

5. How many years worked at CSU?
 - a. Less than 5 years
 - b. At least 5 years and less than 10 years
 - c. At least 10 and less than 20 years
 - d. At least 20 and less than 30 years
 - e. At least 30 years or more

6. Have you ever participated in any of the following programs? (check all that apply)
- a. Journey to Wellness
 - b. Fitness for Life
 - c. Financial Wellness
 - d. VikeHealth & Well-Being (offered through Human Resources Dept.)
 - e. Other, please specify
7. What preventative services have you participated through CSU workplace wellness program, check all that apply:
8. What is your position at CSU?
- a. Staff
 - b. Faculty
9. Which building on campus do you work in?
- a. Administration Center
 - b. Health Science
 - c. Julka Hall
 - d. Law
 - e. Main Classroom
 - f. Rhodes Towers
 - g. Union Building
 - h. Urban Affairs

APPENDIX C.

RESEARCH QUESTIONNAIRE

1. What are your perceptions of health and wellness?

- a. How would describe your health today or overall?
- b. In your own words, what does wellness mean to you?
- c. What would someone do to obtain a healthy lifestyle?
- d. What actions would you or anyone take to maintain good health?
- e. How does your activities relate to your health?
- f. How would you rate your overall health status? What makes you say that?
- g. What are you presently doing to facilitate good health?
- h. What can you do to promote good health?
- i. What types of health problems are you at risk of having?

2. What are your perception of the employer's role in facilitating employee health and wellness?

- a. Should employers provide health and wellness programs at work?
 - i. If so, why or why not
- b. What interventions or educational programs should be offered?
- c. What can your employer do to improve your chances of participating in a workplace wellness program?
- d. How can the employer support efforts to adopt healthier lifestyle practices at work and home?

e. How should employees be rewarded or recognized for their efforts to live a healthy lifestyle?

i. Should employees be penalized for not seeking to change unhealthy behaviors?

3. To what extent, if any, do you believe that a culture of wellness exist at

Cleveland State University?

a. What does a culture of wellness on campus look like?

i. How would it appear?

ii. Where would you see it?

b. What does CSU do to promote healthy lifestyles, please give examples?

c. What does policies that support health look like?

i. Can you think of an example?

d. What are the best places/ways to provide employees information about health initiatives?

i. What would you recommend?

e. Do you think there are benefits of having a wellness programs on campus?

i. Why, Describe

f. Do you think that there are disadvantages of having a wellness program on campus?

i. Why? Please elaborate.

APPENDIX D.

INTERVIEW SCRIPT

CSU Employee Perception of Workplace Wellness
Questionnaire

(Script Read by Investigator)

Thank you for taking the time to meet with me today as part of my research project.

I will be conducting interviews to assess perceptions of CSU employees regarding health, wellness and the employer's role. Your participation is key in learning about the relationship between employees and the culture of wellness at CSU.

I will be talking with different individuals over the next few months and obtaining their perspectives on health and wellness at CSU workplace wellness programs.

I will be asking you a series of questions and audio recording the information to correctly and completely capture your responses. There are no rights or wrong answers, and it is okay to say, that "you don't know."

I consider issues of privacy to be very important. Please know that your name will not be used in any reports, and I will not quote you directly all answers will be paraphrased. Your participation is completely voluntary, and you may end the interview at any time.

Is it OK that I audiotape our interview? ____ Yes ____ No

Do you have any questions for us before we begin?

APPENDIX E.

LETTER OF INFORMED CONSENT



Cleveland State University
engaged|community

College of Education and Human Services
Department of Health and Human Performance

INFORMED CONSENT FORM

Dear Participant:

My name is Seander Garner and I am a student in the Masters of Education program at Cleveland State University. I am completing my program requirements for Community Health Education by writing a thesis. This project is being conducted under the supervision of Dr. Sheila Patterson. For further information regarding this research, please contact: Seander Garner at 216-924-0092 or by email at s.garner14@csuohio.edu or Dr. Sheila Patterson, Faculty Advisor at 216-687-4870 or by email at s.m.patterson@csuohio.edu

What the project is about:

You are being asked to participate in a research project to explore perceptions of employees regarding health, wellness and the role of employers in promoting a workplace wellness program.

What you will be required to do:

The study will be composed of one interview for 60 minutes on campus with a series of questions and a brief demographic profile. Your responses to the interview will be confidential. Your name will not be collected or appear anywhere on the transcribed documents and confidentiality will be maintained.

Risks and benefits of participation:

Participation is completely voluntary and you may stop the interview at any time without penalty. There will be a \$5.00 Subway gift card offered for participating. Participation in this interview is voluntary. If, for any reason, at any time, you wish to stop the interview, you may do so without having to give an explanation. To minimize the risk of unauthorized access to your interview data, all information will be stored in password-protected files on a laptop and in locked filing cabinets in a CSU office. Additionally, your name and any other identifying characteristic will not be associated with your responses. You have the right to decline having the interview audio taped. The risk to participants will be no greater than those related to daily living.

Confidentiality and privacy

The researcher will gather information about your health history and your perceptions regarding health and wellness. All information collected will be stored in the researcher's password protected laptop in a locked filing cabinet. The results of your interview will be reported only in a group profile; no individual results will be reported. Interviews will be transcribed by the researcher, (myself). After transcription, those audiotapes will be destroyed. Your name will not be included on any of the transcripts and all collected data will be destroyed after three years.

If you have any questions about your rights as a research participant you may contact the Cleveland State University Institutional Review Board at (216) 687-3630.

There are two copies of this letter. After signing them, keep one copy for your records and return the other one. Thank you in advance for your cooperation and support.

I am 18 years or older and have read and understood this consent form. By signing this form, I agree to participate.

Signature of Participant

Date

Participant's Name (Please Print)



Memorandum

Institutional Review Board

To: Sheila Patterson
HPERD

From: Bernie Strong (b.r.strong@csuohio.edu, X3624) *BLS*
IRB Coordinator
Office of Sponsored Programs & Research

Date: February 11, 2014

Re: Results of IRB Review of your project number: #29979-PAT-HS
Co-Investigator: Seander Garner, Student
Title: The perception of CSU employees regarding the role of the employer in a workplace wellness program

The IRB has reviewed and approved your application for the above named project, under the category noted below. Approval for use of human subjects in this research is for a one-year period as noted below. If your study extends beyond this approval period, *you must contact this office to initiate an annual review of this research.*

By accepting this decision, you agree to notify the IRB of: (1) any additions to or changes in procedures for your study that modify the subjects' risk in any way; and (2) any events that affect that safety or well-being of subjects. Notify the IRB of any revisions to the protocol, including the addition of researchers, prior to implementation.

Thank you for your efforts to maintain compliance with the federal regulations for the protection of human subjects.

Approval Category:

X Expedited (7)

Approval Date: January 24, 2014

Expiration Date: January 23, 2015

cc: Project file