# benefit expanding the meaning of workplace wellness



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he definition of workplace wellness has expanded beyond the concept of physical health to encompass multiple aspects of worker well-being. As a result, wellness benefits have evolved from time-tested offerings like physical fitness, nutrition and health screening initiatives to include offerings that target mental health, financial health, and growth and individual purpose.

The COVID-19 pandemic heightened the importance of this evolution as many workers faced new challenges to their physical, mental and economic well-being.

A new International Foundation study, Workplace Wellness and Financial Education Programs: 2022 Survey Report, reveals details about these initiatives as well as organizational status and approach, communication methods, incentives, the use of data/metrics and outcomes. The Foundation has surveyed benefits practitioners about their workplace wellness initiatives for more than a decade. The 2022 edition of the survey includes financial education under the umbrella of workplace wellness for the first time, combining information about these initiatives into one comprehensive report. The study collected responses from 361 corporations, multi-employer trust funds and public employers across the United States and Canada.

### **Status and Approach**

Organizations offer wellness initiatives for different reasons—72% offer benefits primarily to improve overall worker health and wellbeing, while 28% primarily aim to control/reduce health-related costs. The conditions frequently cited as having the most impact include musculoskeletal issues (47%), cancer (45%), diabetes/metabolic syndrome (43%), hypertension/

high blood pressure (31%) and cardiovascular/heart disease/COPD (30%). Respondents were also asked about company culture issues that are impacting workforce productivity. The most cited include stress (65%), issues specific to the COVID-19 pandemic (39%), difficulty recruiting new workers (29%), poor work-life balance (25%) and morale (25%).

Responding organizations face a number of barriers in their efforts to implement wellness initiatives. The top barriers include workers struggling to find time to participate (35%), prohibitive costs (30%), a lack of worker interest (28%), difficulty keeping momentum going (25%), a dispersed population due to the nature of work (24%) and a new challenge that reflects our current reality—a dispersed population due to the COVID-19 pandemic (22%).

Programs utilize both internal and external stakeholders to assist in wellness program operations. About seven in ten organizations (71%) utilize benefits staff, followed by representatives from the human resources (HR) department (47%), organizational leadership (34%), a specific committee devoted to wellness activities (30%) and workers with an interest in wellness (29%). About one in 12 (8%) responding organizations does not use internal stakeholders in its wellness operations. External stakeholders include benefit consultants (50%), insurance providers (45%), wellness vendors (33%), health care providers (18%) and health care professionals (18%) such as nurses and doctors. About one in six organizations (16%) does not utilize external stakeholders in its wellness program operations.

### **Initiatives**

Respondents offer wellness initiatives in a broad range of categories, including the following:

- Fitness and nutrition: Starting with fitness and nutrition initiatives, the most frequent include standing/ walking workstations (59%), ergonomic training/supports (46%), wellness competitions such as walking/fitness challenges (43%), off-site fitness centre/gym membership subsidies (36%), on-site fitness equipment/ centres (35%) and activity/exercise breaks that are encouraged during work time (35%). Organizations also routinely offer healthy food choices in the cafeteria or vending machines (32%), weight loss/management programs (31%) and health coaching (31%). Responding organizations stated that these initiatives have been effective (either very or somewhat) at increasing physical activity (76%) and improving healthy eating (63%).
- Screening and treatment: Organizations offer a wide variety of screening and treatment initiatives. About three in four (73%) programs provide free or discounted flu shots, followed by smoking-cessation programs (47%), health risk assessments/appraisals (45%) and health screenings (42%).
- Social and community health: The most frequent social and community health initiatives offered by organizations are on-site events and celebrations (59%), community charity drives (53%), cultural/diversity initiatives or training (47%), community volunteer projects (45%), team-building activities (42%), staff outings (39%) and blood drives (38%).
- Mental and behavioural health: Recent International Foundation research has shown an increased emphasis on workplace mental and behavioural health initiatives, particularly in the face of the COVID-19 pandemic. Employee assistance programs (EAPs)/labour assistance programs (LAPs)/employee and family assistance plans (EFAPs) (89%), mental health coverage (86%) and substance use disorder benefits/coverage (63%) are commonly offered across all respondent sectors, as are access to mental health mobile apps (40%) and educational/informational sessions hosted at the workplace (39%).

- Financial education: About nine in ten organizations (87%) provide some sort of financial education initiative that often include voluntary classes and workshops (54%), retirement income calculators (52%), projected account balance statements and/or pension benefit statements (42%), free personal consultation services (40%) and new hire/participant orientations (39%). Responding organizations also offer internet links to information sites/intranets (37%), online courses (29%), retirement modeling software (25%) and gap statements that compare current savings with projected retirement needs (22%).
- Worker growth and purpose: The most common worker growth and purpose-related offerings are service recognition (64%), flexible work arrangements (63%) (a figure that has seen a substantial boost since the onset of the COVID-19 pandemic), professional memberships paid for by the organization (62%), tuition reimbursement/tuition assistance (61%) and vacation/time off that is encouraged (60%). Also prevalent are performance reviews that are tied to organizational mission (58%), all staff being notified of internal job openings with qualified candidates being encouraged to apply (55%), structured onboarding programs (55%) and subsidized continuing education for professional designations (53%).

## **Wellness Incentives**

More than one-half of responding organizations (54%) use some type of wellness incentive, either through their own organization (43%), through a vendor or health care provider (19%), or both. Overall, organizations commonly attach incentives to health risk assessments/appraisals (52%), health screenings (45%), fitness programs/competitions (41%), smoking-cessation programs (30%) and flu shot programs (24%). Gift cards/certificates (48%) are the most frequently offered incentives, followed by noncash incentives/prizes/raffles (33%), cash awards (30%) and contributions to health accounts.

# **Use of Data/Metrics in Wellness Programs**

More than one-half (52%) of responding organizations have a budget specific to wellness. On average, those respondents spend \$213 per plan participant per year, with figures slightly higher in the corporate/single employer sector. Organizations use a number of data sources/metrics to guide their wellness offerings. These most commonly include EAP/ LAP/EFAP data (36%), worker surveys (34%), health claims data (33%) and health assessments (22%). One in five organizations (22%) does not use data/metrics to guide their wellness offerings. Respondents use additional data sources to track wellness-related activities. These most commonly include attendance and/or participation in wellness-related events (46%) as well as reports from a wellness vendor/company (36%) or health insurance company (32%). About one in four (24%) responding organizations does not use data/ metrics to track wellness-related activities.

It can be difficult to measure the return on investment (ROI) of wellness initiatives because improvements in worker health, morale, productivity, absenteeism and turnover

can be influenced by a combination of factors. Among responding organizations with wellness initiatives, 13% analyze ROI. Even fewer respondents measure the value on investment (VOI) of initiatives, which considers factors such as employee engagement, recruitment and absenteeism as well as overall financial sustainability and growth of the organization. Only 10% measure the VOI of their wellness efforts.

### Wellness Outcomes

While determining the financial benefits of organizational wellness efforts is difficult, respondents rated the effectiveness of these efforts in meeting organizational goals. Respondents stated that wellness initiatives were either very or somewhat effective at improving organizational attraction (80%), worker productivity/engagement (78%), worker morale (78%), worker professional development (78%) and organizational retention (76%).

Workplace Wellness and Financial Education Programs: 2022 Survey Report is available free to members at www.ifebp.org/Resources/research.



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