EXECUTIVE CASE REPORT NO. 1

THE METLIFE STUDY OF
GLOBAL HEALTH & WELLNESS:

A LOOK AT HOW MULTINATIONAL COMPANIES
ARE RESPONDING TO THE NEED FOR
A HEALTHIER WORKFORCE

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Sponsored by:
MetLife Multinational Solutions in conjunction
with the MetLife Mature Market Institute
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EXECUTIVE SUMMARY

Chronic disease and lifestyle-related health issues are on the rise globally, raising potentially disruptive implications for workforce planning and development. In order to effectively plan for sustainable workforces, employers with global reach are now compelled to refine business strategies with employee well-being in mind.

The MetLife Study of Global Health and Wellness describes the strategic approaches that four multinational companies—American Express, CEMEX, GlaxoSmithKline (GSK), and PPG Industries (PPG) have taken to address these trends.

As we will show, each of these companies has enacted innovative programs to stimulate improved employee health. Motivated by a desire to positively impact their employees' health and well-being, as well as driven by defined business goals, these employers are striving to redefine their work cultures.

In creating global “cultures of health,” these companies have encountered challenges and opportunities that vary by country, such as local culture, local government, employee acceptance, availability of health care vendors, and communication with employees. Despite these challenges, American Express, CEMEX, GSK, and PPG have discovered that good health is a universal value, and that their programs are making a difference in the lives of their employees, their employees’ families, and the local communities in which they operate. At the same time, they have improved their bottom line.

This report provides information that can help employers launch successful global health and wellness initiatives and implement them at a local level, ultimately facilitating a culture of health within an organization.

Key Findings

Employers Face Common Issues but Tailor Responses by Country
Improving employee health is a universal workforce issue today. However, in taking a strategic approach globally, employers must tailor their programs, depending on location, specific health issues, and demographics, to develop wellness programs that address local needs.

Health Trends are Changing All Over the World
Chronic disease and lifestyle-related health issues are increasing, not only in developed countries like the United States and the United Kingdom, but also in emerging economies such as Mexico, China, and India, where a middle class is starting to thrive. In China and the Philippines, access to consistent health care by the overall population is a problem. Employers with global operations are trying to navigate and address these issues, which have a significant impact on the health of the workforce base.

Employers Create a Culture of Health Rather than Isolated Programs
The concept of employee wellness is not new, but focusing on creating an overall culture of health is. To help address chronic disease and lifestyle-related issues facing employees, employers are developing policies, physical facilities, and behavioral standards within the workplace that support healthy living.

Local Health Care Costs Drive Employer Focus
In the US, a major goal of employers is to reduce long-term health care costs. Outside the US, where medical costs are lower, employers concentrate mostly on reducing employee absenteeism, increasing productivity, improving engagement and retention, and maintaining the organization’s reputation.
Key Performance Indicators Reflect Overall Well-Being of Employees
Identifying a mix of health-related and productivity indicators from the onset helps create a baseline of both individual health profiles and/or the overall health of a facility or marketplace. The most common cost-related indicators used by companies in the study were: absenteeism, cost of health care claims, productivity gains, customer service scores, and short- and long-term disability claims.

Employee Benefits Promote Positive Change
Employer benefits programs helping with physical health and wellness can be divided into two categories: influencing employee behavior change around wellness and helping employees avoid financial difficulties while planning for the future. Overall, medical, dental, disability, life, and retirement benefits are seen as an integral part of company culture and can contribute, whether directly or indirectly, to a healthier workforce.

Employee Age Factors in Differently by Company and Location
There is no single way employers consider age when developing health and well-being programs. Some employers consider age from the onset, while others factor it in later. Chronological age is a common focus, as younger employees begin to experience health issues, such as heart disease, that are more often associated with older employees.

Incentives May Be More Common within the US than Abroad
Incentives encouraging employee participation in health and wellness programs are a common US practice. Outside of the US, companies interviewed also prefer to nurture and encourage employees with rewards. Few penalties are used, except for a surcharge on medical premiums for smokers.

Both Corporate and External Factors Challenge Implementation
Companies confronted several challenges beyond their control while implementing their health and wellness programs, including the recent global economic downturn. Companies also experienced internal challenges, such as differing styles in management and communication styles, deciding in which markets outside the US to implement programs, and the lack of baseline data on health risk indicators.
INTRODUCTION

Employers around the world are inspired by a sense of social responsibility to prioritize employee health and well-being. However, the recent trends of increased chronic disease and lifestyle-related health issues are having a significant impact on individuals, communities, and countries. These changes can significantly impact health care costs, employee absenteeism, productivity, and engagement. Understanding how these trends vary by country can help organizations reach solutions that fit business and employee needs.

This study examines the key challenges facing four multinational employers—American Express, CEMEX, GSK, and PPG—as well as the promising practices they have implemented to address employee health and wellness needs. This report focuses on employers' programs in India, Mexico, China, the Philippines, the United Kingdom, and the United States, and addresses the following:

- Country-specific issues leading to differences in health and wellness programs
- Ways employers are creating a healthy employee culture, including examples of promising practices
- Program challenges or setbacks
- Metrics used to measure the success of health and wellness programs
- Government-sponsored health care and its impact on the design of wellness plans.
METHODOLOGY

The report’s findings are drawn from research commissioned by MetLife Multinational Solutions, featuring four multinational companies with sites in India, Mexico, China, the Philippines, the US, and the UK. Companies were American Express, CEMEX, GSK, and PPG.

Six in-depth telephone interviews were conducted (March-April, 2010) with US and foreign corporate heads of health care initiatives at the four multinational companies, which range in size from 40,000 to 90,000 employees worldwide. The employers operate in 50-130 countries (average 89 countries) in regions including the Americas, Western and Eastern Europe, Africa, the Middle East, Australia, Southeast Asia, and Asia Pacific. The industries include finance and insurance, manufacturing, and pharmaceuticals. The interviews focused on the benefits executives’ perception of current challenges in implementing health and wellness programs that align with corporate and strategic goals, as well as the needs of local employees.

Review of company material included internal PowerPoint presentations, program brochures, websites, and videos.

A thorough literature review of the key health issues, current benefit offerings, and cost-containment strategies in India, Mexico, China, the Philippines, the UK, and the US was also conducted. The project team for this study included Kathy Lynch, Director Employer Engagement, Sloan Center on Aging & Work; Celina Pagani-Tousignant, President, Normisur International; Chad Minnich, Associate Director Marketing Communications, Sloan Center on Aging & Work; Priya Sood, Graduate Assistant, Sloan Center on Aging & Work; Lauren Sutherland, Research Assistant, Sloan Center on Aging & Work; Peri Friedman, Product Manager, MetLife Multinational Solutions; John N. Migliaccio, PhD, Director of Research, MetLife Mature Market Institute.
A GLOBAL VIEW OF EMPLOYEE HEALTH ISSUES

Health Trends Driving Employer Action

Chronic disease, the leading health issue around the world, is “responsible for more than half of all deaths in the world and is projected to account for two-thirds of all deaths globally in the next 25 years”:

- Seventeen million people will die from communicable diseases, maternal and perinatal conditions, and nutritional deficiencies combined.
- Deaths from chronic diseases will increase by 17% between 2005 and 2015, from 35 million to 41 million (see Figure 1).
- Cardiovascular diseases will remain the single leading cause of death, with an estimated 20 million people dying, mainly from heart disease and stroke.

Figure 1. US Health Insurance Provider Breakdown

![Figure 1](http://www.who.int/chp/chronic_disease_report/part2_ch1/en/index18.html)


The main cause behind chronic disease has been poor lifestyle choices; workers are spending more time behind their desk, eating less healthfully, exercising less, and experiencing more stress, all as the demands of the workplace increase.

Of great concern is that these trends are expanding globally, becoming increasingly visible in emerging economies such as India, China, and Mexico. For example, two decades ago, less than 10% of Mexican adults were obese. Today, 68% are obese, with obesity increasingly prevalent in younger generations.

As a result, Mexicans are dying younger and are more likely to contract diabetes. CEMEX also notes another concern: “We have 35-40-year-old employees who are experiencing heart attacks.” (See Table 1.)

The costs of these trends can be daunting. In the US, chronic disease “cost[s] the economy more than $1 trillion [US] annually.” Additional projections indicate that, for example, India could lose $237 billion [US] over the next few years due to health-related costs.

In order to reduce costs, employers need to be aware of both their employees’ health needs and their access to health care because this access can affect overall workforce health. In China, for example, the lack of access to affordable care is a serious issue. Most Chinese citizens are uninsured: 45% of urban populations and 79% of rural populations pay out of pocket for health insurance. Similarly, in the Philippines, about half of health care costs fall on the individual.
Table 1. Health and Wellness Issues by Country

India

**Major Health Concerns**
- Cardiovascular disease and diabetes due to poor diet, lack of exercise, and tobacco consumption.\(^{12,13}\)
- Communicable and non-communicable diseases,\(^{14}\) including HIV/AIDS, tuberculosis, malaria, and pneumonia

**Trends**
- Neglected diseases are likely to become endemic; it is predicted that by 2025, 57.2% of the population will have diabetes.\(^{15}\)
- According to the World Health Organization, approximately 60% of deaths can be attributed to chronic diseases, possibly increasing to 77% over the next 10 years.\(^ {16}\)

Mexico

**Major Health Concerns**
- Cardiovascular disease
- Obesity in adults and children

**Trends**
- Cardiovascular disease (CVD) is the number one killer in the country; nearly a quarter of Mexican adults are smokers and 30% are hypertensive.
- In 1989, less than 10% of all Mexican adults were overweight. Today, about 68% of individuals are overweight. Rising rates of childhood obesity indicates the problem is still growing.
- Mexicans die much younger of CVD than their counterparts in wealthier countries. Many die in their 40s and 50s, when they should still have at least 20 more years of life and over 10 more years of work.

China

**Major Health Concerns**\(^ {17}\)
- Lack of rural health care
- Infectious diseases
- Aging population

**Trends**
- Improved health and health care have not remained on par with economic growth.\(^ {18}\)
- Low rates of improvement of life expectancy and infant mortality.
Philippines

**Major Health Concerns**
- Addiction to illicit drugs
- Malnutrition
- Infectious diseases

**Trends**
- Access to health care is a major issue, especially among the poorer population.\(^9\)

United Kingdom

**Major Health Concerns**
- Smoking and drug and alcohol abuse
- Stress
- Violence, bullying, and harassment
- Back pain and repetitive strain injury (RSI)
- Disease prevention and control
- Work-life balance

**Trends**\(^2\)
- Limited exercise
- Obesity
- Smoking
- High alcohol consumption

United States

**Major Health Concerns**
- Chronic disease: heart disease, cancer, stroke, diabetes.
- Injury due to unhealthy diets, obesity, using tobacco and alcohol, and not using seatbelts.\(^3\)
- Not getting preventive medical care, such as flu shots, Pap smears, mammograms, and colorectal cancer screening tests.

**Trends**
- “More than half of all Americans suffer from one or more chronic diseases.”\(^4\)
The Role of Government and Public Policy

A given country’s laws create differences in who provides for employee health and well-being, and to what degree.

In the US, employees usually receive health benefits through their employers. In 2006, for example, among the 84.2% of individuals with health insurance, “59.7% had coverage that was provided through an employer; 27% had government-funded coverage; and 9.1% purchased coverage individually.”15 (See Figure 2.)

Figure 2. Projected Deaths from Chronic Diseases (in millions)

In Europe, however, the government takes a more active role in supporting access to health care. The UK, for example, funds a National Health Service that provides hospital and community health services free “to all UK residents and employees. The end result is that, in the UK, “out-of-pocket expenses for health care services remain relatively low.”16

In other countries, government support is active, though slightly less robust. In Mexico, for example, a Social Security institute provides basic health benefits that cover medical exams, treatments, and medications. Mexican employers provide additional benefits to employees to address specific health needs. Employees then have the choice of using the free governmental health services or paying a discounted fee for health services offered through their employer.

Creating a Culture of Health and Wellness

Health and wellness programs are certainly not a new concept to the employers interviewed for this study; all have been delivering health and wellness programs for years. Recently, however, there have been some notable changes, like working to create an overall culture of health rather than implementing isolated programs.

CEMEX originally conceived health and well-being as integrated into its safety programs. It has since distinguished health and well-being from safety concerns and is now implementing the program across markets. American Express started its health initiatives in the US to help reduce health care costs. Positive results and the ability to leverage the investment in experience and materials led to the company expanding the program globally.

Collectively, American Express, CEMEX, GSK, and PPG strive to create a global culture of health for their employees and their families and are dedicated to developing policies, physical facilities, and behavioral standards within the workplace that are supportive of healthy living.
PROMISING PRACTICE:

AMERICAN EXPRESS: HEALTHY LIVING

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<thead>
<tr>
<th>Primary Industry Sector</th>
<th>Finance and Insurance</th>
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<tr>
<td>Size of Workforce</td>
<td>Approximately 58,000 worldwide</td>
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<tr>
<td>Description</td>
<td>A global health and wellness program combining best-in-class resources, enhanced access to care, and a supportive work environment.</td>
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<tr>
<td>Purpose</td>
<td>To improve employee and dependent health, create a culture of health that is shared with peers and colleagues, manage cost trends, and improve business productivity and performance.</td>
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<tr>
<td>Launch Date</td>
<td>2009</td>
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IMPLEMENTATION

“Healthy Living” was first launched in 2009 in the US as a single-market initiative in response to internal data based on health trends and health care claims. It is a comprehensive health and wellness program that includes improved access to care, enhanced resources for employees, and a supportive work environment.

Healthy Living’s message to employees is to “Pay Attention to Prevention, Know Your Health Numbers, and Rally Your Resources.” Free tools, such as preventive drugs and vitamins, in-network preventive care, health coaching/dietician, and lifestyle and condition management, are available to employees, who can learn more about their current health through free health screenings and health risk appraisals.

American Express encourages employees to participate in a number of ways:

- Providing credits to the employee’s Health Savings Account
- Allowing employees to search for top doctors (although American Express encourages employees to continue seeing their personal physicians)
- An Employee Assistance Program
- A 24-hour nurse line
- The Healthy Living website
- Onsite Wellness Center clinics at major worksites in the US and abroad that feature onsite medical staff
- Wellness Activity Rooms for low impact exercises (e.g. yoga).

Once Healthy Living was launched in the United States, other markets throughout the world became interested in implementing the program. The program was launched in India in late 2009 and then in the United Kingdom and Mexico in 2010.

American Express developed “Strategic Planks,” or key areas of focus, for the US, including Employee Engagement, Employee Appreciation, Health Status, and Financial/Cost Status. In doing so, the company discovered that there were some subtle and unique differences regarding health care outside the US. For instance, medical costs are lower, but access to care may be more of a challenge. Thus, the company created different “Strategic Planks” for its global program.

In the UK, American Express is developing what is called a path towards a “Point of Arrival,” an integrated health and wellness solution. The UK is striving to eliminate a fragmented offering of health initiatives and offer a program where all of the elements, such as occupational health, private medical care, and employee assistance link together. The UK site would also like to be more proactive in helping employees manage their health and well-being through user-friendly online tools.

In India, many employers still provide medical coverage for dependent parents. At American Express’ India site, following the local custom, all employees and their dependents, including dependent parents, are covered under the medical insurance plan. Because dependent parents are rapidly aging and creating health risks for the plan, the company provides free comprehensive medical checks for employees, which are extended to dependent parents at a discount. An online health risk appraisal creates a health plan for the employee or adult dependent. If a health risk such as diabetes is identified, the employees are invited to join a 52-week condition management program, which includes personalized counseling and tools that will assist in making important lifestyle changes, like individuals sharing their journeys to wellbeing through photos and posts on the website.

A distinguishing point for the Mexico site is that they have a large number of contract staff. At this site, there are 3,000 American Express employees and 1,500 outsourced employees. As these contractors have the opportunity to become employees at some point, they have access to the Healthy Living program as well.

BUSINESS DRIVERS

Although business drivers for the original program in the US were meant to reduce health care cost trends and increase employee engagement, drivers may be different throughout the world.

In the UK, the key drivers at American Express are engagement and productivity so that the company can deliver higher customer
satisfaction. For example, the UK site is focused on a reengagement of its employees after a difficult few years, and Healthy Living is an important way for the UK site to give something meaningful back to their employees.

The India site is facing a rapidly growing economy, which leads to talent pressures for this site. Additionally, escalating costs of health care and deteriorating health profiles of employees and dependent parents have been a struggle. Therefore, the business drivers for Healthy Living in India relate to attracting and retaining employees, reducing health care cost trends, becoming an employer of choice, and improving the health profile of its employees.

Similar to India, the Mexico site’s drivers are cost containment, productivity and performance, and attraction and retention of employees. This last driver is crucial in Mexico because wellness programs in Mexico are relatively new, not universally offered by employers. Therefore, the Mexico site can easily differentiate itself from other employers by implementing Healthy Living.

CHALLENGES FACED

All sites have experienced some challenges in rolling out the Healthy Living initiative. In the US, one challenge was determining whether to allocate funds for the initiative in a poor economic climate and how that would be perceived by employees. The company understood that implementing these changes would lead to reduced health care cost trends for the company, as well as for employees. Educating the employees and highlighting the many benefits of the program was critical. Once they engaged in the Healthy Living program, concerns were replaced by a genuine appreciation of the program, and also of the company’s investment in their health.

At the UK site, leaders were challenged to find a way to present the program in a less formal setup, with the expectation that an intrusive program would not settle well with this particular population. The UK also found it challenging to implement the program during a difficult economic climate, but early results indicate that the program is being well-received by employees.

Confidentiality of employee information was of particular concern for the India work sites and has posed some challenges in terms of capital; the India site has found that it must put extra resources into the technology that supports this practice to ensure a robust process.

Mexico’s site also recognizes that the program needs to be sustained and is counting on employees’ enthusiasm, as well as continued engagement and sponsorship from executives.

EVIDENCE OF PROGRESS

Since the installation of free preventive generic prescriptions, the US has seen promising trends regarding the compliance with these medications for particular conditions, such as high cholesterol and blood pressure. In the first phase of the Healthy Living program, the US site has a great deal of participation data (see Table 2) and employee satisfaction data, but plans to review a variety of metrics, including health care costs and health risk factor trends towards the end of next year for a greater sense of progress. Detailed analysis is planned in 2011 by a major university utilizing a data warehouse, which is being constructed.

Table 2. Results for US “Healthy Living” Program (2009)

| 30,000 | Employee walk-in appointments at on-site clinics, including nurse practitioner services | 14% increase from 2008 |
| 16,000 | Health assessments completed to identify health risks | 450% increase from 2008 |
| 15,000 | Flu shots given to employees and family members | 150% increase from 2008 |
| 9,300  | Health screenings delivered at 28 locations | 180% increase from 2008 |
| 4,200  | Employees identified for health coaching | (new program) |

The UK site is looking at documented and anecdotal reactions from employees involved in events related to Healthy Living, and the results have been 100% positive and enthusiastic. The UK site plans to measure the acceptance of programs, statistics from the medical plan, and participant success in specific areas such as smoking cessation and absence management improvement.

The first objective of the India site is to create awareness and a culture of health; key measures here are utilization and participation. As employees participate in the program, American Express expects to see a positive impact on health care cost trends, the quality of care, and customer service. So far, participation has far exceeded expectations. An estimated 10-20% participation rate was determined by consulting companies and contacts in the industry; however, the India site has exceeded a 50% participation rate. In addition, the participation from family members of employees at American Express is greater than the industry average, where employers offer such programs.
The Mexico site, which launched the program in May 2010, reports that although Healthy Living is in its early stages, more and more employees are getting involved in its implementation—not just people from Human Resources, but from all staff functions. The site will strive for more participation in the short term, while long-term goals include increased productivity, potential awards for being a good corporate citizen, and a stronger economic return. A data warehouse is planned in Mexico linking data from the onsite clinics, wellness program participation, and medical and disability claims in order to evaluate outcomes.

American Express continues its work in implementing Healthy Living at other locations in its global network. This includes offering annual health risk appraisal linked to interventions at major locations, which is being extended globally. An employee assistance program (EAP) is currently available in all major global locations. In doing so, the company seeks to develop a culture of health and wellness, by encouraging positive health choices (physical, social, and financial) that expand across the organization and benefit everyone.
BUSINESS DRIVERS AND REASONS TO TAKE ACTION

Business drivers vary depending on a company’s location worldwide. US companies typically pay a large portion of employee health care costs, spending significantly more per capita than any other country. As a result, US employers are now seeking to learn about employee well-being and its potential to reduce these costs. Outside the US, where governments provide significantly more health care funding and medical costs are lower, employers concentrate mostly on reducing employee absenteeism, increasing productivity, improving engagement and retention, and maintaining the organization’s reputation.

Productivity is a key concern. Research has shown that “57% of all employees who participate in their company’s wellness programs say the programs are effective at improving productivity.” When an employee misses 1-2 days due to illness, the days add up, and these absences can have a significant, negative affect on productivity. Indeed, fully 48% of employers surveyed in a recent MetLife report “believe an absence management system...is effective at improving employee productivity.”

Indeed, American Express found that a focus on absenteeism is very important in the UK, prompting the implementation of a new absence management system to encourage employee participation in wellness programs. Call centers are specifically targeted because the demand of time-sensitive systems can be stressful and lead to absences and turnover.

Employers also see health and well-being benefits programs as ways to positively affect the company’s reputation and help to establish their company as an Employer-of-Choice. In emerging economies, for example, a high value is placed on employers who support health. “It is a real differentiator in terms of attraction and retention of employees and engagement,” reports American Express, regarding their Mexico site. “It is not a common practice.”

In India, American Express again found that there were no “best practices” benchmarks. In response, the company began offering a program well beyond what any other employer was providing, which proved to be a particularly important consideration for call center employees, whose turnover rates were high.

A Philosophy of Health and Wellness

By linking health and wellness initiatives to the company’s brand, mission, and philosophy, companies are furthering efforts to build a culture of health.

Employers may connect their initiatives to the company’s mission. GSK is aware that its mission is focused outward on its clients. Health and wellness initiatives enable the organization to turn the mission inward: “We are a health care company, so it is very important that we live our own values with our people.” For American Express, staying healthy fosters a sense of community within the organization and supports the company’s mission of providing employees with rewarding and meaningful work. These health initiatives also support the company’s overall philosophy of leading innovation while providing quality customer care.
For CEMEX, health and wellness issues are connected to their brand, which is very strong in relation to health and safety. “If you visit any of our facilities,” company leaders report, “starting at the front door, you can see how important health and safety are for [us]; they are baseline.”

PPG is committed to a vision of sustainability, and building a culture of health is part of that agenda, because healthy employees are critical in creating sustainable operations. “We partner with our employees to improve their health and the health of their families,” a leader at PPG explains.

**Actions & Considerations for Employers**

Before launching a health and wellness program, carefully consider what factors are “driving” your organization’s interest. For global strategies this is even more important because your business drivers are likely to vary depending on cultural and political influences.

Consider the following:

- ✓ Evaluate the health and wellness factors particular to a country’s workforce and tailor your program to address them.
- ✓ Understand how a health and wellness program can differentiate your company both in the US and abroad.
- ✓ Develop a program that is an extension of your company’s brand, mission, or philosophy.
PROMISING PRACTICE:

GSK: LEADING AN ENERGIZED ORGANIZATION

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<th>Primary Industry Sector</th>
<th>Pharmaceuticals</th>
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<tr>
<td>Size of Workforce</td>
<td>Approximately 99,000 worldwide</td>
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<td>Description</td>
<td>Culture Change Program for Senior Leaders</td>
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<td>Purpose</td>
<td>To impact the whole organization and everyone within it; to act on the culture and ways of working within the culture. Program leaders facilitate groups of interested Senior Leaders who previously attended the Energy for Performance Program and are interested in setting goals to energize the part of the organization they lead.</td>
</tr>
<tr>
<td>Launch Date</td>
<td>June 2009</td>
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IMPLEMENTATION

With a focus on the culture of GSK, Leading an Energized Organization (LEO) was piloted in June of 2009 in Puerto Rico and later implemented in Latin America, the Philippines, and Asia Pacific.

GSK recognizes that it may not be enough to focus on employees’ individual health and well-being in order to create a culture of health. As a company leader stated, “We use the analogy of fish in the pond: If you have sick fish, it is fine to take fish out of the pond and get them well again. However, if you put them back into a dirty pond, they will fall sick again quickly. We know that the best health and wellness strategy is one where you act on the fish and on the pond as well.” Thus, LEO was born.

LEO focuses on senior leaders who have engaged in the Energy for Performance program at least six months prior and have therefore been working on their own energy management for some time. Energy for Performance (E4P) is a program that enables employees to invest their energy, physically, emotionally, mentally, and spiritually.

Teams of senior leaders participating in LEO may be from the same geographical region, manufacturing site, or industry (ex: Consumer Health Care business). They are brought together for a one-day program, during which leaders are asked to consider organizational data, and take an appreciative inquiry approach to their collective core strengths, values, and aspirations for the organization.

Leaders design specific actions, services, interventions, modes of working, or physical environments of facilities based on the need of their particular part of the organization and set clear direction for the next three months, which is referred to as a “90-day mission.” For example, the leaders who attended LEO in the Philippines decided to redesign the workplace facilities to create a supportive infrastructure for sustainable energy and healthy high performance. They have created space for physical activity, reflection, renewal, and focus, as well as areas for fun.

Following LEO, leaders begin implementation of their goals. A follow-up is essential; the group reconvenes in order to monitor progress. While measure of impact rests solely with the group of leaders, program facilitators work with the group in order to provide support and help identify the next steps in the building and sustaining of the energy within the organization.

GSK hopes this program will contribute to building trust within the organization, promote empowerment of employees, encourage involvement and commitment among senior leaders, and support the sustainability of its people by ensuring that employees remain energized and thriving.

BUSINESS DRIVERS

Having had great success with their individually focused energy program, GSK program leaders recognized the need to act at the cultural level as well. The company understands that individual
agility (coping ability) and perceived organizational support is key to engagement, and engagement is what leads to high performance and retention—the ultimate business drivers. The energy programs build agility and positive perception of organizational support.

**LESSONS LEARNED**

GSK has encountered minimal barriers, as LEO was developed in direct response to participant input. Although no major challenges nor barriers were reported, the company has cited a number of lessons learned from the introduction of this program.

One such lesson is to “go with the energy” of the organization and let the reputation of the program build momentum. For example, GSK made it a point not to launch this program at its UK headquarters, but rather in Puerto Rico, where there was already significant interest and demand. Once others heard of the positive results, they wanted to implement the program as well. The positive reputation of the program is building organically.

In addition, program leaders found it beneficial to be responsive to the consumer. The program is a facilitated process that follows the group’s specific needs. For instance, if a region thinks the program would be received better in a different language, then GSK will make sure that materials are available in that language.

Lastly, GSK focuses on enabling and empowering its local businesses. Trainings are conducted to ensure the facilitation of the program can be conducted by people from the culture and the background of that particular area. GSK engages with customers in different parts of the world in order to promote empowerment while maintaining standards for the program that are tracked and evaluated.

**EVIDENCE OF PROGRESS**

LEO is a new program, and therefore there are not many hard results as yet; however, there have been some sessions that have clearly led to change within the organization. Among the successes of the program is the Philippines site, where the program was launched in 2009. The leaders of the Commercial Organization in the Philippines concluded that the physical environment of the facility was not adequately supporting energy, and so their 90-day mission would be to redesign the work environment to make it more conducive to energy. As a result of the program, the new facility has rooms for employees to meditate or pray; game rooms where employees can engage in activities, such as Wii or mini-basketball; quiet areas where people can focus and use their energy; a fitness center with personal trainers; and a quiet outdoor area with running water, where employees receive their performance reviews. Food availability was also considered so that food choices would support employees’ energy at the physical level.

Additionally, in the Philippines, there was recognition that employees of GSK are consistently working hard and fast, sometimes leaving little time to appreciate each other. GSK leaders acknowledge that recognition is important to an individual’s well-being; therefore, an appreciation wall was created in one part of the facility. Employees utilize this wall to write notes of appreciation to each other on a regular basis.

The Consumer Business Unit in Asia has also achieved success. There, the outcome of the leadership’s LEO session is a plan for appreciative inquiry summits to engage the geographically dispersed population in discussion and design in order to grow more and build their energy.

Within GSK, there is excitement and a positive pull for LEO within the organization.
STRATEGIC RESPONSES TO HEALTH TRENDS

Goals & Approaches for Health and Wellness Programs

Realistically, preventive health care “is the most cost-effective strategy, not only for a country with scarce financial resources, but also for resource-rich companies whose rising health care spending is affecting their business results and competitiveness.”

CEMEX identified three main issues that affect its employees: stress, weight problems, and lack of appropriate immunizations. Obesity is a key area of concern, as 6 in 10 employees are overweight.

For PPG, with operations in North America, Latin America, Europe, Middle East-Africa, and Asia Pacific, the most important issues are chronic disease and risk. PPG identifies chronic disease as illnesses such as cardiovascular disease, diabetes, depression, muscular skeletal disease, etc., while associating risk with obesity, proper nutrition, physical activity, appropriate screening and immunization, and stress management. The company focuses on prevention of chronic diseases by addressing the risk factors.

GSK in the UK states that its global profile contains variations on three core issues: mental health, driver safety, and musculoskeletal health. “The longer people stay out of work,” the company claims, “the less likely it is that they will return … so we take the preventive approach to mental health very seriously.”

American Express observed that issues differed by country, so company leaders have emphasized concerns identified within country locations. In the US, for instance, sedentary lifestyle, obesity, and stress are the main issues. Yet in the UK, muscular skeletal problems, mental health, smoking, and obesity are more relevant concerns. In Mexico, gastrointestinal disorders, muscular skeletal and respiratory problems, premature births, and deviated nasal septa were primary issues. In India, lifestyle diseases (i.e. cardiac and diabetes), Caesarean section deliveries, and increased stress felt by employees in “graveyard shifts” are priority concerns.

A health and wellness goal of GSK is to improve employee sustainability by implementing a “full spectrum” approach, which starts with illness and continues to the highest level of well-being. The spectrum includes not only physical well-being, but also spiritual, mental, and emotional well-being. This holistic approach has also been implemented by American Express and PPG in their own health initiatives (see Figure 3).

Figure 3. Four Dimensions of a Comprehensive Health & Well-Being Strategy

An organization supporting health and wellness may provide opportunities for its employees to enjoy:

- An absence of disease and infirmity
- An awareness of and active progress toward maintaining proper diet, exercise, and personal habits
- A balance in all aspects of life – physical, emotional, spiritual, intellectual, and social
- Resiliency – A step above health and wellness, resiliency in an individual is the ability to recover readily from the adversities of life such as stress, illness, and loss. This is manifested in the workforce as employees who are fully engaged and more productive.

Source: Sanicola and Stanley, 2010

http://www.bc.edu/agingandwork
Considering Age in Program Implementation

While health trends are prompting employers to offer health and wellness programs focusing on chronic disease prevention and increased health care access, age and overall aging trends can also play a significant role in employees’ health and well-being.

However, age is a far more complex issue, and links to indicators like decreased absenteeism and lower health care costs may be less obvious. In addition, making assumptions about groups of employees based on someone’s birth year can be problematic.

The Sloan Center on Aging & Work encourages employers to consider a range of age-related factors, such as generation, life stage, and career stage, or the “prism of age” framework as they develop health and wellness initiatives (see Figure 4). One question that was asked of each employer was: Do you consider age dimensions when you are developing health and well-being programs?

How old are your employees . . . really?

**Chronological Age** – One’s actual age in years.

**Generational Age** – Generations are groups of people who fall in the same age bracket (e.g. Gen Y, ages 20 – 35). Important societal experiences have the potential to impact the way that a majority of the members of the same generation view the world and make meaning out of their experiences.

**Occupational Age/Career Stage** – Career Stage is a way of thinking about the accumulation of knowledge, competencies, skills, and experiences related to a particular type of career or line of work.

**Live Events Age/Life Stage** – Life stage refers to person’s development as he/she moves through a variety of life experiences such as marriage, the birth of children, empty nest, etc. Life stage is often dependent upon one’s own perception of where he/she is in life.

For employers in the study, a range of age-related factors, such as generation, life events age (life stage), and occupational age (career stage) came into play as they developed their health and wellness initiatives.

GSK identified chronological and occupational age early in the development of its programs. While analyzing employee data, three distinct groups emerged: a highly engaged, resilient, and energetic group of employees; a demographic who seemed to sacrifice for the company, who were highly engaged, though tired, slightly older and more senior; and, a younger, more junior group of employees, who were physically well but less engaged.

In order to “offset some of the aging that is already here and the aging that is yet to come,” PPG built chronological age and life stage into all modules of one of their key programs as well as into their messaging campaign. Life stage was considered when segmenting their population for offerings. For instance, this company provided programs for pregnant women, retirees, and active dependents.
American Express’ considerations of age differed by country. In India, for example, chronological age is a critical issue due to changing employee health profiles. The company’s own research found that “a 20-year-old in India is similar to a 30-year-old in other markets, if you look at health demographics” — a powerful insight considering most of American Express’ Indian employees are in their mid-20s. The company also discovered another unique age consideration—benefits for dependent parents. As the company explained, dependent parents are “rapidly aging and creating health risks,” and benefits for this population are equally important for young Indians.

In Mexico, though, American Express takes into account life stage when developing health and wellbeing initiatives, understanding that different cycles of an employee’s life will require one to join specific programs. For example, the company offers a flexibility program that may be suitable for different employees based on their life stage, such as a pregnant woman, working parent, or a student.

CEMEX reports that “every program that is implemented in the company must take into account age.” Specifically, this means considering chronological age and career stage because the diseases typically affecting elders (i.e., diabetes, high blood pressure, depression, high cholesterol, heart attacks, etc.) are now showing up in the company’s younger employees.

**Use of Incentives: The Carrot or the Stick**

The use of incentives is culturally common in the US, especially related to the Health Risk Assessment. Few penalties are used, except for a surcharge on medical premiums for smokers. Outside of the US, employee incentives are used but are not as common.

GSK, headquartered in the UK, for example, does not use incentives, claiming they “want the programs to stand on their own.” Instead, the company “just makes[s] a compelling case of why the programs are valuable at an individual and collective level,” finding that employees will see value in the programs and participate through recognizing potential gain.

PPG does use rewards such as contests, raffles, t-shirts, and healthy lunches, though this is not its primary focus: “We believe the most important investment is keeping the healthy people healthy, [and] we do not believe in the idea of ‘tagging’ or ‘chasing’ people or focusing solely on high-risk individuals.”

Similarly, American Express maintains a “focus on nurturing and encouragement, rather than penalizing.” In the US, they offer employees opportunities to reduce health care costs and improve health by providing preventive services for free.

CEMEX uses medical diplomas to motivate employees. The firm recognizes the 25% of employees currently in very good health by giving them a diploma during a special ceremony. The effort aims to encourage the remaining 75% of employees to improve their health. Evidence shows that their efforts have worked—they have achieved 100% participation in medical exams.

**Health and Wellness Offerings**

Of the health and wellness programs offered by American Express, CEMEX, GSK, and PPG, two overall categories emerged: programs that focus on raising awareness, behavior change, and the use of medical support (Table 3); and programs that help employees avoid financial difficulties and encourage planning for the future (Table 4).

Authors’ note: Table 3 presents a selection of programs offered and is not meant to be a comprehensive list, nor is it meant to imply that all programs listed are offered in every market.
Table 3. Programs That Focus on Raising Awareness, Behavior Change, and the Use of Medical Support

<table>
<thead>
<tr>
<th>Employer</th>
<th>Example Program Offerings</th>
</tr>
</thead>
<tbody>
<tr>
<td>CEMEX</td>
<td>• Stress assessment and management providing general information about dealing with frequent stressors among employees.</td>
</tr>
<tr>
<td></td>
<td>• Weight loss/obesity programs that suggest ways to reduce weight.</td>
</tr>
<tr>
<td></td>
<td>• Vaccination program offering specific protections against diseases like tetanus and hepatitis, as well as other international dangers that may be encountered during business travel.</td>
</tr>
<tr>
<td>American Express</td>
<td>• Free preventive drugs and vitamins</td>
</tr>
<tr>
<td></td>
<td>• Free in-network preventive care</td>
</tr>
<tr>
<td></td>
<td>• Free health coaching</td>
</tr>
<tr>
<td></td>
<td>• Free health condition management</td>
</tr>
<tr>
<td></td>
<td>• Free health screening</td>
</tr>
<tr>
<td></td>
<td>• Free health assessment</td>
</tr>
<tr>
<td></td>
<td>• Financial Incentives</td>
</tr>
<tr>
<td></td>
<td>• 24-hour nurse information and referral line</td>
</tr>
<tr>
<td></td>
<td>• EAP, doctors</td>
</tr>
<tr>
<td></td>
<td>• Intranet resources</td>
</tr>
<tr>
<td>GSK</td>
<td>• Portfolio of programs to build energy and resilience</td>
</tr>
<tr>
<td></td>
<td>• EAP to help people with work/life balance and emotional and psychological support</td>
</tr>
<tr>
<td></td>
<td>• Health risk assessment</td>
</tr>
<tr>
<td></td>
<td>• Safety programs to reduce risk of workplace accidents and injuries</td>
</tr>
<tr>
<td></td>
<td>• Pandemic Flu program</td>
</tr>
<tr>
<td></td>
<td>• Occupational health doctors and nurse advisors available throughout the world</td>
</tr>
<tr>
<td>PPG</td>
<td>• Blood Pressure Checks</td>
</tr>
<tr>
<td></td>
<td>• Smoking Cessation</td>
</tr>
<tr>
<td></td>
<td>• Cancer Screenings</td>
</tr>
<tr>
<td></td>
<td>• Immunizations</td>
</tr>
<tr>
<td></td>
<td>• Improving cholesterol through proper nutrition</td>
</tr>
<tr>
<td></td>
<td>• Exercise/activity promotions</td>
</tr>
<tr>
<td></td>
<td>• Strength training programs</td>
</tr>
<tr>
<td></td>
<td>• Social networks</td>
</tr>
</tbody>
</table>

Seeking additional ways to support employee health and well-being, these organizations have also instituted programs that support employee financial security. The most common insurance offerings include disability, health, life policies, and annuities. Employers particularly realize the benefits of offering dental care; it has been found that “64% of employees who say they have good or better dental health also report very good or better overall health.” (See Table 4.)
### Table 4. Programs That Help Employees Avoid Financial Difficulties and Encourage Planning for the Future

<table>
<thead>
<tr>
<th>Benefit</th>
<th>CEMEX</th>
<th>American Express</th>
<th>GSK</th>
<th>PPG</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Benefit Offered?</strong></td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Fully Covered by Employer or cost share?</strong></td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Dental Health Coverage</strong></td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Employee pays discounted fee</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Cost shared with employee</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Discounted coverage available</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Disability Insurance</strong></td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Covered by company</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Cost shared with employee</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Medical Health Insurance</strong></td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Covered by company</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Cost shared with employee</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Life Insurance</strong></td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes in the US, and the majority of business units outside the US</td>
</tr>
<tr>
<td>Covered by company</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes in the US, and the majority of business units outside the US</td>
</tr>
<tr>
<td>Company pays = one year salary; employee can buy expanded life insurance</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes in the US, and the majority of business units outside the US</td>
</tr>
<tr>
<td><strong>Annuities</strong></td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Retirement plan offered</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Employees have a retirement fund and can purchase shares at reduced rate</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

While dental health coverage, disability insurance, and medical health insurance are offered by all companies in this study, certain plans may require employee cost participation. All companies in the study offer traditional retirement plans, with GSK and PPG offering annuities in addition to the retirement plan.

These programs add value to each company economically and for the sustainability of their workforce. For CEMEX, the link between these benefits and health is very clear: “Our goal,” they explain, “is to offer good health options for employees and their families and create a sense of belonging and loyalty.”

http://www.bc.edu/agingandwork
Health-Related Indicators

Health-related indicators provide a baseline of information on employee health and wellness issues. Certain indicators outline individual profiles, such as Health Risk Assessments, medical exams, and biometrical screenings. Others, such as health claim data and surveys designed by the company, evidence overall health in a particular facility or marketplace. Employees benefit by becoming aware of their own health; for companies, this information guides investment decisions.

Using a variety of health indicators to assess employee health conditions, the four companies have created baselines within their organizations. Three of the four companies (PPG, American Express, and GSK) use a Health Risk Assessment (HRA) to collect employee information; two of these three use the HRA in the countries where they have launched health and wellness initiatives.

Using the HRA, American Express identified 4,200 employees in the US as “at risk/chronically ill” (with the associated cost of 1.86 times that of a healthy employee). In addition to the HRA, this employer offered free biometric screenings to their employees. The same screenings were offered on an on-going basis at company occupational on-site medical clinics, or wellness centers.

In each of their global facilities, CEMEX relies on medical exams to create an individual baseline of information. Employers track employee participation in the medical exams from month to month, and their goal is to obtain more than 85% participation in all facilities each year.

Organizational Demographic Profiles

In addition to focusing on individuals, some employers in the study also concentrate on the whole population in a given facility or marketplace.

To obtain a profile of the overall health of employees, American Express evaluated employee health conditions in aggregate and in targeted locations to build a portfolio of programs to address needs. Next, the organization compared their local data to national information provided by the World Health Organization (WHO), helping the company understand the different issues around the world.

Country-Specific Performance Indicators

American Express, which has call centers around the world, uses cost-related indicators that vary by country. In the US, data is collected from short- and long-term disability claims, health care claims, absenteeism, and productivity gains, and improvement is measured by calls handled per day. In the UK, absenteeism and productivity gains are tracked very closely, while in India’s call centers, customer service scores are tracked, because “healthier employees provide better customer service.”

Comparing external country data with company data, American Express found their employees in Mexico and the US had higher incidents of certain health-related behaviors leading to increased absences and medical costs. For instance, roughly 10% of expectant US mothers do not seek prenatal care, increasing the risk of medical costs associated with an unhealthy baby and untold family stress.

GSK embedded health-related questions in their annual company survey. While the questions did not directly focus on an employee’s personal health, the company could examine certain markers of employee well-being in specific countries, such as happiness, satisfaction, engagement, and a sense of empowerment—all of which are very important in the context of mental well-being, which leads to increased productivity.
PPG tracks productivity loss that is prevented with health and wellness programs, health care cost per labor hour, cost per capita, and gross cost prior to cost sharing and cost shifting for each facility.

**Program Assessments**

Linking health and wellness programs to key performance indicators is the second step in measuring success.

Every two years, PPG uses two tools to survey all locations to identify the scope and depth of an intervention at a given location and how it is managed. A challenge is that certain survey questions may be interpreted in different ways depending on the country, prompting program leaders to make some questions more culturally appropriate.

To reduce absences and provide stronger onsite prevention, American Express uses an absence management system in the UK to gain valuable data and target savings. CEMEX has had similar success in lowering absenteeism and health care costs in the short term.

In analyzing results of their annual company survey, GSK has found that participation in Team Resilience programs improves employee satisfaction, sense of work/life balance, and coping ability. The company’s Energy for Performance program has also positively affected employees’ sense of empowerment.

**Actions & Considerations for Employers**

When evaluating your organization’s approach, design a strategy that takes into consideration both the business drivers that you are working to influence, as well as the outcomes you are hoping to achieve. In addition, consider your organization’s culture—what are your employees likely to be most receptive to?

Consider the following:

- ✓ Know the health-related indicators that give the overall profile of a facility; this will help embed health and wellness in the culture of the organization.

- ✓ Track program participation from the onset and link it to productivity or cost-related indicators.

- ✓ Embed health questions that examine markers of well-being in your company’s annual survey to measure success.

- ✓ Consider age dimensions, such as generation, life stage, and career stage when you are developing health and well-being programs.
PROMISING PRACTICE:

PPG: CREATING A CULTURE OF HEALTH INITIATIVE

<table>
<thead>
<tr>
<th>Primary Industry Sector</th>
<th>Manufacturing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Size of Workforce</td>
<td>Approximately 39,000 worldwide</td>
</tr>
<tr>
<td>Description</td>
<td>An initiative that builds on an existing health and wellness program, “10 Keys to Healthy Living and Healthy Aging,” which encourages employees to create a culture of health by sharing success stories and ideas.</td>
</tr>
<tr>
<td>Purpose</td>
<td>To build a new culture of health, attract and retain talent, and reduce health care costs and productivity losses due to health problems</td>
</tr>
<tr>
<td>Launch Date</td>
<td>2010</td>
</tr>
</tbody>
</table>

IMPLEMENTATION

PPG has maintained a particular focus on its health and wellness practices for several years. In response to employee input, the company developed the “10 Keys to Healthy Living and Healthy Aging” program. This program offers guidance on a variety of topics such as nutrition, exercise, health screenings, and relaxation.

PPG is currently launching a new initiative, “Creating a Culture of Health,” in direct response to its employees’ use of the 10 Keys in order “to add life to employees’ years and years to their life.” The company wants health and well-being to be everyone’s responsibility so that employees will receive the nurturing they need to thrive.

The company is focused on encouraging employees to utilize existing programs. Building this culture of health requires time, patience, and some key elements such as leadership, programs, people, measurable processes, incentives, and measures. These elements are the fundamental building blocks that PPG will use to obtain an effective culture of health.

BUSINESS DRIVERS

Program leaders believe that from a business point of view, a healthy company will attract and retain talent. This will then lead to a more economically sustainable future, including reduced health care costs and less productivity loss due to health problems. The company acknowledges that in some areas of the world, there is no such measure as direct health care costs. In these areas, the focus is instead on productivity loss prevention by means of self-reported presenteeism and absenteeism metrics.

PPG lists their specific business drivers as: talent attraction and retention, employer of choice status, health care cost reduction (US specific), and “indirect cost reduction” (i.e. linkages between health and productivity) in the rest of the world.

CHALLENGES FACED

One challenge that PPG has faced in presenting the “Creating a Culture of Health” initiative is the ability to mobilize different layers within the company. For instance, the message must be sold to top leadership, operational leadership, employees, unions, and wellness teams. The company found that passion and perseverance were key elements to get all layers involved.

Another challenge is the “cultural impatience of business.” Top leaders want to see results “next quarter;” however, health and wellness are measured in years and even decades. Once management understands this, initiatives can then move forward.

PPG has found that some employees have previously mistrusted health and wellness programs, fearing that the organization may use the information against them in some way. In order to overcome this, wellness programs must first gain credibility among employees. One way they have done this is to collect their own data that employees can review.

There are also some cultural challenges involved with the implementation of a program. While PPG has sites all over the world, they have found that there has been some skepticism in some countries about implementing a program that was developed in the United States; as a result, employees may question the relevance of a program because it was not invented in that particular country. The company realizes that there are other ways of doing things that are valid, and they are developing materials and communications for “Creating a Culture of Health” to be adapted to suit the needs of different regions and cultures.

In addition to the general acceptance of its programs, PPG has learned to rely on the energy of its employees. It is important to use the emotional engagement and mobilization of its employees as a resource. By doing this, the organization views the employees as part of the solution instead of part of the problem. As one leader stated, “We ask our people to take responsibility for their own health and enact responsible behavior, but we need to provide an environment and culture that is supportive of behavioral choices that are going in the right direction—it is a partnership, it is an interaction. Let employees and employers differ in any other area. When it comes to health, they should stay on the same side.”
EVIDENCE OF PROGRESS

Because the Culture of Health initiative has only recently launched in 2010 in the US and other countries, there are no hard metrics to present at this time. In order to measure the continued success of “Creating a Culture of Health,” PPG plans to use the same process and outcome metrics that they use to track the progress of “10 Keys to Healthy Living and Healthy Aging.” Process metrics have to do with how many programs are implemented, the strengths of the programs, the strength of the management systems, participation, and percentage of low or high risk, while outcome metrics measure cost per capita, health care cost per labor hour, gross cost prior to cost sharing, and productivity loss or gain.

Currently, PPG is piloting a study on “Creating a Culture of Health” with a major US university in order to measure the gap between the management perception of a culture of health and the employee perception of culture of health. The University will present the results of this study in June 2010 at PPG’s Global Health and Wellness Summit, where they will discuss how to implement “Creating a Culture of Health” in all the countries in its network.

By developing and maintaining a healthy organization, PPG hopes to provide the basis for a more economically sustainable future for the company and an environment in which employees can thrive.
GLOBAL CHALLENGES THROUGHOUT PROGRAM IMPLEMENTATION

Creating workplaces supportive of employee health and well-being globally is complex and challenging. This is especially true because of the diversity of native cultures. The employers interviewed for this study identified several challenges in program implementation.

Sphere of Control

Some challenges were beyond the organizations’ control, both on a global scale and in specific country contexts.

Most obviously, the economic downturn in the past few years has impacted funding of new programs and existing ones. Employers are finding it difficult to present significant spending on programs when restructuring is occurring within companies.

In India, though, American Express experienced another challenge beyond its control—a lack of existing benchmarking data to support its programs. Additionally, there was an absence of local health vendors. “Sometimes it requires a more subjective approach than being more data driven,” suggests American Express. “We do the best we can.”

Organizational Dynamics

Other challenges vary by country but are dependent on internal company factors, such as: choosing what markets to go to outside of the US, the variance of leadership, management styles, communication, confidentiality of data, employee support and participation, baseline data of risk indicators, and technology and privacy issues.

American Express, for example, operates in more than 40 markets; their dilemma is where to introduce health and wellness programs next. Some markets may be ready for implementation, but the company has to turn them down because other markets are ahead in the queue. “A challenge…is prioritizing to first reach the markets that will see the greatest positive impact in the shortest time,” explains American Express. “We look at headcount, how the care is being delivered, how employees receive the programs, how the unions accept them, and many other things. It is a very complicated decision.”

American Express has also experienced challenges with privacy and data security. Occasionally, employees provide more information than needed, which then raises concerns of protecting that data. While protecting employee information is just as critical as the company brand, the company recognizes that their “no breach is ever acceptable” approach to protection comes with tradeoffs. “This increases our costs and slows down innovation because it takes longer for things to get done.” However, the organization is not willing to sacrifice its employee privacy.

Cultural Relevance

A key question employers ask themselves is: “How can a global program be locally appropriate?”

One answer is that messaging must be culturally relevant. When PPG’s program leaders translated their program for their operation in Korea, the feedback was, “We liked the message; however, none of the pictures have people who look like us.” American Express, on the other hand, was trying to create a community-style culture of health shared by colleagues and peers. Recognizing that “the 29 sharing of personal stories to help create [a] culture and community…may not work
well in all markets of the world,” the company altered its approach for different workforces. In India, where employees value public recognition, the company modified its US launch materials using captions and electronic postcards from various leaders sharing their own stories of health and wellness practices. Yet when the company launched their program in the UK, where employees are generally less inclined to discuss their own health issues, they took a less personal approach.

Beyond word and visuals, though, comfort and cultural “fit” is important. While encountering a warm reception from Asian markets, PPG found skepticism of health and wellness programs in some European countries. At times there is an “[it’s]-not-invented-here syndrome,” company leaders reflect; employees in different regions may hesitate to take part in a program that was not invented with their specific culture in mind.

Similarly, GSK has generally experienced a positive reception of its programs globally, yet some of Western Europe remains reticent to participate. Some senior leaders there are hesitant to introduce a program on managing personal energy and physical, emotional, spiritual, and mental well-being; from a cultural standpoint, they feel it may be viewed as intrusive. However, the company has found that given time, space, and the chance to see positive feedback from other countries, this region is beginning to follow the rest of the company and engage in these programs.

Truly, customization is key. PPG’s goal is that programs feel the same everywhere. But copying and pasting a program from the US is not realistic; program leaders want initiatives to have lasting power. To achieve this, they developed a balance of “standardized processes and branding, with some elements customizable locally.” For example, all PPG employees have access to an onsite health presence. In the US, though, this presence is a doctor or a nurse; in India, it is a paramedic.

“There is yet much to do to become culturally competent in understanding global diversity in cultural terms,” concedes PPG leaders. “We need to make an effort in a way that speaks to local people.”

**Actions & Considerations for Employers**

Implementing a global health and wellness program is complicated. Once a company has identified its overarching goals both at the corporate level and in each country, it can be helpful to engage local partners as part of the implementation plan.

Consider the following:

- **√** Partner with universities to conduct studies that link utilization of programs with productivity or cost-related indicators.

- **√** When developing programs, find a balance between standardized processes and branding, allowing some elements to be customized locally.

- **√** Engage and empower local people. Remember—employees in different regions may hesitate to take part in a program that was not developed with their specific culture in mind.

- **√** Be open to using alternative methods of implementation, depending on the country’s culture.
PROMISING PRACTICE:
CMEX: ONLINE STRESS MANAGEMENT SEMINAR

<table>
<thead>
<tr>
<th>Primary Industry Sector</th>
<th>Manufacturing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Size of Workforce</td>
<td>Approximately 47,000 worldwide</td>
</tr>
<tr>
<td>Description</td>
<td>A two-hour online seminar, which can be done at once or in intervals. The seminar provides a comprehensive assessment of an employee's stress level, with goals and monthly follow-ups for a one-year period.</td>
</tr>
<tr>
<td>Purpose</td>
<td>To increase employee participation, augment productivity, lower absenteeism, and help employees manage their stress.</td>
</tr>
<tr>
<td>Launch Date</td>
<td>June 2009</td>
</tr>
</tbody>
</table>

In order to encourage participation for all employees, CEMEX will introduce kiosks on the floor at the plants for access by hourly workers during the second phase of implementation.

BUSINESS DRIVERS

Stress has been identified as a health risk for CEMEX employees globally. It is important to company leaders that employees receive the help they need in identifying symptoms of stress that contribute to negative health consequences. It is also important for them that employees know CEMEX cares about their employee. The pertinent question for them is not whether individuals are stressed, but how they can manage their stress each day. CEMEX believes that if employees can understand and manage their individual health issues, increased productivity and reduced absenteeism will be a result in the short term. In the long term, it will help create a culture of health in the company.

CHALLENGES

There are a number of challenges that CEMEX faces with the Online Stress Management Seminar:

- Maintaining employees' confidentiality in order to build trust.
- Ensuring that all employees know how to use computers or utilize online programs.
- Making programs and training accessible, including in-person trainings all over the world, like those held at headquarters in Monterrey, Mexico.
- Language of seminar; it is currently offered only in English and Spanish, but the company has sites in regions all over the world, including Europe, South America, Africa, the Middle East, and Asia, where other languages are spoken.

A key lesson learned through this program has been how to approach the issue of health and wellness, especially during times of financial difficulty for the company. CEMEX leaders are always thinking about what else they can do to offer the best health options for employees. If they can provide high-quality health solutions at a low cost, as they have done with the Online Stress Management Seminar, it will be a win-win outcome for both employees and the company.
EVIDENCE OF PROGRESS

Although it is difficult to obtain conclusive results for the global program since the pilot was launched just a year ago, there are already some measures of success.

- 25% of employees have participated in the Online Stress Management Seminar.
- 92% of participants find the online seminar an “excellent” option in addressing stress management.
- 8% deem the online seminar a “very good” option.

The main reason for the high user satisfaction is that the course is modular, allowing employees to complete it at their own pace.

CEMEX strongly believes this program will reap very positive results in the short term, with a positive impact on absenteeism and employee productivity, but acknowledges that these results will be largely based on employee participation. By the end of the year, leaders predict that 25,000 employees will be participating in the program. The company’s goal is to obtain 100% employee participation in the Online Stress Management Seminar over the next five years.

Thus far, the online technology has not only allowed CEMEX to reach more people globally, but it has also promoted a culture of health.
CONCLUSION & RECOMMENDATIONS

The issues related to creating a global culture of health within organizations are complex and require time, patience, and flexibility. Employers who understand that there is no “cookie cutter” guide have a distinct advantage in achieving their employee health and corporate objectives. Each employer has to act on all layers of their organization and mobilize the people in each country accordingly, as having a global program is not a question of simple translation, but rather of cultural relevance. Some points to consider:

- Do not assume health issues are the same in all countries.
- Each country has different drivers for health and wellness programs.
- Consider the different dimensions of age when developing health and wellness programs.
- Offer medical resources, as well as programs that help employees avoid financial difficulties and plan for the future.
- Go where the energy is when starting a pilot and let the credibility build. This will help attract other worksites.
- Learn to engage and mobilize employees so that their energy can be focused on both personal health and complementing corporate objectives; therefore, they can be part of the solution, not the problem.
- Spend time building a culture of health by concentrating on workplace policies, physical facilities, and behavioral norms that support health.
END NOTES


2 Ibid.

3 Ibid.

4 Ibid.

5 Ibid.


7 Ibid.

8 Ibid.


13 Ibid.

14 Ibid.


16 Ibid.


24 Ibid.


27 Ibid.

29 Ibid.


ABOUT THE SLOAN CENTER ON AGING & WORK

Founded in 2005, The Sloan Center on Aging & Work at Boston College promotes quality of employment as an imperative for the 21st century multi-generational workforce. We integrate evidence from research with insights from workplace experiences to inform innovative organizational decision-making. Collaborating with business leaders and scholars in a multi-disciplinary dialogue, the Center develops the next generation of knowledge and talent management.

Since our founding, we have conducted and produced more than 20 studies in collaboration with employers, including the Age & Generations Study, the Talent Management Study, and the Generations of Talent Study. Current projects include the Assessing the Impact of Time and Place Management Study and the Engaged as We Age Study. The Center on Aging & Work is grateful for the continued support of the Alfred P. Sloan Foundation.

For more information about the Sloan Center on Aging & Work at Boston College, please visit: http://agingandwork.bc.edu

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