

## Fast Facts: Employer and Employee Attitudes Toward Obesity

*This fact sheet is one in a series of 'Fast Facts' that provide information to help shed light on the complex health issue of obesity.*

### What are Employer and Employee Attitudes on Obesity?

The findings below are from a survey conducted by the STOP Obesity Alliance to assess employers' and employees' attitudes regarding obesity and weight management programs in the workplace.<sup>1</sup>

- A large majority of employers view obesity as a preventable disease associated with poor lifestyle choices and/or lack of willpower.
- Findings indicate that eight out of ten employees, regardless of weight, **believe weight management programs belong in the workplace** and are effective.
- Nearly 90 percent of employees believe on-site exercise facilities and subsidized healthy foods in workplace cafeterias are helpful in reaching and/or maintaining a healthier weight.
- Employees, especially those who are obese, are willing to contribute slightly more for premiums so as to ensure that all workers are covered for various prevention and wellness services.
- Employees, especially those who are obese, **strongly support positive financial incentives** for participating in workplace programs to address obesity and promote wellness. Of the

employees surveyed, 77 percent support discounts on health insurance or other monetary incentives for participating in health risk appraisals, 70 percent for participating in weight management programs, and 66 percent for participating in health coaching.

### Do Worksite Wellness Programs Save Money?

- Evidence shows that worksite wellness programs can result in significant savings, averaging around \$2.73 in savings for each dollar spent<sup>2</sup>

### What are Employers Doing Now?<sup>3,4</sup>

- To reduce health care costs and improve productivity in the workplace, many companies are offering **workplace wellness programs** centered on general health and fitness. For instance, many companies offer:
  - on-site exercise facilities and/or voluntary health risk appraisals through health plans,
  - subsidize the cost of health club memberships,
  - install bike racks and shower facilities to promote exercise,
  - require vendors to include healthy meal and snack options in cafeterias and vending machines,
  - sponsor office sports teams, and
  - distribute health education materials.

### What is the Cost of Obesity to Employers?

- Estimates of the medical cost of adult obesity in the United States (U.S.) range from **\$147 billion to nearly \$210 billion** per year.<sup>5</sup>
- Obesity-related job absenteeism costs **\$4.3 billion** annually.<sup>6</sup>
- Obesity is associated with lower productivity while at work (presenteeism), which costs employers **\$506 per obese worker** per year.<sup>7</sup>
- A number of studies have shown obese workers have higher workers' compensation claims.<sup>8</sup>

### About the STOP Obesity Alliance

The Strategies to Overcome and Prevent (STOP) Obesity Alliance is a collaboration of nearly 70 consumer, provider, government, labor, business, health insurer and quality-of-care organizations working to drive innovative and practical strategies that combat obesity. Housed at The George Washington University School of Public Health and Health Services, Department of Health Policy, the Alliance has centered on developing reports, policy recommendations, and tools for consumers and policy makers that are evidence-based and approved by consensus. The Alliance receives funding from founding sponsor, Sanofi. For more information, visit [www.stopobesityalliance.org](http://www.stopobesityalliance.org) and follow the Alliance on [Facebook](#) and [Twitter](#).

### Resources

<sup>1</sup> STOP Obesity Alliance. (March 2010) Decision Maker Survey. Available at:

<http://www.stopobesityalliance.org/research-and-policy/research-center/survey-results/>

<sup>2</sup> Baicker K, Cutler D, Song Z. Workplace wellness programs can generate savings. *Health Aff (Millwood)*. 2010;29(2):304-311. doi: 10.1377/hlthaff.2009.0626

<sup>3</sup> Ibid.

<sup>4</sup> Virgin HealthMiles. 2012 Employer/Employee Survey

[http://us.virginhealthmiles.com/resources/Documents/SurveySummary\\_NEWM2012.pdf](http://us.virginhealthmiles.com/resources/Documents/SurveySummary_NEWM2012.pdf)

<sup>5</sup> Cawley, J., and Meyerhoefer, C. (2012) The Medical Care Costs of Obesity: An Instrumental Variables Approach. *Journal of Health Economics*, 31(1): 219-230,

and Finkelstein E.A., Trogdon J.G., Cohen J.W., Dietz W. (2009) Annual medical spending attributable to obesity: payer- and service-specific estimates. *Health Affairs*. 28: w822-w831.

<sup>6</sup> Cawley J, Rizzo JA, and Haas K. "Occupation-specific Absenteeism Costs Associated with Obesity and Morbid Obesity." *Journal of Occupational and Environmental Medicine*, 49(12):1317-24, 2007.

<sup>7</sup> Gates D, Succop P, Brehm B, et al. "Obesity and Presenteeism: The Impact of Body Mass Index on Workplace Productivity." *Journal of Occupational and Environmental Medicine*, 50(1):39-45, 2008.

<sup>8</sup> Trust for America's Health and the Robert Wood Johnson Foundation. (2012) F as in Fat. Pg. 32. Available at: <http://healthyamericans.org/assets/files/TFAH2012FasInFatFnlRv.pdf>.