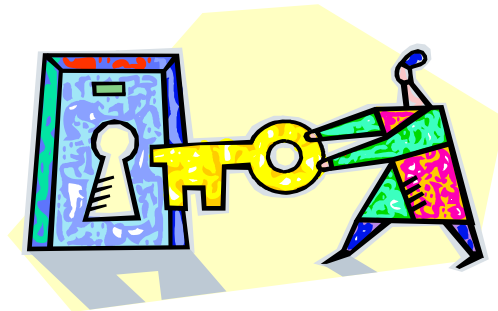


## *Chapter 2: How Do I Get Buy-In?*



## How Do I Get Buy-In?

You may be convinced that comprehensive workplace health promotion is something your workplace should adopt. You may already know the healthy workplace model (see page 8) that is most appropriate for your workplace. You may be ready, but is your workplace? If management does not see the value of comprehensive workplace health promotion you will not be able to get very far even if employees buy into the concept. Likewise, if workplace health is seen as one person's or one department's responsibility<sup>1</sup>, you will not have the support needed to make comprehensive workplace health promotion happen in your workplace. Therefore, you need to get buy-in.

For the purposes of this guide, the term “buy-in” refers to getting support for comprehensive workplace health promotion. Obtaining buy-in is an ongoing endeavour that utilizes different strategies. Buy-in is required from key stakeholders in your workplace such as management, human resources, employees and unions.

The first step is to understand what you need buy-in for. Obviously, commitment to comprehensive workplace health promotion is necessary. Companies may like the concept of workplace health as a philosophy, but some may become defensive when it comes to committing the time and resources needed to make it happen. Therefore, before you concentrate on the strategies you want to use to get buy-in, you may want to be familiar with the healthy workplace model you want to propose and the conditions for success (see Chapter 1) so that you know the specifics you are asking the key stakeholders in your workplace to commit to.

## What Strategies Can I Use To Get Buy-In?

*“There is nothing magic about this; it’s the people that make things happen. Getting resources and support from these people is our problem and challenge.”<sup>2</sup>*

As mentioned earlier, you need to get buy-in from all levels of the organization (management, human resources, employees, unions) for comprehensive workplace health promotion. The strategies to get buy-in can include:

- **Demonstrate the Need.** Create and continually build the business case for comprehensive workplace health promotion. **The business case** is the proposal you make to management, human resources, employees and unions to get commitment and participation to move forward with comprehensive workplace health promotion. The business case includes evidence that supports the benefits of doing comprehensive workplace health promotion and the costs of doing nothing.

To build the business case, understand the business goals of your company and demonstrate how comprehensive workplace health promotion can assist in meeting these goals in a language meaningful to them<sup>2, 3</sup>. Use aggregate medical and human resource data as well as information from the research literature and case studies to emphasize the benefits of moving forward<sup>2,4</sup>.

The following resources and websites can help you write your business case and lead

you to compelling evidence to include in your business case:



### Tools for Writing the Business Case

2. [The Case for Comprehensive Workplace Health Promotion: Making "Cents" of a Good Idea](http://www.thcu.ca/Workplace/documents/business%20case%20v102.pdf)  
(<http://www.thcu.ca/Workplace/documents/business%20case%20v102.pdf>)
3. [A Four Step Guide To Building the Business Case for a Healthy Workplace](http://www.nqi.ca/nqistore/product_details.aspx?ID=45) (The guide is available through the [Workplace Resource Library](#) or through [http://www.nqi.ca/nqistore/product\\_details.aspx?ID=45](http://www.nqi.ca/nqistore/product_details.aspx?ID=45).)
4. [Investing in Comprehensive Workplace Health Promotion](http://www.nqi.ca/nqistore/product_details.aspx?ID=46) (The guide is available through the [Workplace Resource Library](#) or through [http://www.nqi.ca/nqistore/product\\_details.aspx?ID=46](http://www.nqi.ca/nqistore/product_details.aspx?ID=46))
5. [A Discussion Paper on Workplace Health](http://www.ccih.ca/docs/CCIH-Discuss_Workplace.pdf)  
([http://www.ccih.ca/docs/CCIH-Discuss\\_Workplace.pdf](http://www.ccih.ca/docs/CCIH-Discuss_Workplace.pdf))
6. [Health Promotion Programs At Work: A Frivolous Cost or a Sound Investment?](http://www.conferenceboard.ca/documents.asp?rnext=461)  
(<http://www.conferenceboard.ca/documents.asp?rnext=461>)
7. [Top Resources for Making the Business Case](http://www.thcu.ca/Workplace/res)  
(<http://www.thcu.ca/Workplace/res>)
8. [Making the Case for Health Promotion: Ten Strategies for Selling Health Promotion to Senior Management](http://www.welcoa.org/freeresources/pdf/making_the_case.pdf)  
([http://www.welcoa.org/freeresources/pdf/making\\_the\\_case.pdf](http://www.welcoa.org/freeresources/pdf/making_the_case.pdf))

### Where to Find the Information You Need

#### Absenteeism

- ❑ [Absenteeism](http://www.hc-sc.gc.ca/ewh-semt/alt_formats/hecs-sesc/pdf/pubs/occup-travail/work-travail/absenteeism/absenteeism_e.pdf) ([http://www.hc-sc.gc.ca/ewh-semt/alt\\_formats/hecs-sesc/pdf/pubs/occup-travail/work-travail/absenteeism/absenteeism\\_e.pdf](http://www.hc-sc.gc.ca/ewh-semt/alt_formats/hecs-sesc/pdf/pubs/occup-travail/work-travail/absenteeism/absenteeism_e.pdf))
- ❑ [Work Absences](http://www.statcan.ca/Daily/English/020704/d020704h.htm) (<http://www.statcan.ca/Daily/English/020704/d020704h.htm>)

#### Aging Workforce

- ❑ [Aging Workforce](http://www.hrsdc.gc.ca/en/lp/spila/wlb/aw/01aging_workforce.shtml) ([http://www.hrsdc.gc.ca/en/lp/spila/wlb/aw/01aging\\_workforce.shtml](http://www.hrsdc.gc.ca/en/lp/spila/wlb/aw/01aging_workforce.shtml))

#### Productivity

- ❑ See 'Healthy Workplaces and Productivity: A Discussion Paper,' June 6, 2003, available at [www.cprn.org](http://www.cprn.org).

## Where to Find the Information You Need Cont'd

### Retention/Recruitment

- [Demographics and Destiny: Winning the War for Talent](http://www.watsonwyatt.com/research/resrender.asp?id=W-233&page=1)  
(<http://www.watsonwyatt.com/research/resrender.asp?id=W-233&page=1>)
- [HR Matters Executive Summary](http://www.hrmattershamilton.ca/reports/hrmattersexecsummary.pdf)  
(<http://www.hrmattershamilton.ca/reports/hrmattersexecsummary.pdf>)

### Stress & Mental Health

- [Why Mental Health In the Workplace Matters](http://www.mentalhealthworks.ca/facts/why_it_matters.asp)  
([http://www.mentalhealthworks.ca/facts/why\\_it\\_matters.asp](http://www.mentalhealthworks.ca/facts/why_it_matters.asp))
- [The Economic Burden of Mental Health Problems in Canada](http://www.phac-aspc.gc.ca/publicat/cdic-mcc/22-1/d_e.html)  
([http://www.phac-aspc.gc.ca/publicat/cdic-mcc/22-1/d\\_e.html](http://www.phac-aspc.gc.ca/publicat/cdic-mcc/22-1/d_e.html))
- Best Advice on Stress Risk Management in the Workplace  
[Part 1](http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/stress-part-1/index_e.html)  
([http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/stress-part-1/index\\_e.html](http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/stress-part-1/index_e.html))  
[Part 2](http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/stress-part-2/index_e.html)  
([http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/stress-part-2/index\\_e.html](http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/stress-part-2/index_e.html))
- [Building Capacity through Investing in Whole People doing Whole Jobs](http://www.nqi.ca/nqistore/product_details.aspx?ID=47)  
([http://www.nqi.ca/nqistore/product\\_details.aspx?ID=47](http://www.nqi.ca/nqistore/product_details.aspx?ID=47))
- [Fairness in Families, Schools, and Workplaces](http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/fairness-equite/index_e.html)  
([http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/fairness-equite/index\\_e.html](http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/fairness-equite/index_e.html))
- [Canadian Institute of Stress](http://www.stresscanada.org/)  
(<http://www.stresscanada.org/>)

### Work-Life Balance

- [Juggling Home and Work](http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/juggling_home_work/index_e.html)  
([http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/juggling\\_home\\_work/index\\_e.html](http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/juggling_home_work/index_e.html))
- [Enjoying Work: An Effective Strategy in the Struggle to Juggle?](http://www.statcan.ca/english/indepth/11-008/feature/star2001061000s2a02.pdf)  
(<http://www.statcan.ca/english/indepth/11-008/feature/star2001061000s2a02.pdf>)
- [Work-Life Balance](http://www.sdc.gc.ca/asp/gateway.asp?hr=en/lp/spila/wlb/01home.shtml&hs=wyi)  
(<http://www.sdc.gc.ca/asp/gateway.asp?hr=en/lp/spila/wlb/01home.shtml&hs=wyi>)
- See 'Work-Life Balance in the New Millennium: Where Are We? Where Do We Need to Go?', October 2001, available at [www.cprn.org](http://www.cprn.org).

## Useful Statistics

### Productivity

- Evidence indicates causal links between working conditions, interventions to create a healthier workplaces, employee health and workplace productivity. *Source: Lowe, G. (2003). Healthy Workplaces and Productivity: A Discussion Paper. Minister of Public Works and Government Services Canada.*
- According to a FGIworld study, 53% of CEOs and 52% of working Canadians agree that their workplaces are not as productive as they should be. The reason? Sixty six percent of CEOs and 71% of working Canadians attributed “stress, burn-out or other physical and mental health problems.” *Source: Productivity through Health: A FGIworld CEO Study on Health and Productivity in Canadian Industry.*
- Employees in good health are 20% more productive than those in poor health – this is comparable to a productivity reduction of one day per week. *Source: European Health and Productivity Management, May 2004. Volume 1, No. 4. Retrieved July 2005 from [http://www.vielife.com/our\\_company\\_pdf/e-HPMNewsletter4.pdf](http://www.vielife.com/our_company_pdf/e-HPMNewsletter4.pdf).*
- Burton et al. (1999) found that an employee’s productivity decreased as the number of health risks increased. *Source: Burton, W., Conti, D., Schultz, A., & Edington, D. (1999). The role of health risk factors and disease on worker productivity. JOEM, 41 (10), 863-877.*

### Absenteeism

- Absenteeism rates have increased from 7.4 to 8.5 days per year for each full-time worker. *Source: Statistics Canada (2002). Work Absences. The Daily, Thursday July 4, 2002. Retrieved November 11, 2002 from <http://www.statcan.ca/Daily/English/020704/d020704h.htm>.*
- According to Watson Wyatt, the average direct cost of employee absenteeism in Canada is \$3,550 per employee per year. Combined with indirect costs, employee absenteeism accounts for 17% of payroll. *Source: Watson Wyatt. (2000). Cost of employee absenteeism up, says Watson Wyatt study. Retrieved November 10, 2003 from <http://www.watsonwyatt.com/news/press.asp?ID=6980>.*
- The Canadian Policy Research Network estimates that work/life conflict absences cost Canadian employers about \$3 billion each year. *Source: Canadian Research Policy Network (2001). New Data Show Increasing Conflict Between Work and Rest of Life. Retrieved July 19, 2005 from <http://www.cprn.com/en/doc.cfm?doc=76>.*
- Employees who have three or more risk factors (i.e. they are physically inactive, they smoke, have higher alcohol consumption, and are overweight) are more likely to have 50 % more absences from work compared to employees who don’t have these risk factors. *Source: Shain, M., & Suurvali, H. (2001). Investing in Comprehensive Workplace Health Promotion. Centre for Addiction and Mental Health.*

## Useful Statistics Cont'd

### Presenteeism

- According to AON Consulting, presenteeism is when employees go to work but aren't as productive as usual because they are sick or injured. The Employers Health Coalition of Tampa, Fla. analyzed 17 diseases and found that lost productivity from presenteeism cost 7.5 times more than absenteeism. *Source: Employers Health Coalition of Tampa, Fla. (1999) as cited in Lowe, G. (2002). Here in body, absent in productivity. Retrieved from [www.hrreporter.com](http://www.hrreporter.com).*

### Injuries

- The average lost-time injury in Ontario costs \$59,000. WSIB costs account for nearly \$12,000 of that figure, and indirect costs make up the rest. A business operating on a 6 per cent profit margin would need nearly a million in sales to make up for the \$59,000 lost from a single injury. *Source: Workplace Safety & Insurance Board. Retrieved July 19, 2005 from <http://www.wsib.on.ca/wsib/wsibsite.nsf/public/BusinessResultsHealthSafety>.*

### Benefits Costs

- According to the Institute for Work & Health, the direct payroll financed claims costs for disability were about 11.1 Billion in Canada. *Source: Institute for Work & Health. Retrieved July 22, 2002 from [www.iwh.on.ca](http://www.iwh.on.ca).*
- Disability represents 4 to 12 % of payroll costs in Canada. *Source: Wilson, Joffe & Wilkerson, 2002 as cited at [www.mentalhealthworks.ca](http://www.mentalhealthworks.ca).*
- Employer sponsored benefits are expected to increase in the double-digits. *Source: Price, C. (2005). Benefits costs continue climbing at double-digit rates. BENEFITS CANADA. Retrieved July 20, 2005 from <http://www.benefitscanada.com/>.*
- Obese employees claimed 15% more in drugs than other employees (average of \$156 vs. an average of \$133) and 55% more for short term disability payments related to obesity compared to other claimants. Long term disability payments increase – obese claimants received approximately \$49, 100 per disability. This represents a cost difference of \$7,600 when compared to other claimants. *Source: Kogon, D., Gaisford, J., & Hutzul, T. (1999). Obesity's cost. BENEFITS CANADA. Retrieved September 2003 from [www.benefitscanada.com](http://www.benefitscanada.com).*

## Useful Statistics Cont'd

### Return-On-Investment (ROI)

- In a recent Canadian study, participants were able to reduce their cardiovascular risk factors by the end of a wellness program. ROI calculations for comprehensive workplace wellness programs ranged from \$1.64 to \$3.98 (for every dollar spent). *Source: Medavie Blue Cross. (2001). Workplace wellness programs benefit employers and employees alike—study shows. Retrieved October 28, 2002, from <http://www.medavie.bluecross.ca/wabccnew.nsf/c5635deb746d346b8425682300687407/5f3f0d72b1a7e0fd84256b0400667026?OpenDocument>.*

Some examples of Canadian companies that have benefited from investing in a healthy workplace include:

- BC Hydro has an estimated ROI of \$3 for every dollar spent on employee health each year. *Source: Davie, S. (2000). Making the business case for wellness. BENEFITS CANADA. Retrieved October 28, 2002 from [www.benefitscanada.com](http://www.benefitscanada.com).*
- DaimlerChrysler saves over \$7 million in health care costs each year through their wellness program. *Source: Corporate Leadership Council. (2002). ROI of Wellness Programs.*
- At Telus BC in Burnaby, absenteeism in fitness members is 28% less than the corporate average. *Source: McKeown, G. (2002). Healthy Workplace: A Sound Business Strategy and a Good Investment: A Four Step Guide to Building the Business Case for a Healthy Workplace. As cited in Canadian Council on Integrated Healthcare. A Discussion Paper on Workplace Health. Retrieved from <http://www.ccih.ca/docs/CCIH-ADiscussionPaperonWorkplaceHealthFinal.pdf>.*
- Management at MDS Nordion confirms that their workplace wellness programs have boosted productivity and employee satisfaction. *Source: Health Canada. Business Case Study of the Month: The MDS Nordion Story. Retrieved October 24, 2002 from [http://www.phac-aspc.gc.ca/pau-uap/fitness/work/case\\_studies\\_e.html](http://www.phac-aspc.gc.ca/pau-uap/fitness/work/case_studies_e.html)*
- The hours lost due to short and long term disability have decreased by 42% since 1999 at Vancouver International Airport. The safety manager attributes this reduction to their wellness program. *Source: Lochhead, C. (2002). Case Study: Vancouver International Airport Authority. The Canadian Labour and Business Centre. Retrieved from <http://www.clbc.ca/files/CaseStudies/vancouverairport.pdf>.*
- American Express Canada Markham, ON facility notes that employee turnover has significantly reduced. In 1998 the attrition rate was 40.31%. By 2000, the attrition rate was 22.99%. *Source: DiGiacomo (2002). Case Study: Healthy Workplace Programs at American Express Canada. The Canadian Labour and Business Centre. Retrieved from [http://www.clbc.ca/files/CaseStudies/CNAC2002\\_e.pdf](http://www.clbc.ca/files/CaseStudies/CNAC2002_e.pdf).*
- Employees at Pazmac Enterprises report their participation in workout programs through work made them feel healthier and more alert on the job. *Source: Lochhead, C. (2002). Case Study: Vancouver International Airport Authority. The Canadian Labour and Business Centre. Retrieved from <http://www.clbc.ca/files/CaseStudies/pazmac.pdf>.*

Other strategies that can be used to facilitate buy-in include:

- ❑ **Establish Relationships.** Build rapport with management and others who influence the health of employees in your workplace so that you can understand what values/benefits are important to them<sup>2</sup>.
- ❑ **Communicate.** Keep management informed of how comprehensive workplace health promotion can be a solution to challenges in business<sup>5</sup>. Periodically circulate articles on pertinent issues your company is facing, case studies, and program evaluation results, with the key findings and recommendations highlighted<sup>2</sup>.
- ❑ **Get Outside Assistance.** Consider bringing in a speaker for assistance with selling the concept of comprehensive workplace health promotion. You may want to hire a consultant or perhaps ask a senior executive from another company that is recognized for their business success and known for their efforts to create a healthy work environment to speak to management. Another option is to visit a healthy workplace. Having a tour of their facility to experience the change in culture may influence management to make changes in their own work environment.
- ❑ **Involve the Key Players.** If your workplace is unionized, you will want to involve them as early as possible in the process. Having the support of the Joint Health & Safety Committee or Occupational Health Nurse can also help convince management that comprehensive workplace health promotion is something worth pursuing.



### Where to Look For More Ideas on How to Get Buy-In

1. [Capturing Senior Level Support](http://www.welcoa.org/wellworkplace/index.php?cat=2&page=7)  
(<http://www.welcoa.org/wellworkplace/index.php?cat=2&page=7>)
2. Cialdini, R. (1993). [Influence: The psychology of persuasion](#). (To reserve a copy from the Hamilton library, visit <http://www.hpl.ca/>.)
3. Ziglar, Zig. (1991). [Selling 101](#). (To reserve a copy from the Hamilton library, visit <http://www.hpl.ca/>.)
4. Ziglar, Zig. (1984). [Secrets on Closing the Sale](#). (To reserve a copy from the Hamilton library, visit <http://www.hpl.ca/>.)
5. Chapman, L. (1997). Securing support from top management. *The Art of Health Promotion*. Vol. 1, No. 2, pp.1-8.
6. Network with others. Their experiences may be helpful.
7. The healthy workplace model you choose may have useful suggestions.

## Where Is Your Workplace?

The way you use these strategies may vary depending on where your workplace is on the continuum of involvement in workplace health.

According to a Conference Board of Canada Report, most Canadian employers are involved in workplace health issues to some degree<sup>6</sup>. The report outlines four levels of employer involvement:

### A Continuum of Involvement<sup>7</sup>

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**Compliers**

**Tinkerers**

**Integrators**

**Community leaders**

Using the continuum of involvement framework outlined in the Conference Board of Canada Report, take a moment to assess where your workplace is on the continuum<sup>6</sup>. Is your workplace a:

- Complier** (engaged only or primarily in activities that are required through legislation e.g. occupational health and safety)<sup>6</sup>
- Tinkerer** ("tinker" with workplace health and wellness programs, introducing programs aimed at the health of their workers or making adjustments in the types of programs and policies they have in place. These programs are usually aimed at the early detection or minimization of illness or injury once it has developed)<sup>6</sup>
- Integrator** (take a more proactive approach by seeking to address the physical, psychosocial and individual factors affecting health simultaneously. They have mechanisms in place to bring together key individuals from within and outside the organization to address health issues. And they entrench the concept of employee and organizational health is part of their vision, mission, and values statements)<sup>6</sup>
- Community Leader** (programs also address the linkages between the various determinants of worker health and look outwards to the impact on their communities. They seek to manage work in ways that broadly promote health)<sup>6</sup>

If your response was **Complier**, then your workplace is probably not thinking about comprehensive workplace health promotion. In fact, the key stakeholders in your workplace may not be aware of what it is. In this context, you will need to provide some education<sup>8</sup> and communicate the value comprehensive workplace health promotion could add to your company. To do this, you will need to persuade management that there are problems that require fixing<sup>26,28</sup>. One of the challenging tasks you face is convincing them of their responsibility as an employer to act. Part of your approach should include collecting organizational data such as absenteeism, disability, turnover, cost of benefits, and employee interest<sup>4</sup>. Find out what management's key issues are and ensure you are addressing them in your business case<sup>2,3</sup>. You can then pitch comprehensive workplace health promotion as the solution. If you have already tried this

approach with no success, it is important to keep healthy workplace on the agenda even though they are not ready<sup>2</sup>. Keep the dialogue open to raise awareness and build rapport with the decision-makers in your workplace<sup>2</sup>.

If your response was **Tinkerer**, it is likely that your workplace tends to be more reactive than proactive when it comes to health. Your workplace may understand the importance of personal health practices and occupational health and safety, but may need some education specific to the psychosocial environment. You may want the business case to emphasize the potential for cost avoidance through being more proactive using comprehensive workplace health promotion. If your workplace is not ready to take a comprehensive approach, communicate the need to management on an ongoing basis<sup>2</sup>.

If you classified your workplace as an **Integrator** or **Community Leader** the needs for your workplace are very different from the Complier and the Tinkerer. You may need to solicit ongoing support to justify comprehensive workplace health promotion to those who question how it adds value to your company or to get buy-in to develop or adopt cutting edge programs to maintain a healthy workplace. Try to get senior management visible in the community<sup>2</sup>. This gives them an incentive to continue comprehensive workplace health promotion if they are seen as a local success story and example to other workplaces. Challenge those who question the value of comprehensive workplace health promotion to “test it out”<sup>2</sup>.

Regardless of where your workplace is on the continuum, you need to be knowledgeable when presenting your business case or in discussions with those you are trying to persuade:

- ❑ **Define** comprehensive workplace health promotion. Be clear about what you are proposing and be consistent. Emphasize that this approach is intended to build on strengths and identify opportunities for improvement. Also, this framework encourages workplaces to communicate and collaborate internally to eliminate redundancies and increase effectiveness of initiatives.
- ❑ **What's In It For Them.** The answer to this will depend on who you are targeting. Key targets within your workplace include management, human resources, unions, and employees. Cost avoidance, retention and recruitment of staff, and increased job satisfaction are examples of potential benefits of comprehensive workplace health promotion. You will need to figure out what will make your target sit up and take notice<sup>2</sup>.
- ❑ **Resources Needed.** Management will want to know what is needed to build a healthy workplace. Your list of resources should include staff time, a budget, management commitment and support to respond to identified needs as well as their participation in initiatives<sup>2</sup>.
  - ❑ You may want to research community partners (e.g. City of Hamilton, Public Health Services) that will offer in-kind contributions to the development of comprehensive workplace health promotion in your workplace.
  - ❑ If you want to access the expertise of a consultant or facilitator, you will want to demonstrate how they add value to the process.

- ❑ **Benefits of comprehensive workplace health promotion** (see Chapter 1). Your workplace will probably want to know who else is doing comprehensive workplace health promotion and if they have had success. Therefore, you may want include case studies of workplaces that have evaluated their initiatives<sup>2,4</sup>.
- ❑ **Timeframe.** Some companies have unrealistic expectations regarding outcomes for comprehensive workplace health promotion. Healthy workplaces do not happen overnight<sup>2</sup>. You may need to point out that there may be an increase in costs in the short term, but over the long term comprehensive workplace health promotion will help your workplace avoid costs.

### **Common Challenges to Comprehensive Workplace Health Promotion**

To help you respond to those who question the value of comprehensive workplace health promotion, counter-arguments to common challenges are outlined below:

#### **Employees are responsible for their own health**

Responsibility is not the issue. Employers still pay for the cost of unhealthy employees through higher insurance premiums, absenteeism, and decreased productivity. When employee well-being is overlooked, there is no way that high performance can be sustained<sup>9</sup>.

#### **Employees don't want to change**

On the contrary, when surveyed, 69% of Canadians aged 12 or older intended to change their health behaviours<sup>10</sup>. However, barriers such as lack of time, knowledge and facilities inhibit their ability to make or sustain healthy behaviours<sup>11</sup>. Offering programs and activities at or through work that are targeted to employee needs and supported by management can help decrease these barriers.

#### **It costs too much**

Costs can be reasonable by partnering with local health organizations, fundraising, or cost sharing the price of programs with employees. There may be services available that your workplace is already paying for but hasn't accessed such as presentations from your Employee Assistance Program. The important point to remember is that employers will still have to pay the price for unhealthy employees even if they do nothing.

#### **We don't have a health or wellness coordinator in our company**

Moving forward with comprehensive workplace health promotion doesn't require a health or wellness coordinator position. Management, human resource and occupational health and safety professionals can champion the health and wellness piece with assistance from interested volunteers in the organization. Existing healthy workplace models and other resources can assist them in moving forward. When more support is necessary, the expertise of a consultant can be utilized.

### **We already have a health and wellness program**

If you think having benefits and flex-time are enough, think again. Health and wellness needs to encompass the social environment and personal resources-- not just health practices and the physical environment. Health and wellness also need to be integrated with the vision, mission and values of the organization<sup>Error! Bookmark not defined.11,11</sup>.

Taking a comprehensive approach increases your chances of success.

### **Show me the ROI**

Unrealistic expectations concerning financial return-on-investment are common. Cost containment or reductions evolve slowly over a period time-- perhaps five or ten years<sup>3</sup>. However, benefits such as employee participation and satisfaction are generally realized in the short-term and provide the foundation for financial return-on-investment down the road.

## ***Evaluate Your Efforts***

After each "buy-in" attempt, you will want to assess how you did. Did you get staff time to proceed? Were any funds allocated? Did an advocate from senior management emerge to champion the cause? If you didn't get the support you were looking for, keep trying. Think of your efforts as paving the road to commitment. If you obtained enough support to move forward, congratulations! The following chapter can help guide you through the next steps.

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- <sup>1</sup> Health Canada as cited in Path to Wellness Newsletter (July 2003).
- <sup>2</sup> Chapman, L. (Ed.). (1997). Securing support from top management. The Art of Health Promotion. Vol. 1, No. 2. 1-8.
- <sup>3</sup> Sloan R., Gruman J., & Allegrante, J. Investing in Employee Health: A Guide to Effective Health Promotion in the Workplace. San Francisco, CA (USA): Jossey-Bass Publishers, 1987.
- <sup>4</sup> Healthy Workplace Week.ca. (2003). Business Case. Retrieved June 6, 2003 from [http://www.nqi.ca/chww/strat2\\_what\\_bc.htm](http://www.nqi.ca/chww/strat2_what_bc.htm).
- <sup>5</sup> Newkirk, W., & Jones, L. Sales strategies. In: Newkirk EW, Jones LD, ed. Occupational Health Services: A Guide to Program Planning and Management. Place: American Hospital Publishing, Inc., 1989: 181-199.
- <sup>6</sup> Bachmann, K. (2000). More than just hard hats and safety boots: Creating healthier work environments. The Conference Board of Canada.
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