



How familiar are you with your employer's Worksite Well-Being program?



| Interested in topic area | 2 |
|---|----|
| Enjoy participating in worksite activities | 1 |
| Received encouragement from management | 2 |
| My friends/coworkers were participating | 1 |
| My family encouraged me to participate | 0 |
| I wanted to make a healthy change | 3 |
| Incentives provided | 15 |
| Saw posters/fliers/table tents | 0 |
| Participated as part of a team competition | 3 |
| Recognized need for improvement in health | 14 |
| Felt pressure from management or colleagues | 0 |

| Fear of failure |
|----------------------------|
| Lack of time |
| Lack of energy |
| Lack of interest |
| Lack of privacy |
| No child care |
| Work schedule |
| Cost |
| Lack of management support |
| Other |

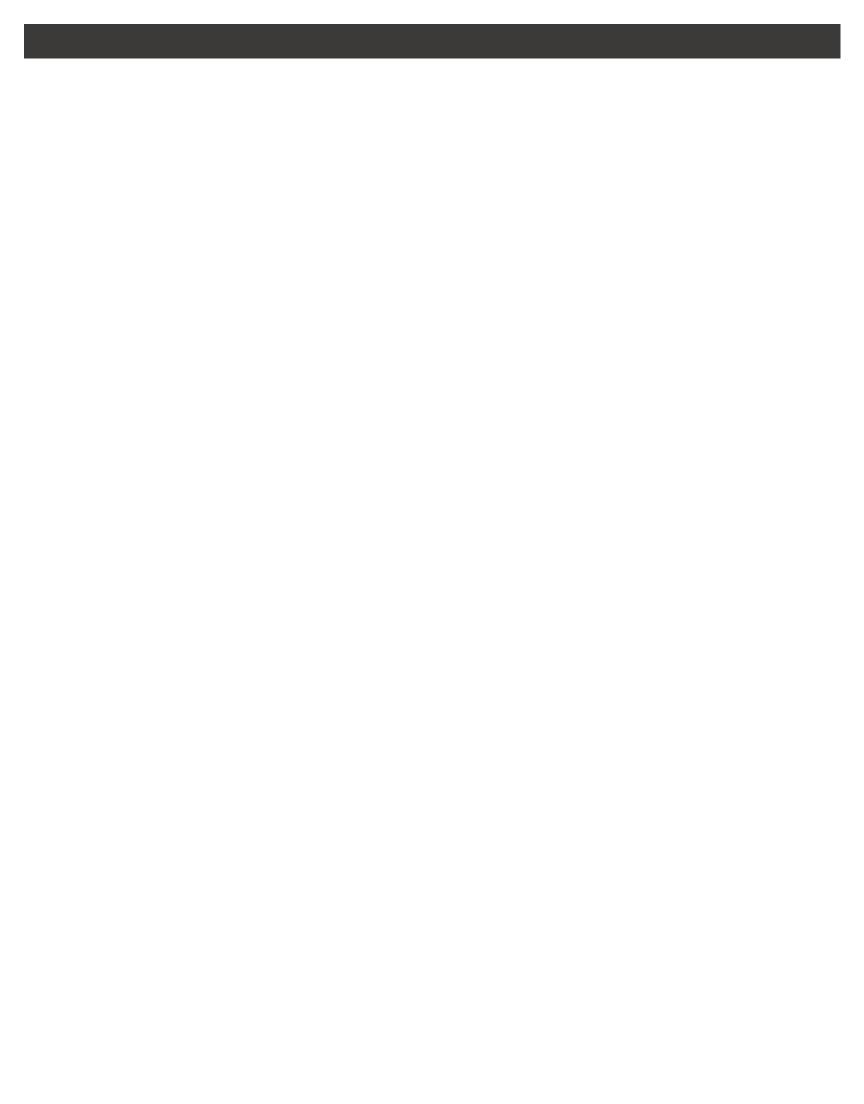


Section 1: Demographic Information and Participation

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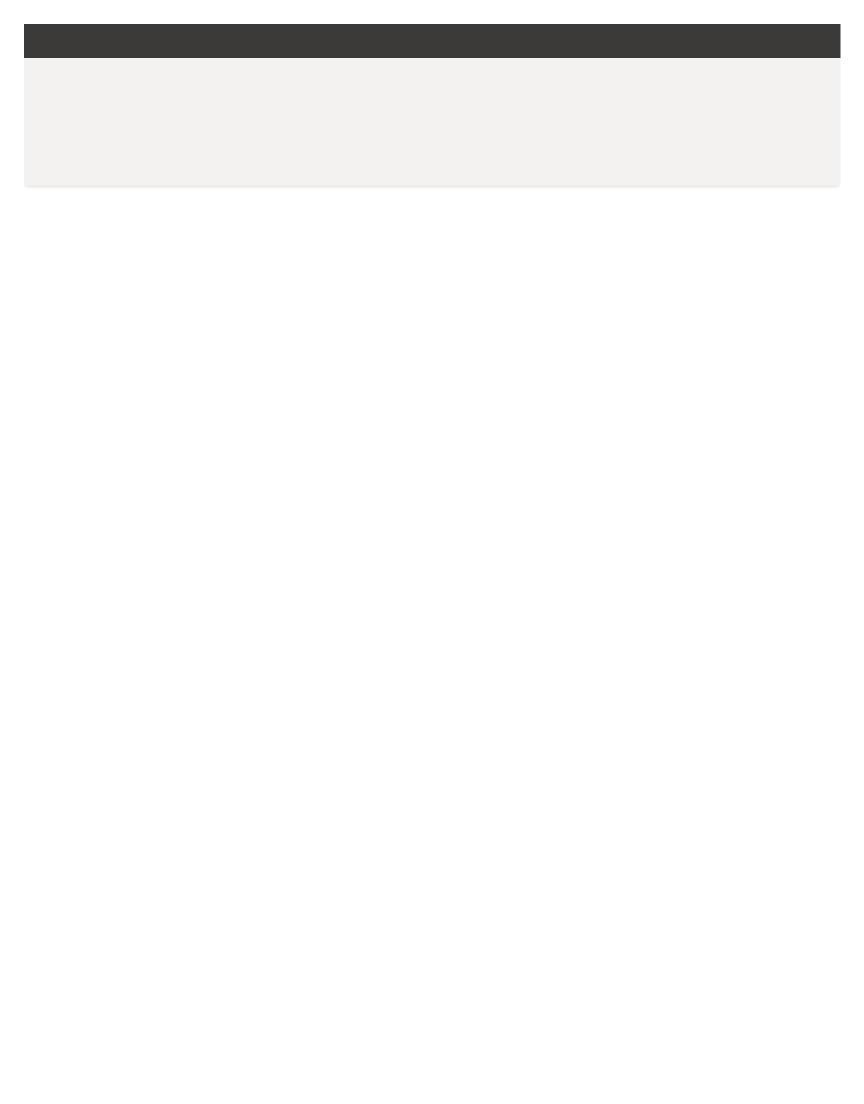
Section 2: Program Impact and Satisfaction

| What do you like the most about the Worksite Well-Being program? | | | | | |
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Section 2: Program Impact and Satisfaction

| What do you like the most about the Worksite Well-Being program? | | | | | |
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Section 2: Program Impact and Satisfaction