POTTSTOWN AREA
Health & Wellness
FOUNDATION
Promoting Healthy Living

Pottstown Area Health & Wellness Foundation – 2008 Project Summary and Segmentation Update
April 2017



nmi

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NMI Background and Capabilities

NMI provides global expertise in health & sustainability

- Since 1990 NMI has tracked health and sustainability on a global basis, examining the intersection of these two dynamic market drivers.
- Our work explores the changes in consumer attitudes and behaviors across diet, nutrition, and health as well as perspectives on corporations and social and environmental issues.
- This extensive knowledge is the basis of all NMI consulting, innovation, and business development.





Consultative insight and services fueled by a wealth of global data

Consulting & Custom Research Since 1990



- Brand Strategy/Positioning/Expansion
- Concept Development/Validation
- Innovation, Ideation and Prioritization
- Target Identification & Strategies
- Market Assessment and Industry/Sector Sizing
- Full Qualitative and Quantitative Research Services

Global Trended Data Since 1999

- Custom Data Analysis
- Subscriptions
- Published Reports
- Custom Segmentations

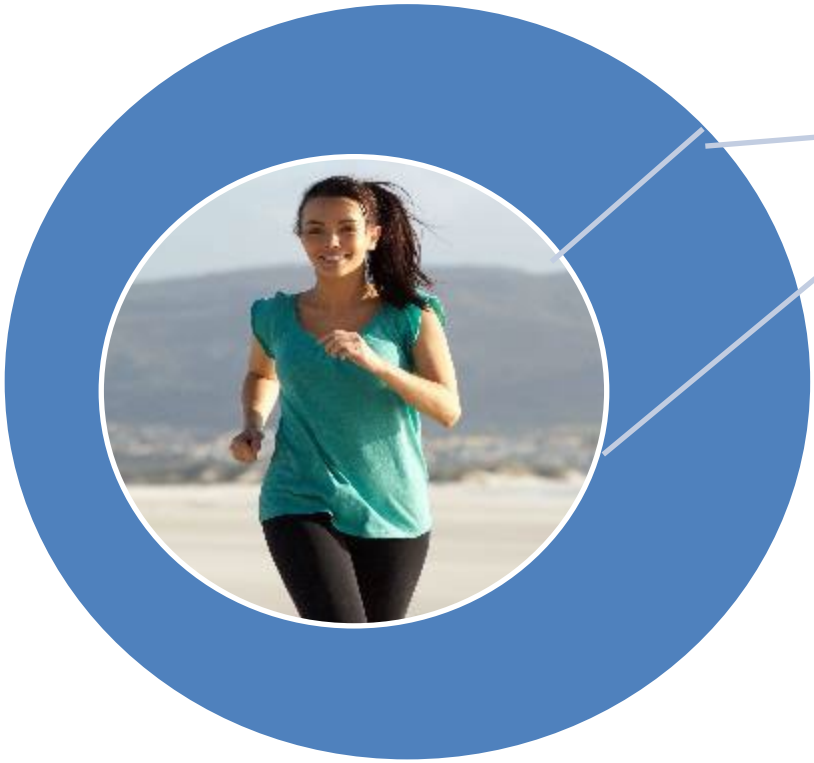
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A diversified portfolio of clients and projects



This is a partial list as many clients request to remain anonymous

NMI explores the community health & wellness mindset to identify strategies for change



Consumer Health & Wellness Experience

Opportunities for Education:

- **Lifestyle Activities**
- **Consumer Values**
- **Personal Health Responsibility**
- **Healthy Aging Drivers**
- **Lifestyle Factors (e.g., stress)**
- **Weight Management**
- **Body, Mind & Spirit Integration**
- **Socialization**
- **Caregiving**
- **Transparency**
- **Others...**

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NMI's primary qualitative and quantitative expertise is all-inclusive

Qualitative Research

- Complete project management from initial design through recruitment, moderation and report
- Global capabilities
- Experienced in group and individual interviews
  - Creative focus groups
  - Ethnographic studies
  - Online communities
- Consumer, B2B, HCP based

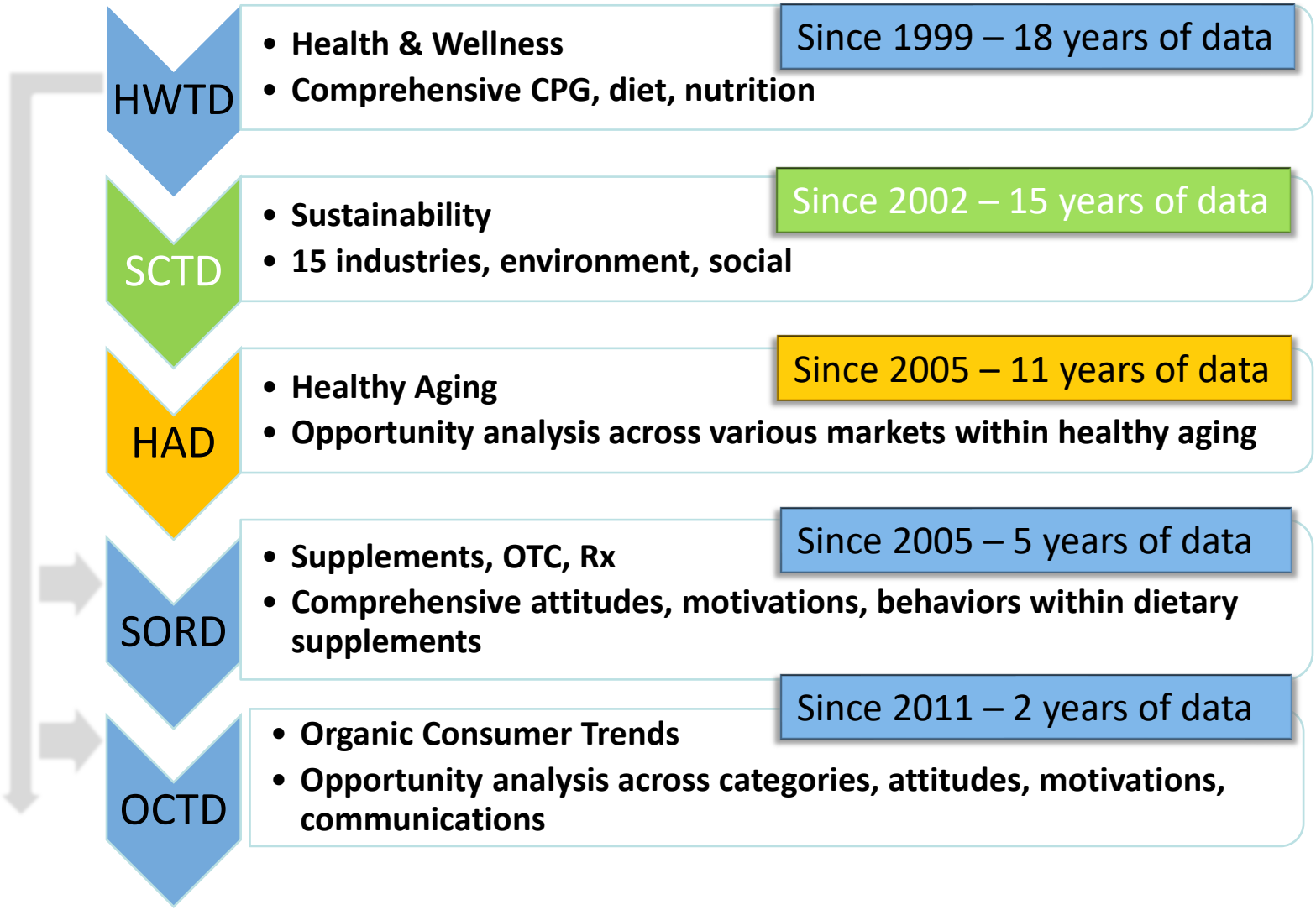




Quantitative Research

- Complete management - design, questionnaire writing, field management, data output, analysis, and reporting
- Multiple Methodologies
  - Global custom quantitative
  - Screener studies (80,000 U.S. adults)
  - Annual multi-sponsor projects
- Consumer, B2B, HCP based
- Advanced statistical designs

NMI consumer databases: snapshot summary



19 years of trends • 1,000,000+ consumer interviews • 30+ countries

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We deliver unique value to drive client growth

Health & Wellness and Innovation Experts:

- **Brand and Product Development/Growth Strategies**
- **Intersection of Personal Health/Planetary Health**
- **Healthcare Policy and Program Development**

Experience across Multiple Category/Market Sectors:

- **Ingredients to Brands, Retail, Government, Policy Groups, plus…**
- **CPG, Durables and Services**
- **Trended Consumer Segmentation and Custom Segmentations**
- **Demographic Expertise across All Generations**



Link The Entire Brand/Product/Program Lifecycle:

- **Identifying Emerging and Unmet Needs, Growth Opportunities, Marketing, Messaging, Consumer Insights, In-home Use, Tracking, CRM Assessment**

Innovation Strategists:

- **Theory, Ideation, Application, Results**
- **Decision Making and Opportunity Platforms**

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Overview of 2008
Study Objectives & Methodology

Pottstown Area Health & Wellness Foundation Research Project Objectives

- PAHWF engaged (NMI) in 2008 to provide strategic consulting in support of the **continued mission to enhance the health and wellness of Pottstown Area residents.**

- Primary Objective: **gain a foundational understanding** of the needs, values and behaviors of Pottstown area residents' health and wellness.

- Specifically evaluate:
  - Health attitudes and behaviors via NMI's Health and Wellness Trends Database
  - Current health conditions and needs; update the 2003 health assessment
  - Perceptions of the community, services, access
  - Where and how information about health and community services is received
  - Special or unmet needs, i.e., within Hispanic community
  - Awareness and recognition of PAHWF programs and initiatives
  - Changes that occurred within the community since the 2003 survey
  - Offer insight on a school district level to make micro/macro decisions

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Project Methodology



Phase 1: Qualitative

- 25 one-hour, in-depth interviews with
  - 21 English-speaking/4 Spanish-speaking
- Vast mix of geography, socio-economics, education and NMI's health and wellness segmentation
- Each respondent used a disposable camera to record their lives and views on health and wellness "through their own eyes"

Phase 2: Quantitative

- 30-minute telephone survey of 1,402 randomly selected Pottstown Area residents; September 2008
- Survey document modified from original 2003 Health Assessment
- Interviews conducted in PAHWF-defined geography across the seven school districts
- Data weighted to reflect balanced demographics of the Tri-County (Berks, Chester, Montgomery)

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NMI Segmentation vis a vis The Pottstown Community

NMI's Health & Wellness consumer segmentation

Five distinct US GP segments, enabling optimized targeted messaging

(% general population in NMI defined consumer segments; 2016)



WELL BEINGS®: 25%

LEADERS – Health Proactive

Market leaders and influencers, driven to health for prevention, utilize all means, including food, supplements, and other products and services, including alternative healthcare.



FOOD ACTIVES®: 14%

Mainstream healthy

Dedicated to health through inherently healthy eating and managing weight.

Driven by a desire for balance of exercise, nutrition, and weight management



MAGIC BULLETS®: 21%

Conveniently Healthy

Lower commitment to healthy lifestyle

High belief in and usage of supplements for health, and less concern with food. Don't like to cook or exercise

Weight managers; high level of health issues.



FENCE SITTERS®: 23%

Strivers

Young families and singles in relatively good health.

Attitudinally idealistic strivers, whose behaviors often contradict their attitudes.



EAT, DRINK & BE MERRYS®: 17%

Least health active

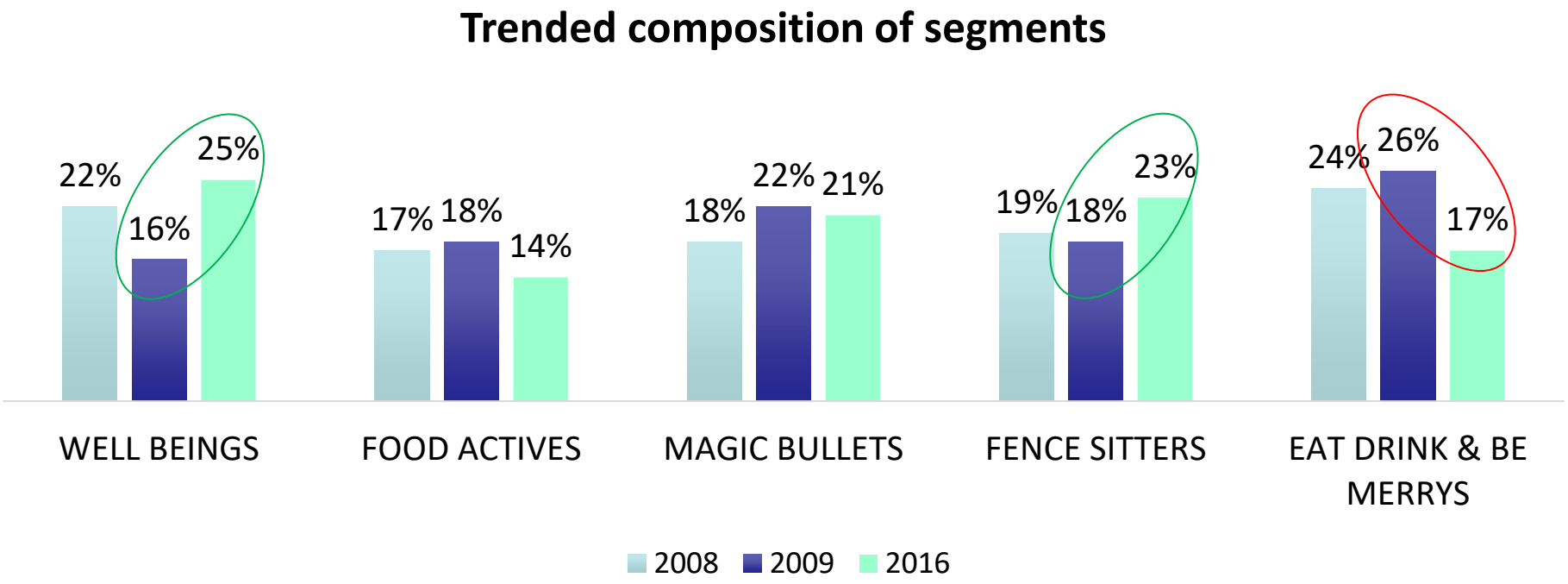
Least concerned about health and healthy eating; least knowledgeable about health-related benefits.

Lack concern for healthy eating and health issues but just initiating easy health ideas

Source: NMI's 2016 *Health & Wellness Trends Database*™

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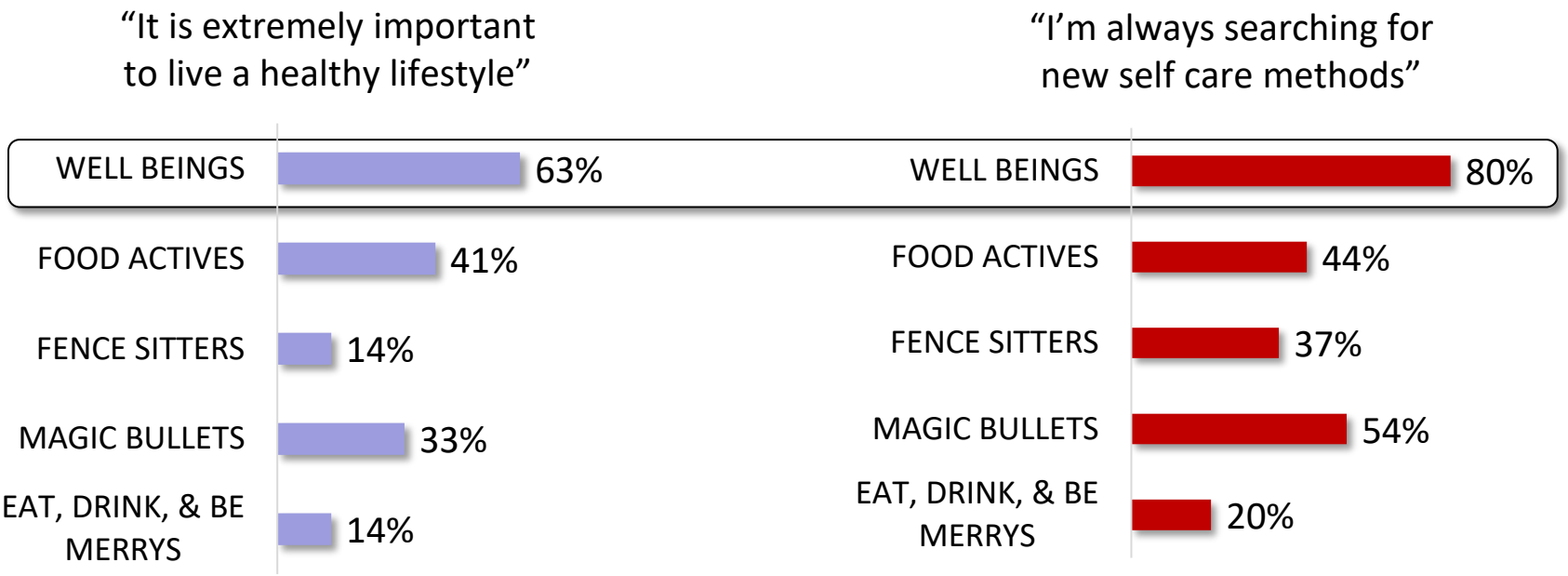
The growth of WELL BEINGS is a strong indicator of the impact health and wellness has on the population



While the last PAHWC study was conducted in 2008 and used segmentation data from that year, in 2009 NMI undertook a market adjustment analysis of the health and wellness segmentation. This was done to reflect the many dynamic forces of change over the prior two years, including the recession and qualitative observations of segment groups indicating new forces were at play and that segments were shifting. Market adjustments are normal in tracking segments and are used to stay current and account for dynamic cultural changes.

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WELL BEINGS are the most health proactive segment; as early adopters and influencers they can be used as program champions for PAHWF





- "I'm usually one of the first in my family or circle of friends to try a new product"
- Used organic in past year
- "I feel more personally responsible for protecting the environment than I have in the past"
- "I'm always searching for new self-care methods to prolong my health and vitality"

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WELL BEINGS At A Glance

- **Lifestyle Characteristics**
  - Take personal responsibility for self and environment
  - High income and education
  - Avid exercisers



- **Health Concerns/Beliefs**
  - Worry about *preventing* health conditions
  - High interest in eating healthy
  - Most likely to make connection between personal and planetary health
- **Health-Related**
  - Health focused attitude ensures they eat right
  - High use of healthy food
  - Biggest organic buyers; steer clear of products labeled GMO
  - Preference for local, natural, and organic foods
  - High use of alternative healthcare
  - Vegetarian-oriented
- **Branding Influences**
  - Early adopters and influencers
  - Least likely to base purchase decisions on price
  - Select highest quality brand, somewhat brand image conscious
  - Likely to shop natural channel, including Trader Joe's and Whole Foods Market
  - Patronize companies that support worthwhile causes

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FOOD ACTIVES - oriented toward inherently healthy products; take responsibility via weight maintenance, exercise and naturally nutritious foods

	"Taking personal responsibility for one's health is the best way to stay healthy"	"Maintaining proper weight is extremely important in how I maintain a healthy lifestyle"	"Exercise programs are extremely important in how I maintain a healthy lifestyle"
FOOD ACTIVES	**64%**	**48%**	**44%**
MAGIC BULLETS	51%	13%	3%
FENCE SITTERS	56%	42%	38%
EAT, DRINK & BE MERRYS	41%	15%	7%



- "I think products labeled as 'green or eco-friendly' are not really any better for the environment than conventional products"
- Exercise 5 or more days/week
- "Taking vitamins and minerals is extremely/very important in how I maintain a healthy balanced lifestyle"
- "Using environmentally-friendly products is extremely/very important in how I maintain a healthy balanced lifestyle" (index LOW)

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FOOD ACTIVES At A Glance

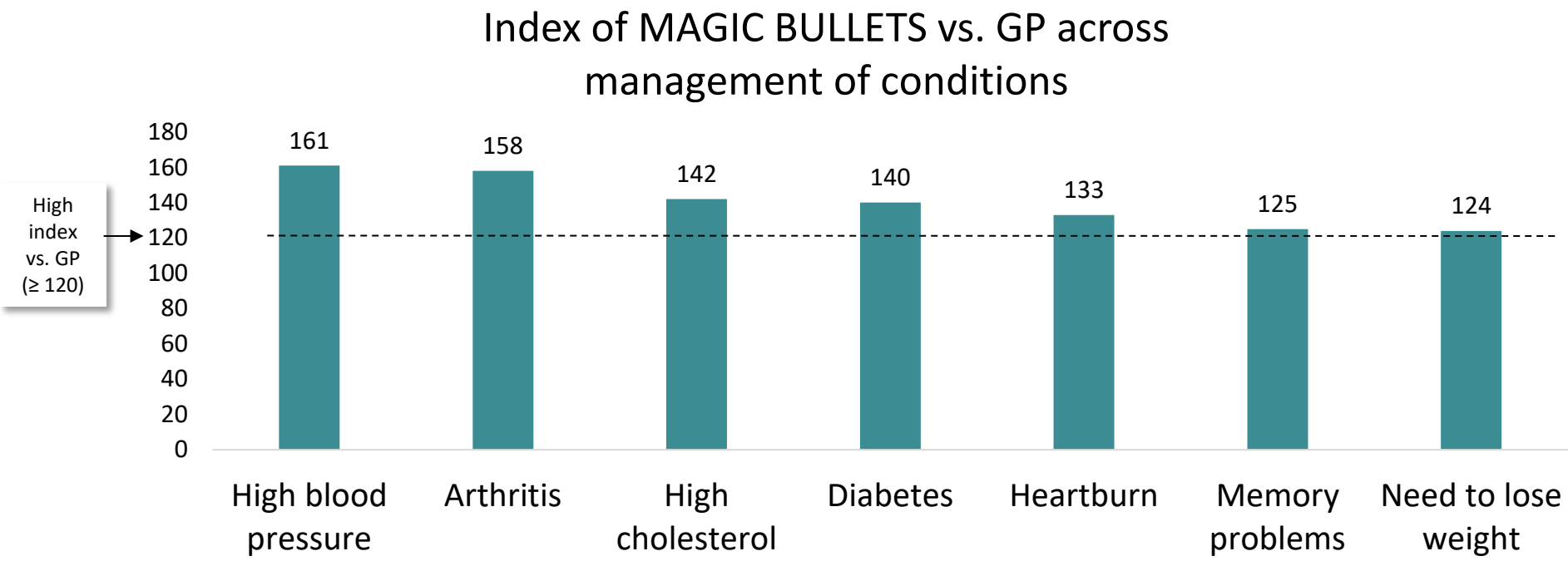
- **Lifestyle Characteristics**
  - Seek balanced lives (diet, exercise, spiritual)
  - Higher education, above average income
  - Manage weight, high heart managers
  - High exercisers



- **Health Concerns/Beliefs**
  - Daily vitamin/mineral takers
  - Very high household penetration of VMHS
  - Worry about preventing health conditions
- **Health-Related**
  - Focus on healthy eating; eat heart smart
  - Believe maintaining proper weight is key to healthful living
  - Count calories , eat low-fat diet, use meal replacement products , and use artificial sweeteners
  - Low use of organic, low use of natural foods (not convinced of benefits); don't worry about GMOs
  - Average use of functional/fortified foods and beverages
  - Below average use of alternative healthcare
- **Branding Influences**
  - Not brand loyal; choose store brands and view them as equivalent/better than national brands
  - Price sensitive: shop on price
  - Low environmental values
  - Not very influenced by environmentally friendly companies
  - Tend to be later adopters

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MAGIC BULLETS are high condition managers - as name suggests, they are searching for a "magic bullet" to help manage health





- "Taking a vitamin/mineral supplement every day is important to my overall health"
- "I do not exercise or work out at all"
- Defined as obese
- Significantly more likely than all other segments to be managing mobility issues, arthritis, joint pain, high blood pressure, heart disease, high cholesterol, blood sugar, need to lose weight for health

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MAGIC BULLETS At A Glance

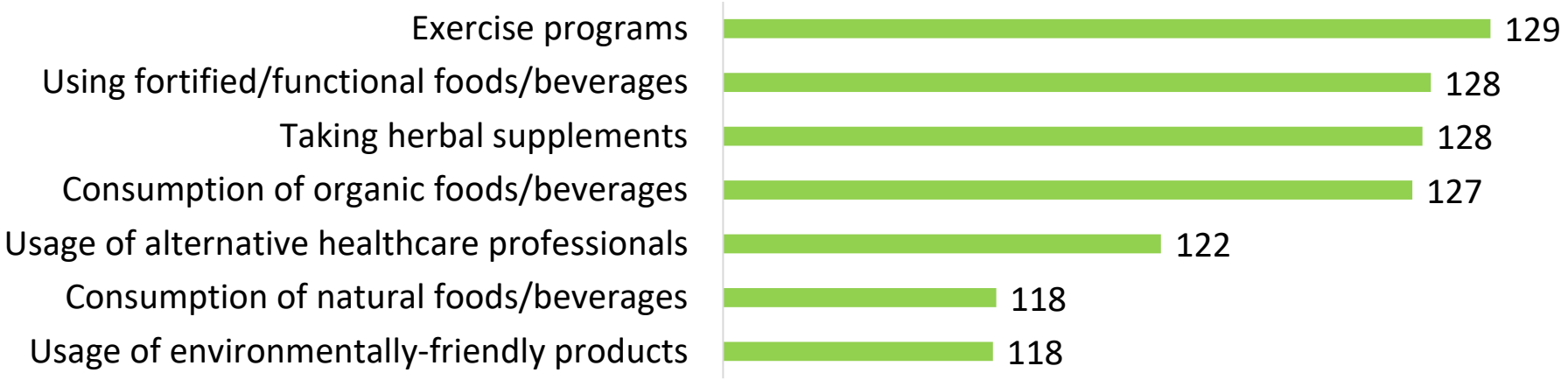
- **Lifestyle Characteristics**
  - Daily VM takers
  - High weight managers (appearance and health)
  - Most likely to be sedentary (least likely to exercise daily)
  - Of those who do exercise, the majority exercise only 1 day or less
  - Average support of environmental concerns as long as no effort required
  - Over-index among Boomers/Seniors, low education levels, low income
  - Smallest households, high BMI
- **Health Concerns/Beliefs**
  - High health
- **Health-Related**
  - Roughly average organic and natural food use
  - Know they should eat healthier, but don't
  - High use of healthcare overall
  - High use of vitamins/minerals, supplements
- **Branding Influences**
  - Somewhat below average patronage of natural channel outlets
  - Somewhat below average concern for quality, average loyalty
  - Almost two-thirds are influenced by coupons
  - Slower to try new products



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FENCE SITTERS are strivers and oftentimes exhibit contradiction between their attitudes and behaviors

Index of FENCE SITTERS vs. GP indicating the following are extremely/very important in how they maintain a healthy, balanced lifestyle





HOWEVER, they….

- Go on occasional health kicks but without clear goals
- Typically choose foods based on whether they make them feel good emotionally rather than the nutritional content
- Believe healthy foods are too expensive to eat regularly
- Are currently managing anxiety

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FENCE SITTERS At A Glance

- **Lifestyle Characteristics**
  - Younger segment — largest household size, male skew
  - Go on occasional health kicks, but without clear goals
  - Slightly higher income skew and education
  - Highest percentage of children under 18
  - Skew Hispanic/African-American/Black



- **Health Concerns/Beliefs**
  - Higher use of alternative healthcare and homeopathic medicine
  - Lower management of, and concern about, health issues
  - Stress managers
- **Health-Related**
  - Use most healthy food categories
  - Partake in vegetarian foods
  - Above average use of artificial sweeteners
  - Slightly above average use of supplements
- **Branding Influences**
  - Highest reported brand loyalty, early adopters, above average influencers
  - Consider price; concerned about cost of healthier options
  - Eco-sensitive
  - Almost two-thirds shop Natural Channel

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Although Eat, Drink & Be Merrys are less involved in a healthy lifestyle, some healthy behaviors and attitudes are growing

Eating healthy is a vital part of my life

2009 → 33%

2016 → 39%

Taking personal responsibility for one's health is the best way to stay healthy

2009 → 30%

2016 → 41%

Taste is more important than health

2009 → 33%

2016 → 45%



- Least health active
- Unconcerned about prevention
- Choose taste over health
- Least likely to be the primary grocery shopper

EAT, DRINK & BE MERRYS At A Glance

- **Lifestyle Characteristics**
  - Skew younger , less educated, less affluent
  - Less oriented toward exercise
  - More than half know they should eat healthier but don't



- **Health Concerns/Beliefs**
  - Lowest use of alternative healthcare professionals
  - Low likelihood to manage weight while a third are obese
  - Lower concerns over most health issues

- **Health-Related Food Usage**
  - Less likely to use organic, natural, functional, and fortified foods
  - Least likely to read labels
  - Won't give up taste for health

- **Branding Influences**
  - Price sensitive, not brand loyal
  - Less likely to associate personal values with brand choice or eco-friendliness
  - Least likely to be primary grocery shopper

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Pottstown area's 2008 segmentation was comparable to the 2008 general population

(% 2008 Pottstown population in NMI defined consumer segments)



WELL BEINGS®: 21%

LEADERS – Health Proactive

Market leaders and influencers, driven to health for prevention, utilize all means, including food, supplements, and other products and services, including alternative healthcare.



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Source: NMI's 2016 *Health & Wellness Trends Database*™

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PAC demonstrated a polarization along the health continuum



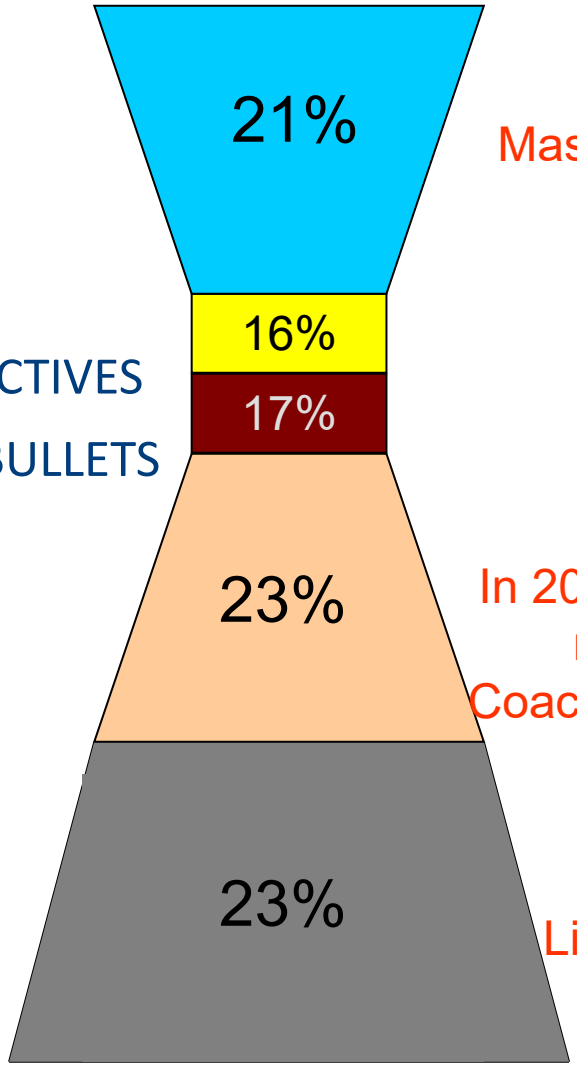
Most healthy

\+

\-



Least healthy



FOOD ACTIVES

MAGIC BULLETS

WELL BEINGS

Masters of Proactive Personal and Planetary Health

FENCE SITTERS

In 2008 - Inertia Personified, In 2016 they are now Strivers, Still Need Motivation & Coaching: Perfect Candidate for “Small Steps”

EAT, DRINK, & BE MERRYS

Little Belief in the Connection Between Eating Healthy and Being Healthy

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Pottstown Area Community – It was a snapshot of America… Today as well?

- Reflective of the expression, “Will it play in Peoria?,” the tri-county area of PAHWF was demographically representative of the United States in 2008

- The outcome of this ‘American Snapshot’ represented the opportunity for PAC to generate health and wellness programs of interest on both the national non-profit and media landscape, as well as to uniquely position PAC as a predictive bellwether for innovative health programs and initiatives going forward.

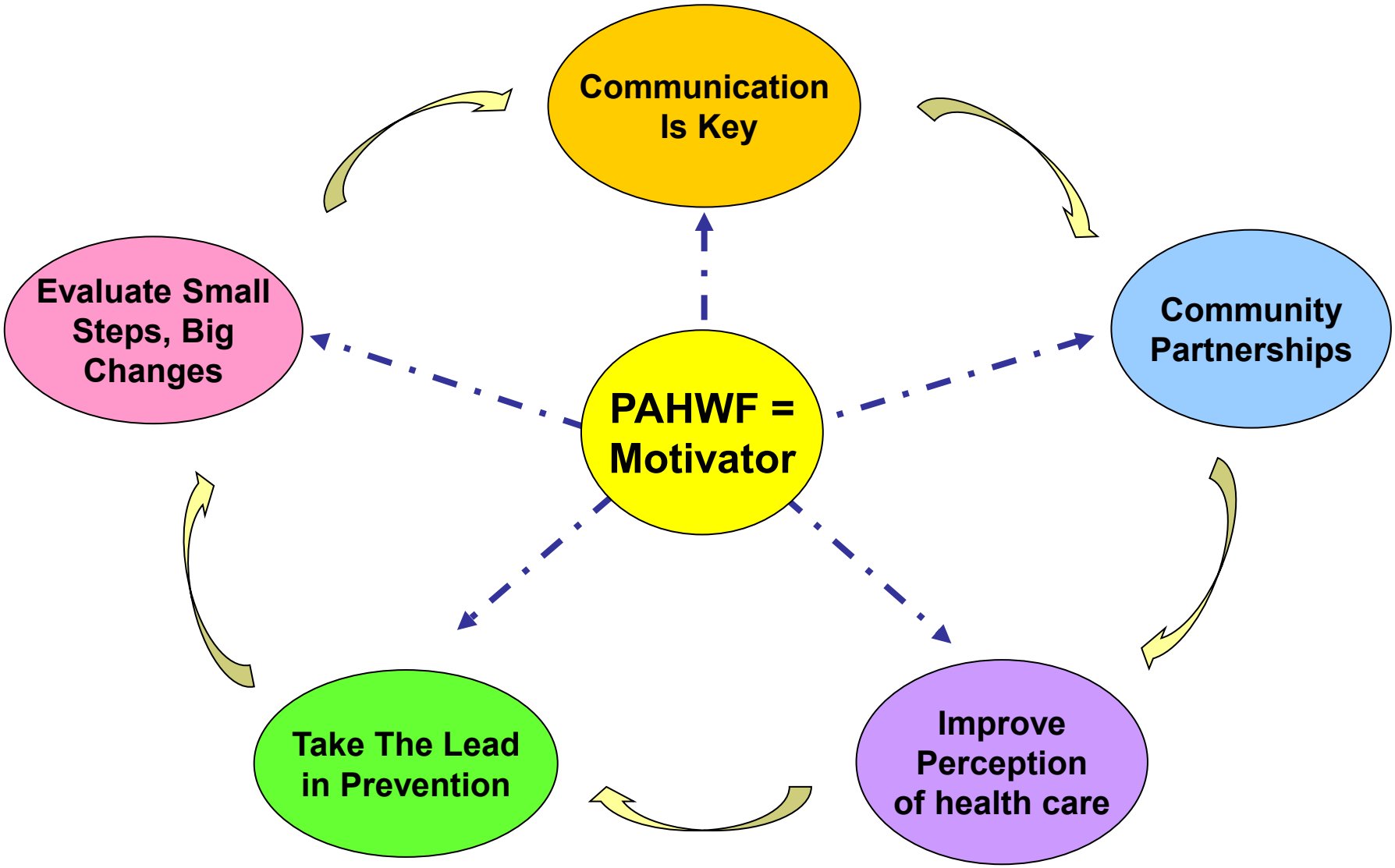


→As the health and wellness segmentation of the general population has seen some significant shifts over the past eight years, are those reflected in the current Pottstown population as well?

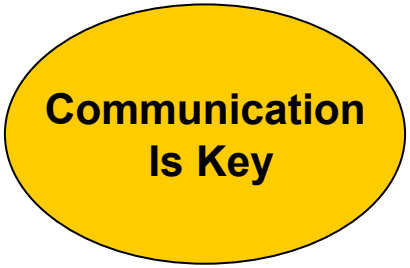
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Qualitative Insights
Revealed attitudes and needs

PAHWF as the motivator for Pottstown Area residents is the key cog in the wheel



The qualitative research uncovered 6 key implications…



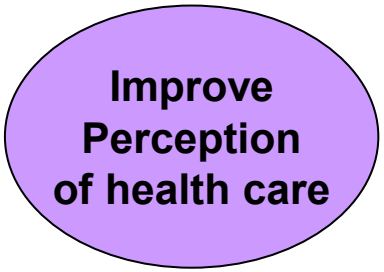
1. Communication is the key foundational element

PAHWF positioned as the driving force to fill residents' need for frequent, consistent and compelling communication about health and wellness; greatest need identified in the Hispanic community



2. Mobilization through community partnerships

PAHWF as the central conduit to fill the void between isolated entities (fiefdoms) through leveraging community leaders & stakeholders to mobilize and vitalize the Pottstown Area



3. Improve the perception of area health care

Highlight the best aspects of area hospitals in an effort to improve their reputation, partner to offer free health seminars, screenings etc.

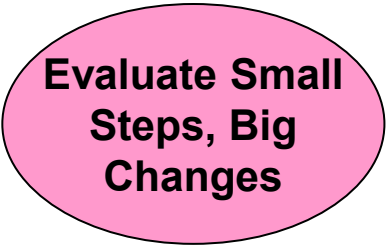
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The qualitative research uncovered 6 key implications… (continued)



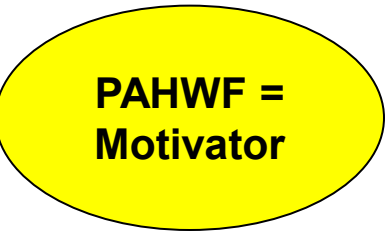
4. **PAHWF taking the lead in prevention**

   Significant leadership opportunity to bring integrated Prevention to the forefront in Pottstown; high resident interest in education, seminars, directories, etc.; fast growing mass market opportunity



5. **Evaluate "Small Steps, Big Changes" campaign**

   PAHWF as motivational catalyst for Pottstown Area residents by leveraging the positive potential of small incremental lifestyle changes to help residents "move the dial"



6. **An opportunity to return to PAHWF's 2004 Vision of being the leading catalyst for continuous improvement of health and wellness in the Pottstown Area**

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WELL BEINGS – masters of proactive personal and planetary health

WELL BEINGS' recipe for success starts with fostering healthy food choices and a healthy body



GENEVIA
21% of PAC

"Health & wellness is the only way of life for my family. We eat healthily every day and get out on the trail or go to the YMCA."

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FOOD ACTIVES – diet, nutrition and exercise focus

To promote health FOOD ACTIVES use a mix of healthy food, exercise & integrative health practitioners



KAY
16% of PAC

"We're uninsured so we have to treat things with a natural perspective. We can't afford to run to the doctor every time someone has a fever."

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MAGIC BULLETS – prevention focus to combat family medical history and disease

MAGIC BULLETS rely heavily on supplements for health



DANA
17% of PAC

"The males in my immediate family died young from alcohol & heart disease. I use more than 25 supplements a day, exercise & drink non-alcoholic beer. All to not end up like them."

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FENCE SITTERS – inertia personified, need motivation and coaching: perfect candidate for “Small Steps”

FENCE SITTERS don’t seem to have a recipe for health & wellness success; they need motivation to inspire change



ROBIN 23% of PAC

“Health & wellness means being able to keep a roof over my head and that I’m able to live better than I did growing up.”

EAT, DRINK & BE MERRYS – no belief in the connection between eating healthy and being healthy

EAT, DRINK & BE MERRYS need the most help and motivation in the PAC community but reaching them will be a challenge



GARY
23% of PAC

"Physically, I am a walking risk factor! But I couldn't be happier. I find the sense of belonging more important than actual health."

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Quantitative Drove the segmentation and Health Assessment Insights

PAC health assessment snapshot – "The Good"

- THE GOOD NEWS:

  Statistically significant differences between 2003 and 2008

  √ Fewer occurrences of chronic lung disease

  √ Higher satisfaction with available health care

  √ Women are more proactive about getting mammograms (past year)

  √ Men who have never had a PSA test is down

  √ Women who have never had a pap smear is down



→ PAC residents are more proactive in prevention via medical screenings

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PAC health assessment snapshot – "The Bad"

- THE BAD NEWS:

  Statistically significant differences between 2008 and 2003

  - Residents are increasingly being diagnosed with high cholesterol
  - Diagnosis of diabetes is more prevalent this year
  - Smoking is still a key concern
  - More people had trouble finding a doctor in the past year
  - Aging population - Medicare covers more residents

✓ **PAC residents diagnosed with increasingly serious health conditions**

✓ **If smoking levels persist - could raise occurrence of lung disease**

✓ **Are PAC residents experiencing health insurance challenges?**



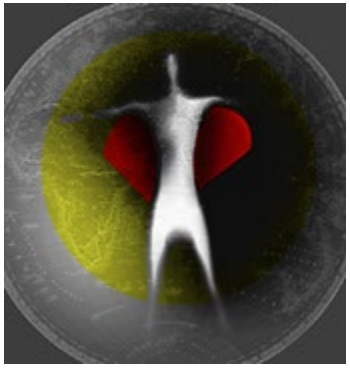


PAC health assessment snapshot – "The Static"

- NO NEWS is not necessarily good news:
  No differences between 2003 and 2008
  - Self-assessment of general health
  - Asthma
  - BMI
  - Cancer
  - Chronic heart disease
  - Domestic violence
  - Illegal drug use
  - Major depression
  - Stroke







→In the next 5 years, PAC may want to focus on reducing these conditions and increasing general health self-assessment levels through "Small Steps" initiatives

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Four key components to PAC residents' health and wellness plan



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Physical health & wellness – improvement needed

- PAC residents report significantly higher levels than in 2003 for diabetes and high cholesterol

	PAC 2008	PAC 2003	Nationally '05/'06/'07
Diabetes	11%	7%	11%[1]
▪ Use Insulin	25%	n/a	27%[2]
High Cholesterol	32%	27%	38%[1]



- High Cholesterol is the #1 reported PAC health condition most prevalent among EAT, DRINK & BE MERRYS and MAGIC BULLETS

→Programs designed to improve PAC residents' diet and exercise routine may decrease future diagnosis of these conditions

Red Numbers indicate statistical significance

[1]Center for Disease Control and Prevention (CDC), 2007, asked of age 20+

[2]Centers for Disease Control and Prevention (CDC), 2006, asked of age 20+

Emotional health & wellness – a challenge for PAC

- Support systems needed to align with PAC residents
  - Studies show depression, stress, drinking and smoking are highly correlated
  - New data for 2008 shows PAC residents experience depression, stress and anxiety directionally much higher than the nation
  - While reported drinking levels are moderate to low, smoking in PAC is prevalent at 19%, although similar to national statistics



Social health & wellness – opportunity for a cohesive PAC

- **67% of residents don't feel a strong connection to PAC**
  - In addition, only 17% truly felt aligned with the community
- **However, key groups do want more connection…**
  - WELL BEINGS, MAGIC BULLETS and FENCE SITTERS yearn for more connection than they have today
  - *Newer residents* and those *younger than age 55* want to feel more a part of the community



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Stress and depression – ever-present in PAC



- **While half of PAC reports moderate stress levels, seven in ten* residents experienced some type of significant change in their lives over the past two years…**
  - ✓ Health problems
  - ✓ Death of a loved one
  - ✓ Change in financial stability
  - ✓ Job change/conflict
- **One-quarter say they struggled with mental health issues (depression, anxiety, nervousness) in the past two years**
  - ✓ Half of the one-quarter sought help from a mental health professional (13%)
  - ✓ National major depression incidence is 7%[3]

→Support groups offer a chance for residents to proactively relieve stress – 27% of PAC is interested with the highest interest in Pottstown

*Seven in ten residents experienced any of the changes asked about

[3]National Alliance on Mental Illness (NAMI), 2006, asked of 18+

PAC alcohol use and access to 12 step programs



- **Of those who drink, more than half of PAC report drinking more than one day a week**
  - highest percentage of residents drink one or two days a week
- **Four in ten Perkiomen Valley drinkers partake consistently at least two days a week**
  - Approximately half of residents in this district are satisfied with their access to 12 step programs
- **Among imbibers, on average, the number of drinks consumed in one sitting is 2.14**
  - FENCE SITTERS and EAT, DRINK & BE MERRYS consume significantly more drinks than WELL BEINGS and MAGIC BULLETS

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Smoking: a growing concern for PAC

- **45% of residents have smoked cigarettes at some point in their lives, directionally higher than the nation (30%)[4]**
  - ➢ Most prevalent in Pottstown (56%)



- **19%* of PAC residents smoke cigarettes now vs. 21% nationally[4]**

Less than half a pack	5%
Half a pack	5%
1 pack	7%
2 packs or more	2%

- **PAC smokers have been doing so for an average of 15 years**
  - ➢ Longest among EAT, DRINK & BE MERRYS, 44% smoked 21 years+
    38% of those who smoke are interested in smoking cessation programs

→Long-term smoking is linked to chronic lung disease, which is currently down from 2003

→Smoking is still a concern for PAC; programs are needed to decrease smoking levels

*Data rebased to total respondents to be compatible with 2003 data
[4]Centers for Disease Control and Prevention (CDC), Cigarette smoking among U.S. adults, 2006
[5]National Survey on Drug Use and Health, The NSDUH Report, 2006

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Behavioral health & wellness – PAC's obesity report

- **PAC reports *significant* levels of overweight and obese residents – BMI shows consistent levels compared to 2003 and the nation**
  - The majority of PAC is either overweight (38%) or obese (27%), especially in Pottstown and among EAT, DRINK & BE MERRYS

- **PAC is struggling to make headway and needs support**
  - Half of PAC admits to changing their eating habits to lose weight in the past two years
  - Only 8% have used Weight Watchers or another diet/nutrition program in the past year



→PAC needs community support and motivation to get up, get out and get fit.

Health & wellness via traditional health care – PAC residents experiencing health care challenges

- **9% of PAC is uninsured, directionally better than the nation (15%)**
  - Highest uninsured rate among FENCE SITTERS (14%), who have 3.11 people on average in their households – indicating higher need for families
- **22% are covered by Medicare***
  - Up since 2003 (15%) and slightly higher than the national average (17%)
  - Due to an aging population: mean age 53.5 vs. 47.6 in 2003
- **9% had difficulty finding a doctor when needed in the past year**
  - An increase from 2003 (6%)



- **Significantly more residents with incomes under $75K, as opposed to those with higher incomes, believe the use of alternative healthcare professionals is extremely/very important in how they maintain a healthy, balanced lifestyle**

→Some uninsured and underinsured PAC residents are turning to preventive/ integrative health care to better navigate health care challenges

*Data rebased to total respondents to be compatible with 2003 data

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Health & wellness via traditional health care – prevention-minded PAC on top of screenings

- **Prevention-minded PAC residents are very diligent about getting the appropriate screenings – at times *more* diligent than the nation**
  - 86% of women have had a pap smear in the past 3 years – directionally higher than the nation (78%)[6]
  - 69% of women have had a mammogram in the past 2 years – comparable to the nation (67%)[6]
  - 66% of men have had a PSA test in the past year*
  - 60% of women perform self breast exams
  - 58% of men have had a digital rectal exam in the past year*

→High PAC interest in *more* free health screenings/assessments and significantly higher interest from the uninsured

[6]National Cancer Institute, U.S. National Institutes of Health, 2005, Pap smear asked of women age 18+ (21+ nationally), Mammogram asked of women age 40+

*Asked of males age 50+

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Implications of Learnings

Pottstown Area Health & Wellness Foundation research: overview of results

- Pottstown Tri-county area is **demographically representative** of the US and NMI's Health & Wellness segmentation
- Represents **opportunity to generate health and wellness programs** on both national non-profit and media landscape
- Can uniquely position Pottstown area community as a **predictive bellwether** for innovative health programs and initiatives going forward

Broad findings include:

1. Communication is key foundational element; greatest need in Hispanic community
2. Mobilization through community partnerships; be central conduit to fill void between isolated entities
3. Improve perception of area health care; highlight the best aspects of area hospitals
4. Take lead in prevention; significant leadership opportunity to bring to forefront
5. Evaluate "Small Steps, Big Changes" campaign

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Learning Implication 1:
Communication Is The Key Foundational Element



Need: Frequent & consistent communication

Solution: PAHWF as the driving force

- Create/fund an entity to collect, organize, distribute and house local health & wellness info
- Raise awareness of PAHWF
- Leverage Internet & local resources:
  - ✓ Chamber of commerce
  - ✓ Local newspapers
  - ✓ Schools, colleges
  - ✓ Local TV stations
  - ✓ ACLAMO and other Bilingual sources
  - ✓ Churches/spiritual centers

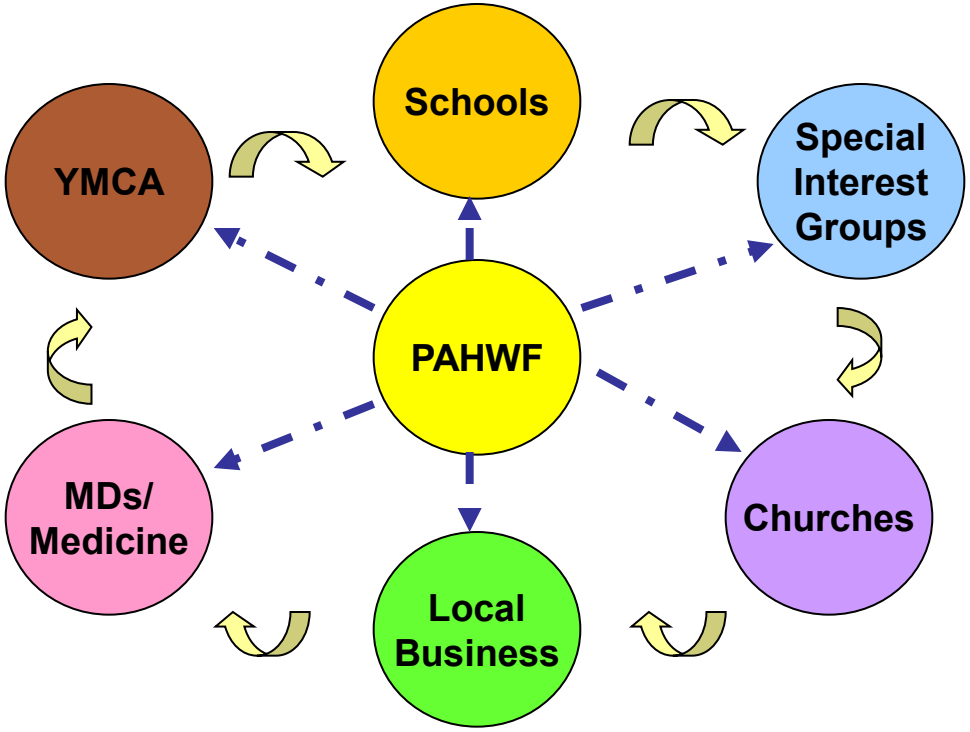
POTTSTOWN AREA Health & Wellness FOUNDATION
Promoting Healthy Living





Learning Implication 2:
Mobilize Through Community Partnerships

- Need: Partnerships to mobilize and vitalize the Pottstown Area
- Solution: PAHWF as the central conduit



- **PAHWF can fill the current void between these isolated entities through leveraging leaders and stakeholders from each organization on residents' behalf to create a board of community activists**

Learning Implication 3:
Improve The Perception of Health Care

- Work to improve the reputation of the area hospitals
  - ✓ Improve resident experience in the ER
  - ✓ Host open house events with free screenings for the uninsured/underinsured
  - ✓ Partner with neighboring hospitals to offer seminars



- Highlight best aspects of the hospitals
  - ✓ Harp music while receiving Chemotherapy treatments
  - ✓ Seminars about various health topics (new moms, bipolar, etc.)
  - ✓ Highlight residents' positive experiences at the hospitals

~ Partnering with these hospitals, creating positive experiences and sharing positive feedback with the community could turn perceptions around

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Learning Implication 4:
PAHWF Taking The Lead In Prevention

- Profound & significant leadership opportunity for PAHWF
  - ✓ In addition to conventional medical healthcare
  - ✓ PAC residents have a strong focus on prevention
  - ✓ Residents have negative lifestyles/behaviors that lead to more serious issues
  - ✓ High interest from WELL BEINGS – the healthy thought leaders
    - High interest in regional directory, prevention education
    - Integrative/Preventive health care is a fast-growing trend nationwide

- **Opportunity to partner with area practitioners**







Learning Implication 5:
Evaluate Small Steps, Big Changes Campaign

- PAHWF has the opportunity to become the motivational catalyst for Pottstown Area residents via:
  - ✓ Communication
  - ✓ Consistent motivational messages
  - ✓ Regular sponsored events



- Leverage the positive potential of small & incremental lifestyle changes to help residents "move the dial" via a communication program that reinforces the large impact of small change
  - ✓ A combination of marketing communications, PR, community activities, could inspire residents to "Just Do One Thing" to see change in their lives, health and overall well being

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Fuse significant study learning by positioning PAHWF as the driver and motivator of a singular initiative



The Big Idea – create a national prevention community



1. Continue positive momentum with **preventive screenings** through greater participation with Pottstown and Phoenixville Hospitals, as well as other facilities

2. Provide tools to **monitor community improvement**, including weight, cholesterol, smoking and other challenging statistics

3. Engage in public awareness campaigns to **drive participation**, leveraging motivational pathways identified in Live Long & Prosper, as well as Look Good, Feel Good

4. Proactively **engage and incentivize preventive/integrative practitioners** to establish practices in the area

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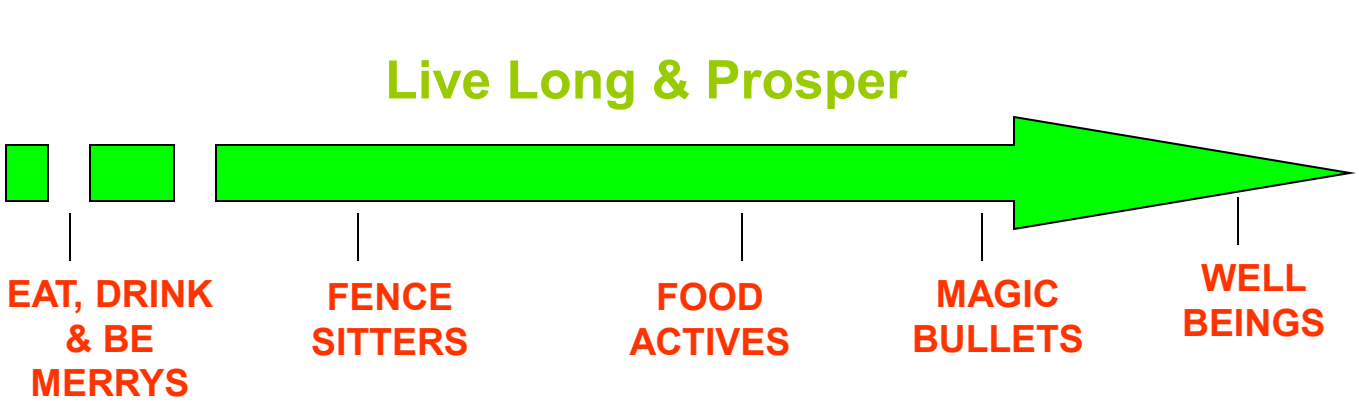
The Big Idea – create a national prevention community



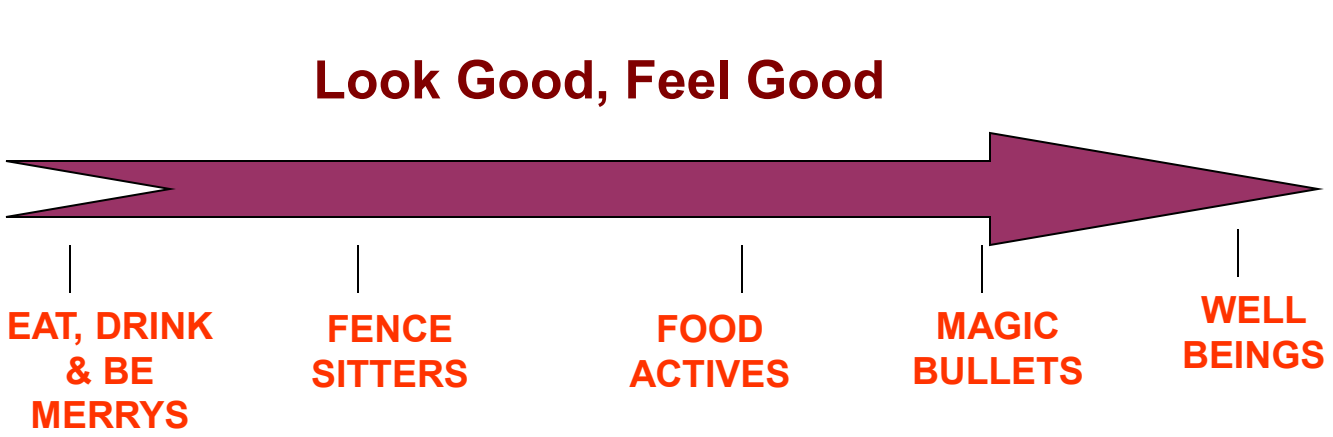
5. Leverage PAHWF's **unique positioning as an educator** to be the motivational catalyst for National Prevention Community programs, media and funding
6. Deploy key WELL BEINGS and other motivated residents to take part in **grass roots initiatives**, using media "Help Wanted!" and other community building tactics to recruit mentors, gardening/mural project leaders, nutrition and other lifestyle classes
7. Engage the wide variety of current organizations and "fiefdoms" into **participating in Prevention Initiatives**, aligning with Church organizations in particular
8. Continue to conduct **ongoing Health Assessments** to monitor progress
9. Drive public relations to bring **local and national media attention** to PAC's efforts, reporting "Health Milestones," creating a sense of community pride and accomplishment

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"Moving the Dial" –
Two Distinct Pathways Common To All Segments









Note: Communication clustering techniques developed by NMI Statistical Modeling Team. Those who were not interested in improving their health were not included in the analysis.

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"Moving The Dial" – *Live Long & Prosper*



- **Live Long & Prosper** are straight forward and non-complex in their approach to health
  - They have successfully integrated values-based attitudes, beliefs and behaviors about health & wellness into their daily lives
- They are the healthier of the two motivational pathways and therefore are less in need of consistent, far-reaching support
- Six in ten **Live Long & Pros**pers rate their health as excellent/very good, nearly all are satisfied with the available health & wellness information, and tend to have significantly higher incomes than **Look Good, Feel Good**

"Moving The Dial" – *Live Long & Prosper*

- The strongest motivational tendency mindset with the widest range of reasons to "move the dial" is – **Live Long & Prosper**

Live Long & Prosper is more focused than **Look Good, Feel Good** on healthy living to stay active, prevent health conditions and to be there for others

➢ To have good overall health	99%
➢ To stay active and be able to participate in activities they enjoy	98%
➢ To not get sick	98%
➢ To be healthy enough to care for others (including family)	98%
➢ To prevent specific health problems	94%
➢ To live a long life	93%
➢ To treat existing health problems	88%





"Moving The Dial" – ***Look Good, Feel Good***



- The **Look Good, Feel Good** mindset is more performance and appearance driven than **Live Long & Prosper**

  "Moving the dial" is about looking good and feeling good rather than a 360° health lifestyle

  - ➢ To improve mental alertness 90%
  - ➢ To feel good about themselves 89%
  - ➢ To manage stress 85%
  - ➢ To improve their appearance 75%
  - ➢ To improve athletic performance 59%





Look Good, Feel Good – most in need of support



- Those with a **Look Good, Feel Good** mindset are significantly more in need of support than the **Live Long & Prosper** mindset

- While their appearance-based motivation is more superficial, this group is complicated, struggling and deeply in need
  - Majority need a trusted source to sort out conflicting health care information
  - Most deem their religious fellowship an important part of their lives
  - Three in ten are interested in support groups

- Looking deeper into their intrinsic attitudes and behaviors, they desire to be healthy but do not consistently follow through with their actions

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Small Steps: "Moving the Dial" in satisfaction with access to PAC offerings, programs & activities

- High satisfaction with access to PAC offerings, programs and activities can be split into three tiers
  - ✓ Good hospitals
  - ✓ Quality healthcare
    - ➢ Available health & wellness information
    - ➢ Fitness programs
    - ➢ Alternative health care practitioners
      - o Support groups
      - o Nutritional programs
      - o Community programs and activities
      - o 12 step programs



Opportunities to "move the dial" up

Various components of Small Steps, Big Changes

- Consistent with the qualitative findings, residents are most interested in these possible programs:
  - Outdoor recreation activities
  - Free health screenings/assessments
  - Seminars about various health topics
  - Health and nutrition education courses
  - Mentorship program for kids



- These programs can be achieved by partnering with area experts, engaging schools and area vendors in order to meet residents' need for health & wellness education and instruction

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Thank You!

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Appendix

Physical health & wellness – improvement needed

PAC's physical health & wellness could use improvement…

- Serious health conditions plague PAC
  - Higher rates of high cholesterol and diabetes than in the past
  - Chronic lung disease is down; however, smoking rates threaten future increases
- A PAC health care crisis is brewing
  - An aging population
  - More residents on Medicare
  - Fence Sitters least insured (14%)
  - Trouble finding doctors when needed
  - States may cut further to deal with economic issues
  - Continued challenges to employer paid benefits





Physical health and wellness – partner with area hospitals/doctors

- Most residents are satisfied with available health care services

  and in the past year, over half have used Pottstown or Phoenixville hospitals or Phoenixville Clinic



"I'm currently receiving chemo at Pottstown and have had nothing but an exceptional experience. The Oncology Department is excellent and so is the nursing care. On Wednesday when I receive chemo treatments we have a live harpist play for us and can receive massages after our treatments. I think the care has changed but its reputation hasn't." ~Judi

→Partnering with these hospitals, creating positive experiences and sharing positive feedback with the community could turn perceptions around

Physical health & wellness – prevention vs. treatment

- **Current health care climate has caused PAC to focus on *prevention* more than treatment**
  - As discovered in the qualitative research, residents are more likely to use preventive/integrative/alternative health care for less serious conditions (e.g., stress, back problems, etc.)

- **Residents strive to prevent specific health conditions or slow the progression of current health conditions**
  - PAC is proactive in terms of health screenings
  - More than half are interested in *more* health screenings and/or assessments offered free of charge

Physical health & wellness – prevention via integrative health care

- *Significantly more* residents with incomes under $75K, as opposed to those with higher incomes, believe the use of alternative healthcare professionals is extremely/very important in how they maintain a healthy, balanced lifestyle – a direct result of health care challenges

- Those "in the know" are satisfied with their access to integrative practitioners however others are left in the dark…

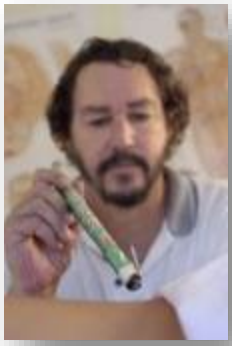
  At least one-third of PAC is interested in preventive/integrative/alternative health care support

  - A regional directory of integrative/alternative practitioners
  - Prevention education featuring alternative practitioners



"A directory of Pottstown natural health services available at book stores, natural food stores, and pharmacies would be a benefit… covering everything from acupuncture to chiropractic to yoga in Montgomery and Berks counties." ~Angela

PAC preventive/integrative health care opportunities



- **Evaluation of PAC's interest in preventive/integrative health care uncovered key opportunities:**
  - 36% want a regional directory of alternative health care professionals
  - 34% want prevention education featuring alternative practitioners
  - 27% find the use of alternative health care professionals extremely/very important in how they maintain a healthy, balanced lifestyle
  - 18% have used alternative health practices in the past year

- **Preventive/integrative health care is most appealing to WELL BEINGS and MAGIC BULLETS with growing interest from FOOD ACTIVES and FENCE SITTERS**
  - Integrative/Alternative health care in PAC is not just for the affluent – usage is equal across income levels

→PAHWF can fill the information gap – by offering education information and access

Mental health & wellness – a need to limit stress

- **PAC residents report moderate stress levels due to changes in their lives such as health problems, job change/conflict, financial stability**
  - However, most are motivated to improve their health to manage stress
  - And most agree that relieving their stress would increase the quality of their lives

- **One quarter (24%) of PAC residents suffered from mental health issues in the past 2 years, over half of the 24% received help from a mental health professional**



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Spiritual health & wellness – a community-wide belief



vs.



- **As in the qualitative research, spiritual health was again communicated as a major and essential component of health & wellness**
  - Linked to mental health – peace of mind/spirit, solace in time of need
- **While most residents identified spirituality and religious fellowship as important parts of their lives…**
  - More people tapped into *spirituality* rather than actual religious fellowship attendance in the past year with half attending a church, synagogue or other faith-based organization

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Social health & wellness – opportunity for a cohesive PAC

- **67% of residents don't feel a strong connection to PAC**
  - In addition, only 17% truly felt aligned with the community
- **However, key groups do want more connection…**
  - WELL BEINGS, MAGIC BULLETS and FENCE SITTERS yearn for more connection than they have today
  - *Newer residents* and those *younger than age 55* want to feel more a part of the community



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Social health & wellness – proposed community-sponsored programs

- **Residents are *most interested* in the Pottstown community sponsoring the following activities and events, with half stating interest in:**
  1. Free health screenings/assessments
  2. Outdoor recreational activities
  3. Seminars on various health topics

- **As a second tier, PAC is interested in a variety of prevention-oriented education as well as mentorship for children**
  4. Health and nutrition education
  5. Mentorship program for children
  6. A regional directory of integrative/alternative practitioners
  7. Prevention education featuring integrative/alternative practitioners

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Social health & wellness – proposed community-sponsored programs

- **In addition, those who are most interested in increasing their connection to PAC - WELL BEINGS, MAGIC BULLETS and FENCE SITTERS, are more likely to do so through social health & wellness programs**
  - Mentorship program for adults
  - Community garden project
  - FENCE SITTERS are significantly interested in organized adult sports
  - WELL BEINGS, MAGIC BULLETS want a community mural project



From Isolation to Inclusion



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PAHWF becoming the glue of PAC is a worthwhile venture

- **As discovered in the qualitative research, PAC residents are *not* connected through the schools**
  - In fact, only Daniel Boone registered any awareness of school programs, strongly indicating that *schools are not a substantial program platform*

- **Create partnerships with community cornerstones, those tried and true venues PAC residents frequent, to set and help achieve community health & wellness goals including:**
  1. Parks & Recreation
  2. Church/religious organization
  3. Doctors/Area Hospitals
  4. YMCA



→PAHWF could mobilize, revitalize and bring connection to the region through new community partnerships

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Knowledge of Pottstown Area Health & Wellness Foundation

- **One-third of PAC had previously heard of PAHWF**
  - WELL BEINGS, FOOD ACTIVES and MAGIC BULLETS are most aware
  - PAHWF known most in Pottstown, Pottsgrove and Boyertown
  - Could be highly biased by PAHWF introduction to Health Study participants

- **However, half of all respondents believe PAHWF's role is to attend to the health of the community**
  - PAHWF was further identified as an educator and communicator/ information provider

→PAHWF can leverage its identity as educator and communicator of health & wellness for PAC – raising awareness of PAHWF and the depth and breadth of its role

PAHWF closing the information gap

- PAC is interested, on many levels, in receiving health & wellness information – current trusted sources are few:
  - Doctor
  - Internet
  - Friends/Family



- Excellent opportunity to partner with doctor's offices, use the Internet and create viral marketing campaigns to get "the word" out

~ Stepping in as the central, trusted resource, PAHWF can close the information gap delivering much needed, much sought after health & wellness information

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  - Integrative/Alternative health care in PAC is <u>not</u> just for the affluent – usage is equal across income levels



- PAHWF can fill the information gap – by offering education information and access

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Next Steps



1. Develop a subsidized PAC Healthcare Assessment to provide a community platform for health improvement; nutrition tools, a resource library and health coaching

2. Consider a new NAME for Pottstown Area Health and Wellness Foundation, as it currently doesn't reflect the Tri-County Area and the residents it serves.
   - **CHWF – Pronounced "Chuf" acronym for Community Health and Wellness Foundation**
   - **TRIC – Tri County Foundation**
   - **TPCF - The Prevention Community Foundation**
   - **Berks, Montgomery and Chester Area Foundation**

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Next Steps, continued…



3. NMI recommends the development of *specific* programs and communication initiatives for PAHWF to drive the next 4 years that are strategically under the ***Prevention Umbrella***

   The strategic development of these programs and communication support would be conducted in partnership with NMI, The Anderson Group, PAHWF management and others on the PAHWF Strategic Committee. Using the findings from the Quantitative Study as a platform, specific programs might include Prevention Programs, Integrative Health Care Awareness, Small Steps/Big Changes initiatives as well as Community Nutrition Programs, etc.

4. As a final step, it is highly recommended that PAHWF test these *specific concepts, programs and communication tactics* to insure that the programs deliver on the needs of the community, resonate with their health and wellness goals and would receive a strong level of buy-in and participation

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Quantitative research demographic overview

- Age: 53 Years old on average
- Gender: 49% Male/51% Female
- Race: 94% Caucasian
- Marital status: 71% Married
- Size of household: 2.83 People on average
- Children under 18: 44% Yes
- PAC Residency: 16.76 Years on average





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Quantitative research demographic overview (continued)



- Own a home: 85% Yes
- Employed: 58% Yes
- Retired: 28% Yes
- Internet access: 81% Yes
- Income: 58% Under $75K versus 42% $75K+
- Education: 41% College graduate or more
  35% High school graduate or less



PAC demographics by NMI segment – gender & age

Gender	Male	Female
• WELL BEINGS (B)	38%	62%[CEF]
• FOOD ACTIVES (C)	47%[B]	53%[F]
• MAGIC BULLETS (D)	41%	59%[EF]
• FENCE SITTERS (E)	54%[BD]	46%
• EAT, DRINK & BE MERRYS (F)	61%[BCD]	40%

Age	18-39	40-64	65+
• WELL BEINGS (B)	20%[D]	55%	24%[E]
• FOOD ACTIVES (C)	15%	54%	32%[BE]
• MAGIC BULLETS (D)	13%	60%	27%[E]
• FENCE SITTERS (E)	32%[BCDF]	53%	16%
• EAT, DRINK & BE MERRYS (F)	15%	60%	25%[E]

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PAC demographics by NMI segment – income & length of residency

Income	$75K+	<$75K
• WELL BEINGS (B)	47%[DF]	53%
• FOOD ACTIVES (C)	46%	54%
• MAGIC BULLETS (D)	38%	62%[B]
• FENCE SITTERS (E)	44%	56%
• EAT, DRINK & BE MERRYS (F)	37%	63%[B]

Length of Residency	5 years or less	6-15 years	16 years or more
• WELL BEINGS (B)	15%[C]	28%[F]	57%[E]
• FOOD ACTIVES (C)	10%	30%[F]	60%[E]
• MAGIC BULLETS (D)	15%	24%	61%[E]
• FENCE SITTERS (E)	25%[BCD]	26%	49%
• EAT, DRINK & BE MERRYS (F)	17%[C]	20%	63%[E]

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PAC demographics 2008 vs. 2003 – gender & age

Gender	2008	2003
• Male	49%	48%
• Female	51%	52%

Age	2008	2003
• 18-29	6%	16%
• 30-39	14%	21%
• 40-49	24%	21%
• 50-64	32%	25%
• 65+	24%	18%

Red numbers are statistically significant

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PAC demographics 2008 vs. 2003 – length of residency

Length of Residency	2008	2003
• Less than a year	3%	4%
• 1-5 years	14%	17%
• 6-10 years	15%	9%
• 11-15 years	10%	6%
• 16-20 years	9%	7%
• 21+ years	49%	58%

Red numbers are statistically significant

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PAC Health Assessment ’08 vs. ’03 vs. the nation – exams and traditional health care

Exams	2008	2003	Nation
• Length of time since last Pap smear: within Past 3 Yrs.	86%	85%	78%[7]
• Length of time since last PSA test: within Past 2 Yrs.	80%↑	71%	n/a
• Length of time since last Mammogram: within Past 2 Yrs.	69%↑	54%	67%[7]
• Length of time since last digital rectal exam: within Past 2 Yrs.	69%	68%	n/a
• Perform monthly Breast self exams: Yes	60%	n/a	n/a

Traditional Health Care	2008	2003	Nation
• Available Health Care Services: excellent/very good	68%↑	52%	n/a
• Government assisted health care coverage: Medicare*	22%↑	15%	17%[8]
• Had difficulty finding a doctor in past year: Yes	9%↑	6%	n/a
• Someone in household does not have insurance	9%	n/a	15%[9]

Red ’08 numbers are statistically significant over ’03 numbers

*Data rebased to total respondents to be compatible with 2003 data

[7]National Cancer Institute, U.S. National Institutes of Health, 2005, mammogram asked of women age 40+, pap smear asked of women age 18+

[8]Center for Disease Control and Prevention (CDC), 2006

[9]Center for Disease Control and Prevention (CDC), 2007

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PAC health assessment ’08 vs. ’03 vs. the nation – children’s health care and diet, exercise & BMI

Children’s Health Care	2008	2003	Nation
• Length of time since child visited dentist: Within Past Year	85%	84%	n/a
• Had difficulty finding medical care for child in past year:	2%	4%	n/a
Main reason couldn’t get medical care for this child:			
➢ Cost/No insurance	26%	29%	n/a
➢ Office wasn’t open when I could get there	15%	20%	n/a

Diet, Exercise and BMI	2008	2003	Nation
• General health self-assessment: Excellent/Very Good	58%	55%	n/a
• Made changes to eating habits/food plan to lose weight in the past two years: Yes	53%	n/a	n/a
• Average days per week exercise strenuously >20 mins.	3.48	n/a	n/a
• BMI: Average			
Male	27.9	n/a	28.1[10]
Female	27.5	n/a	28.0[10]

[10]Center for Disease Control and Prevention (CDC), 1999-2002, asked of age 20+

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PAC Health Assessment ’08 vs. ’03 vs. the nation – medical conditions

Medical Conditions	2008	2003	Nation
• Diagnosed with High Cholesterol	32%	27%	38%[11]
• Diagnosed with Diabetes	11%	7%	11%[12]
Insulin use	25%	n/a	27%[13]
• Diagnosed with Asthma	10%	10%	7%[14]
• Diagnosed with Cancer (excluding skin cancer)	9%	8%	5%[15]
• Diagnosed with Chronic Heart Disease	7%	8%	11%[16]
• Diagnosed with Chronic Lung Disease	4%	9%	6%[14]
• Had a stroke	3%	3%	3%[17]

Red ’03 numbers are statistically significant over ’08 numbers

[11]Center for Disease Control and Prevention (CDC), 2007, asked of age 20+

[12]Center for Disease Control and Prevention (CDC), 2007, asked of age 20+

[13]Center for Disease Control and Prevention (CDC), 2006, asked of age 20+

[14]Center for Disease Control and Prevention (CDC), 2006

[15]National Cancer Institute, SEER Cancer Statistics Review, 1975-2005, first invasive tumor ever based on past 30 years

[16]Center for Disease Control and Prevention (CDC), 2005, asked of age 20+

[17]Center for Disease Control and Prevention (CDC), 2006, ever had

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PAC Health Assessment ’08 vs. ’03 vs. the nation – mental & emotional conditions

Mental & Emotional Conditions	2008	2003	Nation
• In past 2 years struggled with depression, anxiety, nervousness, too much stress or other emotional problem	24%	n/a	7%[18]
• The average level of stress on a scale of 1 to 10 over the past 2 years	4.54	n/a	n/a
• Changes that occurred in your life in the past 2 years			
▪ Health problems	27%	n/a	n/a
▪ Death of a loved one	25%	n/a	n/a
▪ Change in financial stability	25%	n/a	n/a
▪ Job change/conflict	24%	n/a	n/a
▪ Depression (yourself, a loved one, or family member)	20%	n/a	n/a
▪ Move	12%	n/a	n/a
▪ Loss of job	9%	n/a	n/a
▪ Problem child	8%	n/a	n/a
• Been a victim of domestic violence in past 5 years	2%	2%	2%[19]

[18]National Alliance on Mental Illness (NAMI), 2006, asked of 18+

[19]U.S. Department of Justice, 2005

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PAC Health Assessment ’08 vs. ’03 vs. the nation – addictions

Addictions	2008	2003	Nation
• Ever smoked cigarettes: Yes	45%	n/a	30%[20]
• Smoke now: Yes	19%	n/a	21%[21]
Less than half a pack	5%	n/a	n/a
Half a pack	5%	n/a	n/a
1 pack	7%	n/a	n/a
2 packs or more	2%	n/a	n/a
• Years smoked altogether			
Less than 5 years	19%	n/a	n/a
6-10 years	18%	n/a	n/a
11-20 years	26%	n/a	n/a
21 or more years	36%	n/a	n/a
• Average number of days per week drink alcohol	1.72	n/a	n/a
• Average number of drinks consumed in one sitting	2.14	n/a	n/a
• In past 2 years sought professional help for an alcohol-related problem: Yes	1%	n/a	n/a
• In the past 30 days used an illegal drug or taken Rx drug that was not prescribed to you: Yes	1%	1%	8%[20]

Numbers representative of those who smoke, drink, use illegal drugs

[20]Centers for Disease Control and Prevention (CDC), Cigarette smoking among U.S. adults, 2006

[21]Department of health and human services, substance abuse and mental services administration (SAMHSA), 2006, asked of age 12+

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PAC insurance statistics – 2008 vs. 2003

Who does NOT have health insurance?	2008
• Covered by insurance	91%
• No insurance (net)	9%
You	6%*
Your Spouse	3%*
Your children	3%*
Another household member	1%*

Government assisted health care coverage	2008	2003
• No government assisted health care	69%	78%
• Medicare	22%	15%
• Medicaid or another state sponsored program	2%	2%
• Medicare and Medicaid	2%	1%
• VA or Military Benefits	2%	2%
• Some other Government sponsored program	3%	1%

Red numbers are statistically significant

Multiple answers accepted

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FENCE SITTERS – an in-depth profile: demographics

- Age: 18-39 (32%) significant over all segments, 40-64 (53%), 65+ (16%)
- Gender: 46% Female, 54% Male significant over WELL BEINGS and MAGIC BULLETS
- Race: 95% Caucasian
- District: Evenly spread across all districts
- Marital status: 72% Married
- Size of household: 3.11 People on average
- Children under 18: 55% Yes, significant over all other segments, 31% have children age 5 or younger
- PAC Residency: 14.77 Years on average
- Own a home: 79% Yes
- Employed: 66% Yes, half work full-time, significant over WELL BEINGS & MAGIC BULLETS
- Internet access 80% Yes
- Income: 56% Under $75K, 44% $75K+
- Education: 36% High school graduate or less, 45% College graduate or more, significantly more graduate degrees than MAGIC BULLETS and EAT, DRINK & BE MERRYS

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FENCE SITTERS – an in-depth profile: health conditions and addictions

- **57% rate their health as excellent/very good but… 59% reported having "any" of the health condition queried**
  - High cholesterol 30%
  - Asthma 12% significant over FOOD ACTIVES
  - Diabetes 8%
  - Cancer 7%
  - Chronic heart disease 5%
  - Chronic lung disease 4%
  - Stroke 1%
- Smoking: 45% have ever smoked, 21% smoke now, 15.05 years on average
- Drinking: 1.64 days a week on average, 2.36 drinks in one sitting, significant over WELL BEINGS and MAGIC BULLETS
- BMI: 32% normal, 36% overweight, 31% obese – significant over WELL BEINGS
- Depression in past 2 years: 21%, most of which got help (66%) - significant over WELL BEINGS and MAGIC BULLETS
- Moderate stress levels but significant life occurrences
  - Job change 30% significant over FOOD ACTIVES and MB
  - Change in financial stability 28% significant over FOOD ACTIVES

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FENCE SITTERS – an in-depth profile: access to health care and insurance

- 66% extremely/very satisfied overall with available health care
- Extremely satisfied with access to:
  - Good hospitals 36%
  - Quality health care 34%
  - Availability of health & wellness information 22%
  - Alternative healthcare practitioners 18%
- However, 12% had trouble finding a doctor when needed in the past year
- 14% of FENCE SITTERS households are uninsured, significant over WELL BEINGS, FOOD ACTIVES and EAT, DRINK & BE MERRYS
- 18% are on Medicare
- 25% believe the use of alternative health care is important in how they maintain a healthy balanced lifestyle

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FENCE SITTERS – an in-depth profile: diet & nutrition

- 84% know they should eat healthier but don't, significant over WELL BEINGS, FOOD ACTIVES and MAGIC BULLETS
- 54% believe taste is more important than health, significant over WELL BEINGS, FOOD ACTIVES and MAGIC BULLETS
- Half made changes to their eating habits/food plan to lose weight in the past 2 years
- 16% eat fast food 2 to 3 times a week
- 84% do not use herbal supplements significant over WELL BEINGS and MAGIC BULLETS
- 80% do not use vitamins/minerals significant over all segments

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FENCE SITTERS – an in-depth profile: interest in improving their health

- Half show interest in improving their health
- Extremely motivated to improve health to:
  - Be healthy enough to enjoy my family 50%
  - Not get sick 45%
  - Be healthy enough to care for others including family 43%
  - Live a long life 41%
- 57% would welcome coaching from community professionals to improve their health, significant over EAT, DRINK & BE MERRYS
- 45% are interested in receiving health & wellness information
- 55% believe relieving stress will improve their quality of life

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FENCE SITTERS – an in-depth profile: community connections

- 26% want to be more connected to PAC, significant over FOOD ACTIVES and EAT, DRINK & BE MERRYS
- In the past year top visited PAC venues include:
  - Parks & Recreation 55%
  - Church groups 52%
  - Walking trails 48%
- Most recognized school programs are:
  - Daniel Boone, Health materials brought home in child's backpack 37%
  - Owen J Roberts, Club PLAY afterschool program for middle school 24%
  - Perkiomen Valley, Health & nutrition education prog. for students/parents 21%
  - Pottstown, Healthy snack and nutrition education prog. at elementary school 21%

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FENCE SITTERS – an in-depth profile: community connections

- Largest barriers to using more PAC offerings:
  - Lack of time — 35%
  - Finances/cost of services — 17%
- Top interest in potential PAC sponsored activities include:
  - Free health screenings/assessments — 59% sig. over EDM
  - Outdoor recreation activities — 59% sig. over FA and EDM
  - Seminars on various health topics — 48% sig. over EDM
  - Health & nutrition education courses — 42% sig. over EDM
  - Mentorship program for children — 38%
  - Organized adult sports — 35% sig over FA, MB, EDM
  - Regional directory of alternative health care practitioners — 35% sig. over FA

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