

Executive Report
2017

HEALTHINERTIA.





Why do so many people with chronic conditions fail to take the steps they need to live healthier lives?

Even though consumers have become more empowered over the years, and the industry has made vast amounts of information available, this remains a common question.

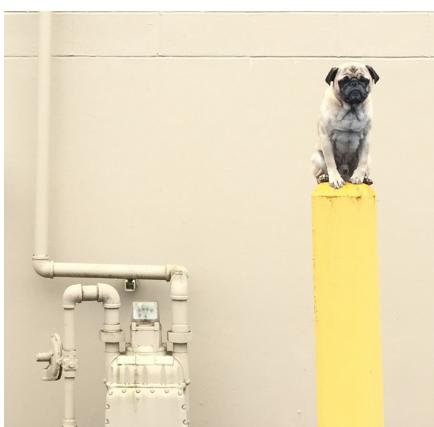
This behavior pattern is broad, from poor diets and bad sleep habits to failing to take critical medication and ignoring protocols for serious conditions. Together, these individual choices have a collective impact on everyone.

At Wunderman Health, we realize we are at an inflection point in the industry and now is the time to make fundamental changes to inspire consumers to take action.

That's why, in early 2017, we partnered with Penn Schoen Berland to study why people are reluctant to make positive choices and uncover the forces that could make a difference.

Through our analysis, we discovered that despite tangible evidence to the contrary, most people believe they are significantly healthier than they are, impeding their motivation to change and improve their health.

Further, our findings indicate that traditional marketing approaches reinforce rather than change this behavior pattern—ultimately causing what we have identified as “Health Inertia.”



Not for Me: the Dilemma of Health Inertia

During the study, we surveyed 750 people 18 years of age or older who live in the United States with chronic conditions. The study included representation from all age groups and geographies, and included health issues ranging from less serious ones like asthma, allergies, and psoriasis to more severe ones like heart conditions, diabetes, and emphysema.

In a clash between perception and reality, more than half of respondents (56%) said they were “healthy” or “very healthy.” This number rose to nearly all (80%) when we counted people who said they were of “average health.” At the same time, respondents admitted to numerous poor health behaviors, such as not getting enough sleep, not eating a balanced diet, and not spending time being active outdoors. The healthy behaviors they did report were far less impactful ones, such as taking vitamins, limiting caffeine, and getting regular health checkups.

Among those with chronic conditions: what they say vs. what they do





In fact, in spite of the large amount of educational health content available and their understanding of their own daily lives, 79% of respondents reported they were making average-to-very-good health decisions, and 61% reported that they were happy with the health-related information available. In addition to failing to make good lifestyle choices, over one-third (32%) stated that even with a threat to their overall quality of life they “would not take immediate action.”

As these findings highlight, Health Inertia creates a massive challenge for marketers: how to inspire change when change is not perceived as necessary.

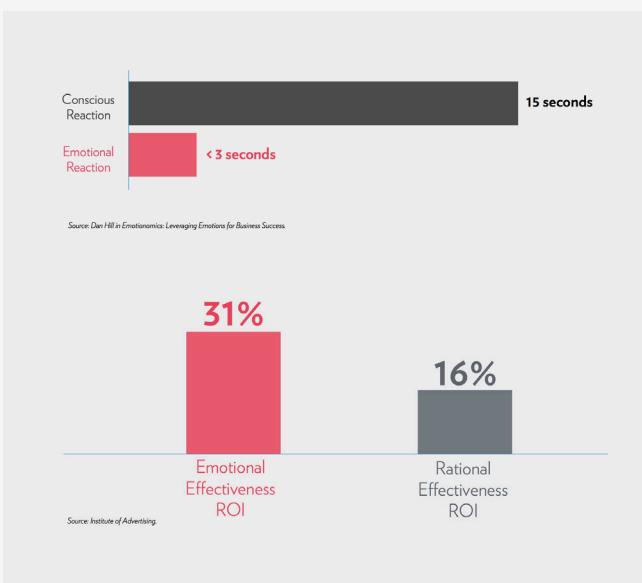
The New Personal: A Marketing Shift from Educational to Motivational

Part of the problem, we learned, lies in the current, accepted approaches to healthcare marketing. Today, marketers create vast amounts of content and advertising designed to influence new behaviors. All too often, this content is brand-centric and engages people around their conditions and options for treatment. It tends to be rational and factual, and educational rather than motivational.

However, research has shown that emotions are much more effective drivers of action, creating deeper and more lasting engagement with consumers.

Our research underscores this influence of emotions on decision making. Many people with chronic conditions find it hard to maintain their treatment and follow the correct protocols and directions. But survey respondents who felt positive about their health were much more likely to say that they do not face any personal challenges maintaining treatment (45% vs. 10% of those who feel negatively) and are much less likely to struggle with the motivation to follow their treatment plans (11% vs. 26% of those who feel negatively).

Action is not about information. It's about connecting emotionally around personal motivations and deep, sometimes even unconscious desires, like freedom, happiness, or the ability to be a better parent or partner. We need to shift from education to inspiration. From *“I should”* to *“I want.”*





Getting to Real Personalization

Successfully using emotion to inspire action requires us to understand what is important to people and why they do what they do. The good news is that with today's data and technology, companies have the ability to identify the right levels of personalization for their audiences and uncover the insights needed to motivate them.

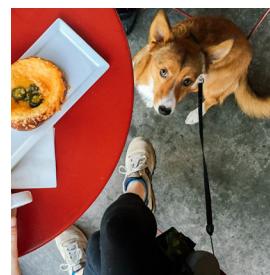
While the process can be complicated, by identifying important audience groups and tailoring marketing to them, we can make a big difference. Based on our research and experience, brands should start by considering the following categories.

Behavioral Categories

Our research showed that people living with health conditions fall into two broad behavioral categories: active optimists and lapsed worriers. Each has a different emotional profile and responds to different messages.

By understanding the differences between the two, we can help identify the personalized content, channels, stories, and emotional tone that will speak to their motivations.

	ACTIVE OPTIMIST	LAPSED WORRIER
EMOTIONAL STATE	Determined	Stressed, anxious
INFORMATION SEEKING	Empowered	Overwhelmed
CONTENT PREFERENCES	Lifestyle, wellness	Solving one problem at a time
PREFERRED RESOURCE	HCP	Own research
HELP ORIENTATION	Validation of choices	Crisp, clear baby steps





Condition Categories

Conditions impact patients in different ways emotionally, just as they do physically. Depending on condition, brands can identify specific factors that reinforce Health Inertia and those that disrupt it.

Taking on diabetes:



understand what it takes to maintain their health

are determined to manage their condition

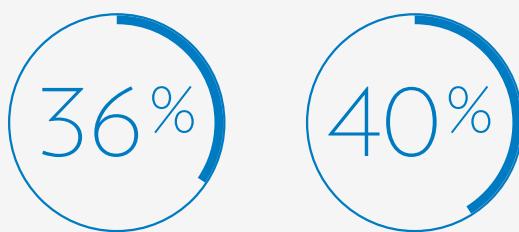
For one example, we can compare diabetics with people trying to lose weight. Our research showed that many of those with diabetes are determined, highly engaged, and educated about their health. 74% say they understand what it takes to maintain their health, while 38% are determined to manage their condition (+12% over those with other conditions).

They recognize they have a long-term issue and work closely with their doctors to maintain their health. As a result, they are particularly receptive to content that shows people living successfully with their condition.

People struggling to lose weight are in a very different place. Roughly one-third (36%) are not confident they fully understand what it takes to maintain their health, and most struggle to change behaviors. 69% find habits are hard to break, while 40% have tried and failed to break those habits in the past.

They tend to feel more stressed (41% vs. 25% of those with other conditions), depressed (28% vs. 17%), and helpless (20% vs. 13%). Unlike most surveyed, they are not confident that hearing from others like them will motivate them. But they do say they want resources, like life coaches, to support them (45% vs. 34%).

Struggling with weight loss:



were not confident they can maintain their health

have tried and failed to break habits in the past

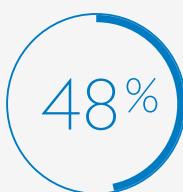




Demographic Categories

→ Age

Demographic information can also uncover powerful insights about certain groups. For example, we considered age in our research and found that while millennials are tech savvy, they are not health savvy. Half of all millennials (**48%**) say they are overwhelmed by the amount of health information available.



48% of millennials feel overwhelmed by health information



63% of boomers and 70% of golden agers feel empowered by health information



Baby boomers (**63%**) and golden agers (**70%**), on the other hand, report that it makes them feel empowered. In line with these findings, millennials say they prefer more personal interactions around their health, like having a health coach (**51%**). Golden agers prefer a support team of medical experts (**73%**).



51% of millennials prefer a “health coach,” while 73% of golden agers want a team of medical experts

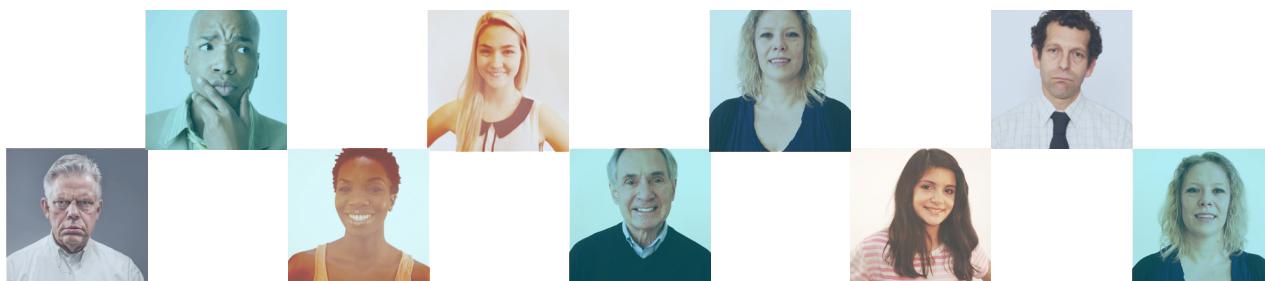


→ Gender

Another example is gender. In our research, men feel slightly more optimistic about their health than women (**36% men vs. 29% women**) and are more empowered by the amount of information available online about their condition (**66% men, 58% women**). Also, men are more likely to rely solely on their doctor for guidance about treatment (**48% men, 34% women**).

As to reasons for not sticking with a certain treatment? It's financial constraints for men (**37% men vs. 30% women**), and dissatisfaction with results for women (**53% women vs 34% men**).

Using these often subtle insights, marketers can make simple adjustments to campaigns that achieve significant results.





Getting to Real Emotion

So how do we engage emotionally in the right way? At Wunderman Health, we are using a series of artificial intelligence (AI) applications to help marketers understand the emotions that underpin people's beliefs and motivations in different disease states. Using these tools,

we can analyze the emotional tone of patients' language as they research and discuss their condition and health needs online. We can then use that insight to create personalized, motivational messaging. Let's see how it works.

1

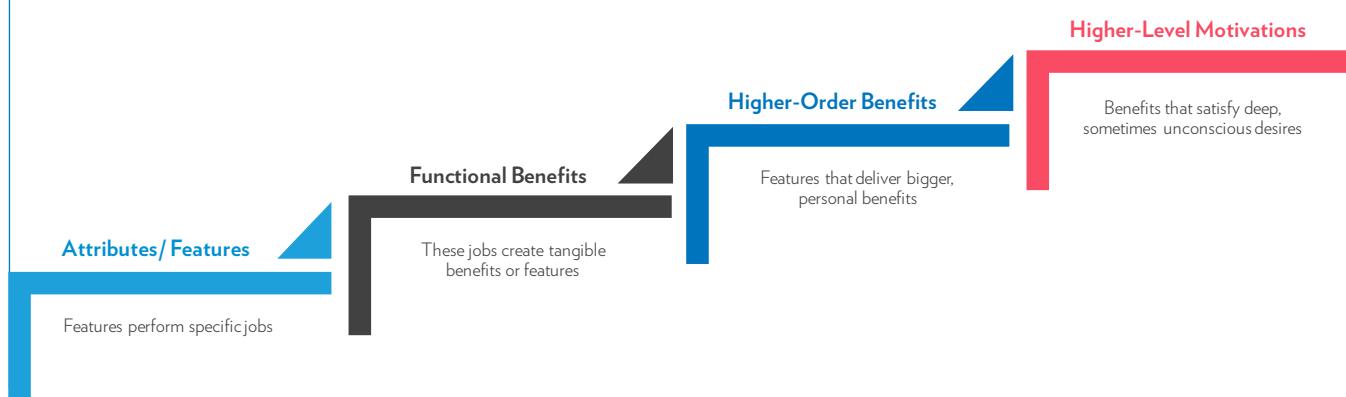
Means-Ends Analysis: Uncovering Motivation

In our work, we use a robust analytics methodology called "means-ends analysis." While complicated, we simplify it for this description. In this example, let's look at two people who want to quit smoking.

The first is Danny. For him, stopping smoking will lead to better blood circulation, which will give him more energy and the ability to spend time outdoors with friends and family. These experiences ultimately connect to his real motivations, security and safety.

Let's also imagine a 35-year-old man named George. For him, quitting is all about reducing smoking's negative impact on aging. That translates to a better appearance, a richer social life, and ultimately his real motivation, higher self-esteem.

Knowing that Danny is interested in family and safety and George is motivated by self-esteem is an important step in crafting personalized stories that talk to higher-level motivations.



	Attribute	Functional Benefit	Personal Benefit	Motivation
Danny	Better blood circulation	More energy	Spend more time outdoors with people I love	Family and security
George	Reduce aging	Better appearance	Improve my attractiveness	Self-esteem





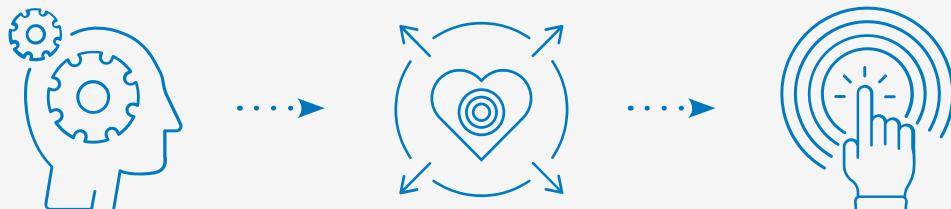
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Rapid Mass Experimentation: Connecting with Emotion

Knowing a person's motivation, however, is not enough. After all, talking about family and safety using joy as an emotional marker can be powerful. But would tapping into feelings of anxiety be more effective?

To find out, we use a tool called Rapid Mass Experimentation (RME). It is structured so that we can use a handful of in-market executions to test the outcome of thousands of different combinations of emotions and motivations. This enables us to create

messages that are emotionally intelligent and connect to personal motivations, while optimizing the images, tone, and messages to drive consumer engagement and inspire people to action.



3

Scale

The big advantage of this model is that it learns and scales rapidly. It can also be highly effective. In the past, we have seen a 10x–30x lift over traditional behavioral targeting.





Getting to Real Sources

In addition to discovering engagement strategies for brands, our survey revealed the importance of other content channels. In particular, we identified two promising avenues for improving health inertia

1

Role Models

People want role models. Our research showed that 65% of those with chronic health issues lack a positive role model for success. Hearing from others, however, motivates them to action. 77% said it encourages them to believe their challenges can be overcome, and 71% said it gives them hope that their quality of life can improve.

The implications of this are clear. Today, healthcare testimonials often feature idealized people and situations, usually portrayed by actors. Instead, consumers crave real people living with their conditions who can share their lives through content and social media channels.

2

HCPs

We also found that for many patients, their HCP remains their most trusted source for information. 40% say conversations with their primary care doctor are most likely to motivate better health choices, more so than any other factor, including family members and close friends.

This is true for active optimists in particular: 70% say their doctor is important in making health-related decisions, and 57% want advice for their entire lifestyle.

This represents an important opportunity. Although doctors are trusted, their advice tends to be rational and practical. If healthcare companies can provide them with tools and resources that speak to personal motivations, they can likely provide a big boost to those who want to make positive changes in their lives.

65%

report lacking a positive role model for success

77%

say hearing from others encourages them to believe their challenges can be overcome

71%

say it gives them hope that their quality of life can improve

40%

say conversations with their primary care doctor are most likely to motivate better health choices

70%

say their doctor is important in making health-related decisions

57%

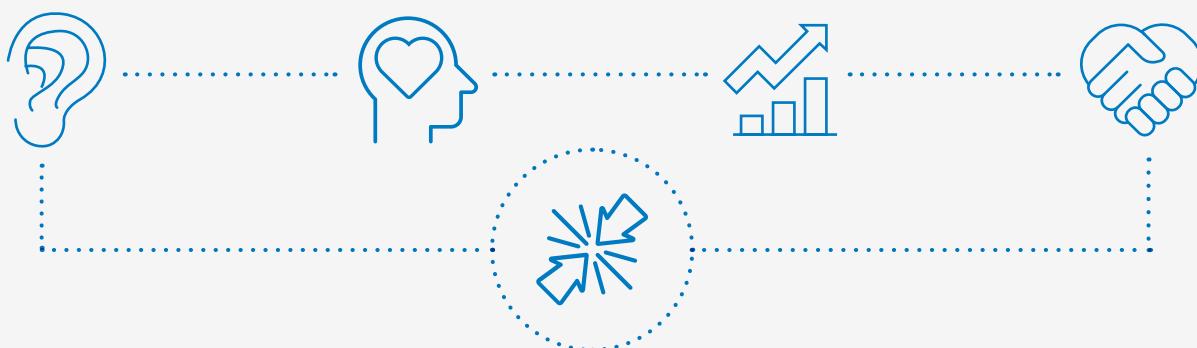
want advice for their entire lifestyle





Conclusion: A Time of Transformation

The healthcare marketing community is not only fighting serious health conditions, it is also fighting human nature. To effect real change, marketers must shift from campaigns with rational messages that educate to ones that use data to evoke emotions that motivate. Brands cannot assume they know what moves consumers anymore. They must get real insight.



Nothing is more personal than health, and the only way to inspire action is to connect with people around what truly matters to them. We can start by developing strategies and content for the different behavioral segments identified, and then layer in emotions and speak to motivations that ultimately inspire individuals to action.

Health Inertia is a deep-seated problem and an important challenge for healthcare marketers today. We are at an inflection point in which consumers are both more

empowered and more challenged. As costs shift to them and technology increases transparency, they will need to take a more active role in managing their health.

The companies that win will be those that forge emotional relationships with consumers to motivate better health decisions as a path toward earning their business and, more important from a long-term perspective, their trust.



HEALTHINERTIA



Survey Methodology

The findings are based on an online survey that Wunderman Health conducted in partnership with PSB from January 17–19, 2017. Healthcare consumers were defined as US Adults, age 18+, who experience at least one health issue, ranging from general/wellness (e.g., obesity, smoking, weight) to serious chronic health conditions.

The research was designed to understand the health consumer journey—what triggers action, what contributes to inertia, what education resources do healthcare consumers rely on, what types of information do they look for, do they need help building communities, what supports are needed to maintain treatment, and—once they have taken action—what more can brands provide to support them.

All numbers represent percentages unless otherwise noted. Columns that do not add up to 100 may be due to removal of “other” or “don’t know” responses, rounding of decimals, or acceptance of multiple responses.