

Cornell University Wellness Program

Cornell Wellness 4 YR Diversity Initiative Project Outcome

In Fiscal Year 2010-2011, the Cornell Wellness Program began a 4-year Diversity Initiative Project beginning with a [Project Initiation Plan](#). The purpose of the project was to increase the connection between Cornell Wellness offerings and the University's commitment to diversity. The project began with identification of three underserved groups: veterans, individuals of color, and generations. Needs of the identified groups ([veterans](#), [individuals of color](#), [generations](#)) were assessed through review of research, benchmarking of Ivy League Universities, and talking with representatives of diversity groups. Following this, a [GAP analysis](#) was run that compared the needs of the groups versus the programming offered by Cornell Wellness. Several GAPS were identified. A targeted communication and programming strategy plan ([Diversity GAP Analysis Plan](#)) was developed to reduce the GAPS and better serve the three identified underserved groups.

To assess the effectiveness of the changes implemented, fiscal year registration data was analyzed for the affinity groups: veterans, individuals of color, and generations. We used FY 2010-2011 registration data (which was prior to plan implementation) as a benchmark year; registration data for FY 2011-2012, FY 2012-2013, and FY 2013-2014 data were then compared against the FY 2010-2011 data. For generations, our marketing and programming changes specifically targeted the underserved populations of young professionals and older adults.

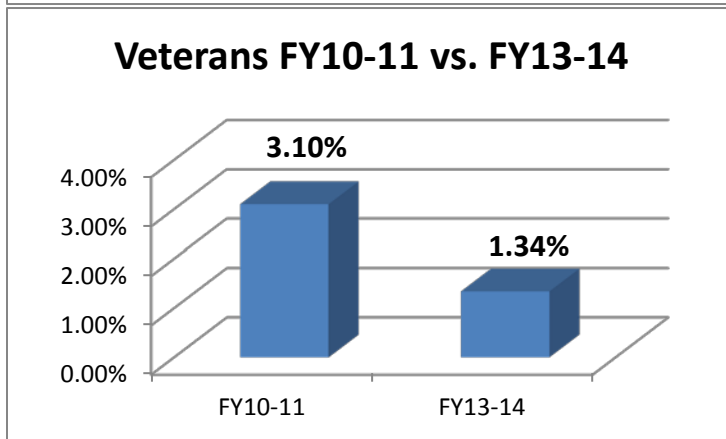
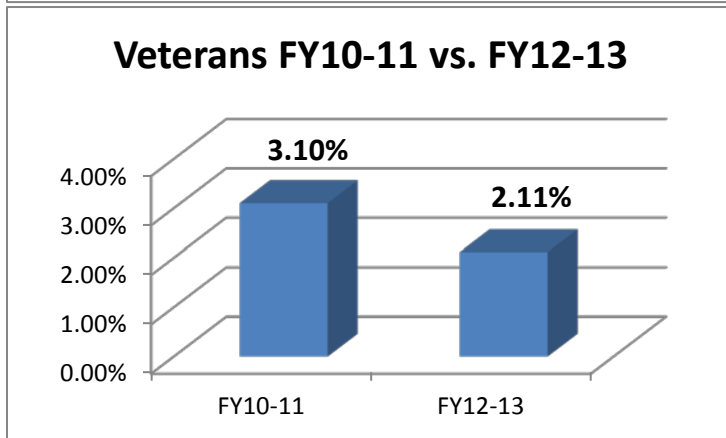
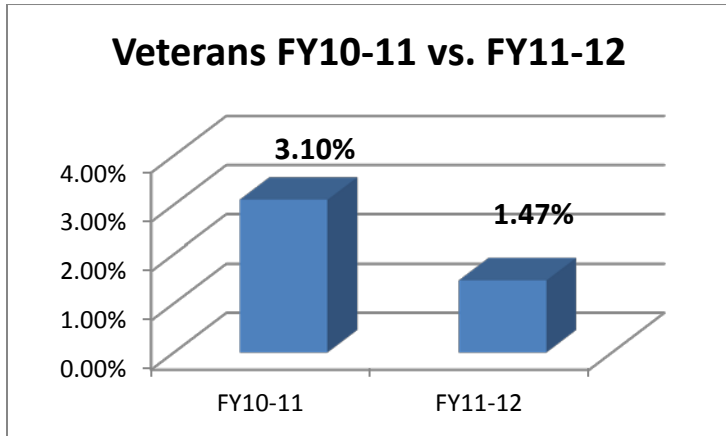
Was the plan successful?

For veterans

- 3.10% of total programming registrations for FY 10-11 (21 out of 660 total registrations) were by veterans
- 1.47% for FY 11-12 (20 out of 1364 total registrations)
- 2.11% for FY 12-13 (23 out of 1091 total registrations)
- 1.34% for FY 13-14 (13 out of 968 total registrations)

There was a substantial drop in percent registrations by veterans compared to baseline for all three years after the benchmarking year, which would indicate our plan was not effective. However, veteran status information was supplied through self-identification during program registration only and was not a required field; HRIS data did not include veteran status during the project years. This

may have affected the accuracy of the results. These results do indicate that the strategies used need to be re-evaluated for the future.

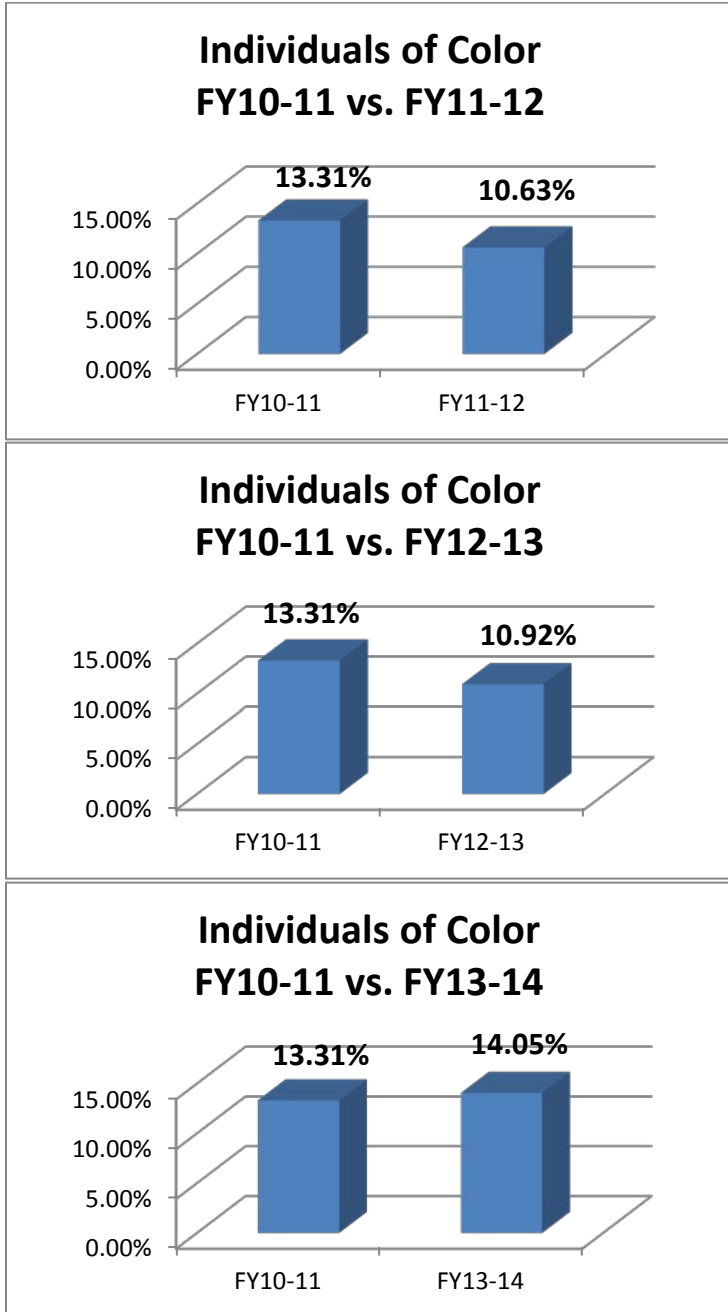


For individuals of color

- 13.31% of total programming registrations for FY 10-11 (86 out of 646 total registrations) were by individuals of color
- 10.63% for FY 11-12 (140 out of 1318 total registrations)
- 10.92% for FY 12-13 (114 out of 1044 total registrations)

- 14.05% for FY 13-14 (127 out of 904 total registrations)

Three year registration trend for individuals of color included a drop for two years followed by an increase over benchmark for the third year. This indicates our strategies were successful, but slow to have an impact, and should be continued.

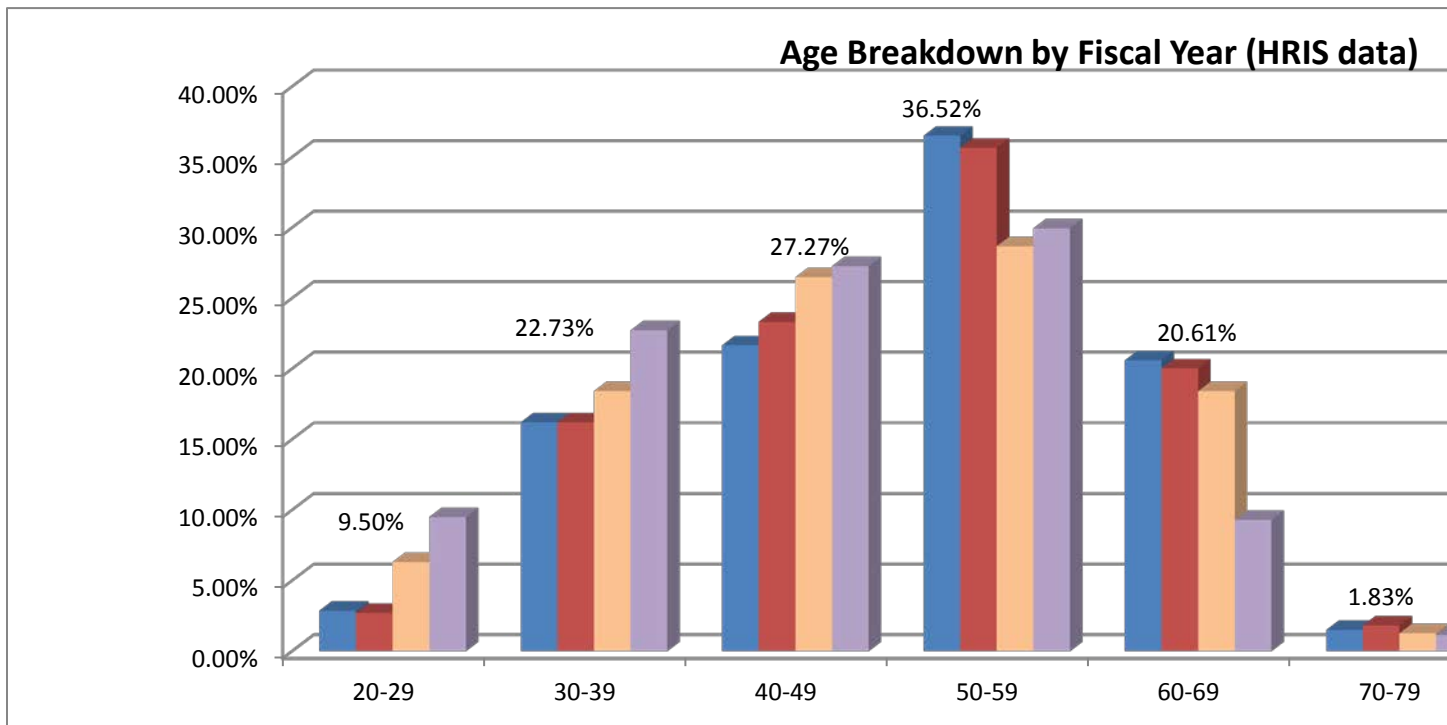


For generations – Young professionals (defined as age 20-29)

- 2.88% of total programming registrations for FY 10-11 (19 out of 660 total registrations) were by young professionals

- 2.71% for FY 11-12 (37 out of 1363 total registrations)
- 6.32% for FY 12-13 (69 out of 1091 total registrations)
- 9.50% for FY 13-14 (92 out of 968 total registrations).

After an initial one year drop below benchmark, the two following years saw a substantial increase above benchmark numbers for young professionals indicating the strategies used were very effective and should be continued.

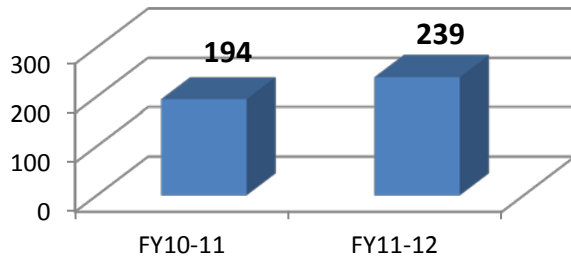


For generations – Older adults (defined as retirees/retirees spouses & partners)

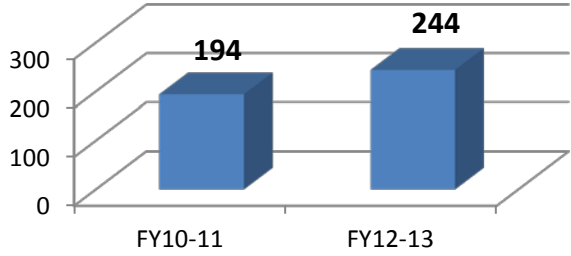
- There were 194 retirees/retirees spouses & partners who had Cornell Wellness memberships for FY 10-11
- 239 for FY 11-12
- 244 for FY 12-13
- 249 for FY 13-14

Membership data instead of program registration data was used to determine success for this population because HRIS data was not available during the project years for retirees/retirees spouses & partners. From the baseline year, there was a substantial increase in total membership numbers for retirees/retirees spouses & partners leading us to believe that our plan was successful.

**Older Adults
FY10-11 vs. FY 11-12**



**Older Adults
FY 10-11 vs. 12-13**



**Older Adults
FY10-11 vs. FY 13-14**

