

Wellness media: Consumption motives and relation to wellness orientation

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WELLNESS MEDIA: CONSUMPTION MOTIVES AND RELATION TO WELLNESS ORIENTATION

A quantitative study

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Abstract

Wellness is one of today's prominent megatrends influencing people's consumption motives. It shows as consumers' increased orientation towards wellness, as well as increased supply of wellness related products and services. This paper investigates the wellness phenomenon in the specific context of media consumption. While motives of media consumption in general have been widely studied in communication research, wellness themed media content has not yet received much academic attention. The purpose of this study is to examine the motives that drive the consumption of wellness themed media content, and to identify distinct consumer groups based on these motives. Further, this study seeks to examine the relation between the different motives of wellness media consumption and consumers' wellness orientation.

The theoretical background of the research subject is drawn from the extant literature on the uses & gratifications of media consumption, the relation between media consumption and health in general, and wellness orientation. Data was collected using a web-based survey, during fall 2014. Invitation to the questionnaire was sent to the target group, which was active Finnish speaking consumers of wellness media, and altogether 224 completed responses were received. The data was then analyzed using two primary multivariate data analysis techniques: factor analysis and cluster analysis. Factor analysis was first applied to identify underlying structures within the motives of wellness media consumption, and to prepare the data for cluster analysis. Next, cluster analysis was used to identify consumer groups based on their wellness media consumption motives. To further examine the differences in wellness orientation between the clusters, analysis of variance was applied.

Three main motives of wellness media consumption are proposed by the results: Information & Learning, Social Integration & Interaction, and Entertainment. Further, four consumer groups of wellness media are identified: Socially motivated consumers, Entertainment-seekers, Indifferent consumers and Information oriented consumers. As for the relation between the motives and wellness orientation, the findings indicate that social and information motives would be more strongly associated with higher wellness orientation than entertainment motives. The main contribution of this paper is in adding to the understanding of consumer behavior in the context of wellness media consumption. While offering valuable insight to the research subject, the findings also indicate that further research is needed in order to fully understand the motives of wellness media consumption and their relation to wellness orientation.

Keywords wellness, media consumption, uses & gratifications, wellness orientation, consumer behavior

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Tiivistelmä

Hyvinvointi on yksi tämän päivän merkittävistä ihmisten kulutusmotiiveihin vaikuttavista megatrendeistä. Se näkyy niin kuluttajien hyvinvointiorientoituneisuuden lisääntymisenä, kuin hyvinvointiin liittyvien tuotteiden ja palvelujen lisääntyneenä tarjontana. Tämä tutkimus käsittelee hyvinvointi-ilmiötä mediankulutuksen kontekstissa. Vaikka mediankulutuksen motiivit yleisesti ovat paljon tutkittu aihe, hyvinvointiteemoihin keskittyvät mediasisällöt eivät ole saaneet vielä merkittävää akateemista huomiota. Tämän tutkimuksen tarkoituksena on tutkia hyvinvointiin liittyvien mediasisältöjen kulutukseen liittyviä motiiveja, sekä tunnistaa näihin motiiveihin pohjautuen erilaisia hyvinvointimedian kuluttajaryhmiä. Lisäksi tavoitteena on tarkastella hyvinvointimedian kulutusmotiivien ja kuluttajien hyvinvointiorientaation välistä yhteyttä.

Tutkimusaiheen teoreettinen tausta pohjautuu mediankulutuksen uses & gratifications –teoriaan, ja olemassa olevaan kirjallisuuteen mediankulutuksen ja terveyden suhteesta, sekä hyvinvointiorientaatiosta. Aineisto kerättiin nettikyselylomakkeella syksyn 2014 aikana. Kutsu kyselyyn osallistumiseksi lähetettiin kohderyhmälle, joka koostui suomenkielisistä aktiivisista hyvinvointimedian kuluttajista. Vastauksia kyselyyn saatiin kaikkiaan 224. Aineisto analysoitiin pääasiassa käyttäen kahta monimuuttujamenetelmää: faktori- ja klusterianalyysiä. Faktorianalyysin tarkoitus oli pyrkiä jäsentämään hyvinvointimedian kulutusmotiivien rakennetta ja valmistelemään aineisto paremmin klusterianalyysiin sopivaksi. Klusterianalyysiä käytettiin tunnistamaan hyvinvointimedian kuluttajaryhmiä, perustuen hyvinvointimedian kulutusmotiiveihin. Lopuksi tukimenetelmänä käytettiin varianssianalyysiä, jonka avulla pyrittiin selvittämään mahdollisia eroja hyvinvointiorientaatioissa klustereiden välillä.

Tutkimustulokset osoittavat kolme päämotiivia hyvinvointimedian kulutukseen: informaatio ja oppiminen, sosiaalinen integraatio ja vuorovaikutus, sekä viihde. Lisäksi tulokset viittaavat neljän hyvinvointimedian kuluttajaryhmän olemassaoloon: sosiaalisesti motivoituneet kuluttajat, viihteenetsijät, välinpitämättömät kuluttajat sekä informaatio-orientoituneet kuluttajat. Tulokset antavat myös viitteitä siitä, että sosiaaliset ja informaatiomotiivit olisivat vahvemmin yhteydessä kuluttajan hyvinvointiorientoituneisuuteen, kuin viihdemotiivit. Tutkimuksen pääkontribuutio liittyy kuluttajan käyttäytymisen ymmärtämisen syventämiseen hyvinvointimedian kulutuksen kontekstissa. Tutkimustulokset tarjoavat arvokasta tietoa tutkimusaiheesta, mutta viittaavat myös siihen, että lisätutkimukselle on tarvetta, jotta voitaisiin paremmin ymmärtää hyvinvointimedian kulutukseen liittyviä motiiveja sekä niiden yhteyttä hyvinvointiorientaatioon.

Avainsanat hyvinvointi, mediankulutus, hyvinvointiorientaatio, kuluttajan käyttäytyminen

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1. Introduction

1.1. Background and motivations

The pursuit of personal health and wellness has gained ground increasingly among people's consumption motives (Grénman et al., 2014). The "wellness trend" materializes in contemporary consumption preferences and behavior. To take the example of nutrition, consumer awareness of healthier food products is increasing. Siró et al. (2008) for example, consider functional foods market to be "one of the most promising and dynamically developing segments of food industry". Market reports indicate increasing demand for other wellness related product categories as well, such as weight-loss supplements and sports clothing and accessories (Consumer Trends Study, BDC 2013). In addition to international examples, the current wellness megatrend affects consumption and business environment in Finland as well. The Finnish Ministry of Employment and the Economy (TEM) reports sports business to be among the most promising business opportunities in 2014, with health and wellness related products and services being one of the fastest growing segments in the industry. The size of the whole industry in Finland is currently around 5,5 billion euros (Liikuntaliiketoiminnan ekosysteemin muutokset, TEM 2014). In the same report, TEM claims sports originated communications, entertainment, and lifestyle products and services to be another especially fast growing segment. This segment brings us closer to the phenomenon under analysis in this paper, which is "wellness media".

In this paper, wellness media is understood as media content focused around wellness themes, such as nutrition or fitness. The term will be defined more in detail later in this chapter. As the awareness of the importance of healthy living increases its popularity among consumers, a variety of health and wellness related media content has become available. Television, for example, has featured numerous programs related to healthy lifestyle, that have gained popularity and spread inspiration among TV viewers. Stemming initially from the severe obesity problem in the United States, the American reality television shows "The Biggest Loser" and "You Are What You Eat", both having

their first season broadcasted in 2004, were among the first ones in their genre. While these kinds of programs have been claimed to provide motivation towards a healthier lifestyle by for example emphasizing the importance of hard work and willpower, they have also been criticized to reinforce the image of obese people as lazy and slothful, and to immorally encourage to excessive weight-loss (Sender & Sullivan, 2008). Nevertheless, wellness themed reality television continues to attract viewers. The selection has – luckily – grown in variety during the ten years after the first season of “The Biggest Loser”, now depicting a broader picture of healthiness instead of only extreme weight-loss stories.

Wellness themes in print magazines are not new on the media market, but the overall wellness consumption trend may have boosted the popularity of these magazines, or at least accounted for their staying buoyant regardless of the decline of the industry. While the traditional print media in general is experiencing hard times and losing market positions to digital media, it appears that health and wellness themed magazines are still able attract their readers. To illustrate, in 2013 the top two most popular women’s specialty magazines in Finland were “Hyvä Terveys” and “Kauneus & Terveys”, measured by circulation (Levikkitalasto 2013, MediaAuditFinland). Also internationally health and fitness themed magazines have been able to increase their sales (Dutta-Bergman, 2005).

On the digital side, along with the overall growing popularity of blogs, a great number of health, nutrition and fitness themed blogs have emerged as a part of the social media palette. For example Blogilista.fi, a website that collects and lists Finnish blogs, has listed over 7000 blogs under the categories of sports and exercise. A popular Finnish sporty lifestyle blogger community FitFashion.fi reports to have over 100 000 weekly readers. In addition to the blogosphere, other platforms of social media such as Facebook, Twitter and Instagram offer more low-threshold ways of sharing one’s own experiences, and on the other hand absorbing inspiration for a healthy lifestyle from the content shared by friends or other connections. At the same time, consumer search for wellness related information and content on the internet is growing (Cline & Haynes, 2001).

In the light of the above notions it seems that the wellness trend is present in both consumers' everyday consumption habits and in today's media content. However, what motivates the growing consumption of wellness media content and what is the relation between these motives of wellness media consumption and consumers' increasing wellness orientation are questions that have not yet received much academic attention. Existing literature about the relationship of media and health in general has focused around themes such as the media's effect on consumers' self perception and body images (e.g. Jung & Lennon, 2003; Smeesters & Mandel, 2006; Hill, 2009), the effects of media consumption on unhealthy diet (e.g. Gore et al., 2003; Harris & Bargh, 2009) or the active search of health and medical information from the internet (e.g. Cline & Haynes, 2001; Dolan et al., 2004; Gray et al., 2005; Lewis, 2006).

This paper aims to fill a gap in existing research by linking the two topics: wellness media consumption motives and consumers' wellness orientation. Applying a quantitative approach, this paper seeks to examine the motives that drive individuals in the consumption of wellness media content, and to identify distinct consumer groups within the users of wellness media based on these motives. Further, the interest of the paper is to study the relation between the motives of wellness media consumption and wellness orientation among the identified groups. The research is carried out in the context of Finnish consumers and Finnish media environment. The specific objectives of the current paper and the research questions are presented in the following chapter.

1.2. Research problem and objectives

The primary contribution of this paper is to provide more insight to the underlying structure behind the motives that drive the consumption of wellness media, and the linkages that potentially exist between the motives and wellness orientation. To address the goals set for this research, the paper attempts to find an answer to the following main research question:

How does the consumption of wellness media relate to consumers' wellness orientation?

The main research question is further broken down into two individual sub-questions which will guide the empirical part of the paper, as well as help to get a more structured view of the research topic and answer the main research question in the best possible manner. The two sub-questions are:

- 1. What kind of consumer groups can be identified among wellness media users, based on their motives for wellness media use?*
- 2. How does consumers' wellness orientation differ across the identified consumer groups?*

The research questions will be answered through the empirical part of this paper. The first sub-question will be covered by conducting a cluster analysis to identify consumer groups with different profiles based on their motives to use wellness media. These groups further serve as a means to link the consumption motives with wellness orientation. The second sub-question in turn relates to the wellness orientation of the consumer groups identified in the preceding stage. By comparing the strength and dimensions of wellness orientation of the identified consumer groups, this study attempts to unveil possible associations with the different motives of wellness media consumption, and different levels of consumers' wellness orientation. These comparisons will be done with analysis of variance.

Supporting the objectives of this paper, a literature review is conducted around the research on media use and wellness orientation. The literature review will first focus on what kind of motives consumers have towards media consumption in general. Consumers tend to use different types of media for different purposes (Kilian et al., 2012). Based on what reasons they choose the media channels and content they decide to consume? In addition, extant literature on the relationship between media and health in general is reviewed, as well as how past research has defined the wellness oriented consumer.

1.3. Key definitions

For the best possible understanding of the topic of this paper, a few concepts should first be more clearly defined:

Wellness. The term in this paper does not explicitly refer to the mere maintenance of health or a disease-free condition, though wellness activities do partly aim at preventing disease. Rather, wellness can be understood as a lifestyle that aims at the maximization of a person's physical and emotional health and well-being (Ardell, 1977; see Kraft & Goodell, 1993). It means improving one's life quality holistically, beyond "not being sick". Wellness activities or themes include for example attention to diet, physical exercise, stress management and awareness towards health issues and one's health environment (Ardell, 1977; see Kraft & Goodell, 1993; Bloch, 1984).

Wellness media. Refers to a genre of media content that is focused around wellness themes, which were described above in the context of defining the concept of wellness. These themes may include for example attention to a healthy diet, or physical exercise. Media channels under focus in this paper are television, print magazines and online blogs. Examples of wellness media content in these channels are wellness themed magazines such as "Kauneus ja Terveys" in print media, weight loss programs such as "You are what you eat" in television, or fitness and healthy nutrition themed blogs in online media.

Wellness orientation. An individual's orientation towards pursuing the wellness lifestyle. Refers to the consumer's involvement in wellness related issues (Gould, 1988) and includes both attitudinal and behavioral dimensions. According to Kraft & Goodell (1993), wellness orientation includes the following dimensions: health environment sensitivity, personal health responsibility, nutritional awareness and stress management, and physical fitness.

1.4. Structure of the thesis

The paper will be structured as follows. First, a review of related literature is needed to understand the background and logic of the research phenomenon. The literature review in chapter two is organized under two main titles. The first part covers the relevant prior research on media consumption. Because of the significance of the rapid expansion of digital media, I will first briefly go through the recent changes in media environment, which influence today's consumers' media consumption habits. Next, the existing research on the motives of media use is reviewed, specifically focusing on the research vein originating from mass media uses and gratifications theory. Finally, the focus is shifted towards what extant literature has discovered about the relation of media use on consumers' health and wellness in general. The second part of the literature review will focus on wellness orientation. The definition of the wellness construct and wellness orientation, as well as the characteristics of the wellness oriented consumer are discussed. In addition, the association between media use and wellness orientation is briefly discussed in the light of extant literature.

Chapter three will explain the methodological choices of this study, including the description of the data collection procedure, the measures, and the principal statistical analysis methods – factor and cluster analysis – used. The validity and reliability of the methods are also discussed. Chapter four will present the results of the quantitative analysis: factor analysis and cluster analysis, cross tabulations to support the cluster interpretation, and analysis of variance. Chapter five includes the conclusion and discussion of the key findings in the light of existing literature, together with managerial implications, limitations and some potential directions for further research opportunities.

2. Literature review

2.1. Media consumption

2.1.1. Characteristics of media types

The industry of mass media has experienced major changes during the past decades (Napoli & Ewing, 2001). To provide a picture of the contemporary mass media field, this section will briefly go through the recent evolution of the media environment and the characteristics of the most important mass media channels used by today's consumers.

The logic of the traditional forms of mass media such as newspapers, magazines, radio and television, is based on one-to-many communication, in which the consumer is mainly a passive receiver of the message (Hoffman & Novak, 1996). Content is transmitted to the consumer but no real interaction exists between the sender and the receiver of the message. The emergence of the internet started a profound transformation in the media field, and enabled new ways of communication for both mass media and interpersonal communication. Though considered a mass medium similarly as other more traditional media forms, the internet significantly broadens the communication possibilities when compared to traditional media. It enables both one-to-one, one-to-few, one-to-many and also interactive many-to-many communication (Hoffman & Novak, 1996; Morris & Ogan, 1996). Its interactive nature liberates the consumer from the role of a passive receiver into an active participant in the web-based interactions (Hoffman & Novak 1996).

Next step forward was the development of Web 2.0. The burst of the dotcom-bubble in 2001 is often considered as a turning point that signaled a time for a new web technology to replace the old one (O'Reilly, 2007). Whereas the logic of Web 1.0 was largely based on static content published by individuals or companies such as personal or company web pages, Web 2.0 relies on "architecture of participation". Its content is

continuously updated and modified by its users (O'Reilly, 2007). This novel technology built a basis for an entirely new form of media, the social media.

In everyday language, the term “social media” is sometimes used as a synonym for social network sites such as Facebook. However, in many academic papers the term holds a broader meaning. Following the definition by Kaplan and Haenlein (2010), social media refers to the whole collection of applications that are based on the ideology and technology of Web 2.0, and which enables the creation and exchange of user generated media content. According to this definition, social media types include blogs, collaborative projects (e.g. Wikipedia), social network sites (e.g. Facebook), content communities (e.g. YouTube), virtual social worlds, and virtual game worlds (Kaplan & Haenlein, 2010). For the purposes of the current paper, the most relevant type of social media are blogs, therefore they will be more closely introduced in the following.

According to Kaplan and Haenlein (2010), blogs represent the earliest form of social media. Blogging in its current form began to spread around the turn of the millennium, and started to gain popularity when easy-to-use blogging platforms such as Blogger were developed (Singh et al., 2008). Blogs can be defined as websites that typically display time-stamped posts in chronological order. Kaplan and Haenlein (2010) describe them as “social media equivalents to personal websites”, that were common in the era of Web 1.0. However, blogs are not static in nature but have also interactive features. The blog host posts content for readers, which the readers can comment if they so choose. Blogs thus provide a media channel where users can gather together to share opinions, and which uniquely combines news information with self-expression (Kaye, 2005).

For the blogger, blogs serve as a medium for sharing thoughts and experiences (Hsu & Lin, 2008). The earliest blogs were created in the purpose of an online diary, and often served primarily to keep in touch with family and friends (Kaye, 2010). Today, a great variety of blogs specialized in certain topics exist and blogging is a lot more public in nature (Kaye, 2010). What makes blogging especially attractive to bloggers themselves, is the ease of use: blogging platforms make hosting a blog possible for anyone that has

access to a computer and the internet, no technical background of knowledge of for example HTML language is required (Singh et al., 2008).

Despite the growing importance of digital media, studies to date have indicated that traditional media still holds its place among consumers' media choices. When studying media uses of the younger generation, the "digital natives", Kilian et al. (2012) found that traditional media (television, radio and print media) is still used by the majority of this group of consumers. Valentine and Powers (2013) found indications of similar nature. In fact, their study implied television to be the primary media used by the net generation, being almost on par with the internet. Nevertheless, electronic media altogether (television and the internet) was found to be the most used form of media by these consumers in the study.

2.1.2. Motives of media use: The Uses and Gratifications Approach

While media types differ in their characteristics and features, they are also used by consumers for different purposes. A widely adopted approach in the research of the purposes and motives of media use is the uses and gratifications theory, which is considered to be a sub-tradition of media effects research (McQuail, 1994). This tradition emerged initially from the very early empirical studies in communication research, dating from as early as the 1940's (Ruggiero, 2000). These first studies examined the gratifications, i.e. the satisfactions sought, that attracted audiences to certain media types or content (Cantril, 1942). Later studies attempted to explain the patterns of mass media consumption through motives of media selection, had an audience-centered perspective and were conducted in a socio-psychological mode. These studies formed a tradition that became known as the uses and gratifications theory (McQuail, 1994; Ruggiero, 2000).

Uses and gratifications theory proposes that consumers are active in selecting the media appropriate for their purposes. They choose media based on how well its content satisfies their social and psychological needs (McQuail, 1994). By nature, the approach is functional in the sense that it assumes that consumers use media to solve their problems, rather than being passive receivers of the messages of overpowering

media (Katz et al., 1973b). Critics of the approach have accused it for example of vague conceptualization, imprecise definition of its key concepts, and disorganized research methods (Swanson, 1977; Lometti et al., 1977). In addition, the approach has been criticized for relying on self-reported interpretations of lifestyle and attitude variables, ignoring observational techniques that could provide more valid findings (Rosenstein & Grant, 1997).

Proponents of the approach have made efforts in responding to the critique and despite its skeptics the theory is still widely applied in communication research (Ruggiero, 2000; LaRose & Eastin, 2004). The propositions of uses and gratifications have been revised and reformulated during the decades since the first studies. McQuail (1994) suggests an updated statement of the basic proposition of the paradigm, which is somewhat less functionalist and emphasizes the links between social background and media expectations, expectations and media use, and expected and obtained satisfactions:

“(1) Personal social circumstances and psychological dispositions together influence both (2) general habits of media use and also (3) beliefs and expectations about the benefits offered by media, which shape (4) specific acts of media choice and consumption, followed by (5) assessments of the value of the experience (with consequences for further media use) and, possibly, (6) applications of benefits acquired in other areas of experience and social activity.”
(McQuail, 1994)

A common feature of existing research based on the above theoretical foundation is the grouping of motives and needs that drive media selection: many papers have sought to establish their own typology or a classification scheme of audience gratifications, according to what type of social and psychological needs they respond to (Katz et al., 1973a). Separate typologies have also been one source of criticism towards uses and gratifications theory, claimed to result in unsynthesized research findings (Ruggiero, 2000). On the other hand, these classifications are in many cases more or less overlapping and often consist of parallel need items. For example, Katz et al. (1973b) use four categories: 1) information, knowledge and understanding, 2) gratifications

and emotional experience, 3) credibility, confidence, stability and status, and 4) contact. LaRose and Eastin (2004) in turn approach media use from the perspective of outcomes, combining uses and gratifications with social cognitive theory. Their classification has six categories: activity, monetary, novel, social, self-reactive and status outcomes. Papacharissi and Rubin (2000) arrived at five categories in their study of internet use: interpersonal utility, pass time, information seeking, convenience and entertainment.

Another empirically derived classification scheme was suggested by McQuail et al. (1972). This typology consists of a list of need items, falling into four distinct main categories: Information, Personal Identity, Integration and Social Interaction, and Entertainment (Figure 1). Duplications with the aforementioned classifications by other researchers may be seen for example between Katz et al.'s (1973b) "information/knowledge/understanding", Papacharissi's and Rubin's (2000) "information seeking" and McQuail et al.'s (1972) "Information". Similar kinds of duplications between the typologies can be found in other categories as well. McQuail et al.'s (1972) typology is rather simple, compressing the need items into only four categories, which makes it perhaps easier to manage. This typology has been later applied to other studies of media usage, for example in a rather recent study by Kilian et al. (2012) on the media use of the so-called "net generation", which examined the purposes of the use of both traditional and social media. Due to its manageability and applicability, McQuail et al.'s (1972) typology was chosen as the initial classification scheme of media use motives for the current study.

<p>Information</p> <ul style="list-style-type: none"> • Finding about immediate surroundings, society and the world • Seeking advice on practical matters • Satisfying curiosity • Learning 	<p>Integration and Social Interaction</p> <ul style="list-style-type: none"> • Gaining insight into the circumstances of others • Gaining sense of belonging • Finding a basis for conversation • Substitute for real-life companionship • Connection with family, friends and society
<p>Personal Identity</p> <ul style="list-style-type: none"> • Reinforcement for personal values • Finding models of behavior • Identifying with valued others • Gaining insight into valued others 	<p>Entertainment</p> <ul style="list-style-type: none"> • Escaping from problems • Relaxation • Cultural or aesthetic enjoyment • Filling time • Emotional release • Sexual arousal

Figure 1. Dimensions of media consumption motives. (Adapted from Kilian et al. 2012 and McQuail et al. 1972)

2.1.3. Motives for using different media types

As for the traditional media, television or video has usually been ranked high by users for entertainment purposes in general (Perse & Courtright, 1993; Kilian et al., 2012). Katz et al. (1973b) found however, that television is perceived a good medium especially for killing time or relieving boredom, but is not very helpful in satisfying its users’ escapist needs. Perse & Courtright (1993) on the other hand, argued something of the contrary: their findings suggest that television is perceived to be helpful in forgetting about work and other things. They also found television viewing to be perceived as a relaxing activity.

For traditional print media, other than books, information is considered the dominant motive for use (Perse & Courtright, 1993; Kilian et al., 2012). It is perceived useful in supporting learning (Perse & Courtright, 1993) and also for providing topics for conversations with family members and friends (Katz et al., 1973b). Although Katz et

al. (1973b) found newspaper reading to be partly driven by self-regulation and self-confidence motives, print media in general is not perceived very useful for identity purposes and social interaction motives. The same is true for television (Kilian et al., 2012). The inability to satisfy social interaction needs of these media is hardly a surprise, as traditional media do not usually allow interaction between users in the way that digital media does (Hoffman & Novak, 1996).

In addition to traditional media, the uses and gratifications of the internet have also been explored (e.g. Korgaonkar & Wolin, 1999; Papacharissi & Rubin, 2000; LaRose & Eastin, 2004). In fact, some have argued that despite the certain weaknesses of the paradigm - or perhaps because of them - the uses and gratifications is a suitable approach especially for studying internet use (Bouwman & van de Wijngaert, 2002). This view is based on the notion that new media is not fundamentally designed for only sending information to the audience but for audience to seek for the information they need. The basic assumption of uses and gratifications about the active audience is thus well supported in the case of new media (Bouwman & van de Wijngaert, 2002). The internet has, however, also posed new challenges to communication researchers with its characteristics that the traditional media lacks, such as interactivity, hypertextuality and multimedia opportunities (Ruggiero, 2000).

The need for information plays a central role in the use of internet as a medium. Papacharissi and Rubin (2000) argue information to be the most salient motive in internet use. In addition, internet use has been found to be motivated by both entertainment and social interaction needs (Korgaonkar & Wolin, 1999; LaRose & Eastin, 2004). The findings of Papacharissi and Rubin (2000) suggest that social interaction motive has an especially strong linkage to internet use when the user has a tendency to avoid face-to-face interaction, or if they find face-to-face interaction less rewarding. This supports the possibility that if a certain medium fails to fulfill a gratification, another medium is sought to serve a replacement.

In the era of the various more or less social applications of the internet, it is perhaps no longer relevant to study the use of the internet as a whole. The motives for using different types of social media vary as well. Research applying the uses and

gratifications approach have proposed several motives for engaging in blog reading. Kilian et al. (2012) suggest that the primary motive for blog use is the need or desire for information. However, for blogs, the information motive does not dominate other motives as strongly as for the most information-intensive type of social media, collaborative projects (e.g. Wikipedia). Blogs are also read for purposes of entertainment and inspiration, as well as to stay up to date with current topics and events, which provides social advantage and possibilities to connect with others (Heinonen, 2011). In other words, blogs also serve in fulfilling integration and social interaction needs (McQuail, 1994; Kilian et al., 2012).

Some studies have applied the existing typologies derived from earlier media type selection studies on studies of blog use, or examined the use of different types of social media with a same typology (e.g. Heinonen, 2011; Kilian et al., 2012). Kaye (2010) suggests an empirically derived classification for blog usage motivations specifically. In the study, blog reading was found to be motivated by (in order of significance): convenient information seeking, anti-traditional media sentiment, expression/affiliation, guidance/opinion seeking, blog ambiance, personal fulfillment, political debate, variety of opinion, and specific inquiry. The importance of information seeking motive is clearly consistent with other research (Heinonen, 2011; Kilian et al., 2012). Likewise expression/affiliation, which closely relates to social integration and interaction needs, as well as personal fulfillment which relates to entertainment needs were findings in line with other studies. An interesting finding in Kaye's (2010) study is the importance of anti-traditional media sentiment, which ranked second in order of importance of the motives. This indicates that many blog readers are motivated by the fact that blogs are independent of traditional media, thus offering less biased and more trustworthy information.

2.1.4. Media and health

Mass media affects many areas of consumers' lives. In this paper, however, the focus is kept on media's relation to health and wellness related issues. Walsh-Childers and Brown (2009) propose a three-dimensional typology for media effects on health. The first dimension, level of effects is divided into two categories: personal level refers to

changes in individual health-related attitudes and behaviors, whereas public level refers to effects on policy makers' and the public's attitudes. The intention of the message producer forms the second dimension: media effect may be either intended, for example in public health campaigns, or unintended, when the attitudes or behaviors are adopted from the media as a sort of side-effect, without the message producer's intention. All of the personal or public, intended or unintended, may be either positive or negative.

Concerning the topic of the current paper the most interesting dimensions in Walsh-Childers and Brown's (2009) typology are intended and especially unintended personal level effects on health attitudes and behavior. The research around intended media effects at personal level consists largely of studies about the negative effects of advertising unhealthy products such as tobacco or alcohol (e.g. Pierce et al., 1991; Pechmann & Ratneshwar, 1994; Stacy et al., 2004; Snyder et al., 2006). Also the advertising of unhealthy food products has been shown to affect consumers' perceptions and attitudes towards the advertised foods (Dixon et al., 2007) and diet quality (Harris & Bargh, 2009), especially for children. The effect is not only present for unhealthy foods, but as Dixon et al. (2007) suggest, also the exposure to healthy food advertisements increase positive attitudes towards healthy foods.

Unintended media effects on the personal level health have been studied especially in the context of entertainment media. These effects occur when viewers adopt either healthy or unhealthy behaviors or attitudes from for example movies or television programs (Walsh-Childers & Brown, 2009). Prior research indicates that the consumption of entertainment media is associated with unhealthy diet and obesity. The mere amount of time spent viewing television has been proposed to be related to the healthiness of diet (Harris & Bargh, 2009). Several reasons for the association between entertainment media consumption and obesity have been suggested. For example, television viewing has been associated with unhealthy snacking behavior, which may lead to increase in body weight (Gore et al., 2003). Some researchers have found evidence that television viewing predicts a decrease in nutritional knowledge and reasoning (Harrison, 2005). While the implications of a relationship between media use and diet are evident, for physical activity they are less clear. A weak negative

relationship between entertainment media use and physical inactivity has been detected for example in studies by Robinson et al. (1993) and Marshall et al. (2004) but this association has not been considered strong enough to be very relevant.

In addition to its potential relation with obesity, the consumption of entertainment media has often been accused of transmitting bad influences with regard to alcohol, tobacco and drug use. Substances are very frequently depicted in entertainment media, especially in movies and television (Roberts & Christenson, 2000). Substances are not only present in adult films and programs, but even in media content targeted to children, as was shown by a content analysis of Disney animation classics by Ryan and Hoerrner (2004). Only 3 out of the 24 films examined in the study contained no portrayal of alcohol or cigarettes, and in a few films even children were depicted using these two substances. Research has indicated that the exposure to entertainment media with its depictions of substances is associated with increased and earlier onset of substance use, especially in adolescence (Robinson et al., 1998; Charlesworth & Glantz, 2005).

As for the new media, perhaps the most notable health effect of the internet is the fact that it has brought a vast amount of information available for its users. More and more people are turning to the internet to search for health information (Brodie et al., 2000). The Internet is widely accepted as a potential health information source, and this information is also generally considered reliable by consumers (Diaz et al., 2002; Gray et al., 2005). People report to search the internet for information about for example a specific disease and treatment (Brodie et al., 2000; Dolan et al., 2004), medicine or drugs and their side-effects (Brodie et al., 2000; Diaz et al., 2002), preventing disease (Brodie et al., 2000) or nutrition and diet (Diaz et al., 2002).

2.2. Wellness orientation

2.2.1. The wellness oriented consumer

In order to understand the levels of wellness orientation of the different consumer groups of wellness media content, a brief introduction to the concept of wellness and wellness orientation is in place.

First of all, here “wellness” does not only refer to a disease-free condition, but as Ardell (1977; see Kraft & Goodell, 1993) states, it is a lifestyle that aims at the maximization of a person’s physical and emotional health and well-being. According to this view, a person that pursues a wellness lifestyle does it not only to prevent disease, but to move up towards the positive end of the wellness scale, which other end is death and the other is high-level wellness. Ardell (1977; see Kraft & Goodell, 1993) proposes wellness to consist of five dimensions: self-responsibility, nutritional awareness, stress awareness and management, physical fitness, and health environment sensitivity.

Consumers’ wellness orientation is a multidisciplinary phenomenon that has gained growing interest in recent decades for example among the researchers of psychology, health education, preventive medicine, public health, epidemiology, sociology, marketing and consumer research (Moorman & Matulich, 1993). Research tradition on the phenomenon, however, is still relatively young and researchers have used varying terms to refer to the phenomenon itself, as well as to other overlapping phenomena. For example, the term “health consciousness” is used by several studies to refer to the consumers’ overall orientation towards health and wellness (e.g. Kraft & Goodell, 1993; Jayanti & Burns, 1998; Michaelidou & Hassan, 2008). Some researchers in turn use a broader term of “health orientation” or “wellness orientation”. For example in Dutta-Bergman’s (2004) definition of health orientation, health consciousness is merely one part of the construct, together with health information orientation, health-oriented beliefs and healthy activities. The current paper applies a broader view of the concept and, to avoid confusion, will from now on use the term “wellness orientation”.

Many variations of models explaining wellness orientation and related behaviors exist, partly because of the interdisciplinary nature of the topic (Moorman & Matulich, 1993). One central basic model however, is the health belief model, which explains health related behaviors with the person's attitudes and beliefs. According to the model, health behaviors are dependent on the willingness to prevent illness (goal) and the belief that the health behaviors will be effective in preventing illness (likelihood of goal achievement) (Janz & Becker, 1984). Wellness oriented consumers are driven by the motivation to be healthy, which increases the consumers' engagement in preventive health behaviors, such as maintaining a healthy diet, seeing a doctor for check-ups or searching for health related information (Moorman & Matulich, 1993).

Jayanti & Burns (1998) propose that the tendency to engage in preventive health behaviors is reinforced by several constructs. *Health motivation* refers to the person's internal goal-direction towards undertaking preventive behaviors, which could be linked to the goal-dimension in health belief model. Another construct promoting the engagement in preventive health behaviors according to Jayanti and Burns (1998) is *response efficacy*, referring to the belief that a certain behavior has an effect on the person's health, consistent with the likelihood of goal achievement in health belief model. In addition to these, Jayanti and Burns (1998) include *health consciousness* - the extent to which health concerns are integrated into the person's daily life, and *knowledge about preventive health behaviors*, which has an indirect effect on preventive health behavior engagement through response efficacy.

Wellness orientation is not merely a medically defined lifestyle, but from a marketing point of view it can also be understood as an orientation towards consumption (Kraft & Goodell, 1993). Wellness oriented consumers are an important target group for product and service providers in the wellness industry, and understanding this segment is thus relevant also from the commercial perspective. Some demographics, such as age, education and income, have been indicated to correlate with preventive health behaviors (Gould, 1988). However, psychographic profiles may offer a more powerful means of identifying the wellness oriented consumer segment (Kraft & Goodell, 1993). In addition, there might not be just a single type of wellness oriented

consumer, but multiple segments of wellness orientation (Bloch, 1984; Kraft & Goodell, 1993).

Kraft & Goodell (1993) put effort in developing a useful scale to identify the wellness oriented consumer segment. They went through the extant literature to search for items used in the context of wellness orientation, and constructed a scale that was tested in 5 independent studies, which determined the final number of scale items and confirmed its validity and reliability. Kraft and Goodell (1993) adopt the dimensions of wellness by Ardell (1977; see Kraft & Goodell, 1993), however combining two of the original dimensions into one based on their validation studies. Kraft and Goodell's (1993) scale includes four dimensions, which together capture both attitudinal and behavioral aspects of wellness orientation. The first dimension is *Health Environment Sensitivity*, which refers to the individual's concerns for the environment's impact on their health, for example things such as drinking water quality and food chemicals. *Physical Fitness* is an action-based dimension, which relates to the active maintenance and improvement of physical health. *Personal Health Responsibility* depicts the individual's attitude towards the responsibility over their own health. If personal health responsibility is low, the person may for example feel it is the doctor's job to keep them healthy. The last dimension, *Nutrition and Stress Management* is concerned with both the healthiness of the person's diet as well as stress reduction. In the current study the wellness orientation scale by Kraft & Goodell (1993) will be applied in the empirical part to assess the degree of wellness orientation of the consumers of wellness media content.

2.2.2. Wellness orientation and media use

A handful of researchers have made attempts to study the linkage between media use and wellness orientation. For example Moorman & Matulich (1993) found that the amount of health related information acquired from different media sources increases with the person's level of health motivation. In other words, consumers with high health motivation are also heavier users of media sources for health information. In addition to the amount of media use, the use of different media channels seems to vary between wellness orientation levels. According to Dutta-Bergman (2004), wellness

oriented consumers are more likely to use active media channels, such as print media and internet, as their primary source of health information. For consumers with no wellness orientation, passive media channels such as television tend to serve as the primary health information source. On the behavioral side, healthy lifestyle behaviors such as healthy eating and exercising, have also been linked to the use of print media and internet for health related information (Lee, 2009). Television use for health information, however, had a significant relation with healthy lifestyle behaviors only when the person engaged in low levels of interpersonal health communication, i.e. discussing health issues with other people (Lee, 2009).

To no surprise, wellness orientation has also been found to predict the readership of health themed magazines. However, health orientation patterns seem to vary between health magazines that emphasize different themes (Dutta-Bergman, 2005). For example the readers of a magazine focusing on disease-prevention and healthy body maintenance, which are relatively heavy health themes, were found to be health information oriented and to hold strong health beliefs in Dutta-Bergman's (2005) study. To compare, the readers of a fitness themed magazines were characterized with strong health beliefs and engaging in healthy activities, consistent with the magazine's activity-focused theme.

3. Research methods

3.1. Data collection

The data was collected by using an online questionnaire, between October 8 and October 20, 2014. Link to the questionnaire was distributed to participants through the researcher's social connections in the social network platform Facebook. As an incentive to participate, two movie tickets were raffled off among the respondents. The sampling method used was convenience sampling. The sample represents to large extent the researcher's extended social network and is thus a non-random sample, which must be considered as a limitation of the study. The target population was narrowed to active consumers of wellness media content by asking a control question in the beginning of the questionnaire: whether the respondent has read or watched any wellness related media content on television, magazines or blogs during the past three months. The purpose was to exclude non-consumers of wellness media content who were not part of the sampling frame. The study focused on Finnish media environment, due to which the questionnaire was only targeted to Finnish speaking respondents and had no other language versions.

Altogether 564 people were invited to fill in the questionnaire and 232 completed responses were received. A fairly high response rate was thus achieved, response rate being 41%. Of the total of 232 responses, 8 responses were excluded due to their negative response to the control question (Have you watched or read wellness related media content during the past three months?). Thus, the final number of valid, completed responses was 224.

The questionnaire consisted of four parts. The first part included some basic demographic background questions (age, gender, occupational situation and educational background). The second group of questions addressed the wellness orientation construct. The third part of the questionnaire included questions addressing media channel selection and the frequency of consumption of wellness

content in each of the channels (television, magazines and blogs). The fourth and final part addressed the motives of wellness media use. The measures for parts 2-4 are explained in detail in the next section.

With regard to the sampling method and the biases resulting from it, it is important to note that while the sample is usable for the purposes of this particular study – examining the relationship of wellness media consumption motives and wellness orientation – the results produced by this sample are not valid to make generalizations about the public.

3.2. Measures

Wellness media consumption

Wellness media consumption was measured in terms of frequency and selection of media channel. The respondents were asked through which media channels (television, magazines, blogs or other) they consume wellness related media content. Further, the respondents were asked to indicate how often they engage in consuming wellness related media content both in general and in each of the media channels separately. The four options included “daily use”, “at least weekly use”, “at least monthly use”, and “more seldom use”. This frequency scale was partly adapted from a media use study by Kilian et al. (2012). One original item (“use at least once a year”) was excluded because the current study concerns a fairly active use of wellness related media content, thus leaving such inactive consumption out of its scope.

Wellness orientation

Wellness orientation construct was measured using the wellness orientation scale developed by Kraft & Goodell (1993). The 19-item scale covers the four dimensions of wellness orientation: *Health Environment Sensitivity*, *Physical Fitness*, *Personal Health Responsibility*, and *Nutrition and Stress Management*. Respondents were asked to rate the statement items on a scale of 1 to 5 (1 = strongly disagree, 5 = strongly agree). The items for wellness orientation are shown in detail in Table 1.

Motives for wellness media consumption

The motives for consuming wellness related media content were assessed by asking the respondents to rate statements regarding their wellness media use on a scale of 1 to 5 (1 = strongly disagree, 5 = strongly agree). Respondents were asked to rate the statements for each media channel separately (television, magazines and blogs). McQuail et al.'s (1972) classification of motives into *Information*, *Entertainment*, *Integration and Social Interaction*, and *Personal Identity* motives was used as the initial categorization scheme for the motive constructs. Scales were adapted from selected existing media use studies applying the uses and gratifications approach. *Information* motive items were adopted from Korgaonkar and Wolin's (1999) information motivations for internet use scale, and complemented with learning needs of media use one-item scale from Perse and Courtright (1993). *Entertainment* motive items were adopted from entertainment, passing time, escapist and relaxation scales from Perse and Courtright (1993). These four one-item scales were merged in the current study, because the corresponding items are found under the Entertainment construct in McQuail et al.'s (1972) classification, which is used as the initial classification in this study. *Integration and Social Interaction* items were adopted from social outcomes of internet use scale used by LaRose and Eastin (2004). Finally, *Personal Identity* motive items were adopted from McQuail et al.'s (1972) personal identity/reality exploration scale and complemented with personal identity motives of media use scale by Kilian et al. (2012). The items are shown in detail in Table 2.

Table 1. Wellness orientation items.

Dimension	Items	Adapted from
Health Environment Sensitivity	I worry that there are chemicals in my food. I am concerned about my drinking water quality. I avoid foods containing nitrites or preservatives. I read more health related articles than I did 3 years ago. I am interested in information about my health. I am concerned about my health all the time. Air pollution does not bother me. (R)	<i>Kraft & Goodell (1993)</i>
Physical Fitness	I try to exercise at least 30 min a day, 3 days each week. I exercise more than I did 3 years ago. Exercise helps me succeed in all facets of my life. Good health takes active participation on my part. I spend time each day trying to reduce accumulative stress.	<i>Kraft & Goodell (1993)</i>
Personal Health Responsibility	It is the doctor's job to keep me well. (R) My health is outside my control. (R) I believe the "wellness" idea is a fad. (R) I only worry about my health when I get sick. (R)	<i>Kraft & Goodell (1993)</i>
Nutrition and Stress Management	My daily meals are nutritionally balanced. I try to avoid high levels of cholesterol in my diet. I attempt to avoid stressful situations.	<i>Kraft & Goodell (1993)</i>

(R) = reverse coding

Table 2. Media use motive items.

Construct	Items	Adapted from
Information	I follow wellness media content to learn about things happening in the world. Overall, I learn a lot from wellness media content. Overall, information obtained from wellness media content is useful.	<i>Korgaonkar & Wolin (1999)</i>
	I follow wellness media content to learn about myself and others.	<i>Perse & Courtright (1993)</i>
Entertainment	I follow wellness media content to relax.	<i>Perse & Courtright (1993)</i>
	I follow wellness media content to be entertained.	
	I follow wellness media content to forget about work and other things.	
	I follow wellness media content to pass time.	
Integration and Social Interaction	I follow wellness media content to get support from others.	<i>LaRose & Eastin (2004)</i>
	I follow wellness media content to find something to talk about.	
	I follow wellness media content to feel like I belong to a group.	
	I follow wellness media content to find others who respect my views.	
	I follow wellness media content to find people like me.	
Personal Identity	Wellness media content sometimes depicts problems like my own.	<i>McQuail et al. (1972)</i>
	Following wellness media content sometimes helps me to understand my own life.	
	Following wellness media content is typical for me and my lifestyle.	<i>Kilian et al. (2012)</i>

3.3. Research data

The final number of completed responses for the questionnaire was 224. The demographic characteristics of the sample are shown in Table 3. The age distribution of the respondents is loaded more on the younger generations, a total of 81,2% of the respondents falling into the age categories under 30 years. This is no surprise, as the researchers social connections are largely represented in the sample. As for the gender distribution, the majority of the respondents are female (72,8%). This might be related to the sampling method, but could also indicate that women are more likely to be

active consumers of wellness related media content, which would be consistent with for example Dutta-Bergman's (2005) study according to which women were significantly more likely to read health magazines than men.

Studying and working respondents were fairly evenly represented in the sample, even though a larger overrepresentation of students might have been expected due to the convenience sampling method. Students accounted for 51,3% and employed for 42,9% of the respondents. The remaining 5,8% of the respondents were in the categories unemployed or other. The majority of the respondents had an academic background (73,2%). This is again most likely due to the sampling method, though prior research has found indications that higher education would correlate positively with health orientation (Gould, 1988).

Table 3. Demographic characteristics of the sample.

Demographic variable		N of respondents	% of respondents
Age	-18	6	2,7
	19-25	128	57,1
	26-30	48	21,4
	31-40	13	5,8
	41-50	13	5,8
	51-60	14	6,3
	61-	2	0,9
Gender	Female	163	72,8
	Male	60	26,8
	Prefer not to say	1	0,4
Occupational situation	Working	96	42,9
	Student	115	51,3
	Unemployed	7	3,1
	Other	6	2,7
Educational background	University	164	73,2
	University of Applied Sciences	32	14,3
	Vocational school	13	5,8
	Upper secondary / High school	14	6,3
	Other	1	0,4
Total		224	100

3.4. Statistical analysis methods

For the empirical analysis of this study, two descriptive multivariate analysis techniques were chosen. Factor analysis was first applied to reduce the amount of variables and thus facilitate further analysis of the data. The purpose of factor analysis was also to identify the underlying dimensions of the motives of wellness media content consumption. The other main part of the analysis was conducted with cluster analysis, which was applied to arrange the consumers of wellness media content into distinct groups, and identify different wellness media consumer profiles. The factors obtained from the factor analysis were used as the basis for clustering. For the additional supportive analyses, cross tabulation and analysis of variance were applied. However, factor and cluster analysis as the principal analysis methods of this study are introduced here in more detail.

3.4.1. Factor analysis

Factor analysis is a group of analysis procedures commonly used in reducing and summarizing data (Malhotra & Birks, 2006, p. 572). It is often applied in cases where the amount of variables is large, and the objective is to identify underlying structures behind the variables. Factor analysis is applicable in examining even complex relationships, and in summarizing a large number of variables into a smaller number of factors (Hair et al., 2006, p. 101).

Factor analysis is an interdependence technique, which means that it examines the whole set of interdependent relationships of variables, rather than a relationship of dependent and predictor variables (Malhotra & Birks, 2006, p. 573). Factors, which are the output of the analysis, represent patterns or structures in the data. They reflect structures that otherwise might not be sufficiently captured using a single measure (Hair et al., 2006, p. 104). In this study, factor analysis applied in order to discover the underlying dimensions behind the motives of wellness media consumption. Individual items represented in Table 2 serve as variables, whereas factors derived from the factor analysis represent the underlying dimensions of these variables.

The fundamental objective of factor analysis is the examination of the underlying dimensions behind the variables, and based on these, arranging variables into groups called factors. The groups are generated based on correlation, so that the correlation is strong between variables in the same factor but weak between variables in other factors. The mathematical factor model for standardized variables is (Malhotra & Birks, 2006, p. 573):

$$X_i = A_{i1}F_1 + A_{i2}F_2 + A_{i3}F_3 + \dots + A_{im}F_m + V_iU_i$$

where X_i = *i*:th standardized variable
 A_{ij} = standardized multiple regression coefficient of variable *i* on common factor *j*
 F = common factor
 V_i = standardized regression coefficient of variable *i* on unique factor *i*
 U_i = the unique factor for variable *i*
 m = number of common factors. "

The common factors can be expressed as linear combinations of the observed variables as follows (Malhotra & Birks, 2006, p. 574):

$$F_i = W_{i1}X_1 + W_{i2}X_2 + W_{i3}X_3 + \dots + W_{ik}X_k$$

where F_i = estimate of *i*:th factor
 W_i = weight or factor score coefficient
 k = number of variables. "

As a general recommendation for the number of cases required to conduct factor analysis, Malhotra and Birks (2006, p. 575) suggest that the number of observations should be at least four or five times the number of variables to be analyzed. With the number of cases being 224 and the number of variables included in factor analysis being 16, the subjects-to-variables ratio in the current study is 14. This exceeds the

rule of 5:1, thus the findings from the analysis can be expected to demonstrate sufficient explanatory power.

To produce a comprehensible and more easily interpretable factor matrix, performing a rotation procedure is recommended (Malhotra & Birks, 2006, p. 582). For the current study, orthogonal varimax method was selected. The varimax procedure is the most commonly used method for rotation, and is also preferred when the goal is to reduce the dataset into a smaller number of factors or prepare the data for other subsequent analysis techniques (Hair et al., 2006, p. 127), such as cluster analysis in the case of the current study.

As the most commonly used extraction method, the eigenvalue criterion was chosen for determining the number of factors to include in the model. In this method, only factors with eigenvalues greater than 1.0 are retained. These individual factors account for at least as much of the total variance as a single variable. It should be noted that some researchers have argued that the eigenvalue criterion produces most reliable factor solutions when the number of variables is between 20 and 50. With less variables, the eigenvalue method may produce a conservative number of factors (Hair et al., 2006, p. 119-120). However, in the case of the current paper the expected number of factors was already low based on the findings of existing research, and thus the problem presented by Hair et al. (2006) was not regarded to be a major deficiency. Further, factor analysis was also tested using a priori method, where the researcher determines the number of factors to be extracted in advance, based on the findings of prior literature. However, the four factors extracted using this method were not as easily interpretable and did not correspond as well to the constructs identified by extant research, as the three factors extracted using the eigenvalue method. The eigenvalue criterion was thus considered to be a suitable option even with the 16 variables of the present study.

3.4.2. Cluster analysis

The principal purpose of cluster analysis is to classify objects into groups, which are called clusters. This is done on the basis of clustering variables chosen for the analysis. (Malhotra & Birks, 2006, p. 596). Clustering is performed so that the similarity between of objects in the same cluster is greater than between the objects in different clusters. The aim is to identify a set of clusters that both minimizes variation inside the clusters and maximizes variation between the clusters (Malhotra & Birks, 2006, p. 597). Cluster analysis is commonly used for example to identify and understand markets or segments. It resembles factor analysis with regard to assessing structure, but the basis for grouping objects in cluster analysis is distance, whereas in factor analysis the basis for grouping is variation (Hair et al., 2006, p. 555).

In this study, cluster analysis was applied to identify consumer groups among the consumers of wellness media content, that have similar motives for wellness media consumption. Cluster analysis was used as step procedure to enable the final analysis of the relationship of the motives of wellness media consumption and wellness orientation. To facilitate the analysis and interpretation, and to produce more high quality results, cluster analysis was conducted using the factors obtained from the factor analysis that was run in the previous analysis phase.

In the current study, Euclidean distance was selected as similarity measure between objects. Euclidean distance is defined as “the square root of the sum of the squared differences in values regarding each variable in the analysis” (Hair et al., 2006, p. 575). It is the most commonly applied distance measure when conducting cluster analysis (Malhotra & Birks, 2006, p. 600). Euclidean distance measure is also demanded by the cluster analysis method chosen, which was k-means cluster algorithm.

The chosen cluster analysis method, k-means clustering, is a non-hierarchical clustering method. K-means algorithm assigns objects into pre-specified number of clusters, based on the similarity of cluster seeds (Hair et al., 2006, p. 589). K-means method is often the preferred method for larger datasets due to the fact that unlike hierarchical methods, k-means method does not require calculations of similarity

matrices across the whole set of observations, only between each observation and the cluster centroids, which makes it faster to conduct (Hair et al., 2006, p. 589). An advantage is also that k-means method allows an observation to change from one cluster to another if this procedure improves the clustering criterion (Aaker et al., 2004, p. 577). In non-hierarchical cluster analysis, the researcher needs to define the number of clusters in advance. The procedure for selecting the number of clusters is discussed later in the context of cluster analysis results.

3.5. Validity and reliability

The concepts of validity and reliability are used to assess the accuracy and possible sources of bias of the research and its measurements. In a research design, validity is defined as the extent to which the measurement manages to represent the actual phenomenon examined, i.e. the extent to which the research measures what it is intended to measure. Reliability in turn, refers to the repeatability of the research measurements, i.e. the extent to which the research would produce similar results if repeated with a random sample from the same target group (Malhotra & Birks, 2006, p. 159).

Questionnaire validity stems from the ability of the chosen scales and measures to accurately capture the phenomenon of interest (Hair et al., 2006, p. 137). Common ways of strengthening the content validity of a questionnaire are for example conducting pre-tests and using measurements validated by extant research. In the current paper, with the exception of background questions, all scales and their individual items in the questionnaire were derived from previous research based on a thorough literature review of research on the motives of media consumption and wellness orientation. The wording of the individual items was considered carefully when translating them from their original language into Finnish. While attempting to keep the wording as similar as possible to the original one, some minor modifications to the wording were made to ensure the correct understanding of the questions by Finnish speaking consumers. Prior to data collection the questionnaire was also pre-tested by a small group of selected wellness media consumers.

The questionnaire was organized in pre-grouped sets of items in order to structure the questionnaire into a more agreeable and readable form for the respondents. Pre-grouping was done to avoid extensively long continuous lists of items which could have lead to response fatigue and thus also influence the quality of data. Pre-grouping may cause concerns about leading responses. However, the questions were carefully grouped based on previous research and corresponding to the constructs as validated by these prior studies (McQuail et al., 1972; Kraft & Goodell, 1993; Perse & Courtright, 1993; Korgaonkar & Wolin, 1999; LaRose & Eastin, 2004; Kilian et al., 2012). In addition, factor analysis was run to regroup the items. Even though the factors produced by the analysis corresponded strongly to the pre-groupings, this was expected based on the findings of previous studies. Thus the leading effect of pre-grouping was not considered as a serious limitation.

In terms of reliability, part of the possible sources of concern that need to be taken into account rise from the risks of conducting an online survey. In a web-based survey, it is not possible to control situational factors or offer specifications to the questions if needed. These factors may pose a risk of incorrect understanding of the questions and result in weakened precision in the responses. Also, when collecting responses via an open link online survey it is difficult to control who fills in the questionnaire. Due to this, it is not possible to ensure that the sample is representative of the target group for example in terms of the distribution of demographic characteristics.

In the current study, for reasons of convenience, sampling frame was limited to the extended social circle of the researcher. This source of sampling error obviously needs to be considered as a limitation with regard to reliability. The sampling method resulted in a sample biased towards young, female and highly educated respondents, thus potentially not offering the best representation of the target population of wellness media consumers. While this means that the results should not be used to make generalizations about the target population, the sample is however valid to fill the fundamental purpose of the current study: to examine the relationship of wellness media consumption motives and wellness orientation. As for response error, the careful design and clear wording of the questionnaire minimized the occurrence of respondent based error. The risk of researcher based error, referring to errors

resulting from misrecording or misinterpretation, was not an issue considering the survey method used.

Reliability refers to the ability of the measures to produce consistent results if repeated. It also refers to the consistency of multiple measurements of a given variable. Statistically, the reliability of a study is commonly measured in terms of its internal consistency. A widely used measure of internal consistency is Cronbach's coefficient alpha, which, following the definition of Malhotra & Birks (2006, p. 358), measures internal consistency as "the average of all possible split-half coefficients resulting from different ways of splitting the scale items". The value of Cronbach's alpha varies from 0 to 1, with higher values indicating better internal consistency reliability.

Cronbach's alphas were calculated for all factors, in order to measure the internal consistency of the scales (also shown in Table 4). The resulting values of Cronbach's coefficient alpha were 0,943 for Factor 1, 0,928 for Factor 2, and 0,923 for Factor 3. Cronbach's alphas for all three factors greatly exceeded the limit of 0,60 which is generally considered as the minimum acceptable value (Malhotra & Birks, 2006, p. 358). In addition, values exceeding 0,80 are generally considered to represent a good scale, which was also exceeded by all the factors. Thus, all factors could be concluded to be internally consistent and reliable.

4. Results

4.1. Factor analysis

Principal components factor analysis was run for the motives of wellness media consumption, which were measured with 16 items on a 5-point Likert scale. First, the appropriate tests were conducted to determine the suitability of the data for factor analysis. The Kaiser-Meyer-Olkin (KMO) measure of sampling adequacy and Bartlett's test for sphericity were used for the evaluation. The data had a KMO value of 0,915 and Bartlett's test value of 0,000, which both can be considered very good, meeting the commonly accepted requirements of minimum 0,60 for KMO and maximum 0,05 for Bartlett's test. The data was thus concluded to be appropriate for factor analysis.

As the chosen extraction method was the eigenvalue criterion, only factors with eigenvalues higher than 1,0 were accepted. Principal components analysis resulted in three factors that passed the eigenvalue criterion, having eigenvalues of 8,995 (Factor 1), 2,226 (Factor 2) and 1,410 (Factor 3). The three factors together explained 78,94% of the total variance in the data. The factors produced by the analysis represent the underlying dimensions of wellness media consumption motives. Three dimensions were identified: *Information & Learning*, *Social Integration & Interaction*, and *Entertainment*.

The dimensions found by the current paper strongly correspond to the initial dimensions presented by McQuail et al. (1972) except for one dimension. The initial framework had also a fourth dimension, *Personal Identity* motives, which did not appear in the analysis of the current paper. There may be several reasons that could explain the absence of this dimension. One explanation could be that while media consumption in general is sometimes driven by motives that are connected to identity building and reinforcement, these kinds of motives are not associated with the consumption of wellness related media content in particular. Another possible explanation relates to the sample used in the current research. With a somewhat biased convenience sample which is not representative of the whole target population,

it is possible that some of the nuances and underlying structures behind the motives of wellness media consumption are not detected. Factors, the items included in each factor, their loadings and communalities are displayed in Table 4. Each factor is discussed separately in the following.

Table 4. Factors representing the dimensions of wellness media consumption motives.

Factor	Items	Loading	h ²	Cronbach's alpha
F1	Overall, I learn a lot from wellness media content.	0,838	0,834	0,943
	Overall, information obtained from wellness media content is useful.	0,836	0,833	
	Following wellness media content sometimes helps me to understand my own life.	0,814	0,799	
	Wellness media content sometimes depicts problems like my own.	0,799	0,742	
	I follow wellness media content to learn about myself and others.	0,797	0,810	
	Following wellness media content is typical for me and my lifestyle.	0,685	0,742	
	I follow wellness media content to learn about things happening in the world.	0,664	0,585	
F2	I follow wellness media content to find others who respect my views.	0,902	0,885	0,928
	I follow wellness media content to feel like I belong to a group.	0,896	0,890	
	I follow wellness media content to get support from others.	0,845	0,844	
	I follow wellness media content to find people like me.	0,836	0,818	
	I follow wellness media content to find something to talk about.	0,674	0,544	
F3	I follow wellness media content to be entertained.	0,884	0,884	0,923
	I follow wellness media content to pass time.	0,861	0,774	
	I follow wellness media content to relax.	0,829	0,880	
	I follow wellness media content to forget about work and other things.	0,789	0,766	

Factor 1: Information & Learning

The first factor was the biggest in terms of the number of items and the percentage of the total variance explained (31,15%). This factor corresponded to motives that were related to information search and learning. Two items with the highest loadings were “Overall, I learn a lot from wellness media content.” and “Overall, information obtained from wellness media content is useful.”, which emphasizes the importance of a general approach to wellness media content as an informational source. However, this factor additionally included items that were initially thought as part of the *Personal Identity* construct such as “Wellness media content sometimes depicts problems like my own.”

This indicates that there is another, more personal side to this factor, and in addition to being a mere source of health information, wellness media content is also a means for learning about oneself and others.

Factor 2: Social Integration & Interaction

The second factor was related to the social dimension of media consumption motives. It was consistent with McQuail et al.'s (1972) initial framework, and shows that as media consumption in general, the consumption of wellness themed media in particular is also linked to the consumers' social integration. Wellness media content can serve as a common ground, based on which to find others that share similar interests and with whom to identify with. It also produces a sense of belonging and provides topics for conversations with others. The highest loading item in this factor was "I follow wellness media content to find others who respect my views." indicating that gaining respect from others is a strong motivator in the consumption of wellness media content.

Factor 3: Entertainment

The third factor produced by the analysis, as expected, was the group of motives related to entertainment. The item "I follow wellness media content to be entertained." had the highest loading in this group, followed by motives associated with passing time, relaxing and escaping by forgetting work and other things. Motives in the entertainment factor were consistent with the original motive classification by McQuail et al. (1972), thus suggesting that wellness media consumption is driven by entertainment motives that largely reflect the motives of media consumption in general.

4.2. Cluster analysis

The purpose of conducting the cluster analysis was to group the participants into distinct consumer groups based on the similarity of their motives for consuming wellness media content. Cluster analysis thus also served as a means to later examine the relationship between wellness media consumption motives and wellness orientation. The chosen algorithm method for clustering was non-hierarchical cluster

analysis, more specifically k-means clustering. The three factors obtained from the factor analysis were used as input variables, and clustering was based on the factor scores.

In non-hierarchical cluster analysis, the researcher needs to determine the number of clusters in advance. There is no consensus among researchers about the best practice for determining the number of clusters, however, the common practice is to run the analysis for different numbers of clusters and then evaluate the solutions based on their interpretability and other factors (Hair et al., 2006, p. 595). In addition, a handful of statistical measures of heterogeneity change have been suggested to provide guidance to the optimal number of clusters. One of them is the widely used pseudo F statistic, which compares the goodness of fit of k clusters to $k-1$ clusters (Hair et al., 2006, p. 594). In the present study, solutions with 2-5 clusters were tested in order to determine the appropriate number of clusters. The pseudo F statistic was maximized in the 4-cluster solution at a value of 87,38. In addition, this solution had the most evenly distributed number of objects per cluster and was found to be the most interpretable with regard to the values of clustering variables. Thus, the final number of clusters was determined to be 4.

Table 5. Cluster centroids of the groupings of wellness media consumers.

Cluster	N	Factor 1	Factor 2	Factor 3
1	37	0,174	1,613	0,115
2	66	-0,195	-0,317	1,034
3	69	-0,823	-0,158	-0,727
4	52	1,216	-0,535	-0,430

The final cluster centroids are displayed in Table 5. The centroids represent the mean values of each factor for all observations in the cluster. The further interpretation and profiling of the clusters is done based on these values. The analysis identified four distinct groups of wellness media consumers that differ in their motives for wellness media consumption. These clusters were named and characterized based on the values presented in Table 5, according to the strength of Information & Learning, Social Integration & Interaction, and Entertainment motives.

Additionally, some cross tabulations were done to allow further description of the clusters in terms of their demographic characteristics as well as their use of different wellness media channels (see Appendix A for the relevant tables). Fisher's exact test was applied to check for statistical significance of the demographic differences between clusters. Except for gender, the differences in demographics across clusters were found statistically insignificant. In other words, in terms of age, education or occupational situation the clusters did not differ substantially from each other. Differences in gender distribution of clusters however, were found significant ($p < 0,01$). Similarly, cross tabulations were conducted between cluster membership and the frequency of use of different media channels for wellness media consumption. Again, Fisher's exact test was used to check for statistical significance, except for blog usage, for which χ^2 test was applied¹. Significant differences between clusters were found in the frequency of use of magazines and blogs ($p < 0,01$). The cluster descriptions are presented in the following.

Cluster 1: Socially motivated consumers

The first group of wellness media consumers are socially driven: they are strongly motivated by social integration and interaction motives. They feel that consuming wellness media content can help them to find other people that share similar thoughts, respect their views and provide support. The sense of belonging motivates these consumers in following wellness themed content. Socially motivated consumers are also driven by information and entertainment motives, but significantly less than by social motives. A consumer in this group is most likely a female, and consumes wellness related content from magazines more often than other wellness media consumers. This group is the smallest in size and also the most strongly specialized in their motives.

¹ χ^2 is recommended to be used only in cases where maximum of 20% of the cells in a contingency table have expected counts less than 5, and the expected cell count is >1 (Malhotra & Birks, 2006, p. 465). For contingency tables with sparsely populated cells (here, all tables except for blog usage), Fisher's exact test is recommended.

Cluster 2: Entertainment seekers

This group of consumers is primarily motivated by the desire to be entertained. Wellness media content for them is a way to pass time, relax and escape from their everyday problems. The negative values for factors 1 and 2 indicate that entertainment seekers are not motivated by information and learning needs, nor the social dimension of media consumption motives. It is extremely likely for an entertainment seeker to be female, as men represent only 6,1% of this group. Entertainment seekers read wellness related blogs slightly more often than other consumers, and they use wellness media content primary as a form of entertainment media.

Cluster 3: Indifferent consumers

The third cluster, which was the most difficult to interpret, consists of consumers that are not motivated specifically by any of the three motive dimensions. The group had negative values for all of the factors, which may indicate that they are not driven by any of the motives included in the current study. Another possibility is that they are simply not really interested in wellness media content, even though they passed the control question. This interpretation is also supported by the fact that the members of this group consume wellness media content less frequently than other groups in all the examined media channels. Especially blogs as a wellness medium is infrequently used by these consumers – more than 60% indicated that they use blogs for wellness media consumption more seldom than once a month. An indifferent consumer is almost as likely to be male as female, as the gender distribution in this group is almost even. This group is the largest in terms of size.

Cluster 4: Information oriented consumers

For these consumers, information and learning are the only motivators to engage in consuming wellness media content. Information oriented consumers consider wellness media as a source of useful information for their daily life. However, they are not only motivated by the possibility to learn about health issues and the surrounding world, but also to learn about themselves. Information oriented consumers identify with wellness media content, and feel that consuming wellness media is a part of their lifestyle. This group of consumers does not find any motivation for wellness media

consumption from entertainment or social integration and interaction needs. Members of this consumer group are more likely to be female than male.

4.3. Association between wellness media consumption motives and wellness orientation

To further interpret the cluster solution and to answer the main research question, i.e. examine whether any relationships exist between the wellness media consumption motive dimensions and wellness orientation, analysis of variance was conducted between cluster membership and wellness orientation, as well as its sub-dimensions.

Overall, the values of all wellness orientation dimensions were turned towards the positive end of the scale. Though no interpretations about whether wellness orientation levels were high compared to the whole population can be made with the current research design, high wellness orientation values could be expected with the sample that consisted of consumers of wellness media. To establish a better understanding of the possible differences between clusters and to see whether the differences were statistically significant or not, analysis of variance was applied. Analysis of variance, more specifically one-way ANOVA, was used to compare the differences in means across the clusters representing wellness media consumer groups. The results are reported in detail in Table 6.

Wellness orientation levels in general were higher in Clusters 1 and 4, i.e. socially motivated and information oriented consumers. Differences in wellness orientation means between clusters were statistically significant ($p < 0,01$). The highest mean for overall wellness orientation was found in Cluster 4, followed by Cluster 1 with the second highest mean. These results thus indicate that especially Information & Learning, and also Social Integration & Interaction motives for wellness media consumption are associated with stronger overall orientation towards wellness. The connection between information motives and higher wellness orientation could perhaps be due to the more practical and cognitive nature of the information motive construct, which might promote the actual wellness orientation of the consumer more strongly than the other motives. Overall, the ANOVA results give an indication that the

constructs of information and social motives for wellness media consumption have stronger motivational power in the context of overall wellness orientation than entertainment motives. It should also be noted that considering the association between social motives and wellness orientation, the cluster of socially motivated consumers was also found to be additionally motivated by information motives, which may partly explain the fact that social and information motives are close to each other in the context of more than one of the wellness orientation dimensions.

Table 6. Cluster membership and wellness orientation: One-way ANOVA.

	Mean	Std. Deviation	F	Sig.
WO				
Cluster 1	3,72	0,51		
Cluster 2	3,59	0,32	6,500	0,000
Cluster 3	3,49	0,45		
Cluster 4	3,80	0,33		
HES				
Cluster 1	3,80	0,60		
Cluster 2	3,68	0,51	5,936	0,001
Cluster 3	3,43	0,61		
Cluster 4	3,81	0,50		
PF				
Cluster 1	3,69	0,84		
Cluster 2	3,69	0,69	2,738	0,044
Cluster 3	3,70	0,76		
Cluster 4	4,02	0,53		
PHR				
Cluster 1	4,20	0,74		
Cluster 2	4,15	0,42	2,178	0,091
Cluster 3	4,16	0,45		
Cluster 4	4,35	0,33		
NSM				
Cluster 1	3,17	0,65		
Cluster 2	2,85	0,57	5,245	0,002
Cluster 3	2,68	0,70		
Cluster 4	3,01	0,69		

Differences in the levels of the different sub-dimensions of wellness orientation, which were *Health Environment Sensitivity (HES)*, *Physical Fitness (PF)*, *Personal Health Responsibility (PHR)*, and *Nutrition & Stress Management (NSM)*, were also tested. No statistically significant differences were found in the means of PF and PHR at

significance level $p < 0.01$. No significant association thus seems to exist between any of the wellness media motives in particular and Physical Fitness or Personal Health Responsibility. An interesting notion about the means, however, is that compared to other dimensions of wellness orientation, PHR had clearly the highest mean values in all clusters. The values thus seem to indicate that at least among the current sample of wellness media consumers, taking responsibility of one's own health is the strongest dimension of wellness orientation.

HES means differed significantly across clusters ($p < 0,01$). Highest means were found, again, in Clusters 1 and 4, with the means of these groups being almost equal. All in all, the analysis of variance suggests an association between Social Integration & Interaction and Information & Learning motives, and Health Environment Sensitivity. The relationship is consistent with the results considering overall wellness orientation, indicating that social and information motives appear to have a stronger effect in the context of wellness media consumption and wellness orientation than entertainment motives. In addition, being conscious of the quality and healthiness of one's environment (for example air pollution and food preservatives) is perhaps important in today's social environment, especially for consumers that use wellness media as part of their social integration. HES dimension is rather holistic by nature, which may contribute to its association with the social motives.

Finally, the analysis of variance showed that differences in the means of NSM were also statistically significant ($p < 0,01$). Cluster 1, socially motivated consumers, had the highest level of NSM. According to the analysis, Social Integration & Interaction Motives thus seem to be related to Nutrition & Stress Management. Like in the case of HES, the association may be explained partly by the nature of this wellness orientation dimension, which is likewise quite holistic. The consumers that use wellness media for social purposes might have a tendency to take an especially comprehensive approach to their health and wellness, including paying attention to their diet and managing their stress levels.

5. Summary and conclusions

This study focused on wellness media consumption in the context of Finnish media consumers and media field. The purpose was to examine consumers' motivations to consume different wellness themed media content, as well as the possible link between wellness media consumption motives and consumers' wellness orientation. Returning to the initial main research question asked in the beginning of this study, the main purpose of the paper was to answer the question "*How does the consumption of wellness media relate to consumers' wellness orientation?*". Supported by an extensive literature review on media consumption motives and wellness orientation, a survey study was conducted to search for an answer to this question. Through factor and cluster analysis, the underlying dimensions among wellness media consumption motives and subsequent grouping of consumers on the basis of these motives was established. Cross tabulations were done to support the interpretation of the cluster solution with demographics and the use of different wellness media channels. Finally, analysis of variance was applied to examine the association between different wellness media consumption motives and wellness orientation. In the following, the results and contributions of this study are discussed in light of previous literature, followed by discussion of limitations and implications for further research.

5.1. Discussion

The theoretical contribution of this study concerns identifying the motivational structures of wellness media consumption, adding especially to the body of uses and gratifications research. Motive and need structures have been widely studied in the context of media consumption in general (Ruggiero, 2000). This study however, answers to the lack of research on consumption motive structures in the specific media context of wellness themed content. Regarding the motivational structure of wellness media use, the findings of this study were partly consistent with previous literature. While extant research has quite consistently found media consumption to be motivated

by four distinct main motivation constructs – information, social, entertainment and personal identity motives (e.g. McQuail et al., 1972; Perse & Courtright, 1993; Kilian et al., 2012) – the current study in the context of wellness media specifically found only three constructs: Information & Learning, Social Integration & Interaction, and Entertainment. Thus, for the most part motive constructs for consuming wellness media content seem not to differ from motives for consuming media in general. The current study can not offer any definitive explanation to the absence of personal identity related motive construct, but it is likely to be either a consequence of sampling error or an indication that wellness media content does not answer to consumers' identity building needs. These kind of motives in the context of wellness themes may also be integrated into the Information & Learning construct, as would be suggested by the factor analysis, which grouped identity items into the above mentioned factor.

Another main contribution is that this study takes one step forward in studying the current wellness phenomenon, by attempting to build more understanding of the relationship between media consumption and the behavioral and attitudinal orientation related to the same theme, wellness and health. The findings of this study indicate that consumers that are primarily motivated to consume wellness media either by social or information related motives have stronger overall orientation towards wellness than consumers with other motives. Measured by mean value, the group of information oriented consumers had the strongest wellness orientation. This seems to support the findings of Moorman & Matulich (1993), according to which heavier use of media sources for health information is associated with high health motivation. On the other hand, while research has suggested that especially behavioral side of wellness orientation would be linked to informational use of media (Lee, 2009), the current study did not detect statistically significant variations in Physical Fitness levels between the group. It must be noted, however, that the mean for Physical Fitness construct was highest for information oriented consumers. Further, for another construct corresponding to the behavioral side of wellness orientation, Nutrition & Stress Management, information oriented consumers had the second highest levels, after the socially motivated group.

The findings of this study suggest that social motivation to wellness media consumption would be associated especially with two wellness orientation dimensions: Health Environment Sensitivity and Nutrition & Stress Management. These two dimensions could be understood to represent a sort of holistic attitude towards wellness; being sensitive to the healthiness of one's whole living environment and taking care of one's wellness holistically through diet and stress control. This interpretation would lead to the conclusion that socially motivated wellness media consumers take a more holistic and comprehensive approach to their own well-being. On the other hand, Kraft and Goodell (1993), who validated the original wellness orientation scale, propose that consumers may consider nutrition and stress as "environmental inputs". From this perspective, it seems quite natural that the same consumers are both the most health environment sensitive and most concerned about their nutrition and stress management.

Perhaps more surprising findings were acquired regarding the link of media channel choice and motives for wellness media consumption. Prior studies have strongly associated entertainment motives with television (Katz et al., 1973b, Perse & Courtright, 1993; Kilian et al., 2012). However, entertainment seekers were not found to consume wellness related content from television more than any of the other groups. The use of print media in turn, has been found to be motivated by information motives (Perse & Courtright, 1993; Kilian et al., 2012), while considered to be poor satisfier of social needs (Kilian et al., 2012). The current findings indicate something of the contrary: no significant relation was found between information motives and magazine reading, which here represents print media. In turn, the heaviest users of magazines for wellness media consumption were socially motivated consumers – suggested by prior research as the least likely group to be the heaviest users of print media. Similarly as print, blog use has been linked to social motives (Kilian et al., 2012), but no such association was found in the current study. Even though investigating channel selection was not among the main purposes of this study, it provides rather interesting findings in the light of existing research. The current findings suggest that consumers select channels differently in the specific context of wellness media content than in media use in general.

5.2. Final conclusions

To summarize the most important findings of this study, a final look at the research questions set in the beginning of the paper is in place. To structure the main research problem and to facilitate the research process, the main research question was broken down into two individual sub-questions:

The first sub-question asked *“What kind of consumer groups can be identified among wellness media users, based on their motives for wellness media use?”*. Based on the motive constructs defined by factor analysis (Information & Learning, Social Integration & Interaction, and Entertainment), four distinct consumer groups that differed by their motives of wellness media consumption were identified with the cluster analysis: 1) socially motivated consumers, 2) entertainment seekers, 3) indifferent consumers, and 4) information oriented consumers.

The second sub-question was *“How does consumers’ wellness orientation differ across the identified consumer groups?”*. The differences between consumer groups were examined both for overall wellness orientation, and for the different dimensions of wellness orientation. The groups of information oriented and socially motivated consumers were found to be the most strongly wellness oriented among the consumer groups. These groups were also the most sensitive about their health environment. In addition, socially motivated consumers had the strongest orientation towards paying attention to their nutrition and managing stress.

Finally, an answer is needed to the main research question: *“How does the consumption of wellness media relate to consumers’ wellness orientation?”*. This paper presumes that the consumption of wellness media relates to wellness orientation through the motives that drive consumers in their wellness media consumption. The current study found significant differences in the levels of wellness orientation and its dimensions between the consumer groups, which here represented the different motive constructs. The results of the current study thus indicate associations between several motives and wellness orientation dimensions.

5.3. Managerial implications

The practical contributions of this study are primarily related to understanding consumer behavior in the context of wellness media consumption. The managerial implications of the paper are valuable especially for media companies that offer different wellness themed content in the media channels included in this study. Also marketers targeting the consumers of wellness media content and advertising through these media channels can gain useful knowledge of the behavior and attitudes of their target customers. In today's consumption environment where wellness seems to have established its place as a noteworthy trend shaping consumption preferences, the importance of understanding wellness media consumers is emphasized.

Understanding the motive structures regarding the consumption of wellness themed media content can be valuable for both media companies and marketers in identifying and segmenting their target consumers. Identifying for which purposes their media content is consumed helps media companies to develop their current offering and to plan new offerings that answer the needs of the target audience. Different content appeals to consumers with different motivational orientations – socially motivated, entertainment seekers and information oriented. The findings of this study suggested some associations between differently motivated consumer groups and dimensions of wellness orientation. Companies offering media content can benefit from for example knowing that socially motivated consumers are more likely to be interested in nutrition themes such as healthy dieting, than other consumer groups. For marketers, identifying a social motive of a consumer enables insight to more efficient advertisement targeting of for example healthy food products. Marketers can thus gain advantage from more effective targeting of campaigns.

With regard the channel selection, these findings can provide support in allocating wellness themed content between different media channels. Again taking the practical example of socially motivated consumers to illustrate, the group was found to be the most health environment sensitive and interested in their nutrition and stress management. They were also clearly the heaviest readers of wellness related content in

magazines. For media companies, this might mean that focusing on holistic nutrition and health environment themes especially in their print magazines would better satisfy the needs of their customers. For marketers, this might imply for example that the socially motivated group can be reached through print magazine advertising.

5.4. Limitations and future research

The current study was conducted using a rather limited sample. Time and resources placed restrictions for data collection, due to which a convenience sampling method was applied. This method poses a clear risk for sampling error. In the case of this study, it is important to note that due to certain biases in the sample, the findings should not be understood as generalizable to the whole population of wellness media users. For example, the consumer groups identified in the cluster analysis should not be interpreted as literal profiles of wellness media consumers. Rather, the contribution of the results lies in providing insight to the association between the consumption motives represented by the groups, and other variables such as wellness orientation.

Further, the current study was limited to selected media channels, which were television, magazines and online blogs. Any interpretations of the findings in the context of other media channels should be done with caution. For example newspapers and radio were among mass media channels that were left out of the scope of this study. In addition, the research was conducted in the context of Finnish media environment and the sample consisted solely of Finnish speaking participants. Consequently, the findings only portray wellness media consumption in Finland, and generalizations to other countries may not be applicable.

The findings of this study gave some indications about the motive structure regarding wellness media consumption, as well as the relation of these motives with wellness orientation. To overcome some of the limitations of the current study, further research with a more representative sample could offer more thorough insight into the subject by testing whether the findings are consistent with a larger sample of wellness media consumers, and thus offer more generalizable results. A more comprehensive sample would also allow proper profiling of the wellness media consumer groups, which could

offer valuable knowledge especially for the practitioners in the field. The results of the current study suggested a group which was labeled as “Indifferent consumers”. While the existence of this rather large group that was not driven by any of the motives included in this study may be result of consumers not interested about wellness media ending up in the sample, it could also indicate the possible existence of other motives for wellness media consumption. Therefore, a possible direction for further research could be re-examining the motives and exploring whether there are other motives, not present in this study, that drive the consumption of wellness media content.

7. References

Aaker, D. A., Kumar, V. & Day, G. S. (2004). *Marketing Research*. John Wiley & Sons Inc., USA.

Bouwman, H., & Wijngaert, L. V. D. (2002). Content and context: an exploration of the basic characteristics of information needs. *New Media & Society*, 4(3), 329-353.

Brodie, M., Flournoy, R. E., Altman, D. E., Blendon, R. J., Benson, J. M., & Rosenbaum, M. D. (2000). Health Information, The Internet, And The Digital Divide. *Health Affairs*, 19(6), 255-265.

Cantril, H. (1942). Professor quiz: a gratifications study. In P. F. Lazarsfeld & F. Stanton (eds.) (1942). *Radio research 1941*. Duell, Sloan and Pearce, New York, NY.

Charlesworth, A. & Glantz, S. A. (2005). Smoking in the Movies Increases Adolescent Smoking: A Review. *Pediatrics*. 116(6), 1516-1528.

Cline, R. J. W., & Haynes, K. M. (2001). Consumer health information seeking on the Internet: the state of the art. *Health Education Research*, 16(6), 671-692.

Diaz, J. A., Griffith, R. A., Ng, J. J., Reinert, S. E., Friedmann, P. D., & Moulton, A. W. (2002). Patients' Use of the Internet for Medical Information. *Journal of General Internal Medicine*, 17(3), 180-185.

Dixon, H. G., Scully, M. L., Wakefield, M. A., White, V. M., & Crawford, D. A. (2007). The effects of television advertisements for junk food versus nutritious food on children's food attitudes and preferences. *Social Science & Medicine*, 65(7), 1311-1323.

Dolan, G., Iredale, R., Williams, R., & Ameen, J. (2004). Consumer use of the internet for health information: a survey of primary care patients. *International Journal of Consumer Studies*, 28(2), 147-153.

Dutta-Bergman, M. J. (2004). Primary Sources of Health Information: Comparisons in the Domain of Health Attitudes, Health Cognitions, and Health Behaviors. *Health Communication*, 16(3), 273-288.

Dutta-Bergman, M. J. (2005). The Readership of Health Magazines. *Health Marketing Quarterly*, 22(2), 27-49.

Gore, S. A., Foster, J. A., DiLillo, V. G., Kirk, K., & West, D. S. (2003). Television viewing and snacking. *Eating Behaviors*, 4(4), 399-405.

Gould, S. J. (1988). Consumer Attitudes Toward Health and Health Care: A Differential Perspective. *Journal of Consumer Affairs*, 22(1), 96-118.

Gray, N. J., Klein, J. D., Noyce, P. R., Sesselberg, T. S., & Cantrill, J. A. (2005). Health information-seeking behaviour in adolescence: the place of the internet. *Social Science & Medicine*, 60(7), 1467-1478.

Grénman, M., Räikkönen, J., Wilska, T.-A. (2014). Wellness – Elämyksellinen hyvinvointikulutus haasteena kaupalle ja palveluliiketoiminnalle. *Kulutustutkimus.Nyt*, 8(1), 45-59.

Hair, J. F. Jr., Black, W. C., Babin, B. J., Anderson, R. E. & Tatham, R. L. (2006). *Multivariate Data Analysis*, 6th edition, Prentice-Hall, London.

Harris, J. L., & Bargh, J. A. (2009). Television Viewing and Unhealthy Diet: Implications for Children and Media Interventions. *Health Communication*, 24(7), 660-673.

Harrison, K. (2005). Is “Fat Free” Good for Me? A Panel Study of Television Viewing and Children’s Nutritional Knowledge and Reasoning. *Health Communication*, 17(2), 117-132.

Heinonen, K. (2011). Consumer activity in social media: Managerial approaches to consumers’ social media behavior. *Journal of Consumer Behaviour*, 10(6), 356-364.

Hill, G. J. (2009). Media Images: Do They Influence College Students Body Image? *Journal of Family and Consumer Sciences*, 101(2), 28-32.

Hoffman, D. L., & Novak, T. P. (1996). Marketing in Hypermedia Computer-Mediated Environments: Conceptual Foundations. *Journal of Marketing*, 60(3), 50-68.

Hsu, C.-L., & Lin, J. C.-C. (2008). Acceptance of blog usage: The roles of technology acceptance, social influence and knowledge sharing motivation. *Information & Management*, 45(1), 65-74.

Janz, K., & Becker, M. H. (1984). The Health Belief Model: A Decade Later. *Health Education Quarterly*, 11(1), 1-47.

Jayanti, R. K., & Burns, A. C. (1998). The Antecedents of Preventive Health Care Behavior: An Empirical Study. *Journal of the Academy of Marketing Science*, 26(1), 6-15.

- Jung, J., & Lennon, S. J. (2003). Body Image, Appearance Self-Schema, and Media Images. *Family and Consumer Sciences Research Journal*, 32(1), 27-51.
- Kaplan, A. M., & Haenlein, M. (2010). Users of the world, unite! The challenges and opportunities of Social Media. *Business Horizons*, 53(1), 59-68.
- Katz, E., Blumler, J. G., & Gurevitch, M. (1973a). Uses and Gratifications Research. *Public Opinion Quarterly*, 37(4), 509-523.
- Katz, E., Gurevitch, M., & Hass, H. (1973b). On the Use of the Mass Media for Important Things. *American Sociological Review*, 38(2), 164-181.
- Kaye, B. K. (2005). It's a Blog, Blog, Blog, Blog World. *Atlantic Journal of Communication*, 13(2), 73-95.
- Kaye, B. K. (2010). Going to the Blogs: Toward the Development of a Uses and Gratifications Measurement Scale for Blogs. *Atlantic Journal of Communication*, 18(10), 194-210.
- Kilian, T., Hennigs, N., & Langner, S. (2012). Do Millennials read books or blogs? Introducing a media usage typology of the internet generation. *Journal of Consumer Marketing*, 29(2), 114-124.
- Kraft, F. B., & Goodell, P. W. (1993). Identifying the Health Conscious Consumer. *Journal of Health Care Marketing*, 13(3), 18-25.
- LaRose, R., & Eastin, M. S. (2004). A Social Cognitive Theory of Internet Uses and Gratifications: Toward a New Model of Media Attendance. *Journal of Broadcasting & Electronic Media*, 48(3), 358-377.
- Lee, C.-J. (2009). The Interplay Between Media Use and Interpersonal Communication in the Context of Healthy Lifestyle Behaviors: Reinforcing or Substituting? *Mass Communication and Society*, 13(1), 48-66.
- Lewis, T. (2006). Seeking health information on the internet: lifestyle choice or bad attack of cyberchondria? *Media, Culture & Society*, 28(4), 521-539.
- Lometti, G. E., Reeves, B., & Bybee, C. R. (1977). Investigating the assumptions of uses and gratifications research. *Communication Research*, 4(3), 321-328.
- Malhotra, Naresh K. & Birks, David F. (2006). *Marketing Research: An Applied Approach*, Updated Second European edition, Pearson Education Limited, Essex, England.

Marshall, S. J., Biddle, S. J. H., Gorely, T., Cameron, N., & Murdey, I. (2004). Relationships between media use, body fatness and physical activity in children and youth: a meta-analysis. *International Journal of Obesity*, 28, 1238-1246.

McQuail, D. (1994). *Mass Communication Theory: An Introduction (3rd edition)*. Sage Publications, London.

McQuail, D., Blumler, J., & Brown, J. R. (1972). The Television Audience: A Revised Perspective. In McQuail, D. (ed.) (1972). *Sociology of Mass Communication*. Penguin Books, London.

Michaelidou, N., & Hassan, L. M. (2008). The role of health consciousness, food safety concern and ethical identity on attitudes and intentions towards organic food. *International Journal of Consumer Studies*, 32(2), 163-170.

Moorman, C., & Matulich, E. (1993). A Model of Consumers' Preventive Health Behaviors: The Role of Health Motivation and Health Ability. *Journal of Consumer Research*, 20(2), 208-228.

Morris, M. & Ogan, C. (1996). The Internet as Mass Medium. *Journal of Computer-Mediated Communication*, 1(4), 39-50.

Napoli, J., & Ewing, M. T. (2001). The Net Generation: An Analysis of Lifestyles, Attitudes and Media Habits. *Journal of International Consumer Marketing*, 13(1), 21-34.

O'Reilly, T. (2007). What is Web 2.0: Design Patterns and Business Models for the Next Generation of Software. *Communications & Strategies*, No.1 (First quarter), 17-37.

Papacharissi, Z., & Rubin, A. M. (2000). Predictors of Internet Use. *Journal of Broadcasting & Electronic Media*, 44(2), 175-22.

Pechmann, C., & Ratneshwar, S. (1994). The Effects of Antismoking and Cigarette Advertising on Young Adolescents' Perceptions of Peers Who Smoke. *The Journal of Consumer Research*, 21(2), 236-251.

Perse, E. M., & Courtright, J. A. (1993). Normative Images of Communication Media: Mass and Interpersonal Channels in the New Media Environment. *Human Communication Research*, 19(4), 485-503.

Pierce, J. P., Giplin, E., Burns, D. M., Whalen, E., Rosbrook, B., Shopland, D., & Johnson, M. (1991). Does Tobacco Advertising Target Young People to Start Smoking? *Journal of the American Medical Association*, 266(22), 3154-3158.

Roberts, D. F., & Christenson, P. G. (2000). *"Here's Looking at You, Kid": Alcohol, Drugs and Tobacco in Entertainment Media*. Kaiser Family Foundation, Washington, DC.

Robinson, T. N., Chen, H. L. & Killen, J. D. (1998). Television and Music Video Exposure and Risk of Adolescent Alcohol Use. *Pediatrics*, 102(5), 1238-1246.

Robinson, T. N., Hammer, L. D., Killen, J. D., Kraemer, H. C., Wilson, D. M., Hayward, C., & Taylor, C. B. (1993). Does Television Viewing Increase Obesity and Reduce Physical Activity? Cross-sectional and Longitudinal Analyses Among Adolescent Girls. *Pediatrics*, 91(2), 1238-1246.

Rosenstein, A. W., & Grant, A. E. (1997). Reconceptualizing the role of habit: A new model of television audience. *Journal of Broadcasting & Electronic Media*, 41(3), 324-344.

Ruggiero, T. E. (2000). Uses and Gratifications Theory in the 21st Century. *Mass Communication and Society*, 3(1), 3-37.

Ryan, E. L., & Hoerrner, K. L. (2004). Let Your Conscience Be Your Guide: Smoking and Drinking in Disney's Animated Classics. *Mass Communication and Society*, 7(3), 261-278.

Sender, K., & Sullivan, M. (2008). Epidemics of will, failures of self-esteem: Responding to fat bodies in *The Biggest Loser* and *What Not to Wear*. *Journal of Media & Cultural Studies*, 22(4), 573-584.

Singh, T., Veron-Jackson, L., & Cullinane, J. (2008). Blogging: A new play in your marketing game plan. *Business Horizons*, 51(4), 281-292.

Siró, I., Kápolna, E., Kápolna, B., & Lugasi, A. (2008). Functional food. Product development, marketing and consumer acceptance — A review. *Appetite*, 51(3), 456-467.

Snyder, L. B., Milici, F. F., Slater, M., Sun, H., & Strizhakova, Y. (2006). Effects of Alcohol Advertising Exposure on Drinking Among Youth. *Archives of Pediatrics and Adolescent Medicine*, 160, 18-24.

Stacy, A. W., Zogg, J. B., Unger, J. B., & Dent, C. W. (2004). Exposure to Televised Alcohol Ads and Subsequent Adolescent Alcohol Use. *American Journal of Health Behavior*, 28(6), 498-509.

Swanson, D. L. (1977). The uses and misuses of uses and gratifications. *Human Communication Research*, 3(3), 214-221.

Smeesters, D., & Mandel, N. (2006). Positive and Negative Media Image Effects on the Self. *Journal of Consumer Research*, 32(4), 576-583.

Valentine, D. B., & Powers, T. L. (2013). Generation Y values and lifestyle segments. *Journal of Consumer Marketing*, 30(7), 597-606.

Walsh-Childers, K. & Brown, J. D. (2009). Effects of Media on Personal and Public Health. In Bryant, J. & Oliver, M. B. (Eds.), *Media Effects: Advances in Theory and Research* (3rd edition, pp. 469-489). Routledge, London & New York.

Internet sources and reports:

A-lehdet (2014) *Tiedote 27.05.2014: Suomen paras urheilullisen elämäntyylin blogiyhteisö FitFashion osaksi A-lehtien mediaperhettä*. Available from <http://www.a-lehdet.fi/ajankohtaista/suomen-paras-urheilullisen-elamantyylin-blogiyhteiso-fitfashion-osaksi-lehtien> [Accessed on 15.07.2014].

Blogilista.fi [Accessed on 15.07.2014].

Business Development Bank of Canada (2013). *Mapping your future growth: five game-changing consumer trends*. Available from http://www.bdc.ca/EN/Documents/analysis_research/Report_BDC_Mapping_your_future_growth.pdf [Accessed on 15.07.2014].

MediaAuditFinland (2013) *Levikkitilasto LT2013*. Available from <http://mediaauditfinland.fi/wp-content/uploads/2014/06/Levikkitilasto2013.pdf> [Accessed on 15.07.2014].

Työ- ja elinkeinoministeriö (2014) *TEM raportteja 20/2014: Liikuntaliiketoiminnan ekosysteemin muutokset*. Available from https://www.tem.fi/files/40524/TEMrap_20_2014_web_03072014.pdf [Accessed on 16.12.2014].

Appendix A: Cross tabulations

Cross tabulations: Gender & Cluster membership

Gender x Cluster Crosstabulation

Gender	Cluster (%)				Total n
	1	2	3	4	
Female	70,30	93,90	53,60	73,10	163
Male	29,70	6,10	44,90	26,90	60
Prefer not to say	0,00	0,00	1,40	0,00	1
Total n	37	66	69	52	224
Total %	100,00	100,00	100,00	100,00	100,00

Fisher's Exact p = 0,000

Cross tabulations: Frequency of wellness media use & Cluster membership

Frequency of Use: TV x Cluster Crosstabulation

Frequency of use: TV	Cluster (%)				Total n
	1	2	3	4	
Daily	2,70	0,00	0,00	1,90	2
At least weekly	35,10	27,30	20,30	26,90	59
At least monthly	37,80	39,40	31,90	34,60	80
More seldom	24,30	33,30	47,80	36,50	83
Total n	37	66	69	52	224
Total %	100,00	100,00	100,00	100,00	100,00

Fisher's Exact p = 0,296

Frequency of Use: Magazines x Cluster Crosstabulation

Frequency of use: Magazines	Cluster (%)				Total n
	1	2	3	4	
Daily	2,70	0,00	1,40	1,90	3
At least weekly	45,90	27,30	20,30	26,90	63
At least monthly	35,10	60,60	40,60	50,00	107
More seldom	16,20	12,10	37,70	21,10	51
Total n	37	66	69	52	224
Total %	100,00	100,00	100,00	100,00	100,00

Fisher's Exact p = 0,004

Frequency of Use: Blogs x Cluster Crosstabulation

Frequency of use: Blogs	Cluster (%)				Total n
	1	2	3	4	
Daily	16,20	19,70	1,40	15,40	28
At least weekly	32,40	37,90	15,90	34,60	66
At least monthly	21,60	22,70	17,40	25,00	48
More seldom	29,70	19,70	65,20	25,00	82
Total n	37	66	69	52	224
Total %	100,00	100,00	100,00	100,00	100,00

Pearson Chi-Square p = 0,000

Appendix B: Questionnaire in Finnish

Hyvinvointimediakysely

1. Oletko lukenut hyvinvointiin liittyviä juttuja tai katsonut hyvinvointiin liittyviä TV-ohjelmia viimeisen kolmen kuukauden aikana? *

- Kyllä
- En

2. Kiitos osallistumisestasi.

Haemme vastaajia, jotka ovat hyvinvointimediasisältöjen aktiivisia kuluttajia. Tällä kertaa et siis valitettavasti osunut kohderyhmäämme. Voit siitä huolimatta osallistua leffalippujen arvontaan jättämällä sähköpostiosoitteesi (vastaukset käsitellään nimettöminä).

3. Ikä *

- 18
- 19 - 25
- 26 - 30
- 31 - 40
- 41 - 50
- 51 - 60
- 61 -

4. Sukupuoli *

- Nainen
- Mies
- En halua sanoa

5. Mikä seuraavista vaihtoehdoista kuvaa parhaiten nykyistä tilannettasi? *

- Työssäkäyvä
- Opiskelija
- Työtön
- Muu

6. Mikä on koulutustaustasi tai nykyinen opiskelupaikkasi? *

- Yliopisto
- Ammattikorkeakoulu
- Ammattikoulu
- Lukio
- Peruskoulu
- Muu

7. Arvioi seuraavia väittämiä asteikolla 1-5 sen mukaan, kuinka hyvin ne kuvaavat omaa suhtautumistasi hyvinvointiin. *

(1 = täysin eri mieltä, 2 = jossain määrin eri mieltä, 3 = jossain määrin samaa mieltä, 4 = samaa mieltä, 5 = täysin samaa mieltä).

	1	2	3	4	5
Ruokani sisältämät kemikaalit huolestuttavat minua.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Juomaveteni laadulla on minulle merkitystä.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vältän ruokia, jotka sisältävät nitriittejä tai säilöntäaineita.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Luen enemmän terveyteen liittyviä artikkeleita kuin 3 vuotta sitten.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Olen kiinnostunut terveyteeni liittyvästä tiedosta.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Kiinnitän huomiota terveyteeni jatkuvasti.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
En välitä ilmansaasteista.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pyrin harrastamaan liikuntaa vähintään 30 minuuttia päivässä, kolmena päivänä viikossa.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Harrastan enemmän liikuntaa kuin 3 vuotta sitten.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Liikunnan harrastaminen tukee menestymistäni kaikilla elämäni osa-alueilla.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hyvä terveys vaatii minulta omaa aktiivisuutta.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Käytän päivittäin aikaa vähentääkseni kertyvää stressiä.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
On lääkärin vastuulla pitää minut terveenä.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Terveyteni on oman vaikutuskykyni ulottumattomissa.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mielestäni hyvinvointitrendi on vain ohimenevä villitys.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Olen huolissani terveydestäni vain ollessani sairas.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Päivittäiset ateriansi ovat ravintoarvoiltaan tasapainossa.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ruokavaliossani pyrin välttämään liikaa kolesterolia.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pyrin välttämään stressaavia tilanteita.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8. Missä seuraavista mediakanavista seuraat hyvinvointiin liittyviä sisältöjä? *

Televisio

Aikakauslehdet

Blogit

Muu, mikä?

9. Kuinka usein keskimäärin luet tai katsot hyvinvointiin liittyviä mediasisältöjä? *

Päivittäin

Vähintään kerran viikossa

Vähintään kerran kuukaudessa

Harvemmin

10. Kuinka usein keskimäärin katsot hyvinvointiin liittyviä ohjelmia [televisiosta](#)? *

Päivittäin

Vähintään kerran viikossa

Vähintään kerran kuukaudessa

Harvemmin

11. Kuinka usein keskimäärin luet hyvinvointiin liittyviä juttuja [aikakauslehdistä](#)? *

Päivittäin

Vähintään kerran viikossa

Vähintään kerran kuukaudessa

Harvemmin

12. Kuinka usein keskimäärin luet hyvinvointiin liittyviä juttuja [blogeista](#)? *

Päivittäin

Vähintään kerran viikossa

Vähintään kerran kuukaudessa

Harvemmin

Hyvinvointiin liittyvien mediasisältöjen kulutus

Vastatessasi tämän osion kysymyksiin, mieti omaa hyvinvointiin liittyvien mediasisältöjen kulutustasi kaikissa mediakanavissa (televisiossa, aikakauslehdissä ja blogeissa).

13. Arvioi seuraavia väittämiä asteikolla 1-5 sen mukaan, kuinka hyvin ne kuvaavat omaa hyvinvointisisältöjen kulutustasi. *

(1 = täysin eri mieltä, 2 = jossain määrin eri mieltä, 3 = jossain määrin samaa mieltä, 4 = samaa mieltä, 5 = täysin samaa mieltä)

	1	2	3	4	5
Hyvinvointimediassällöt auttavat minua ymmärtämään maailman tapahtumia.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tunnen, että opin paljon hyvinvointimediassällöistä.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hyvinvointimediassällöistä saatu tieto ylipäättään on hyödyllistä minulle.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hyvinvointimediassällöt auttavat minua oppimaan itsestäni ja muista.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Seuraan hyvinvointimediassältöjä rentoutuakseni.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Seuraan hyvinvointimediassältöjä viihdyttääkseni itseäni.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Seuraan hyvinvointimediassältöjä unohtaakseni työ- tai muut asiat.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Seuraan hyvinvointimediassältöjä kuluttaakseni aikaa.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Seuraan hyvinvointimediassältöjä saadakseni tukea muilta.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Seuraan hyvinvointimediassältöjä saadakseni keskustelunaiheita.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Seuraan hyvinvointimediassältöjä tunteakseni kuuluvani joukkoon.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Seuraan hyvinvointimediassältöjä löytääkseni muita, jotka kunnioittavat näkemyksiäni.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Seuraan hyvinvointimediassältöjä löytääkseni kaltaisiani ihmisiä.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hyvinvointimediassällöissä kuvataan toisinaan ongelmia, jotka muistuttavat omia ongelmiani.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hyvinvointimediassällöt auttavat minua toisinaan ymmärtämään omaa elämääni. elämääni.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hyvinvointimediassältöjen seuraaminen on tyypillistä minulle ja elämäntyylilleni.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Hyvinvointiin liittyvien sisältöjen kulutus televisiossa

Vastatessasi tämän osion kysymyksiin, mieti omaa hyvinvointiin liittyvien mediassältöjen kulutustasi televisiossa. Vaikka et katsoisi hyvinvointiin liittyviä TV-ohjelmia, valitse silti vaihtoehto, jonka tunnet sopivan itsellesi parhaiten.

14. Arvioi seuraavia väittämiä asteikolla 1-5 sen mukaan, kuinka hyvin ne kuvaavat omaa hyvinvointisisältöjen kulutustasi. *

(1 = täysin eri mieltä, 2 = jossain määrin eri mieltä, 3 = jossain määrin samaa mieltä, 4 = samaa mieltä, 5 = täysin samaa mieltä)

	1	2	3	4	5
Hyvinvointiin liittyvät TV-ohjelmat auttavat minua ymmärtämään maailman tapahtumia.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

- Tunnen, että opin paljon hyvinvointiin liittyvistä TV-ohjelmista.
- Hyvinvointiin liittyvistä TV-ohjelmista saatu tieto ylipäättään on hyödyllistä minulle.
- Hyvinvointiin liittyvät TV-ohjelmat auttavat minua oppimaan itsestäni ja muista.
- Katson hyvinvointiin liittyviä TV-ohjelmia rentoutuakseni.
- Katson hyvinvointiin liittyviä TV-ohjelmia viihdyttääkseni itseäni.
- Katson hyvinvointiin liittyviä TV-ohjelmia unohtaakseni työ- tai muut asiat.
- Katson hyvinvointiin liittyviä TV-ohjelmia kuluttaakseni aikaa.
- Katson hyvinvointiin liittyviä TV-ohjelmia saadakseni tukea muilta.
- Katson hyvinvointiin liittyviä TV-ohjelmia saadakseni keskustelunaiheita.
- Katson hyvinvointiin liittyviä TV-ohjelmia tunteakseni kuuluvani joukkoon.
- Katson hyvinvointiin liittyviä TV-ohjelmia löytääkseni muita, jotka kunnioittavat kunnioittavat näkemyksiäni.
- Katson hyvinvointiin liittyviä TV-ohjelmia löytääkseni kaltaisiani ihmisiä.
- Hyvinvointiin liittyvissä TV-ohjelmissä kuvataan toisinaan ongelmia, jotka muistuttavat omia ongelmiani.
- Hyvinvointiin liittyvät TV-ohjelmat auttavat minua toisinaan ymmärtämään omaa elämääni.
- Hyvinvointiin liittyvien TV-ohjelmien katsominen on tyypillistä minulle ja elämäntyylilleni.

Hyvinvointiin liittyvien sisältöjen kulutus aikakauslehdissä

Vastatessasi tämän osion kysymyksiin, mieti omaa hyvinvointiin liittyvien mediasisältöjen kulutustasi aikakauslehdissä. Vaikka et lukisi hyvinvointiin liittyviä aikakauslehtiä, valitse silti vaihtoehto, jonka tunnet sopivan itsellesi parhaiten.

15. Arvioi seuraavia väittämiä asteikolla 1-5 sen mukaan, kuinka hyvin ne kuvaavat omaa hyvinvointisisältöjen kulutustasi. *

(1 = täysin eri mieltä, 2 = jossain määrin eri mieltä, 3 = jossain määrin samaa mieltä, 4 = samaa mieltä, 5 = täysin samaa mieltä)

- | | 1 | 2 | 3 | 4 | 5 |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Hyvinvointiin liittyvät aikakauslehdet auttavat minua ymmärtämään maailman tapahtumia. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Tunnen, että opin paljon hyvinvointiin liittyvistä aikakauslehdistä. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Hyvinvointiin liittyvistä aikakauslehdistä saatu tieto ylipäättään on hyödyllistä minulle. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

- Hyvinvointiin liittyvät aikakauslehdet auttavat minua oppimaan itsestäni ja muista.
- Luen hyvinvointiin liittyviä aikakauslehtiä rentoutuakseni.
- Luen hyvinvointiin liittyviä aikakauslehtiä viihdyttääkseni itseäni.
- Luen hyvinvointiin liittyviä aikakauslehtiä unohtaakseni työ- tai muut asiat.
- Luen hyvinvointiin liittyviä aikakauslehtiä kuluttaakseni aikaa.
- Luen hyvinvointiin liittyviä aikakauslehtiä saadakseni tukea muilta.
- Luen hyvinvointiin liittyviä aikakauslehtiä saadakseni keskustelunaiheita.
- Luen hyvinvointiin liittyviä aikakauslehtiä tunteakseni kuuluvani joukkoon.
- Luen hyvinvointiin liittyviä aikakauslehtiä löytääkseni muita, jotka kunnioittavat kunnioittavat näkemyksiäni.
- Luen hyvinvointiin liittyviä aikakauslehtiä löytääkseni kaltaisiani ihmisiä.
- Hyvinvointiin liittyvissä aikakauslehdissä kuvataan toisinaan ongelmia, jotka muistuttavat omia ongelmiani.
- Hyvinvointiin liittyvät aikakauslehdet auttavat minua toisinaan ymmärtämään omaa elämääni.
- Hyvinvointiin liittyvien aikakauslehtien lukeminen on tyypillistä minulle ja elämäntyylilleni.

Hyvinvointiin liittyvien sisältöjen kulutus blogeissa

Vastatessasi tämän osion kysymyksiin, mieti omaa hyvinvointiin liittyvien mediasisältöjen kulutustasi blogeissa. Vaikka et lukisi hyvinvointiin liittyviä blogeja, valitse silti vaihtoehto, jonka tunnet sopivan itsellesi parhaiten.

16. Arvioi seuraavia väittämiä asteikolla 1-5 sen mukaan, kuinka hyvin ne kuvaavat omaa hyvinvointisisältöjen kulutustasi. *

(1 = täysin eri mieltä, 2 = jossain määrin eri mieltä, 3 = jossain määrin samaa mieltä, 4 = samaa mieltä, 5 = täysin samaa mieltä)

- | | 1 | 2 | 3 | 4 | 5 |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Hyvinvointiin liittyvät blogit auttavat minua ymmärtämään maailman tapahtumia. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Tunnen, että opin paljon hyvinvointiin liittyvistä blogeista. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Hyvinvointiin liittyvistä blogeista saatu tieto ylipäätään on hyödyllistä minulle. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Hyvinvointiin liittyvät blogit auttavat minua oppimaan itsestäni ja muista. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Luen hyvinvointiin liittyviä blogeja rentoutuakseni. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Luen hyvinvointiin liittyviä blogeja viihdyttääkseni itseäni. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Luen hyvinvointiin liittyviä blogeja unohtaakseni työ- tai muut asiat. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

- Luen hyvinvointiin liittyviä blogeja kuluttaakseni aikaa.
- Luen hyvinvointiin liittyviä blogeja saadakseni tukea muilta.
- Luen hyvinvointiin liittyviä blogeja saadakseni keskustelunaiheita.
- Luen hyvinvointiin liittyviä blogeja tunteakseni kuuluvani joukkoon.
- Luen hyvinvointiin liittyviä blogeja löytääkseni muita, jotka kunnioittavat näkemyksiäni.
- Luen hyvinvointiin liittyviä blogeja löytääkseni kaltaisiani ihmisiä.
- Hyvinvointiin liittyvissä blogeissa kuvataan toisinaan ongelmia, jotka muistuttavat omia ongelmiani.
- Hyvinvointiin liittyvät blogit auttavat minua toisinaan ymmärtämään omaa elämääni.
- Hyvinvointiin liittyvien blogien lukeminen on tyypillistä minulle ja elämäntyylilleni.

17. Kiitos vastauksistasi!

Voit halutessasi osallistua leffalippujen arvontaan jättämällä alla olevaan kenttään sähköpostiosoitteesi. Kaikki vastaukset käsitellään nimettöminä. Paina lopuksi "lähetä".

100% valmiina

