

WORLDWIDE SURVEY OF FITNESS TRENDS FOR 2018

The CREP Edition

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Apply It:

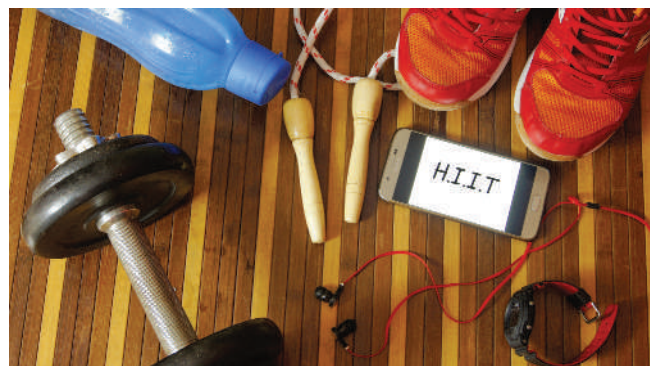
From this article, the reader should understand the following concepts:

- Tell the difference between a fad and a trend.
- Apply and use worldwide trends in the commercial, corporate, clinical (including medical fitness), and community health fitness industry.
- Read expert opinions about identified fitness trends for 2018.

Key words: Commercial, Clinical, Corporate, Community, Expert Opinions, Future Programs

INTRODUCTION

This annual survey of worldwide fitness trends is now in its 12th year. New this year is the inclusion of some member organizations of the Coalition for the Registration of Exercise Professionals (CREP). Participating organizations included the American College of Sports Medicine (ACSM), American Council on Exercise (ACE), National Council on Strength and Fitness (NCSF), and The Cooper Institute®. In 2018, some emerging trends from the last 3 years have been confirmed and two new trends are in the top 10. In 2014, high-intensity interval training (HIIT) was ranked number 1, which had previously been held for a long time (since 2008) by educated, certified, and experienced fitness professionals, which was number 4 in 2016, number 5 for 2017, and number 6 for 2018. For 2018, HIIT is back to being ranked number 1 after falling to number 3 in 2017. Body weight training took over the number 1 spot in 2015 falling to number 2 behind “wearable technology” in 2016 and 2017 and is now number 4. Wearable technology fell from the top spot in 2017 to number 3 for 2018. The 2018 survey continues to support 17 of the previous top 20 trends from 2017 with three additional trends appearing in the top 20: licensure for fitness professionals (number 16), core training (number 19), and sport-specific training (number 20). On the bottom of the list of the 40 potential fitness trends were fitness social clubs (number 40), dance cardio (number 39), pregnancy/postnatal classes (number 38), barbell training classes (number 37), and water/aquatic workouts (number 36). Falling out of the top 20 fitness trends were worksite health promotion (number 16 in 2017 and number 23 in 2018), smartphone exercise apps (number 17 in 2017 and number 26 in 2018), and outcomes measures (number 18 in 2017 and number 21 in 2018). The results of this annual survey may help the health and fitness industry make some very important investment decisions for future growth and development. These important business decisions will be based on emerging trends that have been identified by health



fitness professionals and not the latest exercise innovation marketed during late night infomercials on television or the next hottest celebrity endorsing a product.

Over the past 12 years, the editors of *ACSM's Health & Fitness Journal*[®] (FIT) have circulated this electronic survey to thousands of professionals around the world to determine health and fitness trends. The survey in this issue of the *Journal* helps to guide health fitness programming efforts for 2018 and beyond. The first survey (1), conducted in 2006 (for predictions in 2007), introduced a systematic way to predict health and fitness trends, and surveys have been conducted annually since that time (2–11) using the same methodology. Because this is a survey of trends, respondents were asked to first make the very important distinction between a “fad” and a “trend.”

Trend:

“a general development or change in a situation or in the way that people are behaving” (<http://dictionary.cambridge.org/us/>).

Fad:

“a fashion that is taken up with great enthusiasm for a brief period” (<http://dictionary.reference.com/>).

These annual surveys of health fitness trends in the commercial (usually for-profit companies), clinical (including medical fitness programs), community (not for profit), and corporate divisions of the industry continue to confirm previously identified trends. Some of the trends first identified for 2007 such as educated, certified, and experienced fitness professionals (number 6 in 2018) and strength training (number 5 in 2018) have stayed at the top of the list since the first survey was published. Other new trends seem to be emerging for 2018 (number 16 licensure for fitness professionals, number 19 core training, and number 20 sport-specific training) and still others have dropped out of the top 20 (number 21 outcomes measures, number 23 worksite health promotion, and number 26 smartphone exercise apps). Future surveys will either confirm these as new trends or they will fall short of making a sustaining impact on the health fitness industry and drop out of the survey as a trend. Dropping out of the survey may indicate that what was once perceived to be a trend was actually a fad (note that number 22 indoor cycling, number 34 Pilates, and number 39 dance cardio continue to slip as international trends). Wearable technology emerged as a developing trend for 2016 and 2017 but slipped to number 3 for 2018.

As in all previous years, the fitness trends survey makes no attempt to evaluate products, services, equipment, gym apparatus, hardware, software, tools, or other exercise machines that may appear in clubs or recreation centers or show up during late night television infomercials. The survey was designed to confirm or to introduce new trends (not fads) that have a perceived positive impact on the industry according to the international respondents. By using this survey construct, some of the trends identified in earlier surveys could predictably appear for several years. Likewise, fads may appear but will unsurprisingly drop off

the list in subsequent years (some as short as 1 year). The potential market impact of new equipment, an exercise device, or program is not evaluated by this annual survey. The information provided in this survey is left entirely up to the readers to determine if it fits their own business model and how to best use the information for potential market expansion.

The benefits to commercial health clubs (those that are for profit) are the establishment (or maybe the justification) of potential new markets, which could result in increased and more sustainable revenue. Community-based programs (typically not for profit) can use these results to justify an investment in their own markets by providing expanded programs serving families and children. Corporate wellness programs and medical fitness centers may find these results useful through an increased service to their members and to their patients. The health and fitness industry should carefully and thoughtfully apply this information to its own unique setting.

THE SURVEY

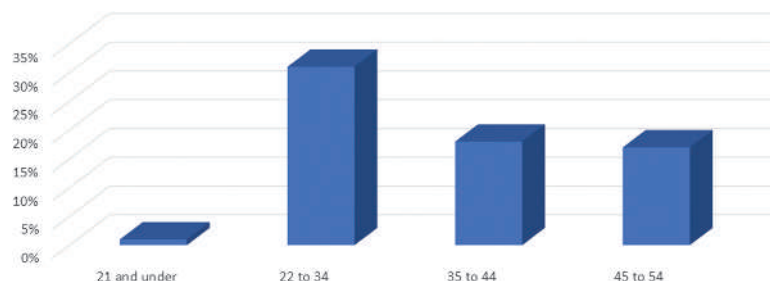
There were 40 possible trends in the 2018 survey. The top 25 trends from previous years were included in the survey, as were some potentially emerging trends identified by the editors of FIT. To try and establish equity, the editors represent all four sectors of the health fitness industry (corporate, clinical, community, commercial), as well as from academia. In the survey, potential trends were identified followed by a short explanation to offer the respondent a few details without inconveniencing them with too much reading, analysis, or interpretation. The survey was designed to be completed in 15 minutes or less. As an incentive to complete the survey, the editors made available nine fitness-related books published by *Wolters Kluwer/Lippincott Williams & Wilkins* and *Human Kinetics* and a \$100 MasterCard gift card. These incentives were designed to help increase participation in the survey.

The survey was constructed using a Likert-type scale ranging from a low score of 1 (least likely to be a trend) to a high score of 10 (most likely to be a trend). After each scoring opportunity, space was allowed for additional comments. At the conclusion of the survey, more space was left for the respondent to include comments or potential fitness trends left off the list to be considered for future surveys. The next step was to send the survey electronically to a defined list of health and fitness professionals. Using SurveyMonkey (www.surveymonkey.com), the online survey was sent to 114,455 health fitness professionals. This list included some CREP member organizations (ACE, NCSF, and The Cooper Institute[®]), certified fitness professionals, current ACSM certified professionals, ACSM Alliance members, ACSM professional members who add a FIT subscription, non-member FIT subscribers, FIT Associate Editors, and FIT Editorial Board members. In addition, a link was posted on the *Journal's* web site, ACSM Journals Facebook page, ACSM Facebook page, and on the FIT Twitter page.

After 6 weeks and four additional notices, 4,133 responses were received, which represents a good return rate of 4%, which

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Figure 1. Age (in years) of survey respondents.



is a little less than previous surveys. Responses were received from just about every continent and included the countries of Mexico, Chile, Columbia, Venezuela, Portugal, Argentina, Ecuador, Brazil, Serbia, Japan, United Arab Emirates, Australia, United Kingdom, Canada, Germany, India, Italy, Taiwan, Switzerland, Jamaica, South Africa, Bermuda, Greece, Ireland, Finland, Kenya, New Zealand, China, Barbados, Romania, Singapore, South Korea, Israel, Lebanon, Egypt, Malaysia, Philippines, Thailand, Spain, Sweden, and the United States. Demographics of the survey respondents included 56% females across a wide variability in ages (Figure 1), 38% having more than 10 years of experience in the industry (Figure 2), and 20% with more than 20 years of experience. Almost 25% of the survey respondents earned an annual salary of more than \$50,000, which included 5% who earned more than \$100,000 a year (Figure 3). Respondents were asked to identify their occupations (Table 1), with 28% indicating that they were full-time or part-time personal trainers. When asked if they worked full-time or part-time, 83% indicated full-time and 17% part-time (less than 20 hours per week). Figure 4 indicates where respondents work.

SURVEY RESULTS

The first step in the survey analysis was to collate the responses and then to rank order them from highest (most popular trend) to lowest (least popular trend). Only the top 20 for 2018 are

described in this report. After rank ordering the responses, four internationally recognized experts representing the CREP partnership commented on the findings. Their analysis and commentary are included at the end of this report. For a comparison of the top 10 trends from the past 11 years' surveys (1–11), please see the comprehensive comparison table available online at <http://links.lww.com/FIT/A74>.

The 2018 survey results (Table 2) seem to reinforce the findings of previous years, which was expected when tracking trends and not fads. New to the top 20 trends identified for 2018 are licensure for fitness professionals, core training, and sport-specific training. Out of the top 20 trends for 2018 are worksite health promotion (number 16 in the 2017 survey), smartphone exercise apps (number 17 in the 2017 survey), and outcomes measures (number 18 in last year's survey).

1. High-intensity interval training. HIIT typically involves short bursts of high-intensity exercise followed by a short period of rest or recovery and typically takes less than 30 minutes to perform (although it is not uncommon for these programs to be much longer in duration). Although being offered as a possible trend in previous surveys but not making the top 20, HIIT was number 1 in the survey for 2014 despite the warnings of many survey respondents about potential dangers. Even after a few years in the top 10 fitness trends, many of the comments claimed that

Figure 2. Years of experience reported by the survey respondents.

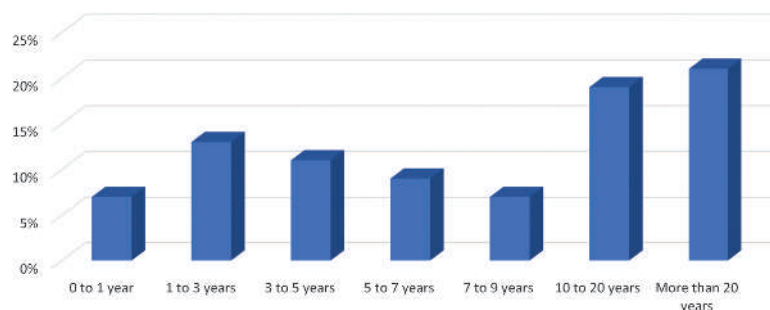
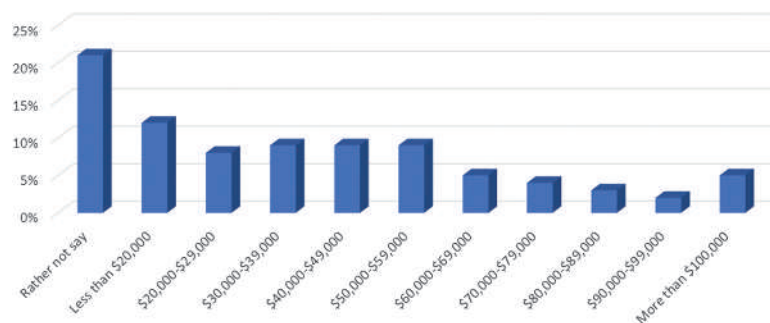


Figure 3. Annual salary of survey respondents.



clients liked this kind of program for a short time then were looking for something else, whereas others warned that it was very popular but were concerned with a potentially high injury rate. Others working with clinical populations in medical fitness centers said they would like to try it with their patients but would substitute high-intensity with moderate-intensity interval training. Despite the warnings by some fitness professionals of

potentially increased injury rates using HIIT, this form of exercise has been popular in gyms all over the world.

TABLE 1:
Respondents' Occupation

Respondents' Occupation	Total Respondents
Personal trainer (part-time)	17%
Personal trainer (full-time)	11%
Group exercise leader	3%
Health fitness specialist (or equivalent)	4%
Clinical exercise specialist (or equivalent)	2%
Clinical exercise physiologist	6%
Program manager	3%
Health/fitness director	5%
Owner/operator	3%
Health/wellness coach	3%
Undergraduate student	1%
Graduate student	3%
Teacher	2%
Professor	5%
Medical professional (M.D./D.O., RN, physical or occupational therapist)	4%
Registered dietician (RD, RDN, LD)	1%
Other	6%

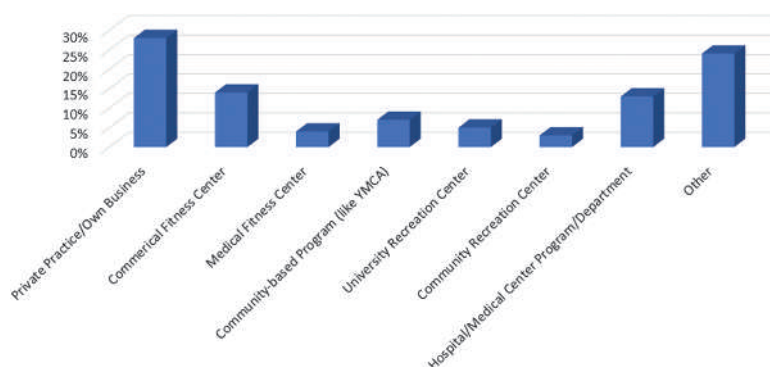
2. *Group training.* Group exercise instructors teach, lead, and motivate individuals through intentionally designed larger group exercise classes (more than five or it would be group *personal* training). Group programs are designed to be effective sessions for different fitness levels and are motivational with instructors having leadership techniques that help individuals in their classes achieve fitness goals. There are many types of classes and equipment, from aerobics and bicycles to dance classes. Group exercise training programs have been around for a long time and have appeared as a potential worldwide trend since this survey was originally constructed. However, it was only in 2017 that group exercise training made the top 20, appearing at number 6. None of the respondents could explain why group training has become popular, so it will be interesting to watch this trend in 2018 and beyond. Note that this is a general trend for larger exercise classes and not specialty classes such as Zumba and other dance classes.

3. *Wearable technology.* Wearable technology includes activity trackers, smart watches, heart rate monitors, GPS tracking devices, and smart eye glasses (designed to show maps and track activity) that were introduced only a few years ago. Examples include fitness and activity trackers like those from Misfit, Apple iWatch, Garmin, EFOSMH, Pebble Time, Juboury, Samsung, Basis, Jawbone, and Fitbit. Trending in this part of the industry today now includes smart glasses, with a predicted \$1.5 billion in sales (<http://www.juniperresearch.com/home>) to smart fabrics and interactive textiles. It is unpredictable how wearable technology will advance over the next decade.

4. *Body weight training.* Body weight training appeared for the first time in the trends survey in 2013 (at number 3) and was in the number 2 position for 2017. Body weight training did not appear as a survey trend option before 2013 because it only became popular (as a defined trend) in gyms around the world over the last few years. Body weight training has been used previously, in fact people have been using their own body weight for centuries as a form of resistance training. But new packaging, particularly by commercial clubs, has now made it popular in

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Figure 4. Where do you work?



all kinds of gyms and health clubs around the world. Typical body weight training programs use minimal equipment, which makes it a very inexpensive way to exercise effectively. Although

most people think of body weight training as being limited to push-ups and pull-ups, it can be much more than that.

TABLE 2:
Top 20 Worldwide Fitness Trends for 2018

2018	
1	High-intensity interval training
2	Group training
3	Wearable technology
4	Body weight training
5	Strength training
6	Educated, certified, and experienced fitness professionals
7	Yoga
8	Personal training
9	Fitness programs for older adults
10	Functional fitness
11	Exercise and weight loss
12	Exercise is Medicine
13	Group personal training
14	Outdoor activities
15	Flexibility and mobility rollers
16	Licensure for fitness professionals
17	Circuit training
18	Wellness coaching
19	Core training
20	Sport-specific training

5. *Strength training.* Strength training remains popular in all sectors of the health and fitness industry and for many different kinds of clients. Strength training dropped to number 4 in the 2015 and 2016 surveys and number 5 in 2017 after being at the number 2 position for 2 years but has been a strong trend since the first year of this survey. Many younger clients of both community-based programs and commercial clubs train almost exclusively using weights. In today's gyms, however, there are many others (men and women, young and old, children, and patients with a stable chronic disease) whose main focus is on using weight training to improve or maintain strength. Many contemporary and innovative health fitness professionals incorporate some form of strength training into the comprehensive exercise routine for their clients and for their patients. It is not uncommon for cardiovascular and pulmonary rehabilitation or metabolic disease management programs to include weight training in the exercise programs for their patients.



6. *Educated, certified, and experienced fitness professionals.* Falling to number 3 in 2015, to number 5 in 2016, and back to number 4 in 2017, this is a trend that continues now that there are third-party accreditations offered by national accrediting organizations for

health and fitness and clinical exercise program professionals and a registry designed for exercise professionals. There continues to be sustained growth of educational programs at community colleges and colleges and universities, which have become accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP, www.caahep.org) through the Committee on Accreditation for the Exercise Sciences (www.coaes.org) and more certification programs independently accredited by the National Commission for Certifying Agencies (NCCA, www.credentialingexcellence.org/NCCA) and the newly announced accreditation offered by the American National Standards Institute. As the economy continues to grow and as the market for fitness professionals becomes even more crowded and more competitive, interest in some degree of regulation either from within the industry or from external sources (*i.e.*, government) seems to be expanding. In 2007, CAAHEP added a Personal Fitness Trainer accreditation for certificate (1 year) and associate (2 years) degree programs. The accreditation for the academic training of the personal fitness trainer joined academic program accreditation for exercise science (baccalaureate) and exercise physiology (graduate programs in either applied exercise physiology or clinical exercise physiology). Recently, the not-for-profit CREP was created. CREP maintains the United States Registry of Exercise Professionals (www.USREPS.org), which is recognized internationally by the International Confederation of Registers for Exercise Professionals. For more information, contact info@usreps.org.

7. *Yoga*. Moving slightly up the list for 2018 is yoga. In 2017 it ranked number 8 after occupying the number 7 spot in 2015 and number 10 in 2016. Yoga first appeared in the top 10 in this survey in 2008, fell out of the top 20 in 2009, but made a great comeback in the 2010 (number 14) and 2011 surveys (number 11). In 2012, yoga was number 11 on the list, falling to number 14 in 2013 and up to number 7 in 2015. Yoga comes in a variety of forms including Power Yoga, Yogalates, and Bikram Yoga (the one done in hot and humid environments). Other forms of yoga include Iyengar Yoga, Ashtanga, Vinyasa Yoga, Kripalu Yoga, Anuara Yoga, Kundalini Yoga, and Sivananda Yoga. Instructional videos and books are abundant, as are the growing numbers of certifications for the many yoga formats. The sustained popularity of yoga seems to be that it reinvents and refreshes itself every year making it an attractive form of exercise.

8. *Personal training*. Professional personal trainers continue to seek the professionalization of their part of the industry (see trend number 6). Since this survey was first published in 2006 (1), personal training has been in the top 10 of this survey. Much attention has recently been paid to the education (through third-party accreditation of CAAHEP) and certification (through third-party accreditation by NCCA) of personal trainers. Recent legislation has been introduced in an attempt to license personal trainers in a number of states and the District of Columbia (California, New Jersey, Massachusetts, Georgia, and several others), but all have so far not been adopted. Although there have been some minor variations of personal training (*e.g.*, small

groups as opposed to one-on-one), personal trainers will continue to be an important part of the professional staff of health and fitness centers. Personal trainers are employed by community-based programs, in commercial settings, in corporate wellness programs, and in medical fitness programs, or are self-employed and work independently.

9. *Fitness programs for older adults*. There is a growing market of older adults who are now retiring healthier than other generations. Health fitness facilities should consider taking advantage of this by providing safe, age-appropriate exercise programs for this once-ignored sector of the population. The highly active older adult (the athletic old) can be targeted by commercial and community-based organizations to participate in more rigorous exercise programs including strength training, team sports, and HIIT when appropriate. Even the frail elderly can improve their balance and ability to perform activities of daily living when given appropriate functional fitness program activities. Health and fitness professionals should consider developing programs for people of retirement age and fill the time during the day when most gyms are underused (typically between 9 and 11 a.m. and 2 and 4 p.m.). It can be assumed that people who are retired not only have greater sums of discretionary money, but they also have a tendency to spend it wisely and may have more time to engage in an exercise program. The “baby boom generation” is now aging into retirement, and because they may have more discretionary money than their younger counterparts, fitness clubs should capitalize on this growing market.



10. *Functional fitness*. Functional fitness is defined as using strength training to improve balance, coordination, force, power, and endurance to enhance someone’s ability to perform activities of daily living. Replicating actual physical activities someone might do as a function of their daily routine, functional fitness first appeared on the survey in the number 4 position in 2007 but fell to number 8 in 2008 and number 11 in 2009. It reappeared in the top 10 for 2010 at number 7 and in 2011 as number 9. In 2012, functional fitness was number 10 and in 2013 and 2014 it was number 8, number 9 for 2015, number 7 in 2016, and number

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12 in 2017. Some of the survey respondents said they typically pair functional fitness with fitness programs for older adults (see trend number 9) depending on the needs of the client. Functional fitness also is used in clinical programs to replicate activities done around the home.

11. Exercise and weight loss. Exercise in weight loss programs has been a top 20 trend since the survey began. In 2009, exercise and weight loss was ranked number 18, moving to number 12 in 2010, number 7 in 2011, and number 4 in 2012, and in 2013 the number 5 spot. In 2014, this trend was ranked number 6 and remained at number 6 for 2015. Exercise and weight loss was number 9 in the 2016 survey and number 10 in the 2017 survey. The combination of exercise and weight loss emphasizes caloric restriction with a sensible exercise program. Organizations, particularly those that are for profit and are in the business of prescribing weight loss programs, will continue to incorporate regular exercise as well as caloric restriction for weight control according to the 2018 survey. The combination of exercise and diet is essential for weight loss maintenance and can improve compliance to caloric restriction diets. Most of the well-publicized diet plans integrate exercise in addition to the daily routine of providing prepared meals to their clients.

12. Exercise is Medicine. Exercise is Medicine is a global health initiative that is focused on encouraging primary care physicians and other health care providers to include physical activity when designing treatment plans for patients and referring their patients to fitness professionals. The program is committed to the belief that physical activity is integral in the prevention and treatments of diseases and should be regularly assessed and “treated” as part of all health care provider visits. Exercise is Medicine goes beyond the recognition of the positive effects of regular exercise by physicians in the routine care of their patients. It encourages physicians to develop a regular referral program for patients into community programs. It also encourages exercise professionals to develop significant relationships in their communities with health care providers so that they have the necessary confidence to routinely refer their patients to qualified professionals. The Exercise is Medicine movement’s goal is for the fitness professional to become a member of the continuum of care for patients. Physicians and other health care providers should refer patients to exercise professionals in their communities with great confidence.

13. Group personal training. Group personal training continues to be a trend in 2018. The personal trainer continues to provide the personal service clients expect of one-to-one training (see trend number 8) but now in a small group typically of two to four, offering potentially deep discounts to each member of the group and creating an incentive for clients to put small groups together (as opposed to individual and often expensive personal training). In 2007, group personal training was number 19 on the list, but in 2008, it rose to number 15 but dropped again in 2009 to number 19 and improved to number 10 in 2010. In 2011, group personal training was number 14 on the survey, number 8 in 2012, number 10 in 2013, number 9 in

2014, number 10 in 2015, number 11 in 2016, and number 14 in 2017. In these challenging economic times, personal trainers are being more creative in the way they package personal training sessions and how they market themselves in small groups. Training two or three people at the same time in a small group seems to make good economic sense for both the trainer and the client.

14. Outdoor activities. Hiking, canoeing, kayaking, and games or sports are examples of outdoor activities. Outdoor activities also can include high adventure programs like overnight camping trips and mountain climbing. The trend for health and fitness professionals to offer outdoor activities for their clients began in 2010. In that year, outdoor activities was number 25 in the annual survey and in 2011 it ranked number 27. In 2012, outdoor activities was number 14, and in 2013, outdoor activities was number 12, in 2016 it was ranked number 14, and number 13 in 2017. Outdoor activities can be done with family and friends, with a group, or by yourself. Some personal trainers have used outdoor activities as a form of small group personal training.

15. Flexibility and mobility rollers. These devices include the deep tissue roller, myofascial release, and trigger point relief. Mobility rollers are specifically designed to massage, relieve muscle tightness, alleviate muscle spasms, improve circulation, ease muscular discomfort, and assist in the return to normal activity. Rollers have been designed for the low back, hips, and for larger muscle groups such as the hamstrings and the gluteal muscles. These rollers are typically made of foam, whereas others are hard rubber or wood depending on the desired effect. Although the research is not abundant, there seems to be a growing market for these specialized devices. Flexibility rollers were the number 16 trend in 2016 and number 20 in 2017. Fad or trend, only time will tell.

16. Licensure for fitness professionals. Some professions in the United States and around the world are regulated by licensure. For example, someone cannot call themselves a medical doctor or nurse and in most states a physical therapist or dietitian without holding a license. This is a trend in the fitness industry for more regulations of fitness professionals such as personal trainers. It is important for the reader to know that licensure for any profession is done at the state level so any legislative action is done locally and not nationally. There has been some legislation introduced in a number of states, but all so far have been unsuccessful. This is the first time that licensure for fitness professionals has been in the top 20 trends in the industry.

17. Circuit training. Circuit training appeared in 2013 (number 18) for the first time in the top 20 trends and in 2015 occupied the number 14 position, up from number 15 in 2014. In 2016, it was trend number 18 and number 19 in 2017. Some respondents pointed out that circuit training is similar to HIIT but at a much lower or even moderate intensity. Circuit training is typically a group of about 10 exercises that are completed in succession and in a predetermined sequence. Each exercise is performed for a specified number of repetitions or for a set period before having a quick rest and moving on to the next exercise. Circuit weight training has been around for a long time, and it

seems to continue to be popular. Circuit weight training has dated back to 1953, but it is impossible to determine exactly when and under what circumstances it was first developed.



18. Wellness coaching. Wellness coaching has been in the top 20 since 2010. Wellness coaching was listed at number 17 in 2014, number 13 in 2015, number 13 for 2016, and number 15 in 2017. Wellness coaching is the integration of behavioral change science with health promotion, disease prevention, and rehabilitation. Wellness coaching often uses a one-on-one approach similar to a personal trainer with the coach providing support, guidance, encouragement, and confirmation when short- and long-term goals are reached. The wellness coach focuses on the client's values, needs, vision, aspirations, and goals. According to the 2018 trends survey (and results from past surveys), it appears as though some personal trainers and other health and fitness professionals are now adopting wellness coaching and its principled techniques of behavior change into their client's exercise sessions.

19. Core training. Core training stresses strength and conditioning of the stabilizing muscles of the abdomen, thorax, and back. It typically includes exercises of the hips, lower back, and abdomen, all of which provide support for the spine and thorax. Exercising the core muscles improves overall stability of the trunk and transfers that to the extremities, enabling the individual to meet the demands of activities of daily living and for the performance of various sports that require strength, speed, and agility. Core training often uses stabilizing devices such as exercise balls, BOSU balls, wobble boards, and foam rollers. From 2007 to 2010, core training was in the top 5 of the fitness trends. Since 2010, it has been dropping to occupying the 19th spot in 2016 and dropping out of the top 20 in 2017.

20. Sport-specific training. Falling from a top 10 spot (number 8) in 2010, sport-specific training dropped to number 16 for 2011 and number 17 for 2012, dropped out of the top 20 in 2013, and reappeared as number 18 in 2014 and number 16 for 2015. For 2016, sport-specific training was ranked at number 15 and dropped out of the top 20 for 2017. This trend incorporates sport-specific training for sports such as baseball and tennis, designed especially for young athletes. For example, a high school athlete might join a

commercial or community-based fitness organization to help develop skills during the off-season and to increase strength and endurance specific to that sport, something like functional fitness for sport performance. This is an interesting trend for the health and fitness industry to watch during the next few years because of the fall to number 17 in 2012 from its relative popularity in 2010 and then rebounding a bit in 2014, 2015, and again for 2016. Sport-specific training could possibly attract a new market or underserved market to commercial and community clubs as well as offer a different kind of service that could lead to increased revenues.

WHAT'S OUT FOR 2018?

Dropping out of the top 20 from 2017 was worksite health promotion (number 16 last year), smartphone exercise apps (number 17 last year), and outcome measures (number 18 last year). Falling from a top 10 spot (number 7 in 2017) is Exercise is Medicine and exercise and weight loss (number 10 in 2017). An interesting trend to watch is sport-specific training (number 20 in 2018) because of its fall to number 17 in 2012 from its relative popularity in 2010 and then rebounding a bit in 2014, 2015, and again for 2016 before dropping out of the top 20 in 2017. Core training stresses strength and conditioning of the stabilizing muscles of the abdomen, thorax, and back. It usually includes exercises of the hips, lower back, and abdomen, all of which provide support for the spine and thorax. Exercising the core muscles can improve overall stability of the trunk and transfers that to the extremities, enabling the individual to meet the demands of activities of daily living and for the performance of various sports that require strength, speed, and agility. From 2007 to 2010, core training was in the top five of the fitness trends. Since 2010, it has been dropping to the 19th spot in 2016 and out of the top 20 in 2017. It is number 19 for 2018.

Children and exercise for the treatment/prevention of obesity dropped out of the top 20 for 2016 and 2017 and now is number 32 for 2018. Demonstrating the biggest decrease in last year's survey, dropping from the top five in every survey between 2007 and 2013 and appearing at number 11 in 2014 and number 17 for 2015, was exercise programs specifically aimed at children and weight loss. Childhood and adolescent obesity continues to be a major health issue in most developed and developing nations and is important because of its association with other medical issues such as diabetes and hypertension. Appearing for the first time in the survey's top 20 in 2011, worker incentive programs remained in the top 20 for 2012, 2013, and 2014, was number 19 in the 2015 survey and dropped out of the top 20 in 2016, and remained out of the top 20 in 2017 and 2018. That same pattern is seen for the related worksite health promotion trend. These trends create incentive programs to stimulate positive healthy behavior change as part of employer-based health promotion programming and health care benefits. Worker incentive programs are associated with the trend to provide worksite health promotion programs in an attempt to reduce health care costs.

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SUMMARY

Some new trends from 2017 continue to be supported for 2018 (e.g., HIIT, wearable technology, body weight training, and educated and certified health fitness professionals), whereas others failed to make the top 20 trends (worksite health promotion, smartphone apps, outcomes measurements, worker incentive programs, exercise programs specifically for overweight and obese children, balance training, boot camp, indoor cycling, Pilates, running clubs, water workouts, stability ball, and cardio dance classes). As previously described, trends have been defined as a general development that takes some time and then stays for a period of time (usually described as a behavior change), whereas a fad comes and goes. In the top 10 fitness trends for 2018, 17 were on the list last year. Taking over the top spot in 2017 from wearable technology is HIIT. Fitness social clubs (number 40), dance cardio (number 39), pregnancy/postnatal classes (number 38), barbell training (number 37), water/aquatics (number 36), walking/running/jogging clubs (number 35), Pilates (number 34), on-line training (number 33), and boutique fitness studios (number 32) continue to exist in the health and fitness industry but with not as much popularity according to this fitness trends survey.

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Internationally Recognized Experts Comment on 2018 Trends



Brian Biagioli, Ed.D., is the graduate program director for strength and conditioning at the University of Miami and executive director for the National Council on Strength & Fitness Board for Certification, Miami, FL. The 2018 Worldwide Survey of Fitness Trends represents an exciting collaboration between exercise professional organizations committed to moving the industry forward.

The survey findings present a global picture of continued interest in many of the trends, with some past trends shifting back to popularity. It is not a surprise that HIIT training has resurged — new twists on these metabolic programs using client-centric activities provide a socially engaging experience. The idea that traditional approaches to exercise will draw in the population is prehistoric. Most people want instructor-led exercise that encourages diverse, but safe, fitness activities in a social environment. This likely explains why group exercise has jumped back up the list. Also of interest is the reverse slip by technology. Where many people predicted phone apps and wearable technology to become a driving force in behavior change, the trend report paints it in a slightly different light. That said, technology is not going anywhere, it just needs to be used more effectively by exercise professionals, while finding a way to better fit in the social scene, because people want to share experiences. Lastly, and with bias, it is good to see sport-specific training back on the trends report. Exercise professionals can provide significant benefit for injury prevention, particularly among youth athletes, by balancing nonlinear movement with appropriate strength and mobility techniques.

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Gina Cortese Shipley, M.S., is a senior advisor for The Cooper Institute® in Dallas, TX. In a time where the physical activity levels of our nation remain low and chronic disease high, the results of the 2018 Worldwide Fitness Trends Survey are encouraging. Chronic diseases are the leading cause of death, disability, and health care costs but are largely

preventable or modifiable with physical activity. Many of the top 20 trends are directly in line with behavior change strategies that help make change lasting. Social support is one of the strongest components of behavior change, and we see HIIT training, often done in a group setting, as the number 1 trend and group training as the number 2! Yoga, group personal training, circuit training, and wellness coaching all have a social support aspect to them as well. With time being a barrier to physical activity, many of these trends (i.e., HIIT, body weight and circuit training) provide time-efficient options that are versatile and engaging, providing flexibility and combating boredom (another barrier), all of which helps to support adoption and adherence. What I also find assuring in this trends list is that several components of fitness have a place. This demonstrates to me that overall fitness and its importance to total wellness is being recognized and used. Given that most of these trends have been on the list for some time (despite trading positions) and are a departure from the one-size-fits-all approach to fitness, it is my hope that more people will discover what allows them to adopt physical activity for a lifetime!



Graham Melstrand is the executive vice president, Engagement at the American Council on Exercise, San Diego, CA, and the president of the Board of Directors for the Coalition for the Registration of Exercise Professionals (CREP) that maintains the U.S. Registry of Exercise Professionals (USREPS). It is exciting to see ACSM expand the survey pool to include exercise professionals from

like-minded peer organizations from the Coalition for the Registration of Exercise Professionals and other experts from the domestic and international community. This year's more diverse pool of respondents provides richer insight, enhancing the value and use of the already venerable ACSM Trends Report. As an advocate for the profession and healthy active-lifestyle behaviors, I am not surprised to see group training and wearable technology occupy the number 2 and 3 spots on this year's survey. As our profession evolves and matures, the exercise professional is increasingly well positioned domestically and internationally to take on more significant leadership roles in the adoption and maintenance of active, healthy lifestyles. Demonstrating our collective ability to influence and improve the health of individuals and communities, and support our interventions with data, are keys to our future success and standing. Through the development and delivery of small group programs targeting specific populations, goals, and health outcomes, we have the

ability to scale the delivery of physical activity programs and interventions, improving access and affordability for individuals that would like to engage exercise professionals for their leadership and expertise. Similarly, embracing wearable technologies as a tool as opposed to viewing it as a competitor provides the exercise professional the ability to analyze, interpret, and leverage data to help individuals and communities achieve their health, fitness, and sports performance goals.



Francis Neric, M.S., M.B.A., is the national director of certification for the American College of Sports Medicine, Indianapolis, IN. It is exciting to see that the 2018 Worldwide Survey of Fitness Trends included members of the Coalition for the Registry of Exercise Professionals. This collaboration provides greater insight and accuracy into one of the most cited trend

reports in the exercise profession. The exercise industry trends seem to be driven by a combination of economics and health and wellness coaching factors. Regarding the former, activities that make use of body weight exercises, outdoor spaces, inexpensive equipment, or group exercise programming help to drive costs down for clients and increase the profitability for exercise professionals. It is not surprising to see group exercise and group personal training continue to rise in importance. The other factor of group exercise is developing and sustaining a strong social support network. It goes without saying that the exercise professional must have the skill sets to lead clients with a wide range of needs and abilities. Health and wellness coaching relates to a professional who facilitates healthy, sustainable behavior change and serves as a client advocate in the health care continuum. As technology and big data continue to bridge areas such as biometric data, exercise activity, sleep monitoring, dietary logs, recovery, and virtual training, wearable technology may become a centralized communication platform for exercise professionals, allied health professionals, and the client.

BRIDGING THE GAP

The 2018 worldwide survey of fitness trends is now in its 12th consecutive year. It helps the health and fitness industry make critical programming and business decisions. The results are applicable to all four sectors of the health and fitness industry (commercial for-profit clubs, clinical or medical fitness programs, corporate wellness programs, and community-based not-for-profit fitness programs). Although no one can accurately predict the future of any industry, this survey helps to track trends in the field that can assist owners, operators, program directors, and personal trainers with making important business decisions.