Effective worksite health promotion programs address challenges that occur during planning, development, implementation, and evaluation efforts. In this commentary, we focus on implementation challenges faced by employers—issues that must be addressed after an organization has made a commitment to offering a worksite health promotion program. Of course, initial support from top management must be secured. But evidence suggests that management support alone does not guarantee program success.

A nationally representative sample of employers responded to the 2004 National Worksite Health Promotion Survey and reported that the most common barriers or challenges to health promotion program success were: lack of interest among employees (63.5%); lack of staff resources (50.1%); lack of funding (48.2%); lack of participation among high-risk employees (48.0%); and lack of management support (37.0%). No significant differences in barriers were reported based on industry type or worksite size except that worksites with 750+ employees were significantly more likely to report lack of participation by high risk employees as a barrier.

We review each of these potential implementation challenges and argue that engaging employees and managers in identifying and addressing them early in the planning process allows an organization to develop the necessary strategies to overcome them.

First, some employers clearly believe that employees are not interested in worksite health promotion programs. This tends to occur when employee participation in programs is low. It is important to both understand and clarify some of the potential underlying “causes” of low levels of employee interest and participation. For example, insufficient or ineffective communication about health promotion programs could result in low levels of participation simply because employees were not aware of programs being offered. Another potential “cause” of low perceived employee interest is that employees might not participate at all (or in lower numbers) if they have to pay to join a program, or if the program is offered at inconvenient times or locations, or when child care and other issues may limit participation. Employees exposed to stressful and/or otherwise hazardous work conditions might not participate because they are skeptical of worksite health promotion programs and/or angry if these programs are being prioritized ahead of addressing work conditions. Additionally, if employees believe that employers are intruding on their privacy or trying to “control” their health, they may not participate. Thus, low employee participation may be caused by several of these factors and may lead to a perception among employers that employees are not “interested” in health promotion programs.

...we encourage employers to consider funding worksite health promotion programs as an investment in “human capital” that will lead to bottom line advantages for the organization.”
Improving Employee Participation

Strategic program planning efforts can help organizations overcome problems with low participation and low perceived employee interest. First, we encourage employers to mobilize an employee wellness committee—a group of employees that represent key work teams and departments in an organization—who can be involved in planning, promoting, and developing health promotion programs at work. If unions are present, be sure to work with local representatives to understand their priorities and incorporate those into the planning process. Second, develop a comprehensive marketing plan that gets the word out about program offerings through channels that reach all employees. Third, consider offering incentives to increase employee participation. For example, 25.9% of respondents to the 2004 National Worksite Health Promotion Survey reported using incentives for this purpose. Such incentives, if properly designed and communicated clearly to employees, have been shown to enhance participation in worksite health promotion programs.

Fourth, be sure to offer high-quality health promotion programs and use a variety of educational methods (self-help, group classes, Internet options, etc.) that appeal to different employee interests and learning styles. These programs should be free, or low-cost, and convenient for employees to participate, including offering options for shift workers and employees who travel or work offsite to participate. If programs are to be held during regular daytime hours, management should be lobbied to either allow employees to participate during work time or to institute a policy of shared employee/work time or flex time. Fifth, finding program “champions” (members of the wellness committee, managers, or members of the general employee population) who both participate and enthusiastically support programs will help increase employee participation as well. Finally, addressing work conditions that are oppressive, stressful, or hazardous to employees will influence participation among employees.

Evidence suggests that employees who have a voice in addressing the pace or conditions of work will be more engaged in worksite wellness efforts while maintaining productivity. If implemented early in the planning process, all of these strategies can help overcome potential problems with employee interest and/or low participation.

Addressing participation among “high-risk” employees is an implementation challenge recognized by new as well as experienced program staff. Evidence suggests that moving high-risk employees to a lower-risk category will have a positive impact on employees’ healthcare costs. However, Edington and colleagues have demonstrated that maintaining the health of low-risk employees over time is also important for ensuring long-term control of healthcare costs. While evidence suggests that high-risk employees might face different barriers to participating in health promotion programs than low-risk employees, more research is needed to uncover best practices (e.g., tailored approaches, engaging peer educators, or offering online options that maintain privacy) for increasing program participation among all employees, including those at all levels of risk. For example, Grosch et al surveyed a representative sample of workers from the National Health Interview Survey data and found that, when access to programs was equal for all workers, traditionally “high-risk” employees (e.g., blue-collar workers and blacks) were more likely to report they participated in worksite health promotion programs than were other workers. Emmons et al conducted a qualitative study to ascertain barriers to participation among working women with different health risk factor levels. Research results like these have direct application for improving strategies for success on increasing participation over time.

Overcoming a Lack of Staff Resources

Lack of staff resources was another commonly reported barrier to offering health promotion programs as reported in the 2004 National Worksite Health Promotion Survey. Among large employers, staff resources might be hard to identify or they might be “discovered” through a well-planned needs assessment. Among smaller employers, resources of all types, including staff resources, may be problematic for any programs that are not directly linked to the business operation. Importantly, evidence suggests having a staff person who has dedicated responsibilities for health promotion has been shown to be the single biggest independent predictor of having a comprehensive worksite health promotion program. Existing staff may be both willing and interested in helping to organize health promotion efforts at work. Through continuing education workshops or externally-sponsored training programs, an employer can address this potential implementation challenge. For example, employee wellness committees can assist a designated staff person with program planning and implementation efforts. In fact, the North Carolina State Division of Public Health has worked with the State Health Plan to develop and deliver a training workshop for state employees and teachers who want to start an employee wellness program. (More information is available at http://statehealthplan.state.nc.us/worksite-wellness.html.)

Finding Funds

Lack of funding is the third most commonly cited barrier to offering worksite health promotion programs. This problem often goes hand-in-hand with a lack of staff resources. While all employers face this challenge to some extent, many potential funding and/or sources of support exist and can be tapped for assistance. Specifically, health plans are the leading source of health risk appraisals, health screenings, lifestyle behavior change programs, and disease management programs offered by employers responding to the National Worksite Health Promotion Survey. Local hospitals, voluntary health organizations, health departments, business groups on health, chambers of commerce, and other groups may provide direct assistance to employers who offer worksite wellness programs. The Centers for Disease Control and Prevention sponsored Healthier Worksite Initiative Web site (www.cdc.gov/nccdphp/dnpa/hwi/index.htm) lists resources as well as funding opportunities for worksite health promotion. However, we encourage employers to consider funding worksite health promotion programs as an investment.
in “human capital” that will lead to bottom line advantages for the organization. Positive changes in employee health behaviors, healthcare claims costs, productivity, turnover, and absenteeism are possible, so program staff should be sure to include related measures in a comprehensive evaluation plan when considering the total return-on-investment perspective.

Cultivate Management Support at All Levels

One final implementation challenge universally acknowledged by employers is a lack of management support. Moreover, evidence suggests that different levels of management (e.g., line supervisors, middle managers, and top managers) report different barriers to program implementation that warrant serious consideration. For example, in one study of over 1,000 managers from 23 manufacturing worksites, senior managers (vs. line supervisors) were significantly less likely to believe space or cost were barriers and were less likely than middle managers or line supervisors to believe production conflicts were a barrier to offering health promotion programs. Management support should be cultivated early in the planning process, and throughout implementation.

Several strategies for ensuring management support are worth consideration. First, management representation should be included on the employee wellness committee as a visible sign that management is committed to its success and to keep management informed of the progress of the program. Second, key managers should be interviewed to ascertain their expectations for worksite health promotion programs. Third, ongoing communications with managers should take place to ensure visibility and to share success stories. Communications should include data that address managerial needs and expectations whenever possible. Finally, national (see Table 1), industry-specific or local data should be used whenever possible as benchmarks for success. Regular reports to management on progress toward achieving those goals are desirable.

Table 1.

<table>
<thead>
<tr>
<th>Objective</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase the proportion of worksites that offer a comprehensive employee health promotion program to their employees.</td>
<td>75%</td>
</tr>
<tr>
<td>Increase the proportion of employees who participate in employer-sponsored health promotion activities.</td>
<td>75%</td>
</tr>
</tbody>
</table>

Conclusion

An employer who decides to offer a worksite health promotion program faces a number of important implementation challenges, and the underlying causes of these challenges are varied and complex. An effective planning effort can, however, address employer concerns while engaging employees in the process of planning, developing, implementing, and evaluating worksite health promotion programs that are most likely to be successfully adopted, achieve desired employee health outcomes, and sustained over time. NC Med J

REFERENCES


Eat Smart, Move More Health Tip

Choose to Move More Every Day

Physical activity is essential for all of us. Children, adults and seniors can benefit from moderate activity every day. Take a walk with a friend, take the stairs instead of the elevator, or work in your yard. Dancing works too and is great fun! Thirty minutes or more of motion for adults and 60 minutes for children on most days can help keep you in shape and feeling good. Can’t find a 30 minute chunk of time? Break it up throughout the day.

For more tips on how to move more every day where you live, learn, earn, play and pray, visit

www.EatSmartMoveMoreNC.com

This message brought to you by