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Communities of Employees and Employees Within Community

Employees spend a significant amount of their time connected to their respective place of work. Many employees are actually physically present at the workplace, others are connected by devoting time to work on tasks at a remote location, and some are connected electronically; some work part-time, others work full-time, and some work multiple jobs, have seasonal employment, and so on. The point is that employees who are paid for their efforts to support the company in producing products are in some manner held accountable for this work and hence are connected to the organization so that progress can be reported. This connection shapes to varying degrees individual employee behavior.

The Circularity of It All

This connection to the company undoubtedly exerts an impact on the behavior of each and every individual employee associated with the company. On the other hand, the behavior of each employee plays a role in shaping the collective behavior of all employees within a given company. In short, the corporate environment is a determinant of individual employee behavior, and, vice versa, employees play a role in shaping their own corporate environment. But it doesn't stop there. Individual behavior is also influenced and shaped by the social and cultural events experienced, the multitude of places and situations within which behavior takes place, the variety of structures within which we exist, and the layers of factors that impact the lives we all live.

A Social-Ecological Framework

These relationships are depicted in the Figure, and such depictions commonly are referred to as social-ecological models or frameworks. The framework recognizes that employees make behavioral choices because of a variety of factors that all impact their health, functional status, and emotional, intellectual, and spiritual well being, as well as their performance while at work. Several of these factors exist within the

individual; others represent influences from the external world. A particularly interesting framework has been developed by the Partnership for Promotion of Healthy Eating and Active Living (1, 2); this framework was created with a focus on health promoting behaviors and its determinants and includes the following factors:

- **Psychobiological core** includes genetically programmed metabolism

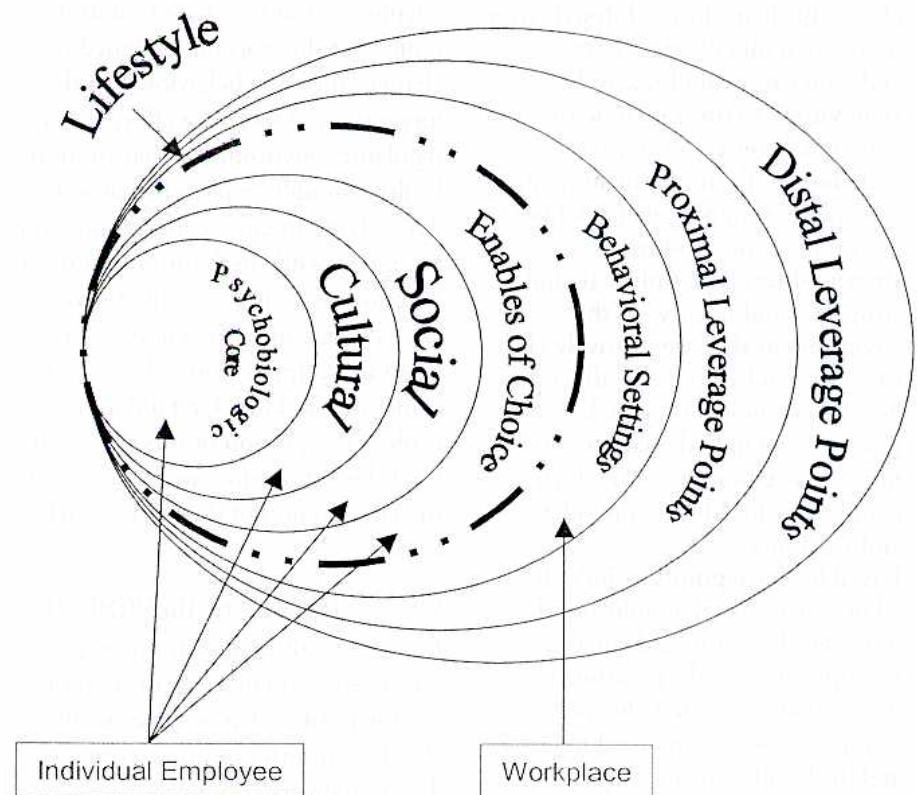


Figure. A context for worksite health promotion. Note that intraindividual employee factors include those inside the "Lifestyle" boundary; the workplace is located within the "Behavioral Settings" factor. This figure was adapted and modified with permission from Wetter (1) and Booth (2) and used with permission from International Life Sciences and Nutrition Reviews.

and behavior (instinctive behavior, innate values related to survival), early conditioned behavior (pleasure principles, pain, etc.), physiologic state, current health status, self-identity, and individual will.

- **Cultural influences** represent the personal life experienced, values and beliefs (ethnic and cultural identity), and personal habits.
- **Social influences** relate to roles and relationships, the manner in which society views the individual and vice versa, and social trends. This factor interacts with the cultural factor: how society views you will affect how you view yourself.
- **Enablers of choice** involve factors that are commonly recognized as those that may support or be a barrier to change. Examples include time, cost, knowledge, convenience, seasons, and information.
- **Lifestyle** recognizes the boundaries of intra-to-interindividual observable behavior(s). Lifestyle may represent a mix of who people are and who they would like to be.
- **Behavioral settings** include the situational context of our behaviors and choices. Examples include the workplace, shopping malls, schools, restaurants, and food stores.
- **Proximal leverage points** include structures and features of the environment that are relatively close to a given individual and affect the behavioral choices they make. Examples include the family, the immediate community in which people live, health care providers, and worksites.
- **Distal leverage points** include all additional factors that influence the individual behaviors and choices. Examples include the government (laws, regulations, etc.), the media, transportation systems, food industry, and the health-care industry.

A Context for Worksite Health Promotion

Worksite health promotion efforts would benefit enormously from

optimal alignment and leverage of as many of the factors outlined in the Figure. Efforts focused on employee health behavior change, family health programs, dependent health improvement, self-care, disease management, demand management, or any other type of program—recognition of the role of each of these factors and the identification of possible points of intervention may lift program efforts to an entirely new level.

Bridging strategies that connect employee-based programs from one factor to another are important opportunities to consider. Such strategies include programs that integrate health promotion services with overall benefit design, structural solutions to increased access to health promotion programs by using multimedia technologies such as print, telephone, and web-based solutions, policies at the worksite designed to change employee behavior, and the integration of lobbying efforts for a regulatory environment that supports health through employer coalitions. These types of efforts are certainly not foreign to worksite health promotion practitioners. However, the focused and strategic initiatives needed to act upon these opportunities by design are sometimes lacking. Certainly, more explicit recognition of this approach holds lots of promise toward increasing the effectiveness of the field as a whole.

What's ROI Got to Do With It?

Proof of worksite health promotion effectiveness is currently focused on the financial return on investment (ROI) of health promotion programs. The framework recognizes the important role the worksite plays within our communities. It is not possible to consider community health issues without the recognition of the role worksites play in shaping the



health of community members. Consider the context of efforts to improve the return of health improvement efforts through increased productivity, reduced illness burden, and positive ROI. If worksite health promotion programs truly stand alone without the support of a proximal (*e.g.*, the workplace) or a distal (*e.g.*, the community) leverage point, the likelihood that success is experienced or maintained over time is actually quite low. However, if supportive environments reinforce the efforts and attempts of employees to improve their health and make sound health-related decisions, the likelihood for sustained success increases dramatically. ROI may show up at the level of program implementation within the boundaries of the worksite. The social-ecological context in which the programs reside may be an important factor for the achievement of such success, even if it is not explicitly recognized in financial analyses.

An Example of a Broader Context

Think of a worksite health promotion effort to address mental health issues at the worksite. Depression, anxiety, and stress issues affect the work performance of the employees in a



negative manner, and a program is implemented that assesses the problem across the workforce. Program management assumes that appropriate treatment of mental health issues will, in fact, reduce overall medical care expenditures in that category and will have a definite impact on productivity. Stress management seminars are implemented, educational newsletters and information sheets are distributed, employee assistance programs are included in the health care benefits without co-pays, and the importance of addressing mental health is thoroughly communicated across the entire company. Whereas this may appear to be a comprehensive program, it is not likely to succeed unless the health care delivery systems and medical care providers are sufficiently prepared to support the

initiative, there are effective means to refer employees to treatment options in a confidential manner, and other community-based resources (such as "crisis lines") are available to create the supportive environment in which this program resides. As all of these pieces come together at the level of the individual, the measures designed to monitor program impact will begin to reflect positive outcomes in terms of health, performance, and ROI.



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References

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