

Why participation is the worst way to measure the success of a wellness program

Employer spending on health improvement and wellness programs continues to rise year after year. When it comes to measuring the success of a given program, typically employers turn to metrics such as enrollment, participation, and engagement. Naturally, the notion that higher engagement will drive better health outcomes follows. While this claim may be accurate in certain contexts, it is largely dependent on how one defines engagement.

Oftentimes, employee participation is misunderstood to represent meaningful engagement. For the most part, it isn't. In fact, increasing engagement and participation in a program for the most part doesn't drive positive health outcomes.

Take for example a diabetes prevention program deployed in a work setting. An eligible participant could be defined as an employee who is identified as being at risk for type 2 diabetes through a blood test or risk assessment. If he or she agrees to participate in the program, will this inherently improved health outcomes? Not in the slightest.

In the pursuit of higher engagement: Less is more

Employers expend a tremendous amount of time, effort, and money in the way of incentives to get employees to participate in the health benefits offered to them. Engagement quantity is valued over quality. This emphasizes frequent and arbitrary actions over meaningful ones. Why? Because it's much easier to achieve quantity than quality, so vendors tell employers that quantity is how they should measure engagement – and how they should be paid.

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Simply enrolling in a program or engaging in an arbitrary number of actions is not predictive of improved health outcomes, or disease prevention or reversal. Its only predictive power is in the size of the bill. Therefore programs should exclusively focus on truly meaningful behaviors and actions that are consistent with driving specific outcomes.

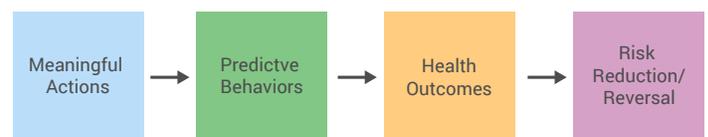
Why meaningful actions matter

Meaningful actions and behaviors can be defined as those that are predictive of specific health outcomes. In the case of lifestyle-induced or obesity-related conditions such as prediabetes, type 2 diabetes, and hypertension, specific behavioral modification are necessary to reduce risk.

Attending educational sessions, adhering to a prescribed calorie budget, logging food, and achieving physical activity goals are all examples of meaningful actions that are highly predictive of improved health outcomes.

Emphasizing only the actions that are meaningful and predictive of sustainable behavior change is the key to scalable disease prevention and reversal. By taking this approach, employers' benefit is huge in terms of both driving outcomes and saving money.

Figure 1.

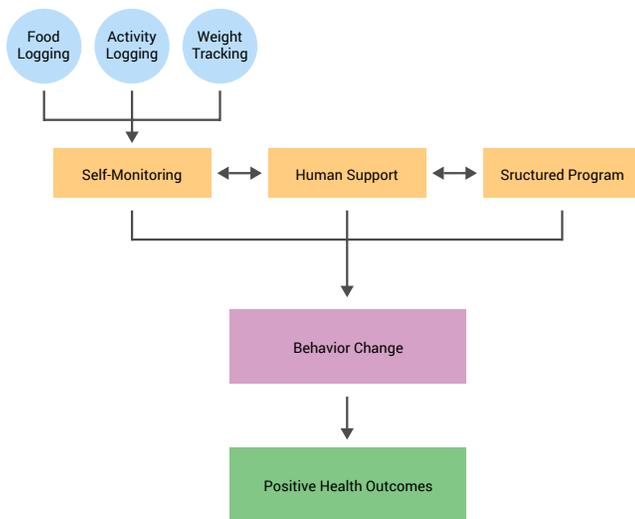


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So, what types of engagement are considered meaningful? For successful lifestyle modification, these are actions that build mindfulness and awareness, and focus on changing the underlying behaviors that predict health outcomes over time.

Engaging in meaningful actions that help individuals improve their diet and increase their physical activity level will be predictive of success.

Figure 2:



Encouraging meaningful actions the lead to outcomes

[Research](#) has identified the key behaviors that produce transformative weight loss and chronic condition prevention or symptom reversal¹. The behaviors that have been identified as [most important](#) in improving health outcomes include reducing calorie intake and increasing physical activity, self-monitoring (specifically tracking food, activity, and weight), and utilizing a support system².

Mobile solutions that work

More and more employers are turning towards mobile health solutions because they best meet their employees’ needs. Such mobile solutions are effective because they offer meaningful, real-time feedback, which is necessary to drive long-term behavior change and improve health outcomes.

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Mobile technology also offers a unique opportunity to provide a personalized and scalable experience. For example, Noom’s mobile coaching platform offers a variety of structured programs that target pre-chronic and chronic conditions including the CDC’s diabetes prevention program, as well as proprietary diabetes and hypertension management programs. This allows employers the ability to deploy a single platform across an entire employee population while meeting the individual needs of each employee.

The Noom method

At Noom, we have spent years developing a product that targets the behaviors that predict the successful prevention and management of chronic conditions. We’ve identified the specific behaviors required to produce desired health outcomes within our platform. We’ve refined these to establish the minimum number of meaningful actions that participants must take to achieve the best outcome -- the smallest investment with the highest return. That’s why our programs work -- they offer a realistic curriculum that fits seamlessly in the lives of our users.

Noom's mobile technology promotes meaningful engagement through an easy-to-use food database with over 3.7 million food-portion pairings. It also allows users to track their calorie intake and adhere to a personalized calorie budget. Our technology prescribes weekly step and activity goals to help users increase their activity gradually, and prompts users to weigh themselves weekly. Users are also offered support and guidance from a dedicated health coach and group of peers sharing in the same experience. We've combined this mobile technology and human coaching with proprietary, condition-specific programs to prevent and reverse the most costly and preventable chronic conditions.

This approach has continuously promoted adoption, meaningful engagement, behavior change, and subsequently, improved health outcomes.

Most importantly, our programs are effective in driving long-term weight loss and lasting behavior change³. The recent study, published in the British Medical Journal Open Diabetes Research Care, demonstrated that Noom's CDC-recognized diabetes prevention program resulted in meaningful engagement and weight loss comparable to traditional, in-person deployments of the program⁴. Overcoming the barriers of access, uptake, and scalability of this traditional model, our program proved to be a scalable solution for population health management. Preliminary data also demonstrates the efficacy of our programs at reducing the symptoms associated with hypertension and type 2 diabetes.

1 Wing RR, Phelan S. Long-term weight loss maintenance. *American Journal of Clinical Nutrition*. 2005;82(1):222S-225S.

2 Wing RR, Hill JO. Successful weight loss maintenance. *Annual Review of Nutrition*. 2001;100(21):323-341.

3 Chin SO, Keum C, Woo J, Park J, Choic HJ, Woo J, Rhee SY. Successful weight reduction and maintenance by using a smartphone application in those with overweight and obesity. *Scientific Reports*. 2016;6:1-8.

4 Michaelides A, Raby C, Wood M, Farr K, Toro-Ramos T. Weight loss efficacy of a novel mobile Diabetes Prevention Program delivery platform with human coaching. *BMJ Open Diabetes Research & Care*. 2016;4:1-5.