By offering programs that encourage weight loss and providing a supportive environment, employers may be able to help stem the epidemic of type 2 diabetes.
Two out of five Americans will develop type 2 diabetes in their lifetime, according to a 2014 study published in The Lancet Diabetes & Endocrinology. As a result, Lancet reports that “more effective lifestyle interventions are urgently needed” to address an increased demand for health care services.

According to the Centers for Disease Control and Prevention (CDC) 2014 National Diabetes Statistics Report, one in ten U.S. adults currently has diabetes and more than one in three U.S. adults have prediabetes, a condition in which their blood sugar levels are higher than normal but not high enough to be classified as type 2 diabetes. Without weight loss and moderate physical activity, 15% to 30% of people with prediabetes will develop type 2 diabetes within five years, the report says.
As the U.S. diabetes epidemic grows, so does the need to address diabetes in the workplace. What can employers do to reduce the risk for diabetes among their employees and combat what seems to be the inevitable?

**Obesity a Driving Force**

About 80% of people diagnosed with type 2 diabetes are also classified as overweight or obese, conditions that are the driving factors behind the diabetes epidemic, according to the American Diabetes Association (ADA). As a result, obesity is also a problem that employers cannot afford to ignore.

The association between obesity and type 2 diabetes is well-known. In a study out of the National Institutes of Health in 1980, Ethan A. H. Sims, M.D., coined the term *diabesity* to describe the close relationship between type 2 diabetes and obesity. “I don’t suggest diabesity is a single disease entity,” Sims wrote. “There are several obesity syndromes, and there are certainly also several subtypes of diabetes. There tends to be, however, a cluster of characteristics we call diabesity that can be distinguished from type 1 diabetes or childhood onset obesity. It is a progressive disorder in adults.”

This cluster of characteristics includes obesity and insulin resistance. We know there is a strong correlation between these two factors. *Insulin resistance* is a condition in which the body produces insulin but does not use it effectively. When people have insulin resistance, glucose builds up in the blood instead of being absorbed by the cells, leading to type 2 diabetes or prediabetes. Although the exact causes of insulin resistance are not completely understood, scientists think the major contributors to insulin resistance are excess weight and physical inactivity.

Given that being overweight/obese is a leading risk factor for type 2 diabetes, it follows that weight loss and weight management are critical to both successful diabetes management and prevention. According to the ADA’s Standards of Medical Care, people with diabetes should maintain a healthy weight, stay active and control their A1C, blood pressure and cholesterol levels.

It’s no secret that a healthy lifestyle, including a nutritious diet and regular exercise, can help to prevent or delay type 2 diabetes and its complications such as kidney disease, blindness and amputation. Research shows that lifestyle interventions can result in long-term weight loss that leads to improvements in cardiovascular disease risk factors, quality of life and reduced medication usage for obese individuals with type 2 diabetes.

**Why Aren’t Employees Losing Weight?**

Most employers or their health plans already are providing weight-loss programs, yet many fail to yield the desired results. Employers are struggling with a fundamental problem that is key to success: a lack of motivation or desire among employees to really apply themselves to sustaining healthy lifestyle choices that lead to significant weight loss and reduced health risk. There are a number of reasons, among them:

- **Programs may not be evidence-based.** Many well-intentioned employer-sponsored weight-loss programs that fail to deliver good weight-loss results may not be based on scientific research. They may not include guidance and coaching around the most basic actions that have proven to achieve good results, such as weighing regularly, keeping a food journal, following a healthy meal plan and promoting physical activity.
• **Employees believe they need to lose a lot of weight to be successful.** Most overweight and obese people avoid weight-loss programs because they are afraid they won’t be able to lose enough weight to make a difference in their health risk. What most people don’t realize is that a modest weight loss of just 5% to 10% of total body weight can improve cardiovascular risk factors and biometric values such as blood pressure, blood cholesterol and blood sugars. Additionally, this small percentage of weight loss can also lead to significant quality-of-life improvements and boost self-esteem and confidence about being able to improve health. For instance, an obese person who loses just 5% of total body weight could feel more energetic and be able to more comfortably engage in physical activity.

• **Some workplace environments fail to support healthy lifestyle changes.** Employers may provide a strong weight-loss program, but the culture stays the same. Vending machines remain stuffed with candy bars and other junk food, while the cafeteria continues serving up high-fat, high-cholesterol foods. Managers continue to bring donuts to early morning meetings, and there is no on-site gym or places to walk on campus. This sends mixed messages to employees who are trying to lose weight. If they don’t see their managers participating and taking it seriously, they may not either.

**Behind the Lack of Motivation**

Weight loss is difficult, not just psychologically, but biologically as well. Unfortunately, the issue is more complicated than simply reducing calories and increasing physical activity.

For instance, weight loss leads to the desire to eat more—in an effort to prevent more weight loss. The body has an automatic physiological response to increase appetite after calorie restriction, which makes it difficult to stay on track. That is why smaller, attainable goals seem to work and why it is more effective to lose smaller amounts of weight and then maintain that weight for a period of time so that the body can acclimate before further weight loss.

Many people have a difficult time following long-term healthy eating plans. They “diet” (restrict calories, carbohydrates, fats, etc.) and then, when they can no longer follow the diet, they resort to old behaviors and often regain more weight than they lost initially.

Another common problem is setting unrealistic expectations for weight-loss goals and calorie restrictions, which is a setup for failure. People are inundated with cues to eat from media that can easily sabotage weight-loss efforts.

**Weight Loss Harder for People With Diabetes**

For people with diabetes, it is physiologically more difficult to lose weight when their blood sugar is not well-controlled. Some medicines that people use to control diabetes also lead to weight gain, posing another challenge.

When people are overweight, it is more difficult to exercise. Complications from diabetes, such as neuropathy, foot ulcers and heart disease, can make exercise almost impossible.

Because type 2 diabetes is a progressive disease, even those who are man---
aging their blood sugars may eventually develop complications beyond their control, thwarting their ability to manage their weight.

This is why it’s so important to help those who are not there yet. Currently, one in four people has prediabetes and doesn’t even know it, according to the 2014 National Diabetes Statistics Report. Losing just 5% to 10% of total body weight can also lower risk for people with prediabetes or those who already have diabetes but are not so far advanced that they can’t take actions to slow the progression.

Key: Spark Motivation

Research suggests that nonadherence to prescribed behavioral lifestyle changes has become as much of an epidemic as the risky behaviors that lead to chronic conditions like type 2 diabetes.

Despite the fact that obesity is a major public health problem in the United States, even the best weight-management programs have struggled to achieve long-term adherence to an improved diet and increased physical activity.

Many people who want to lose weight have a difficult time overcoming the behaviors, habits and cognitive and emotional barriers that derail weight loss. This is where an evidence-based behavioral health coaching program can help employers make a difference in population weight loss.

Most people know what they need to do to lose weight, but they don’t engage in those behaviors because of barriers they may not even be aware of or know how to manage. Giving employees the opportunity to have their own one-on-one relationship with a health coach can pave the way to break down those barriers. A health coach with the right training can guide reluctant, frustrated employees to strategies for addressing their issues.

Here are a few examples of the types of barriers that coaches can impact:

- **Sabotaging thoughts that keep an employee from trying to lose weight.** Coaches can help the person identify negative thought patterns and develop behavioral strategies to change those perceptions. One strategy is coach-}

One way to avoid scaring away jaded employees who have tried and failed numerous times to achieve significant weight loss is to promote the value of losing a small amount of weight over a longer period of time and offer a health coaching program with that approach.
• **Weight gain from overexercising.** People tend to think that they need to do a lot of vigorous exercise right away when dieting to be successful, but the opposite is true. What happens is that too much exercise triggers hunger and often leads to weight gain. While a significant increase in physical activity is essential for weight maintenance, a decrease in caloric intake with moderate increase in activity leads to weight loss. Coaches can help employees build their exercise regimens over time at a pace that complements rather than sabotages their diet.

- **Relying on extrinsic motivators.** Employees who are motivated based solely on extrinsic or external motivators—rewards that are given to them or that they give themselves for achieving a health goal—will have only short-term results. A coach can help an employee explore and discover the personal value of better health. The goal is to inspire them to want to make healthy changes to satisfy their core values about how they want to live, as opposed to relying on short-term benefits such as losing weight for a high school reunion to keep them motivated when their heart is not in it.

### Targeting Hard-to-Reach Employees

One way to avoid scaring away jaded employees who have tried and failed numerous times to achieve significant weight loss is to promote the value of losing a small amount of weight over a longer period of time and offer a health coaching program with that approach. Often, when employees hear that a program targets a small, realistic amount of weight loss, they feel relieved and more confident about taking a chance and coming forward to enroll in a program. Promotional messages that make it clear that the program is not another yo-yo diet may go a long way toward encouraging more overweight and obese people to give it another try.

Weight loss is hard, and maintaining weight loss is even harder. A supportive environment is a key to long-term success. The fact is that friends, family and co-workers influence food and activity choices. That’s why worksite weight-management programs make so much sense. Employers can offer an evidence-based coaching program and at the same time set up an environment that promotes good nutrition and activity. These steps can create a workforce that is engaged in behaviors that lead to a healthy lifestyle.

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