1 in 3 people globally suffer from at least one type of malnutrition: this brings significant losses in productivity and potential, and poses challenges to employers in both high-and-low income settings.\(^1\) Given that 58% of the world’s population will spend one third of their time at work during their adult life, occupational health is a critical determinant of overall wellbeing.\(^2\) The workplace - whether in urban or rural, high-or-low income, corporate or supply chains - offers unique opportunities to address malnutrition.

In this series, GAIN outlines the evidence for the 4 most common workforce nutrition interventions.

This evidence brief focuses on workforce nutrition-focused health checks, providing a review of the evidence for impact, best practice and case studies.

**Definition of nutrition-focused health checks**

Nutrition focus health checks are periodic one-to-one meetings with a health or nutrition professional to assess, and usually discuss, the employee's nutritional health. Health checks provide personalised data for each employee, giving them a better understanding of their nutritional risk factors. These might include cholesterol and/or blood-pressure screenings, or weight monitoring and classification (for example using Body Mass Index (BMI) to assess whether an employee is underweight, overweight or obese). Individual counselling can be coupled with health checks to help devise lifestyle change strategies and follow up counselling can support employees in tracking their progress towards nutrition-related goals (See brief 2 on Nutrition education, which includes individual counselling).
Evidence of impact
The evidence suggests that these nutrition-focused health checks can help prevent non-communicable diseases like diabetes or heart disease when they are implemented in corporate offices and factory settings, and when they are coupled with counselling. A recent systematic review of 22 published studies showed that diabetes reduction programmes which included screening and weekly counselling over 6-12 months showed consistently positive results. Another systematic review of 23 randomized trials of workplace weight management interventions (predominantly in the USA and Europe) showed mixed results on weight loss, and concluded that programme was most effective when it was implemented between 6-12 months.

There is some evidence to suggest that nutrition-focused health checks are effective beyond corporate office environments. For example, one study involving factory and office workers in Iran improved clinical outcomes (e.g. blood pressure) and weight management.

Some programmes have demonstrated results beyond health and nutrition indicators, such as increases in workers’ knowledge about nutrition and health, and reported confidence, translating into lower likelihood of sick days and an overall boost to employee morale.

Nutrition screening is most likely to have an impact when it is accompanied by nutrition counselling, and has the highest impact when counselling is more frequent. One study illustrates this well: a two-hour behaviour change intervention for at-risk workers after they were screened was more effective at reducing cholesterol levels within 12 months than 5 minutes of counselling; and the combination of both screening and counselling was feasible to implement, and cost effective for businesses.

Best practices
- Health checks should be accompanied with individual counselling or nutrition education to help employees understand their results and increase their confidence in taking action to address them.
- Tracking programme results provides justification for the cost, continuation, and improvement of programmes. Data from the health checks can be used to monitor results; it is important to obtain participants’ informed consent and to handle data ethically.

Direct success metrics
- Increased or high worker enrolment rates in nutrition focused-health checks.
- Increased awareness and understanding about own nutrition-related health status.
- Improved intention to change own nutrition-related behaviours that affect health status.
- Evidence of improved nutrition-related behaviours in the short term.
- Sustained behavioural change resulting in improved nutritional health status.

Company examples (self-reported)

Unilever’s Lamplighter programme is a global initiative that provides health-checks to employees. It focuses on improving 4 modifiable risk factors, including exercise and diet. Employees fill out a questionnaire with nutrition related topics and receive assessments of BMI, blood pressure, cholesterol. Depending on the results employees can be directed to counselling or a practitioner. **Unilever reports a EUR 2.44 return on every EUR 1.00 spent on their Lamplighter programme.**

DSM’s Vitality@DSM voluntary programme helped more than 1000 employees track and assess their physical, social and mental well-being in 2017. The programme reports the productivity gains attributable to the programme reached approximately EUR 120,000.

Further information
For further information about the workforce nutrition programme, please visit [www.gainhealth.org](http://www.gainhealth.org).

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Full references can be downloaded in a longer version of this brief at [www.gainhealth.org](http://www.gainhealth.org)
References


