Na'adilts'ood Healthy Office Initiative

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Michael Parrish, Diné Policy Institute Coordinator, Majerle Lister, Research Assistant, Lane Franklin, Research Associate, Brian Young, Research Associate, Andrew Curley, Ph.D., Research consultant

DINÉ POLICY INSTITUTE

1. Ethnic Vignette

The coffee light blinked on an old coffee maker, signaling the need for someone to refill the reservoir water. Navajo office worker Sally Todachene (pseudonym) switched-off the coffee maker and returned to copying paper. Her colleague, Georgia Tsosie (pseudonym) brushed her hair to the side as she answered incoming phone calls. She received a call from an office within the same building as her.

Rather than rely on email, phone, or elevator, Georgia made a point to walk between the offices in the sixth floor of the Ned Hitathli Center of Diné College.

Georgia said she grew up in a household that promoted healthy living. Like many Navajos growing up on the reservation she had many physically demanding tasks she did on a daily basis. Growing up, her daily chores took precedent over social activities. Before the sun rose she fed animals, harvested vegetables, chopped firewood, and cooked breakfast for her family. There is nothing sedentary about her upbringing.

Ironically, now she spends majority of her days sitting for hours, hunched at a computer, confined to a room away from sunlight and fresh air. She pointed out that all desk jobs have a certain level of minimum physical activity. Her position requires her to move between offices and departments that allows her to incorporate more exercise throughout the day. She considers her level of activity unusual in the Navajo Nation because she intentionally incorporates more exercise into her work. This is a scenario familiar for most Navajo office in the Navajo Nation.

Georgia Tsosie is one of many Navajos who work at a desk jobs in the Navajo Nation. She does her best to stay active, but office labor limits her mobility and forces her into long hours of sedentary work. Our bodies are evolutionarily designed to be more active and mobile. Idleness, bad eating habits, and unnatural work environments on the other hand deteriorate our health and lead to problems like obesity and diabetes. For our future, it is important that we remain active in our work settings.

Section One: Surveying Community

1. Introduction

Navajo people have transitioned from a traditional movement-based lifestyle to a modern sedentary. Historically, Navajo people were constantly outside tending to the land and livestock around them. As described by Georgia Tsosie, this is not what majority of our people practice today. We have switched primarily from a pastoral economy to a wage economy, this occurred with the introduction of wage work in the 1950s. This switch generated many changes although one is most profound, considering the overall health of our people. Office work is enabling workers to become increasingly sedentary, which will ultimately lead to worse health outcomes for our Nation.

According to Georgia, the typical office environment on the Navajo Nation involves minimal movement, working on computer, and sitting at a desk. Since majority of jobs on the reservation are office jobs, the all share "the built environment," or an environment that is "human-modified" such as work places with walls, desks, and artificial light (Srinivasan, O'Fallon and Dearry 2003). The transformation of our work environment further plays into the change we faced historically. The built environment hinders workers ability to integrate movement into their daily activities. Currently Navajo employees drive many miles to spend eight hours or more in front of a computer screen.

Diné Policy Institute recognized how sedentary office work can negatively affect daily exercise and healthy eating habits. In order to study this, our institute decided to analyze the current state of Navajo health goals, office environments, and assess the efficiency of a paid workout hour. Our decision was also influenced with the recent Navajo Nation council's health policy focus. Since health has been the focus of council, we chose to address current health policy and offer our recommendations.

This health report contains two sections in which we will be discussing the two different methods Diné Policy Institute carried out over a two month period. We captured Navajo Nation office workers attitudes in a survey we conducted in the first section of the study. The best method to gauge how Navajos feel towards their health goals is to ask the source directly, rather than assume. The second method focused on evaluating a paid workout hour our, which our office participated in. We wanted to see firsthand how a paid group workout hour would manifest in our office. The report will be divided into the two sections below after the literature review section.

2. Literature Review

Diabetes has been associated with Native tribes because of the prevalence it shows in our community, especially the southwestern tribes. The diabetes rate for Native Americans according to the Centers for Disease Control states that Native Americans are two times more likely to develop diabetes than Caucasians (CDC, 2017). Throughout the Navajo reservation, our people face a multitude of health related issues which pertain to obesity, such as diabetes, cardiovascular disease, and kidney failure. Within the Healthy Diné Nation Act of 2013, it declared that 14.9% of the Navajo population are considered diabetic and 43.18% are considered pre-diabetic, together 60% of our population is diabetic or

pre-diabetic. Diabetes is a rising concern among Navajo people and has been growing ever since (Will et al. 1997). Since more than half of Navajo people struggle with diabetes, which demonstrates the need to address root causes and focus on instilling healthy lifestyle choices.

Native American communities face many obstacles which hinder their ability to make healthy lifestyle choices the root issues being socioeconomic burdens, healthy food access, and loss of traditional lifestyles. The Washington University in Saint Louis conducted interview based research to gauge Native American's attitudes towards diabetes. They asked Native community members what they thought the main cause of diabetes was, 94% of participants stated unhealthy diets, 63% stated inactivity, 32% stated obesity, 19% stated alcoholism, and 15% stated loss of traditional lifestyle (Sahota, 2012). Majority of the Native community believed that unhealthy diets, lack of exercise, and loss of traditional lifestyle cause diabetes. In a previous report titled Diné Food Sovereignty, we studied healthy food access, we found that 74% of respondents claimed they felt that modern diets were unhealthy and that many have limited access to healthy food (Eldridge, 2014). There are not enough healthy food options within the reservation. In a cross sectional study conducted by the Indian Health Services, found that about 23% of participants reported less than 30 minutes per week of moderate or vigorous activities and 49% reported no vigorous activities (Redwood et. al., 2009). There is a lack of physical exercise and activity within Native communities. Lastly, there is a linking of exercise to tradition. In the Washington University study, most community members expressed a desire to use traditional teachings, lifestyle, and culture to health related diseases by stating that "tradition is inextricably connected to their quest to defeat the diabetes epidemic" (Sahota, 2012). The traditional aspect is included, which can also be generalized to the Navajo Nation. Navajos are faced with all of these barriers they have to overcome them if they want to lead healthier lives. Diné Policy Institute recognizes the barriers and will offer solutions in our recommendations section at the end of the report.

According to research the best method to combat health related diseases in Native communities is daily exercise combined with healthy eating habits. An important way to reduce the risk of diabetes is to lose weight, and the most effective way to lose weight is a joint focus on both improving diet and increasing exercise (Hagobian et. al., 2009). Exercise and dieting sounds easier in theory than in practice, especially when our people face the above mentioned barriers. The proper amount of exercise, as stated by the World Health Organization, is about 150 minutes of moderate to heavy levels of physical activity in order to improve physical wellbeing (World Health Organization, 2017). Majority of Native people do not reach the 150 minimum exercise threshold recommended by health experts. Along with daily exercise, health advocates suggest Researchers such as Hagobian et al. suggest that "comprehensive lifestyles interventions," including professional consultation on healthier eating strategies will improve weight loss results and lead to a reduction in chronic health problems such as obesity and diabetes. Whereas diet is one factor exercise is another.

Office work can be detrimental to an individual's health outcomes due to sedentary nature of the job.

When the worker is accustomed to office work, their outside lives can become more and more sedentary. Office work is an eight-hour workday that affords very little time during the day to work out. Office workers may not have time before or after work to be active due to external reasons. This is why the office program is the best way to enact change. The office program will incentivize workers to lead healthier lives. Research has also shown that long periods of sitting and immobility, which is common in offices, can exert stress on the spine, which results in restricted lung capacity. In turn the restricted lung capacity can limit concentration levels. When office workers are sitting in the same position for long hours in a day, they are lacking daily exercise, experience lower concentration, and perpetuate sedentary lifestyles. Health policy reform will enable office workers to become more active.

There is one major incentive for employers to promote healthy lifestyles, the reduced health care costs. Diabetes of America suggests that healthy employees save an employer $600 to $2,200 a year per employee. These savings will be produced from lower health care costs and reduced medical visits. If the corporations employees are healthier they will save their company more money, this is why healthy office programs and initiatives were created in the 70's (Conrad, 1987). These costs can be reduced or avoided with a healthier labor force. We feel the health of the employees is in the best interest of the employer.

DPI's approach picks up on these insights. In the surveys we wanted to identify the factors that limited good eating and regular exercise for Navajos. Institutions within the reservation need to recognize the importance of incorporating healthy lifestyle routines into our workspace. The Diné Policy Institute initiated a health focus program in our immediate office. Research in this area specifically geared toward the Navajo Nation is almost nonexistent, therefore, we hoped our research will catalyze a larger movement for more initiatives which promote healthy lifestyles. From here the first section of the study will be discussed.

3.1. Methods

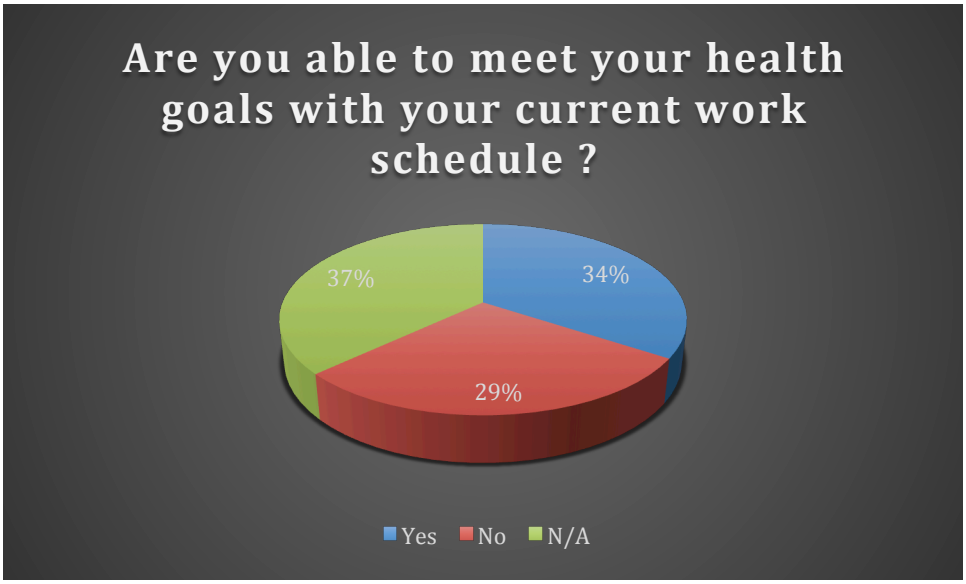
To understand the nature of the problem on our people, we surveyed workers with the Navajo Nation to identify how their work structure and environment affect their health. We collected 149 surveys in total. All the surveys were completed by Navajo office workers in the reservation and were taken voluntarily by the participant. Most surreys were completed by the workers and others we filled out while they told us their answers. The offices we obtained data from were located in Window Rock, Chinle, and Tsaile, Arizona because these locations had a large quantity of offices compared to other areas.

Surveys specifically asked about the relationship between their work structure and their personal health goals. We asked five questions, in hopes that a brief survey would allow us to obtain more respondents, which did end up happening. The questions asked about work structure, which is defined as the formal and informal conditions in which workers participate, an example would be the distance they travel to get to work and whether they feel traveling to work takes away from their workout time. We also asked about

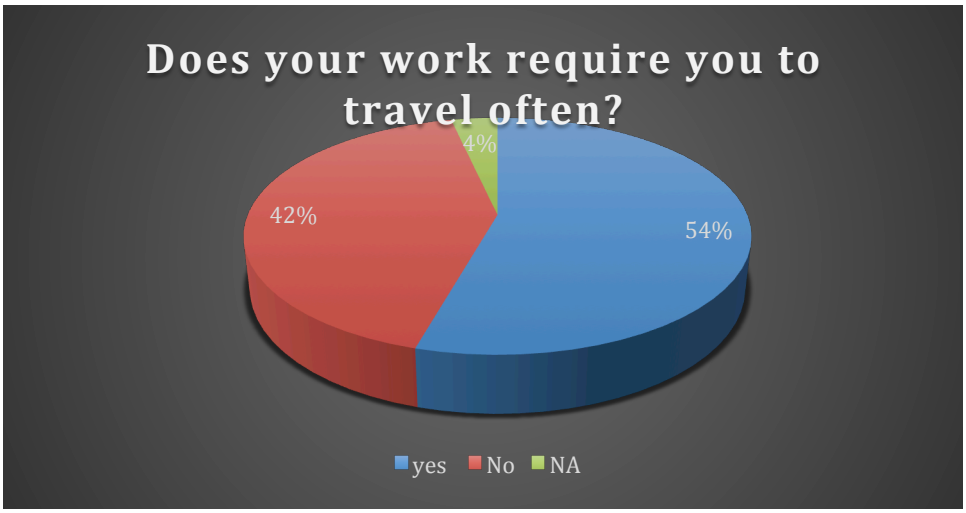
the Navajo Nation's Special Diabetes Project Wellness Centers to gauge their participation of the wellness centers. The next paragraph will explain our results from the surveying.

3.2. Results

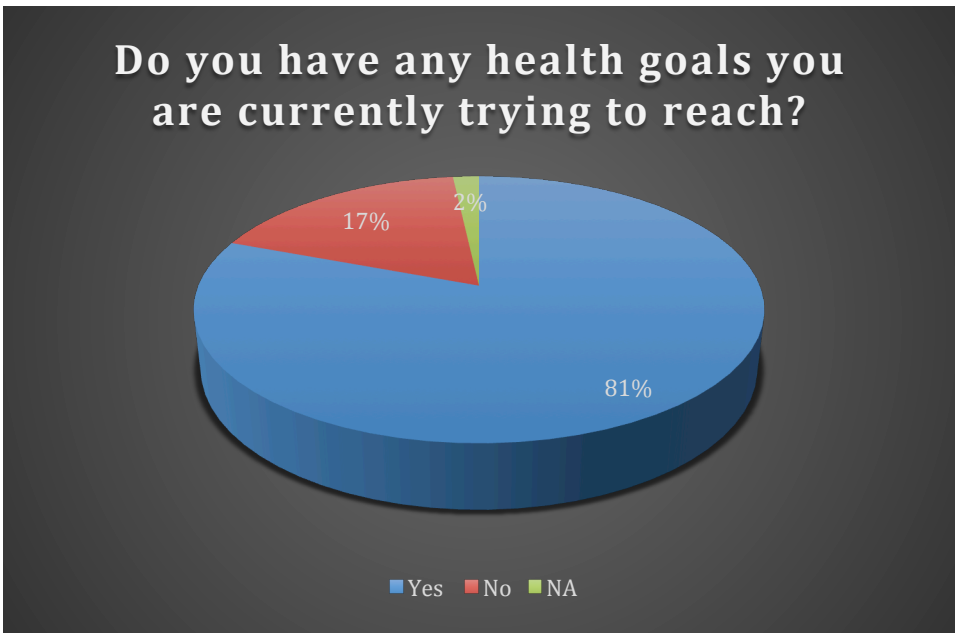
Our results revealed many valuable findings, which we describe here. Starting with question one, does work travel impact your ability to reach your health goals (Graph 1), 85% of respondent said no and not applicable. This means that work travel does not affect people's health goals. Although this goes against our assumptions, a large category of not applicable speaks to the misunderstanding of the question.



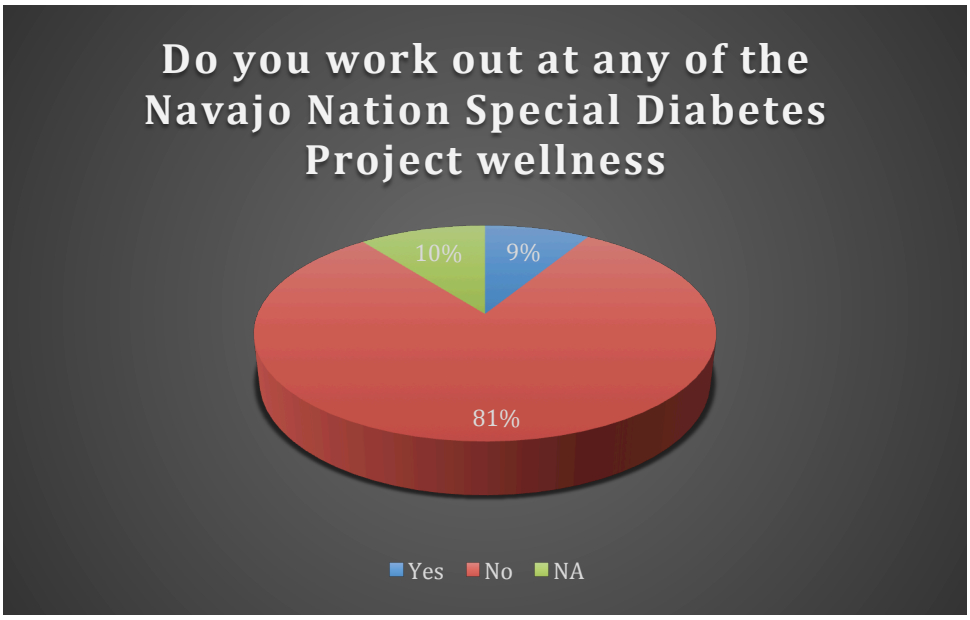
The second question asked does your work require travel. Majority or 56% of the respondents replied no they do not travel for work, a little less than half stated yes their work requires travel, and only 3% responded not applicable (Graph 2). The small portion of those who replied not applicable, speaks to the respondents understanding the question. Although we received a small number of respondents telling us they did not understand the question, we can see how this is an ambiguous question. This question should have been more specific.



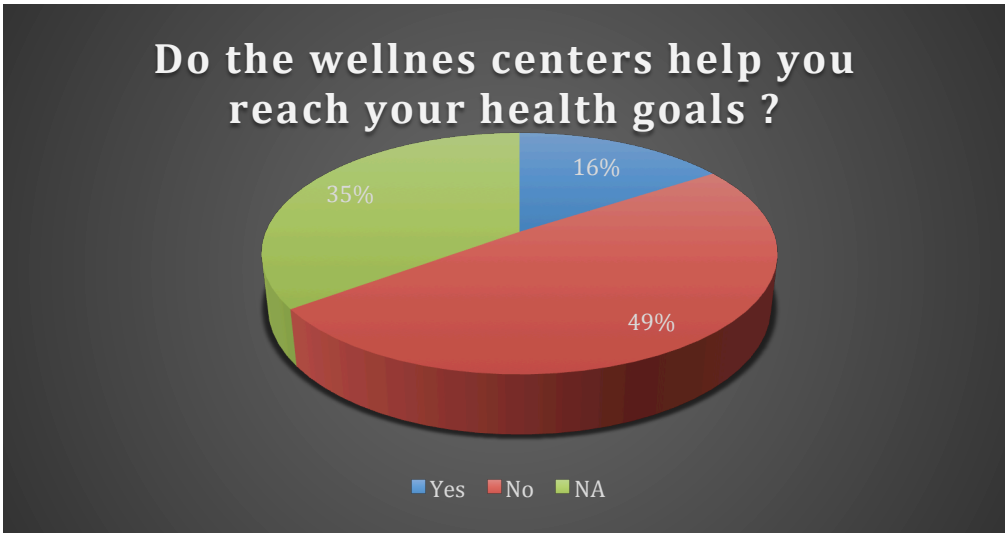
The next question asked if the respondent was currently working toward health goals. Our data shows that an overwhelmingly majority or 85% answered yes and a small fraction only 14% answered no to having health goals. This information signifies that most Navajo office workers hold health goals and strive to reach them.



The fourth question asked on the survey was whether they used the Navajo Nation's Special Diabetes Project Wellness Centers. As displayed on Graph 4, Majority of participants or 89% of them stated they do not use the wellness centers or did not know the centers existed.



The last question was do the wellness centers help you reach your goals. In Graph 5, one can see the results. Since almost all of the participants said they do not use the special wellness centers it makes sense why majority of participants do not feel the centers help them achieve their health goals.



3.3. Discussion

Although we had initial guesses about the results but many of our assumptions were not supported by the survey results. This is a beneficial survey because we learned much we did not know about the working population's presence of health goals, participation in the wellness centers, and the daily travel. We learned valuable information from this survey which we will use in our second study and in our recommendations. Will have to do continued research to learn whether or not the socioeconomic factor of

rural living contributes to lack of exercise. Also we would like to address the questions which were deemed confusing for our participants, we take responsibility in crafting ambiguous questions. Moving forward, our second section on the second study will be discussed below.

Section 2. Experimental Healthy Office Research Program

4.1. Introduction

During the summer of 2016 the Diné Policy Institute conducted an experimental healthy office research program within our own office. With the survey results from the last. We wanted to test the efficiency and practicality of a paid workout hour. Implementing this program in our office would give us first-hand experience of what challenges arise with a workout program. Our office was used as a proxy as the typical Navajo Nation office because of our sedentary work environment, similar work hours, and the physical activity level of the workers. We felt the generalizability is something which can be established, due to the similarities between our office and others.

The program measured and analyzed our participation through a daily workout program run by hired personal trainers. We had limitations we found that working out daily, hoped to gain insight on challenges and opportunities faced when enforcing the healthy office program within the Navajo Nation. This study contains two methods of evaluation, the daily surveys and daily journal. From each of the methods, we found uniform improvement in individual's mental, emotional, and physical wellbeing after the program.

4.2. Methodology

The study consisted of two various methods to evaluate the program's efficiency. We had a sample size of 6 men in the office who were between 22-37 years of age. We hired a personal trainer, Brian Young, to create personalized workouts for each office worker based on their physical capabilities and health goals. Brian was a licensed trainer and health enthusiast. He conducted an initial assessment of our height, weight, sizes, limb flexibilities, and health goals in the beginning of our study. The trainer assisted us on our workouts and modified exercise regimen per our growth and needs. Then, he developed an exercise curriculum for each of us to follow over the two month period. He maintained our workouts through a phone application and website, as he could not visit us every day or week because he was based in Albuquerque. He visited our office a total of 5 times to check in on how well we were progressing through the workouts and adjust workouts if needed.

During the hour before lunchtime between 11 and 12 pm, we worked out collectively in the Diné College gym. We would be in the same gym but perform different exercised following the trainers specialized workouts. An example of an exercise performed by one of our workers was the fly cable machine. The machine is used to work out your upper back, arm, chest, and spine. This exercise was given to each member of the office because the trainer told us we had a huge problem with slouching, or slumping over

our desks to type on the computers. The trainer prescribed these workouts to us in order to better our posture when behind the desk, these are the types of workouts we did all summer. The workouts were also infused with our health goals, as leg exercises were given to those who stated they had a health goal of having better running posture. Each exercise was modified to fit our goals, which was beneficial to our health over the period of the study.

Afterward, we would eat lunch together in the Diné College cafeteria where we would encourage one another to select healthy foods. The cafeteria is a buffet style eatery which offers a good selection of healthy food options like vegetables and salad. We tried our best to select the healthiest foods and maintain our healthy exercise routines. There are some days when we missed workouts due to travel, meetings, or unavailability to perform workouts. This should be taken into account when evaluating the program in the later section.

In order to evaluate the program from multiple areas, we captured quantitative and qualitative data through daily surveys and daily journal entries respectively. We also interviewed him at the end of the program, so he could speak on the effectiveness of the program from a licensed trainer's perspective. The data was collected through the following methods.

Personal diaries were recorded every day after the workouts, about 30 minutes before the end of the work day. Through diary entries, we captured the qualitative data. We allotted about 30 minutes to respond to each of the three questions. The journal entries asked the questions: 1) Quickly write down how you are feeling emotionally, mentally, and physically, 2) How has working out affected your emotions, productivity, health, and behavior in the work space, and 3) What factors have made it easier/harder for you to maintain the exercise. We set reminders daily on our computers to remind us to write in the journal every time we worked out. We all wrote in a paper journal, in our own offices where we were comfortable. In each entry, we tried to be as reflective as possible and as open and descriptive as possible.

Along with personal diaries, surveys were taken pre and post workout. The survey would be a daily before and after workout measurement that would allow us to see the effects of working out in a quantitative matter. Diné Policy Institute office workers would fill out a personal survey as they got in to the office in the morning and towards the end of the day after workouts. We tried to fill out the survey before the journal entries were taken. The surveys measured emotional, physical, and mental statuses throughout the day. The survey taken on paper and asked for the following on a likert scale: 1) on a scale of 1-5 (1 being tired and 5 being super alert) how mentally alert are you? 2) On a scale of 1-5 (1 being poor physical health and 5 being great physical health) what is your physical wellbeing? 3) On a scale of 1-5 (1 being depressed and 5 being ecstatic) what is your emotional wellbeing? On the survey we would select which number we felt be represented our mood each day before and after working out.

From the personal survey and diaries, we could measure how an hour of physical activity affected them and their behaviors. The data gathered from the personal surveys and diaries provide a sufficient look into

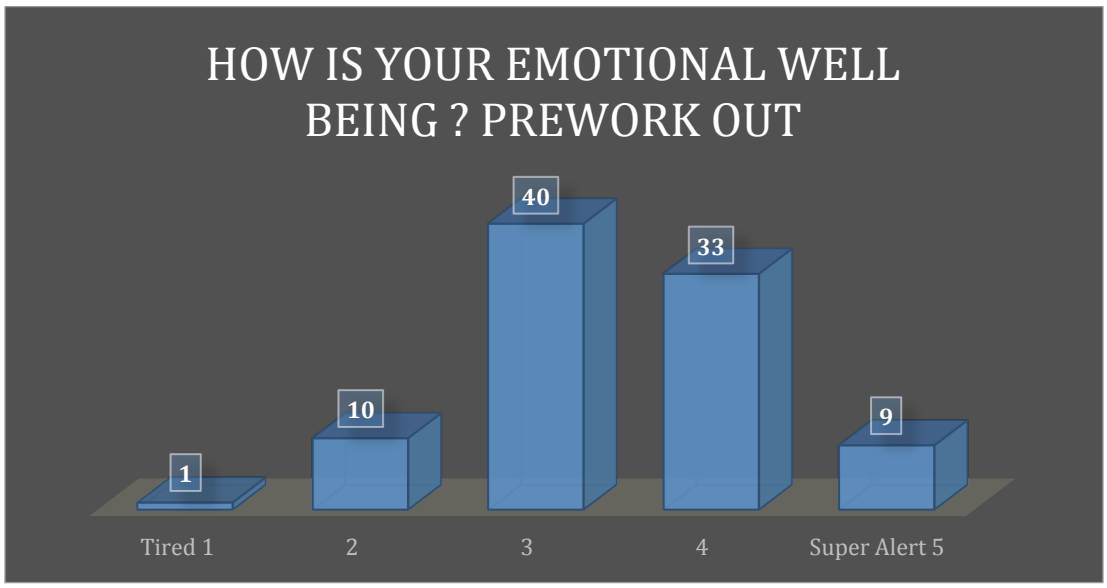
the wellbeing of the office workers and how physical activity affects them. We aimed to capture the emotional, mental, and physical effects of daily exercise. From this we can understand the effects of physical activity but also the obstacles that may prohibit such a regiment.

4.3 Results

Both methods will be discussed and analyzed in this section. Overall our data shows that there is improved mental alertness, physical wellbeing, and emotional wellbeing from working out. The data collected shows that exercise plays a beneficial role in an office workers life due to improved life satisfaction.

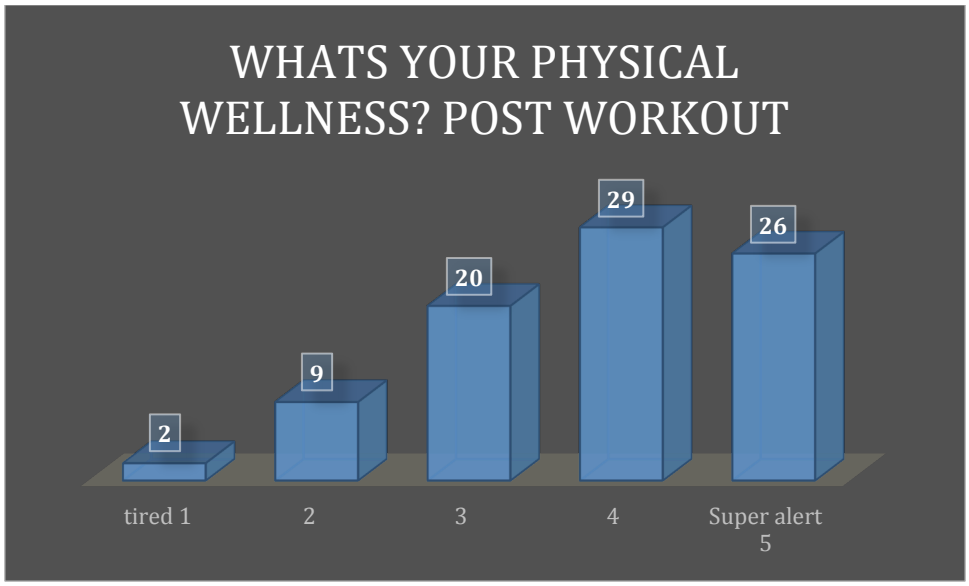
Between the two months of our study, 93 morning surveys and 86 afternoon surveys were obtained. More surveys were obtained for the morning period due to forgetfulness to fill out the survey near the end of work. This will skew the data and challenge some of our assumptions, although the difference between survey numbers is minimal, we can overlook the minor difference. The data from the surveys are depicted in the bar graphs below.

In the surveys, our employees felt exactly between “fatigue” and “energetic” 42 times. That means on average we felt physically on average before doing our workouts.



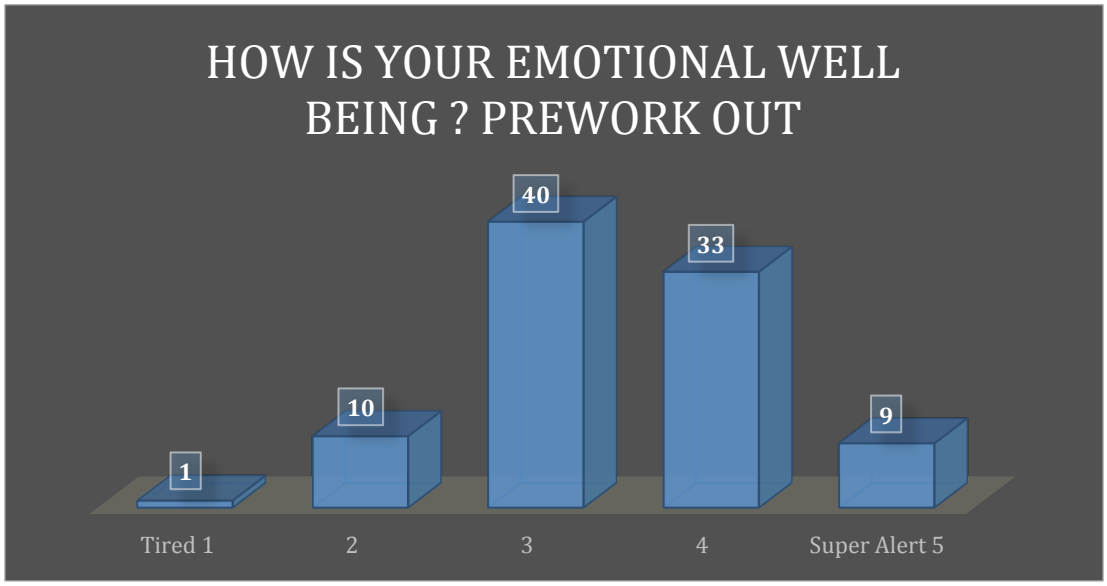
Graph 7. Physical wellness Post-workout

Our post-workout survey showed that we felt more energetic after hour workout at mid-day than when in the morning. As you can see in Graph 2, most of our post-workout responses were in category 4, which is the second highest amount of energy possible.



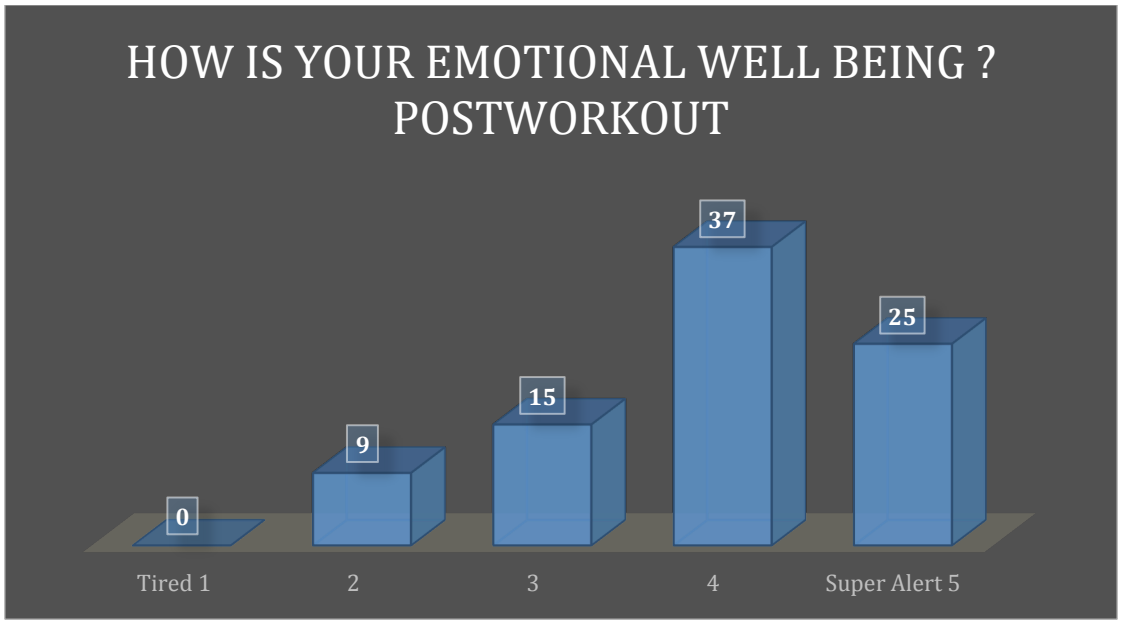
Graph 8. Emotional well-being

Our morning survey showed that we had moderate emotional well-being. Most of us reported average feelings in the morning, with occasional bouts of extreme "happiness."



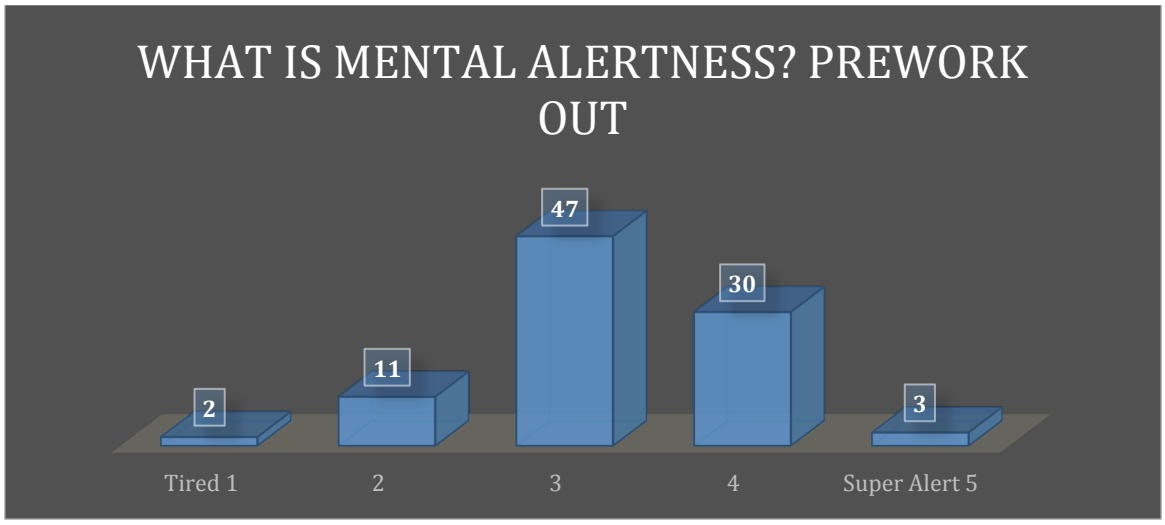
Graph 9. Emotional well -being

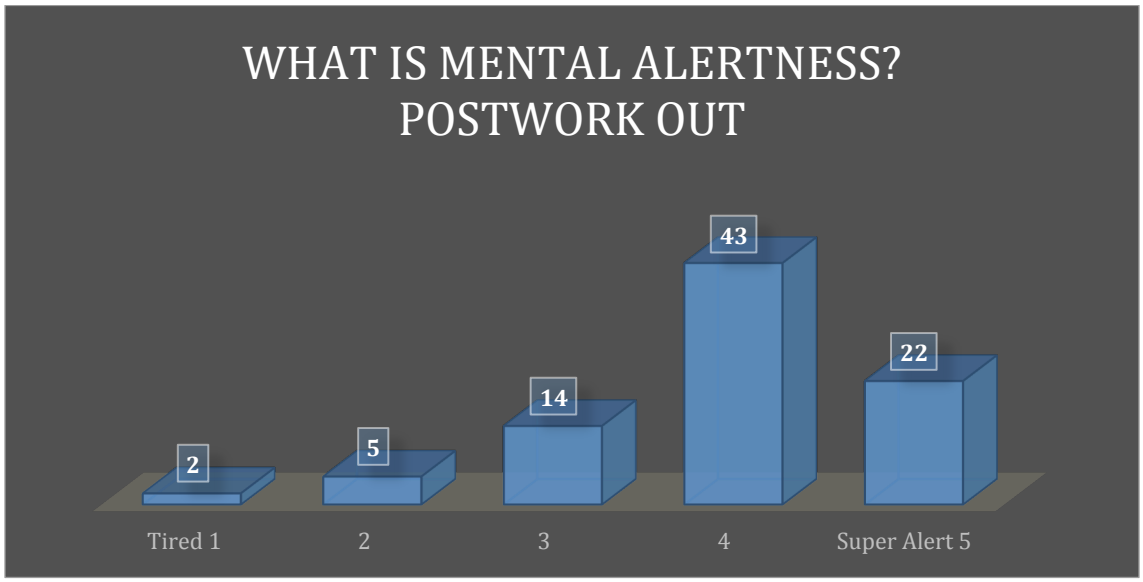
Our afternoon survey showed a definite improvement in mood, with 26 reported “happy” responses from 9 in the morning. As you can see, our “average” feeling declined significantly after the workout in the direction of happiness.



Graph 10. Mental alertness Pre-workout

Our morning survey showed, again, that we tended to have a moderate feeling of mental alertness at the beginning of the day. But our second highest response was 30 in category 4 of the survey, indicating we were generally alert in the morning. But as you can see below in Graph 11, mental alertness improved after our midday workout. We increased super alert levels from 3 in the morning to 22 by the afternoon.





In this section the result from the journal entries will be discussed.

Within the journal entries three strong points, camaraderie, accountability, benefits of working out, and obstacles arose. Camaraderie, a mutual bond between individuals, begin to develop between all the participants. One of the participants noted it in their diaries as ‘camaraderie’ but other diary entries picked up on the same sentiment. Accountability was also highlighted as a topic through the study. The benefits of working out on the state of the individual can be seen in each of their entries. The final topic is obstacles that made it difficult to maintain the exercise regimen in a consistent fashion. The obstacles permeated with the first two topics because those two topics were big factors in maintaining a consistent routine.

Camaraderie

The bond created between the participants can be read in their diaries and seen as the program progressed. The group of six participants began as office workers connected by department but as they continued to work out they developed a bond. Many of the participants noted that it was easier to work out others. This bond was not noticed until the end of the program when participants notice that it was harder to work out alone. Sam, from here on out pseudonyms will be used, noted that one of the factors that made it easier was "all the staff also working out". Tom noted that he "preferred to work out with others because of the sense of camaraderie". Tom noted this at the beginning of the program while others pick up on it when the group was together. He furthered noted towards the end that he "had no support or encouragement" so he decided not to work out. Mitchell noted that "being alone and not having people around" makes it difficult for him to exercise. The camaraderie was not exclusive between the participants but it extended to family members. Scott noted that working out with his wife was nice, "having someone in the gym with me was great".

Social support is important when looking at the physical activity of adulty.1 Studies show that an individual has a higher chance of maintaining an exercise regimen if they have the social support in place. The camaraderie experienced between the participants demonstrates the social support needed for each of the participants. The reason for the breakdown of the social infrastructure was travelling but that will be discussed later. The barriers that hindered communication and solidarity between the workers in the office began to crumble as they continued to work out. Office workers became more inclined to talk to each other and develop relationships outside of the work relationship. This relationship also existed between the trainer and participants. Our trainer said that he liked the personal relationship that grew between him and the trainees.

One consideration that we believe is important is the fact that all our participants were male. This is very important to note because of the gender dynamics of the gym. The gym is seen largely as a space for masculinity which can deter women from entering and working out. We believe that if women workers were to go to the gym in groups of women it would increase their consistency.

Accountability

The second topic that became clear was accountability. Two forms of accountability emerged from the

experiment, social accountability and trainer accountability. Social accountability became prominent between the participants. The social support or camaraderie pushed participants to work out even though they were not inclined to work out. Alex wrote that it was "it was hard to maintain a workout due to lack of accountability". Tom became "disheartened" as people who started the program could no longer keep up. Scott wrote that having Sam around who had the same work out plan "helped him to do some of the exercises". All the participants were motivated and regulated by their peers. When it was time to work out they would tell the others to get ready for the gym or they would tease them about missing a session.

Trainer accountability was the second form of accountability. This came in the form of having the trainer around to assist us with exercise. When he was absent, an app provided us with the accountability needed to exercise. Sam noted that having the trainer around made it easier for him to exercise as did the rest of the participants. The trainers would hold each individual accountable while pushing them to get the most out of their work outs. In our interview with the trainer, he said that he had wish to be around more so that he could monitor our progress but also to make sure we were completing our regimen. The app provided accountability when the trainer was not around. Many participants were notified by the app in the morning of their exercise routine and they must click on it to say they worked out. If they didn't it would remind them that they missed an exercise. Its original purpose was to communicate the workout schedules to each of the workers but it held each participant accountable due to its reminders.

Accountability played a big role in determining if the participants would be consistent with their exercise. The social support cultivated an atmosphere of social accountability between the participants. This is one of the benefits of group exercise programs, an air of accountability develops between the participants of the group. Each participant was held accountable by others who would encourage or tease them into working out. Trainer accountability occurred when the trainer was around or communicated through the app. The trainer would push the workers to work harder while assisting with each exercise by providing proper technique to keep people safe. The app did that with less interaction but still played a role of accountability for the participants.

Benefits of Working out

The dairies helped capture the effects of working out. All participants felt better after working out. Working out helps relieve stress. Most of the participants felt more energetic after the workouts and they felt more flexible. Emotional and mental health were improved. Participants wrote that they felt more productive and confident after their workouts. Though at the beginning of the program many felt sore due to the change in lifestyle by the end most participants became less sore as they worked out. Our

experiment only focused on healthy activity but many participants became more self-conscious of their eating habits, portion control and content of the food. Their healthy activity extended beyond the one hour designated for working out.

Working out has altered their behaviors and lifestyle. Rather than penetration just one sphere of their life for a moment, many participants began to eat healthier and exercise more. They felt better emotionally, mentally, and physically and their productivity level increased after working out. The trainer noticed an improvement in posture and balance.

Obstacles

Many of participants were consistent at the beginning of the program but obstacles broke down the consistency for some of the participants. The biggest obstacle for the participants was traveling. Many of the participant's positions required them to go on long extended travel so working out became harder for them. Alex noted that the main problem was travelling. Mitchel and Sam noted that travelling became an issue for them. Tom indirectly felt the consequences of traveling because he had no one to work with because they were all traveling. For him, traveling disrupted the social support he felt was necessary for consistency. Scott travelled but he found a space to work out and he maintained the work out sessions. One of the participants was so busy on travel that he did not write or complete survey which demonstrates who travel can really hinder a healthy lifestyle for Navajo office workers.

Traveling disrupted the routine for the workers. On travel, the participants lacked the social support, space, and time to work out. Healthy eating habits were ignored in favor for fast food due to time constraints and lack of preparation. The participants had a space for working out when they were at work so space wasn't an issue. On travel, participants many not have the place to perform exercises. Time became an issue because travel required a rigid time line that could not be broken but it also eliminated the routine of working out at every day. Some found the mandatory work out at 11am very helpful because it established a routine and habit for them to work out. The program established a routine for the participants, a time and space for working out, but traveling disrupted that and the healthy eating habits of the participants.

Limitations

This study provides significant findings, although limitations exist within our study. First, only men ages 22-37 participated in the study, there was no gender or age diversity within the study. This makes our results only generalizable to male office workers between ages 22-37, rather than woman and men of

different ages. Arguably, we can assume that the results would be the same for women too, but we need conduct research to make these claims. This is something we will consider in the later studies.

Secondly, some individuals in our office were generally healthier than the average Navajo Nation employee. In the office we had some individuals who worked out every day and ate healthy, this limits the findings because the results may be different because of this. Our employees also came from similar socioeconomic statuses and had little family responsibilities outside of work. This means that our office generally had more free time to exercise and focus on being healthy.

We also need to be more consistent with our diary entries and surveys. The first month of the study many workers were too busy to fill out surveys and complete diary entries. The obstacles mentioned earlier in the report explain the inconsistencies in our date but they can also skewer the data.

5. Discussion

With a growing office work sector in the Navajo Nation it is important to focus on the impacts of a sedentary lifestyle on our Navajo bodies. From our data, we can conclude that a daily workout program in office boosts emotional, mental, and physical wellbeing. When workers feel better in all of these categories, it improves their overall life satisfaction. As a result of better life satisfaction, workers have higher levels of productivity, this is why employers should look into healthy office programs. The results of this study can be further applied to offices within the Navajo Nation to better worker productivity. Rather than enable sedentary lifestyles, the Navajo Nation should strive to better the health of their people. Offices are a great first start, the logic model will be described below.

Our prior report pointed out the issues of office workers faced when trying to be active or fully through with healthy activity through data collected via surveys. Our conclusions from that paper suggested that we need more thorough research on the link between socioeconomic factors and health living but we believe that we can still offer policy that can be salubrious for office workers on the Navajo nation. This portion of the healthy office initiative focuses on the office workers who have one hour of work dedicated to physical activity. From this we can offer policies gathered from the data that demonstrate the effects of one hour of physical activity on office bodies.

Our experimental design was created so that we could study the effects of working out on Navajo office workers. Due to our size and location, we decided to study ourselves. The design was meant to capture the changes of lifestyle and behavior from the perspective of the participants. This would allow us to get an idea of obstacles and benefits of working out that any other office worker would came across. We wanted to understand these issues before recommending any policies.

6. Policy Recommendations

With the data gathered our policy recommendations revolve around a mandatory one hour of working in which the employee can participate in group exercise and solo programs that revolve around core and balance. Core and balance are the foundation of most exercises and it will be a great place to start for most employees. Rather than giving strenuous exercises, balance and core allow for individuals to build up to those more complex exercises that demand the instruction of a trainer.

Included with the group exercises are gym trainers who will provide instruction and assistance with their trainees. They can provide group sessions and one on one training so that levels of attention can be addressed for each employee. This will allow for employees to get one on one training and allow for others to get group sessions. We suggest one trainer for every 15 to 30 employees, twice a week group sessions and one on one sessions.

Along with the trainer we suggest an app that alerts and reminds people of their workout routines. This will allow workers to fulfil their health goals on their own if they choose to do so and it provides flexibility for trainers. This will provide a range of opportunity and attention for employees who want direct one on one or group sessions. This also provides a plan for traveling employees who can only exercise in their hotel rooms. Our group noticed that when gyms were absent we did not have simple exercises to do in their place. The inclusion of a pedometer would help participants measure their own cardio progress.

We also suggest including a dietician to assist with creating food plans for individuals who wish to seek healthier eating habits. As we noticed, healthy activity is usually accompanied by other healthy habits such as portion control and healthier eating. It would be wise to assist those who want to pursue this path.

Our final suggestion would be the inclusion of Navajo philosophy into work out regimens. Navajos were very active and their philosophy reflects that. It would be a cultural fit to include Navajo teachings on an active lifestyle.

New Recommendations:
In a nation-wide study conducted by health researchers in 2009, they stated that parental involvement, access to wellness centers, and physical education should be targeted when creating public health interventions (Whitt-Glover, 2009).

Research suggests that comprehensive behavioral approaches to preventing diabetes through healthy eating, focusing on weight loss, and maintaining healthy weight overtime (Hagobian et al. 2016).

Limitations:

Office initiatives are most effective, our office was self-selected, small in terms of staff, and uniformly men, and these are our limitations.

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