Nico Pronk, PhD, provides a summary of HealthPartners’ highly successful 10,000 Steps® program

One Step at a Time—The 10,000 Steps® Program Increases Physical Activity

Introduction
The mission of HealthPartners, a health plan based in Minneapolis, Minnesota, is “to improve the health of our members, our patients, and the community.” With obesity and its accompanying health complications an increasing problem nationwide,1 finding a way to address obesity and overweight became a key component of the organization’s Partners for Better Health initiative. Begun in 1994 and now in its second iteration, the program—currently titled Partners for Better Health 2005—seeks to create measurable improvement in member health and includes five-year goals in areas of need.2 These goals provide focus for the organization and emphasize partnerships among many stakeholders, such as clinics, employers, the health plan and its members, and the community.

In creating goals for Partners for Better Health 2005, program developers considered—and then chose to focus on—the role of physical activity in improving health and preventing health problems. Specifically, the goal articulated by Partners for Better Health 2005 is “to increase the proportion of individuals among our members and our community who choose to live a physically active life.” Several objectives are included in this goal:
• Among adult members 18 to 65 years, increase the mean number of physically active days by two days per week.
• Among adolescent members, increase the mean number of physically active days by two days per week.
• Among senior members 75 years or older, reduce prevalence of completely sedentary behavior by 50%.
• Increase to 90% the proportion of people who can identify twice as many advantages as disadvantages associated with being physically active.

The 10,000 Steps® Program
As one way to meet these objectives, HealthPartners chose to seek improvement one step at a time—literally. The result was the 10,000 Steps® Program, a pedometer-based program of tracking, motivation, health education, and participation incentives. The goal for enrollees—to take 10,000 total steps per day—is deceptively simple because working toward this goal causes participants to develop new habits and new attitudes about physical activity that program developers believe could last a lifetime.

A pedometer-based program was selected because it would provide a well-designed method to increase physical activity among overweight people. To successfully influence members who had generally been inactive, no activity component could be of high intensity—not only to avoid injuries but also to combat the discouragement that sedentary people frequently feel when confronted with an exercise program. The key is continuing to purposefully differentiate between exercise and physical activity. Many inactive people—especially those who are overweight—have a very low level of fitness and can become completely demotivated when presented with an exercise program that they perceive as too difficult. A pedometer program is something people of all fitness levels can use.

Extensive planning and analysis were used to design a program that would be appealing, accessible, and motivating. Clearly envisioning the target audience was crucial, as was creating a message that consistently promoted readiness to change (the staging construct). Program developers also reviewed cur-

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health systems

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The 10,000 Steps® Program — cumulative enrollment

Figure 1. Graph shows continuous rise in enrollment in the 10,000 Steps® Program during its four years of existence.

Because steps are tracked as they are taken, users receive immediate positive feedback—a major motivator that counters discouragement, one of the greatest deterrents to increased activity.

rent literature on physical activity and related trends observed at the national and state levels. In addition, two focus groups consisting of health plan members offered consumer input on program development as well as on artwork and layout for the program’s printed materials.

As a pilot program, the 10,000 Steps® Program made enrollment entirely voluntary. Enrollees were mailed a kit that included a pedometer; a personal action planner; a log for tracking steps; motivational mailings sent biweekly for eight weeks after enrollment and then bimonthly for the next six months; and prize drawings as additional incentive for continued participation.

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The pilot program included 92 adult health plan members. Nearly 70% of these participants increased the number of steps they took during the first eight weeks of the program, and 31% actually reached the goal of taking 10,000 steps daily. Half the participants had not reached the goal of taking 10,000 total steps but believed that their level of activity had increased.

These results were encouraging but had only a small role in determining whether the program would be extended to the rest of the organization’s members: HealthPartners’ members had already made up their minds—affirmatively. Before the pilot program reached its conclusion, the program attracted a greatly increased number of requests for enrollment. In the past year, 15,000 people enrolled in the program, which was never formally marketed to the members. This enrollment marked a 248% increase over the 2001 enrollment. In early January 2003, the 10,000 Steps® Program went on-line (see www.healthpartners.com/10000steps), a development that enabled members to participate in every way, ranging from enrollment to tracking their own progress online. This online version further enhances accessibility, scalability, and sustainability of the program, which is already regarded as one of HealthPartners’ most successful programs for promoting health and wellness.

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References