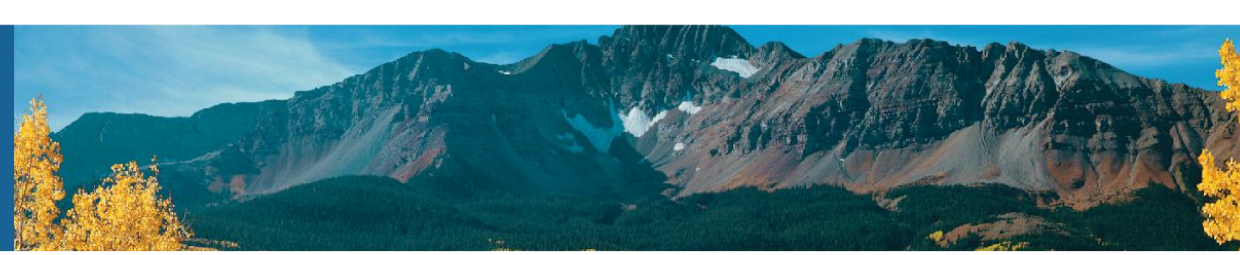




# ASRM 2024

*Equity, Access, and Innovation*



# Use of a Digital Health Platform to Maintain Workplace Productivity while Trying to Conceive

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# Disclosures & Acknowledgements



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- All authors are employees of, and have equity options in, Maven Clinic

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# Background

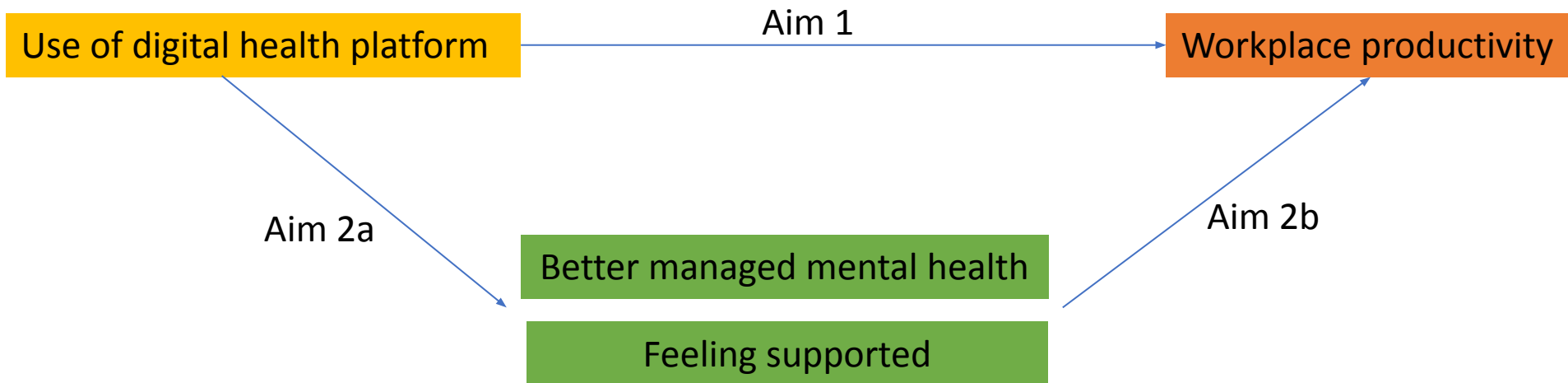


- Regardless of infertility status, trying to conceive (TTC) can be associated with anxiety, information seeking, and healthcare appointments.
- These experiences while TTC contribute to reduced workplace productivity
  - Presenteeism
  - Absenteeism (especially if undergoing fertility treatment)
- Reduced productivity is costly to employers
  - E.g, avg. cost of lost productivity for people undergoing treatment is \$648/cycle (Bouwman et al, 2008)

# Use of a comprehensive digital health platform and productivity while trying to conceive (TTC)



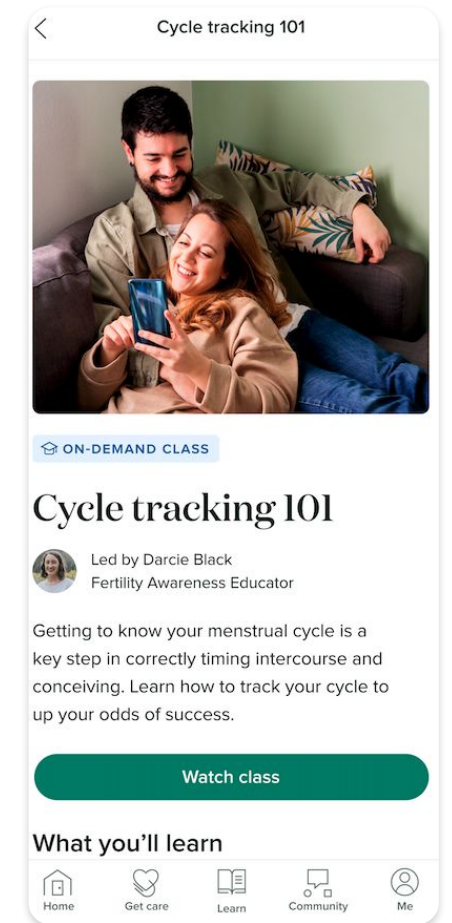
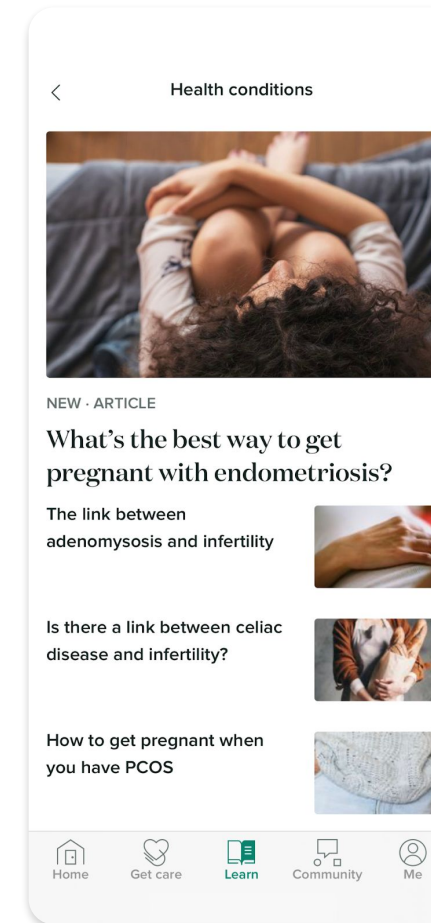
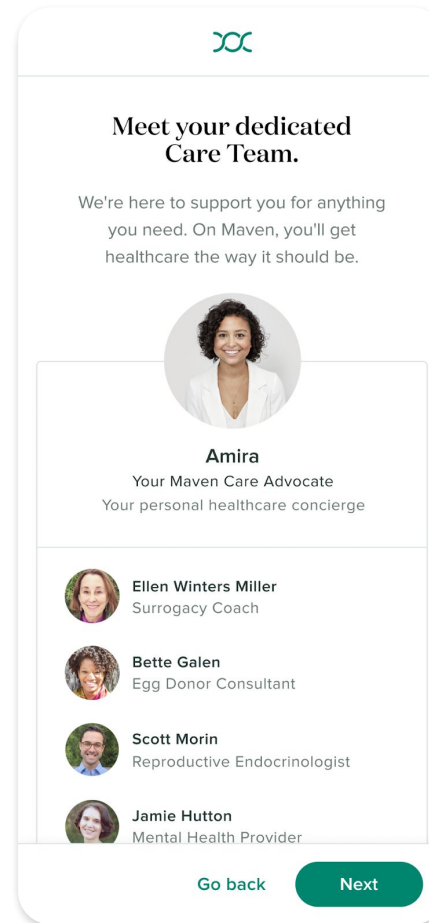
- Receiving digital health support while TTC may improve productivity
  - Reduce time away from work to seek information and receive care
  - Reduce anxiety through education and support



# The digital health platform



- Comprehensive women's & reproductive health platform
  - Continuous access to education on reproductive health and conception
  - Messaging and video appointments with providers
  - Personalized care navigators
- Benefit through employer or health plan
  - No cost to users



# Methods



## Study population

- Platform users in the conception program (with and without infertility)
- US users only
- Limited to those who completed all relevant questionnaires

## Data

- Demographics and medical history
- Outcomes collected after 6 months in the program or upon conception
  - **Productivity:** Platform helped me maintain or improve productivity at work
  - **Mental health management:** Platform helped me manage my anxiety or depression
  - **Support:** Received excellent support from the platform
- Time engaging with the platform (tracked in the app)

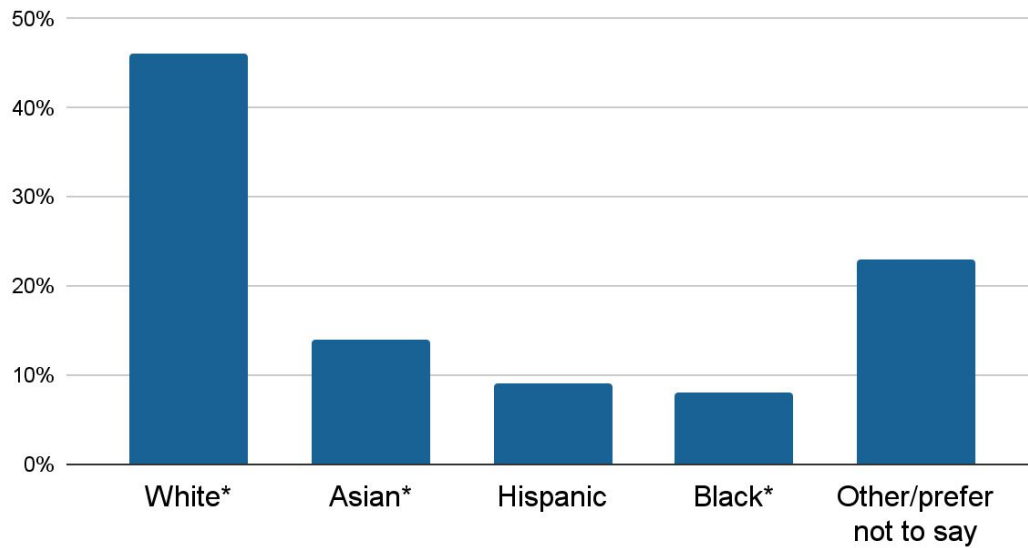
## Analysis

- Descriptive statistics
- Multivariable logistic regression adjusting for users' age, Social Vulnerability Index, parity, medical conditions, and occupational industry

# Results

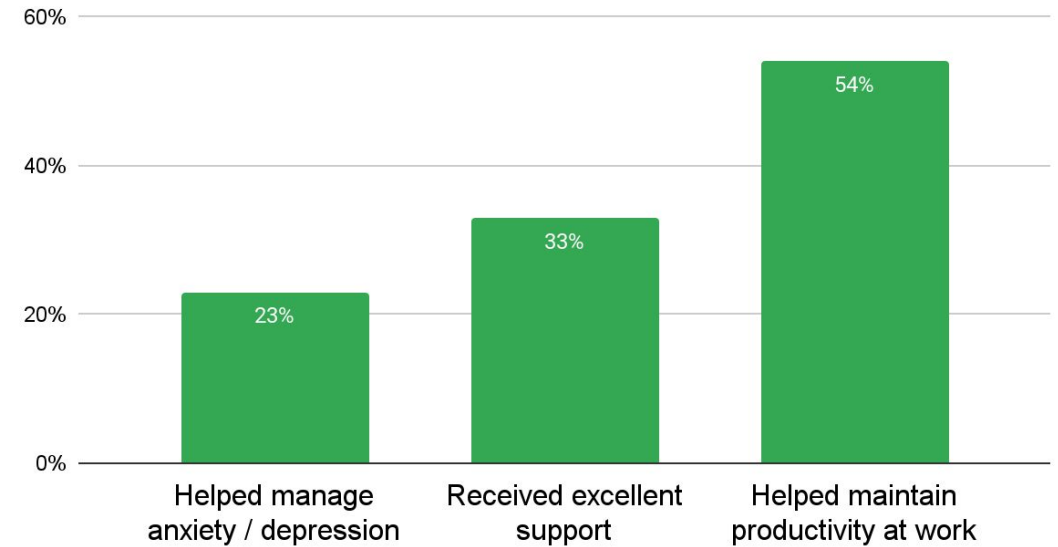
- N = 1136
- Mean age [SD] = 34.1 [5.15]
- Nulliparous = 64%
- Mean hours on platform [SD] = 2.3 [3.6]

Race and Ethnicity



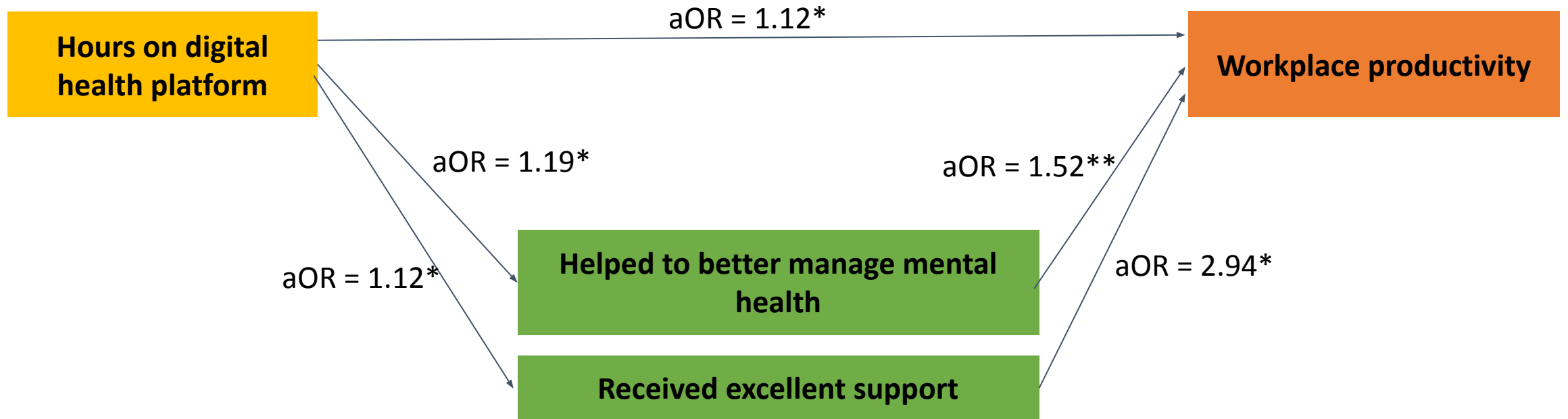
\* non-Hispanic

Perceived Benefits of Digital Health Use





# Fertility Workplace Outcomes



\* p-value < 0.001.  
\*\* p-value < 0.05.

# Conclusions



- A comprehensive digital health platform can help people maintain workplace productivity while trying to conceive, regardless of infertility status.
- Employees may be more productive when they better manage their mental health and feel supported.
- Digital health platforms may support productivity by reducing time spent away from work seeking information and attending in-person health appointments.

Providing holistic, digital health benefits to employees who are trying to conceive may improve the well-being of workers and benefit the employer by reducing costs associated with reduced productivity.

# Appendix



Associations between digital platform use, mental health management, support, and workplace productivity\*

Aims		AOR <sup>a,b</sup> (95% CI)	p-value
Aim 1	Association between hours on the platform and maintained productivity	1.12 (1.05, 1.19)	<0.001
Aim 2a	Association between hours on the platform and better management of mental health	1.19 (1.13, 1.26)	<0.001
	Association between hours on the platform and feeling supported	1.12 (1.07, 1.18)	<0.001
Aim 2b	Association between better management of mental health and maintained productivity	1.52 (1.05, 2.22)	0.029
	Association between feeling supported and maintained productivity	2.94 (2.07, 4.23)	<0.001

\*All of these AORs were displayed in the outcomes conceptual model on slide 9. This appendix includes their confidence intervals and p-values.

<sup>a</sup>aOR = adjusted odds ratio, CI = confidence interval

<sup>b</sup> Multivariable logistic regression models adjusted for user's age, SVI, presence of mental health conditions, medical conditions, parity, and occupational industry