HEALTHY COMMUNITIES

HEALTHY COMMUNITIES PRESENTATION
APRIL 11, 2011
Why were your counties chosen?

• The goal of the Department of Health is to have a Healthy Communities Project in every county by 2013.

• We wanted to start with counties that have high rates of chronic disease and risk factors for chronic disease.

• The Department of Health needs the help of local public health agencies in developing and supporting policy both at the local and state level that addresses the risk factors for chronic disease.
What is the ultimate goal of the Healthy Communities Project?

To improve the health and quality of life in local communities by preventing and managing chronic disease by:

- Addressing the primary risk factors of **tobacco use**, **physical inactivity**, **unhealthy eating**, and **obesity**
- Changing the **policies**, **environments**, and **systems** where people live, work, play, and go to school
How are chronic diseases prevented and managed?

• Early detection & treatment
• Healthy eating
• Physical activity
• Preventing or quitting tobacco use
PUBLIC HEALTH IS ABOUT IMPROVING THE HEALTH OF THE ENTIRE COMMUNITY......
This means changing policies, systems and environments to make it easy for people to be healthy...

We can’t improve public health one person at a time or one disease at a time
HEALTHY COMMUNITIES PROJECTS

COMMUNITY GARDEN

SCHOOL WELLNESS TEAMS
HEALTHY COMMUNITY PROJECTS

WALKING PATHS
COUNTY INDICATORS
What are Local Public Health Indicators?

Indicators and criteria were developed by local and state public health.

Public health indicators are a snapshot of:

• Population health status and health determinants
• Public health system performance

These indicators represent a subset of available data. The sets provide critical health information essential for decision-making.

Indicator data are used by nearly every local health agency. Provide us with a common set of data across the state.
Criteria for selecting indicators

- Measures important outcomes of public health’s work
- Important to the entire population
- Uses standard measures from existing data systems
- Are actionable - local public health can implement activities to improve
- Can be reported in at least 80% of local health jurisdictions with comparisons to the state
- Measurable over time to determine trends
- Understandable
32 indicators grouped into 5 categories

- Communicable disease
- Prevention and health promotion
- Maternal child health
- Access to care
- Environmental public health

LPHI website launched and baseline data for most indicators posted in 2007
Indicator data are currently updated every two years
First round of updates to indicator data were released in November, 2009
Local Public Health Indicators

In 2009 update...
Most indicators have two sets of data displayed enabling comparisons
  Over time
  With other jurisdictions
  With state and national averages
Four indicators have new baseline data
  Food service safety
  On-site sewage system corrections
  Reported child immunizations
  Children with health insurance
  Childhood unintentional injury hospitalizations
• Local Public Health Indicators
• Communicable Disease
  • Reported Chlamydia infections
  • Treated Chlamydia infections
  • Influenza vaccine (65 years or older)
  • Reported child immunizations (new)
• Maternal and Child Health
  • First trimester prenatal care
  • Maternal cigarette smoking
  • Teen birth rate
  • Low birth weight
  • Teen physical activity
  • Teen cigarette smoking
  • Teens overweight
  • Teen alcohol use
  • Childhood unintentional injury hospitalizations
• Prevention and Health Promotion
  • Years of healthy life expected at age 20
  • Adult cigarette smoking
  • Adult physical activity
  • Adults overweight/obese
  • Adult fruit/vegetable consumption
  • Adult binge drinking
  • Adults with diabetes
  • Adult poor mental health
Adult overweight/obese (worse than the state)
Adult physical activity (Better than the state)
Teens overweight (worse than the state)
Teen physical activity (Better than the state)

ADAMS CO.

STATE
ADAMS COUNTY SCHOOL DISTRICTS OBESITY PROJECT
BMI CALCULATOR FOR CHILD AND TEEN

- BMI Calculator for Child and Teen
- Birth Date:
- Date of Measurement:
- Sex: boy girl
  - Height, to nearest 1/8 inch:
  - Weight, to nearest 1/4 (.25) pound:

This calculator is an Excel spreadsheet that can be downloaded onto your computer.

Centers for Disease Control and Prevention
BMI – FOR – AGE WEIGHT STATUS CATEGORIES AND THE CORRESPONDING PERCENTILES

Girls: BMI for Age Growth Chart

To calculate Body Mass Index (BMI):
1. Multiply the weight in pounds by 703.
2. Divide the result from step 1 by the height in inches.
3. Divide the result from step 2 by the height in inches.

Boys: BMI for Age Growth Chart

To calculate Body Mass Index (BMI):
1. Multiply the weight in pounds by 703.
2. Divide the result from step 1 by the height in inches.
3. Divide the result from step 2 by the height in inches.
SCHOOL DISTRICTS BY COMPARISON

2009  GRADE K-10th

<table>
<thead>
<tr>
<th></th>
<th>Lind</th>
<th>Othello</th>
<th>Ritzville</th>
<th>Washtucna</th>
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<tbody>
<tr>
<td>UNDERWEIGHT</td>
<td>3%</td>
<td>2%</td>
<td>1%</td>
<td>2%</td>
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<tr>
<td>NORMAL</td>
<td>54%</td>
<td>57%</td>
<td>53%</td>
<td></td>
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<tr>
<td>OVERWEIGHT</td>
<td>25%</td>
<td>18%</td>
<td>20%</td>
<td>14%</td>
</tr>
<tr>
<td>OBESITY</td>
<td>3%</td>
<td>2%</td>
<td>1%</td>
<td>2%</td>
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</tbody>
</table>

PERCENTAGES:
- UNDERWEIGHT: Lind 3%, Othello 2%, Ritzville 1%, Washtucna 2%
- NORMAL: Lind 54%, Othello 57%, Ritzville 53%
- OVERWEIGHT: Lind 25%, Othello 18%, Ritzville 20%
- OBESITY: Lind 3%, Othello 2%, Ritzville 1%
BMI’S BY GENDER K-10

Graph showing BMI categories for males and females:
- **Underweight**
  - Male: 0.9%
  - Female: 1.4%

- **Normal**
  - Male: 46.6%
  - Female: 58.0%

- **Overweight**
  - Male: 20.6%
  - Female: 18.8%

- **Obese**
  - Male: 31.8%
  - Female: 21.8%

- **OW/OBese**
  - Male: 52.5%
  - Female: 40.6%
ADAMS COUNTY BY GRADE LEVEL

ADAMS COUNTY OVERWEIGHT OR OBESE
BY GRADE LEVEL 2009

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percent</th>
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<tbody>
<tr>
<td>Kinder</td>
<td>48.0</td>
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<tr>
<td>First Grade</td>
<td>48.5</td>
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<tr>
<td>Second Grade</td>
<td>61.2</td>
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<tr>
<td>Third Grade</td>
<td>50.2</td>
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<tr>
<td>Fourth Grade</td>
<td>60.1</td>
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<td>Fifth Grade</td>
<td>52.6</td>
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<tr>
<td>Sixth Grade</td>
<td>52.3</td>
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<tr>
<td>Seventh Grade</td>
<td>45.1</td>
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<td>Eighth Grade</td>
<td>46.9</td>
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<tr>
<td>Ninth Grade</td>
<td>41.1</td>
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<td>Tenth Grade</td>
<td>31.7</td>
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ADAMS COUNTY OVERWEIGHT OR OBESE BY GENDER AND GRADE LEVEL 2009

ADAMS COUNTY FEMALE OVERWEIGHT OR OBESE BY GRADE LEVEL 2009

ADAMS COUNTY MALE OVERWEIGHT OR OBESE BY GRADE LEVEL 2009
ADAMS COUNTY SECOND GRADE
BMI’S FOR 2009 & 2011

ADAMS COUNTY BMI's 2ND GRADE
2009

ADAMS COUNTY BMI's SECOND GRADE
2011
CONCERNS

DENTAL CARE

JUNK FOOD

BULLIES
HEALTHY SNACKS

“SMART KIDS”
FAVORITE SNACKS AND MEALS
EXERCISE AND AFTER SCHOOL FUN
HEALTHIER CHILDREN

How do we reverse trends toward obese children?

We need to take a hard look at what experts say are major factors driving higher obesity rates: poverty, too much TV viewing, lack of parks or recreation, and lack of regular medical care. Average Americans can’t do much about most of those factors, but what is under their control are their children’s activity levels and sugar consumption.
HEALTHIER CHILDREN

Time spent in front of a TV or playing video games is time not spent moving- and burning off calories. Cutting back on sugary beverages from children’s diets is also important. Too many kids are drinking nutritionally empty bombs throughout the day, contributing to weight gain and higher rates of early onset diabetes.

The News Tribune
5-14-2010
Developed Action Plan for Health Communities
Working with Nazarene Church and the Community Garden
Continuing Obesity BMI project on second graders in Adams County
Developing community coalition for Healthy Communities
QUESTIONS???