

Maryland Nutrition and Physical Activity Plan

EXECUTIVE SUMMARY

2006-2016

Working Together Today to Create a Healthier Tomorrow



FOR MORE INFORMATION OR A FULL COPY OF THE PLAN, PLEASE CONTACT:

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Executive Summary

"As a society, we can no longer afford to make poor health choices, such as being physically inactive and eating an unhealthy diet; these choices have led to a tremendous obesity epidemic. As policy makers and health professionals, we must embrace small steps toward coordinated policy and environmental changes that will help Americans live longer, better, healthier lives."

—Richard H. Carmona, MD, MPH, FACS, Vice Admiral & U.S. Surgeon General

Overweight and obesity have reached epidemic proportions nationwide and have become one of the most critical health issues of our time. Today, estimates indicate that at least 65% of adults are overweight, while 30% are obese. Moreover, the epidemic is not limited to adults. In the past 20 years, the percentage of overweight children has more than doubled and, for adolescents, tripled. Among children and adolescents ages 6 to 19, 16% are considered overweight. These trends lead many experts to predict that the current generation of children threatens to be the first in modern history to have a shorter life span than their parents' generation.

Studies show that a strong link exists between being overweight or obese and having an increased risk of death or disease. Across all populations, children, adolescents and adults who are obese are at greater risk for various health conditions, such as coronary heart disease, type-2 diabetes, cancer, asthma and arthritis. In addition, these individuals may face social stigmatization, discrimination and poor body image.

It has been estimated that if all physically inactive Americans became active, approximately \$77 billion in annual medical costs would be saved.

—Pratt, *The Physician and Sports Medicine*, 2000.

While research indicates that even a modest weight loss can reduce the risks for some chronic health conditions, it is not the only solution to the obesity problem. Many other areas need to be addressed. Factors that contribute to obesity include individual genetic predispositions, activity levels, food intake and behavioral and environmental issues. In fact, over the years, environmental changes have resulted in trends toward inactivity and poor diet which, in turn, have been a major determinant of overweight and obesity.

Physical activity, along with healthy eating habits, also plays an important role in the prevention of overweight and obesity. Despite the proven benefits of physical activity, more than 50% of adults still do not get enough physical activity to provide health benefits, and 24% are not active at all in their

leisure time. When it comes to eating healthy foods, less than one-quarter of adults eat the recommended five or more servings of fruits and vegetables each day. In addition, over the last 30 years, adults' caloric intake has increased.

As in the nation as a whole, Maryland also has experienced an increase in the rate of obesity and its risk factors. In 2004, the results from the Behavioral Risk Factor Surveillance System indicated that 58.5% of Maryland adults were overweight or obese. In addition, the survey showed that the rate of obesity for Maryland adults increased by 47% from 1995 to 2004.

THE PURPOSE OF THE PLAN

The rising trend of overweight and obesity in Maryland poses a major public health challenge. In light of this problem, Centers for Disease Control and Prevention (CDC) has awarded 28 states a nutrition and physical activity grant to address obesity and other chronic diseases. In 2003, the State of Maryland was awarded one of these grants and, as a result, has developed a strategic plan that addresses the state's obesity problem by focusing on healthy eating and physical activity. The intent of the *Maryland Nutrition and Physical Activity Plan* is to present a framework that will help Marylanders contribute to the effort to make healthy food choices and physical activity opportunities available throughout the state. This plan is the first step toward the achievement of the Maryland Nutrition and Physical Activity Program mission: to prolong the length and improve the quality of life of all Maryland citizens through healthy eating and increased physical activity.

Ending the obesity epidemic will not be easy, but we can gain encouragement from several successful precedents in other public health endeavors, such as the tobacco awareness movement. One thing is certain: solving this problem will require the input, hard work, skills, talents and perseverance of a variety of groups—including medical, nonprofit, business, academia and government organizations. While there certainly is a role for individual behavior change, population-focused prevention efforts are necessary to help decrease environmental barriers and support healthy food choices and physically active lifestyles for all Marylanders.

Meeting a Critical Need

The following statistics are only a sampling of data that illustrate the importance of the *Maryland Nutrition and Physical Activty Plan* to help the population live healthier lifestyles and reduce the burden of overweight and obesity.



- An estimated 2.3 million (58.5%) Maryland adults are overweight or obese. Of those, approximately 949,000 (24%) are obese.
- Approximately 37% of Maryland adults consumed three to four servings of fruits and vegetables a day, and about 30% consumed one to two servings.
- Despite the proven benefits of physical activity, only 49% of Maryland adults report engaging in recommended levels of physical activity.
- In Maryland alone, an estimated \$1.5 billion of adult medical expenditures are attributable to obesity, with \$368 million paid for by Medicare and \$391 million by Medicaid.

Objectives at a Glance

OVERARCHING GOALS:

- To encourage and enable the citizens of Maryland to adopt and maintain healthy eating habits throughout the lifecycle.
- To encourage and enable the citizens of Maryland to lead physically active lifestyles throughout the lifecycle.

LONG-TERM (MEASURABLE) OBJECTIVES:

Long-term objectives for the plan reflect decreased overweight/obesity prevalence, increased physical activity, decreased television viewing, increased breastfeeding initiation and duration and increased fruit and vegetable consumption.

Healthy Weight *By 2016*

- 1. Reduce the proportion of Maryland's children and youth who are overweight (BMI-for-age >95th percentile).
- **2.** Increase the proportion of Maryland adults who are at a healthy weight $(18.0 \ge BMI \le 25.0)$ from 37% to 44%.

Program Mission

The mission of the Maryland
Nutrition and Physical Activity
Program is to prolong the
length and improve the
quality of life of Maryland
citizens through healthy
eating and increased physical
activity.

Physical Activity *By 2016*

- Increase the proportion of Maryland high-school students who engage in moderate physical activity for at least 30 minutes on five or more of the previous seven days.
- **4.** Reduce the proportion of Maryland adults who engage in no leisure-time physical activity from 21% to 19%.
- 5. Increase the proportion of Maryland youth who view television two or fewer hours on a school day.
- **6.** At least maintain the proportion of Maryland adults who engage regularly, preferably daily, in moderate physical activity for at least 30 minutes a day at 34%.

Nutrition *By 2016*

- **7.** Increase the proportion of Maryland high-school students who consume five or more servings of fruits and vegetables per day.
- **8.** Increase the proportion of Maryland adults who consume five or more servings of fruits and vegetables per day from 29% to 32%.
- **9.** At least maintain the proportion of Maryland women who initiate breastfeeding at 77% and increase the proportion of Maryland women who continue to breastfeed for at least six months.

INTERMEDIATE OBJECTIVES

The intermediate objectives listed below will influence all of the long-term objectives.

Active Community Environments *By June 2011:*

- Increase the number of built and natural environment policies that address healthy eating and physical activity.
- Increase the number of healthy food options in communities by focusing on the built environment.
- Increase the number of physical activity opportunities in communities by focusing on the built and natural environment.
- Promote non-motorized transportation, public transit, pedestrian and bicycling initiatives in communities to increase physical activity opportunities.



Promote green spaces for physical activity opportunities within communities.

Business and Industry Setting *By June 2011:*

- Promote access and procurement of healthy food options in supermarkets and other businesses that sell food (i.e. grocery stores, farmers' markets, corner stores and produce stands).
- Promote development and marketing of healthy food options by the food industry.
- Increase the availability of healthy food options in restaurants.
- Increase the number of worksites with policies that support healthy eating and opportunities for physical activity.
- Increase employer awareness of the benefits that healthy eating and physical activity have on a workforce.
- Increase the levels of healthy eating among employers and employees of Maryland.
- Increase the levels of physical activity among the employers and employees of Maryland.

Families and Community *By June 2010:*

- Increase the percentage of Maryland mothers who exclusively breastfeed their babies six months and beyond from 39.7% to 50%.
- Increase from 67% to 75% the number of African-American women who initiate breastfeeding.

By June 2011:

- Increase the number of public policies that address healthy eating and physical activity opportunities, including access to both, in public places.
- Increase awareness and number of nutrition and physical activity programs that support families in the community.
- Increase and expand the number of programs for healthy eating and physical activity that are implemented and evaluated within faith-based organizations.



- Increase the number of nutrition and physical activity programs offered at parks and recreation centers, community/civic centers and senior centers.
- Increase access to healthy food choices and physical activity opportunities within communities.
- Increase community awareness and knowledge about the benefits of healthy eating and physical activity.
- Increase the number of nutrition and physical activity programs in licensed child-care centers and family child-care homes through the Child and Adult Care Food Program.

Healthcare Setting *By June 2010:*

- Ensure that healthcare professionals receive the education and tools to
 provide patients and families with knowledge and skills regarding the
 relationship between healthy eating, physical activity and the prevention
 of overweight and obesity.
- Increase the number of healthcare professionals who communicate overweight and obesity prevention messages, including breastfeeding promotion, healthy eating, increased physical activity and decreased sedentary activity in healthcare practices on a regular basis.
- Increase patient knowledge regarding the benefits of healthy eating and physical activity and
 provide patients and families with necessary skills and community resources to enable them to
 increase their healthy eating options and physical activity opportunities.
- Provide all Maryland residents access to quality, affordable health insurance.

School Community Setting *By June 2006:*

• All Maryland schools will develop, adopt and implement local school wellness policies.

By June 2010:

- Maryland schools will develop, adopt and implement policies to ensure that all pre-K to grade-12 students receive quality, daily physical education that helps to develop the knowledge, attitudes, skills, behaviors and confidence to be physically active for life and meet the Program Standards accepted by the Maryland State Board of Education listed in the Physical Education Study Group Report of 2000.
- Maryland schools will provide students in Pre-K through grade 12 with behavior-focused nutrition
 education in the curriculum that is interactive and teaches the skills they need to adopt healthy
 eating habits.
- Maryland schools will develop, adopt and implement policies to ensure that all foods and beverages available on school campuses and at school and school-related events are consistent with the Dietary Guidelines for Americans.
- Maryland schools, pre-K to grade 12, will develop, adopt and implement polices and partnerships to ensure that the school environment offers opportunities for physical activity.

By June 2011:

• Improve the Maryland preschool environment, including those that participate in the Child and Adult Food Program (CACFP), by including increased opportunities for healthy eating options and physical activity.

- Implement in all Maryland after-school programs, including the At-Risk After-School Snack Program, an environment that provides opportunities for healthy meals, snacks, beverages and physical activity.
- Improve the healthy eating and physical activity environment in Maryland summer food-service programs.
- Maryland schools of higher education (community colleges, four-year colleges and universities)
 will provide healthy food options and physical activity opportunities on school campuses to assist
 students, faculty and staff to develop the knowledge, attitudes, skills and behaviors to adopt,
 maintain and enjoy a healthy lifestyle.

Surveillance and Evaluation *By June 2011:*

- Broadly disseminate surveillance findings for overweight and obesity, healthy eating, physical
 activity and related behaviors so that policies can be developed and nutrition and physical activity
 programs implemented. This information will be needed to guide future activities in all chapters
 of the plan.
- Expand access to and understanding of the databases used for analysis of adult/youth overweight
 and obesity, its related behavior and health-conditions surveillance in Maryland. Such access will
 better meet the information needs of communities, program planners, policy makers and
 researchers.
- Develop, maintain or enhance data systems to ensure accurate, timely and complete information needed to monitor NPA outcomes, related behaviors and health conditions.

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