Georgia Approach to Addressing Obesity Prevention

Presentation to: Chronic Disease University
Presented by: Esther Mune, PhD, MPH
Date: April 11, 2018
CHES/MCHES Competencies

• Competency 2.1.1: Identify priority populations, partners, and other stakeholders

• Competency 7.3.6: Develop policies to promote health using evidence-based findings

• Competency 7.3.10: Engage in legislative advocacy
Identify the Problem
Where Are We Now?

2016
Percent of adults aged 18 years and older who have obesity†
View by: Total

† Obese is defined as body mass index (BMI) ≥ 30.0; BMI was calculated from self-reported weight and height (weight [kg]/height [m²]). Respondents reporting weight < 50 pounds or ≥ 650 pounds; height < 3 feet or ≥ 8 feet; or BMI: < 12 or ≥ 100 were excluded. Pregnant respondents were also excluded.
Obese Adults in Georgia

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Adult Obesity 2016 Data

Current adult obesity rate (2016): 31.4%

Rank among states (2016): 20/51

Obesity rate by age (2016):
- 18-25: 17.3%
- 26-44: 31.7%
- 45-64: 37.3%
- 65+: 31.0%

Obesity rate by race (2016):
- White: 28.9%
- Black: 37.7%
- Latino: 28.4%

Obesity rate by gender (2012):
- Men: 27.7%
- Women: 30.6%

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Why Do We Care?

**Diabetes**
- Current adult diabetes rate (2016): 12.1%
- Rank among states (2016): 8th of 51
- Diabetes cases in 2010: 754,593
- Projected cases of diabetes in 2030 at current pace: 1,119,425

**Hypertension**
- Current adult hypertension rate (2015): 36.2%
- Rank among states (2015): 9th of 51
- Hypertension cases in 2010: 1,649,642
- Projected cases of hypertension in 2030 at current pace: 2,285,570

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Projected Cases Of Obesity-related Health Problems

<table>
<thead>
<tr>
<th></th>
<th>Heart Disease</th>
<th>Arthritis</th>
<th>Obesity-Related Cancer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart disease cases in 2010</td>
<td>465,535</td>
<td>1,707,454</td>
<td>126,027</td>
</tr>
<tr>
<td>Projected cases of heart disease in 2030</td>
<td>2,260,639</td>
<td>1,523,222</td>
<td>324,982</td>
</tr>
</tbody>
</table>

Sources: Current diabetes (2016) and hypertension (2015) rates are from The State of Obesity 2017 [PDF]. 2010 diabetes, hypertension, heart disease, arthritis and obesity-related cancer numbers and projected cases of obesity-related health problems related are from F as in Fat 2012 [PDF].
Strategic Approaches

• Policy Systems and Environmental Change
• Approaches seek to go beyond programming
• Use the systems that create the structures in which we:
  – live
  – work
  – learn
  – eat
  – play
  – pray
Social Ecological Model

- **Public Policy**
  (State legislators, top departmental officials)

- **Community**
  (County council members, planning commissioners)

- **Institutional/Organizational**
  (Transport, planning, education professionals)

- **Interpersonal**
  (Advocacy groups)

- **Individuals**
  (Community members, developers)
Nutrition and Physical Activity Programs

Reducing childhood and adult obesity by focusing on healthy environments in:

- Worksites
- School Health
- Early Childcare Education (ECEs) Environments
- Community
Worksites
Georgia Working on Health Initiative

- Developed in 2016 to promote a healthier workforce, improve public health programs and promote self-management of chronic conditions
- Businesses “take the pledge” to adopt wellness policies in 3 focus areas
  - Tobacco & Smoke Free
  - Eat.Live.Healthy
  - Breastfeeding Friendly
- Resources to support efforts
Work Healthy Georgia Toolkit

• Guides worksites in developing or improving worksite health policies and programs
• Provides step-by-step instructions on developing health-related policies and programs
• Provides methods of engaging your employees throughout policy development and implementation
• Provides sample language for worksite health policies
• Provides examples of health programs

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Georgia Working on Health Infographic

- A visual image used to represent data on all 3 Georgia Working on Health programs
- A map and chart used to represent information on related risk factors in Georgia

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Process to Join

1. Take the online pledge to join the network and adopt workplace wellness policies
   - https://dph.georgia.gov/working-on-health

2. Display window clings to announce your commitment to a healthier workplace

3. Use resources provided by DPH to develop worksite wellness policies and programs

4. Share policy and program successes with DPH and other network members
Pledges by Focus Areas

* Due to pledges in multiple areas, total pledges will not equal the sum of pledges from the three focus areas.
# Window Clings for Focus Areas

<table>
<thead>
<tr>
<th>Cling Type</th>
<th>Description</th>
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<tbody>
<tr>
<td>Tobacco Free Workplace</td>
<td>Support a tobacco free environment</td>
</tr>
<tr>
<td>Eat Live Healthy</td>
<td>Support employees in selecting healthier food options and leading physically active lifestyles</td>
</tr>
<tr>
<td>Breastfeeding Friendly</td>
<td>Support a mother’s need to feed her baby while at work and while “out and about”</td>
</tr>
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## Benefits to Join

<table>
<thead>
<tr>
<th>After Verbal Commitment</th>
<th>After Taking the Online Pledge</th>
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<tbody>
<tr>
<td>✓ Window clings for the three worksite wellness focus areas</td>
<td>✓ Membership in the Georgia Working on Health Network</td>
</tr>
<tr>
<td>✓ Thank you letter from the DPH Chronic Disease Prevention Director</td>
<td>✓ Welcome letter and email</td>
</tr>
<tr>
<td></td>
<td>✓ <em>Work Healthy Georgia</em> toolkit</td>
</tr>
<tr>
<td></td>
<td>✓ Sample worksite wellness policies, adaptable to your worksite</td>
</tr>
<tr>
<td></td>
<td>✓ Bimonthly newsletter with resources and success stories</td>
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</table>
DPH Role

- Provide Toolkit
- Provide technical assistance
- Share success stories
- Use newsletter for breastfeeding information
- Provide resources
DPH Newsletter
Spotlight on Success

- Breastfeeding Pledges
  - 73 organizations have pledged
  - 68 have pledged to be breastfeeding friendly
  - Breastfeeding survey: Survey implementation is in progress
School Health

COORDINATED SCHOOL HEALTH

Physical Education

Health Education

Health Services

Nutrition Services

Healthy School Environment

Family & Community Involvement

Counseling, Psychological & Social Services

Health Promotions for Staff
Strategic Approaches

Use a Coordinated Approach to Develop, Implement, and Evaluate Healthy Eating and Physical Activity Policies and Practices by:

• Coordinating healthy eating and physical activity policies and practices through a school health council and school health coordinator

• Assessing healthy eating and physical activity policies and practices

• Using a systematic approach to develop, implement, and monitor healthy eating and physical activity policies

• Evaluating healthy eating and physical activity policies and practices
School Health Summits

The main goals of the school health summits are to:

- Discuss the importance of and strategies for creating a positive healthy school climate
- Explore relevant school health policies and programs
- Share nutrition and physical activity resources from our state agencies and partners
- Provide peer sharing opportunities for schools to learn from each other
Model Policy Language

- Model FitnessGram Policy for School Districts in Georgia
- Model Elementary Recess School Policy for School Districts in Georgia
- Model Food and Beverage Marketing School Policy for School Districts in Georgia
- Model Free Water Access School Policy for School Districts in Georgia
- Model Healthy Eating Learning Policy for School Districts in Georgia
- Model Nutrition School Policy for School Districts in Georgia
- Model Physical Activity School Policy for School Districts in Georgia
Free, Clean & Safe Water Access Policy

• The Healthy, Hunger-Free Kids Act of 2010, federal law requires schools to make fresh drinking water available during mealtimes in school food service areas at no cost to students.

• The 2010 reauthorization of the Child Nutrition Act, schools participating in federal meal programs are required to make water available during mealtimes at no cost to students.

• USDA requires schools to make water available during the National School Lunch Program meal service.

• The School Breakfast Program (SBP) requires water be provided during breakfast.
Early Childcare and Education Settings
Growing Fit

• Developed in 2013 to decrease childhood obesity by promoting nutrition and physical activity

• Target: Early care and education (ECE) environments
  – Growing Fit policy training
  – Growing Fit kit

• Resources and TA provided to support efforts
Policy Assessment

• A wellness policy is a written document with specific approaches that are followed in the facility to support a healthy environment.

• Used to assess the early learning environment’s current policies and practices:
  – Consist of indicators such as nutrition education, scheduled physical activity and screen time.

• Allows centers to build and plan for improvement.
Policy Assessment continued

<table>
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<tr>
<th>Nutrition and Physical Activity Assessment</th>
<th>Domain Nutrition</th>
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<tr>
<td>Indicator 1: Breastfeeding and Infant Feeding</td>
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<tr>
<td>1.1 A designated area for lactating mothers to breastfeed is:</td>
<td>□ Not available □ Available but lacks privacy, seating or electrical outlet □ Is private, has seating, and has an electrical outlet</td>
</tr>
<tr>
<td>1.2 Culturally appropriate breastfeeding support materials, like pictures, posters, brochures, pamphlets, and other resources (not including those supplied by commercial entities, like manufacturers of infant formula)</td>
<td>□ Not available □ Limited, but available in 1 or 2 areas or upon request □ Available and displayed in several areas of the facility</td>
</tr>
<tr>
<td>1.3 Our facility’s breastfeeding-friendly policy is:</td>
<td>□ Not available or not written down □ Written down and usually followed □ Written down, followed, and shared with pregnant mothers, and families with infants</td>
</tr>
<tr>
<td>1.4 Infants are encouraged to finish their bottle after showing signs of fullness:</td>
<td>□ Every day □ Some days □ Rarely or never</td>
</tr>
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| Indicator 2: Eating Environment |                   |
| 2.1 Children are encouraged to eat more than they want, and are asked to "clean their plate" or "make a happy plate": | □ Every day □ Some days □ Rarely or never |
| 2.2 Preschoolers are actively involved in mealtime activities, such as setting and cleaning the table: | □ Rarely or never □ Some days □ Every day |
| 2.3 For preschoolers, food is served family-style, and children serve themselves: | □ Rarely or never □ Some days □ Every day |
| 2.4 Caregivers talk informally about healthy foods during meals, and reinforce children’s internal cues of hunger and fullness: | □ Rarely or never □ Some days □ Every day |
ECE Policy Development

Five Steps

1. Form team
2. Complete Self Assessment
3. Prioritize and Build Plan
4. Create Policy
5. Carry out and Evaluate

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Training Day Content

• Welcome and Introductions
• Making the Case
• Food Demonstration
• ABC’s of Wellness Policies
• Physical Activity Fun
• Wellness Policies Work
• Next Steps
• Closing/Evaluation
## Georgia Growing Fit Follow-Up

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<tr>
<th>Timeframe</th>
<th>Technical Assistance (TA) Provider Role</th>
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| 2 weeks after training  | Contact all ECE’s 2 weeks after training  
  • Find out if there are questions about the training materials  
  • Follow Growing Fit script  
  • Record each call in TA log spreadsheet                                                                                                                                                                      |
| 6 weeks after training  | Contact ECE’s on based on their established follow-up date and time  
  • Follow Growing Fit script  
  • Record each call in TA log spreadsheet                                                                                                                                                                      |
| 6 months after training | Contact all ECE’s from the Growing Fit training  
  • Follow the 6 month Growing Fit evaluation document  
  • Have all centers complete the 6-month post-test  
  • Record each call in TA log spreadsheet  
  • Collect evaluations and disseminate information                                                                                                                                                        |
Integration into QRIS

• Quality Rating & Improvement System (QRIS)
  – Includes nutrition & physical activity requirements
• Growing Fit policy assessment tool is aligned with Quality Rated Standard 2
  – Policy development can be used to move towards Quality Rated standards
Growing Fit Reach & Evaluation

• A total of 264 early childcare and education leaders from 106 early childcare education centers in Georgia have been trained on wellness policies.
• All trained educators completed a pre and post-test assessment of their system, demonstrating improvements.
• The Growing Fit wellness policy trainings have had an impact on more than 7,891 children in Georgia.
Growing Fit Success

• Year 4 North Georgia Public Health District
  – Received 21 policies from 4 out of 7 centers

I have been doing this for 23 years now, and sometimes I find myself needing motivation. I did receive it in this class. I have been trying new recipes with my little ones, and we are making memories. My new goal for next year is to grow a very small garden with my little ones. I have learned there are ways of getting those veggies in on our little picky eaters.

- Dawn Bradley’s Learning Center
Wrap-up/Conclusion
Questions
Citations

https://dph.georgia.gov/
https://stateofobesity.org/states/ga
https://www.cdc.gov/healthyschools/npao/strategies.htm
https://qualityrated.decal.ga.gov/
https://gonapsacc.org/about-nap-sacc/research-evidence
References & Contact

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