The Physical Activity, Nutrition, and Obesity Prevention Program



The Advancing Healthy Lifestyles Initiative: Community Capacity Building

Physical Activity, Nutrition, and Obesity Prevention Program

State of Delaware, Division of Public Health, Bureau of Health Promotion

April 19, 2021

Webinar housekeeping

- / To avoid background noise, all participants are muted upon entry
- / Participants on audio; presenters will be on video
- / We will take questions at the end. To ask a question, use the chat window in the bottom right corner
- / We will record the meeting and disseminate
- / If you having technical issues, please send the event producer/host a private message through the chat.







Webinar goals

- / Describe the burden of chronic disease risks among Delawareans and impact of COVID-19 pandemic
- / Highlight the Physical Activity Nutrition and Obesity Prevention (PANO) Program strategy
- / Introduce the Advancing Healthy Lifestyles Initiative





Icebreaker: Who is in our community?

/ Poll questions

- 1. How would you describe the type of agency or organization where you work?
- 2. How familiar are you with PANO's work and activities?





The Physical Activity, Nutrition and Obesity Prevention Program (PANO): Mission

/ To provide goals and strategies for government, media, communities, health care providers, schools, and worksites to decrease overweight and obesity in Delaware











The PANO program: Strategy

- / Create healthier individuals and communities across multiple initiatives
- / Build capacity to address four targets





PANO prioritizes advancing health equity

Create programming that is:

- Targeted
- Equitable
- Sustainable
- Will yield improved long-term health impacts in the state



Source: Healthy People 2030, US Department of Health and Human Services, Office of Disease Prevention and Health Promotion



Social determinants influence obesity and COVID-19 risk

- / Social determinants increase risk of obesity and COVID-19
- COVID-19 restrictions have exacerbated obesity risk
 - Economic instability and food insecurity
 - Limit opportunities for physical activity



Source: Belanger et al. New England Journal of Medicine, 2020.



State and National Context for PANO's Work





How healthy is Delaware relative to the U.S.?

/ Delaware ranks:

- 21st for nutrition and physical activity
- 35th for obesity
- 36th for preventable hospitalizations



Source: America's Health Rankings Annual Report 2020.



PANO: Obesity is a national health concern

- / High prevalence of obesity across the U.S.
- / Obesity is associated with several chronic conditions
 - Diabetes
 - Heart disease
 - Stroke
 - Some types of cancer



Source: Centers for Disease Control and Prevention, BRFSS Prevalence & Trends Data, 2019.



Racial/ethnic disparities in adult obesity in U.S. and Delaware

Race	U.S.	Delaware
Non-Hispanic Black	40%	38%
Hispanic/Latinx	34%	37%
Non-Hispanic White	32%	34%

Source: Centers for Disease Control and Prevention, BRFSS Prevalence & Trends Data, 2019; Delaware Health and Social Services, Division of Public Health, BRFSS 2019.



High prevalence of inactivity and unhealthy diet in U.S. and Delaware

- / Physical activity and dietary differences observed by race/ethnicity
- Social determinants influence opportunities for healthy eating and physical activity





PANO: Physical activity

- About half of all Americans meet physical activity recommendations
- / Among Delaware residents:
 - Less than half get the recommended level of physical activity
 - About one quarter did not participate in any physical activity in the prior month



Source: Centers for Disease Control and Prevention, BRFSS Prevalence & Trends Data, 2019.



Racial/ethnic disparities in physical activity

Percentage of Delaware adults who do <u>not</u> participate in recommended levels of physical activity





Source: Centers for Disease Control and Prevention, BRFSS Prevalence & Trends Data, 2019.



PANO: Food security and nutrition

/ Food insecurity: limited access to sufficient nutritious food

/ In Delaware,

- About 10 percent of households are likely to be food insecure
- During COVID-19, estimated 50,000 more food insecure



Source: USDA, Household Food Security in the United States, 2005; Food Bank of Delaware, 2021



Racial/ethnic disparities in access to healthy food

Percentage of Delaware residents who consume less than one vegetable per day





Source: Centers for Disease Control and Prevention, BRFSS Prevalence & Trends Data, 2019.



Impact of COVID-19 on social determinants of health

- / Pandemic has had detrimental effect on vulnerable populations
- / Has led to instability in food access, economic resources, and housing
- / Highlighted and exacerbated social inequalities in health



Source: Belanger et al. New England Journal of Medicine, 2020.



Food insecurity before and during COVID-19



Source: Morales et al. Journal of Racial and Ethnic Health Disparities, 2020.

/ For all racial/ethnic groups, at least 25% more households were food insecure during COVID-19 than the year before

Economic instability during COVID-19



Source: Kaiser Family Foundation



Housing instability during COVID-19

EVICTION RISK BY STATE										
	Number of Households at Risk of Eviction			Number of People at Risk of Eviction			Percentage of Households at Risk			
Total	12,604,000	,	17,330,000	28,990,273	,	39,865,000	29%		43%	
Alabama	222,000		246,000	511,000		566,000	37%		48%	
Alaska	18,000		28,000	41,000		64,000	20%		35%	
Arizona	204,000		335,000	470,000		771,000	22%		39%	
Arkansas	80,000		139,000	184,000		320,000	20%		39%	
California	1,804,000		2,345,000	4,149,000		5,394,000	31%		42%	
Colorado	190,000	•	259,000	436,000		596,000	25%		36%	
Connecticut	154,000		203,000	354,000		467,000	33%		45%	
Delaware	28,000		40,000	63,000	•	92,000	26%		40%	
District of Columbia	51,000		57,000	118,000		131,000	31%		37%	
Florida	818,000		1,110,000	1,882,000		2,553,000	31%		45%	

/ 28,000-40,000 renting households at risk of eviction in Delaware

/ 26-40% of renting
households at risk

Source: National Low Income Housing Coalition, August 2020



Racial/ethnic minority populations are disproportionally impacted by COVID-19



Racial/ethnic minority populations are disproportionally impacted by COVID-19



Racial/ethnic minority populations are disproportionally impacted by COVID-19



Population size and COVID-19 incidence in U.S. and Delaware, March 2021

Disparities contributing to flu outbreak in 2008



Source: Blumenshine et al. Emerging Infectious Diseases, 2008.



PANO's Advancing Healthy Lifestyles Initiative



Goal: promote healthy lifestyles and improve health outcomes for all Delawareans

- / Build a transformed society and facilitator of the work, now and beyond the current health crisis
- Meet the needs of
 Delaware's population
 across the life course





Launching equity-driven approach in the context of COVID-19

- / Programming is targeted, equitable, and sustainable
- / Pillars support policy, systems, and environmental change





Advancing Healthy Lifestyles strategy





Policies, systems, and environmental change

/ Go beyond programming into systems that create the structures in which we work, live, and play



Policies: changes at the legislative or organizational level



Systems: change made to the rules within an organization



Environment: changes made to the physical, social, and economic conditions



Advancing health equity

/ DPH vision to work toward "health equity for all Delawareans, where everyone will achieve their full health potential"



Attainment of highest level of health for all people



Draw attention to the need for health equity, access to and quality of resources needed for health



Cross-sector collaboration

/ Collaborate across diverse sectors: health care, work sites, educational institutions and community





Use action teams and learning collaborative



Use of dynamic and innovative, evidencebased models

/ Use frameworks and tools that leverage evidence

- Action teams
- Learning collaboratives
- Workplace wellness plans

/ Implement evidence-based models

- Implement interventions recommended by Healthy Lifestyles Subcommittee
- Tailored to settings or "pillars" of the Advancing Healthy Lifestyle initiative



Advancing Healthy Lifestyles pillars







Action and strategic planning

/ Leverage recommendations of the Healthy Lifestyles Subcommittee

- Action plan (June 2021)
- Engage stakeholders
- Equity-focused approach

/ 5-year PANO strategic plan





Coordinated school health and wellness

Strategies:

- / Convene education stakeholders
- / Prioritize schools with greatest needs
- / Summer/Fall 2021: school action teams; mini-grants

Outcomes:

- / Healthy eating and healthy beverage consumption
- Food service guidelines/nutrition standards in schools
- Physical education and activity in early care and education
- Population health and wellness programs in schools



Workplace/employee wellness

Strategies

- Formal workplace wellness program infrastructure for state employers
- / Infrastructure for nonstate employers

 Strengthened breastfeeding supports in the workplace

Outcomes

- Healthy eating and beverage consumption across all settings
- / Health and wellness programs/platforms in worksites
- Access to breastfeeding friendly environments







Community Capacity Building



Next steps for community capacity building

- / Provide support for Healthy Lifestyle Subcommittee recommendations, such as:
 - Enhance physical activity in schools
 - Study sugar sweetened beverages
 - Corner store initiative, including WIC supports
 - SNAP-Ed programming





Healthy Schools Toolkit for asthma, tobacco prevention

Approach:

- / Develop Healthy Schools Toolkit with educational materials on lung health and tobacco education
- / Work with schools on asthma management plans, such as ALA's Asthma Basics
- / Identify equity-focused approach and metrics to measure progress

Outcomes:

- / Improved knowledge of asthma and asthma management
- / Reduction in student tobacco use





Improve community access to healthy foods

Approach:

- / Healthy retail initiative
- / Engage with community to identify strategies to improve access to healthy foods in retail and agricultural settings
- Communities include Dover, Harrington, and Seaford

Outcome:

/ Improved access to healthy foods for lowincome individuals





Improve physical fitness and gross motor skills

Approach:

- Build strength, build confidence, and improving coordination through swimming and creative play
- / Create a safe environment for individuals with developmental delays and disorders to engage in aquatic activities
- / Carefully monitor each individual's progression towards mastery of water safety skills

Outcome:

Improved access to occupational health and physical activity to individuals with development delays and

disorders







Mathematica's role

/ Provide technical assistance to partners, including:

- Developing an action plan
- Creating a theory of change for planned intervention
- Applying equity focus to implementation and evaluation



Discussion Questions

/ What do you think are effective PSE strategies or interventions to engage additional community partners in order to sustain longterm outcomes around health and wellness?

/ What suggestions do you have around delivering culturally responsive health promotion and prevention that will contribute to eliminating health disparities within PANO priority areas?



Last word: PANO

/ Upcoming learning sessions:

- Culture of Health
- Promoting Equity for Health Now
- Valuing Voice in Health Promotion
- Evaluation Practices That Fit

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Thank you!

