

HIGH OBESITY PROGRAMS

Obesity is a major health problem on a national level, but certain areas in the United States experience a much higher burden of the disease. The Centers for Disease Control and Prevention's (CDC) Division of Nutrition, Physical Activity, and Obesity (DNPAO) piloted the High Obesity Program in 2014 to address the high burden of obesity in select areas using environmental approaches and to help reduce adverse health outcomes such as diabetes, heart disease, hypertension, and some cancers.

The High Obesity Program funds land grant universities in states with some of the highest obesity areas of the country, specifically, those with counties where more than 40% of the adult population has obesity. Grantees collaborate with existing cooperative extension and outreach services at the county level in their states to develop obesity solutions.

Grantees put into action a set of evidence-based strategies in the community setting. Activities include the following:

- Convene partners to assess community assets and needs and leverage resources.

- Provide training, technical assistance, and support for program development, implementation, and evaluation.
- Evaluate and monitor progress on program implementation and assessing program effectiveness.
- Translate and communicate evaluation results for stakeholders, decision makers, partners, funders, and the public.

This profile features information on select variables of the high obesity counties included in this project as well as select information on obesity, physical activity, and environmental supports for physical activity and healthy eating.

CDC's Division of Nutrition, Physical Activity, and Obesity works with state and local partners to increase healthy food choices and connect people to places and opportunities where they can be regularly active. CDC provides implementation and evaluation guidance, technical assistance, training, surveillance and applied research. CDC also provides partnership development to improve dietary quality, increase physical activity, and reduce obesity across multiple settings.

PROFILE OF HIGH OBESITY AREAS IN: INDIANA

Purdue University is working with extension staff in Jackson and Lawrence Counties. Both counties are located in the southern part of the state. Activities include working on wellness policies in schools and healthy concession stands in Jackson County. In Lawrence County, community gardens are being developed as sources for both fresh fruits and vegetables and for educational purposes. There are plans to increase opportunities for physical activity by using existing spaces, such as fairgrounds, the Muscatatuck National Wildlife Refuge in Jackson County, and private property in both counties as areas for recreation and exercise by connecting them to existing trails.



Centers for Disease Control and Prevention
National Center for Chronic Disease Prevention and Health Promotion

Table 1. Estimated Adult Obesity Prevalence

County	County population ¹	County Adult Obesity Prevalence ²	Percentage of Population Living in Rural Areas ³
Jackson	42,376	44.7%	43.7%
Lawrence	46,134	43.0%	58.4%

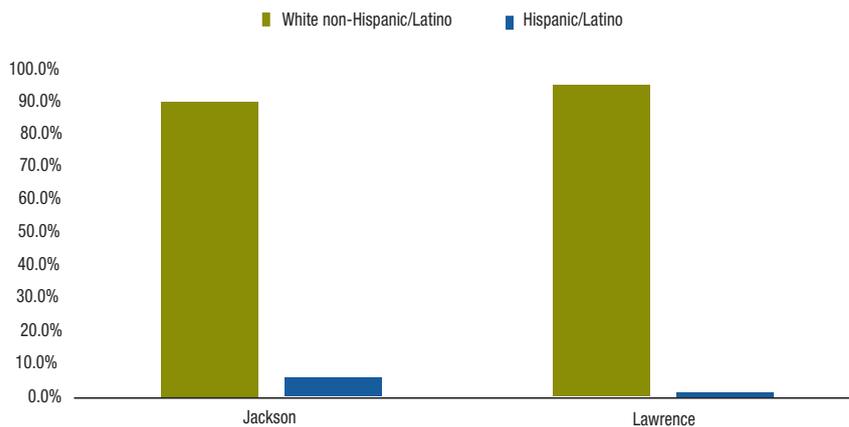
- The adult obesity prevalence ranges was 43.0% for Lawrence County and 44.7% for Jackson County compared with the overall state obesity prevalence of 31.4% according to the 2012 Behavioral Risk Factor and Surveillance System.⁴
- Although obesity prevalence for children is not available for these counties, children in rural areas are 25% more likely to be overweight or have obesity than children in metropolitan areas.⁵
- Between 43.7% and 58.4% of the populations of these two counties live in rural areas.

Table 2. Poverty Levels

County	Percentage of County Population Below Poverty Line ⁶	Percentage of Children Below Poverty Line ⁶
Jackson	14.8%	18.7%
Lawrence	12.9%	18.5%

- Poverty levels are significant social determinants of health.⁷
- In these counties, the percentage of children younger than 18 years living below the poverty line was about 19%.

Figure 1. Selected Racial/Ethnic Demographics in High Obesity Counties in Indiana¹



- Jackson and Lawrence counties are predominantly white. The next highest population percentage is of Hispanic/Latino descent.

Table 3. Physical Activity

County	Percentage of Adults Physically Inactive ⁸	Percentage of Population with Access to Physical Activity ⁹
Jackson	30%	70%
Lawrence	30%	74%

- In both counties, 30% of adults aged 20 years or older self-report no leisure-time physical activity in 2012 compared with overall state prevalence of 26%.
- An estimated 70%–74% of the population in these counties has reasonable^a access to parks, recreational areas, or community places for physical activity.

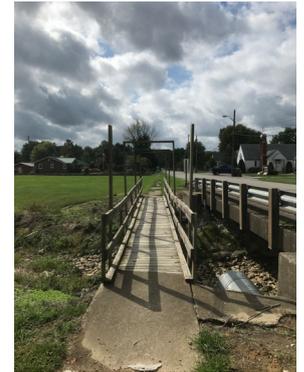
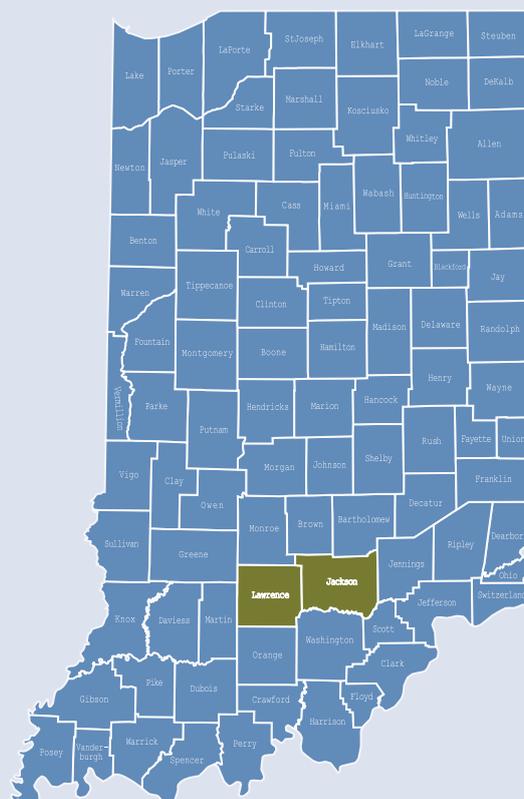


Table 4. Food Access and Insecurity

County	Percentage of Low Income ^b Population with Limited Access to Healthy Foods ¹⁰	Percentage of Population with Food Insecurity ¹¹	Percentage of Children Eligible for Free or Reduced-Price Lunch ¹²
Jackson	5%	13%	53.0%
Lawrence	4%	16%	51.4%

- Between 13% and 16% of the population experience food insecurity in 2012.
- About 51.4%–53.0% of children enrolled in public schools are eligible for free or reduced-price lunch in 2014.

Figure 2. High Obesity Prevention Programs in Indiana



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12. US Department of Agriculture. USDA Food Atlas. Students Eligible for Free Lunch (%) and Students Eligible for Reduced-Price Lunch (%), 2014 website. <https://www.ers.usda.gov/data-products/food-environment-atlas/go-to-the-atlas.aspx>. Accessed March 13, 2018.

Notes:

^aReasonable access is defined as individuals who reside in a census block within a half mile of a park or in urban census tracts; reside within one mile of a recreational facility or in rural census tracts, or reside within 3 miles of a recreational facility.

^bLow income is an annual family income less than or equal to 200% of the federal poverty threshold for family size.