

PROGRAMS TO REDUCE OBESITY IN HIGH OBESITY AREAS

Obesity is a major health problem on a national level, but it is particularly persistent in certain areas. These places are the focus of the Centers for Disease Control and Prevention (CDC)'s Programs to Reduce Obesity in High Obesity Areas (High Obesity Program). CDC's Division of Nutrition, Physical Activity and Obesity (DNPAO) began the program in 2014 to combat the obesity problem using environmental approaches and help reduce adverse health outcomes such as diabetes, heart disease, hypertension, and some cancers.

The High Obesity Program funds land grant universities and colleges in states with some of the highest obesity areas of the country, specifically, those with counties where more than 40% of the adult population is obese. Grantees collaborate with existing cooperative extension and outreach services at the county level in their states to develop obesity solutions. They put into action a set of evidence-based strategies in early care and education (ECE) centers or the community setting. Activities include the following:

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

- Providing training, technical assistance, and support for program development, implementation, and evaluation.
- Evaluating and monitoring progress on program implementation and assessing program effectiveness.
- Translating and communicating 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 diet.

CDC's Division of Nutrition, Physical Activity, and Obesity (DNPAO) works to maintain health and prevent chronic disease by promoting healthy eating and active living for Americans of all ages. DNPAO works with state and local partners on community solutions to help increase healthy food choices and connect people to places and opportunities where they can be regularly active. DNPAO provides implementation and evaluation guidance, technical assistance, training, surveillance and applied research, and partnership development to improve dietary quality, increase physical activity, and reduce obesity across multiple settings.

Profile of High Obesity Areas in: SOUTH DAKOTA

South Dakota State University (SDSU) is addressing community access to healthy food, safe places for physical activity, and increased active transportation.

They are working with the SDSU Extension, the South Dakota Department of Health Chronic Disease Branch, Indian Health Services—Denver regional office, Seamless Technology for Access by Rural schools (STAR)-Mountain Plains, and USDA StrikeForce Initiative for Rural Growth and Opportunity to connect with community wellness coalitions. These multi-sector partnerships will train and build community capacity for the following activities: 1) Building community and school gardens; 2) Promoting farmers' markets and other healthier retail venues; 3) Planning and implementing improvement of pedestrian and bicycle trails; and 4) Sharing use of community spaces for physical activity and other events and supporting American Indian/Alaska Native games (in reservation communities).



National Center for Chronic Disease Prevention and Health Promotion
Division of Nutrition, Physical Activity, & Obesity



County	County population ¹	County adult obesity prevalence ²	% Population living in rural areas ³
Bennett	3,431	41.2%	100.0%
Buffalo	1,912	41.6%	100.0%
Campbell	1,466	40.6%	100.0%
Corson	4,050	45.5%	100.0%
Union	14,399	41.2%	61.4%
Ziebach	2,801	44.6%	73.5%

County	% County population below poverty line ⁵	% Children below poverty line ⁵
Bennett	39.3%	51.0%
Buffalo	35.6%	44.5%
Campbell	14.2%	19.9%
Corson	44.2%	53.9%
Union	4.4%	3.2%
Ziebach	42.3%	54.3%

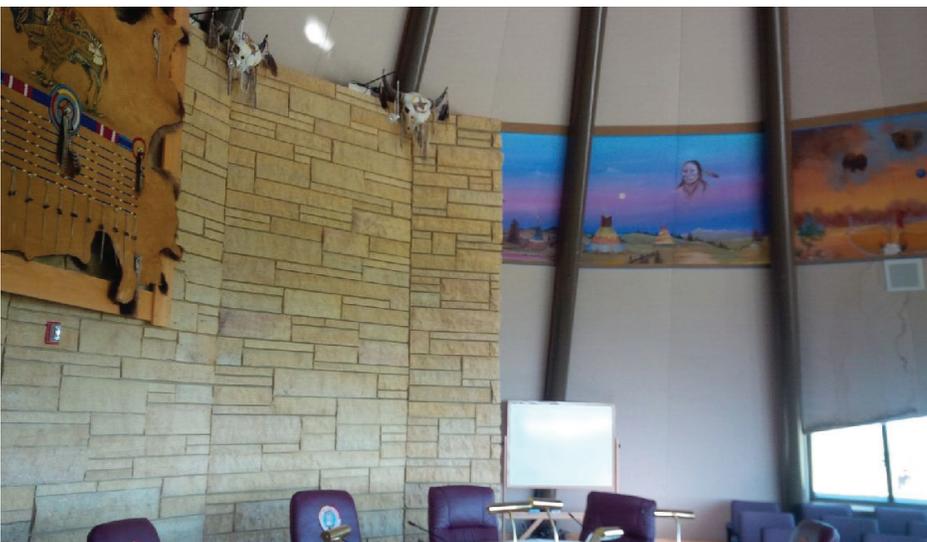
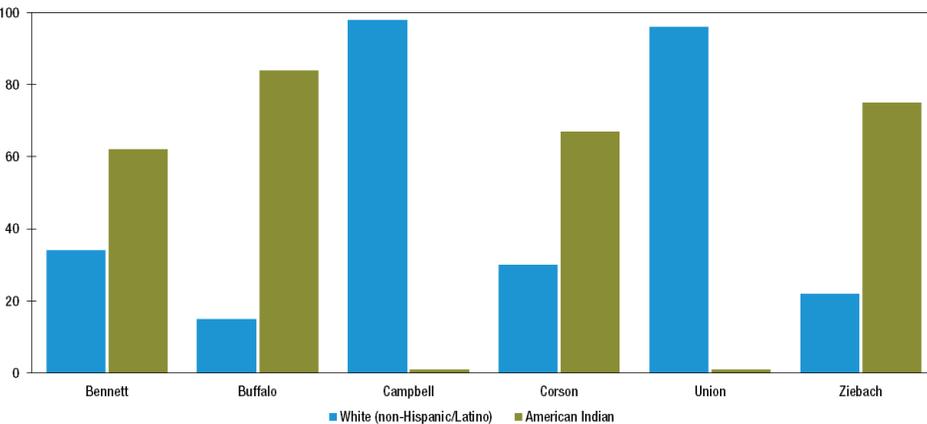


Table 1. Estimated Adult Obesity Prevalence

- Ranges 40.6% to 45.5%. The overall state adult obesity prevalence is 28.1%.²
- Children in rural areas are 25% more likely to be overweight or obese than children in metropolitan areas.⁴
- These 6 counties are between 61.4% and 100% rural.

Table 2. Poverty Levels

Poverty levels are significant social determinants of health.⁶

- Bennett, Buffalo, Corson and Ziebach counties are classified as both “persistent poverty”^a and “persistent child poverty”^a counties by the US Census Bureau.

Figure 1: Selected Racial/Ethnic Demographics in High Obesity Counties in South Dakota⁵

Four of these counties include large American Indian populations. In general, obesity prevalence is higher among American Indian and Alaska Native youth and adults than in any other racial/ethnic groups and continues to rise.⁴

- Bennett County includes part of the Pine Ridge Indian Reservation.
- Buffalo County includes the Crow Creek Indian Reservation inhabited by the Crow Creek Sioux Tribe.
- Corson County is located within the Standing Rock Indian Reservation, which also includes Ziebach County.
- Most of Ziebach County is located within the Cheyenne River Indian Reservation.

County	% Adults physically inactive ⁶	% Population with access to physical activity ⁶
Bennett	30%	3%
Buffalo	38%	*
Campbell	35%	25%
Corson	33%	2%
Union	28%	40%
Ziebach	33%	35%

* Data not available

Table 3. Physical Activity

- 28%–38% of adults aged 20 years or older in these counties self-report no leisure-time physical activity.
- In the five counties with available data, between 2% and 41% of the population have “reasonable”^b access to parks, recreational areas, or community places for physical activity.

County	% Low income ^c population with limited access to healthy foods ³	% Population with food insecurity ³	% Children eligible for free or reduced price lunch ⁷
Bennett	49%	18%	61.5%
Buffalo	12%	24%	*
Campbell	28%	11%	31.8%
Corson	63%	21%	97.1%
Union	3%	10%	21.5%
Ziebach	46%	20%	96.9%

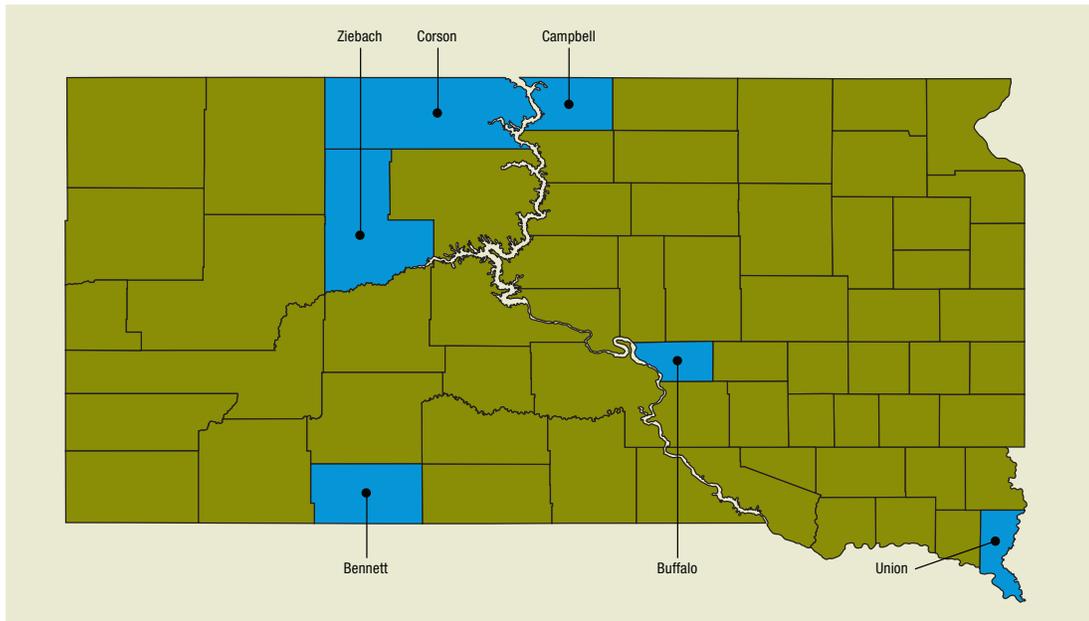
* Data not available

Table 4. Food Access & Insecurity

- Across the counties between 10% and 24% of the population experience food insecurity.
- In the 5 counties with available data, between 21.5% and 97.1% of children enrolled in public schools are eligible for free or reduced price lunch.



Figure 2. High Obesity Counties of South Dakota



References:

1. US Census Bureau. 2010 Census website. http://factfinder.census.gov/faces/nav/jsf/pages/community_facts.xhtml. Accessed December 1, 2015.
2. Centers for Disease Control and Prevention “Request for Proposal.” In: *Programs to Reduce Obesity in High Obesity Areas (CDC-RFA-DP14-1416)*, pages 5–6. Atlanta, GA: US Department of Health and Human Services; 2012.
3. Robert Wood Johnson Foundation, University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps website. <http://www.countyhealthrankings.org/app/alabama/2014/measure/outcomes/1/map>. Accessed December 1, 2015.
4. Lutfiyya MN, Lipsky M.S., Wisdom-Behounek J, Inpanbutr-Martinkus M. Is rural residency a risk factor for overweight and obesity for U.S. children? *Obesity*. 2007; 15(9):2348–2356.
5. US Census Bureau. American Community Survey, 2009–2013 estimates website. http://factfinder.census.gov/faces/nav/jsf/pages/community_facts.xhtml. Accessed December 1, 2015.
6. Winkleby M, Cubbin C. Influence of individual and neighbourhood socioeconomic status on mortality among black, Mexican-American, and white women and men in the United States. *Epidemiol Community Health*. 2003;57(6): 444–452.
7. US Department of Agriculture. USDA Food Atlas website. <http://www.ers.usda.gov/data-products/food-environment-atlas/go-to-the-atlas.aspx>. Accessed December 4, 2015.

Notes:

^aA county was classified as persistent child poverty if 20% or more of related children younger than 18 years old were poor as measured by the 1980, 1990, and 2000 decennial censuses and the American Community Survey 5-year estimates for 2007–2011.

^b“Reasonable 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.

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