Many American communities lack environments that could support healthy diets and regular physical activity. Healthy dietary and physical activity practices can lower the risk for heart disease, type 2 diabetes, and some cancers.\textsuperscript{1,2}

In addition, excess calorie intake and physical inactivity contribute to obesity, which is associated with some of the leading preventable chronic diseases, including heart disease, stroke, type 2 diabetes, and some cancers. Among adults, the medical costs associated with obesity are an estimated $147 billion.\textsuperscript{1,2,3}

Public health approaches can help make healthy options available, accessible, and affordable. The Centers for Disease Control and Prevention’s Division of Nutrition, Physical Activity, and Obesity (DNPAO) supports the nation to establish sustainable programs to improve dietary quality, increase physical activity, and reduce obesity and overweight. DNPAO funds and works with state health departments through a cooperative agreement (\textit{State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity and Associated Risk Factors and Promote School Health program}).

This profile highlights data on dietary quality, physical activity, and obesity in the District of Columbia and select activities funded with this cooperative agreement. For more information about CDC’s work to support healthy eating and physical activity, please see the \textbf{DNPAO website}.

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**Population Statistics**

\textbf{Estimated Population of District of Columbia: 672,228}\textsuperscript{4}

**Adult Statistics**

\textbf{Dietary Behaviors}\textsuperscript{5}

- 34.8\% of adults reported consuming fruit less than one time daily.
- 20.9\% of adults reported consuming vegetables less than one time daily.

\textbf{Physical Activity}\textsuperscript{5}

- 57.7\% of adults achieved the equivalent of at least 150 minutes of moderate intensity physical activity per week.

\textbf{Overweight and Obesity}\textsuperscript{5}

- 33.2\% of adults were overweight.
- 21.7\% of adults had obesity.

**Adolescent Statistics**

\textbf{Dietary Behaviors}\textsuperscript{5}

- 44.8\% of adolescents reported consuming fruit less than one time daily.
- 45.8\% of adolescents reported consuming vegetables less than one time daily.

\textbf{Overweight and Obesity}\textsuperscript{5}

- 17.5\% of adolescents were overweight.
- 14.8\% of adolescents had obesity.

**Child Statistics**

\textbf{Breastfeeding}\textsuperscript{5}

- 80.9\% of infants were ever breastfed.
- 58.9\% of infants were breastfed for at least 6 months.

\textbf{Overweight and Obesity}\textsuperscript{5}

- 14.9\% of children aged 2 to 4 years in the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) program were overweight.
- 14.4\% of children aged 2 to 4 years in WIC had obesity.
State Activities
The District of Columbia worked on the following select activities during the first 2 years of the State Public Health Actions program.

- Recruited 85 early care and education (ECE) centers and charter schools serving children aged 2 to 5 years to DC Child Care Centers Promoting Lifelong Activity (P.L.A.Y.) Program. The P.L.A.Y. Program aims to enhance the quality and increase the adoption of physical education and activity among preschoolers throughout DC.

- Developed and disseminated the Workplace Wellness Survey to all DC government agencies to assess workplace environments and identify opportunities for healthier changes.

- Provided education and TA to government and public vending stakeholders regarding implementation of new healthy vending standards.

- Helped coordinate the DC government-wide fitness challenge for employees.

- Developed signage for stairwells and pantries to promote stair use and healthier food choices in government buildings.

References


