

# Michigan

## State Nutrition, Physical Activity, and Obesity Profile



2016

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



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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.<sup>1,2</sup>

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.<sup>1,2,3</sup>

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 ([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 Michigan 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 [DNPAO website](#).

## Population Statistics

Estimated Population of Michigan:  
9,922,576<sup>4</sup>

## Adult Statistics

### Dietary Behaviors<sup>5</sup>

- 37.7% of adults reported consuming fruit less than one time daily.
- 24.8% of adults reported consuming vegetables less than one time daily.

### Physical Activity<sup>5</sup>

- 53.1% of adults achieved the equivalent of at least 150 minutes of moderate intensity physical activity per week.

### Overweight and Obesity<sup>5</sup>

- 34.9% of adults were overweight.
- 30.7% of adults had obesity.

## Adolescent Statistics

### Dietary Behaviors<sup>5</sup>

- 39.7% of adolescents reported consuming fruit less than one time daily.

- 37.6% of adolescents reported consuming vegetables less than one time daily.

### Physical Activity<sup>5</sup>

- 26.7% of adolescents were physically active at least 60 minutes per day on all 7 days in the past week.

### Overweight and Obesity<sup>5</sup>

- 15.5% of adolescents were overweight.
- 13.0% of adolescents had obesity.

## Child Statistics

### Breastfeeding<sup>5</sup>

- 76.0% of infants were ever breastfed.
- 38.1% of infants were breastfed for at least 6 months.

### Overweight and Obesity<sup>5</sup>

- 16.4% of children aged 2 to 4 years in the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) program were overweight.
- 13.9% of children aged 2 to 4 years in WIC had obesity.

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## State Activities

Michigan worked on the following select activities during the first 2 years of the State Public Health Actions program.

- Partnered with the Fair Food Network to conduct a mail campaign to inform Supplemental Nutrition Assistance Program (SNAP) recipients of the Double Up Food Bucks program. This program encourages recipients to use their SNAP benefits to purchase produce at farmers' markets. Recipients also receive a one-to-one match to purchase locally grown fruits and vegetables.
  - Partnered with the Michigan Farmers' Market Association to provide training and technical assistance (TA) for local coalitions and farmers' market managers on how to accept SNAP benefits.
  - Worked with businesses to help employers use the Designing Healthy Environments at Work (DHEW) tool. The DHEW is an online tool to measure how employers are meeting recommended worksite wellness best practices.
  - Worked with local health departments, school districts, and community organizations to designate Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC) consultants. The consultants recruit child care providers to participate in workshops, and they develop and implement NAP SACC Action Plans outlining steps to adopt best practices in food service and physical activity in early care and education centers.
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- Funded six local health jurisdictions to promote physical activity through strategies such as walking campaigns, signage, joint-use agreements, physical activity education, and information resource distribution in high obesity areas.
  - Provided training and TA to local public health departments and coalitions to implement strategies to improve health, such as installing non-motorized paths, initiating Safe Routes to Schools or community supported agriculture programs, and expanding farmers' markets.

## References

1. US Department of Health and Human Services. National Institutes of Health. Managing Overweight and Obesity in Adults: Systematic Evidence Review from the Obesity Expert Panel, 2013.
2. World Cancer Research Fund / American Institute for Cancer Research. Food, Nutrition, Physical Activity, and the Prevention of Cancer: a Global Perspective. Washington DC: AICR, 2007
3. Finkelstein, EA, Trogon, JG, Cohen, JW, Dietz, W. Annual medical spending attributable to obesity: Payer- and service-specific estimates. *Health Affairs*. 2009;28(5):w822-w831.
4. US Census Bureau. State and County QuickFacts 2015 website. <http://www.census.gov/quickfacts/chart/PST045215/00>. Accessed February 22, 2016.
5. Centers for Disease Control and Prevention. Nutrition, Physical Activity and Obesity Data, Trends and Maps website. [https://nccd.cdc.gov/NPAO\\_DTM/](https://nccd.cdc.gov/NPAO_DTM/). Accessed February 22, 2016.