Mississippi

State Nutrition, Physical Activity, and Obesity Profile



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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.^{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.^{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 (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 Mississippi 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 <u>DNPAO website</u>.

Population Statistics

Estimated Population of Mississippi: 2,992,333⁴

Adult Statistics

Dietary Behaviors⁵

- 49.9% of adults reported consuming fruit less than one time daily.
- 30.6% of adults reported consuming vegetables less than one time daily.

Physical Activity⁵

 37.4% of adults achieved the equivalent of at least 150 minutes of moderate intensity physical activity per week.

Overweight and Obesity⁵

- 35.2% of adults were overweight.
- 35.5% of adults had obesity.

Adolescent Statistics

Dietary Behaviors⁵

• 51.1% of adolescents reported consuming fruit less than one time daily.

• 44.8% of adolescents reported consuming vegetables less than one time daily.

Physical Activity⁵

 25.9% of adolescents were physically active at least 60 minutes per day on all 7 days in the past week.

Overweight and Obesity⁵

- 13.2% of adolescents were overweight.
- 15.4% of adolescents had obesity.

Child Statistics

Breastfeeding⁵

- 57.6% of infants were ever breastfed.
- 26.5% of infants were breastfed for at least 6 months.

Overweight and Obesity⁵

- 15.0% of children aged 2 to 4 years in the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) program were overweight.
- 14.8% of children aged 2 to 4 years in WIC had obesity.

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State Activities

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

- In collaboration with partners, provided training and technical assistance (TA) to several hospitals across the state to increase breastfeeding rates. Partners included: the Academy of Breastfeeding Medicine, the Kellogg Foundation's Communities and Hospitals Advancing Maternity Practices regional project, and the Mississippi Perinatal Quality Collaborative.
- Developed a healthy catering policy for foods and beverages served during meetings and events at the state health department.
- Conducted and evaluated a seven state agency 8-week fitness challenge pilot. The results showed a 3% weight loss and 4% decrease in systolic and diastolic blood pressure.



 Provided training and TA to early care and education centers on implementing strategies to increase physical activity and to comply with recommended guidelines.

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, Trogdon, 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/. Accessed February 22, 2016.