



Nebraska *State Nutrition, Physical Activity, and Obesity Profile*

Obesity has important consequences on our nation's health and economy. It is linked to a number of chronic diseases, including coronary heart disease, stroke, diabetes, and some cancers (NIH Clinical Guidelines, 1998). Among adults, the medical costs associated with obesity are estimated at 147 billion dollars (Finkelstein, 2009). Many American communities are characterized by unhealthy options when it comes to diet and physical activity. We need public health approaches that make healthy options available, accessible, and affordable for all Americans.

Nebraska - State Nutrition, Physical Activity, and Obesity Profile

CDC's Division of Nutrition and Physical, and Obesity (DNPAO) supports the nation's capacity to address public health in all policies and establish successful and sustainable interventions to support healthy eating and active living. The Division provides support (i.e., implementation and evaluation guidance, technical assistance, training, surveillance and applied research, translation and dissemination, and partnership development) to states, communities and national partners to implement policy, system, and environmental strategies. The goal is to improve dietary quality, increase physical activity and reduce obesity across multiple settings—such as child care facilities, workplaces, hospitals and medical care facilities, schools, and communities.

State Population of Nebraska

- Estimated Total Population 2010⁽¹⁾
= 1,826,341
- Adults age 18 and over⁽²⁾
= 74.9% of the total population in 2010
- Youth under 18 years of age⁽¹⁾
= 25.1% of the total population in 2010

⁽¹⁾ U.S. Census Bureau. State and County QuickFacts. 2011. Available online at <http://quickfacts.census.gov/qfd/index.html>

⁽²⁾ Calculated estimated = 100% minus percent of the total population under 18 years old, using State and County QuickFacts, 2010 data from the U.S. Census.

Adult Overweight and Obesity

Overweight and Obesity⁽³⁾

- 64.1% were overweight, with a Body Mass Index of 25 or greater.
- 26.9% were obese, with a Body Mass Index of 30 or greater.

Dietary Behaviors⁽⁴⁾

- 30.2% of adults reported having consumed fruits at the recommended level of 2 or more times per day.
- 24.3% of adults reported having consumed vegetables at the recommended level of 3 or more times per day.

Physical Activity⁽⁵⁾

- 44.1% of adults achieved at least 300 minutes a week of moderate-intensity aerobic physical activity or 150 minutes a week of vigorous-intensity aerobic activity (or an equivalent combination).
- 24.2% of Nebraska's adults reported that during the past month, they had not participated in any physical activity.

Source of Adult Obesity Data:

⁽³⁾ CDC. Behavioral Risk Factor Surveillance System: Prevalence and Trend Data—Overweight and Obesity, U.S. Obesity Trends, Trends by State 2010. Available online at http://nccd.cdc.gov/NPAO_DTM/

Source of Adult Fruit and Vegetable Data:

⁽⁴⁾ CDC. *MMWR* September 2010 State-Specific Trends in Fruit and Vegetable Consumption Among Adults United States, 2000–2009. Available online at <http://www.cdc.gov/mmwr/pdf/wk/mm5935.pdf>

Source of Adult Physical Activity Data:

⁽⁵⁾ CDC. BRFSS Behavioral Risk Factor Surveillance System: Prevalence and Trend Data—Physical Activity, U.S. Physical Activity Trends by State 2009–2010. Available online at http://nccd.cdc.gov/NPAO_DTM/

Adolescent Overweight and Obesity

2009 Youth Risk Behavior Surveillance System (YRBSS) adolescent obesity data is not available, as Nebraska's overall institutional response rate was below 60%, the minimum necessary for statewide reporting.

The 2010 Nebraska School Health Profiles assessed the school environment, indicating that among high schools (6)

- 24.2% did not sell less nutritious foods and beverages anywhere outside the school food service program
- 5.3% offered fruits or non-fried vegetables in vending machines and school stores, canteens, or snack bars, and during celebrations whenever foods and beverages were offered
- 32.1% prohibited all forms of advertising and promotion of candy, fast food restaurants, or soft drinks in all locations. All school-related locations were defined as in school buildings; on school grounds, including on the outside of the school building, on playing fields, or other areas of the campus; on school buses or other vehicles used to transport students; and in school publications.

Nebraska - State Nutrition, Physical Activity, and Obesity Profile

Sources of Adolescent Obesity, Fruit and Vegetable, Sugar-sweetened Beverages, and Physical Activity Data:

* Physical activity defined as “any kind of physical activity that increases your heart rate and makes you breathe hard some of the time.”

⁽⁶⁾ CDC, Division of Adolescent and School Health. The 2009 Youth Risk Behavior Survey. Available online at <http://www.cdc.gov/HealthyYouth/yrbs/index.htm>

⁽⁷⁾ CDC, Division of Adolescent and School Health. The 2010 School Health Profiles. Available online at <http://www.cdc.gov/healthyyouth/profiles/index.htm>

Child Overweight and Obesity

✦ **Breastfeeding**⁽⁸⁾

Increasing breastfeeding initiation, duration, and exclusivity is a priority strategy in CDC’s efforts to decrease the rate of childhood obesity throughout the United States.

- 72.8% of infants were Ever Breastfed.
- 44.4% of infants were Breastfed for at least 6 months.

✦ **Body Mass Index**^{(9)*}

Among Nebraska’s children aged 2 years to less than 5 years *

- 16.7% were overweight (85th to < 95th percentile BMI-for-Age).
- 13.8% were obese (≥ 95th percentile BMI-for-Age).

Sources of Breastfeeding Data:

⁽⁸⁾ CDC. Division of Nutrition, Physical Activity, and Obesity Breastfeeding Report Card 2011. Centers for Disease Control and Prevention National Immunization Survey, Provisional Data, 2008births. Available online at <http://www.cdc.gov/breastfeeding/data/reportcard2.htm>

Sources of Child Obesity Data:

⁽⁹⁾ CDC. Division of Nutrition, Physical Activity, and Obesity. 2010 Pediatric Nutrition Surveillance System, Table 6 (PedNSS). http://www.cdc.gov/pednss/pednss_tables/tables_health_indicators.htm

* BMI data only includes low-income children from the PedNSS sample and do not represent all children.

* BMI data is based on 2000 CDC growth chart percentiles for BMI-for-age for children 2 years of age and older.

Nebraska’s Response to Obesity

✦ **Foster Healthy Weight in Youth Nebraska’s Clinical Childhood Obesity Model**

In collaboration with a number of partners, including the Nebraska Medical Association, Creighton University School of Medicine, and Teach a Kid to Fish, a healthcare provider toolkit with training video and clinic resources has been developed to assist pediatric providers in assessing, preventing, and treating childhood obesity. The toolkit and resources are available by visiting www.nebmed.org/copp.aspx.

✦ **“Whatcha doin?” Campaign**

On participating high school campuses, the “Whatcha doin?” campaign depends on peer promoters known as “Buzz Agents” to carry out wacky and innovative random attention-craving acts throughout the school day – acts that can take place any place at any time – to promote eating healthy fruits and veggies and being physically active. Using the tag line, “How you do it is up to you!” Buzz Agents (or “Buzzers”) have the ability to help their peers find new and exciting ways of adopting healthier lifestyles in their own unique ways. For more information on the youthful campaign, visit www.whatchadoin.org.

✦ **The Great Park Pursuit Outdoor Adventure**

The Nebraska Game and Parks Commission, the Nebraska Department of Health and Human Services, and the Nebraska Park and Recreation Association share a common goal to promote Nebraska’s park and recreational opportunities. The Great Park Pursuit Program was created with the goal of encouraging residents to discover a healthier lifestyle while increasing their awareness of Nebraska’s rich outdoor recreation opportunities. (continued on next page)

Nebraska - State Nutrition, Physical Activity, and Obesity Profile

During the 2010-2011 year, NAFH staff disseminated information about the program through statewide press releases, E-newsletters, magazines, and the program's website where participants can register and learn more about the Great Park Pursuit. For more information, visit www.negpp.org.

Healthy Communities Intervention Grants Program

The NAFH program continues to support the Healthy Communities Intervention Grants in collaboration with the Office of Community Health and Development and several NDHHS Chronic Disease Programs. By adding four new local health departments as implementation sites in 2010, the state currently funds 17 of 20 health departments statewide to implement social marketing-based health promotion projects that address chronic disease prevention, tobacco prevention, and health literacy. Of the 17 health promotion projects, twelve focus on nutrition and physical activity promotion and obesity prevention within worksites, schools, and the community.

Nutrition, Physical Activity, and Obesity (NPAO) Advisory Group

The NPAO Advisory Group was formed in April 2009 and is comprised of 20 members from across the State of Nebraska. Members are experts in the fields of physical activity, nutrition, and obesity. The purpose of the Advisory Group is to formalize stakeholder involvement, communication, and shared planning to focus on the implementation and application of the Nebraska Physical Activity and Nutrition State Plan. Advisory Group tasks include: developing an implementation plan, developing a partnership plan, and revising the State Plan.

Contact Information

Bruce Rowe
Health Administrator
Nutrition and Activity for Health Program
Office of Disease Prevention & Health Promotion
Nebraska Department of Health
and Human Services
301 Centennial Mall South
Lincoln, NE 68509-5026
Ph: 402-471-6439 Fax: 402-471-6446
E-mail: Bruce.Rowe@Nebraska.gov
Website: www.hhs.state.ne.us/NAFH

References

NIH. Clinical Guidelines Clinical Guidelines on the Identification, Evaluation, and Treatment of Overweight and Obesity in Adults: The Evidence Report. 1998. Available online at http://www.nhlbi.nih.gov/guidelines/obesity/ob_gdlns.htm

Finkelstein, EA, Trogon, JG, Cohen, JW, and Dietz, W. Annual medical spending attributable to obesity: Payer- and service-specific estimates. Health Affairs 2009; 28(5): w822-w831.

