Nevada
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.
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 Nevada

- Estimated Total Population 2010(1)
  = 2,700,551
- Adults age 18 and over(2)
  = 75.4% of the total population in 2010
- Youth under 18 years of age(1)
  = 24.6% of the total population in 2010

(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)
  - 59.0% were overweight, with a Body Mass Index of 25 or greater.
  - 22.4% were obese, with a Body Mass Index of 30 or greater.

- **Dietary Behaviors**(4)
  - 30.3% of adults reported having consumed fruits at the recommended level of 2 or more times per day.
  - 25.5% of adults reported having consumed vegetables at the recommended level of 3 or more times per day.

- **Physical Activity**(5)
  - 44.5% 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).
  - 24.4% of Nevada’s adults reported that during the past month, they had not participated in any physical activity.

Source of Adult Obesity Data:


Source of Adult Fruit and Vegetable Data:


Source of Adult Physical Activity Data:


Adolescent Overweight and Obesity

- **Overweight and Obesity**(6)
  - 13.4% were overweight (≥ 85th and < 95th percentiles for BMI by age and sex, based on reference data)
  - 11.0% were obese (≥95th percentile BMI by age and sex, based on reference data)

- **Unhealthy Dietary Behaviors**(6)
  - **Fruit consumption**: 72.0% ate fruits or drank 100% fruit juice less than 2 times per day during the 7 days before the survey (100% fruit juice or fruit).
  - **Vegetable consumption**: 90.2% ate vegetables less than 3 times per day during the 7 days before the survey (green salad; potatoes, excluding French fries, fried potatoes, or potato chips; carrots; or other vegetables).
  - **Sugar-sweetened beverage consumption**: 22.1% drank a can, bottle, or glass of soda or pop (not including diet soda or diet pop) at least one time per day during the 7 days before the survey.
Physical Activity

- **Achieved recommended level of activity**: Only 24.9% were physically active* for a total of at least 60 minutes per day on each of the 7 days prior to the survey.

- **Participated in daily physical education**: Data not available.

Physical Inactivity

- **No activity**: 14.2% did not participate in at least 60 minutes of physical activity on any day during the 7 days prior to the survey.

- **Television viewing time**: 35.1% watched television 3 or more hours per day on an average school day.

The 2010 Nevada School Health Profiles assessed the school environment, indicating that among high schools

- 26.6% did not sell less nutritious foods and beverages anywhere outside the school food service program.

- 22.6% always 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.

- 59.8% 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.

Breastfeeding

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.

- 80.1% of infants were Ever Breastfed.

- 45.6% of infants were Breastfed for at least 6 months.

Body Mass Index

Among Nevada’s children aged 2 years to less than 5 years

- 14.6% were overweight (85th to < 95th percentile BMI-for-Age).

- 13.6% were obese (≥ 95th percentile BMI-for-Age).

Sources of Breastfeeding Data:


Sources of Child Obesity Data:

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](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.

Child Overweight and Obesity

Quality Rating Improvement System for Nevada’s School Wellness Policy

The Nevada State Health Division (NSHD), the Department of Education (DOE) and Fitness and Wellness Council piloted a Quality Rating Improvement System (QRIS) in four schools. The pilot rated each school annually on meeting physical activity and nutrition guidelines. Training, resources and incentives were provided to increase the number of schools meeting the guidelines of the Nevada School Wellness Policy. Results of the evaluation are being compiled and disseminated to help inform statewide policy on physical activity and nutrition in school settings.
In addition, the Nevada State Health Division worked with the Nevada Nutrition Assistance Consortium whose goals are to Promote Healthy Eating and Active Patterns (based on Dietary Guidelines for Americans), promote breastfeeding and increase consumption of whole grains. The Consortium is working toward increasing nutrition and physical activity standards in schools to meet Healthy People 2020.

Nutrition and Physical Activity Standards in Childcare Settings

The Nevada State Health Division worked with the Division of Welfare’s, Child Care Development and Assistance (CCDA), Nevada Registry, Cooperative Extension and the Division of Family Service, Bureau of Services for Child Care to establish nutrition and physical activity standards through certification of child care providers.

As of July 1, 2011, Senate Bill No. 27 went into effect “requiring employees of certain child care facilities to complete training each year relating to the lifelong wellness, health and safety of children; and providing other matters properly relating thereto”. This policy impacts over 573 childcare centers. The bill language can be found at the following site: https://www.leg.state.nv.us/Session/76th2011/Bills/SB/SB27_EN.pdf

Because at least 2 of the 15 hours of annual training required for childcare providers are on childhood obesity, nutrition, and physical activity, the Nevada State Health Division’s Wellness Program developed training modules that will be available free online free to assist childcare providers to meet this requirement.

Improve Nutrition and Portion Control among Children

The Nevada State Health Division provided community mini grants to promote community and school gardens, educate children on the origins of food, increasing consumption of fruits and vegetables and promoting physical activity. To date, 16 mini grants have been awarded across the state.

Promoting Healthy Choices through Media Campaigns

The NSHD worked collaboratively with community partners statewide to provide media education on menu labeling to educate the public in making healthy choices in chain restaurants. The media campaign, called “Look for the Light Bulb”, involved print, social media, television ads and window clings at restaurants. For more information visit the website www.lookforthelightbulb.org.

In addition, the NSHD promoted Food Day with an emphasis on high protein foods. In collaboration with local food banks and businesses, a media campaign “It’s Chili Outside – Let’s Make Nevada Hunger Free” was promoted statewide. The Health Division invested in paid media through television, radio and social. The campaign brought awareness of the statewide needs of the food banks and pantries in our communities.

Contact Information

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References
