Overweight and Obesity

September 2012

South Dakota
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 South Dakota**

- Estimated Total Population 2010\(^{(1)}\) = 814,1805
- Adults age 18 and over\(^{(2)}\) = 75.1% of the total population in 2010
- Youth under 18 years of age\(^{(1)}\) = 24.9% 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**\(^{(3)}\)
  - 65.2% were overweight, with a Body Mass Index of 25 or greater.
  - 27.3% were obese, with a Body Mass Index of 30 or greater.

- **Dietary Behaviors**\(^{(4)}\)
  - 25.2% of adults reported having consumed fruits at the recommended level of 2 or more times per day.
  - 19.6% of adults reported having consumed vegetables at the recommended level of 3 or more times per day.

**Physical Activity**\(^{(5)}\)

- 38.1% 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).
- 24.5% of South Dakota’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**\(^{(6)}\)
  - 12.6% were overweight (≥ 85\(^{th}\) and < 95\(^{th}\) percentiles for BMI by age and sex, based on reference data)
  - 9.6% were obese (≥95\(^{th}\) percentile BMI by age and sex, based on reference data)

- **Unhealthy Dietary Behaviors**\(^{(6)}\)
  - **Fruit consumption**: 74.0% 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**: 88.7% 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**: 28.8% 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**\(^{(6)}\)
  - **Achieved recommended level of activity**: Only 26.4% 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:**
  29.1% of adolescents attended daily physical education classes in an average week (when they were in school).

**Physical Inactivity**

- **No activity:** 14.0% 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:** 22.6% watched television 3 or more hours per day on an average school day.

**The 2010 South Dakota School Health Profiles assessed the school environment, indicating that among high schools**

- 31.9% did not sell less nutritious foods and beverages anywhere outside the school food service program.

- 5.3% 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.

- 34.9% 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.

**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.”

**Body Mass Index**

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

- 19.3% were overweight (85th to < 95th percentile BMI-for-Age).

- 16.1% were obese (≥ 95th percentile BMI-for-Age).

**Sources of Breastfeeding Data:**


**Sources of Child Obesity Data:**


* 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.

**South Dakota’s Response to Obesity**

**Encouraging Trail Usage**

The South Dakota Department of Health worked with 18 communities and organizations across the state to produce 54 trailhead markers and signs. The intent was to recognize and help promote local trails and at the same time encourage their use and increase physical activity. Promotion of the project was supported with materials designed by the media company and included a press kit sent to over 70 community leaders in communities that received signage, plus social media themed “Get Your Tail On the Trail” on [facebook](http://www.facebook.com/#!/HealthySDTrails?sk=info). This Facebook campaign was developed by Healthy SD as a way to help identify non-motorized walking, hiking and biking trails, encourage their use, and generate excitement about the incredible trail system South Dakota has to offer. populations in South Dakota.

**Child Overweight and Obesity**

**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.

- 69.9% of infants were Ever Breastfed.

- 44.5% of infants were Breastfed for at least 6 months.
Healthy Concessions at Youth Sporting Events
The Healthy South Dakota Concessions Model Policy guidebook was developed with non-school youth sporting events as the focus and is available in printed copy and online at www.HealthySD.gov. The tools section addresses strategies for using pricing, point of purchase information, and product placement/attractiveness to promote the healthier options. A checklist is provided to guide champions and leaders in the How to Get Started section. The South Dakota Park and Recreation Association board adopted the healthy concessions policy that both the state track meet and all 32 local meets in South Dakota will follow. The group has recommended that all members voluntarily adopt the policy for other events.

Gold Sneaker Initiative
Two hundred and forty two Child Care Centers throughout the South Dakota have been designated thus far as Gold Sneaker facilities for their having successfully implemented nutrition and physical activity-related policy interventions. The program’s website (http://health.state.tn.us/goldsneaker.htm) provides instructions, training materials, and all forms that child care centers need to adopt policies that promote age-appropriate physical activities, limit television and screen viewing time, and promote a healthy eating environment.

South Dakota’s “Munch Code! Colors to live by” media campaign emphasizes a green, yellow and red labeling approach for foods and beverages offered, as well as recommendations for proportions for each category to make available. “GREEN foods/beverages are the healthiest options and can be enjoyed often; YELLOW foods/beverages have added sugar, fat and calories and should be eaten occasionally; and RED foods/beverages are the highest in sugar, fat, and calories and the least healthy, and should be eaten sparingly.” The Munch Code! was also promoted on Facebook using a game to be enjoyed by youth which allows the player to match icons of food with whether they are red, yellow or green. The award-winning campaign can be viewed at http://www.facebook.com/MunchCodeSD.Connect With South Dakota Campaign.

Contacts
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References