



Texas

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.

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State Population of Texas

- Estimated Total Population 2010⁽¹⁾
= 25,145,561
- Adults age 18 and over⁽²⁾
= 72.7% of the total population in 2010
- Youth under 18 years of age⁽¹⁾
= 27.3% 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⁾

- 65.9% were overweight, with a Body Mass Index of 25 or greater.
- 27.7% were obese, with a Body Mass Index of 30 or greater.

Dietary Behaviors⁽⁴⁾

- 30.0% of adults reported having consumed fruits at the recommended level of 2 or more times per day.
- 27.2% of adults reported having consumed vegetables at the recommended level of 3 or more times per day.

Physical Activity⁽⁵⁾

- 43.1% 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).
- 27.3% of Texas'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://www.cdc.gov/brfss/>

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://www.cdc.gov/brfss/>

Adolescent Overweight and Obesity

Overweight and Obesity⁽⁶⁾

- 15.6% were overweight ($\geq 85^{\text{th}}$ and $< 95^{\text{th}}$ percentiles for BMI by age and sex, based on reference data)
- 13.6% were obese ($\geq 95^{\text{th}}$ percentile BMI by age and sex, based on reference data)

Unhealthy Dietary Behaviors⁽⁶⁾

- **Fruit consumption:** 67.5% 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:** 85.7% 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:** 32.8% 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 27.2% 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:** 37.4% of adolescents attended daily physical education classes in an average week (when they were in school).

Physical Inactivity⁽⁶⁾

- **No activity:** 16.0% 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:** 36.3% watched television 3 or more hours per day on an average school day.

The 2010 Texas School Health Profiles assessed the school environment, indicating that among high schools⁽⁷⁾

- 42.8% did not sell less nutritious foods and beverages anywhere outside the school food service program.
- 9.8% 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.
- 52.6% 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."

⁽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>

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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.

- 75.2% of infants were Ever Breastfed.
- 42.2% of infants were Breastfed for at least 6 months.

✦ **Body Mass Index^{(9)*}**

Among Texas' children aged 2 years to less than 5 years*

- 16.8% were overweight (85th to < 95th percentile BMI-for-Age).
- 15.3% were obese (\geq 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.

Texas' Response to Obesity

✦ **Texas Interagency Obesity Council**

The Interagency Obesity Council (IOC) was codified in Health and Safety Code, Chapter 114, during the 80th Legislative Session (2007) to address nutrition and obesity prevention among children and adults. It is comprised of the commissioners of the Texas Department of Agriculture, the Texas Department of State Health Services, and the Texas Education Agency. The council serves to enhance communication and coordination of obesity prevention across agencies; and as a forum to guide future planning around obesity prevention, health promotion and improved nutrition.

✦ **Department of State Health Services (DSHS) Obesity Workgroup**

DSHS identified obesity as a tier-one priority to the agency in 2008; as a result the DSHS Obesity Workgroup was formed to collaborate across divisions to enhance agency efforts towards obesity prevention. The workgroup is comprised of representatives from DSHS WIC-program, NPAOP, and Office of Title V & Family Health/Research & Program Development Unit.

Through cross-divisional collaboration this group is able to leverage resources and avoid duplication of efforts; ultimately increasing internal capacity to prevent obesity across the agency.

The initiative includes a web-based portal to disseminate healthy eating, physical activity, and obesity best practices, reports, success stories and information to partners and consumers. For more information, visit www.livehealthyTexas.org

✦ **Texas! Bringing Healthy Back – Growing Community**

To help educate and inspire communities into action, NPAOP developed a communications initiative called "Growing Community," which highlights successful community-based change strategies across the state through short, documentary-style video clips. The videos were initially distributed to the 2009 Statewide Obesity Summit attendees, where recipients were charged to be "catalysts for change" by hosting video screenings. Since the July 2009 launch, the Texas Department of State Health Services has made the video series available online and in DVD format. To view the videos online visit: www.dshs.state.tx.us/obesity/GrowingCommunity/default.shtm

✦ **Texas Nutrition Environment Assessment (TxNEA)**

In 2008, NPAOP partnered with the University of Texas - Austin Department of Kinesiology and Health Education & Department of Human Ecology/Nutrition, the Steps to a Healthier Austin program, and Texas State University - San Marcos Department of Nutrition and Foods. Together, they adapted the nationally available Nutrition Environments Measure Survey (NEMS) tool to meet the needs of Texas communities and to focus specifically on obesity by considering calorie content of food options. In November 2008, 30 Texas health professionals and researchers interested in using TxNEA convened to review the latest adaptations. After providing thorough feedback and helpful suggestions to improve the measures, TxNEA has been further adapted to meet the needs of the Texas public health workforce who will be using it for various projects throughout Texas. For more information, visit the site at www.dshs.state.tx.us/obesity/txnea.shtm.

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◆ **Communities Bringing Healthy Back: Funded Project Support**

The NPAOP funds 19 Texas communities to implement policy and environmental changes to prevent obesity. The program currently funds projects in: Austin, Houston, San Antonio, Brownsville, El Paso, Beaumont, Fort Worth, Henderson, Bryan, Nacogdoches, Dallas, and San Marcos. For more information on NPAOP funded projects please visit Communities Bringing Healthy Back on the NPAOP website at www.dshs.state.tx.us/obesity/default.shtm.

◆ **Tex Plate Restaurant Project**

The Tex Plate: Eat Between the Lines project was created as a restaurant-based portion-control initiative by the Department of State Health Services' NPAOP, WIC Program, Steps to a Healthier Austin, Austin Dietetic Association, and University of Texas Department of Kinesiology and Health Education. Inspired by a diabetes portion control plate, Tex Plate serving plates are designed with visual cues for recommended portion sizes consistent with current healthy eating guidelines. To participate, restaurants incur no costs, nor do they have to change any food offering or recipe. Tex Plate is currently being modified for worksite cafeterias; pilot restaurant and cafeteria locations are yet to be determined.

◆ **Farm to Work**

Farm to Work is an employee wellness program that provides employees with the opportunity to receive a weekly basket of fresh local produce delivered to the worksite. Since launching at the DSHS main campus in 2007, the program has expanded to serve over 16 state agencies and private companies in Austin and San Antonio. Additionally, similar programs have also been launched in Lubbock and Fort Worth. Worksites interested in learning more about Farm to Work can download the [Farm to Work Toolkit](#) (and also the [Farm to Work Toolkit Supplement](#)), which compiles all the tools, sample documents, and other resources that were developed to successfully implement Farm to Work at the Texas Department of State Health Services.

◆ **Getting Fit Texas!**

Getting Fit Texas! is a physical activity curriculum used by health workers, or Promotoras, to increase physical activity among Hispanic populations. This curriculum has been used to conduct Promotora training sessions throughout the state. These trainings provide

Promotoras with CEU's, allowing them to maintain their certification and continue community outreach efforts. During the 2011 fiscal year, the state health department will revise the curriculum so that it can be evaluated more effectively.

◆ **On-line Breastfeeding Training Module**

NPAOP collaborated with DSHS breastfeeding subject-matter-experts to provide and promote a new on-line breastfeeding training module for health care professionals. The module has been designed to fulfill staff training requirements (step 2) of the Ten Steps to Successful Breastfeeding, providing Texas hospitals with an accessible tool to aid work towards "Baby-Friendly" designation. The training module provides comprehensive professional continuing education in a self-paced format.

◆ **On-line Sustainable Agriculture Module**

NPAOP collaborated with the Austin-based Sustainable Food Center to develop an online module to translate the sustainable agriculture concept and to increase awareness of the food system's role in the prevention of obesity. The module highlights changes needed in communities to increase access and availability of fruits and vegetables.

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