



Illinois *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.

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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 Illinois

Estimated Total Population 2010⁽¹⁾
= 12,830,632

Adults age 18 and over⁽²⁾
= 75.6% of the total population in 2010

Youth under 18 years of age⁽¹⁾
= 24.4% 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⁾

- 62.2% were overweight, with a Body Mass Index of 25 or greater.
- 28.2% were obese, with a Body Mass Index of 30 or greater.

Dietary Behaviors⁽⁴⁾

- 32.4% of adults reported having consumed fruits at the recommended level of 2 or more times per day.
- 23.3% of adults reported having consumed vegetables at the recommended level of 3 or more times per day.

Physical Activity⁽⁵⁾

- 45.4% 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).
- 23.6% of Illinois' 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⁾

- 15.5% were overweight ($\geq 85^{\text{th}}$ and $< 95^{\text{th}}$ percentiles for BMI by age and sex, based on reference data).
- 11.9% were obese ($\geq 95^{\text{th}}$ percentile BMI by age and sex, based on reference data).

Unhealthy Dietary Behaviors⁽⁶⁾

- **Fruit consumption:** 70.1% 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:** 88.0% 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:** 31.1% 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. (continued on next page).

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Physical Activity⁽⁶⁾

- **Achieved recommended level of activity:** Only 24.1% 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:** 67.5% of adolescents attended daily physical education classes in an average week (when they were in school).

Physical Inactivity⁽⁶⁾

- **No activity:** 16.5% 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:** 35.7% watched television 3 or more hours per day on an average school day.

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

- Data Not Available.

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.

- 70.6% of infants were Ever Breastfed.
- 44.5% of infants were Breastfed for at least 6 months.

Body Mass Index^{(9)*}

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

- 15.3% were overweight (85th to < 95th percentile BMI-for-Age).
- 14.6% 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.

Illinois' Response to Obesity

Go, Slow, Whoa in Head Start

The state of Illinois worked on improving nutrition education and training for Head Start students and their families. Twenty-three Head Starts sites implemented the Go, Slow, Whoa nutrition curriculum statewide. There are over 16,000 children in the Head Start program throughout the city of Chicago and all are exposed to the Go, Slow, Whoa food messaging; 4,420 children and their families are impacted downstate. Numerous changes have occurred, including increased offerings of fresh fruits and vegetables and the construction of school gardens, elimination of sugar-sweetened beverages, 1% milk replacing 2% milk, increased access to self-service drinking water, revision of menus to increase healthy options, dance parties and fancy fruits replace Whoa foods for birthday/holiday celebrations, to name a few.

Head Start is implementing a method that will systematically measure improvements in nutrition standards. The Head Start centers are now also using an evaluation form with NAPSACC elements incorporated into it.

Worksite Wellness Policies

Illinois Department of Health worked with the State Chamber of Commerce, Chicagoland Chamber of Commerce, and The Illinois Manufacturers Association to develop and implement worksite wellness programs to increase physical activity among employees of different companies around the state. (continued on next page)

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The policy goal was to have a minimum of 30 businesses implement worksite wellness programs to increase physical activity among employees to reduce absentee rates, decrease health insurance costs, improve productivity and develop long term strategies to sustain efforts. The 3 main partners (2 chambers of commerce and 1 manufacturer association) developed a menu of physical activity interventions for businesses to choose from. Program Highlights:

Illinois Chambers of Commerce:

In 2011, 70 companies and 3,360 individuals participated in team-based workplace wellness challenge. The goal of the Chamber's program is to provide a simple, yet innovative introduction to wellness for those businesses that have not yet embraced such a program while also offering those businesses that have a more developed wellness program a complimentary approach to engaging employees in healthier lifestyles, especially those that do not participate in the employer's health benefit program. The Illinois Chamber is also building out a separate webpage, accessible off of their main website, dedicated to wellness in the workplace to offer employers a one-stop shop for resources and best practices on improving employee health and wellness. The Illinois Chamber is promoting engagement among local businesses and partnerships with community organizations to provide incentives, including discounted gym memberships, healthy eating days at the office, and time allotted during the workday to participate in exercise activities.

Chicagoland Chambers of Commerce:

The Chicagoland Chamber of Commerce implemented the "Live Healthy Chicagoland Program", an integrated, customized workplace wellness solution based on the outcome of each organizations' biometrics screening results, health risk assessment and wellness culture. Three health risk factors were identified and mitigating strategies were defined with the input and feedback of the wellness teams. All companies participated in the 100 day physical activity program with the option to increase daily physical activity and or reduce weight. A fruit program followed where fruit was delivered on-site, discounted gym membership was offered and various 3k, 5k and half marathon sponsorship was awarded to each organization. Stress reducing techniques such as breathing classes, chi quong and yoga classes were offered to the participating companies to increase movement and breathing.

A pedometer-base program that measures actual steps was implemented at five of the companies to capture data. Blood pressure machines were implemented in cafeterias and lunchrooms along with educational material on cholesterol and blood pressure. Ongoing smaller physical activity challenges are being offered as many of the pedometer-base programs allows companies access to the on-line portal for a period of 12 months. A smoking cessation program and CPR training for ten members of each company has also been made available to the participants.

IL Manufacturers Association:

The IMA had 34 businesses participating in the Manufacturing Miles walking competition following a year of employee-driven mileage accumulation. More than 4,200 employees are participating statewide. To support the initiative, the Association sent out Wellness Memo, a newsletter that highlights wellness activities and lifestyles, as well as updates senior management of significant events in healthcare policy. The IMA also developed a toolkit on how to develop worksite wellness programs for other manufacturing businesses. The tool kit includes PowerPoint presentations, web page insertions, in-depth surveys, brochures, stairwell templates, competition and rules.

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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.