



Washington *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 Washington

- Estimated Total Population 2010⁽¹⁾
= 6,724,540
- Adults age 18 and over⁽²⁾
= 76.5% of the total population in 2010
- Youth under 18 years of age⁽¹⁾
= 23.5% 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⁾

- 61.1% were overweight, with a Body Mass Index of 25 or greater.
- 25.5% were obese, with a Body Mass Index of 30 or greater.

Dietary Behaviors⁽⁴⁾

- 33.9% of adults reported having consumed fruits at the recommended level of 2 or more times per day.
- 28.3% of adults reported having consumed vegetables at the recommended level of 3 or more times per day.

Physical Activity⁽⁵⁾

- 47.7% 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).
- 19.5% of Washington'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 for Washington.

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

- 26.2% did not sell less nutritious foods and beverages anywhere outside the school food service program
- 10.5% 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
- 52.1% 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.

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

⁽⁶⁾*Physical activity defined as “any kind of physical activity that increases your heart rate and makes you breathe hard some of the time.”

⁽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.

- 89.0% of infants were Ever Breastfed.
- 60.2% of infants were Breastfed for at least 6 months.

✦ Body Mass Index^{(9)*}

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

- 18.4% were overweight (85th to < 95th percentile BMI-for-Age).
- 14.4% 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.

Washington’s Response to Obesity

✦ Washington’s Nutrition & Physical Activity Plan

In 2008, the Washington State Department of Health released a State Nutrition and Physical Activity Plan developed in collaboration with the University of Washington Center for Public Health Nutrition and supported by more than

700 partners in communities, schools, worksites, healthcare, government and other settings. The plan includes examples chosen from hundreds of initiatives across the state that illustrate how policy and environmental interventions can make a difference in the lives of community residents. For more information about the many activities taking place in support of the state plan, visit www.doh.wa.gov/cfh/NutritionPA/default.htm.

✦ Partners in Action

The Partners in Action is a collaborative project between the State Department of Health and the University of Washington. It is a renewed call-to-action to advance the implementation of the state Nutrition and Physical Activity Plan.

✦ Healthy Communities Project

The state provides local health departments and communities with tools, resources, technical assistance, training, and funding to address six target areas: physical activity, television viewing, breastfeeding, fruits and vegetables, sugar-sweetened beverages, high energy-dense foods, as well as general healthy eating. For a description of each community’s projects and success stories, visit www.doh.wa.gov/cfh/NutritionPA/our_communities/healthy_communities_projects/default.htm

✦ Active Community Environments (ACES)

In support of creating active-friendly environments, multiple agencies are partnering to provide technical assistance, training, and resources to communities that choose to participate in the Active Community Environments Project. ACES recently added Safe Routes to Schools (SRTS), a nation-wide program that enables community leaders, schools, and parents to create safe environments that encourage children to enjoy walking or bicycling to school every day. By making a physically active transportation option convenient, safe, and fun, SRTS integrates health, fitness, traffic relief, environmental awareness, and safety into an overarching community-based program.

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Access to Healthy Foods Coalition

The Washington Access to Healthy Foods Coalition is a group of businesses, industries, government agencies, and non-profit organizations working to improve access to healthier foods by changing the environment where food is available and by working with policy- and decision-makers to promote change. The Access Coalition brings together food buyers, suppliers, and distributors to offer healthy choices in the workplace, in schools, restaurants, community centers, military posts, hospitals, vending machines, at retail establishments, and through food assistance programs. Coalition efforts since 2003 have been coordinated by the Washington State Department of Health as a way to increase healthy eating and to implement the Washington State Nutritional and Physical Activity Plan. For additional information about the Access to Healthy Foods Coalition and its current projects, visit www.accesstohealthyfoods.org/index.php?page_id=22.

Worksite Health and Productivity Program

The State Department of Health works with employers to change their organizational cultures so that employees can be more physically active and have access to healthier food choices while at work. The department:

- Helps plan the annual Healthy Worksite Summit for employees in partnership with the Association of Washington Cities (AWC), the American Heart Association (AHA), and the Washington State Dairy Council. To learn more about the annual Summit, visit the website that supported the 2010 meeting by visiting www.awcnet.org/worksitesummit/index.htm.
- Promotes a Worksite Wellness Resource Kit that focuses on strategies to offset risk factors that contribute to chronic diseases

Worksite Wellness: Energize Your Meeting

During 2010-2011, Washington expanded their program entitled Energize Your Meeting by providing tools and technical assistance to worksites looking for guidance on conducting healthier meetings and events, and guidance on lowering sodium. For additional details about the program, visit <http://here.doh.wa.gov/materials/energize-your-meetings>.

In addition Washington has other ongoing projects which include:

- *Local Food Policy Councils* offering training and technical assistance to communities interested in forming food policy councils.
- *Breastfeeding Best Practices* which include providing technical assistance and training to hospital administrators and staff who have a desire to implement Breastfeeding Best Practices.
- *Fruits and Veggies - More Matters*® is being promoted by distributing materials and managing license agreements.
- *Television Viewing Policy Training* are being conducted for families and child care homes to change their screen time policies and environments; creating a web-site for educational professionals; integrating television reduction messages and training into USDA summer feeding and literacy programs; and training afterschool program providers to change television viewing policies and encourage healthier child care environments.

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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.