

## Health Priority: Overweight, Obesity and Lack of Physical Activity Objective 1: Leadership (Template)

### Long-term (2010) Subcommittee Outcome Objective:

By 2010, an infrastructure will be in place that fosters the development support, and sustainability of healthy lifestyles among Wisconsin residents.

Long-term outcome objective updated as of: Sept 2004

Wisconsin Baseline	Wisconsin Sources and Year
None, this is a developmental objective.	This is a developmental objective.

Federal/National Baseline	Federal/National Sources and Year
None, this is a developmental objective.	This is a developmental objective.

Related USDHHS Healthy People 2010 Objectives			
Chapter	Goal	Objective Number	Objective Statement
22 - Physical Activity and Fitness	Improve health, fitness and quality of life through daily physical activity	Not applicable	Not applicable
19 - Nutrition and Overweight	Promote health and reduce chronic disease associated with diet and weight	Not applicable	Not applicable

Definitions	
Term	Definition
Diversity competence	Programs and services that are designed with the acknowledgment of diverse cultural beliefs, attitudes, behaviors, and group distinctiveness that require special, targeted strategies to enhance effectiveness. Diverse populations that may benefit from specialized approaches to overweight, obesity, and physical activity include rural/urban, racial/ethnic, age, gender, and disability status groups.
Infrastructure	Infrastructure refers to the people involved in the provision of public health nutrition services; the information and communication systems for collecting and disseminating the data; the public health organizations at the state and local levels; and the system for assuring public health nutrition services.

### Rationale:

- The report to the President of the United States on health promotion through physical activity was a joint effort between the Secretary of Health and Human Services and the Secretary of Education of the United States. We think this is an important model to follow within the Wisconsin Department of Health and Family Services, Division of Public Health and the Wisconsin Department of Public Instruction (U.S. Department of Health and Human Services, 2000).

- Multiple reports, policy statements, and peer-reviewed professional articles cite the vital role that schools play in addressing overweight, obesity, and lack of physical activity across the nation. (U.S. Department of Health and Human Services, 2000; Koplan and Dietz, 1999; Pediatrics, 2000; U.S. Department of Health and Human Services, 1996; American Obesity Association, 2001; American Dietetic Association, 1995.)
- The creation of a leadership infrastructure that supports local efforts is essential to achieving the outcomes outlined in Objectives 2, 3, and 4 of the Overweight, Obesity, and Lack of Physical Activity health priority implementation plan.
- One of the essential public health services includes providing leadership in the development of and planning for health and nutrition policies.
- A coordinated effort is needed in Wisconsin to change the current culture, which supports sedentary behavior and regular consumption of oversized food portions. Working with others in groups such as coalitions is a powerful and effective way to address challenging issues and bring about community change (U.S. Department of Health and Human Services, 1999).
- Direct medical costs attributable to obesity amounted to an estimated \$52 billion nationally in 1995. Direct medical costs attributable to physical inactivity amounted to an estimated \$46 billion nationally in 1993. Coordinated state leadership that supports local efforts to promote physical activity and healthy weight among Wisconsin residents could lead to decreased health care costs both in private insurance and state-supported health care (National Institutes of Health; Pratt and Macera, 2000).
- Health care providers have the opportunity to play a vital prevention role through routine assessment, counseling, and anticipatory guidance (U.S. Department of Health and Human Services, 1996; Simon-Morton, 2001).
- Coalitions and/or task forces are a catalyst for community change because they allow individual organizations to become involved in new and broader issues without having the sole responsibility for managing or developing those issues (U.S. Department of Health and Human Services, 1999).

## **Outcomes:**

### **Short-term Outcome Objectives (2002-2004)**

- By December 31, 2002, a statewide coalition (see key partners under inputs below) will be established to address overweight, obesity, and physical activity with a detailed plan for statewide leadership and coordination, including support for the development and activities of local coalition efforts (Bergstron, Clark, Hogue, et al., 1996; Melaville and Blank, 1991; Mattessich and Monsey, 1992; Winer and Ray, 1994; Wisconsin Department of Public Instruction, 2000).
- By December 31, 2003, at least one additional full-time equivalent position, each at the Department of Health and Family Services and the Department of Public Instruction, will be dedicated to addressing physical activity promotion and obesity prevention.
- By December 31, 2004, increase statewide initiatives/events promoting physical activity and healthy weight (e.g., Fitness Day at the Capitol, statewide walking day) to the general public, key leaders, and targeted high-risk populations.

### **Medium-term Outcome Objectives (2005-2007)**

- By December 31, 2005, ensure that the evaluation plan outlined in this document (for all objectives) is implemented.

- By December 31, 2006, implement a statewide multimedia campaign focusing on overweight, obesity, and lack of physical activity with the goal of (National Cancer Institute; Weinruch Communications).
  - Increasing the proportion of adults and youth with knowledge/awareness of the long-term consequences of overweight, how to achieve a healthy weight, and the benefits of physical activity.
  - Increasing the proportion of adults and youth who report motivation to achieve/maintain a healthy weight and increase physical activity.

### **Long-term Outcome Objective (2008-2010)**

- By December 31, 2008, increase the proportion of communities, schools, and other diversity-competent programs/initiatives with access to affordable best-practices programs and materials to promote physical activity and address overweight and obesity.

By December 31, 2008, increase statewide advocacy for legislation and state funding that increases physical activity and prevents/reduces overweight and obesity through:

- Insurance coverage for counseling on weight and physical activity.
- Funding for statewide facilities enhancement (e.g., bike trails, walking paths).
- Providing community-based nutrition and physical activity professionals in every community.
- *While every community has a Registered Dietitian in the Women, Infants and Children Program, this objective would establish access to nutrition services and community-based nutrition initiatives to all populations. In addition, physical activity professionals would be available in the same manner.*
- Supportive school policies and funding.

**Inputs:** (*What we invest – staff, volunteers, time money, technology, equipment, etc.*)

- Funding for hiring staff to support statewide coalition
- Staff time, both at state and local levels, to form and sustain statewide coalition
- Local staff time to form local coalitions
- Funding for statewide coalition operations
- Funding for media campaign
- Funding for local coalition efforts
- Funding to develop, purchase, distribute, and promote best practices programs and materials

### Participation/Reach

- Department of Health and Family Services/Department of Public Health
- Department of Public Instruction
- Legislature
- American Cancer Society
- American Heart Association
- Wisconsin Association for Health, Physical Education, Recreation, and Dance
- Wisconsin Intercollegiate Athletic Association
- Local organization representatives
- Tribal health representatives

- American Council of Exercise
- American College of Sports Medicine
- Wisconsin Strength and Conditioning Association
- Private Corporations
- Foundations
- Health maintenance organizations/healthcare organizations
- Health insurance companies
- Marketing/media
- Institutions of Higher Education
- Healthcare professional organizations, including the Wisconsin Dietetic Association and the Wisconsin Dental Association
- Wisconsin Department of Transportation.

**Outputs:** *(What we do – workshops, meetings, product development, training. Who we reach – community residents, agencies, organizations, elected officials, policy leaders, etc.*

- Develop and facilitate coalition.
- Restructure staffing and/or budget at state level to create/enhance physical activity and obesity prevention programming.
- Provide technical assistance and oversight to local efforts and progress on other objectives to increase physical activity in children, adolescents, and adults.
- Develop and conduct a multimedia campaign to promote physical activity and healthy weight.
- Develop and/or make available affordable best practices materials to promote physical activity and healthy weight.
- Assure diversity competence when promoting physical activity and healthy weight.
- Develop and implement outreach and education campaigns targeting and working with communities with disparate prevalence of overweight, obesity, and lack of physical activity.

### **Evaluation and Measurement:**

The majority of outcomes will be measured by an internal “audit” of the function of the statewide leadership system, to include:

- Statewide coalition formation by end of 2002 with a detailed plan in place and at least these key partners, actively involved:
  - Wisconsin Department of Public Instruction.
  - Wisconsin Department of Health and Family Services, Division of Public Health.
  - Nutrition professional from a nationally-recognized professional association.
  - Physical Activity professional from a nationally-recognized professional association.
  - Local public health department representative.
  - School physical education teacher.
  - Healthcare institution representative.
  - Health insurance company representative.
  - Department of Transportation.
  - School Administrator.

- Physician.
- Citizen representatives from target audiences.
- Key partners should be diverse geographically (urban/rural), ethnically, by age, disability, etc.
- Additional staff dedicated to this area in Department of Public Instruction and Division of Public Health by December 2003.
- Number of initiatives (i.e., Fitness Day at the Capitol) sponsored by the statewide task force per year.
- Number of communities participating.
- Number of persons reached.
- Number of outcomes in this entire plan that are measured through surveys of individual health behaviors, health care systems, and schools.
- Number of program materials acquired or developed.
- Number of local facilities/initiatives using those materials.
- Number of advocacy efforts undertaken by statewide coalition members (e.g., resolutions, legislative contacts)
- Number of communities with local coalitions or similar entities formed to address overweight, obesity, and/or lack of physical activity.

In addition, success of the media campaign will be measured by:

- Reach of the campaign, to include diversity competence, geographic diversity, and age.
- Impact on knowledge, awareness, and motivation measured as part of the media campaign.

### **Crosswalk to Other Health and System Priorities in Healthiest Wisconsin 2010**

*Access to Primary and Preventive Health Services:* Advocacy for enhanced health insurance coverage and expanded health care system capacity for nutrition and physical activity counseling and programs.

*Adequate and Appropriate Nutrition:* Appropriate nutrition is key to preventing overweight and obesity.

*Social and Economic Factors that Influence Health:* Promotional materials and technical assistance that are available free of charge or at low cost to local initiatives.

*Community Health Improvement Processes and Plans:* Supports local health improvement processes that are focusing on promoting physical activity and healthy weight.

*Coordination of State and Local Public Health System Partnerships:* Statewide coalition of all key players and statewide coordination/networking of local initiatives to promote physical activity and healthy weight. Partnership development at the local level.

*Equitable, Adequate, and Stable Financing:* Increased funding dedicated to this major cause of preventable morbidity and mortality.

### **Significant Linkages to Wisconsin's 12 Essential Public Health Services**

*Educate the public about current and emerging health issues:* One key objective is to implement a multimedia campaign which educates the public about the long-term consequences of overweight, how to achieve a healthy weight, and the benefits of physical activity. In addition, the advocacy for policy change will include education of decision-makers.

*Promote community partnerships to identify and solve health problems:* The central part of this objective is to form a statewide coalition of all key partners in order to coordinate the work within this objective and to raise the perceived importance and visibility of this issue at the state level.

*Create policies and plans that support individual and community health efforts:* On the broadest level, this objective includes the development and implementation of a detailed plan for statewide leadership on this issue. Specifically, it also includes the development of insurance coverage for services related to weight and physical activity, and the establishment of school policies related to overweight, obesity, and lack of physical activity.

*Evaluate effectiveness, accessibility, and quality of personal and population-based health services:* The establishment of an evaluation plan for all the outcomes described in this objective is a goal of the statewide coalition for 2004-2008.

*Assure access to primary health care for all:* The objective specifically targets increasing the number of communities with access to affordable programs.

### **Connection to the Three Overarching Goals of Healthiest Wisconsin 2010**

*Protect and promote health for all:* Health promotion is central to this objective and it is comprehensive in its scope. Focus on communities with a disparate prevalence of overweight, obesity, and lack of physical activity is included.

*Eliminate health disparities:* The leadership of this objective are charged with assuring that communities have programs or initiatives that have diversity competence. In addition, diversity competence is integral to all aspects of this health promotion and specific campaigns targeting communities with a disparate burden are recommended.

*Transform Wisconsin's public health system:* This goal seeks to transform the public health system in Wisconsin by coordinating and strongly increasing the focus on overweight, obesity, and lack of physical activity prevention efforts.

### **Key Interventions and/or Strategies Planned:**

A statewide coalition will be established to address overweight, obesity, and physical activity with a detailed plan for statewide leadership and coordination, including support for the development and activities of local coalition efforts. Among other partners, key members of the coalition will be the Wisconsin Department of Public Instruction and the Wisconsin Division of Public Health.

Some of the strategies the statewide coalition will use include increasing statewide initiatives/events promoting physical activity and healthy weight, implementing a statewide

multimedia campaign, and increasing statewide advocacy for legislation and state funding that increases physical activity and prevents/reduces overweight and obesity.

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