## Obesity in Clark County

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Presented to: Legislative Committee on Health Care Subcommittee to Study Medical and Societal Costs and Impacts of Obesity

	ee Name <b>OBESITY</b> Document co e document provided.	nsists of 21 pages.			
Due	to size limitations, pages	provided. A			
copy of the complete document is available through the Research Library (775/684-6827) or e-mail <a href="mailto:library@lcb.state.nv.us">library@lcb.state.nv.us</a> ).					
Meeting Date <u>11-03-03</u>					

#### **Outline**

- Clark County Obesity Related Data
  - Leading Causes of Death, Clark County 2000
  - BRFSS
  - 2002 PRC Community Health Survey
- Disparities in Obesity Related Disease Rates in Clark County
  - BRFSS Data for Selected Zip Codes 89030, 89104, 89106, 89109, 89119
  - CCHD School Based Health Center Data
- New Emerging CCHD Programs addressing obesity

# Obesity Related Deaths in Clark County, 2000

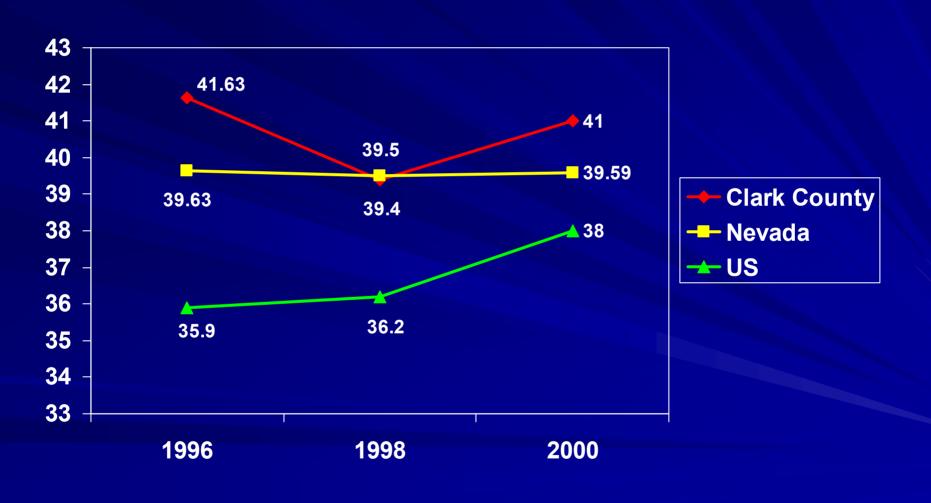
	Heart	Stroke	Diabetes Mellitus	Athero- sclerosis	Total
% of obesity related deaths in Clark County	27%	5.7%	1.7%	.3%	34.6%
% of obesity related deaths in Nevada	26.9%	5.7%	1.8%	.7%	35.0%

## **BRFSS Obesity Related Data**

1996-2001

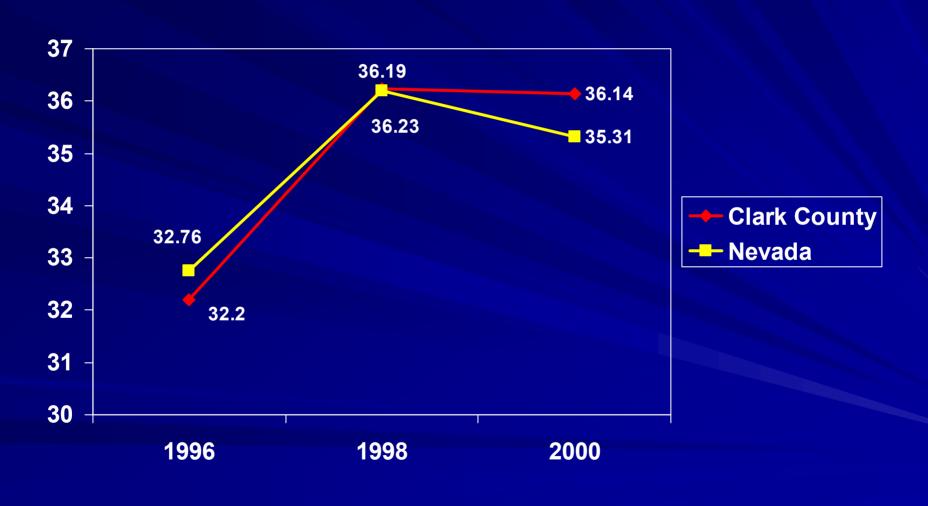
### BRFSS 1996-2000 (percents)

Trying to Lose Weight



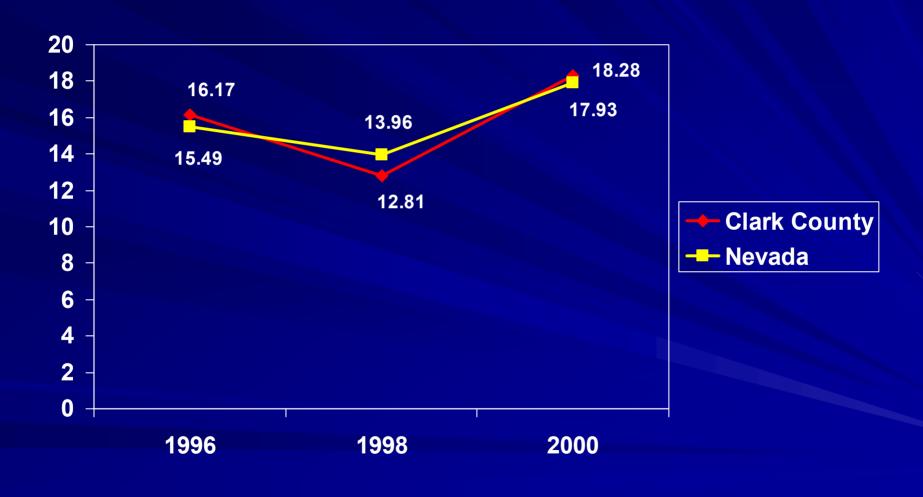
### BRFSS 1996-2000 (percents)

#### Overweight



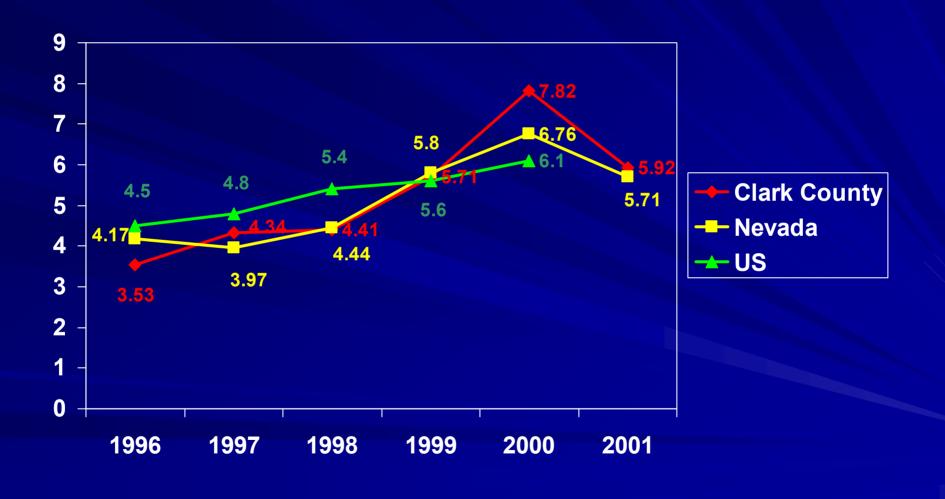
### BRFSS 1996-2000 (percents)

Obese



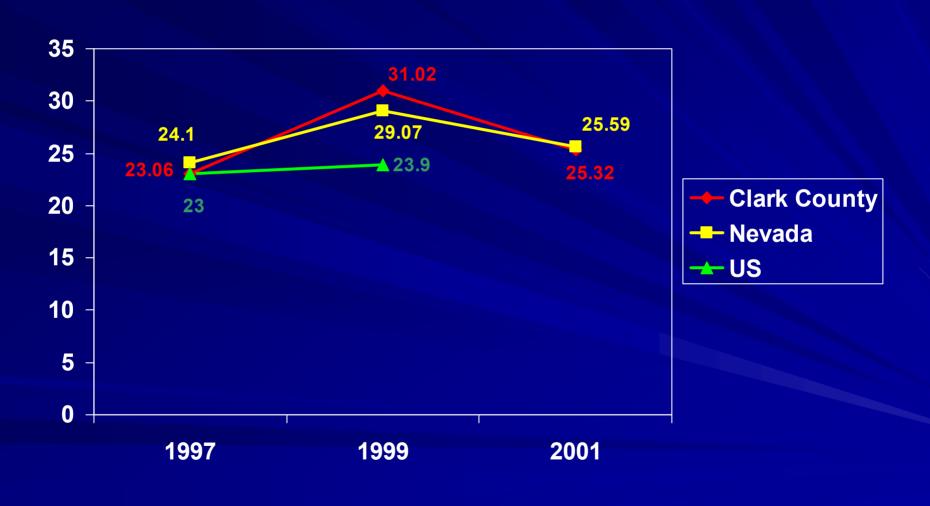
### BRFSS 1996-2001(percents)

#### **Diabetes**



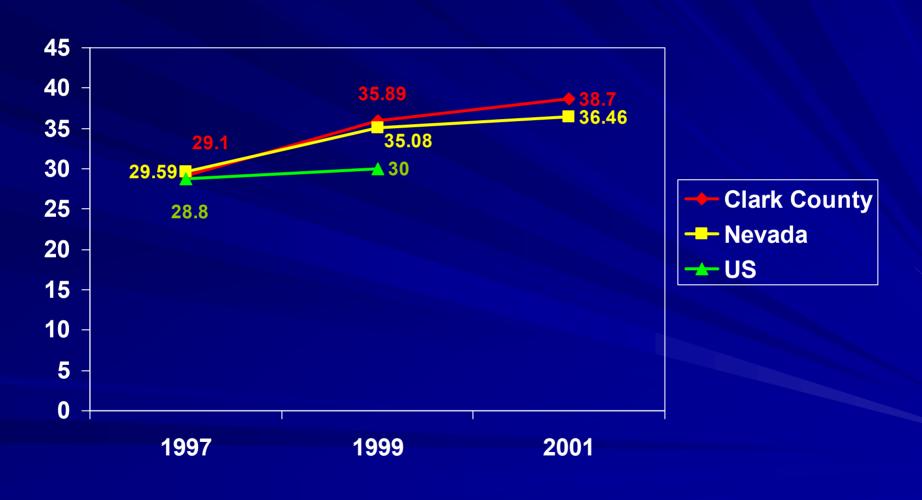
### BRFSS 1997-2001 (percents)

#### **Told Have Hypertension**



### BRFSS 1997-2001 (percents)

**Told Have High Cholesterol** 



### 2002 Professional Research Consultants Community Health Survey for Clark County, NV

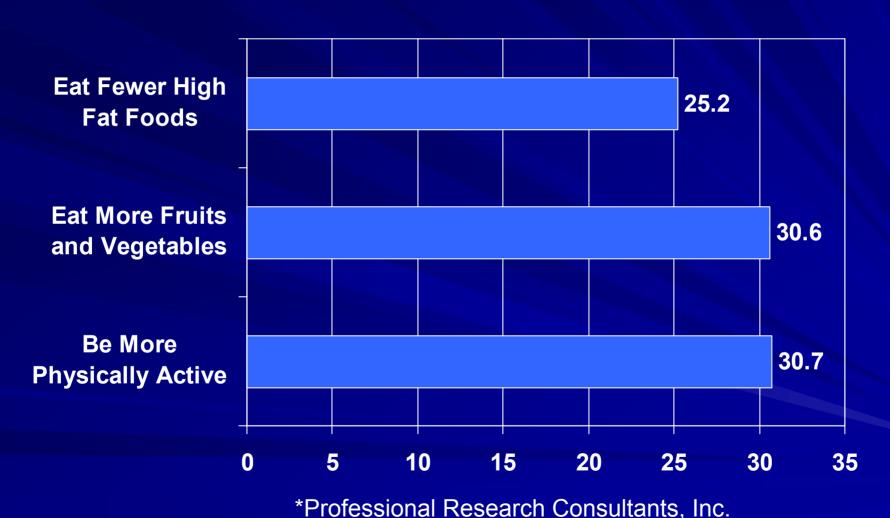
- Randomized telephone survey of the health and behaviors of community members
- Benchmark data (national and state) provide a point of reference to compare survey results
- Sample Design 750 individuals aged 18 and older, weighted data 2000/2005 projected census data

## 2002 Clark County Community Health Survey Highlights\*

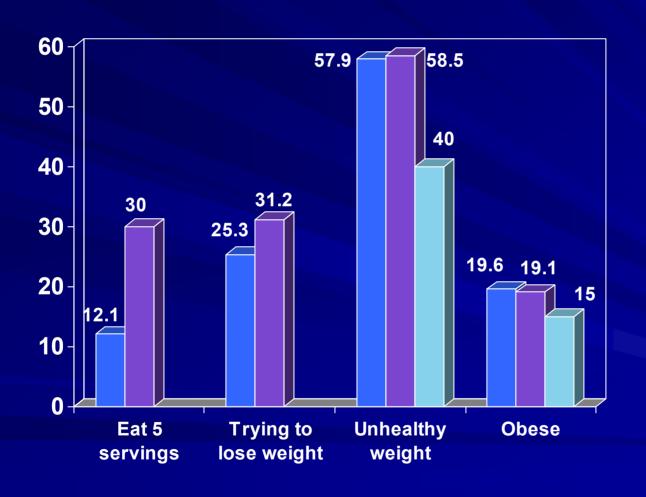
- Clark County residents who are overweight are less likely to be trying to lose weight with diet and exercise than the national average.
- Clark County adults are less likely to eat five or more fruits and vegetables daily than adults nationwide.

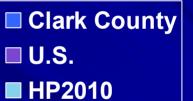
<sup>\*</sup>Professional Research Consultants, Inc.

## Advice Received from Health Care Professionals\*



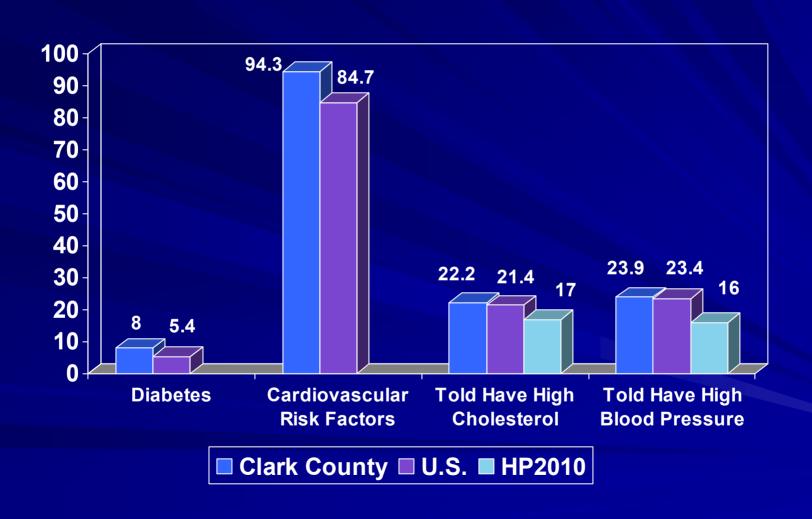
## Community Health Survey Nutrition Data





## Community Health Survey

**Obesity Related Chronic Conditions** 



### Disparities in Obesity Related Diseases in High Risk Geographic Areas of Clark County (89030, 89101, 89104, 89106, 89109 and 89119)

- Highest concentration of Latinos in 89030 (63%)
- Highest concentration of African Americans in 89106 (45%)
- Over 63% of residents living in target zip codes are minorities
- Only 34.5% live in a single family home compared to 56.3% for all of Clark County
- Higher prevalence of diabetes (7.1%) and obesity (25.9%) compared to state and national

# Disparities in Obesity Rates in Clark County

2000 BRFSS Items	*Target Area	NV	Clark County	US
BMI Normal	40.8%	46.76%	45.58%	43.20%
BMI Overweight	30.30%	35.31%	36.14%	36.70%
BMI Obesity	25.90%	17.93%	18.28%	20.10%
Ever told by a doctor you have diabetes?	7.10%	6.76%	7.82%	6.10%
Participated in Physical Activity	66.90%	75.05%	74.09%	73.10%

## CCHD School Based Health Center Health Education Program

- Serves 15,000 students in 10 high risk schools. High risk schools are located in communities with a high rate of poverty, disparities in access to health services and health education.
- 82% of these children qualify for the Free/Reduced Lunch program.
- ■61.7% Hispanic

## Clark County Health District Health Education Obesity Related Programs

- Healthier Steps (Department of Health and Human Services 2003)
  - Five year program to create healthier communities by improving the lives of Clark County residents in the targeted zip codes through tobacco, nutrition and physical activity interventions that will impact obesity, diabetes and asthma.

#### Goals:

- Prevent new cases of diabetes
- Prevent development of obesity
- Prevent need for hospitalization for asthma

## Chronic Disease Program – Building Capacity 2003-2006

- Goal: Reduce prevalence of chronic diseases by promoting healthy lifestyles and policy change.
- Increase funding resources and infrastructure for the Clark County Chronic Disease Program.
- Enhance existing and develop new collaboration and partnerships with other agencies with common goals.
- Work with the state and the Clark County Health District's Office of Epidemiology to increase the information made available to the public on the burden of chronic disease.
- Increase chronic disease prevention programs in Clark County work sites.
- Increase participation in physical activity and nutrition programs by raising awareness of these programs in the community.

## SBHC Health Education Programs

- Focus on Nutrition
- Working with students and School Food Service to market healthier items to students and to make the healthier items more appealing to students. (70% of students eat pizza at least 3 times per week)
- Action for Healthy Kids Goals
  - Provide an adequate amount of time for students to eat school meals, and schedule lunch periods at reasonable hours around midday
  - Provide all children with quality daily physical education.