Alaska Obesity Prevention & Control Program
2010-2011 Status Report

Publication Date: November 2011

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The Alaska Obesity Prevention and Control Program, 2010 Status Report was funded in part by the Centers for Disease Control and Prevention, Grant No. 1U58DP001955-01, and it was produced by the Alaska Department of Health and Social Services. The online version of this document was produced at a cost of $0.0 in Juneau, Alaska.
**INTRODUCTION**

Overweight and obesity affect Alaskans of all ages, from all areas of the state, across all levels of education and income, and of all racial and ethnic backgrounds. The dramatic increase in overweight and obesity prevalence that occurred over the past 18 years will have lasting financial and health impacts on individuals and the healthcare system for decades to come.

Overweight and obesity are determined by calculating Body Mass Index (BMI) from a person’s weight and height. BMI provides a reliable indicator of body fatness for most people and it is used to screen for categories of weight status that may lead to health problems. A five foot five inch women weighing more than 180 pounds would be considered obese. A five foot ten inch male weighing more than 209 pounds would be considered obese.

**Percentage of Adults Who Are Obese (BMI \( \geq 30.0 \)):** Alaska and the U.S.

- Alaska adult obesity prevalence trends since 1991 mirrors the U.S. trend
- Adult obesity prevalence has doubled from 13% in 1991 to 27% in 2010
- The Healthy Alaskans 2010 target of 18% was not met

**Alaska Medicaid Spending Projection Attributable to Obesity (in Millions), Assuming Increase in Obesity Prevalence**

A significant amount of obesity’s costs are borne by Medicaid, and these costs are only expected to rise along with predicted increases in Medicaid enrollment and obesity prevalence. By 2030, Alaska may be paying close to $300 million per year just for the state’s share of Medicaid dollars needed to cover direct medical costs of obesity.
THE ALASKA OBESITY PREVENTION AND CONTROL PROGRAM (OPCP)

This status report describes the accomplishments of the Alaska Obesity Prevention and Control Program (OPCP) from 2010 through 2011; the report also details the opportunities and challenges the state is facing in preventing overweight and obesity in Alaska.

The State of Alaska OPCP is working to make regular physical activity, good nutrition, and healthy weight a part of every Alaskan’s life. The Alaska OPCP prevents and controls obesity and related chronic diseases through evidence-based, public health strategies recommended by the Centers for Disease Control and Prevention (CDC). The principle target areas are:

- Decreased consumption of sugar-sweetened beverages
- Decreased consumption of high calorie foods
- Decreased television viewing
- Increased physical activity
- Increased consumption of fruits and vegetables
- Increased breastfeeding initiation, duration and exclusivity

The Alaska OPCP advances these objectives by providing credible information about evidence-based obesity prevention strategies, programs, and opportunities for health professionals, partner agencies, individuals and the media.

In coordination with the CDC, the Alaska OPCP reports on the prevalence of overweight, obesity and the behaviors and risk factors that contribute to obesity. This helps community coalitions and partners identify health problems, track health outcomes, and evaluate effectiveness of programs.

"Many people believe that overweight and obesity is a personal responsibility. To some degree they are right, but it is also a community responsibility. When there are no safe accessible places for children to play or adults to walk, jog or ride a bike, that is a community responsibility. When school lunch rooms and office cafeterias do not provide healthy and appealing food choices, that is a community responsibility. When new or expectant mothers are not educated about the benefits of breastfeeding, that is a community responsibility. When we do not require daily physical education in our schools, that is also a community responsibility. There is much that we can and should do together."

~ David Satcher, MD, Ph.D.
16th Surgeon General of the United States

THE SURGEON GENERAL’S CALL TO ACTION TO PREVENT AND DECREASE OVERWEIGHT AND OBESITY, 2001
INNOVATIVE INITIATIVES

Alaskans Taking on Childhood Obesity

Alaskans Taking on Childhood Obesity is chaired by the State of Alaska’s Chief Medical Officer, Dr. Ward Hurlburt. The OPCP staff provide the nutrition and physical activity expertise to support ATCO’s efforts.

ATCO’s members include commissioners from Health and Social Services and Education & Early Development, the Anchorage School District superintendent, and representatives from the Alaska Native Tribal Health Consortium, the Alaska State Senate, and the Alaska Association of School Boards.

ATCO’s priority recommendation is to develop a school-based grant program to enable districts to increase the physical activity levels of school children by improving quality physical education and physical activity during and outside of the school day.

ATCO established a memorandum of agreement between the Departments of Health and Social Services and Education & Early Development, to ensure a coordinated approach to preventing childhood obesity. Together the departments are seeking funding to implement ATCO’s priority recommendation.

LEADING FOOD SYSTEM CHANGE

Alaska Food Policy Council

The Alaska OPCP established and is providing the leadership and nutrition expertise for the Alaska Food Policy Council (AFPC). Eighty AFPC members representing federal, state, non-governmental agencies and businesses met in the spring of 2010 to address top policy priorities to strengthen Alaska’s food systems and improve our economy, security and health.

The AFPC aims to expand Alaska’s food production; improve supply and distribution of locally grown and produced products; decrease hunger; support the use of traditional and local foods; and increase nutrition literacy of consumers.

The AFPC has been effective in connecting people, focusing attention on our food system challenges, and elevating policy as a strategy for strengthening Alaska’s food system. During the 2011 summer, the OPCP pilot tested a farmers’ market Food Stamp project in two markets (Homer and the Anchorage Spenard Market). The purpose of this project is to determine the feasibility of using Food Stamp Electronic Benefit Transfer (EBT) cards (known as “Quest” cards in Alaska) at farmers’ markets, thereby making healthy, local products more accessible to low income Alaskans and increasing overall farmers’ market sales.

“The impact of obesity is reflected in Alaska’s concurrent epidemics of diabetes, heart disease, and other chronic diseases and has led to the national projection; that due to obesity, today’s children may be the first generation to have a shorter life expectancy than their parent’s generation.”

~Ward Hurlburt, MD, MPH
Alaska Chief Medical Officer
In October, the OPCP and the Department of Education & Early Development (EED) co-hosted the Moving into Action: Combating Childhood Obesity training. The 3-day training provided education and encouragement to school-based teams on the development and implementation of action plans to address obesity in their schools. Participants developed school-based plans to increase physical activity before, during and after the school day; to promote quality physical education; and to increase understanding and use of effective nutrition education programming.

**EDUCATING THE PUBLIC, MEDIA, CHILDCARE PROVIDERS AND HEALTH PROFESSIONALS**

**Education of the Public and Media**

Reports, publications, and efforts of the Alaska OPCP were highlighted over a dozen times in print, on the radio, and on television. Topics ranged from the health benefits of fruits and vegetables to obesity rates at the state, local, and school district levels.

**Creation of eLearning Course**

The OPCP and the EED’s Child Nutrition Services developed a web-based interactive training course for early childcare providers interested in improving physical activity and nutrition in his/her childcare center. Sixty-five learning modules were completed by childcare providers representing 10 regions of the state.

“Learning at the School Health and Wellness Institute about how Dillingham was able to serve Bristol Bay salmon to their students once a week inspired Kodiak’s Healthy Tomorrow coalition to achieve the same for our students”

~Betsy Lund
Wellness Coordinator
Kodiak Island Borough School District

Representative Holmes and Senators Wielechowski and McGuire participated in an interactive forum during the 2010 School Health and Wellness Institute. Panelists addressed school health issues including the significance of childhood obesity and school based solutions. (October 2010)

**Facilitation of Professional Development**

Presented evidenced-based obesity prevention and control strategies to professional organizations including the following:

- Alaska Health Care Commission
- U-Med Green District Partnership
- Public Health Nurses Conference
- Alaska Student Nutrition Association
- Maternal Child Health and Immunization Conference
- Alaska Public Health Association Annual Summit
- Alaska Dietetic Association Conference
- School Health & Wellness Institute
- Community Health Aides Instructor Convocation

**Development of Health Workforce**

- Provided multiple Alaska graduate students technical assistance and expertise in the selection and development of thesis projects.
- Presented evidence-based nutrition strategies to University of Alaska, Anchorage students.
The OPCP received one-time funds from two sources for the state fiscal year 2012 (SFY12). The department invested a portion of its one-time performance bonus from the federal Children’s Health Insurance Program to support a childhood physical activity promotion social marketing campaign. The state invested capital funds to increase the quality of physical education and to promote student physical activity before, during and after school.

The remaining capital funds will support efforts to address disparate populations. The Farmers’ Market Quest Card project will be expanded to improve availability of affordable fruits and vegetables to low income families. The OPCP will also work with partners to promote traditional Alaska Native foods and farm-to-school initiatives.

While these activities are expected to have a short-term impact, decreasing childhood obesity will require a sustained, comprehensive, long term approach that involves individuals, families, communities, schools, health care providers and the media.
LESSONS LEARNED FROM TOBACCO PREVENTION

Great strides have been made in reducing tobacco use through a sustained comprehensive approach. As recommended by the CDC, a successful and comprehensive obesity prevention program utilizes methods similar to those used to prevent and control tobacco including:

- Local community coalitions that engage a wide variety of stakeholders.
- Evaluation of the success of prevention efforts and surveillance of obesity and contributing behaviors.
- Media and marketing to establish healthy social norms.
- Skilled staff to manage and administer the interventions that includes a program manager, a nutrition expert, and a physical activity expert.

COMPARISON OF PREVENTION STRATEGIES BETWEEN TOBACCO AND OBESITY

The following table shows some successful tobacco prevention strategies that can be transferred to obesity prevention.

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<thead>
<tr>
<th>What Worked for Tobacco Prevention</th>
<th>What Will Work for Obesity Prevention?</th>
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<tbody>
<tr>
<td><strong>Change Price</strong></td>
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<tr>
<td>• Increase price of tobacco</td>
<td>• Increase cost of unhealthy foods</td>
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<tr>
<td></td>
<td>• Decrease cost of healthy foods</td>
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<tr>
<td><strong>Limit Exposure</strong></td>
<td></td>
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<tr>
<td>• Reduce kids’ access to tobacco</td>
<td>• Increase access to healthy foods</td>
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<tr>
<td>• Reduce secondhand smoke exposure</td>
<td>• Increase access to recreation areas</td>
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<td></td>
<td>and non-motorized transportation</td>
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<td></td>
<td>• Decrease access to junk food</td>
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<td><strong>Change the Image</strong></td>
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<tr>
<td>• Reduce tobacco advertisements</td>
<td>• Reduce unhealthy food advertisements</td>
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<tr>
<td>targeting kids</td>
<td>targeting kids</td>
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<tr>
<td>• Clearly communicate harms</td>
<td>• Clearly communicate harms</td>
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In Alaska, declines in adult smoking prevalence only became apparent following a significant, sustained investment in a comprehensive, evidence-based approach. It is likely that a similar approach will be needed to reverse the obesity epidemic.
Establishing a comprehensive obesity prevention initiative with sustained adequate funding in Alaskan communities statewide is necessary to reverse the annual 1% rise in adult obesity and overweight prevalence. Since adult physical activity and nutrition behaviors are established during childhood, the AK OPCP believes a childhood obesity prevention initiative would have the greatest impact. The components of this initiative include the following:

**Establish a Grantee Community Coalition Program** Fund community-based staff to develop and sustain coalitions focused on improving the local nutrition and physical activity environment.

**Develop a Public Education Campaign** Use proven health communications and social marketing approaches to encourage and assist Alaskans to make personal choices for a healthy, active life. The campaign would be coordinated statewide to strengthen the messages and efforts of the grantee communities.

**Provide Professional Development for Education and Health Professionals** Provide training to professionals who work with Alaska’s children to learn the most recent evidence-based strategies to prevent and reduce obesity.

**Evaluate Program and Grantee Efforts** Maintain systematic collection, analysis, evaluation and reporting of obesity prevalence and related physical activity and nutrition behaviors. Provide needed technical assistance, training, and analysis to interested school districts so they can assess and track the extent of overweight and obesity among their student population. Program evaluation is essential to determine progress and better target limited resources.

**Provide Administration and Management** Sufficient capacity within a state health department will enable the Alaska OPCP to plan strategic efforts, provide strong leadership, provide good fiscal management and accountability of community grants, and foster collaboration among the state and community coalitions in a way that reduces duplication of effort among partners. An adequate number of skilled staff is also necessary to provide program oversight, technical assistance, and training for the community grantees, the public, and for professional development of partners.

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**ALASKA FACTS**

1% increase each year... The percentage that prevalence of overweight or obese Alaska adults has increased each year since 1991.

26% of Alaska High School Youth... The percentage of Alaska High School Youth who are overweight or obese - AK YRBS 2009.

79% of Alaskans support... Percentage of Alaskans who support or strongly support a government-funded obesity prevention media campaign.

95% of Alaskans agree... The percentage of Alaskans who believe that parents and individuals have some and/or a lot of responsibility for addressing obesity.

$10.3 million... The amount of money spent by the State of Alaska due to overweight and obese employees.
PARTNERSHIPS

In addition to the coordinated efforts between the Alaska OPCP and the Department of Education & Early Development the program collaborates with non-governmental and governmental organizations representing families, business, communities, schools, childcare centers, worksites, health care providers, and media. These partnerships with the following organizations and agencies are critical to implementing strategic public health efforts to prevent and control obesity.

COMMUNITY & LOCAL
Alaska Association of Health, PE, Recreation, and Dance
Alaska AARP
Alaska Association of School Boards
Alaska Center for the Environment
Alaska Dental Society
Alaska Farm Bureau
Alaska Farmers Union
Alaska Health Fair, Inc.
Alaska Native Tribal Health Consortium
Alaska Parent Teacher Association
Alaska Parish Nurses
Alaska Public Health Association
Alaska School Board Association
Alaska School Nurses Association
Alaska School Nutrition Association
All Alaska Pediatric Partnership
Alliance for a Healthier Generation
American Academy of Pediatrics - Alaska Chapter
American Cancer Society
American Diabetes Association
American Heart Association
Arctic Slope Native Association
Food Bank of Alaska
Green Star
Ionia, Inc.
Premera Blue Cross of Washington and Alaska
Providence Alaska Medical Center
Rosie Creek Farm
Southeast Alaska Regional Health Corporation
Southern Kenai Peninsula Communities Project
Tanana Chiefs Conference - Department of Health Services
U-Med Green District Partnership
Ugashik Village

LOCAL GOVERNMENT & SCHOOLS
Municipality of Anchorage
Health & Human Services Health Commission
Parks Foundation
Parks & Recreation
Planning Department
Traffic
School Districts
Anchorage
Juneau
Kenai Peninsula Borough
Kodiak Island Borough
Matanuska Susitna Borough

STATE OF ALASKA
Department of Administration
Division of General Services
Department of Commerce, Community & Economic Development
Division of Economic Development
Department of Education & Early Development
Child Nutrition Services
Head Start Collaboration Office
Teaching and Learning Support
Department of Environmental Conservation
Department of Fish and Game
Department of Health and Social Services
Injury Prevention and Emergency Medical Services
Public Health Nursing
Women Infant & Children Program
Women’s, Children’s and Family Health
Department of Transportation
Safe Routes to School
Division of Agriculture
Division of Public Assistance
University of Alaska Anchorage
Culinary Arts & Hospitality/Dietetics & Nutrition
Department of Health, Physical Education & Recreation
University of Alaska Fairbanks
Center for Alaska Native Health Research
Center for Cross-Cultural Studies
Cooperative Extension Services
Institute of Arctic Biology
Marine Advisory Program
School of Natural Resources and Agricultural Sciences
Troth Yeddha’ Nutrition Program

NATIONAL ASSOCIATIONS
Association of State and Territorial Public Health Nutrition Directors
Council of Fruit and Vegetable Nutrition Coordinators
National Association of Chronic Disease Directors
National Society of Physical Activity Practitioners
Western Maternal Child Health Nutrition Leaders

FEDERAL
Bureau of Land Management
Chugach National Forest
National Park Service
Fish and Wildlife Service
USDA Alaska Farm Service Agency

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