

Recommended Community Strategies and Measurements to Prevent Obesity in the United States

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Summary

Approximately two thirds of U.S. adults and one fifth of U.S. children are obese or overweight. During 1980–2004, obesity prevalence among U.S. adults doubled, and recent data indicate an estimated 33% of U.S. adults are overweight (body mass index [BMI] 25.0–29.9), 34% are obese (BMI ≥30.0), including nearly 6% who are extremely obese (BMI ≥40.0). The prevalence of being overweight among children and adolescents increased substantially during 1999–2004, and approximately 17% of U.S. children and adolescents are overweight (defined as at or above the 95% percentile of the sex-specific BMI for age growth charts). Being either obese or overweight increases the risk for many chronic diseases (e.g., heart disease, type 2 diabetes, certain cancers, and stroke). Reversing the U.S. obesity epidemic requires a comprehensive and coordinated approach that uses policy and environmental change to transform communities into places that support and promote healthy lifestyle choices for all U.S. residents. Environmental factors (including lack of access to full-service grocery stores, increasing costs of healthy foods and the lower cost of unhealthy foods, and lack of access to safe places to play and exercise) all contribute to the increase in obesity rates by inhibiting or preventing healthy eating and active living behaviors. Recommended strategies and appropriate measurements are needed to assess the effectiveness of community initiatives to create environments that promote good nutrition and physical activity. To help communities in this effort, CDC initiated the Common Community Measures for Obesity Prevention Project (the Measures Project). The objective of the Measures Project was to identify and recommend a set of strategies and associated measurements that communities and local governments can use to plan and monitor environmental and policy-level changes for obesity prevention. This report describes the expert panel process that was used to identify 24 recommended strategies for obesity prevention and a suggested measurement for each strategy that communities can use to assess performance and track progress over time. The 24 strategies are divided into six categories: 1) strategies to promote the availability of affordable healthy food and beverages, 2) strategies to support healthy food and beverage choices, 3) a strategy to encourage breastfeeding, 4) strategies to encourage physical activity or limit sedentary activity among children and youth, 5) strategies to create safe communities that support physical activity, and 6) a strategy to encourage communities to organize for change.

Introduction

Obesity rates in the U.S. have increased dramatically over the last 30 years, and obesity is now epidemic in the United States. Data for 2003–2004 and 2005–2006 indicated that approximately two thirds of U.S. adults and one fifth of U.S. children were either obese (defined for adults as having a body mass index [BMI] ≥30.0) or overweight (defined for adults as BMI of 25.0–29.9 and for children as at or above the 95%

percentile of the sex-specific BMI for age-growth charts) (1,2). Among adults, obesity prevalence doubled during 1980–2004, and recent data indicate that an estimated 33% of U.S. adults are overweight and 34% are obese, including nearly 6% are extremely obese (defined as BMI ≥40.0) (3,4). Being either obese or overweight increases the risk for many chronic diseases (e.g., heart disease, type 2 diabetes, some cancers, and stroke). Although diet and exercise are key determinants of weight, environmental factors beyond the control of individuals (including lack of access to full-service grocery stores, high costs of healthy foods, and lack of access to safe places to play and exercise) contribute to increased obesity rates by reducing the likelihood of healthy eating and active living behaviors (5–7).

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