

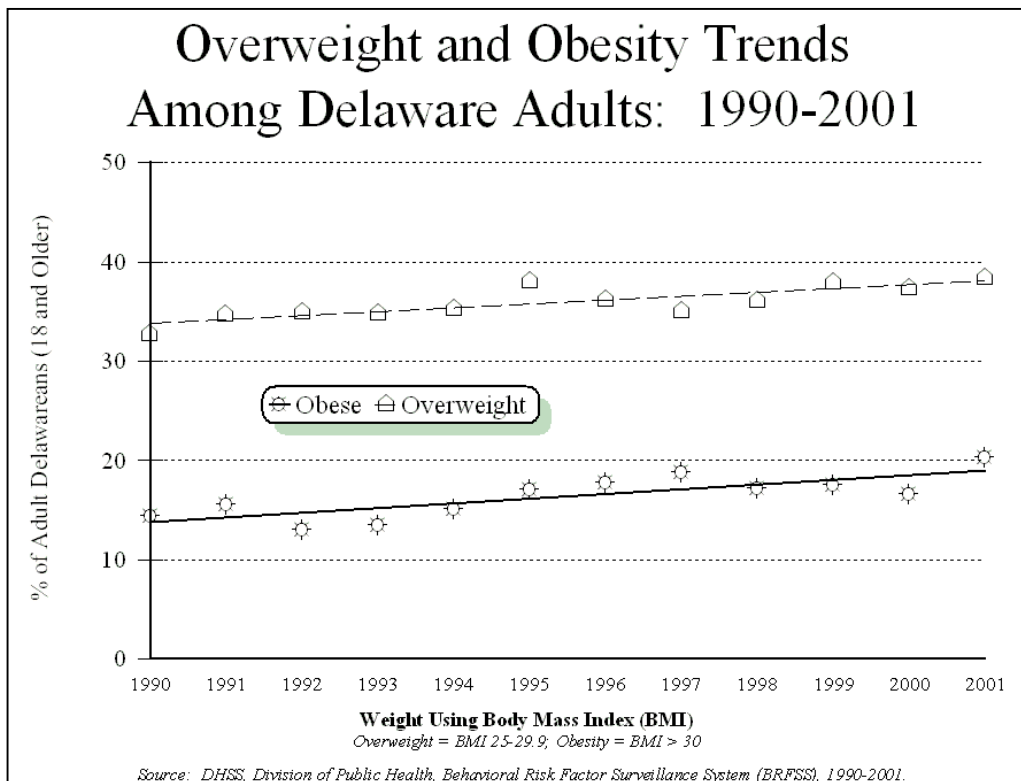
Chapter 1

What's The Problem?

Physical inactivity, overweight and obesity are major causes of chronic disease and premature death in Delaware and the nation.

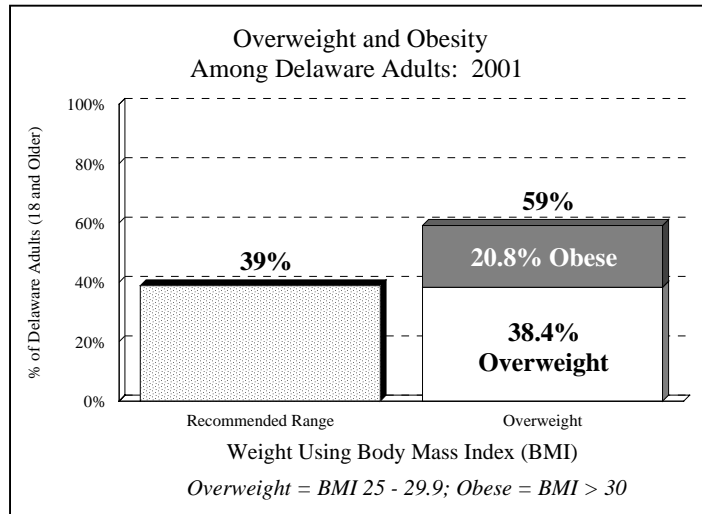
In his 2001 *Call to Action to Prevent and Decrease Overweight and Obesity*, then Surgeon General David Satcher pointed out that overweight and obesity “have reached epidemic proportions in the United States.” According to the document, about 300,000 deaths a year in this country are associated with overweight and obesity – making it the second leading cause of premature death. Only tobacco kills more Americans.

Trends in Delaware, as in the rest of the country, are moving in the wrong direction. The chart below, from Delaware’s annual Behavioral Risk Factor Survey, shows a steady increase in both overweight and obesity among Delaware adults in the past 12 years. In 2001, the prevalence of obesity rose to an all-time high of 20.8% of adults age 18 and older.



Almost 60% of Delaware adults are either overweight or obese, using body mass index (BMI) calculations. Only 39% of adults in our state are within the recommended weight range; and only about 2% are below their recommended weight.

Obesity is more common in Kent County than in either New Castle or Sussex. It also becomes more prevalent with age. Only 9.5% of young adults (18-24) are obese, but the prevalence rises steadily with age to a peak of 31% of adults age 55-64. Among adults age 65 and older, the prevalence drops to 21%.



Disparities

The National Cancer Institute (NCI) initiated a campaign in the fall of 2002 to address the issues of disparity among racial and ethnic groups, especially focusing on diet and African American men. According to NCI, African American men have a “greater chance of dying from many chronic diseases than their Latino, Caucasian, Asian/Pacific Islander, and Native American brothers.” The Institute points out that Black men eat fewer fruits and vegetables than any other group, and are less likely to realize that a diet high in fruits and vegetables can reduce their risk for disease.

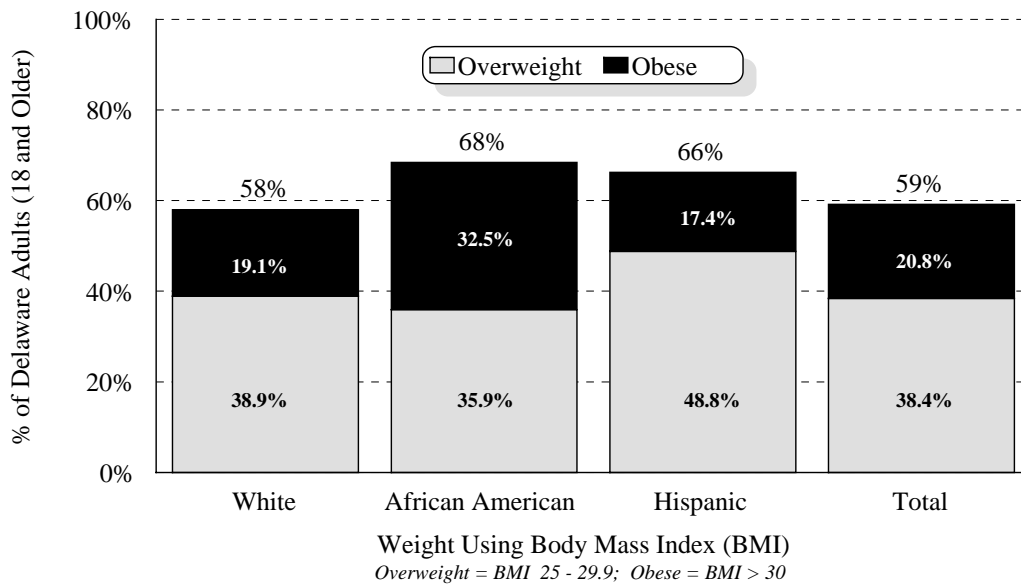
In Delaware, there is also a significant disparity between non-Hispanic white adults and African Americans. About 19% of white adults are obese, compared with 32.5% of African Americans.

The top graph on the next page shows the disparity among population groups in Delaware. The most notable disparity shown is the higher proportion of obesity among Delaware African Americans.

Obesity increases the risk for chronic diseases such as cardiovascular disease and type 2 diabetes. According to the Delaware Division of Public Health’s 2002 report on ***The Burden of Diabetes in Delaware***, “African Americans have a higher rate of diabetes than other racial/ethnic groups. . . . Obesity and lack of exercise are associated with increased incidence of type 2 diabetes, and may cause it.”

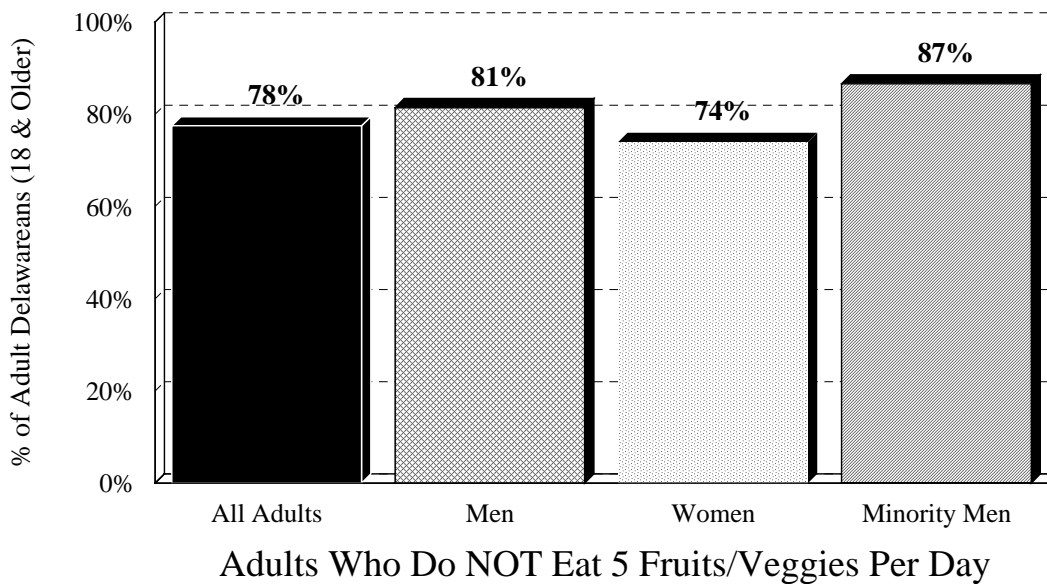
In keeping with the national data reported by NCI, minority men in Delaware eat fewer servings of fruits and vegetables than other groups (see bottom graph on page 3).

Overweight and Obesity By Race and Ethnicity: 2001



Source: DHSS, Division of Public Health, Behavioral Risk Factor Survey (BRFSS), 2001.

Delaware Adults at Risk -- Inadequate Fruit and Vegetable Consumption: 2000

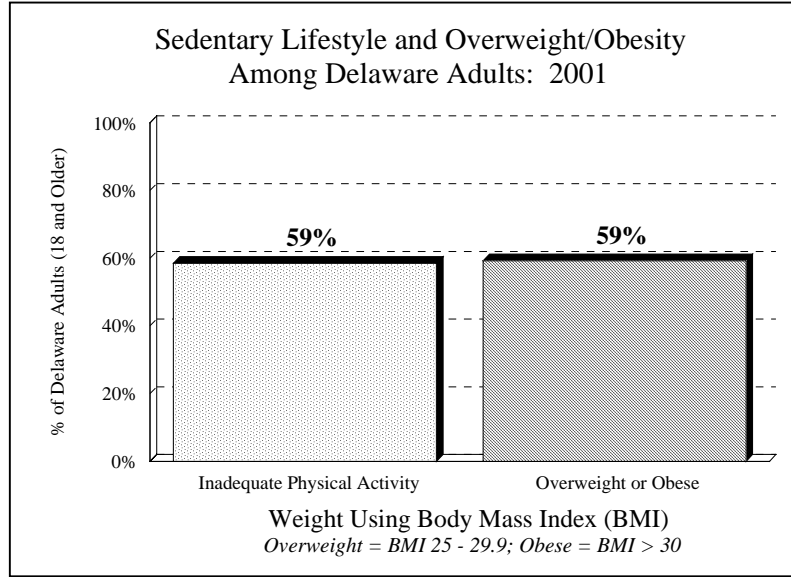


Source: DHSS, Division of Public Health, Behavioral Risk Factor Surveillance System (BRFSS), 2000.

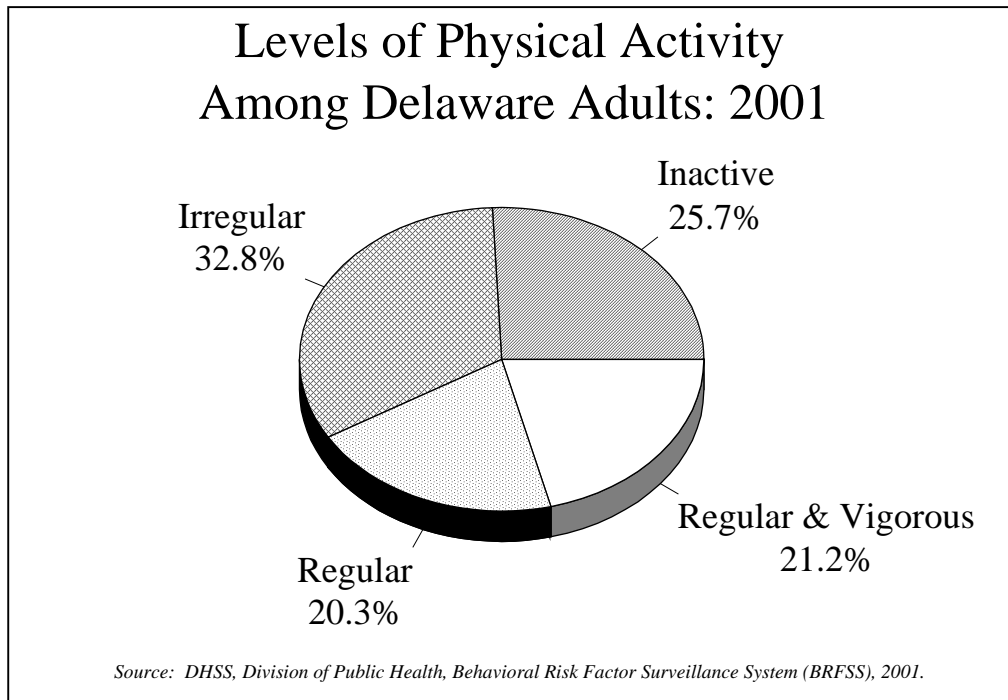
Physical Activity

It is not surprising that 58.5% – nearly the same as the percent of overweight and obese adults – get little or no regular physical activity.

There is a strong correlation between lack of physical activity and the prevalence of overweight and obesity. The graph below does not show a cause-effect relationship for every individual. Overweight individuals may be getting adequate physical activity, especially those trying to lose weight. Normal weight individuals may be sedentary. However, if they are sedentary they have increased risk of future cardiovascular and/or weight problems.



Prevalence of **regular, moderate physical activity** in Delaware has been declining since Delaware began collecting behavioral data in 1990. During the 1990s, the prevalence of regular, moderate leisure-time activity among Delaware adults **dropped from 35.6% to 28%**.



According to the 2001 Behavioral Risk Factor Survey, only 20.3% of Delaware adults 18 and older get “regular and moderate” physical activity; another 21% get “regular and vigorous” exercise, roughly equivalent to aerobic activity (see chart on page 4). The bad news is that most adults in our state are essentially sedentary – that is, they get either no exercise or irregular activity that does not provide health benefits.

Youth Exercise and Nutrition

The Delaware Department of Education conducts a Youth Risk Behavior Survey (YRBS) in odd-numbered years. The YRBS currently supplies the only youth data available in the state on physical activity, dietary habits and other behavioral risks. In 2002, the Division of Public Health added a nutrition and physical activity module to its Youth Tobacco Survey, which includes public middle school students. The first middle school data will be available in late 2002 or early 2003.

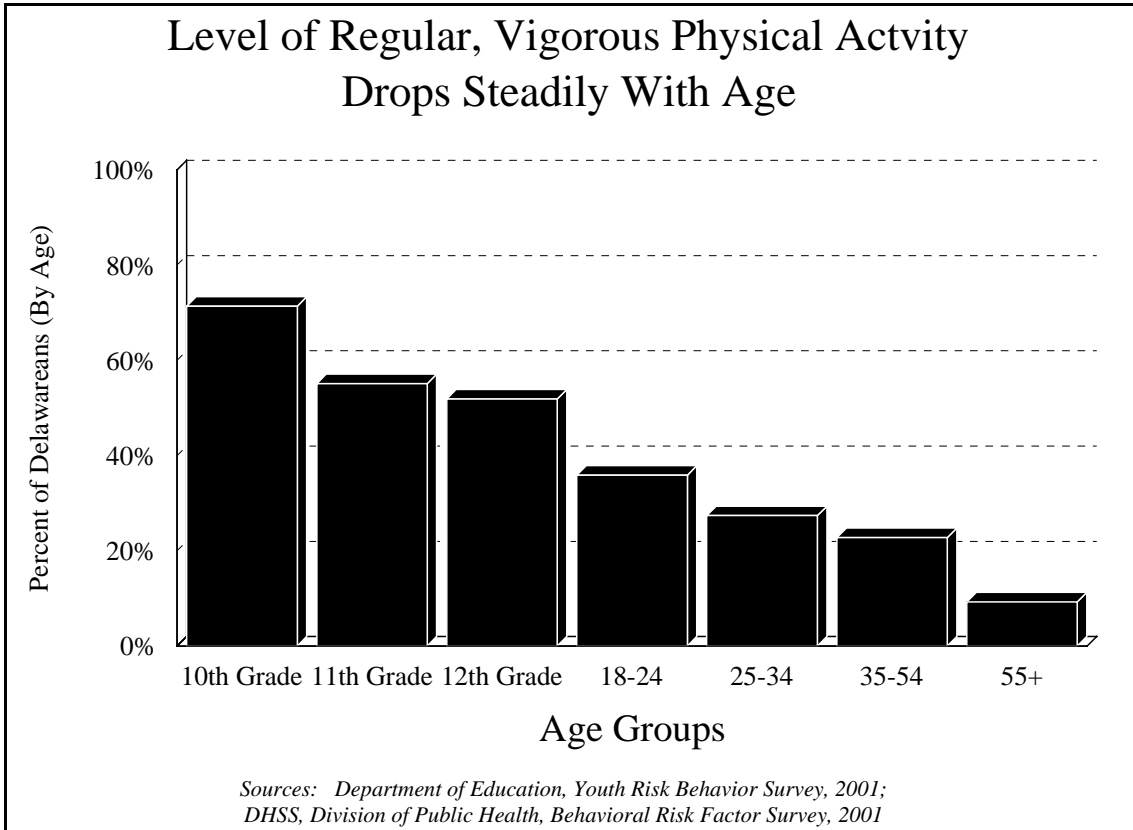
In 2001, the YRBS showed that:

- About 11% of public high school students are overweight;
- However, nearly 44% say they are trying to lose weight.
- 4% vomited or took laxatives to lose weight in the past 30 days.
- 24.9% ate 5 or more servings of fruits and vegetables per day during the past week.
- 62.5% exercised or participated in physical activities for 20 minutes that made them sweat and breathe hard three or more days a week.
- 11.4% did **not** participate in moderate or vigorous physical activity in the past week.
- 42% attended a physical education class one or more days during an average school week (65% of 9th graders, but only 14% of 12th grade students).

While the youth prevalence is certainly better than the adult prevalence for obesity and physical activity, there are some disturbing trends.

Nationally, overweight and obesity are increasing among children and youth, and this appears to be true in Delaware as well (however, there is not enough data at this point to establish a trend).

The other disturbing trend is that physical activity declines steadily from the 9th grade through adulthood (see graph on next page). While about 71% of 10th grade students get regular, vigorous exercise, that prevalence drops to 36% among college-age young adults. By the time Delawareans reach their 40s, only about 23% are getting regular, vigorous activity.



Additional information on prevalence of adult risk factors related to physical activity and nutrition is available from:

Behavioral Risk Factor Surveillance System (BRFSS)
 Delaware Division of Public Health
 P.O. Box 637
 Dover, DE 19903-0637
 302-744-4544
<http://www.cdc.gov/brfss/>

For more information about youth risk behavior data, contact:

Youth Risk Behavior Survey (YRBS)
 Delaware Department of Education
 P.O. Box 1402
 Dover, DE 19903-1402
<http://www.cdc.gov/nccdphp/dash/yrbs/>
<http://www.state.de.us/drugfree/data.htm>