

2005 Report Card on Lifestyle and Fitness



Progress Report

Health Risks	Progress
Tobacco Use	☺
Obesity	☹
Physical Activity	☹
Healthy Eating	☹
Safety Belt Use	☺
Alcohol Abuse	☹

Governor's Council on Lifestyle and Fitness



May 2006

Introduction

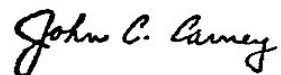
To the Residents of Delaware:

Many organizations and individuals worked for over a year on creating a plan for improving health in Delaware in this decade. The document, known as Healthy Delaware 2010, had four focus areas: to promote healthy behaviors, to promote healthy communities, to prevent diseases and disorders, and to improve health systems. The report that follows shows the progress we have made over the past five years.

I am pleased to report that there is good news in the areas of Tobacco Use and Seatbelt Use. There has been progress in some areas of Physical Activity and Alcohol Abuse, however continued and sustained efforts will be required to meet the objectives by the end of the decade. Unfortunately we still need to work on Healthy Eating and Obesity.

The Governor's Council on Lifestyle and Fitness and the Healthy Delaware Prevention Partners want to reemphasize to all Delawareans that a healthier Delaware is a shared responsibility. Where we live, where we work, where we go to school, and where we play are all part of our health. We ask each of you to discuss the health goals and to become part of the team that makes Delaware the "First State in Health"

Sincerely,

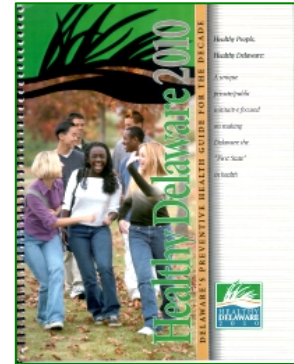


John. C. Carney, Jr.
Lt. Governor

Healthy Delaware 2010 Objectives

Healthy Delaware 2010 – a strategic plan for improving the health of all Delawareans – was adopted and published in 2001. It contains objectives for several “leading health indicators,” including four addressed by the Governor’s Council on Lifestyle and Fitness and this report:

- Physical activity
- Nutrition
- Tobacco Use, and
- Alcohol Use



This chart looks at progress toward some of the *Healthy Delaware 2010* objectives.

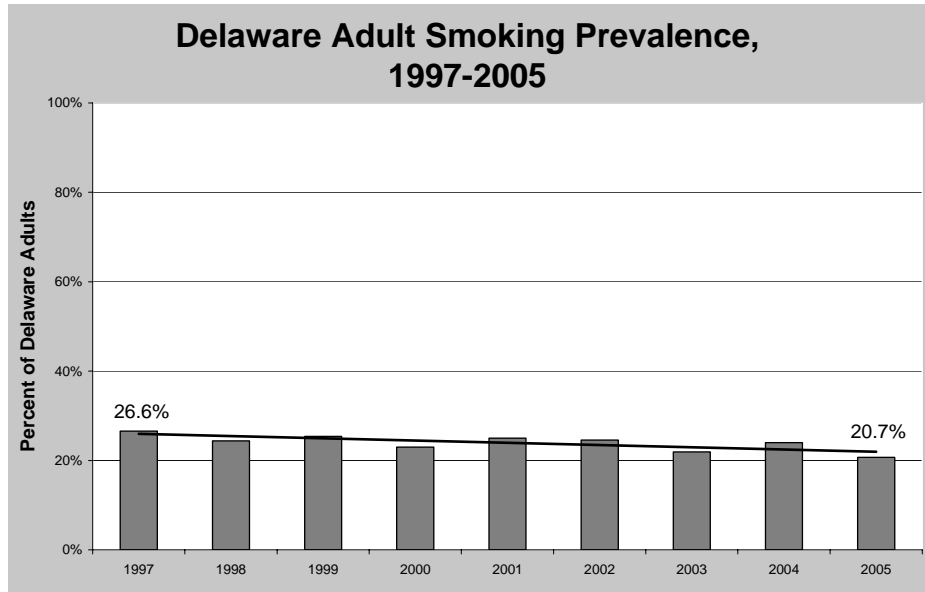
Selected Healthy Delaware 2010 Objectives	Progress
Increase prevalence of regular, moderate and sustained physical activity from 28.1% (in 2000) to 32% by the year 2010.	Met, Need New Obj. 32.1% in 2005
Reduce the proportion of adults who are overweight from 37% to 22.9% by 2010.	No Improvement 39% in 2005
Reduce the proportion of adolescents who are overweight or obese from 29% to 11% by 2010.	No Improvement 30.2% in 2003
By 2010, increase the proportion of Delaware adults who five or more servings of fruits and vegetables daily from 26.7% to 50%.	No Improvement 21.2% in 2005
By 2010, reduce regular cigarette smoking among high school students from 23% to less than 20%.	Met, Need New Obj. 16.7% in 2003
By 2010, increase the proportion of cigarette smokers, 18 and older, who attempt to quit for at least a day from 49% to 60%	Almost Met 57% in 2005
By 2010, reduce the incidence of binge drinking among college students from 60% to 50%.	No Measure Available

More information about *Healthy Delaware 2010* is available on the website of the Healthy Delaware Foundation website at:

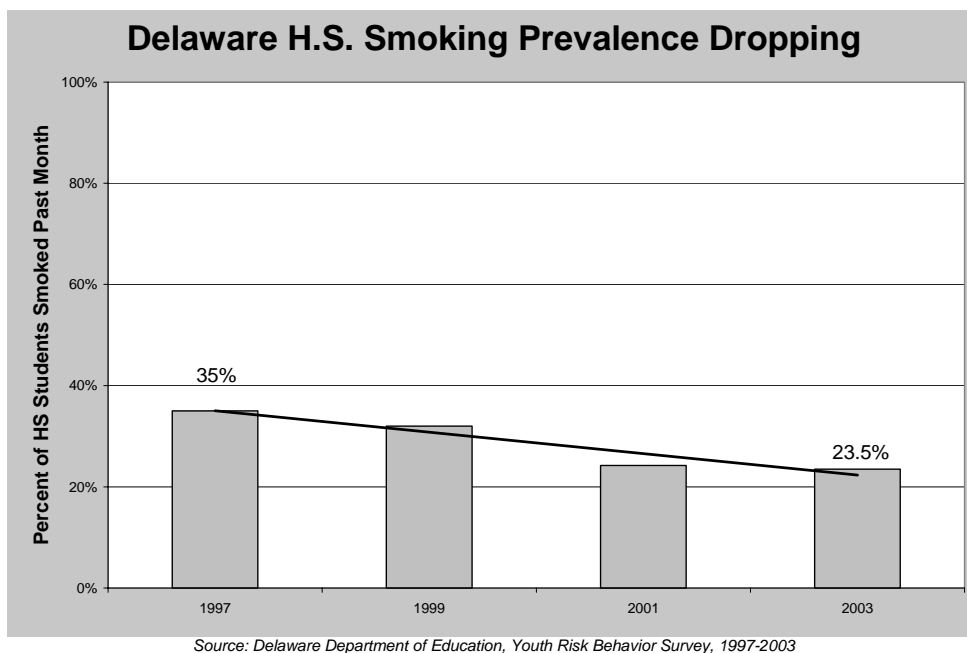
www.healthydelaware.com



Delaware is one of four states in the United States which is meeting “Best Practices” guidelines established by the Centers for Disease Control and Prevention (CDC). This comprehensive, evidence-based approach to prevention and control of tobacco use is paying off. Since the start of Delaware’s Tobacco Prevention and Control Program, there has been a 22% decrease in adult smoking prevalence.





Youth data presents an even more hopeful picture. Smoking among Delaware high school students declined from 35% in 1997 to 23.5% in 2003 – a 32% decrease.





- The largest disparity in tobacco use is between men and women. In 2005, 22.6% adult males said they were current smokers, compared to 19.1% of adult females.
- Fewer young adults in the 18-24 age group are smoking. In 2005, about one in four (25.4%) young adults were current smokers. This is down dramatically from 36% in 2002.



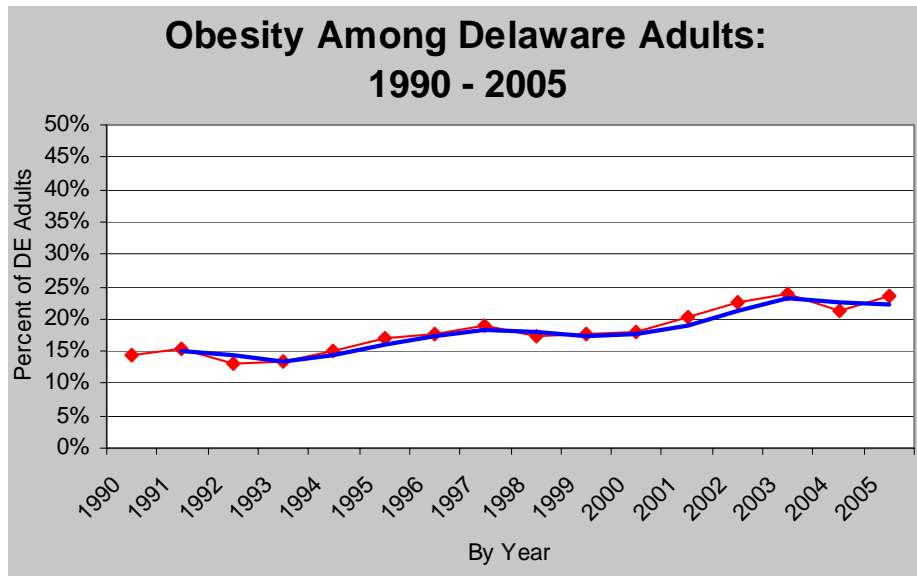
- Delaware's **Clean Indoor Air Act**, which took effect in 2002, prohibits smoking in indoor work areas and public places – including restaurants, night clubs, and casinos. When passed, it was the strongest such law in the country, and many states have followed. As of April 2006, 13 states, Puerto Rico and the District of Columbia now have strong laws protecting workers and the public from second-hand smoke.
- The Delaware Division of Alcohol and Tobacco Enforcement, working with the Division of Public Health and state Attorney General's Office enforces the state law restricting tobacco sales to persons age 18 or older. 
- Delaware's **Quitline** is helping hundreds of smokers quit every month. In January 2006, the Quitline received more than 500 calls for assistance. The Quitline provides Delaware adults who smoke with phone counseling, face-to-face counseling, stop-smoking medications, or a self-help program. Delaware residents age 18 or older can call the toll-free Quitline at **1-866-409-1858**. 
- Only 15.5% of Delaware adults smoke every day. The remaining smokers—5.2% of the adult population—say they smoke only “some days.” Many of these some-day smokers are trying to quit.
- Delaware has moved from being in the top ten states with the highest smoking prevalence during the 1990s to currently about the national prevalence.

What the faces mean:

- ☺ Delaware is making significant progress in this area.
- ☹ Some progress is being made, but prevalence still undesirable.
- ⊗ Trend data indicates we're moving in the wrong direction.



The prevalence of obesity increased steadily in Delaware from 1990 through 2003. Several evidence-based programs have been implemented in the state in the past five years to address obesity, but while the upward trend may be leveling off (see graph below) the trend line has not yet started to move down.



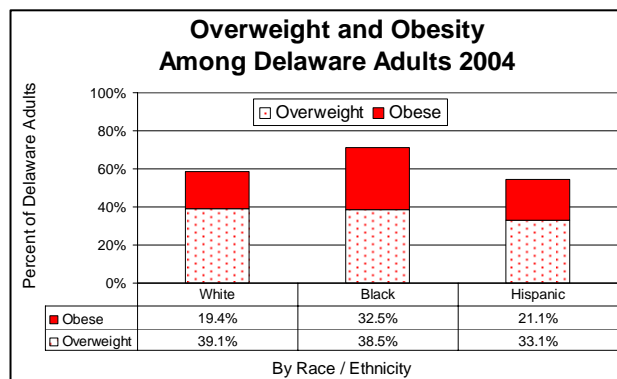
Source: Delaware Division of Public Health, Behavioral Risk Factor Survey, 1990-2005

Prevalence of obesity among Delaware adults in 2005 was 23.4%.

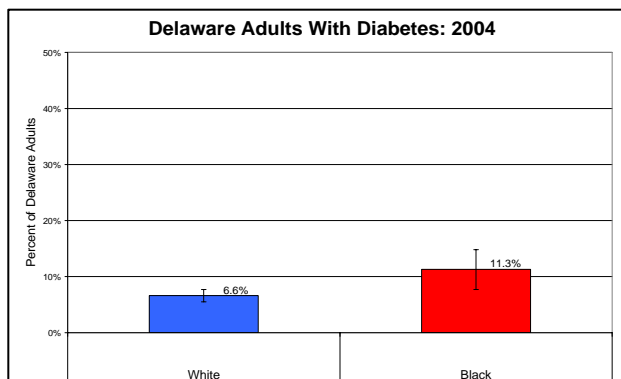
Adult obesity in Delaware increased from 14.4% in 1990 to 24% in 2003 – an all-time high. The prevalence has not increased since 2003. In 2004, there was a slight, but not statistically significant, drop to 21.1%.

The national prevalence rate for 2004 was 23.1%.

There is a significant racial disparity among obese adults, with non-Hispanic black adults more likely to be obese. One impact of that disparity: diabetes prevalence in Delaware is significantly higher for blacks.



Source: Delaware Division of Public Health, Behavioral Risk Factor Survey, 2004.





- Another 39.3% of Delaware adults are considered “overweight” (see definitions below). That makes a total of about 63% of Delaware adults who are either overweight or obese.
- Overweight and obesity are increasingly become problems for children and young people, as well. Type II Diabetes, which used to be called “adult-onset” diabetes, is now being diagnosed in children.
- The percentage of high school students with BMI at or above the 95th percentile for age (roughly the equivalent of obesity for adults) increased from 10.1% in 1999 to 13.5% in 2003, according to the Youth Risk Behavior Survey.
- The percentage of high school students who are overweight increased from 14.5% in 1999 to 16.7% in 2003.
- A supplement to a 2004 survey of Delaware middle school students indicated that nearly 13% had BMIs at or above the 95th percentile for their age.
- Another 17% of middle school students were significantly overweight in the study.
- National studies show a correlation between excessive television watching and weight gain.
- Delaware students spend significant amounts of time in sedentary activity, such as watching television, using computers, and playing video games.
- 17% of Delaware public middle and high school students say they watch five or more hours of television on weekdays.
- On weekends, 29.8% of students watch five or more hours of television per day; and 14.2% spend five or more hours a day using a computer.

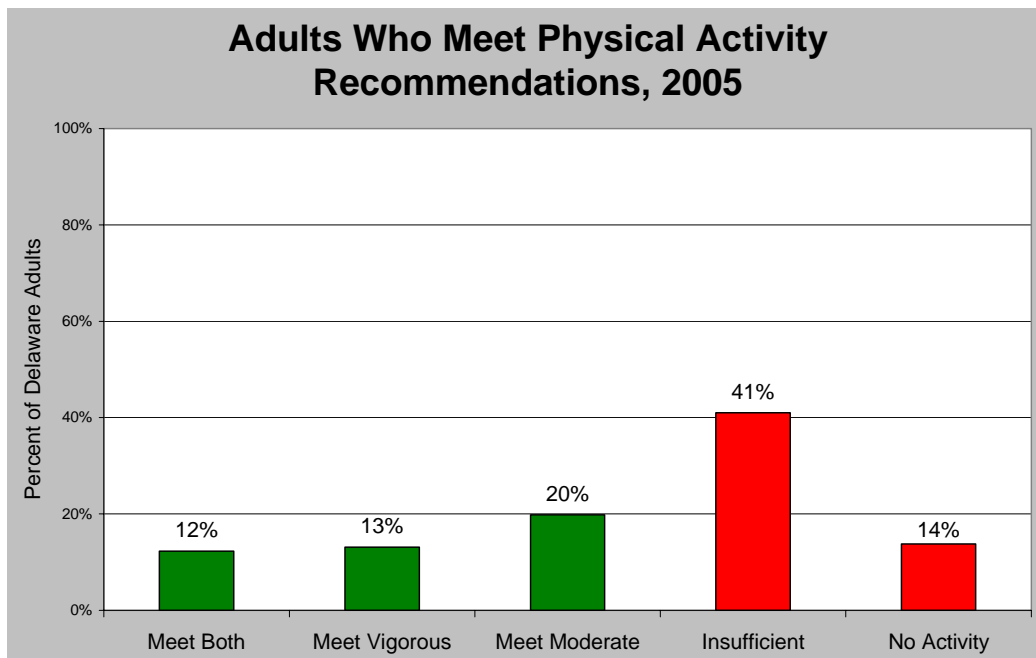


Obesity is determined by asking height and weight, and calculating Body Mass Index (BMI). BMI is a standard public health measure for overweight and obesity in populations. A person with a BMI between 25 and 29.9 is considered “overweight,” and a person with a BMI of 30 or greater is considered “obese.” Obesity is a major risk factor for diabetes, heart disease, cancer, and other leading causes of premature death and disability.

Physical Activity



About 45% of Delaware adults meet recommendations for adequate vigorous or moderate physical activity, according to the 2005 BRFSS. This is up slightly from 41.5% in 2001 and about the same as the 2003 prevalence of 43.8% (these questions are asked only in odd-numbered years).



Source: Delaware Division of Public Health, Behavioral Risk Factor Survey, 2005.

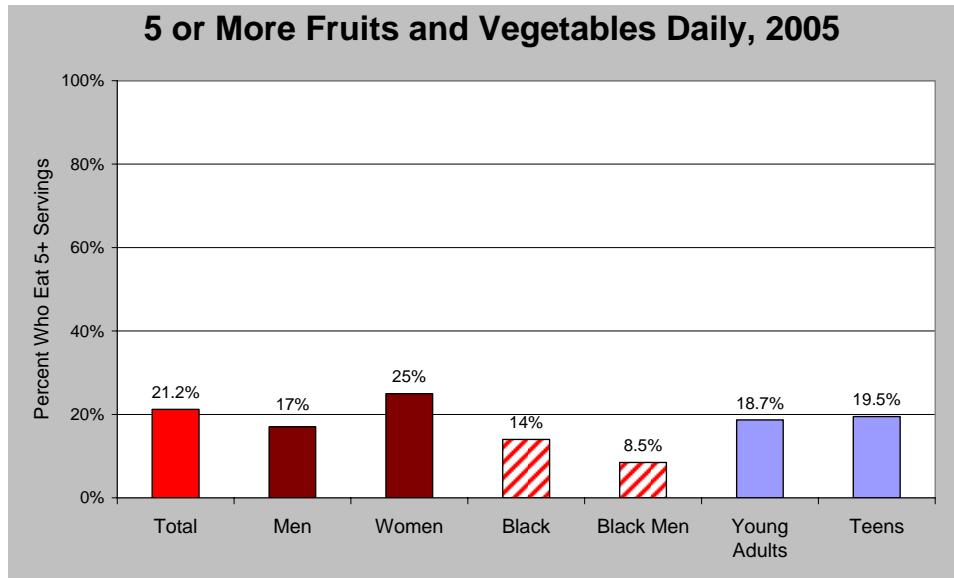
Current Efforts in Delaware

- Division of Public Health's **Get Up and Do Something** campaign, www.getupanddosomething.org
- **Lt. Governor's Challenge**, www.delaware.gov/ltgov/
- Recommendations of the **Physical Education Task Force**
- Nemours Health and Prevention Services' **5-2-1-Almost None** campaign www.nemours.org/internet?pid=5





One indicator of healthy changes in eating habits is consumption of fruits and vegetables. National dietary guidelines, supported by scientists in both private and governmental agencies, recommend that adults should eat five to nine servings of a variety of fruits and vegetables every day.



Sources: Delaware Division of Public Health, Behavioral Risk Factor Survey, 2005; for teen data, Dept. of Education, YRBS, 2003

Only 21.2% of Delaware adults report that they eat 5 or more servings of fruits and vegetables per day (2005 BRFSS). This is unchanged from 2003, when 22% reported 5 or more servings a day.

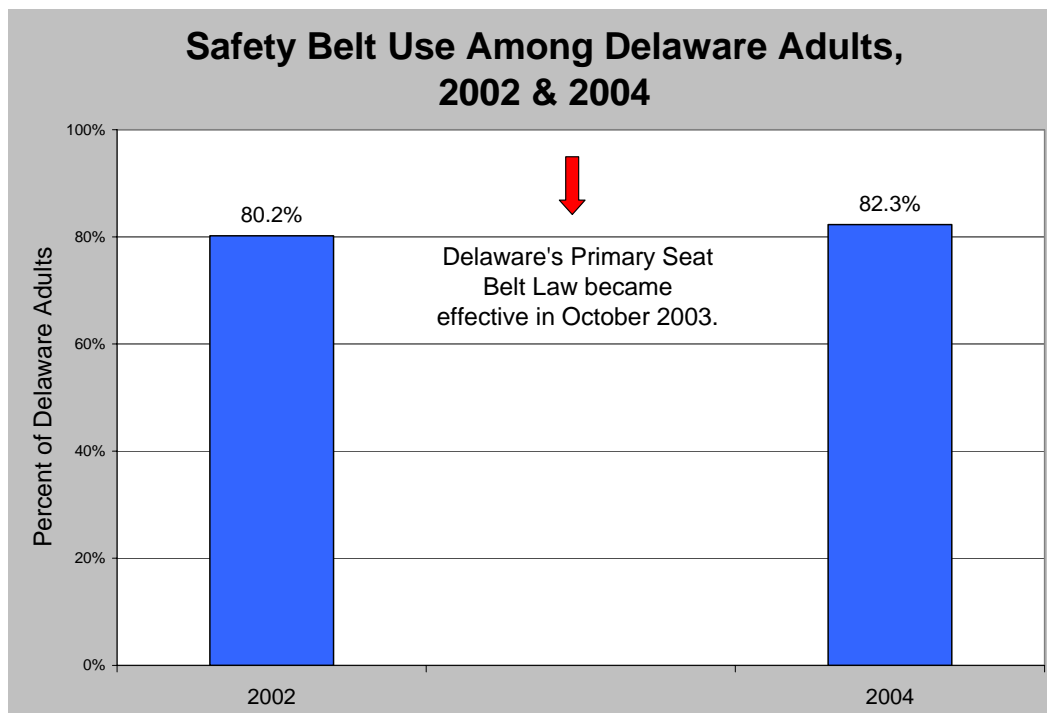
- Among adult Delaware men, only 17% report eating 5 or more fruits and vegetables per day.
- This compares to 25% of adult women in the state.
- Among African Americans, especially among African-American men, the prevalence is even lower – 14% of African Americans and only 8.5% of black men.
- About 18.7% of young adults, age 18-24, report eating 5 servings or more a day.
- Among high school students in 2003, the percentage who reported eating 5 a day was 19.5% – close to the prevalence among adults [YRBS data].





The Delaware General Assembly passed a primary enforcement safety belt law, which became effective in October of 2003. Because of the new law, the Delaware Behavioral Risk Factor Survey asked about regular safety belt use among adults in 2002 and 2004. The results in the graph below show 82.3% of Delaware adults reported “always using” their safety belts in 2004. An additional 6.2% reported “almost always” using safety belts.

These data are strongly supported by an observational study conducted for the Delaware Department of Safety and Homeland Security’s Office of Highway Safety. Their official 2004 estimate of seat belt use also was 82% – slightly above the previous years’ estimates and the national prevalence rate of 80%.

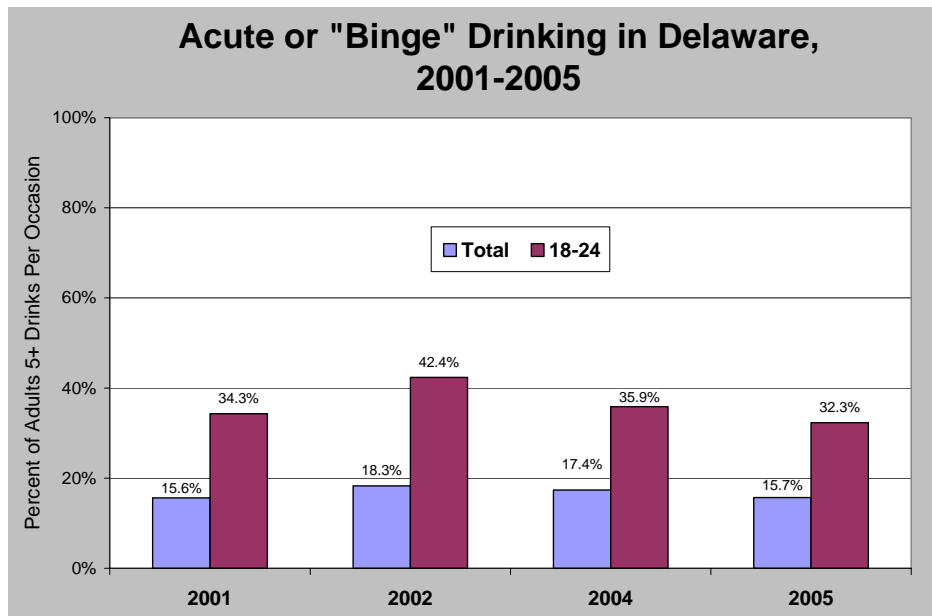


Source: Delaware Division of Public Health, Behavioral Risk Factor Survey, 2002 and 2004.

In 1991, the prevalence of safety belt use by adults was 52%. After passage of Delaware’s first seat belt law in that year, the prevalence increased to a little over 70%, where it stayed through the 1990s.



One measure of alcohol abuse in the state is the prevalence of acute, or “binge” drinking episodes. The Behavioral Risk Factor Survey measures acute drinking among adults, defined as having 5 or more drinks on one occasion at least once within the past month. The questions are not asked every year, but data are available for the years below.



Source: Delaware Division of Public Health, Behavioral Risk Factor Survey, 2001-02, 2004.

While the graph shows some improvement in the prevalence of binge drinking among young adults (age 18-24) between 2002 and 2005, the difference is not statistically significant and the prevalence is still too high. The overall prevalence of binge drinking did not change during the same time period. Men are more likely to be binge drinkers, and the highest prevalence has consistently been among 18-24-year-old males.

In 2004, Delaware’s prevalence was near the national average of 15%, using BRFSS data.

Sources of Data for This Report:

Delaware Health and Social Services, Division of Public Health, Behavioral Risk Factor Survey, 1990-2005.

Delaware Health and Social Services, Division of Public Health, Physical Activity Supplement to the Youth Tobacco Survey, 2004.

Delaware Department of Education, Youth Risk Behavior Survey, 2003-2005.

Delaware Department of Safety and Homeland Security, Office of Highway Safety, Observational Seat Belt Study, 2004.

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