



Priority: Nutrition and Physical Activity

We need to eat healthy food and be active to help stay healthy throughout their life. Healthy eating and physical activity can reduce the risk for a number of chronic diseases, such as type 2 diabetes, cancer, heart disease, stroke and obesity. Chronic diseases are among the most common and costly of health problems, are rarely cured, and often get worse over time, resulting in disability later in life.

Background and Data

Breastfeeding provides ideal food for optimal growth of infants and supports the health of breastfeeding mothers. In 2014, 82% of Wisconsin infants were ever breastfed. The number of breastfed babies drops dramatically at six months, when only 54% are still breastfeeding and only 28% exclusively. Wisconsin experiences extreme disparities in breastfeeding. Among WIC participants in 2016, 80% of white infants were ever breastfed compared to 60% of African American infants and 55% of Asian American infants. Only 6% of African American infants and only 9% of Asian American infants are exclusively breastfed at six months, well below the Healthy People 2020 goal of 25%.¹

One in 4 Wisconsin adults reports eating vegetables less than one time a day, and more than 1 in 3 report eating fruits less than one time a day. Only 1 in 6 adults consume the recommended five or more fruits and vegetables a day.²

While more than half (57%) of Wisconsin adults meet the recommended level of physical activity (more than 150 minutes per week), Wisconsin ranks 18th nationally. A growing number of adults, now 1 in 4, report no physical activity in a given month. Among Wisconsin youth, only half (49.5%) reach the recommended level of physical activity of 60 minutes on five or more days per week and 1 in 8 do not participate in an hour of physical activity on any day during a given week. In 2016, about 2 in 3 Wisconsin adults and 1 in 3 Wisconsin high school students were overweight or obese, the 23rd highest adult obesity rate in the U.S. The number of people in Wisconsin who are overweight or obese has been rising and if it continues to rise at the same rate, more than half of Wisconsin adults will be obese by 2030.^{2,3}

ACEs and Nutrition and Physical Activity

Data show that 61% of Wisconsin adults who are obese have experienced at least one adverse childhood experience (ACE), compared with 57% of the general population. Additionally, Wisconsinites who have experienced at least one ACE are more likely to report poor physical health days (42%) compared to those with no ACEs (30%). ACEs are known links to negative health outcomes in adulthood. Eating healthy food and being physically active is known to help those who have experienced trauma in childhood.²

Current Activities

Organizations and communities across Wisconsin are applying many strategies to improve nutrition, increase breastfeeding, and increase physical activity, with the support of the Nutrition and Physical Activity Priority Action Team (PAT). The PAT, which consists of members and partners to healthTIDE and the Wisconsin Breastfeeding Coalition, guides efforts to support healthy eating and physical activity in our state. The Collective initiative has brought together birthing facilities and local WIC agencies throughout Wisconsin to establish perinatal and postpartum practices that support breastfeeding initiation and duration. To promote fruit and vegetable consumption among low-income, millennial parents, the FNV campaign (<https://fnv.com/>) has been implemented across Wisconsin. The FNV campaign uses marketing to raise awareness, passion, and consumption of fruits and vegetables. Early care efforts will continue to incorporate Healthy Bites and Active Early concepts for improving childhood nutrition and childhood physical activity, respectively. Worksite trainings on how to create a healthier work environment continue to take place throughout the state: staff at over 1,500 worksites have been trained in the use of the Worksite Wellness Kit. Schools have been promoting the Active Schools: Core 4+ initiative and have increased active minutes. That emphasis will continue and will be rolled into a broader national wellness initiative known as Whole School, Whole Community, Whole Child.



Priority: Nutrition and Physical Activity



Goal: Eat healthier and move more

Objective 1

Increase consumption of healthy foods and beverages:

- › Increase consumption of at least one fruit per day by adults from 62% in 2013 to 65% in 2020 (BRFS)²
2015: 62%
- › Increase consumption of at least one vegetable per day by adults from 74% in 2013 to 78% in 2020 (BRFS)²
2015: 76%
- › Reduce daily consumption of soda by students from 20% in 2013 to 15% in 2020 (YRBS)³
2017: 15.3%

Strategies

Strategy 1: Create healthy options where foods and beverages are available.

Strategy 2: Improve accessibility, affordability, and demand for healthy foods and beverages in retail settings.

Strategy 3: Support existing community coalitions and organizations to implement key nutrition strategies. Assist with creation of new coalitions where they currently do not exist. **(New)**

Objective 2

Increase breastfeeding:

- › Increase initiation from 80% in 2015 to 90% in 2020 (National Immunization Survey and WIC Data)^{4,1}
2016: 80%
- › Increase duration at six months from 53% in 2015 to 60% in 2020 (CDC Breastfeeding Report Card and WIC Data)^{5,1}
2016: 58.9%

Strategies

Strategy 1: Implement prenatal, maternity care, and postpartum practices that support breastfeeding.

Strategy 2: Provide support for breastfeeding mothers in the workplace, early childhood education settings, and throughout the community.

Priority: Nutrition and Physical Activity



Goal: Eat healthier and move more

Objective 3

Increase physical activity:

- › Increase the percentage of adults physically active at least 150 minutes per week from 53% in 2013 to 58% in 2020 (BRFS)²
2015: 57%
- › Increase the percentage of students physically active for a total of at least 60 minutes per day on five or more of the past seven days from 50% in 2013 to 55% in 2020 (YRBS)³
2017: 49%

Strategies

Strategy 1: Engage communities to increase options for all people to be active, including the ability to safely walk and bike.

Strategy 2: Create opportunities for employees to be active and healthy during the workday.

Strategy 3: Educate and engage schools and early childhood education providers to improve accessibility and opportunities for physical activity throughout the day, including through recess policies.

Strategy 4: Create opportunities for and promote evidence-informed community programs that help adults, including those with chronic conditions, to become and remain active.

Strategy 5: Support existing community coalitions and organizations to implement key physical activity strategies. Assist with creation of new coalitions where they currently do not exist. **(New)**

References

¹ Wisconsin Department of Health Services, Division of Public Health. Women, Infants and Children Program (WIC). "Breastfeeding." www.dhs.wisconsin.gov/wic/breastfeeding.

² Wisconsin Department of Health Services, Division of Public Health. "Wisconsin Behavioral Risk Factor Survey." www.dhs.wisconsin.gov/stats/brfs.htm.

³ Wisconsin Department of Public Instruction, Student Services, Prevention and Wellness. "2017 Wisconsin Youth Risk Behavior Survey Results." Wisconsin Youth Risk Behavior Survey. dpi.wi.gov/sspw/yrbs (accessed June 2018).

⁴ Centers for Disease Control and Prevention (CDC). "National Immunization Survey." www.cdc.gov/vaccines/imz-managers/nis/index.html.

⁵ Centers for Disease Control and Prevention (CDC). "Breastfeeding Report Card." www.cdc.gov/breastfeeding/data/reportcard.htm.

