

One poor health outcome associated with a lack of access to healthy food is obesity. According to BRFSS results, in Kent County, approximately 30% of adults are obese and another 35% are overweight. Adult males in Kent County are more likely than adult females to be overweight, and African American adults in Kent County are more likely than any other racial or ethnic group to be obese.

In addition, based on results from the MiPHY, one out of ten youth in Kent County are obese. Male youth in Kent County are more likely than female youth to be obese and American Indian, African American, and Hispanic students are more likely than other racial or ethnic group to be obese. Also, students who receive Ds/Fs in Kent County are more likely to be obese than students who receive As/Bs.

Obesity was clearly identified as a major health issue across the state in Michigan's state health assessment and state health improvement planning process. Nearly \$3 billion in annual medical costs in Michigan are attributed to obesity. Currently, approximately 32% of Michigan's adult population is obese and another 35% is overweight. Additionally, approximately 52% of Michigan's adults achieve the recommended amounts of physical activity and 23% eat the recommend amount of fruits and vegetables. In fact, Michigan's state health improvement plan focuses on addressing obesity due to its high prevalence and serious consequences for every Michigan community. The plan aims to reduce the percentage of Michigan residents who are overweight or obese, and to increase the percentage of children and adults who achieve recommended levels of physical activity and eat the recommended amount of fruits and vegetables. The plan includes strategies for increasing sales of healthy foods in schools, increasing worksite wellness programs, and encouraging health care providers to offer counseling to reduce obesity. The strategies in the plan align with Healthy People 2020 objectives, as well as the strategies Kent County plans to carry out through this priority area.

MI SHIP: Increase the percentage of Michigan's youth and adults who eat the recommended amount of fruits and vegetables from 22.6% to 23.7% of adults and 19.6% to 20.6% of high school youth.

MI SHIP: Increase the percentage of Michigan's schools selling healthy foods from 26.7% to 28%.

MI SHIP: Decrease the percentage of high school students who drank soda or pop at least once a day from 27.6% to 26.2%.

MI SHIP: Increase the amount of food stamp sales at MI farmers markets from \$705,969 to \$824,624.

THE PLAN

Based on these data and their service system assessment, the Priority 4 workgroup drafted goals, objectives, strategies, and action plans to address increasing healthy eating by ensuring access to healthy foods in Kent County.

Priority 4 Goals, Objectives, and Strategies appear in Table 5. Priority 4 Action Plans appear in Appendix E. The data sources for tracking objectives appear in the footnotes. The evidence-base underlying the selected strategies appears in footnotes, where appropriate.

Table 5. Goals, Objectives, and Strategies to Increase Healthy Eating by Ensuring Access to Healthy Foods.

GOALS	OBJECTIVES ¹⁶	STRATEGIES
1. Ensure healthy foods are available, accessible, and affordable.	O1. By September 30, 2015, reduce the overall food insecurity in Kent County from 15.2% to 14.2% and the food insecurity among children in Kent County from 23.2% to 22.2%.	S1. Increase the availability of healthy goods in corner stores and gas stations. ^{17,18} S2. Increase healthy foods options available in pantries.
	O2. By September 30, 2015, increase the average proportion of food assistance used to purchase fruits and vegetables by 5%.	S3. Market the enrollment in and use of SNAP benefits to purchase healthy foods at farmers' markets, mobile markets, large retail outlets and corner stores. ^{19,20}
2. Increase healthy eating within Kent County.	O3. By September 30, 2015, increase the number of adults eating five or more servings of fruits and vegetables per day by 5%.	S4. Implement a county-wide campaign to use a consistent message across agencies and at food outlets to promote healthier food choices. ^{21,22}
	O4. By September 30, 2015, increase the number of students eating five or more servings of fruits and vegetables per day from 34.9% to 36.6%.	S5. Implement strategies to encourage healthy choices at the point of purchase in schools.

¹⁶ The US Household Food Security Module is the data source for objective O1. The data source for objective O4 is the Michigan Youth Risk Behavior Survey. Objectives O2 & O3 require identifying a data source.

¹⁷ Several strategies (S1, S2, S3, & S5) are recommended in: Keener, D., Goodman, K., Lowry, A., Zaro, S., & Kettel Khan, L. (2009). *Recommended community strategies and measurements to prevent obesity in the United States: Implementation and measurement guide*. U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Atlanta, GA.

¹⁸ Healthy Food Retailing PolicyLink. Equitable Development Toolkit. Available online at: www.policylink.org/site/c.lkIXLbMNJrE/b.5137405/k.6042/Healthy_Food_Retailing.htm.

¹⁹ Leadership for Healthy Communities. (2009). *Action Strategies toolkit: A guide for local and state leaders working to create healthy communities and prevent childhood obesity*. Robert Wood Johnson Foundation, Princeton, NJ.

²⁰ Flournoy, R. (2011). *Healthy Food, Healthy Communities: Promising strategies to improve access to fresh, healthy food and transform communities*. PolicyLink, Oakland, CA.

²¹ *Supplemental Nutrition Assistance Program (SNAP) at Farmers' Markets: A How-To Handbook*. Available online at: www.ams.usda.gov/AMSv1.0/getfile?dDocName=STELPRDC5085298.

²² Guide to Community Preventive Services. *Health communication & social marketing: health communication campaigns that include mass media and health-related product distribution*. Available online at: www.thecommunityguide.org/healthcommunication/campaigns.html.