

Public Health Departments and Obesity Prevention

ASTHO NACCHO Joint Conference
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Presented by






Public Health Departments and Obesity Prevention Web-Based Survey

○ PURPOSE

- Solicit CA public health departments' voices
 - Obesity and chronic disease prevention practices, opportunities, and strategies
 - Barriers for public health department engagement in changing nutrition and physical activity environments
- Identify policy and systems change opportunities



Public Health Departments and Obesity Prevention Survey

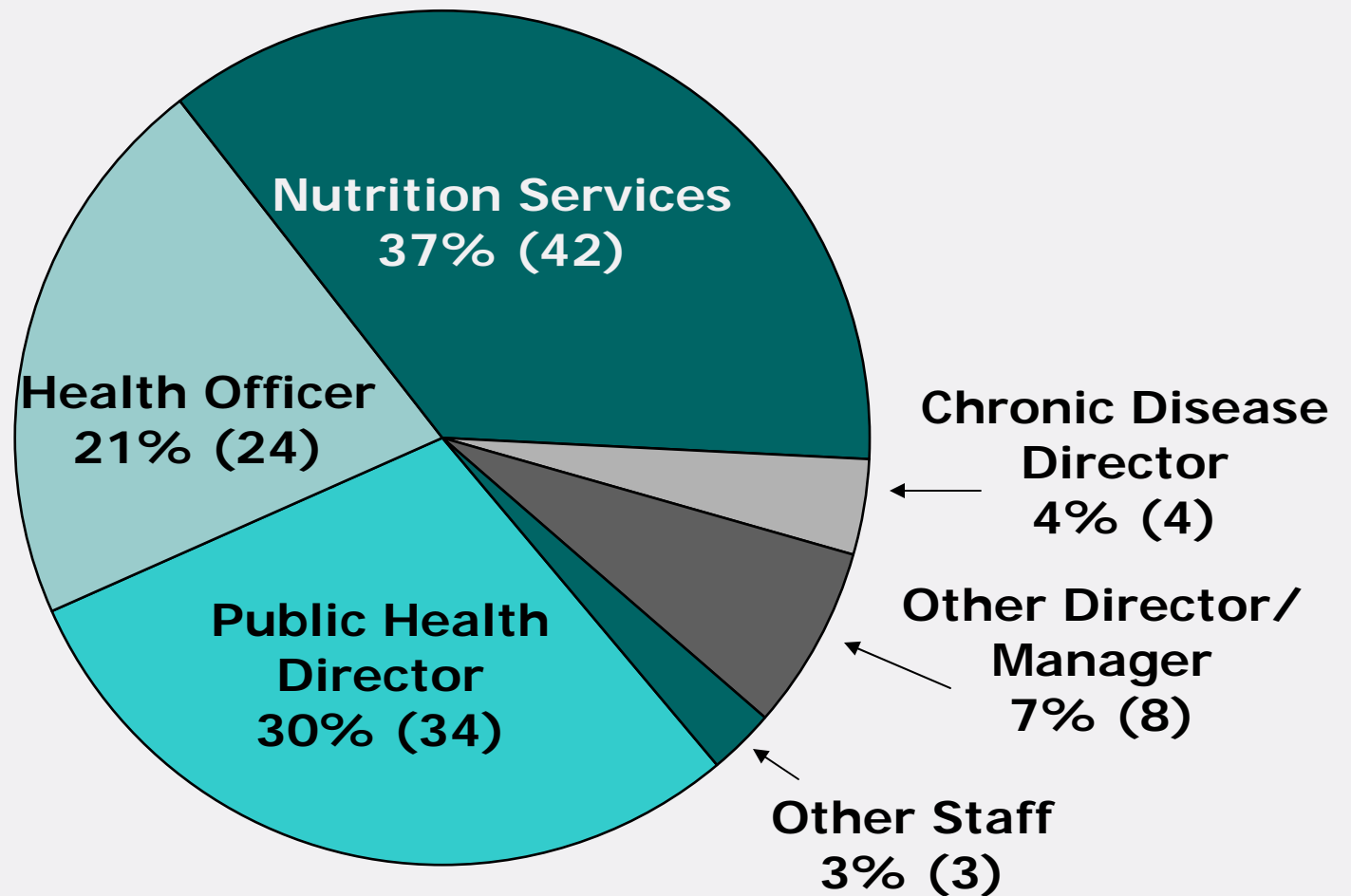
- Developed in collaboration with CCLHO, CHEAC, the Partnership for the Public's Health, and the California Department of Health Services
- Conducted by Samuels & Associates in early 2007 with funding from The California Endowment



Respondent Demographics

- 115 Respondents (62% response rate)
- 57 of 61 Health Departments in California (93% response rate)
- In 81% of Health Departments (46 of 57), either the Health Officer or the Public Health Director, or both, responded to the survey

Respondent Demographics



N=115 respondents



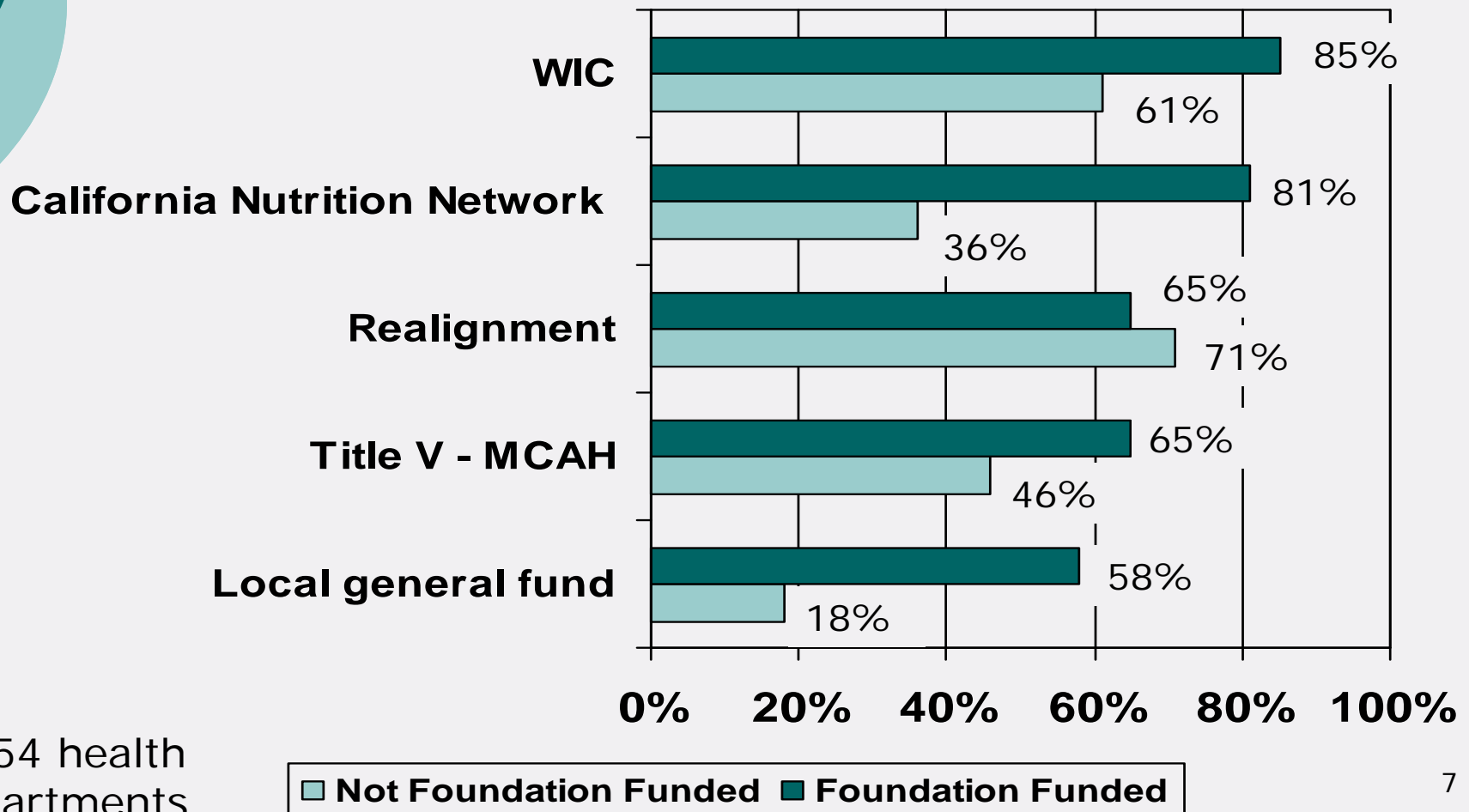
Public Health Department Organizational Structure for Obesity Prevention

- **83%** of health departments responding to the survey have an *individual* (69%) or a *unit* (76%) taking the lead on obesity prevention
- **92%** of health departments that receive funding from foundations have an *individual* (81%) or a *unit* (85%) taking the lead on obesity prevention
- Units taking the lead
 - Health Education
 - Chronic Disease
 - Nutrition
 - WIC

N=54 health departments

Public Health Department Funding for Obesity Prevention: Reported by Health Department

- Most frequently cited funding sources for changing nutrition and physical activity environments:



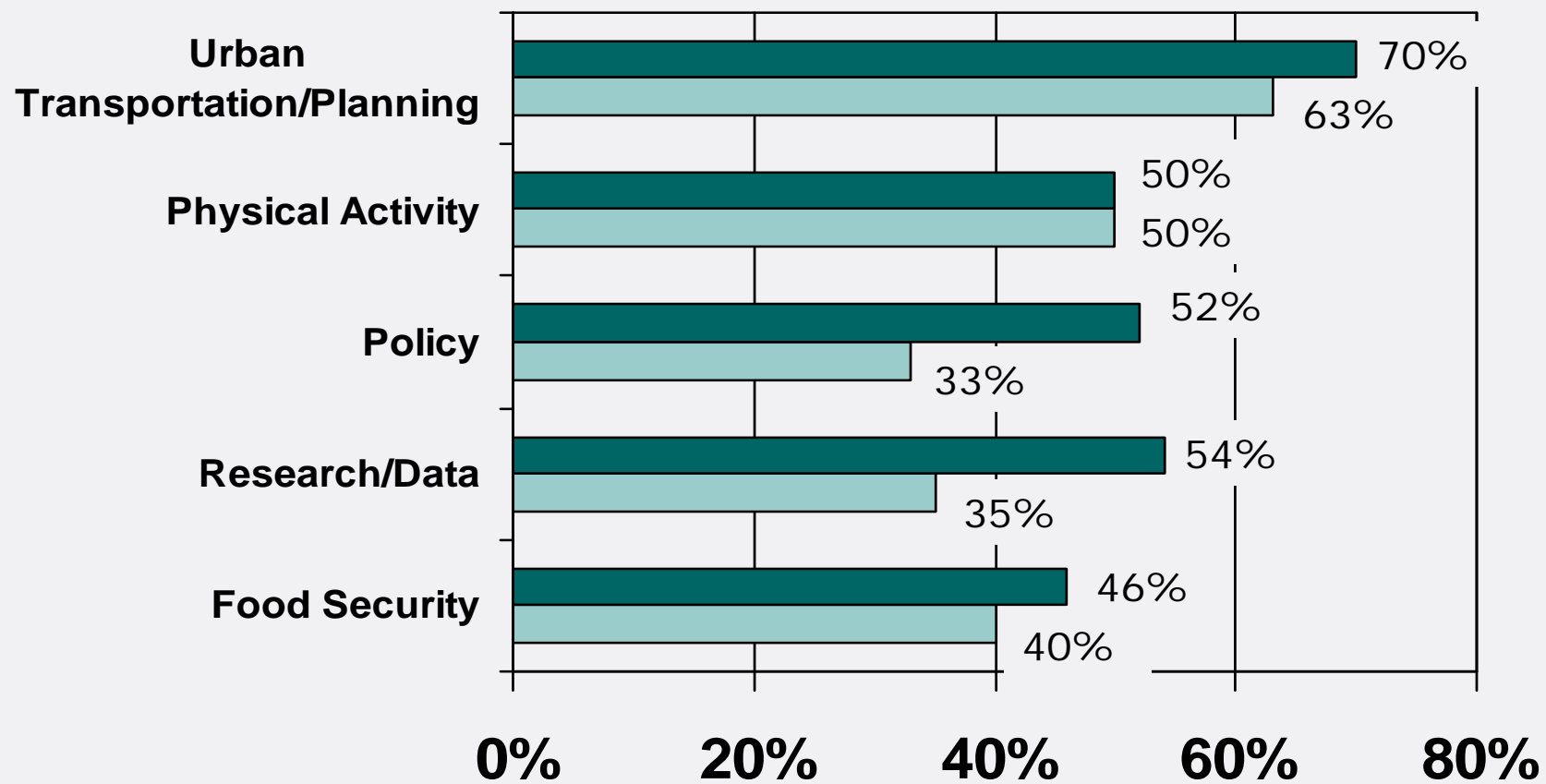


Current Staffing Capacity for Improving Nutrition and Physical Activity Environments

- **70%** of respondents rate their current staffing capacity for improving nutrition and physical activity environments as “fair”, “not very good”, or “non-existent”
- **30%** rate their current capacity as “excellent” or “good”

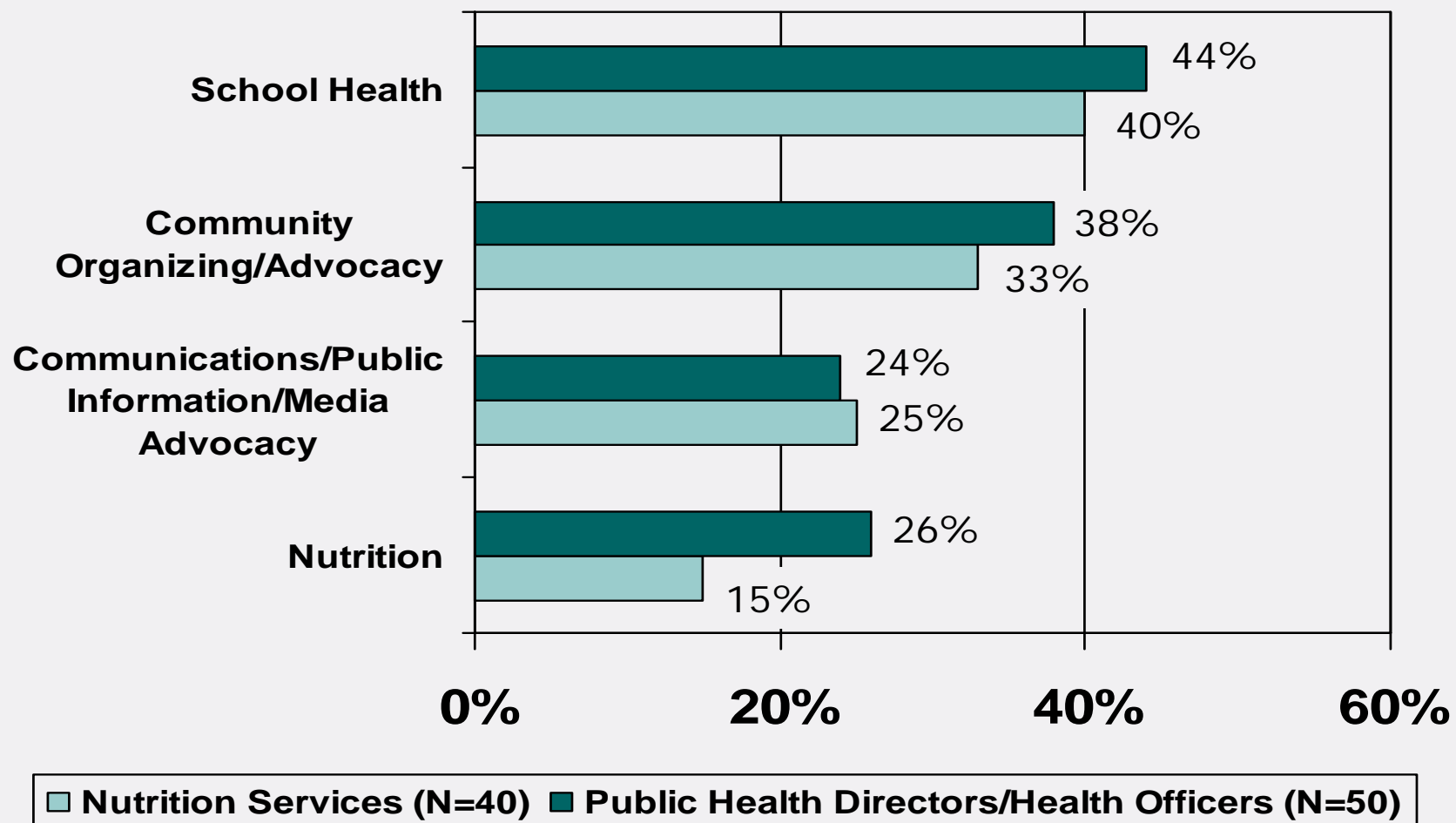
N=104 respondents

Workforce Skills Needed for Obesity Prevention

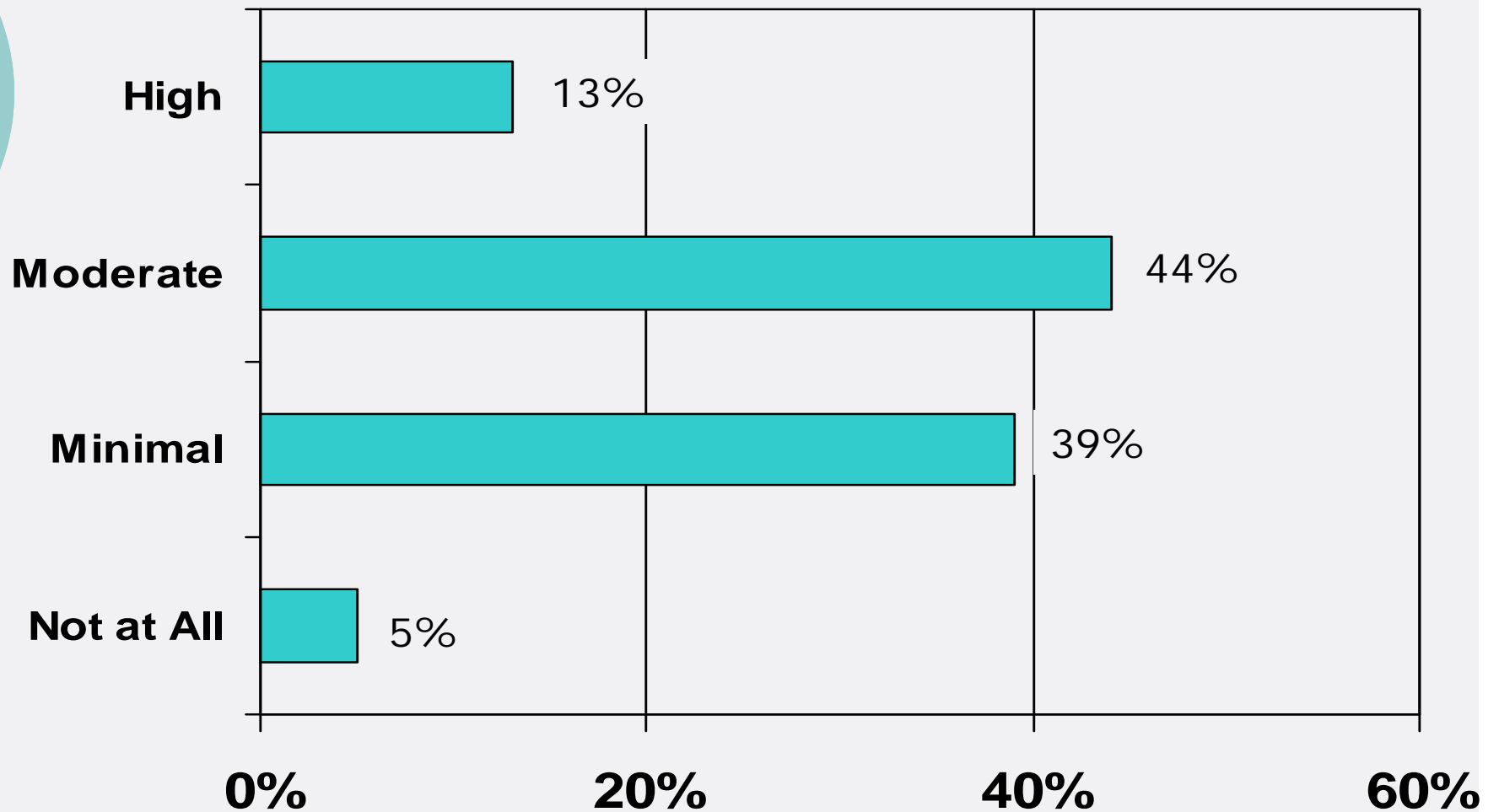


■ Nutrition Services (N=40) ■ Public Health Directors/Health Officers (N=50)

Workforce Skills Needed for Obesity Prevention



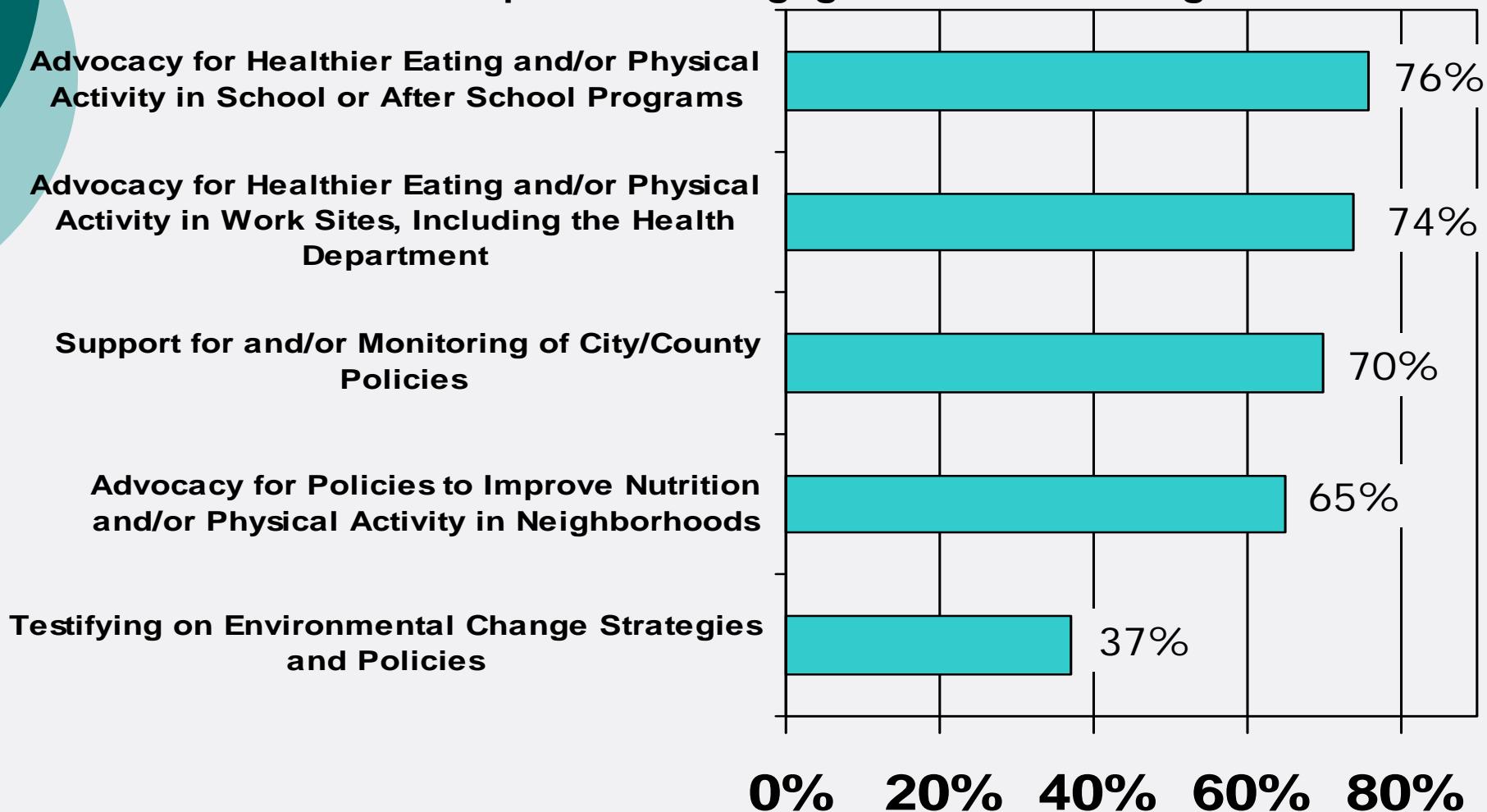
Degree of Integration Across Programs To Engage in Obesity Prevention



N=108 respondents

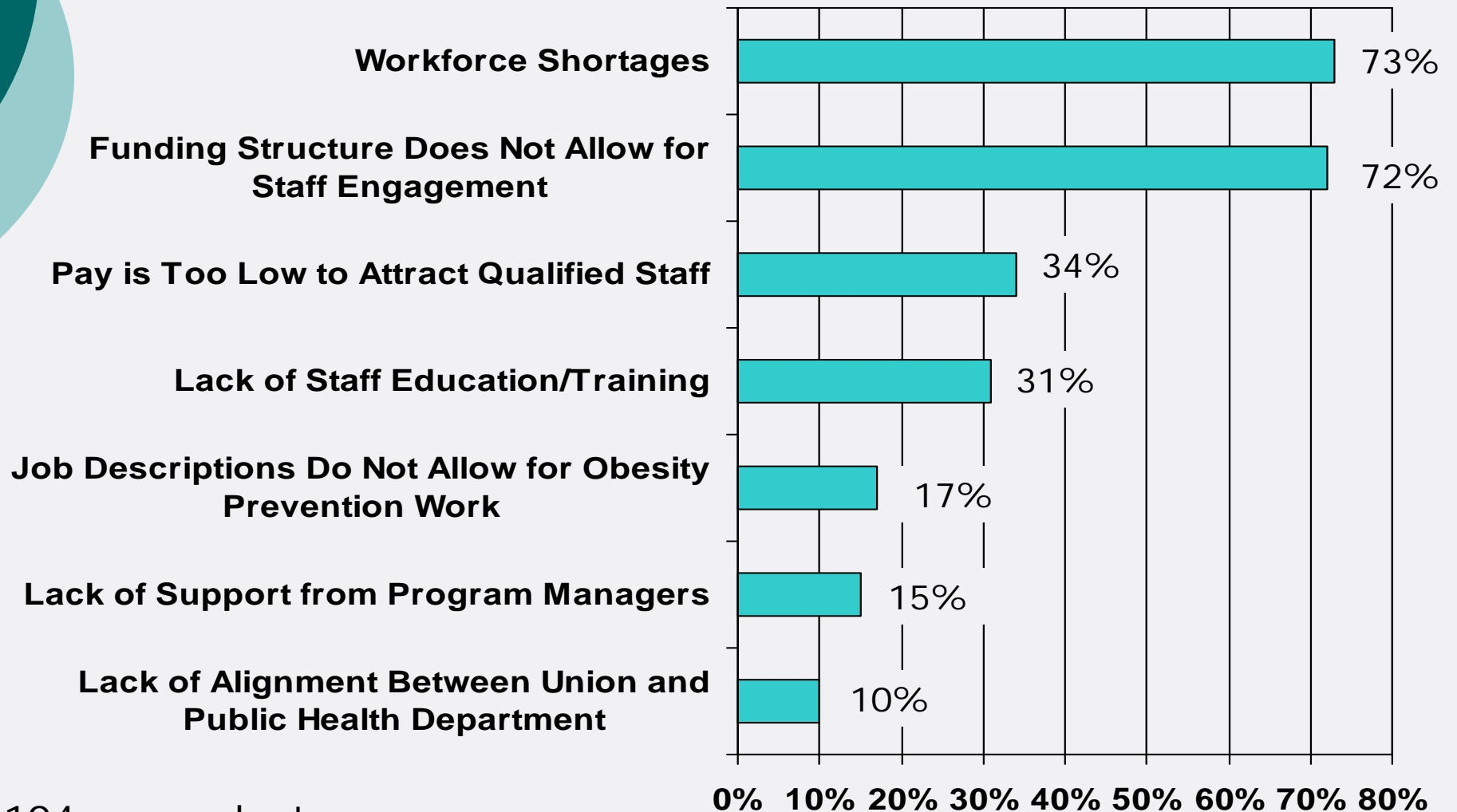
Advocacy and Policy Change for Nutrition and Physical Activity Environments

Percent of Health Departments engaged in the following activities:



N=54 health departments

Barriers for Public Health Department Engagement in Obesity Prevention



N=104 respondents



Obesity and/or Chronic Disease Prevention Plans

○ Local Plans

- **32%** (17) of health departments have an obesity and/or chronic disease prevention plan (N=54)
- **58%** (15) of health departments that receive foundation funding have an obesity and/or chronic disease prevention plan (N=26)
- **7%** (2) of health departments who *do not* receive foundation funding have an obesity and/or chronic disease prevention plan (N=28)



Key Findings, Cont.

- Funding for obesity prevention is concentrated in programs with restrictive funding streams
- Workforce shortages are viewed as impediments to public health department engagement in obesity prevention.
- Staff in public health departments have capacity/expertise in a variety of skill areas needed for obesity prevention, yet additional capacity is needed.
- Public health departments participate in a variety of advocacy and policy change activities for improving nutrition and physical activity environments.



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