



HEALTHY ACTIVE

ARKANSAS

What does a healthy, active Arkansas look like? It's a state in which all of our citizens enjoy access to wholesome foods and opportunities for fun, exertive activities.

SINGLE, OVERARCHING GOAL

To increase the percentage of adults, adolescents, and children who are at a healthy weight.

THE FRAMEWORK

The framework is built around **nine priority areas** modeled after the Institute of Medicine goals outlined in their 2012 report *Accelerating Progress in Obesity Prevention: Solving the Weight of the Nation*:

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PHYSICAL AND BUILT ENVIRONMENT:

Encourage all stakeholders to create livable places that improve mobility, availability, and access within the community where they live, work and play.

NUTRITIONAL STANDARDS IN GOVERNMENT, INSTITUTIONS, AND THE PRIVATE SECTOR:

Ensure uniform access to healthy foods and beverages to consumers in government, institutional and private sector settings.

NUTRITIONAL STANDARDS IN SCHOOLS—EARLY CHILD CARE THROUGH COLLEGE:

State and local governments, early child care providers, school districts and colleges will provide food and beverages that align with the Dietary Guidelines for Americans and promote health and learning.

PHYSICAL EDUCATION AND ACTIVITY IN SCHOOLS—EARLY CHILD CARE THROUGH COLLEGE:

State and local governments, early child care providers, school districts and colleges ensure that all students have opportunities for daily physical activity and quality physical education that promotes healthy lifestyles.

HEALTHY WORKSITES: Worksites will establish healthy environments that promote good health through prevention, reduce health care costs associated with chronic illness and disability, and improve employee productivity.

ACCESS TO HEALTHY FOODS: State and local governments and other stakeholders will promote education, public policies and access to affordable healthy foods for all Arkansans.

SUGAR-SWEETENED BEVERAGE REDUCTION:

Decision-makers in the business community/private sector, non-governmental organizations, educational institutions and at all levels of government will adopt comprehensive strategies to reduce overconsumption of sugar-sweetened beverages in worksites, public places, recreational facilities and schools.

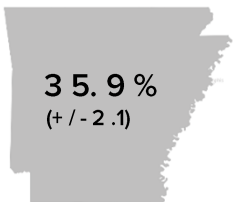
BREASTFEEDING: Women, health service providers, employers, communities and other key stakeholders will adopt, implement and monitor policies that support and increase the proportion of mothers who initiate and continue optimal breastfeeding practices.

MARKETING PROGRAM: Develop and implement a robust, sustained and culturally appropriate targeted communications and marketing program aimed at changing norms and behaviors with respect to physical activity and nutrition.

WHO SHOULD USE THE FRAMEWORK? Anyone can! Examples include:

- Businesses/employers
- Local and state governments
- Parks and recreation
- Chambers of commerce
- Professional organizations, nonprofits, foundations, and service groups
- Health care systems and providers
- Religious and faith-based organizations
- Transportation/city/urban planners
- Schools, colleges, and universities

ARKANSAS PORTRAIT



In 2014, Arkansas become the **most obese state in the nation**, according to a report from the Robert Wood Johnson Foundation and the Trust for America's Health.



- Nearly 760,000 adults in Arkansas are obese.
- Nearly a quarter million adults in Arkansas have diabetes and 85% of diabetics are overweight.
- \$1.25 billion of annual expenditures in Arkansas are attributable to obesity.
- The cost of diabetes in Arkansas for 2007 was estimated at \$1.4 billion.

Reducing the average BMI of Arkansans by only 5% could lead to health care savings of more than **\$2 billion** in 10 years and **\$6 billion** in 20 years, while also preventing thousands of cases of stroke, coronary heart disease, type 2 diabetes, hypertension and cancer.



Obesity causes or exacerbates numerous chronic diseases & conditions, including:

- Cardiovascular disease
- Type 2 diabetes
- Various cancers
- High blood pressure
- Hypertension
- High cholesterol
- Stroke
- Liver and gallbladder disease
- Arthritis
- Asthma
- Metabolic syndrome
- Sleep disorders
- Depression

VIEW THE FULL PLAN: healthyactive.org



ACTION PLAN

Step 1: Outcome and Success

What is our desired outcome?

To get at least two key community members informed and supportive of integrating the Healthy Active Arkansas plan in my community or sphere of influence.

How will we know we are successful?

1) At least one of my contacts will initiate their own HAA Action Plan and share their plans with ACHI staff to be recognized later this year at the Accountability Summit.

Step 2: Considerations

What are our opportunities/motivators?

People in my sphere of influence working to achieve small steps forward will ultimately improve the overall health of the community in big ways.

What are our barriers?

Some people can feel overwhelmed by the slow progress and don't want to bother making the effort to improve things.

Step 3: Key Stakeholders

Who is the strategic lead?

YOU!

List their contact information:

Who do we need buy-in from?

1) At least two colleagues or key stakeholders in your organization or sphere of influence.

Who are the resisters?

1) Those who are reluctant to learn and change for the good of the community.

Step 4: Final Strategic Plan (High-level)

I will take at least two key members of my organization (or community members in my sphere of influence) out to lunch, for coffee, or for a walk and give them a summary of the Healthy Active Arkansas plan.

I will then challenge each of them to initiate at least one action plan of their own and share the results with me and with ACHI Staff.

This action will filter down and become a great positive force moving through my community and my state.