



F as in Fat: The Iowa Portrait*

A new report shows that obesity rates continue to increase, affecting 1 in 4 Americans. The annual *F as in Fat* report, recently released by Trust for America's Health (TFAH) and the Robert Wood Johnson Foundation (RWJF), details the staggering rates of obesity in the United States while providing recommendations for ways to curb this epidemic. Among the major findings, the report documents that:

- In 23 states, adult obesity rates increased over the past year - rates did not decrease in any state.
- More than half of the states have an adult obesity rate of more than 25 percent.

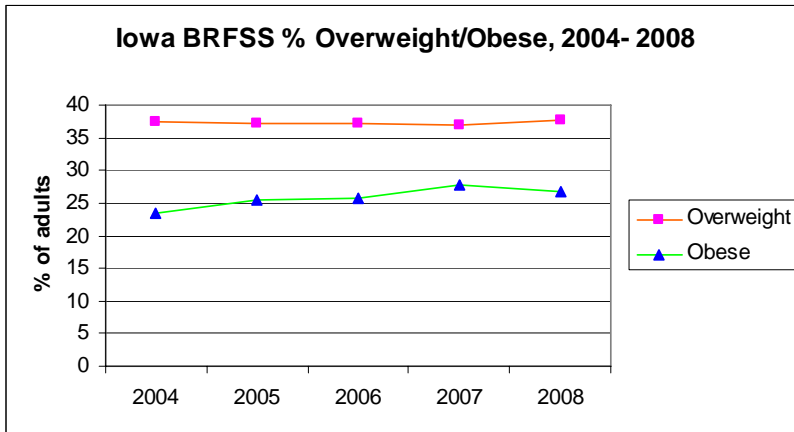
Currently, more Americans are obese than are overweight (32.7 percent). Poor nutrition and physical inactivity are increasing Americans' risk for developing major diseases, including Type 2 diabetes, which now afflicts more than 10% of the adult population in seven states.

Childhood obesity is also on the rise - the percentage of overweight and obese children is at or above 30 percent in 30 states. Obesity rates among children ages two to 19 years have more than tripled since 1980. According to a 2008 analysis of data from the National Health and Nutrition Examination Survey (NHANES), the number of U.S. children who are overweight or obese may have peaked, after years of steady increases.

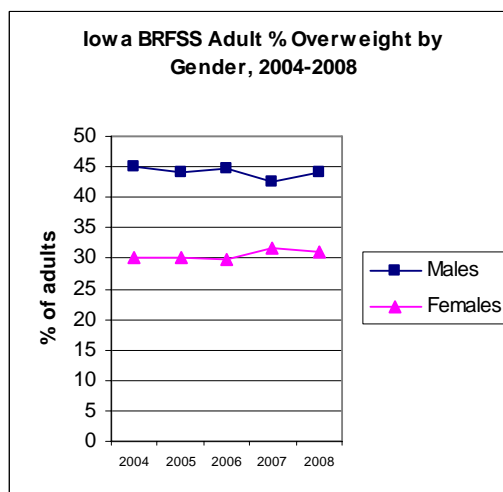
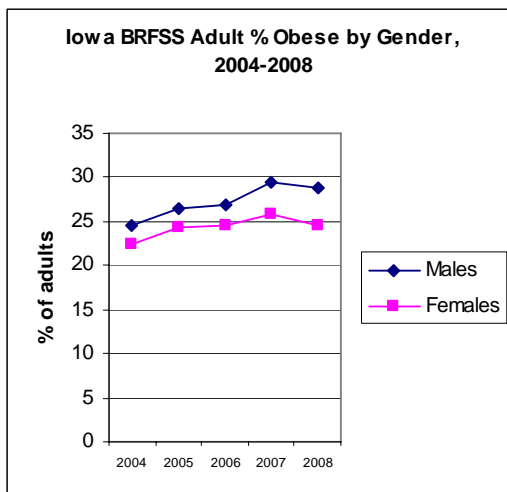
Obesity is defined as an excessively high amount of body fat in relation to lean body mass. Overweight refers to increased body weight in relation to height, compared to a standard of acceptable weight. Body Mass Index (BMI) is a common measure expressing the relationship (or ratio) of weight-to-height.

As of June 2008, The National Institutes of Health (NIH) adopted a lower optimal weight threshold for adults (i.e., BMI 25 to 29.9 considered overweight, BMI 30 or more considered obese). Until recently, children and youth at or above the 95th percentile were defined as "overweight"; children at or above the 85th percentile, but below the 95th percentile, were "at risk of overweight". In 2007, an expert committee recommended using the same cut points, but changing the terminology by replacing "overweight" with "obese" and "at risk of overweight" with "overweight".

Adults



Behavioral Risk Factor Surveillance System (BRFSS) data found that in 2004, 37.4% of Iowans were overweight and 23.5% were obese, based on BMI. The percentage of overweight and obese combined was 60.9%. 2008 data showed that 37.6% of Iowans were overweight and 26.7% were obese. The percentage of overweight and obese combined increased to 64.3%. The percentage of overweight Iowans has remained relatively stable as the percent of obese Iowans has slowly increased over time.



Self-reported weights found more males than females were overweight or obese.

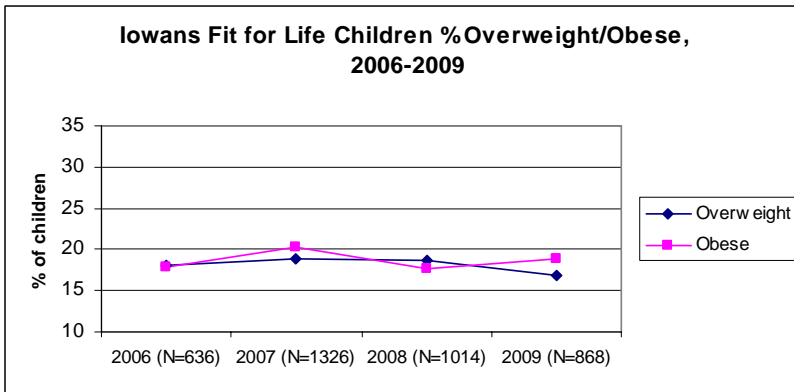
Year	% of Obesity Iowa Adults	Iowa Adult Obesity Ranking (1=Highest Rates of Obesity)
2003	23.9	17
2004*	23.4	20
2005*	24.3	21
2006*	24.9	20
2007*	26.3	19
2008*	26.7	22

Source: Behavior Risk Factor Surveillance System (BRFSS), CDC.

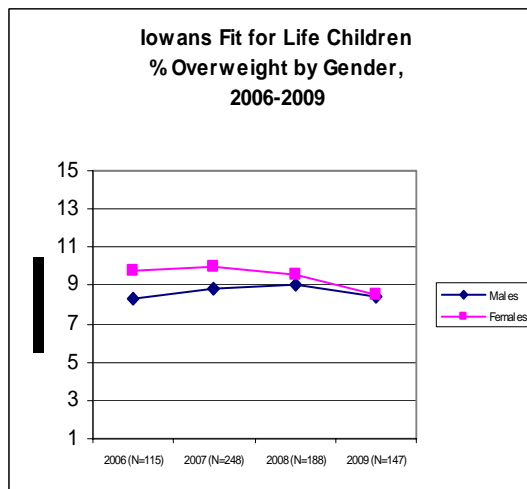
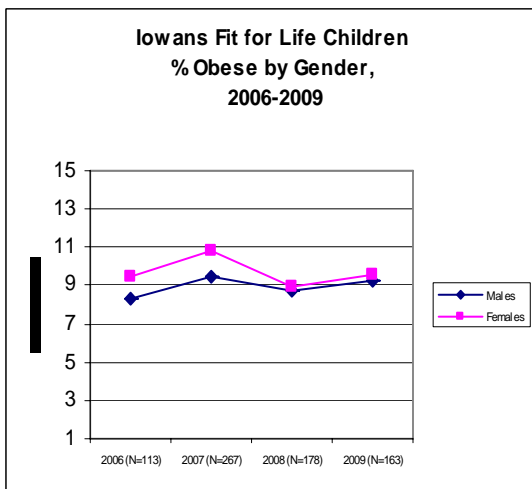
*Percentages and Rankings are three year averages.

BRFSS data from 2003 until 2008 show the state ranking for the rate of obesity among Iowa adults. Obesity rates did not significantly decrease in a single state. The Iowa ranking has fluctuated minimally over the five year period indicating the importance of addressing obesity in the state.

Children



Data from an Iowans Fit for Life survey of 3rd to 5th grade children in schools across the state of Iowa found that Spring 2006, 18.1% of children were overweight and 17.8% were obese for a combined percentage of 35.9. Spring 2009, 16.9% of 3rd to 5th graders were overweight and 18.8% were obese for a combined percentage of 35.7.



More 3rd to 5th grade female students were overweight or obese compared to male students.

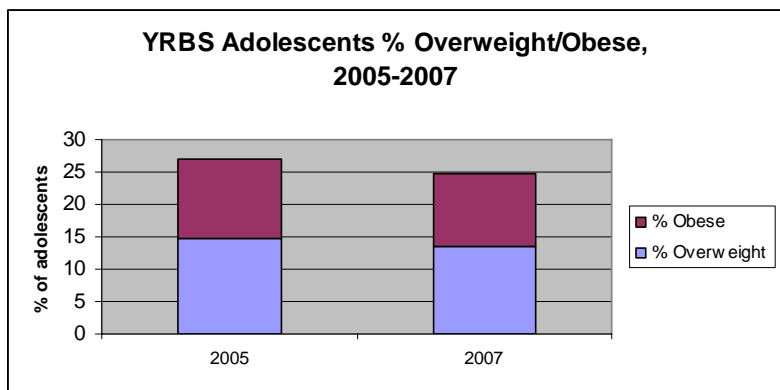
Teens

Year	% Overweight Iowa High School Students	% Obese Iowa High School Students
2005	14.8	12.2
2007	13.5	11.3

Source: Youth Risk Behavior Survey (YRBS), CDC. * Overweight is termed 'at risk for becoming overweight'; obese is termed 'overweight'.

The Youth Risk Behavior Survey (YRBS) monitors six categories of priority health-risk behaviors among youth and young adults. The YRBS includes national, state, and local surveys conducted biennially among representative samples of high school students. This report includes data from the state and local surveys conducted among students in grades 9 through 12 during 2005 and 2007.

Data from the YRBS illustrate there has been a slight decrease in the self-reported percentage of overweight and obese high school students in Iowa. According to the 2007 YRBS, 13 percent of students were obese and 15.8 percent were overweight for a combined percentage of 28.8.



Recommendations

The following recommendations have been adapted from the annual *F as in Fat* report. These recommendations are as applicable to Iowa as they are to the nation as a whole.

Since obesity has become a national health problem, obesity prevention and control must be a central objective of health reform; a strategic approach to addressing obesity must be developed. In accomplish this, TFAH recommends developing a federal funding stream dedicated to public health and prevention efforts including community-based programs; coverage for obesity-related healthcare benefits; and focus on the pre-Medicare population to prevent chronic disease at an earlier age.

TFAH has also created a framework for a National Strategy to Combat Obesity. This framework addresses a plan that involves all governmental levels (i.e., federal, state, local), as well as businesses, communities and families to work together to advance policies that improve the nation's health. Policies include:

- Provide healthy foods and beverages to students at schools;
- Increase availability of affordable healthy foods in all communities;
- Increase frequency, intensity, and duration of physical activity at school;
- Improve access to safe and healthy places to live, work, learn, and play;
- Limit screen time; and

Encourage employers to provide workplace wellness programs.

*Portions of this report were adapted from *F as in Fat: How Obesity Policies are Failing in America*. July, 2009. www.healthymamericans.org.