Healthy Communities grantees, TPEP grantees and tribes:

Here’s an opportunity to leverage a national event to gain local visibility for your work.

The Center for Science in the Public Interest has created Food Day, an Earth-Day-style event on October 24 designed to increase demand for healthy, affordable food produced in a sustainable, humane way. Communities across Oregon and the United States are hosting local events in homes, schools, churches, farmers markets, city halls, and state capitals to raise awareness and create change. For more information: http://foodday.org/

Specifically, here are two links on the Food Day page that relate directly to our work:

* “Reduce diet-related chronic disease by promoting safe, healthy foods:” http://foodday.org/why-eat-real/six-principles-reduce-disease.php
* “Promote health by reducing junk food marketing to kids:” http://foodday.org/why-eat-real/six-principles-promote-health.php

If your community is hosting an event it’s a great opportunity to integrate public health messages and make the point that increasing access to healthy food is one important part of creating communities where all Oregonians can be healthy (we also need tobacco prevention, opportunities for physical activity and access to screening and self-management!). You can sign up to attend local events and talk about your policy work and other priorities. Also, reach out to media to offer public health data and expert interviews.

If you don’t have a local event, you can still use the national attention on Food Day to talk with media and other influencers about the role of healthy food in preventing chronic disease, and the need to increase access to all kinds of healthy options.

Attached are several things that can help you:

* A fact sheet on the link between food and chronic diseases. You can provide this to local Food Day event promoters and also use it with media and other outreach.
* A list of Oregon food day events, so you can connect to any near you.
* A letter to the editor you can quickly customize and submit, or ask someone else from your community to submit.

Metropolitan Group is also available for TA consults on how to leverage Food Day in your community. Just speak with your HPCDP liaison or MG contact.

Thanks and good luck!

The MG TA team

**Diet-Related Chronic Disease in Oregon**

Eating better, moving more and living tobacco-free lets Oregonians live healthier lives and do the things they love. But today in Oregon, healthy options are out of reach for too many people. As a result, chronic diseases like asthma, heart disease, stroke, diabetes, arthritis and cancer are on the rise.

**Links between diet and chronic disease**

***Rising rates and impact of obesity and overweight***

* Nearly two-thirds of Oregon adults are overweight or obese.[[1]](#endnote-1)
* Obesity costs Oregon more than $781 million in direct medical costs and more than $1 billion altogether, when including lost productivity and other health conditions that result from or exacerbate the disease.[[2]](#endnote-2) [[3]](#endnote-3)
* One-third of the increase in Oregon’s health care spending between 1998 and 2005 was due to the obesity epidemic, according to a recent study for the Northwest Health Foundation by Emory University.[[4]](#endnote-4)
* Obesity drives up workers’ compensation costs: Obese workers, compared with average workers, file twice as many workers’ compensation claims; the cost of the average claim is five times greater; and lost workdays are 13 times higher, according to a recent study by Duke University Medical Center.[[5]](#endnote-5)

***Increased risk of chronic disease***

* According to the Centers for Disease Control and prevention, this puts them at risk of heart disease, type 2 diabetes, cancer, high blood pressure, stroke and other life-long health problems.[[6]](#endnote-6)
* One in seven Oregonians is living with diabetes, heart disease or stroke.
* Every year, the toll of chronic disease in Oregon is about 19,000 lives,[[7]](#endnote-7) $16 billion[[8]](#endnote-8) [[9]](#endnote-9) in health care costs, and countless hours of missed work.
* The cost of diabetes treatment alone in Oregon is $1.4 billion per year—and that number is rising, according to state data.[[10]](#endnote-10)

**Addressing the Obesity Epidemic in Oregon**

The causes of obesity are complex and varied, including behavior, genetics and environment.

Overall, though, obesity and related chronic diseases are largely preventable. According to the USDA, **healthier diets could prevent at least $71 billion per year** in medical costs, lost productivity, and lost lives.[[11]](#endnote-11) The challenge is making sure everyone has access to a healthy diet.

Yet according to the CDC, state and federal governments spend **one thousand times more money to treat chronic diseases than to prevent them** ($1,390.00 to treat vs. $1.21 to prevent, per person each year).

***Creating access to healthy options***

Public health professionals are zeroing in on the places where people live, work and play, knowing that changing those environments can have a major impact on health. The goal is to make healthy food readily available to all Oregonians, not something people struggle to find or afford.

For example, in Oregon:

* Fifty-nine percent of Oregon worksites now provide easy access to healthy food choices for employees.[[12]](#endnote-12)
* Schools are adopting healthy foods policies for cafeterias and vending machines.
* Schools districts across Oregon are participating in Farm to School activities
* The number of Farmers Markets continues to increase. Many markets accept WIC fruit and veggie vouchers, WIC and Seniors Farmers Market coupons and SNAP benefits (EBT).
* The City of Woodburn adopted a healthy foods option for park vendors and is expanding into other events in Marion County.
* Over the past two years, roughly 4,000 state workers enrolled in the WeightWatchers-at-Work program have tallied a total weight loss of more than 100,000 pounds.[[13]](#endnote-13)
* Multnomah and Lane County’s Healthy Retail Initiatives are increasing access to healthy, affordable food through neighborhood-based convenience stores.

Letter to the Editor

To customize and submit. Possible authors might be someone from the health department, a community partner, an employer who is embracing healthy food policies at work, etc.

This October 24 is the first Food Day, a national observance that shines Earth Day-like attention on healthy food. Ensuring that everyone in (xxx county/city) has access to healthy, affordable food is one of our key priorities.

Where people live has a major impact on their access to healthy food. If people can’t get to a grocery store, or can’t afford healthy food once they’re there, they can’t eat well. If the vending machines at work stock only candy and soda, that’s what workers eat. If healthy food costs substantially more than fast food, kids eat burgers and soda.

We have an opportunity to make our community a place where healthy options are the norm, not something we have to seek out. For example, (insert details about what’s happening in the county—worksite wellness, school policies, park food vendors, healthy retail, etc.).

Continuing this work, ensuring that we all have access to healthy options, is a vital priority for our county, state and country.

(Name)  
(XX County Health Department or other organization)

1. Oregon Behavioral Risk Factor Surveillance System, 2009. (Actual number 60.2 percent.) [↑](#endnote-ref-1)
2. Finkelstein E, Fiebelkorn I, Wang G. “State-level estimates of annual medical expenditures attributable to obesity.” *Obesity Research*, 2004;12:18-24. [↑](#endnote-ref-2)
3. http://nwhf.org/focus\_areas/background/PAN/ [↑](#endnote-ref-3)
4. Northwest Health Foundation Press Release: http://nwhf.org/images/files/Obesity\_Report\_Press\_Release.pdf [↑](#endnote-ref-4)
5. Ostbye T, Dement JM, Krause KM. “Obesity and workers’ compensation: results from the Duke Health and Safety Surveillance System.”*Arch Intern Med.* 2007 Apr 23;167(8):766-73. [↑](#endnote-ref-5)
6. Overweight and Obesity: Health Consequences, CDC, http://www.cdc.gov/obesity/causes/health.html (accessed Oct 12, 2011) [↑](#endnote-ref-6)
7. Oregon Health Promotion and Chronic Disease Prevention. *Keeping Oregonians Healthy, 2007.* Portland, Oregon: Oregon Department of Human Services, Oregon Public Health Division, 2008. [↑](#endnote-ref-7)
8. Total health care spending in the state for all payers—public, private and individuals—projected to be $19.3 billion in 2008. Office of Health Policy & Research, Trends in Oregon’s Health Care Market and the Oregon Health Plan, February 2009. Accessed April 7, 2011: http://www.oregon.gov/OHPPR/RSCH/docs/Trends/Trends\_in\_Oregons\_Health\_Care3.pdf [↑](#endnote-ref-8)
9. Anderson G. *Chronic conditions: making the case for ongoing care.* Princeton, NJ: Robert Wood Johnson Foundation. 2010; 16. At www.rwjf.org/pr/product.jsp?id=50968. Accessed on Jan. 24, 2011. (Health care spending for people with chronic conditions amounts to 84 percent of total health care spending.) [↑](#endnote-ref-9)
10. Oregon Health Policy Board or the Oregon Health Authority. Oregon Health Improvement Plan. December 2010. [↑](#endnote-ref-10)
11. Elizabeth Frazao. “High Costs of Poor Eating Patterns in the United States.” In America’s Eating Habits: Changes and Consequences. Edited by Elizabeth Frazao. Economic Research Service, U.S. Department of Agriculture. Washington, DC: USDA, 1999. Agriculture Information Bulletin No. 750, pp. 5-32. [↑](#endnote-ref-11)
12. Oregon Healthy Worksite Initiative. *Healthy Worksite Initiative Fact Sheet: 2008 Oregon Employer Survey*. Portland, Oregon: Oregon Department of Human Services, Oregon Public Health Division, 2009. [↑](#endnote-ref-12)
13. # PEBB data from WeightWatchers, March 2011.

    [↑](#endnote-ref-13)