

Arizona Health Improvement Plan

Healthy Communities

Criteria	Health Issue Data/Information
<p>Scope or Magnitude of the Problem</p> <ul style="list-style-type: none"> How many people across Arizona are affected by the health issue? 	<p>% of population with low food access</p> <ul style="list-style-type: none"> 26% of the Arizona population lives in census tracts designated as food deserts. A food desert is defined as a low-income census tract (where a substantial number or share of residents has low access to a supermarket or large grocery store). [US Census Bureau, County Business Patterns] <p>Grocery Store Access</p> <ul style="list-style-type: none"> Approximately 13 grocery stores per 100,000 people. Grocery stores are defined as supermarkets and smaller grocery stores primarily engaged in retailing a general line of food, such as canned and frozen foods; fresh fruits and vegetables; and fresh and prepared meats, fish, and poultry. Convenience stores and large general merchandise stores that also have retail food, such as supercenters and warehouse club stores are excluded. [US Census Bureau, American Community Survey] <p>% of population who use active transport for work</p> <ul style="list-style-type: none"> Approximately 5% of the population uses active transport as their primary means of commuting to work. This includes walking, bicycles, buses or trolley buses, streetcars or trolley cars, and subway or railroads. [US Census Bureau, American Community Survey] <p>Park Access</p> <ul style="list-style-type: none"> Approximately 43% of population lives within ½ mile of a park. [ESRI Map Gallery; Open Street Map]
<p>Severity (Morbidity / Mortality)</p> <ul style="list-style-type: none"> Does the health issue result in death, disability, or ongoing illness? 	<ul style="list-style-type: none"> Lack of Physical Activity Access: Lack of physical activity can lead to cardiovascular disease, diabetes, cancer, hypertension, obesity, depression, osteoporosis, and premature death. Americans who use transit spend a median of 19 minutes walking to and from transit [Walking To Public Transit] Lack of Healthy Food Access: Poor nutrition can contribute to obesity, tooth decay, hypertension, high cholesterol, heart disease, diabetes, osteoporosis, cancer, depression, and eating disorders Effect of Poverty: Highest rates of obesity occur among population groups with the highest poverty rates and least education. Poverty and food insecurity are associated with lower food expenditures, low fruit and vegetable consumption, and lower-quality diets

<p>Potential to Impact (Winnable Battle)</p> <ul style="list-style-type: none"> • What resources (funding, workforce, programs, etc.) are available to address the health issue? • Can progress be made on the health issue within five years? • Could addressing the health issue also address other problems at the same time? 	<ul style="list-style-type: none"> • Resources are available to address healthy communities include several grant funded programs: Material and Child Health Block Grant, Supplemental Nutrition Assistance Program-Education (SNAP-Ed), Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), CDC-1305: Public Health in Action Grant, Health in Arizona Policy Initiative (HAPI), and PEW Health Impact Assessment grant • The Community Preventative Task Force recommends environmental and policy approaches to increase physical activity levels potentially impacting health and social inequities, increase physical activity levels, increase consumer choice for places to live, reduce crime and stress, increase sense of community and decrease isolation, increase in safety of walking and biking, and improve air quality [Community Guide] • The Centers for Disease Control and Prevention support healthy community design initiatives because these initiatives can increase physical activity, reduce injury, increase access to healthy food, improve air and water quality, minimize effects of climate change, reduce mental stresses, strengthen the social fabric of a community, and provide fair access to livelihood, education, and resources [CDC Healthy Places] • Public and private partnership such as the Alliance for a Healthier Generation, founded by the American Heart Association and the Clinton Foundation, work to reduce the prevalence of childhood obesity and to empower kids to develop lifelong, healthy habits • Strategies such as a competitive foods policy, school based garden, and healthy school lunch are being implemented • Healthy communities help prevent chronic disease (heart disease, cancer, asthma and other respiratory diseases), reduce health risk factors (tobacco use, substance abuse), and attain health equity [CDC Healthy Communities Program]
<p>Cost-Effectiveness</p> <ul style="list-style-type: none"> • What is the cost of not addressing the health issue? For example, how does it impact health care costs or Medicaid costs? • How much money addressing the problem can save? • Does the money put into a solution reduce costs enough to make the solution worthwhile? • What's the value of addressing the health issue? 	<ul style="list-style-type: none"> • Community-based programs to increase physical activity, improve nutrition, and prevent smoking/tobacco use could save \$16 billion on healthcare costs within five years; with an investment of \$10 per person per year [Trust for America's Health] • In Arizona, potential savings within 5 years would total \$242 million, equating to a return on investment of 4.2:1 [Trust for America's Health] • For every \$1 invested in walking trails and programs, \$3 could be saved on healthcare costs [Weintraub, WS]
<p>Quality of Life</p> <ul style="list-style-type: none"> • How do the health issue impact daily living 	<ul style="list-style-type: none"> • The environments in which we live, learn, work, and play, including the social, physical, and economic conditions, can positively or negatively impact health, and are a major determinant of overall health and safety. Communities that have access to affordable, nutritious foods, and

<p>activities?</p> <ul style="list-style-type: none"> • How does it impact usual activities, such as work, self-care, or recreation? 	<p>opportunities for active living promote and enable community members to make healthy choices</p>
<p>Disparities</p> <ul style="list-style-type: none"> • How are groups of people affected differently by the health issue? • Are some groups of people more likely to be affected by the health issue than others? How significant are the differences? • Types of disparities can include but are not limited to racial and ethnic groups, geographic location, age, gender, income, education, etc. 	<ul style="list-style-type: none"> • Geographic location and geo-political environments will influence access to community resources. It may be harder for rural counties to have adequate access to grocery stores, places for physical activity, transit and transportation options if the infrastructure is not in place. For instance those who use public transit to commute to work in Cochise, La Paz, Mohave, Pinal, Santa Cruz, and Yavapai are all under 0.5% of the population; this may be a result of public transit infrastructure not being in place [Community Commons] • Communities with high rates of poverty and crime tend to have higher incidence of chronic disease (such as asthma) and injury
<p>Evidence-based Models Exist</p> <ul style="list-style-type: none"> • Are evidence-based models relevant to cultural and geographic differences? For example, will they work in rural as well as urban communities? 	<ul style="list-style-type: none"> • See “Winnable Battles” above • The Community Preventative Task Force recommends Health Communication Campaigns that include mass media and health-related product distribution. Campaigns utilized, apply integrated strategies to deliver messages designed to influence health behaviors of target audiences. Messages are communicated through various channels including mass media, small media (brochures, posters, and printed materials), social media, and interpersonal communication. [Community Guide] • The National Prevention Strategy recommends actions that government, communities, businesses, schools, and families can take to improve the health and safety of communities
<p>Community Readiness / Interest in Solving</p> <ul style="list-style-type: none"> • What’s the degree of public support and/or interest in working on the health issue? • Which counties include this issue as a community health priority? 	<ul style="list-style-type: none"> • One third of the 15 Arizona counties, identified creating healthy communities and healthy lifestyles as one of their top 10 priorities (AZ State Health Assessment, 2014) • Nine (9) of 13 counties (69%) participating in the Healthy Arizona Policy Initiative (HAPI), are working on healthy community design strategies such as improving street design for bicyclists, pedestrians and users of transit; completing Health Impact Assessments; and increasing accessibility and availability of healthful foods and community gardens. Four (4) of 15 Arizona Nutrition Network (AzNN) contractors will work to assess and build capacity to implement active living policy in FFY 15 • Twelve (12) of 15 AzNN contractors will work to create partnerships, with community organizations such as parks and trails in FFY 15 • By the end of 2014, Arizona will have completed seven health impact assessments
<p>Arizona Ranking below the US data</p>	<p>% of population within ½ mile radius from a park</p>

<ul style="list-style-type: none"> • Is Arizona doing better or worse than the U.S.? • How much better or worse are we doing compared to the nation? 	<table border="0"> <tr> <td style="vertical-align: top;"> <u>Arizona</u> <ul style="list-style-type: none"> • 43.28% </td> <td style="vertical-align: top;"> <u>United States</u> <ul style="list-style-type: none"> • 38.01% </td> </tr> <tr> <td colspan="2" style="text-align: center;">% of population with low food access</td> </tr> <tr> <td style="vertical-align: top;"> <u>Arizona</u> <ul style="list-style-type: none"> • 26% </td> <td style="vertical-align: top;"> <u>United States</u> <ul style="list-style-type: none"> • 23.61% </td> </tr> <tr> <td colspan="2" style="text-align: center;">Grocery Stores per 100,000 people</td> </tr> <tr> <td style="vertical-align: top;"> <ul style="list-style-type: none"> • 13 stores per 100,000 people </td> <td style="vertical-align: top;"> <ul style="list-style-type: none"> • 21.14 stores per 100,000 people </td> </tr> <tr> <td colspan="2" style="text-align: center;">% of population who use public transportation for work</td> </tr> <tr> <td style="vertical-align: top;"> <ul style="list-style-type: none"> • 1.96% </td> <td style="vertical-align: top;"> <ul style="list-style-type: none"> • 4.98% </td> </tr> </table>	<u>Arizona</u> <ul style="list-style-type: none"> • 43.28% 	<u>United States</u> <ul style="list-style-type: none"> • 38.01% 	% of population with low food access		<u>Arizona</u> <ul style="list-style-type: none"> • 26% 	<u>United States</u> <ul style="list-style-type: none"> • 23.61% 	Grocery Stores per 100,000 people		<ul style="list-style-type: none"> • 13 stores per 100,000 people 	<ul style="list-style-type: none"> • 21.14 stores per 100,000 people 	% of population who use public transportation for work		<ul style="list-style-type: none"> • 1.96% 	<ul style="list-style-type: none"> • 4.98%
<u>Arizona</u> <ul style="list-style-type: none"> • 43.28% 	<u>United States</u> <ul style="list-style-type: none"> • 38.01% 														
% of population with low food access															
<u>Arizona</u> <ul style="list-style-type: none"> • 26% 	<u>United States</u> <ul style="list-style-type: none"> • 23.61% 														
Grocery Stores per 100,000 people															
<ul style="list-style-type: none"> • 13 stores per 100,000 people 	<ul style="list-style-type: none"> • 21.14 stores per 100,000 people 														
% of population who use public transportation for work															
<ul style="list-style-type: none"> • 1.96% 	<ul style="list-style-type: none"> • 4.98% 														
<p>Political Feasibility</p> <ul style="list-style-type: none"> • Is there enough support from elected officials or other policymakers to help move a strategy to implementation? 	<ul style="list-style-type: none"> • Health impacts are increasingly considered in city General Plans and county Comprehensive Plans • The feasibility of specific strategies will vary depending on the community 														
<p>Trend Direction</p> <ul style="list-style-type: none"> • Has the health issue been getting better or worse over time? 	<ul style="list-style-type: none"> • Obesity rates increased dramatically during the last decade in the nation, as well as in Arizona 														

Resources:

[US Department of Agriculture, Economic Research Service, USDA Food Access Research Atlas: 2010](#)

[US Census Bureau, County Business Patterns: 2012](#)

[US Census Bureau, American Community Survey: 2008-12](#)

[ESRI Map Gallery: 2013](#)

[OpenStreetMap: 2013](#)

[Food Research and Action Center, Food Hardship in America 2012](#)

[Households with and without Children February 2013](#)

[Arizona State Health Assessment, 2014](#)

[Centers for Disease Control and Prevention, Healthy Communities Program](#)

[Centers for Disease Control and Prevention, Healthy Places](#)

[Community Commons](#)

[The Guide to Community Preventive Services](#)

[Trust for America's Health](#)

[Walking to Public Transit](#)

[Weinrub WS, et al. Value of primordial and primary prevention for cardiovascular disease: a policy statement from the American Heart Association. Circulation. 2011; 124:967-990.](#)