



Building Sustainable Infrastructure to Support Healthy Weight Among Women of Reproductive Age in Los Angeles County

BACKGROUND

➤ Obesity is linked to many adverse health outcomes including increase risk of complications during pregnancy including:

- Gestational diabetes
- Preeclampsia
- Large fetus
- Pre-term birth.

➤ Congenital abnormalities occur 35% more frequently when mothers are overweight and 37.5% more when mothers are obese.

➤ Children born to obese mothers are twice as likely to become obese and develop type 2 diabetes later in life. (Kim)

➤ Los Angeles County Department of Public Health, Maternal Child and Adolescent Health (MCAH) participated in the national Healthy Weight Action Learning Collaborative (HWALC) which commenced in 2006.

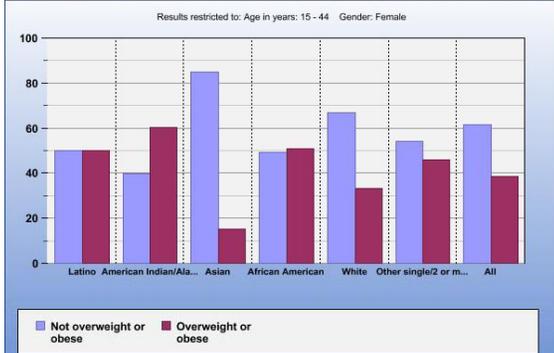
➤ Collaborative partners included seven other state and local teams from across the country.

➤ The national Collaborative concluded activity in February 2008; however Los Angeles County MCAH HWALC continued to develop its initiatives/projects.

- Approximately 2.2. million women of reproductive age (15-44 years) in LA County
- 39.1% of women of reproductive age in CA are overweight or obese (CHIS)
- 43.2% of pregnant women are overweight or obese in CA.

Racial/ethnic minority women of reproductive age suffer higher rates of overweight/obesity. (Fig1).

Body Mass Index - 2 level compared by Race- UCLA CHPR (2007 and beyond)



Source: 2007 California Health Interview Survey www.CHIS.ucla.edu

Fig.1 Overweight/Obesity Women ages 15-44 in California 2007

OBJECTIVE

With absence of funding and other pressing priorities, the HWWALC faces imminent termination. The objective is to preserve HWWALC current initiatives in order to build sustainable infrastructure to support healthy weight among women of reproductive age within Los Angeles county .

OBESITY CONTRIBUTING FACTORS

From physiology to physical environment we can link many factors to obesity: genetics, lifestyle/behaviors, culture, access to preventative services and the food and built (physical) environment. (Fig 2).

The HWWALC in Los Angeles developed initiatives to address several of these factors (Fig 3):

- Health Education
- Lifestyle Modification
- Quality of physician-patient interactions

Fig. 2 Multi-Causes of Obesity

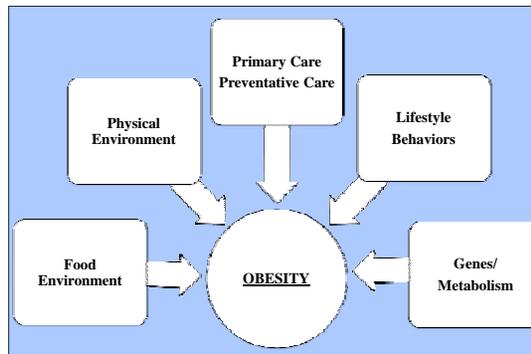


Fig. 3 HWALC Projects/Initiatives

Project/ Initiatives	Objective/Goal	Current Status
1. Focus Groups	Identify barriers that keep low income women from maintaining healthy weight	Brochures and educational materials developed; culturally specific curriculums are being tested. However the built environment and access to nutritious food remains a major barrier.
2. Worksite Wellness	Implement research-based worksite wellness programs and encourage adoption of worksite wellness policies.	Implementation of 'WORKING' and other worksite wellness programs are progressing. However sustainability is challenged by lack of formalized policies.
3. Provider Messaging	Develop clear and pertinent messages that providers can communicate to patients that may suffer from obesity.	California Medical Association Foundation published physician guidelines to treat adult obesity. Survey to be administered to establish baseline awareness and use of the guidelines among physicians in CA.

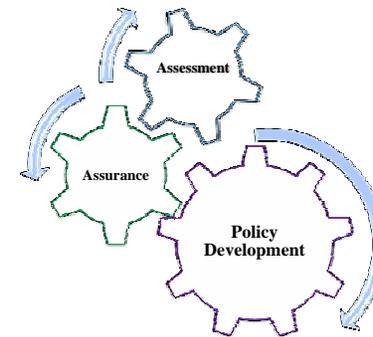
POLICY AGENDA SETTING: Framework for development

HWALC has mainly focused on changing lifestyle behaviors by supporting initiatives that deal with the individual. Individual education on nutrition and exercise through the brochures, individual participation in worksite wellness, and individual guidance from a physician.

Policies need to be created to support institutionalized change whether in the workplace, in the community or at the state level.

The CORE functions of Public Health (Fig. 4) should be used as a framework to effectively create a policy agenda that will support the development of sustainable infrastructure.

Fig. 4 CORE Functions of Public Health



Assessment:

- Collect data
- Analyze data
- Disseminate pertinent findings

Policy Development:

- Educate individuals equipping them to make healthy choices
- Mobilize the community
- Collaborate with other agencies to identify health issues and policy solutions

Assurance:

- Select standards
- Set objectives
- Evaluate achievement
- Ensure that improvements are made where necessary

POLICY AGENDA SETTING : Process

- Identify the target population and the main public health 'problems' that need solutions.
- Prioritize identified problems in order of impact on the public's health.
- Brainstorm potential policy solutions one item at a time with the organization's mission in mind.
- Partner with advocacy groups or policy analyst to develop written policies.
- Identify allies and opponents as well as each group's respective position.
- Develop framing strategies for both allies and opponents.
- Identify windows of opportunity for introducing the policy.
- Utilize voting if consensus among the collaborative proves difficult.