



## **The Maine Obesity Advisory Council**

**A new opportunity for collaboration,  
coordination, and collective impact**

## Issue

- Obesity poses a serious threat to public health and productivity in Maine.
- Adult obesity rates have nearly tripled since 1990 - almost 30% of adults and 14% of high school students have obesity today.
- Obesity increases the risk for many serious health conditions, including high blood pressure, diabetes, and depression.
- Obesity imposes a tremendous economic burden on Maine families – direct medical costs alone total \$450 million every year.
- Today's generation may be the first to live shorter, less healthy lives than their parents.



## Background

- Maine Prevention Services, Domain 5 (Obesity Prevention) deliverable: “Statewide Obesity Prevention Stakeholder Group”
- Co-convened by Maine CDC and Let’s Go! and facilitated by outside consultant
- Objective: Develop a roadmap for local, district-level, and state-level programs, policies, and partnerships that help guide work on the ground to maximize engagement, connectivity, and collective impact toward our shared goal of reducing the number of Maine children and adults with obesity

Maine Obesity Advisory Council



# Process

- 21 statewide partners committed to a collaborative, consensus-based process
- 5 half-day meetings over 9 months, starting in October 2017
- Foundational documents
  - “Community Strategies to Prevent Obesity”, U.S. Centers for Disease Control
  - “Accelerating Progress in Obesity Prevention”, Institutes of Medicine
  - “Getting to Equity in Obesity Prevention”, Kumanyika, Drexel University
  - Previous planning efforts in Maine
- Reference review: Dr. Tory Rogers
- Priority setting for ease and impact
- Four sub-committees by area of focus
- Final recommendations: a shared roadmap for action

Maine Obesity Advisory Council



# Recommendations

- **1 health outcome** (long-term goal):
  - “Reduce obesity and the medical conditions associated with obesity that result in poor health, higher medical costs, and negative impacts on quality of life”
- **5 behavior changes in 4 areas of focus** (medium-term goals)
  - Foods and beverages, physical activity, breastfeeding, cross-sector coordination and collaboration
- **11 policy and environmental changes** (short-term goals)
- **27 strategies, including standards by setting and for government**



# Moving Forward

- Sharing recommendations broadly
- Engaging new partners
- Ongoing leadership and advisory functions
- Pursue new goals and objectives that support state and local partners, including
  - Promoting/amplifying recommendations
  - Education & tools/skill-building
  - Data hub
- Contacts:
  - Dr. Tory Rogers [ROGERV@mmc.org](mailto:ROGERV@mmc.org)
  - Dawn Littlefield Gordon [dawn.littlefield@maine.gov](mailto:dawn.littlefield@maine.gov)

Maine Obesity Advisory Council





## The Maine Obesity Advisory Council

**A new opportunity for collaboration, coordination, and collective impact**

### The threat to public health

Here in Maine, adult obesity rates have nearly tripled since 1990 and today almost 30% of adults and 14% of high school students have obesity. Adults with obesity spend 42% more on health care costs than adults with healthy weights and the resulting direct medical costs of obesity now total more than \$450 million every year in Maine. When lost productivity and other indirect costs are included, the economic impact of physical inactivity, overweight and obesity in Maine reaches \$2.56 billion every year. Adults who have obesity are at increased risk for many serious health conditions, including high blood pressure, type 2 diabetes, heart disease, stroke, respiratory problems, depression, anxiety and cancer. Children with obesity are more likely to have insulin resistance, unhealthy levels of fats, high blood pressure, depression, anxiety and poor school performance. And while the national obesity rate for youth has begun to level off, today's generation may be the first to live shorter, less healthy lives than their parents.

### A shared roadmap for action

For over 15 years, Maine has planned and implemented strategic responses to the obesity epidemic in our communities and in our state public health programs. Building on those efforts, the Maine Obesity Advisory Council will bring together medical professionals, health systems, insurers, hospitals, non-governmental health organizations, educators, community leaders, universities, municipal planners, and other stakeholders to develop a roadmap for action that can guide our work on the ground and create an ongoing space to assess, amend, and update our shared path forward. Together we will create a plan to engage parents, businesses, and community partners in our shared goal of reducing the number of Maine children and adults with obesity.

### A cooperative approach

The Maine Obesity Advisory Council is co-convened by the Maine Center for Disease Control & Prevention and Let's Go!. Almost two dozen individuals with expertise and experience across sectors and settings have been asked to participate actively in a six-month process of reviewing data, assessing recommendations from previous planning efforts, collecting input from additional stakeholders, and charting a course of action based on the best available evidence. An outside facilitator will help guide the process and encourage authentic engagement, transparency, and productivity.

### A collective benefit

The Maine Obesity Advisory Council is being created to serve all stakeholders, across all geographic locations and settings. The Council will be recommending high impact strategies, fostering partnerships to maximize results, and engaging in ongoing collaboration to support local, regional, and statewide efforts to ease the health and financial impacts on Maine children and adults with obesity.

## The Maine Obesity Advisory Council



Maine Center for Disease Control & Prevention  
Department of Health and Human Services

**For more information, contact**

Tory Rogers at [rogerv@mmc.org](mailto:rogerv@mmc.org) or

Dawn Littlefield-Gordon at [dawn.littlefield@maine.gov](mailto:dawn.littlefield@maine.gov)



[www.letsgo.org](http://www.letsgo.org)

September 2017



# MAINE OBESITY ADVISORY COUNCIL

## Recommendations

to reduce obesity and the medical conditions associated with obesity that result in poor health, higher medical costs, and negative impacts on quality of life in Maine

### A INCREASE THE CONSUMPTION OF HEALTHIER FOODS & BEVERAGES

| We can do this by...   | Specific strategies to achieve these policy and environmental changes  |
|--|--|
| 1. Increasing access to and affordability of healthier food & beverages                          | a. Increase the availability of healthier food & beverage choices in all food sold or served in places where children and adults live, learn, work, and play |
|  | b. Improve the affordability of healthier food & beverage choices in all food sold or served in places where children and adults live, learn, work, and play |
|  | c. Increase the availability of foods from local farms   |
| 2. Increasing public communications that support the consumption of healthier food and beverages | a. Increase the marketing, advertising, and promotion of healthier food and beverages  |

### B DECREASE THE CONSUMPTION OF LESS HEALTHY FOOD & BEVERAGES

| We can do this by...  | Specific strategies to achieve these policy and environmental changes   |
|---|---|
| 1. Decreasing access to and affordability of less healthy food & beverages                          | a. Restrict the availability of less healthy food & beverage choices in all food sold or served in places where children and adults live, learn, work, and play |
|   | b. Reduce the affordability of less healthy food & beverage choices in all food sold or served in places where children and adults live, learn, work, and play  |
| 2. Decreasing public communications that support the consumption of less healthy food and beverages | a. Restrict the marketing, advertising, and promotion of less health food and beverages   |

### C INCREASE PHYSICAL ACTIVITY

| We can do this by...  | Specific strategies to achieve these policy and environmental changes   |
|---|---|
| 1. Increasing opportunities for physical education and physical activity  | a. Require physical education in all public schools, including a plan that demonstrates progress toward evidence-based guidelines |
|   | b. Increase opportunities for extracurricular physical activity   |
|   | c. Reduce screen time in child care facilities  |
| 2. Increasing public communications that support physical activity        | a. Increase the advertising and promotion of physical education and physical activity   |
| 3. Improving the built environment to create or support physical activity | a. Improve access to outdoor recreational facilities  |
|   | b. Enhance infrastructure supporting bicycling  |
|   | c. Enhance infrastructure supporting walking  |
|   | d. Increase the (%/acres) of zoned land that is designated for mixed use  |
|   | e. Enhance safety in areas where people are or could be physically active   |

## D INCREASE THE INITIATION AND DURATION OF BREASTFEEDING

| We can do this by...   | Specific strategies to achieve these policy and environmental changes   |
|--|---|
| 1. Increasing awareness and understanding of the benefits of breastfeeding | <ul style="list-style-type: none"> <li>a. Educate pregnant women and extended families about the benefits of breastfeeding</li> <li>b. Train healthcare professionals to assist mothers and babies to breastfeed</li> <li>c. Increase the marketing, advertising, and promotion of breastfeeding</li> </ul> |
| 2. Improving environments for breastfeeding                                | <ul style="list-style-type: none"> <li>a. Increase opportunities and support for breastfeeding in the workplace</li> <li>b. Increase opportunities and support for breastfeeding in public spaces</li> </ul>  |

## E INCREASE CROSS-SECTOR COORDINATION AND COLLABORATION

| We can do this by...  | Specific strategies to achieve these policy and environmental changes  |
|---|--|
| 1. Enhancing public-private partnerships that are engaging in efforts to prevent obesity and promote healthy weight | <ul style="list-style-type: none"> <li>a. Improve the systems and skills of community partnerships, including staff, board, stakeholders, and champions</li> <li>b. Engage local governments and stakeholders as active members of community partnerships</li> </ul>   |
| 2. Increasing understanding of the health and economic benefits of preventing obesity and promoting healthy weight  | <ul style="list-style-type: none"> <li>a. Educate the public, patients, and providers about the health and economic impacts of obesity, as well as the role each one of us can play in its prevention</li> <li>b. Implement surveillance and evaluation of community engagement and outcomes</li> <li>c. Implement surveillance and evaluation of bias and stigma, including impacts on behavior</li> <li>d. Produce and disseminate annual reports of community engagement and outcomes to partners, stakeholders, decision-makers, and the public</li> </ul> |

