Nutrition and Healthy Foods

Nutrition, Healthy Foods and Obesity in Wisconsin

Adequate, appropriate and safe food and nutrition means the regular and sufficient consumption of nutritious foods across the life span, to support normal growth and development of children and promote physical, emotional, and social well-being for all people.

Good nutritional practices can reduce the risk for a number of chronic diseases, such as type 2 diabetes, cancer, heart disease, and stroke, as well as chronic conditions such as obesity. Many cultural, social and individual changes have occurred to make healthful eating more difficult and obesity more likely. Changing environments and implementing policies to support healthful eating are likely to be critical for preventing obesity and improving overall health.

Obesity

Wisconsin has the 14th highest adult obesity rate in the U.S.\(^1\)

Obesity is defined as an excessively high amount of body fat in relation to lean body mass in an individual. In Body Mass Index (BMI) measurements, obesity is defined as a BMI equal to or greater than 30 in adults.

In 2014, approximately two-thirds (67.4\%) of Wisconsin adults were overweight or obese. According to annual prevalence estimates from the CDC, obesity in Wisconsin increased by 35\% from 2000 to 2010.\(^1\)\(^2\) If obesity rates stay consistent, more than 56\% of adults will be obese by 2030.\(^2\)\(^3\)

Nearly one-quarter of Wisconsin high school students were overweight or obese in 2014. Childhood obesity disproportionately affects low-income and minority children. Children who are obese in their preschool years are more likely to be obese in adolescence and adulthood and to develop chronic diseases, such as diabetes, hypertension, hyperlipidemia, asthma, and sleep apnea.\(^4\)

Health Behaviors

Breastfeeding in Wisconsin

Research has shown that the best food for baby’s first year of life is breast milk, with health, nutritional, economic and emotional benefits to the mother and baby. In 2012, 81\% of Wisconsin infants were ever breastfed.\(^5\) Approximately 70\% of all low-income children were ever breastfed; the highest percentage was among Hispanic children (81\%) and the lowest was among Asian children (50\%). In the same year, 31\% of Wisconsin infants were breastfed exclusively for the first three months and 17\% were breastfed exclusively for the first six months. The national percentage is slightly lower for infants ever breastfed (77\%), slightly higher for infants who were exclusively breastfed at three months (36\%), and approximately the same for infants who were exclusively breastfeed at six months (16\%).\(^6\)
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According to the Healthiest Wisconsin 2020 Baseline and Health Disparities Report, Black mothers were significantly less likely to initiate breastfeeding and to sustain breastfeeding practices three months after birth compared to White and Hispanic mothers. Similar to national trends, the most common reason mothers gave for not breastfeeding was “I didn’t want to breastfeed” (54%). Income and education are known to be associated with the likelihood of a mother to breastfeed. It has been demonstrated that knowledge of the health benefits of breastfeeding positively influences initiation of breastfeeding.

Fruit and Vegetables
The Dietary Guidelines for Americans, 2015 recommends that Americans eat more fruits and vegetables as part of a healthy eating pattern throughout their life. Still, more than one-quarter of Wisconsin adults self-reported consuming vegetables less than one time daily, and more than one-third reported consuming fruits less than one time daily.

<table>
<thead>
<tr>
<th>Fruit and Vegetable Consumption</th>
<th>WI</th>
<th>U.S.</th>
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<tbody>
<tr>
<td>% of Adults who report consuming fruits less than one time daily</td>
<td>35.6%</td>
<td>37.7%</td>
</tr>
<tr>
<td>% of Adults who report consuming vegetables less than one time daily</td>
<td>26.0%</td>
<td>22.6%</td>
</tr>
<tr>
<td>% of Adolescents who report consuming fruits less than one time daily</td>
<td>34.1%</td>
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Source: Centers for Disease Control and Prevention: BRFSS 2011, YRBSS 2011

Access to Healthy Foods
A U.S. Department of Agriculture report, based on 2010 U.S. Census data, found that food insecurity affected more than 270,000 households in Wisconsin. A household is food insecure if “access to safe, nutrition foods was limited or uncertain for at least one person at some point during the year.”

In 2012, among households in Wisconsin eligible for Special Supplemental Nutrition for Women, Infants and Children (WIC), more than half reported overall food insecurity, and one in five reported very low food security.

The Wisconsin WIC offers the WIC Farmers Market Nutrition Program (WIC-FMNP), which aims to improve access to locally grown fresh fruits and vegetables by providing WIC participants with checks to use at farmers markets. There are approximately 1,000 Wisconsin farmers participating in the program. While Wisconsin farmers markets were more likely to accept coupons from WIC-FMNP (WI-36.9%, US – 25.8%), farmers markets in Wisconsin were less likely to accept SNAP benefits than were their nationwide counterparts (WI-13.1%, US 21%).
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2 http://healthyamericans.org/reports/obesity2012/?stateid=WI
3 http://www.rwjf.org/content/dam/farm/reports/reports/2012/rwjf401318
8 Wisconsin Department of Health Services, Division of Public Health. Wisconsin PRAMS, 2009-2011.
12 Wisconsin Department of Health Services, Division of Public Health, Bureau of Community Health Promotion. Food Insecurity in the Wisconsin WIC Population, January 2012.
13 Wisconsin Department of Health Services, Division of Public Health, Bureau of Community Health Promotion. Food Insecurity in the Wisconsin WIC Population, January 2012.