

STEP 4: Determining Interventions and Developing an Action Plan

Defining Goals and Objectives

Healthy People 2010 Objectives Related to Overweight and Obesity

<i>Policy and Regulation</i>	
<i>School Policies – Increase the proportion of:</i>	
7.2	– Middle, junior high, and senior high schools that provide school health education to prevent health problems in the following areas: unintentional injury; violence; suicide; tobacco use and addiction; alcohol and other drug use; unintended pregnancy; HIV/AIDS, and STD infection; unhealthy dietary patterns; inadequate physical activity; and environmental health.
7.3	– College and university students receiving information on the six priority health risk behavior areas.
19.2	– Children/ adolescents aged 6-19 years whose intake of meals /snacks at schools contributes to good overall dietary quality.
22.8	– Public and private schools that require daily physical education for all students.
22.9	– Adolescents who participate in daily school physical education.
22.10	– Adolescents who spend at least 50% of school physical education class time being physically active.
<i>Worksite Policies- Increase the proportion of:</i>	
7.5	– Worksites that offer a comprehensive employee health promotion program to their employees.
7.6	– Employees who participate in employer-sponsored health promotion activities.
19.2	– Worksites that offer nutrition or weight management classes or counseling
22.1	– Worksites offering employer-sponsored physical activity and fitness programs.
<i>Public Health Infrastructure- Increase the proportion of:</i>	
7.10, 7.11	– Local health departments with culturally and linguistically appropriate community health promotion and disease prevention strategies.
23.8, .9, .11	– Health agencies that create a culturally and linguistically skilled workforce to competently provide essential public health services.
23.1	– Public health agencies that have a health improvement plan.
23.2	– State and local public health agencies that conduct or collaborate on population-based prevention research.
23.2	– Evaluate the extent to which statutes, ordinances, and bylaws assure the delivery of essential public health services.
<i>Health Care System – Increase the proportion of:</i>	
7.7, .8, .9	– Health care organizations, hospitals, and MCOs that provide chronic disease prevention and health promotion activities that address the community priority health needs, and of patients satisfied with the patient education received from their health care organizations.
3.10h	– Primary care providers that counsel their at-risk patients about physical activity
19.2	– Physician office visits made by patients with a diagnosis of cardiovascular disease, diabetes, or hyperlipidemia that include counseling or education related to diet and nutrition
1.3	– Persons appropriately counseled about health behaviors.

11.6	– Persons who report that their health care providers have satisfactory communication skills.
7.12	– Older adults who have participated in at least one organized health promotion activity.
Information and Surveillance– Increase the proportion of public health agencies that:	
23.1	– Provide Internet access and apply electronic information systems to public health practice.
23.2	– Make information available to the public in the past year on leading health indicators, health status indicators, and priority data needs.
23.3	– All major health data systems that use geocoding to promote use of geographic information systems.
23.4	– Health status indicator data available on subgroups of the population.
23.2	– Public health agencies that gather accurate data on public health expenditures.
Environmental Change and Individual Behavioral Change and Health Status	
22.1	– Increase the proportion of schools providing access to their activity spaces and facilities to all persons outside of normal school hours.
Nutrition-Increase the proportion of persons aged 2 years and older who consume:	
19.5, .6, .7	– At least daily servings of fruit, three daily services of vegetables, with at least one third being dark green or orange vegetables, six daily servings of grain products, with at least being whole grains.
19.8, .9,10	– Less than 10 percent of calories from total fat, no more than 30 percent of calories from fat, 2,400 mg or less of sodium per day
19.1	– Meet dietary recommendations for calcium.
19.1	– Reduce iron deficiency among pregnant females, young children and females of childbearing age.
19.1	– Reduce anemia among low-income pregnant females in their third trimester
19.2	– Increase the proportion of children /adolescents aged 6-19 yrs. whose intake of meals and snacks contribute to good overall dietary quality.
Physical Activity- Increase the proportion of adults who:	
22.2	– Engage regularly, preferably daily, in moderate physical activity for at least 30 minutes per day.
22.3	– Engage in vigorous physical activity that promotes the development and maintenance of cardio respiratory fitness 3 or more days per week for 20 or more minutes per occasion.
22.4, .5	– Perform physical activities that enhance and maintain muscle strength and endurance and flexibility.
22.6	– Engage in moderate physical activity for at least 30 minutes on 5 or more of the previous seven days.
22.7	– Engage in vigorous physical activity that promotes cardio respiratory fitness 3 or more days per week for 20 minutes per occasion.
22.1	– Decrease the proportion of adults who engage in no leisure time physical activity.
22.1	– Increase the proportion of children and adolescents who view television 2 or fewer hours per day.
22.1, 2	– Increase the proportion of trips made by walking and bicycling.
Weight Management	
19.1	– Increase the proportion of adults at healthy weight
19.2, .3	– Decrease the proportion of adults who are obese and proportion of children and adolescents who are overweight or obese
Disease Management	
12.1	– Increase the proportion of adults with high blood pressure who are taking action to control their blood pressure.
12.1	– Decrease the proportion of adults with high total blood cholesterol levels.