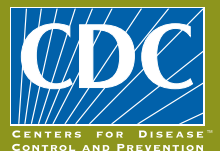


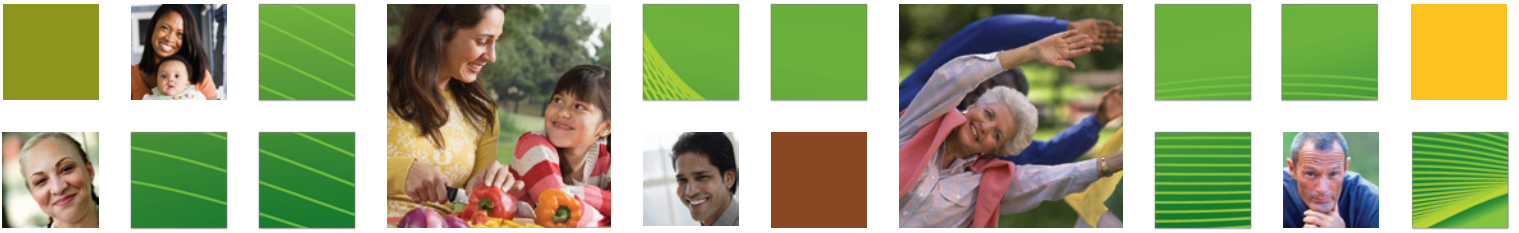


**HEALTHY  
COMMUNITIES**  
PREVENTING CHRONIC  
DISEASE BY ACTIVATING  
GRASSROOTS CHANGE

**AT A GLANCE**  
2009

**NATIONAL CENTER FOR CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION**  
IMPROVING HEALTH AND QUALITY OF LIFE FOR ALL PEOPLE





## A National Chronic Disease Crisis: The Time to Act is Now

Our nation faces a crisis in the burden of chronic disease. Today, 7 of the 10 leading causes of death in the United States are chronic diseases, and almost 50% of Americans live with at least one chronic illness. People who suffer from chronic diseases, such as heart disease, stroke, diabetes, cancer, obesity, and arthritis, experience limitations to function, health, activity, and work, affecting the quality of their lives as well as the lives of their families.

Treatment for people with chronic conditions accounts for more than 75% of the \$2 trillion spent on annual U.S. medical care costs. Effectively addressing the national chronic disease crisis is central to the future of health care in our nation and a priority for policy makers and those who pay for public and private health insurance plans.

Preventable health risk factors such as lack of physical activity, poor diet, and tobacco and excessive alcohol use contribute to the development and severity of many chronic diseases. For example,

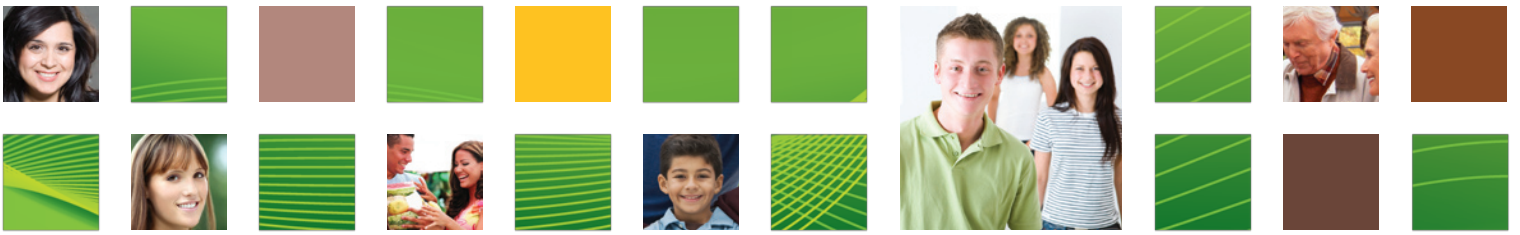
- In the last 15 years, the number of people in the United States with diagnosed diabetes has more than doubled, reaching 17.9 million in 2007. If current trends continue, one-third of all children born in 2000 will develop type 2 diabetes during their lifetime.
- More than one-third of all adults do not meet recommendations for aerobic physical activity based on the *2008 Physical Activity Guidelines for Americans*.
- Tobacco use is the single-most avoidable cause of disease, disability, and death in the United States. Each year, an estimated 443,000 people die prematurely from smoking or exposure to secondhand smoke. Despite these risks, more than 43 million (approximately 1 in 5) American adults still smoke.
- During 2001–2005, there were approximately 79,000 deaths annually caused by excessive alcohol use. Excessive alcohol use is the third leading lifestyle-related cause of death for Americans each year.

### Chronic Diseases: The Facts

- **Heart disease** and **stroke** remain the first and third leading causes of death, accounting for more than 30% of all mortality. One million Americans are disabled from strokes; many can no longer perform daily tasks, such as walking or bathing, without help.
- Nearly 24 million Americans have **diabetes**, and an estimated 57 million American adults have prediabetes and are at increased risk for developing type 2 diabetes. Diabetes is the leading cause of kidney failure, non-traumatic lower-extremity amputations, and blindness among adults aged 20–74 years.
- **Cancer** claims more than half a million lives each year and remains the nation's second leading cause of death. The total number of Americans living with a previous diagnosis of cancer is currently estimated at 11 million.
- 1 in every 3 adults and almost 1 in 5 children between the ages of 6 and 19 are obese. **Obesity** has been linked to increased risk for heart disease, high blood pressure, type 2 diabetes, arthritis-related disability, and some cancers.
- An estimated 46 million adults in the United States reported being told by a doctor that they have some form of **arthritis**, rheumatoid arthritis, gout, lupus, or fibromyalgia. Arthritis results in activity limitations for nearly 19 million Americans

Health disparities continue to be a serious threat to the health and well-being of specific population groups. For example,

- Death rates for heart disease are 23.4% higher among African Americans than whites; death rates for stroke are 31.4% higher.
- Native American adults are twice as likely as white adults to have diabetes.



## Producing Results

Strong action at the community level is critical to reversing chronic disease trends. Communities have responded with a groundswell of energy, ideas, and the will to make needed changes by targeting chronic diseases and their major risk factors including tobacco and excessive alcohol use, insufficient physical activity, and poor nutrition. CDC's investments in local communities are producing results. For example, CDC invested in 40 Steps communities during Fiscal Years 2003–2008, with the following impressive outcomes:

- **Broome County, New York**, increased fruit and vegetable consumption by 14% in all 46 elementary and middle schools by using a consolidated bid to purchase healthy foods at lower costs. More than 50,000 people enrolled in an innovative walking program and the percentage of adults who walked for more than 30 minutes on 5 or more days each week increased from 47% to 54% in 1 year.

- **Austin, Texas**, established a work site wellness program at Capital Metro, the Austin transit authority. Employee absences dropped more than 44% and the annual increases in health care costs were reduced from 27% to 9%.
- The **River Region of Alabama** worked with communities to control diabetes. Emergency room visits among participants decreased by more than 50%.
- Across the **40 funded communities**, the percentage of adult smokers who were advised to quit by a health care provider increased from 63% to 71% during 2004–2006, and the percentage of adults with diabetes who reported having a foot exam in the past year increased from 71% to 77%.

Building upon the lessons learned from these communities, CDC is expanding its efforts to assist hundreds of communities across the nation.

## CDC Expands Efforts

CDC and its partners—local and state health departments and national organizations—are working through CDC's **Healthy Communities Program** to create healthier, thriving communities and help those communities most severely effected by chronic disease. The program mobilizes community resources to bring change to the places and organizations that touch people's lives every day—at work sites, schools, community centers, and health care settings—to stem the growth of chronic disease.

### Local Investments

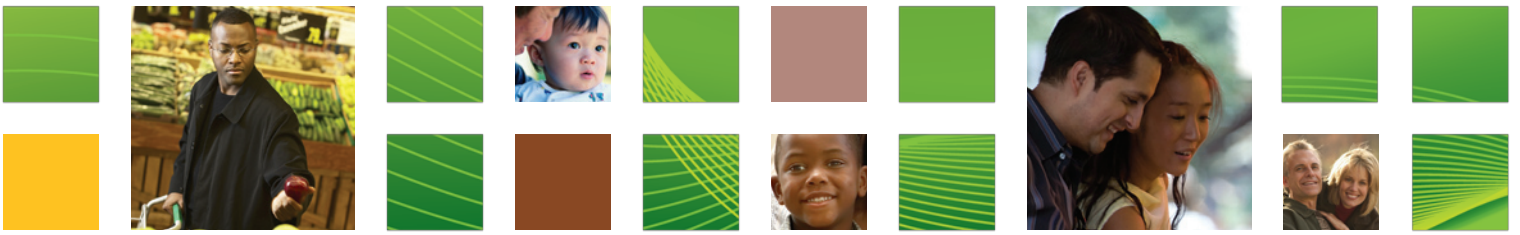
CDC funds and supports local communities for 5-year periods. Participating communities create online action guides, which give step-by-step instructions for replicating effective strategies from their communities. CDC currently provides guidance, technical assistance, and training to 12 Strategic Alliance for Health (SAH) communities selected to represent a mix of urban, rural, and tribal communities. During 2003–2008, CDC supported 40 SAH communities.

CDC will train and support over 200 **ACHIEVE** (Action Communities for Health, Innovation, and Environmental Change) communities over the next several years. ACHIEVE selects communities to participate in an Action Institute, in which community leaders receive technical assistance and support to start a local action plan. Technical assistance is

provided by national and state experts for a minimum of 3 years, and communities also receive modest financial support. CDC collaborates with five key national organizations to provide this technical and financial support, including

- The National Association of Chronic Disease Directors
- The National Association of County and City Health Officials
- The National Recreation and Park Association
- The Society for Public Health Education
- The YMCA of the USA

CDC also supports the **YMCA of the USA's Pioneering Healthier Communities** initiative. Since 2004, CDC has provided funding and technical support to the YMCA and used its vast network to bring together key local leaders to improve health and confront the national crises of obesity and chronic disease. Through its Pioneering Healthier Communities Program, the YMCA of the USA has developed innovative models for community change and has convened, trained, and supported teams of key leaders in 81 communities. By 2010, approximately 100 communities will have made changes to their



## CDC Expands Efforts (continued)

communities to support healthy lifestyles and reduce risk factors for chronic disease.

### Action Institutes

CDC provides **Action Institutes**, which convene community action teams and train community leaders making policy, systems, and environmental changes to prevent and control chronic diseases and their risk factors. Community action teams receive training from innovative national experts and develop a plan of action during the 3-day institute. They also hear from peer communities about how to undertake an effective community-change process and gain access to a range of tools and resources for putting programs into action.

### Mobilizing National Networks for Community Change

Through its Healthy Communities Program, CDC is engaging in innovative new partnerships that reach across communities and engage local planners, decision makers, and community organizations whose primary mission is not necessarily health, but whose efforts can have a profound impact on health and chronic disease.

### Tools for Community Action

CDC provides national leadership in health promotion at the community level by making the following tools for local action universally available to individuals and organizations:

**Community Health Resources Web Site.** This CDC Web site (<http://www.cdc.gov/communityhealthresources>) gives communities a searchable portal through which they can access a wide range of tools and data for local health promotion.

**Action Guides.** CDC and Partnership for Prevention® have developed *The Community Health Promotion Handbook*, available at <http://www.prevent.org/actionguides>, which

provides communities with step-by-step guidance for implementing five effective community-level health promotion strategies identified in *The Guide to Community Preventive Services*. Additional Action Guides are planned.

**CHANGE (Community Health Assessment and Group Evaluation).** This tool provides community leaders with a snapshot of local policy, systems, and environmental change strategies currently in place in their community; identifies areas where such health strategies are lacking; and assists communities in defining and prioritizing areas for improvement.

**Promoting Health Equity — A Resource to Help Communities Address Social Determinants of Health.** This workbook, available at <http://www.cdc.gov/nccdphp/dach/chaps>, shows communities how to address social determinants of health as part of health and social service efforts through real examples from communities that are using this approach.

### Future Directions: Spreading Change Across the Nation

Turning the tide on chronic disease requires changes in our communities that support health where we live, learn, work, and play. To date, more than 240 communities have received funding and technical support through CDC's Healthy Communities Program, which has resulted in measurable changes at the local level. An additional 260 communities will receive funding to improve the health of their communities during the next 5 years. The Healthy Communities Program will continue to disseminate effective strategies and provide communities with funding; tools; and training for creating policy, systems, and environmental changes. Working with key partners, CDC will activate these changes in a widening network of communities that are ready to take action.

For more information about CDC's Healthy Communities Program,  
please contact the Centers for Disease Control and Prevention  
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