

Municipalities' Role in Creating Healthy, Prosperous Communities

Cities, towns, and their residents face increased health care costs and diminished quality of life due to the epidemic of obesity and overweight. *City leaders throughout Maryland have the opportunity to step up to help address the obesity epidemic in their communities by giving all residents the chance to make healthy choices.*

This fact sheet is intended to help mayors, city council members, and executive staff see how municipalities can use local policies to give all residents the opportunity access affordable, nutritious foods and lead physically active lives, in turn creating healthy, prosperous communities.

High Prevalence of Obesity and Overweight Costs Cities in Medical Care and Preventable Disease

- An average of 1 in 3 Maryland youth are overweight or obese²
- More than half of Maryland's adults are overweight or obese: 28.3 percent are obese and another 36 percent are overweight³
- Obese adults face increased risks for many chronic conditions: diabetes, heart disease, stroke, cancer, arthritis, liver and gallbladder disease, infertility, hypertension, and mental health conditions⁴
- In 2009, Maryland spent \$3.032 Billion on obesity-related expenditures.⁵
- Reducing the average Body Mass Index in Maryland by 5% could lead to health care savings of more than \$4B in 10 years in \$13B in 20 years.⁶

Due to the rapid rise in obesity, today's youth may—for the first time in modern history—live shorter lives than their parents.¹



The Physical Environment and Food Environment Make a Difference

- In many communities, people who want to be more active are discouraged by their environment.
⇒ Making the decision to be active is much easier when every neighborhood has safe sidewalks, crosswalks, bike paths, and transit options
- People who live in places with many unhealthy food outlets have significantly higher rates of obesity and diabetes than those with more opportunities to buy healthy food, regardless of race or wealth.
⇒ Making the decision to eat healthier is much easier when nutritious food is available near the places we live, work, learn, play and worship



The **Healthy Eating Active Living (HEAL) Cities & Towns Campaign** provides free technical assistance and coaching to help city officials adopt policies that improve their communities' physical activity and food environments. Supporting healthy choices is essential to address the obesity epidemic among Maryland's children and adults. The HEAL Cities & Towns Campaign for the Mid-Atlantic is part of a growing national campaign that

is currently taking place in California, Oregon, and Colorado. The Institute for Public Health Innovation embarked on this initiative with funding from Kaiser Foundation Health Plan of the Mid-Atlantic States and a strategic partnership with the Maryland & Virginia Municipal Leagues.

This fact sheet is one in a series providing background information and policy ideas for healthy cities and towns.

What Municipal Leaders Can Do:

- Prioritize health in plans for their town or city's future
- Adopt policies that promote healthy eating and physical activity environments
- Establish a culture of wellness for municipal employees
- *People want to be healthy*, but often times there are barriers to obtaining convenient, affordable, healthy foods and opportunities for physical activity. City leaders have the opportunity to remove those barriers, and create a place that enables people to make healthy choices about their physical activity and eating.



Municipalities Play an Important Role in Obesity Prevention

Increasingly, policymakers, advocates, and medical providers are recognizing that obesity is not caused by and cannot be reversed or prevented by individual actions alone. The community in which we live, work, learn, play, and worship shapes our opportunity to live a healthy life. In order to make healthy choices, individuals need the following:

- Convenient access to affordable, healthy foods
- Safe places to play and be active
- Opportunities to walk and bike within their neighborhoods

City officials can improve the physical activity and food environments in their cities and contribute to preventing obesity among their employees and residents through:

- Municipal workplace wellness policies
- Land use decisions
- Redevelopment priorities
- Community and economic development plans

In order for the HEAL Cities Campaign to develop a broad menu of policy options to use in Maryland, share with us the policies your city or town has adopted to improve its food and physical activity environments on www.healcitiesmidatlantic.org

The Benefits to Your City/Town

By adopting one or more policies that improves the physical and food environments, your city could see these benefits:

- Cost savings through employee wellness policies and health incentives
- Improved quality of life for residents through active lifestyles
- Greater sense of community and civic engagement through community interactions in parks and public places
- Improved public safety and reduced crime by ensuring more “eyes on the street” when residents are out walking, biking, or running
- Neighborhood recreation options that keep kids out of the street
- Healthy kids do better in school, giving them a greater chance to contribute to the region’s economic vitality in the future
- Greater life expectancy for the next generation than predicted under current circumstances
- Creation of attractive destinations that offer good food, multiple activities, and places where people want to spend time and money
- Less traffic congestion and cleaner air as folks leave their cars to ride bikes and walk

To find out more and get started, contact HEAL Program Manager Sydney Daigle at Sdaigle@institutephi.org



1. Olshansky SJ, Passaro DJ, Hershow RC, et al. A potential decline in life expectancy in the United States in the 21st century. *N Eng J Med*. Mar 17 2005;352(11):1138-1145.
2. 2007 National Survey of Children's Health. Data analysis provided by the Child and Adolescent Health Measurement Initiative, Data Resource Center. <http://www.childhealthdata.org/>
3. Centers for Disease Control Behavioral Risk Factor Surveillance System 2011

4. CDC <http://www.cdc.gov/chronicdisease/resources/publications/AAG/obesity.htm>
5. Trogon, J.G., Finkelstein, E.A. Feagan, C.W., Cohen, J.W. (2012). *State- and Payer Specific Estimates of Annual Medical Expenditures Attributable to Obesity, Obesity, 10, 214-220.*
6. Trust for America's Health. Maryland Obesity Brief Sept. 2012. <http://healthyamericans.org/assets/files/obesity2012/>