



**Ohio's Plan to Prevent and  
Reduce Chronic Disease**

**Executive Summary**

**2014**

**2018**





## Executive Summary

Chronic diseases, such as heart disease, stroke, diabetes and some cancers, are the leading causes of death and disability in Ohio. Along with their associated risk factors (high blood pressure, obesity, tobacco use, physical inactivity, poor nutrition), treating chronic diseases cost Ohio more than \$50 billion every year in both healthcare costs and lost productivity from work. Without significant change, costs could nearly triple in the next two decades. Yet much of this burden is preventable, and even small changes in the health of Ohioans now can contribute to preventing more than 600,000 new cases of cancer, diabetes, heart disease and stroke in the future.

Success in creating a future where Ohio's children have the chance to be healthy, productive members of the workforce and where all families have opportunities to make healthy choices depends on communities coming together to:

- **Ensure everyone has equal access to healthy foods and beverages; safe places to be active; healthy schools and workplaces; and tobacco-free schools, workplaces and housing;**
- **Ensure high-quality preventive healthcare services are available to all members of the community;**
- **Ensure that community resources are appropriately linked to healthcare providers to engage and empower people to maintain good health and successfully manage their chronic disease.**

The causes of chronic disease, like most public health priorities, arise from more than just individual actions and decisions. Social and environmental conditions—such as neighborhood safety, community isolation, poverty, access to employment and education; and ability to find affordable healthy foods—are often the common thread to much of the disease burden. No sector is capable of reducing that burden alone, and because health begins in homes and communities, it takes collaboration and a cross-cutting approach to make change.

Developed to guide communities across the state in achieving this collaborative success, *Ohio's Plan to Prevent and Reduce Chronic Disease: 2014-2018* (Chronic Disease Plan) presents a set of priority-driven objectives tied to long-term outcomes to improve population health. The Chronic Disease Plan represents the collective efforts of experts from public health, health care, business, education, transportation and planning, and state and local government who used national guidelines and state and local data to develop a coordinated approach to chronic disease prevention and health promotion.

The Chronic Disease Plan was developed to achieve one overarching goal: **To prevent and reduce the burden of chronic disease for all Ohioans.** Long-term outcome measures were chosen based on a number of national indicators, including Healthy People 2020 (HP 2020). These outcomes represent where Ohio needs to go—the destination—while the objectives are the roadmap for the next five years that will guide the journey toward achieving them. Although some changes seem minor, the cumulative effects of achieving them will have significant impact on the public health, workforce productivity and economic competitiveness of Ohio.

## Chronic Disease Plan 2020 Long-Term Outcomes

### Chronic Diseases

- Decrease the mortality rate of heart disease by 5 percent
- Decrease the prevalence of coronary heart disease among adults (ages 18+) by 5 percent
- Decrease the prevalence of stroke among adults (ages 18+) by 5 percent
- Decrease the prevalence of diabetes among adults (ages 18+) by 5 percent
- Decrease the prevalence of obesity among adults (ages 18+) by 5 percent
- Decrease the prevalence of obesity among high school students (grades 9-12) by 5 percent
- Decrease the prevalence of multiple chronic diseases (2 or more) among adults (ages 18+) by 5 percent

### Screening/Recommended Care

- Increase the percent of breast cancer diagnosed at early-stage (ages 50-74) by 5 percent
- Increase the percent of cervical cancer diagnosed at early-stage (ages 21-65) by 5 percent
- Increase the percent of colorectal cancer diagnosed at early-stage (ages 50-75) by 5 percent
- Increase the percent of at-risk adults (ages 18+) with controlled blood pressure (<140/90mmHg) by 5 percent
- Decrease the percent of at-risk adults (ages 18+) with high LDL cholesterol (>100 mg/dL) by 5 percent
- Decrease the percent of diabetic adults (ages 18-75) with poor hemoglobin A1C control (>9.0 percent) by 5 percent

### Risk Factors

- Decrease the prevalence of cigarette smoking among adults (ages 18+) by 3.3 percentage points
- Decrease the prevalence of current tobacco use among high school students (grades 9-12) by 6.1 percentage points
- Decrease the prevalence of current tobacco use among middle school students (grades 6-8) by 4.4 percentage points
- Increase the prevalence of adults (ages 18+) consuming 5+ servings of fruits/vegetables per day by 5 percent
- Increase the prevalence of students (grades 9-12) consuming 2+ servings of fruits/100% fruit juices per day by 5 percent
- Increase the prevalence of students (grades 9-12) consuming 3+ servings of vegetables per day by 5 percent
- Increase the prevalence of adults (ages 18+) meeting physical activity guidelines for aerobic activity and muscle strengthening by 5 percent
- Increase the prevalence of students (grades 9-12) engaging in 60+ minutes of physical activity per day by 5 percent
- Increase the percent of babies breast feeding at six months to 60.6 percent

The Chronic Disease Plan's objectives are summarized below by sector: community organizations, schools and universities, worksites, health care, and government. While some objectives are specific to one sector, many will require cross-sector partnerships to leverage resources and maximize reach into the community.



### **Community Organizations**

- Work with local governments to adopt smoke-free policies in public multi-unit housing complexes
- Work with partners and local government to adopt policies that promote active transportation
- Work with schools and other community organizations to adopt shared use policies and agreements to increase availability of safe places to be physically active
- Adopt healthy eating and active living policies in child care settings
- Increase the number of farmers' markets that accept electronic benefits transfer methods of payment in low-income communities
- Increase the number of small and large food stores offering affordable healthy foods in vulnerable communities
- Work with local partners to develop a Farm to School (F2S) Program to increase local fresh fruit and vegetable access in schools
- Partner with local healthcare systems to connect people with community-based resources to prevent and better manage their chronic disease
- Participate in local health impact assessments to assess the potential health effects of institutional and governmental policies



### **Schools and Universities**

- Adopt 100 percent tobacco-free policies
- Complete and implement comprehensive school travel plans to promote walking and biking to school in a safe way
- Partner with local organizations to adopt a shared use policy or agreement to increase community member access to physical activity resources
- Offer additional physical activity breaks throughout the school day to engage students and staff in being active
- Work with community partners to develop or expand an F2S Program to increase access to local fresh fruits and vegetables



## Worksites

- Join the Healthy Ohio Business Council and apply for a Healthy Ohio Healthy Worksite Award
- Offer healthy food options in vending machines, cafeterias and at meetings and events
- Provide and promote physical activity opportunities
- Implement a 100 percent tobacco-free worksite policy
- Provide access to health assessments, screenings, smoking cessation, weight management and other chronic disease prevention and management services



## Healthcare Systems

- Adopt policies and procedures to increase exclusive breastfeeding for all babies while in the hospital
- Ensure all patients are counseled to quit or never start using tobacco products
- Ensure all patients are screened according to guidelines for colorectal, breast and cervical cancers
- Ensure that all patients are screened according to guidelines for cholesterol, high blood pressure, obesity and diabetes
- Use the Check It. Change It. Control It. Your Heart Depends On It. Toolkit to improve patients' blood pressure control
- Participate in childhood obesity prevention and management quality improvement initiatives
- Partner with state public health and healthcare system partners to develop recommendations for evidence-based chronic disease and diabetes self-management education programs
- Partner with community organizations and insurance providers to increase access to and use of local diabetes prevention programs
- Partner with state and local agencies to increase the use of community health workers to engage patients in chronic disease prevention and management
- Partner with local public health to use electronic health records and health system data for population-level chronic disease monitoring



## Government

- Adopt smoke-free policies in public multi-unit housing complexes
- Increase the cost of other tobacco products to align with cigarette excise taxes
- Adopt policies that increase access to active transportation for all people
- Increase the availability of electronic benefits transfer at farmers' markets in low-income communities
- Support a statewide food council network to coordinate efforts to provide healthy foods to all Ohioans
- Ensure all Ohioans have access to evidence-based tobacco cessation services
- Partner with providers, community organizations and public health to implement, test and evaluate reimbursement strategies for community health workers, chronic disease self-management education programs, and the Diabetes Prevention Program
- Support the collection and dissemination of high-quality chronic disease data
- Continue to advance the inclusion of electronic health data in population health surveillance efforts
- Participate in projects that assess the potential health impact of policies and decisions around transportation, housing, zoning, etc. on vulnerable Ohioans

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**The Ohio Chronic Disease Collaborative was formed to implement the Chronic Disease Plan. The Collaborative is open to all interested organizations, and members may participate as a stakeholder, objective partner or objective lead with varying responsibilities, as defined by the Collaborative's Articles of Operation. Because opportunities and challenges change over time, the Collaborative will also grow to include new partners as needed and add or modify objectives to reflect emerging opportunities.**