

**Chronic Disease Prevention Task Force, Public Hearing
Testimony
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Chronic diseases – such as heart disease, stroke, cancer, diabetes, and arthritis – are among the most common, costly, and preventable of all health problems. Lack of physical activity, poor nutrition, tobacco use, and excessive alcohol consumption are the modifiable risk factors related to chronic diseases.

To coordinate efforts and increase effectiveness, our focus on chronic disease prevention and health promotion should be at the risk factor and lifestyle level rather than categorical by disease. Funding needs to reflect this approach. For example, we need to adequately fund and support programs in Illinois related to tobacco use, physical inactivity and poor nutrition. Without addressing these issues properly we will not impact chronic disease.

Secondly, a growing body of research reveals a strong relationship between the built environment and these chronic health conditions. Our efforts need to focus on policy, systems and environmental change. We should work with various sectors of our communities; such as schools, churches, businesses, community based organizations in order to ensure policies and environmental changes reach all individuals to have the most impact. “The Leadership for Healthy Communities Action Strategies Toolkit” by the Robert Wood Johnson Foundation is a great tool to get us started. Some specific examples of this include:

- Making CATCH (Coordinated Approach to Child Health) curriculum mandated state-wide. Working with schools we can address school nutrition, ~~health education,~~ physical education, health education and parent education. In southern Illinois, over 30 schools are using CATCH with great success.
- Increasing the tobacco taxes.
- Add a tax to sugar sweetened beverages with little or no nutritional value.
- Prohibit the use of the LINK card to purchase candy, soda and other foods with little or no nutritional value,
- Work with Farmer’s Markets state-wide to accept the LINK card.
- Facilitating and establishing agreements to make schools accessible to allow community residents to use facilities during after-school hours for physical activity.
- Encouraging restaurant menu labeling.
- Regulating the marketing of unhealthy foods in or near school and other youth facilities.

By creating positive environmental, policy and systems changes, we are well positioned to help create positive community changes that facilitate healthy eating and active living and reduce tobacco and alcohol abuse, thus improving health for everyone.

translated a 16-week course based on the original study which focused on the education and support being delivered in a group setting by trained Y staff. The results of the 92- person pilot demonstrated the Y could deliver the program at a fraction of the cost and achieve similar results to the national program. Program participants were successful in preventing or delaying the onset of type 2 diabetes by reducing their body weight by 6 percent and increasing their physical activity, and continued to maintain their progress 6 and 12 months after the core 16 sessions.

In April of 2010, UnitedHealth Group, one of the nation's largest health insurers teamed up with the Y-USA to expand YDPP. Rather than simply continuing to pay ever-higher medical claims to care for its diabetic customers, UnitedHealth is paying the YMCA and pharmacists to keep people healthier. Using the model from the YMCA of Greater Indianapolis, Y-USA has implemented the YDPP in Louisville, Cincinnati, Columbus, Dayton, Minneapolis, Phoenix, Jacksonville, Fort Wayne and Bloomington (Indiana), Rochester (New York), New York, Delaware, Seattle, and Birmingham

The Diabetes Prevention Program in Illinois

YMCA of the USA worked with Congress to create the Diabetes Prevention Act as a part of health care reform which establishes a national community-based diabetes prevention program at the Centers for Disease Control. In September of 2010, the Y announced \$50,000 grants to introduce a Diabetes Prevention Program at local Ys.

The Two Rivers YMCA in the Quad Cities, Kishwaukee Family YMCA in DeKalb, and the Prairie Valley Family YMCA in Elgin were approved to start a Diabetes Prevention Programs in the fall of 2010 but unfunded. The YMCA is soliciting private funds and advocating for Congress to secure additional start-up funding for the approved but unfunded Ys.

The Future of the Diabetes Program in Illinois

YMCAs hold a unique advantage in their infrastructure to run community based prevention programs because of the sheer number of locations and its ability to reach low-income and minority populations who are at the highest risk for developing diabetes.

While Y-USA is looking to fund the Ys in the Quad Cities, DeKalb, and Elgin, we are also looking for partners in this work. In 2011 Ys may choose to make a \$12,500 investment with the YMCA of the USA to participate in the YMCA's Diabetes Prevention Program. The Investment will provide access to training, curriculum, tools, resources, and support.

YMCA's PIONEERING HEALTHIER COMMUNITIES

The Childhood Obesity Epidemic in Illinois

According to the Trust for America's Health and the Robert Wood Johnson Foundation one out of five Illinois children are considered obese. Illinois ranks fourth in the nation for the number of obese children. These children are at an increased risk of heart disease, diabetes, and other ailments. There is no denying the growing epidemic of childhood obesity will not only cost lives but cost the state considerably in the future in health care costs.

The Y's Solution to Curbing Childhood Obesity through Pioneering Healthier Communities

In 2010 the Illinois State Alliance of YMCAs was named one of YMCA of the USA's Statewide Pioneering Healthier Communities (PHC). PHC is a statewide collaborative effort that focuses on healthy systems, environmental, and policy changes. Three Statewide PHCs were started in 2009 in Connecticut, Kentucky and Tennessee. The 2010 cohort includes Illinois, Michigan, and Ohio.