

agog dinner & discussion | Building Health into our Neighborhoods

Hosted by Mike & Kathren Cavanaugh February 12, 2010



Conversation Leaders:

Dr. Phil Wu Clinical Pediatric Lead, Weight Management Initiative, Kaiser Permanente

Noelle Dobson Project Director, Community Health Partnership: Oregon's Public Health Institute

An eclectic group of guests brought personal experience to this conversation, having grown up or lived in different countries or across the nation. Together, they explored how individual and community actions intersect to reduce obesity and create healthy environments.

Are we designing environments that cut physical activity out of our lives?

The connection between health and the built environment

Two-thirds of the U.S. population is obese. In 1968, 60% of schoolchildren walked or rode their bikes to school - the predominant way kids exercised during the week. In 2002, only 13% walked or rode their bikes. Currently, only 30% of Portlanders do 30 minutes of activity three times per week. Diagnosis of obesity at age 15-16 indicates a nearly 100% chance of obesity as an adult.

The built environment is social policy reflected in concrete.

Built environment challenges appear everywhere, whether in Lake Oswego or the inner city.

- How we design our physical environment reflects our values.
- Kids who live as few as 3 blocks from their school are driven or if they have a car, drive themselves. Parents cite safety and convenience as the primary reasons for this.
- There was a lot of talk about kids and how **the culture for kids needs to change if things are going to change**. Some talked of kids needing to make better choices, but we also talked about how those choices were framed by dangerous roads with no sidewalks and fast food restaurants sited by schools.
- We can impact and change our built environment through policy.

Thinking outside the box



One discussion group had the following idea: To encourage high school students to walk or take the bus, parents and other adults can help students talk about the issue in terms of sustainability while harnessing many teen's desire to make a political statement. Encouraging kids to invest in their own neighborhood can create changes in their environment.

Another discussion group talked about how other countries, such as Holland, block certain streets during designated hours of the day to create a safer environment for children to play – essentially having streets become part of the community living room. The blocked roadways also made it safer for kids to walk to and from school.

One participant suggested that perhaps school buses should transport kids to a point where they would then need to walk 30 minutes to school. Noelle Dobson shared information about the Walking School Bus project (www.walkingschoolbus.org).



Dr. Phil Wu said that walking and biking in Europe grew in the 1970s after the oil embargo. Before this, Europe wanted to be like the U.S. The gas crisis hit and they became interested in building the infrastructure for walking and biking. In 30 years there has been real, lasting change.

Healthcare costs can be the driver for real change in our build environment, but there has to be something else behind it. The consequences of doing nothing are so great.

Active Transportation

Active transportation is defined as transportation that takes some physical activity such as using public transportation, walking, biking or a combination.

There are two ways of thinking about physical activity: recreational and incremental.

- **Recreational activity** includes group sports or physical activities that we do for fun or relaxation.
- **Incremental activity** is the short bits of activity included in our daily routines. This type of activity has been engineered out of daily life, an effect of the built environment, yet a necessary part of active transportation. Incremental activity, such as taking the stairs vs. the elevator, is equally as important and beneficial as recreational activity. Through daily incremental activity, we can get enough activity without going to the gym or doing planned exercise.

Dr. Wu said a lot of little things have to be in place for change. It's not so much about obesity; it's about overall health improvement. By including incremental activities into daily life, people will benefit immediately in so many ways. Our activities are much more important than what we eat.

*It takes more than individual choice and motivation to change.
It takes a supportive infrastructure to support that change.*

Just as Ladybird Johnson brought awareness about littering, we can educate both adult and child about creating health. Many participants agreed that having Michelle Obama select child obesity as her cause will make a difference in the long run.

Individual motivation vs. environment

Health is dependent on several factors in addition to genetics. Where you live is a determinant of health because your location in large part determines the access you have to daily services such as food, recreation opportunities, medical care, and arts and recreation areas.

People drive to fast food restaurants. How much is under our individual control? We are faced with fast food places, vending machines, and other barriers to healthy eating. The Northwest Health Foundation states, “As long as the environment – cheap junk food, neighborhoods unsafe or inconvenient to walk or bike through, etc. – remains ‘obesogenic,’ efforts to steer people toward healthier lifestyles will continue to fail.”

Change is underfoot

Government partners play a role in creating active environments through transportation and land use planning that literally shapes the communities we live in. In the Portland Metro area, public agencies are coordinating efforts with health partners to direct public resources safe sidewalks, neighborhood retail centers, and parks and recreation opportunities.

Dr. Wu and dinner guest Lynn Peterson, Clackamas County Commission Chair, both serve on the **Active Transportation Council**. They work with business people, those in government, and academics among others to promote active transportation in the Portland area. We talked about the **Portland Bike Plan**, which is estimated to cost \$600 million over 20 years. Studies show 30% of public will never use a bike as transportation, 10% are avid cyclists and 60% say they would use a bike if it was safe and convenient.

A discussion ensued over the notions: “If we build it, will they come?” vs. the health cost savings. While this may sound like a lot, the current plan to build a 12-lane I-5 bridge in the metro area is estimated at \$3.6 billion. Dr. Wu shared that California’s health care costs, due to lack of physical activity, top \$890 million per year.

Recent changes in Oregon will help to create healthy eating environments for families. In 2007, nutrition standards for foods sold in school vending machines and school stores has removed the worse junk food from schools, and local efforts are thriving to improve school meals and create school gardens. Statewide legislation in 2009 set nutrition labeling policy that requires chain restaurants to report calorie content on the menus. Around the country, jurisdictions are exploring other policies such as taxing sugar sweetened beverages, or restricting the establishment of fast food restaurants in certain areas.



Because together, we can do more.