



NC PREVENTION  
PARTNERS<sup>SM</sup>

PREVENTION FIRST FOR A  
HEALTHIER NORTH CAROLINA

[www.ncpreventionpartners.org](http://www.ncpreventionpartners.org)

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# NORTH CAROLINA PREVENTION report CARD

MEASURING NORTH CAROLINA'S PROGRESS IN PREVENTION & HEALTH  
TOWARD 2020 GOALS



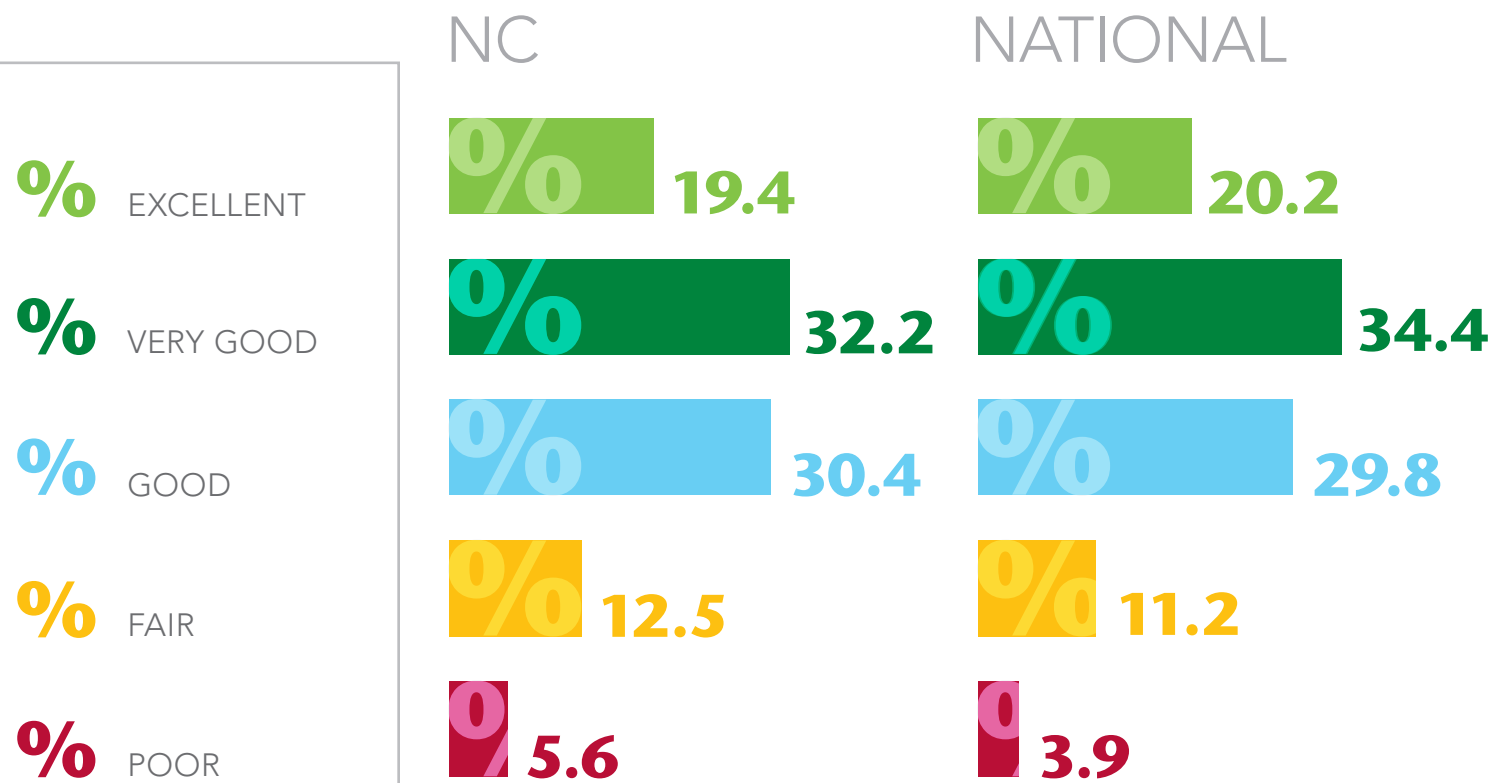
NC PREVENTION  
PARTNERS<sup>SM</sup>

# NORTH CAROLINA OVERVIEW

In its first report card of the decade, North Carolina’s grades reflect the tremendous progress made during the last decade to protect residents from harmful second-hand smoke and support individuals to quit tobacco use. These grades also highlight the challenges ahead in obesity prevention and treatment. The following pages take a closer look at the health and protective policies that make up these grades and recommendations for moving North Carolina to all As.

	NORTH CAROLINA 2012 REPORT CARD
TOBACCO	B
NUTRITION	F
PHYSICAL ACTIVITY	D
OBESITY	F

WHEN ASKED HOW THEY WOULD DESCRIBE THEIR OWN HEALTH, RESIDENTS OF NORTH CAROLINA SAY THEIR HEALTH IS<sup>1</sup>



<sup>1</sup> Individual perception of health does not always match actual health status

# LETTER FROM MEG MOLLOY

MAY 2012

DEAR PREVENTION LEADER:

NC Prevention Partners has issued the NC Prevention Report Card since 1998, raising awareness among NC leaders of the human and economic costs of tobacco use, poor nutrition and physical inactivity. Additionally, the Report Cards provide an opportunity for families, schools, employers, the health care community, and policymakers to focus on proven solutions.

## NC PREVENTION REPORT CARDS MAKE A DIFFERENCE

Where there have been grade improvements over the past 14 years, you can see where leaders have focused on an issue, and how each success contributes to improving the overall grade. Last year the Report Card was a look-back at NC’s progress toward 2010 national health goals. NC ended the decade with a B in Tobacco, a D in Nutrition, and a D+ in Physical Activity. The progress in Tobacco was made one clear initiative at a time, chipping away on the list of evidence based strategies that work.

## NEW DECADE, NEW TARGETS, NEW FEATURES, NEW PARTNERS

This 2012 NC Prevention Report Card is the kickoff for the new decade. It lays out new and tougher state and national goals for 2020 set by public health experts, and is the first in a series of Report Cards that will be created every two years to track NC’s progress toward those goals.

You’ll see that in this decade, we will grade obesity as its own category, in addition to the categories of tobacco, nutrition and physical activity. You’ll also see for the first time, clear and detailed information about workplace prevention progress, and how NC employers are contributing to creating a culture of wellness within our state.

We thank **NC Healthy Schools, North Carolina Alliance for Health and the North Carolina Alliance for Healthier Communities** for their shared focus on these issues and their solutions. Together we are asking the question, *“What can we do to bring about progress in NC toward these clear targets by the year 2020?”*

## THE NEWS FROM THIS YEAR’S REPORT CARD AND WHAT IT MEANS FOR NC

NC is maintaining a B in tobacco prevention despite the tougher standards of the new decade. While this is good news, we are in danger of losing ground. Our legislature is faced with fiscal challenges, but must provide critical support to fully fund NC’s tobacco prevention programs, and protect our smoke-free laws. In the area of obesity and nutrition, NC is in serious trouble. State leaders must move past the point of analysis and discussion, and make healthy food and physical activity a priority.

Poor health is an economic issue. Tobacco use and obesity are driving up the cost of doing business in NC, and driving jobs to healthier states.

This is a critical time to step forward for a healthier NC. We have nine short years to climb a steep mountain. Please join in the effort to help NC achieve prevention goals, one law, one community, one organization, one individual, one step at a time.

Meg Molloy



Meg Molloy, DrPH, MPH, RD  
President and CEO  
NC Prevention Partners

“What can we do to bring about progress in NC toward these clear targets by the year 2020?”

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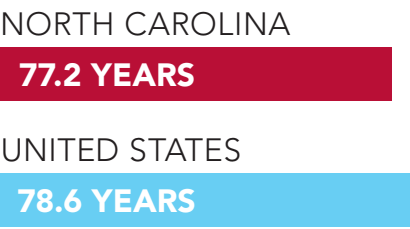
# NORTH CAROLINA AT A GLANCE

Unhealthy behaviors (like smoking, poor diet, and lack of physical activity) and challenging economic factors (such as poverty, lack of insurance, and unemployment) are putting NC behind the national curve on life expectancy and chronic disease.

The average resident of North Carolina has a life expectancy **1.4 YEARS** SHORTER than the average US resident.

And even shorter life expectancies are found among NC MALES (**74.4 YEARS**), AFRICAN-AMERICANS (**73.7 YEARS**), & NATIVE AMERICANS (**73.3 YEARS**).

## AVERAGE LIFE EXPECTANCY AT BIRTH (IN YEARS), 2007<sup>2</sup>



## RISK FACTORS AND CHRONIC DISEASE RATES FOR NORTH CAROLINA 2010<sup>3</sup>

	NC	US	NC is doing :
One+ cardiovascular risk factor	12.2 %	10.8 %	+ 1.4% WORSE
Overweight & Obese	65.3 %	63.8 %	+ 1.5% WORSE
High Blood Pressure	31.5 %	28.6 %	+ 2.9% WORSE
Asthma	12.6 %	13.8 %	- 1.4% BETTER
Diabetes	9.8 %	8.7 %	+ 1.1% WORSE
High Blood Cholesterol	40.0 %	37.4 %	+ 2.6% WORSE

## LEADING CAUSES OF DEATH FOR NORTH CAROLINA 2010<sup>4</sup>

	NORTH CAROLINA		UNITED STATES	NC is doing :
	# DEATHS	RATE*	RATE*	
All Deaths	78,761	803.0	746.2	
Cancer (All Sites)	18,013	178.5	172.5	WORSE
Heart Disease	17,090	174.3	178.5	BETTER
Chronic Lower Respiratory Disease	4,490	46.0	42.1	WORSE
Cerebrovascular Disease	4,281	44.5	39.0	WORSE
Alzheimer's Disease	2,813	30.3	25.0	WORSE
Diabetes	2,036	20.4	20.8	BETTER
Nephritis, Nephrotic Syndrome & Nephrosis	1,886	19.4	15.3	WORSE
Pneumonia & Influenza	1,684	17.5	15.1	WORSE
Motor Vehicle Injuries	1,368	14.3	11.2	WORSE
All Unintentional Injuries	2,762	28.7	37.1	WORSE

\* Age adjusted death rate 2010 per 100,000 standard population

# WHAT CAN YOU DO?

## WHAT CAN YOU DO TO IMPROVE NC'S GRADES?

### INDIVIDUALS

- Quit tobacco use. And help a friend or family member quit tobacco. Call the NC Quitline (1-800-784-8669 or 1-800-QUIT-NOW) or visit [www.quitlinenc.com](http://www.quitlinenc.com). **FACT:** NC ranks 44th out of 50 states in smokers using the Quitline – we can do better!
- Adopt a no tobacco use rule at home. **FACT:** Only 73% of NC households have a no smoking rule, compared to 78% for the whole US.
- Aim to get a total of nine servings of fruits and vegetables each day. Ask your doctor for guidance and tips on better eating or visit [www.mypyramid.gov](http://www.mypyramid.gov).
- Target about 30 minutes a day for physical activity. Make it a regular part of your day or week. Enjoy it and you will do it more often. Turn off the television and take a walk. **FACT:** Even three 10 minute increments of activity will make a difference - take a walk during a work break or walk the dog a few times a day to get your 30!

### PARENTS

- Help your teens quit tobacco use. Visit [www.youthempoweredolutions.org](http://www.youthempoweredolutions.org) or [teen.smokefree.gov](http://teen.smokefree.gov) with your teens and talk through how you can support their efforts.
- Feed your family more nutritious foods and reap the benefit of healthier kids. Visit the following websites with your children and talk over how they can eat better and feel better. [www.mypyramid.gov](http://www.mypyramid.gov) and [www.myeatsmartmovemore.com](http://www.myeatsmartmovemore.com).
- Get active with your kids. Take them to parks and playgrounds; play ball or just run around. Go biking or swimming as a family. Live by healthy example.

### HEALTHCARE PROVIDERS

- Ask your patients if they use tobacco and, if they do, help them quit. Inquire about their diet and work with them to make it more balanced. Talk with patients about their exercise habits and safe ways to increase their physical activity. Start the Conversation at [www.ncpreventionpartners.org/startingtheconversation](http://www.ncpreventionpartners.org/startingtheconversation).

### EMPLOYERS

- Create a tobacco-free workplace policy. Start a fruit bowl in the break room. Offer your employees 30 minutes of paid daily physical activity time. **FACT:** Healthy employees work better and cost less!
- Access WorkHealthy America<sup>SM</sup> for an assessment of your wellness policies and action plans for improving them: [www.WorkHealthyAmerica.com](http://www.WorkHealthyAmerica.com).

### SCHOOLS

- Remove unhealthy items from vending machines. Introduce healthier snacks at celebrations. Improve marketing and promotion of food in the cafeteria to favor healthy options. Visit [smarterlunchrooms.org](http://smarterlunchrooms.org) for more.
- Increase the frequency and length of physical education classes and recreational opportunities.
- Visit [www.ncschoolhealthconnection.org](http://www.ncschoolhealthconnection.org) to see what schools are doing to combat childhood obesity.

### POLICYMAKERS

Support legislation that:

- Sustains Quitline NC, increases North Carolina's cigarette tax, and creates tobacco-free spaces.
- Increases the availability of healthier foods and drinks in schools.
- Creates community supports for active, healthy lifestyles and personal well-being.

Visit [www.ncpreventionpartners.org/policy](http://www.ncpreventionpartners.org/policy) and [www.ncallianceforhealth.org](http://www.ncallianceforhealth.org).

WHAT IS A CULTURE OF  
WELLNESS?

Most North Carolinians spend most of their waking hours at work. So every hospital, school, private, public or governmental organization has an important role to play in making sure employees can be healthy while at work. Creating a strong **culture of wellness** involves more than an occasional wellness challenge – it is about implementing lasting policies, incorporating employee wellness into core values, and engaging the support of senior leadership.

HERE ARE A FEW STRATEGIES FOR MAKING WELLNESS A PERMANENT PRIORITY IN YOUR ORGANIZATION’S INFRASTRUCTURE:

- 1. Build Executive Commitment for Wellness.** Get C-suite and senior manager buy-in. Learn how to make the pitch for wellness and how leadership can become your biggest wellness champions!
- 2. Establish Human Resource Capacity for Wellness.** Don’t go it alone! Wellness programs are more likely to be sustained if there is more than one person leading the charge. Build a wellness committee and add wellness to job descriptions and performance reviews.
- 3. Create Financial Capacity for Wellness.** Ever heard of an organization-wide effort that did not require a budget? Wellness efforts tend to require up-front funding but see significant long-term savings when implemented thoughtfully.
- 4. Implement Data and Evaluation Systems for Wellness.** How can you fix something if you don’t know it’s broken? Collecting the right wellness data and evaluating your programs will tell you exactly how to improve your wellness efforts and keep them sustainable.

SPOTLIGHT  
ON SUCCESS

Johnson Price Sprinkle PA (JPS)

*“It’s a culture where people are enjoying coming into work each day. If you’re battling sickness, it shows up in your performance and your work relationships.”* Hillary Colvin, Associate

With the strong leadership of JPS’ President, Ben Hamrick, this leading accounting firm in Western North Carolina supports employees to take regular breaks for physical activity during work hours (via walks around the neighborhood or Friday afternoon Walleyball games at the YMCA). Staff are working with local caterers to make healthy, labeled options available at catered meetings and events; targeting tobacco-free locations for off-site events; and are in the process of adopting a comprehensive wellness policy to make these changes a long term part of the organization. JPS was named one of the Top 100 “Best Accounting Firms to Work for” in 2011 by Accounting Today, one of only two NC firms named to this list, and credits their wellness program as one of the strengths that helped them get there.

Southeastern Regional Medical Center (SRMC)

*“We challenged each other to see who could get to a million steps first on the administrative level. As I’ve told my employees, I have to set the example.”* Joann Anderson, CEO

After establishing a goal of reducing BMI by 5 percentage points among hospital employees, five of the SRMC’s key administrators, including CEO Joann Anderson, kicked off the BMI initiative with a competition to walk one million steps. In Anderson’s own words: “We realized that if we wanted employees to make a concerted wellness effort, we needed to set the example.” At the end of 9 weeks and four days, the Vice President of Patient Care was crowned the winner, with Anderson in a close second place. Due to the amazing example set by its leaders, more than 500 SRMC employees signed up to join the competition as soon as it was open to everyone!



NORTH CAROLINA BUSINESSES IN WORKHEALTHY AMERICA<sup>SM</sup>  
CREATE A CULTURE OF WELLNESS\*

% OF ORGANIZATIONS IN WORKHEALTHY AMERICA <sup>SM</sup> THAT:	PERCENT OF ORGANIZATIONS IN WORKHEALTHY AMERICA <sup>SM</sup> BY SECTOR					
	NC organizations in WorkHealthy America <sup>SM</sup> ( N = 96 ) **	Businesses ( N = 20 )	Hospitals ( N = 12 )	Government Agencies ( N = 40 )	Schools K - 12 ( N = 19 )	Schools Districts ( N = 5 )
CULTURE						
Include employee wellness as a part of the organization’s strategic plan	57%	65%	92%	43%	53%	80%
Have CEO or Senior Leadership participation in wellness activities	75%	80%	92%	70%	74%	80%
CAPACITY						
Have a wellness committee that meets on a regular basis	76%	80%	75%	80%	63%	80%
Conduct a health risk assessment (HRA) at least annually and	40%	50%	92%	33%	16%	40%
Provide individualized feedback to employees who take the HRA	28%	45%	75%	15%	0%	20%
DATA & EVALUATION						
Measure the impact of wellness initiatives on healthcare expenses	37%	40%	92%	20%	26%	0%
Measure the impact of wellness initiatives on employee productivity	27%	45%	67%	12%	21%	0%

\*NC Prevention Partners’ WorkHealthy America<sup>SM</sup> Data, 2012  
\*\* Limited to organizations that have completed an assessment of their culture of wellness

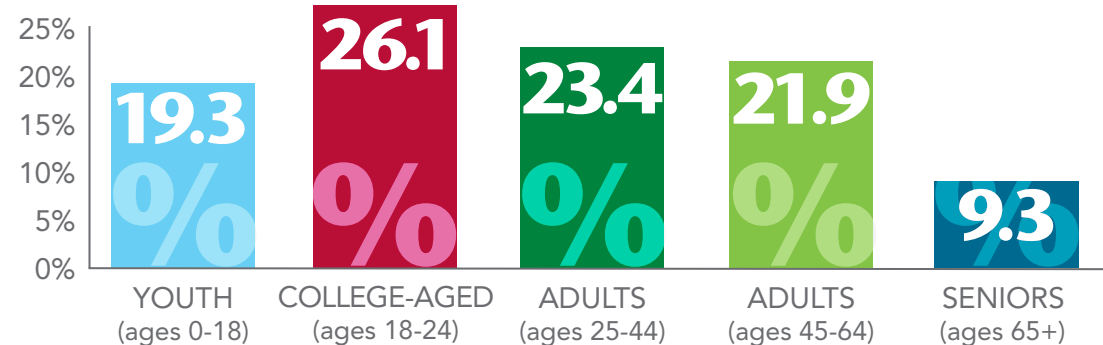
# TOBACCO GRADE: B

Tobacco use continues to be the number one leading cause of preventable death across NC and the US. Unfortunately, NC continues to have significantly higher smoking rates (at 20.9%) compared to the US as a whole (18.4%). Good news is on the horizon! More North Carolinians are trying to quit – 60.5% of serious smokers in NC are trying to quit smoking, as compared to 52.4% across the US.<sup>5</sup>

“To keep our good grade, policymakers must continue to invest funds in these successful, evidence based tobacco use prevention programs!”

Pam Seamans,  
Executive Director,  
North Carolina Alliance for Health

## COLLEGE-AGED YOUNG ADULTS (AGES 18-24) MAKE UP THE LARGEST PERCENTAGE OF CURRENT SMOKERS BY AGE GROUP<sup>5</sup>



## PROTECTIVE POLICIES

While schools and hospitals have taken a lead across NC in the movement for tobacco-free spaces, other public venues (such as worksites and public outdoor areas) can do more to support the health of their employees and patrons by instituting tobacco-free policies.

## TOBACCO GRADES

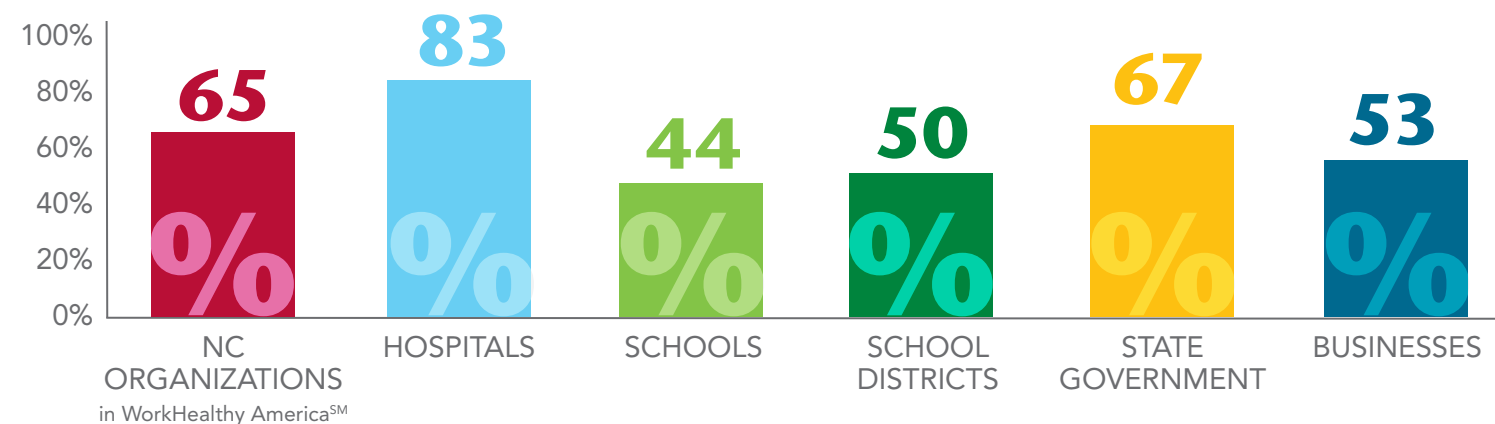
INDICATOR	CURRENT STATUS	2020 GOAL	2012 GRADE
BEHAVIORS			
Current adult smokers <sup>6</sup>	21 %	12 %*	C
High school students using tobacco <sup>7</sup>	26 %	21 %*	B
Middle school students using tobacco <sup>7</sup>	11 %	5.7 %*	B
Adults making a serious attempt to quit <sup>6</sup>	61 %	80 %*	D
High school students making a serious attempt to quit <sup>8</sup>	56 %	64 %*	B
ENVIRONMENT & POLICY			
Tobacco-free <b>school</b> systems <sup>9</sup>	100 %	100 %*	A
Tobacco-free campus wide acute care <b>hospitals</b> <sup>10</sup>	100 %	100 %**	A
Smoke-free <b>restaurants</b> <sup>9</sup>	100 %	100 %***	A
Tobacco-free <b>correctional institutions</b> <sup>9</sup>	100 %	100 %***	A
Adults reporting their <b>worksite</b> prohibits smoking in indoor public and work areas <sup>6</sup>	85 %	100 %*	B
Smokers counseled by <b>provider</b> within past year to stop smoking <sup>6</sup>	58 %	100 %**	F
Per pack <b>cigarette tax</b> vs. \$1.46 national average <sup>9</sup>	\$0.45	\$2.00****	D

\*Healthy People 2020 Goal \*\*NC Prevention Partners 2010 Goal \*\*\*North Carolina State Law \*\*\*\*Healthy People 2010 Goal

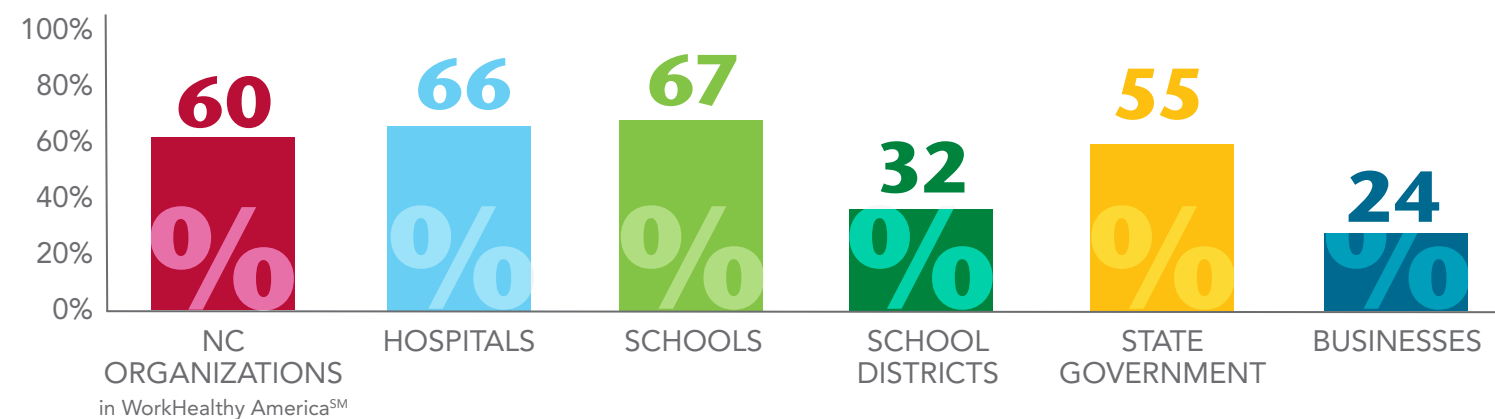


## NORTH CAROLINA BUSINESSES IN WORKHEALTHY AMERICA<sup>SM</sup> SUPPORT EMPLOYEES TO QUIT TOBACCO<sup>11</sup>

Worksites that refer tobacco users who are ready to quit to multiple resources including cessation medications and in-depth coaching

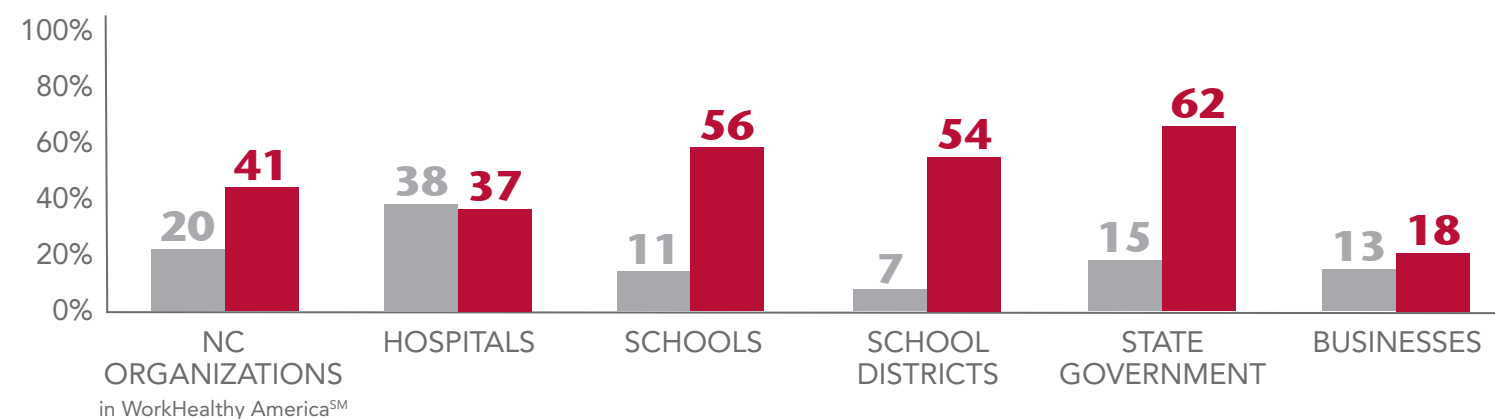


Worksites that incentivize employees to participate in tobacco cessation program



Worksites offering FDA-approved tobacco cessation medications at no or reduced cost

% AT NO COST      % AT REDUCED COST



# NUTRITION GRADE: F

## ADULTS MEETING NUTRITIONAL RECOMMENDATIONS<sup>12</sup>

	NORTH CAROLINA	UNITED STATES
FRUITS ( 2+ a day )	25.0 %	32.8 %
VEGETABLES ( 3+ a day )	30.1 %	27.4 %
FRUITS (2) and VEGETABLES (3 a day)	10.8 %	14.0 %

“Schools play an integral role in health related prevention efforts by providing not only education but healthy environments for learning and practice. Data provided by the Youth Risk Behavior Survey, the School Level Impact Measures (SLIMS) and the Profiles Survey are critical to creating the most beneficial school health programming. And all of these efforts impact the cumulative state scores in this Report Card. We are pleased to be a part of this process.

Paula Hudson Hildebrand, NC Department of Public Instruction

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## NUTRITION AND OVERWEIGHT & OBESITY GRADES

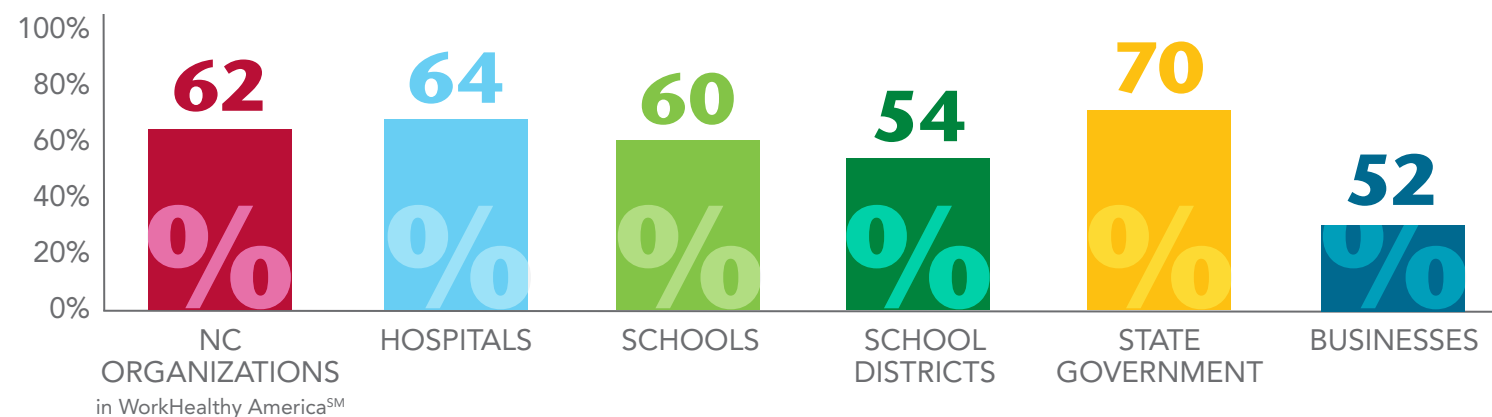
INDICATOR	CURRENT STATUS	2020 GOAL	2012 GRADE
NUTRITIONAL BEHAVIORS			
Adults who eat at least 5 servings of fruits and vegetables daily <sup>13</sup>	21.0 %	29.3 %*	F
OVERWEIGHT & OBESITY			
Adults who are overweight or obese <sup>14</sup>	66.0 %	30.6 %**	F
Adolescents ( ages 12-19 ) who are obese <sup>15</sup>	22.0 %	16.1 %**	F
Children ( ages 6-11 ) who are obese <sup>15</sup>	30.0 %	15.7 %**	F

\*Healthy North Carolina 2020 Goal \*\*Healthy People 2020 Goal

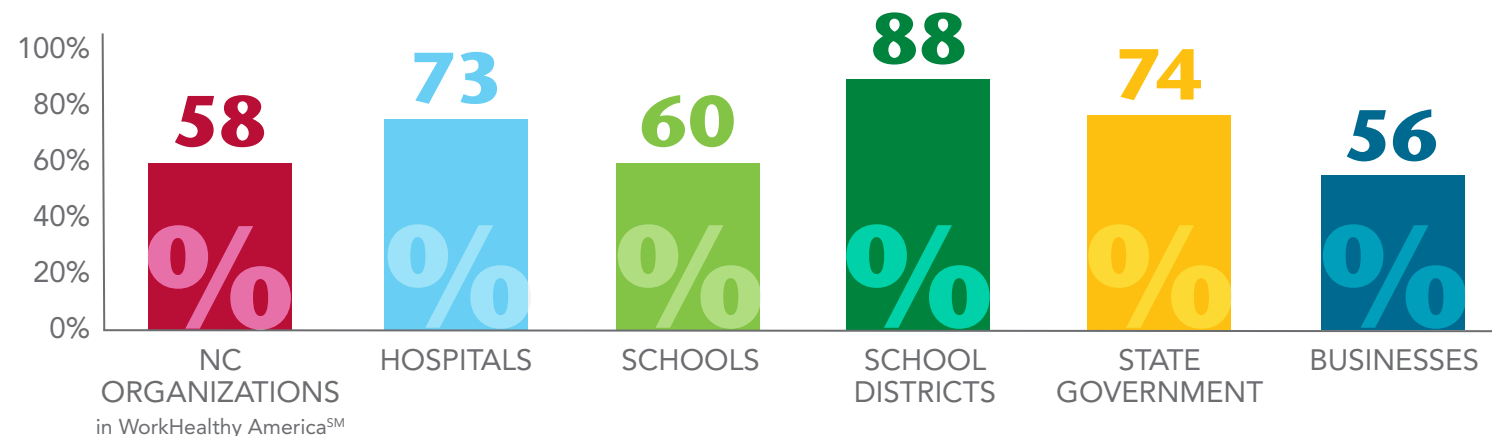


## NORTH CAROLINA BUSINESSES IN WORKHEALTHY AMERICA<sup>SM</sup> PROVIDE DELICIOUS, AFFORDABLE & HEALTHY FOOD<sup>16</sup>

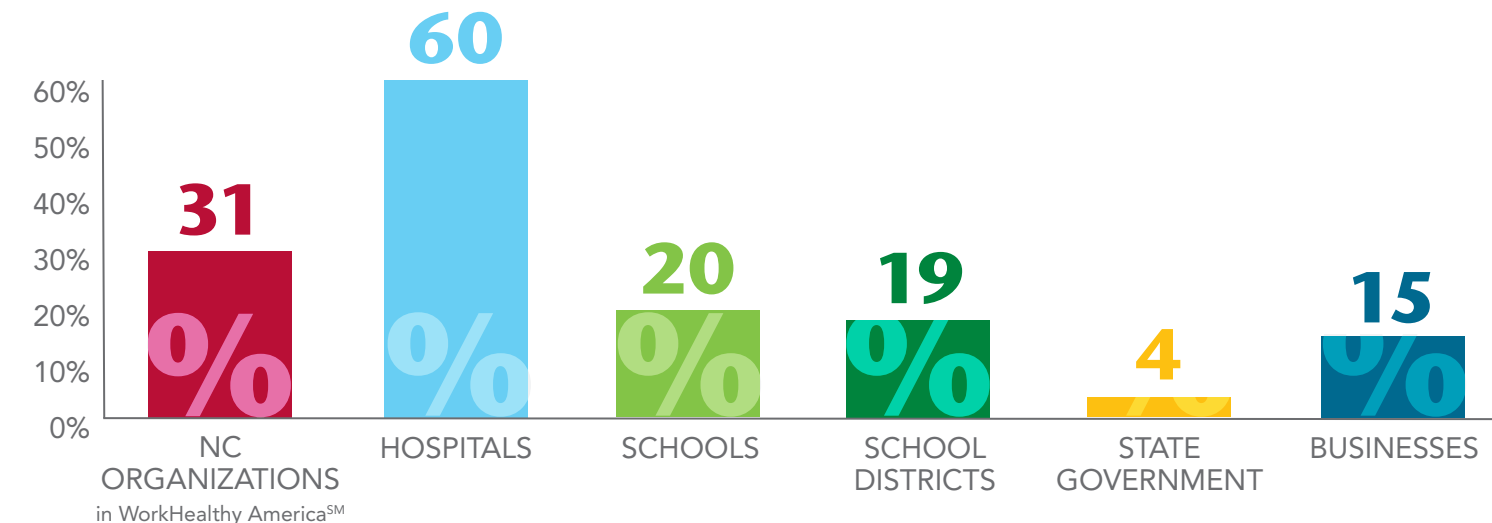
Worksites offering nutrition counseling and/or medical nutrition therapy as a health insurance benefit



Worksites that negotiate contracts with food vendors so that they offer healthy options



Worksites using attractive pricing to encourage purchase of healthy options



PHYSICAL ACTIVITY  
GRADE: D

NORTH CAROLINIANS NEED MORE EXERCISE AND LESS SCREEN TIME

	NORTH CAROLINA	UNITED STATES
Adults getting 20+ minutes of physical activity 3+ days / week <sup>17</sup>	25.9 %	29.4 %
Adults getting no leisure time physical activity <sup>17</sup>	26.4 %	23.8 %
Seniors ( ages 65+ ) getting no leisure time physical activity <sup>17</sup>	30.9 %	32.7 %
High school students using computers 3+ hours/day <sup>18</sup>	23.5 %	24.9 %
High school students getting 60+ minutes of physical activity on fewer than 5 days/week <sup>18</sup>	54.0 %	63.0 %
High school students watching TV 3+ hours/day <sup>18</sup>	32.8 %	15.4 %
High school students who did not participate in 60+ minutes of physical activity on any day <sup>18</sup>	15.4 %	23.1 %

PHYSICAL ACTIVITY GRADES

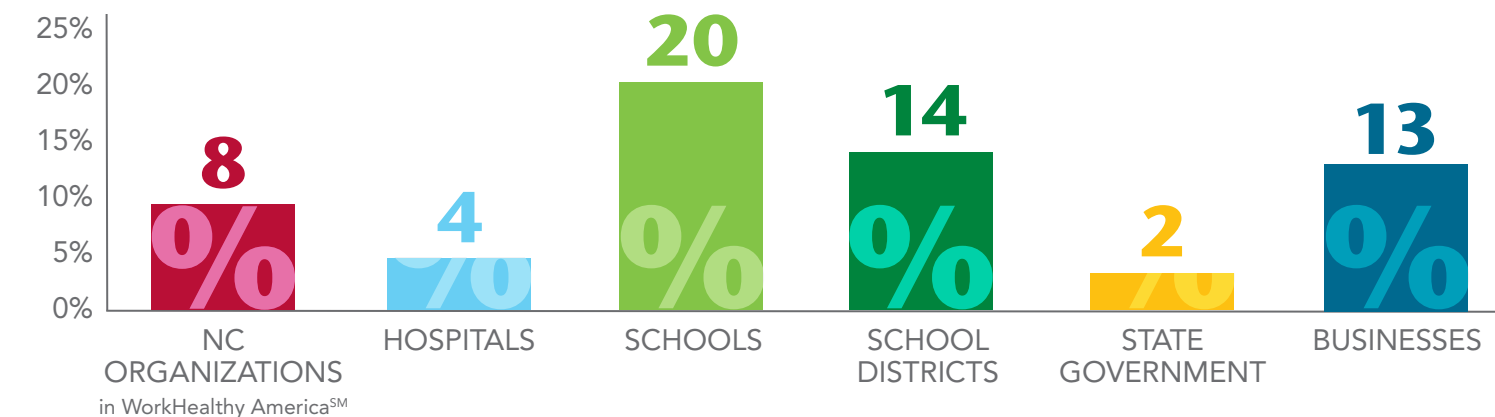
INDICATOR	CURRENT STATUS	2020 GOAL	2012 GRADE
BEHAVIORS			
Adults getting recommended amount of physical activity <sup>*</sup> 17	46.4 %	60.6 %**	C
High school students watching TV or playing video games for no more than 2 hours a day <sup>18</sup>	62.0 %	73.9 %***	D

<sup>\*</sup>At least 150 minutes / week at moderate intensity    <sup>\*\*</sup>Healthy North Carolina 2020 Goal    <sup>\*\*\*</sup>Healthy People 2020 Goal

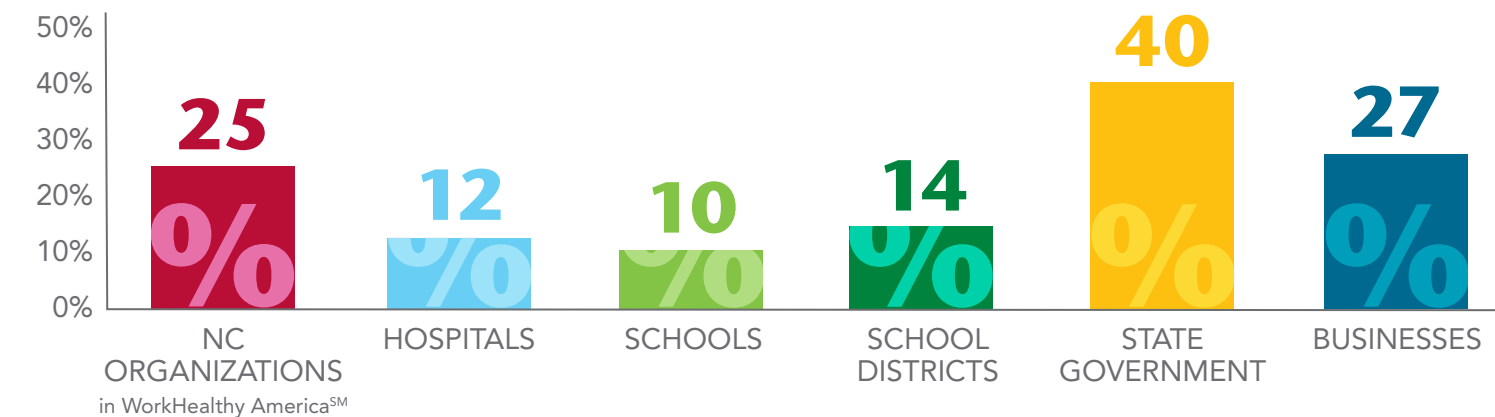


NORTH CAROLINA BUSINESSES IN WORKHEALTHY AMERICA<sup>SM</sup>  
PROVIDE OPPORTUNITIES FOR PHYSICAL ACTIVITY AT WORK<sup>19</sup>

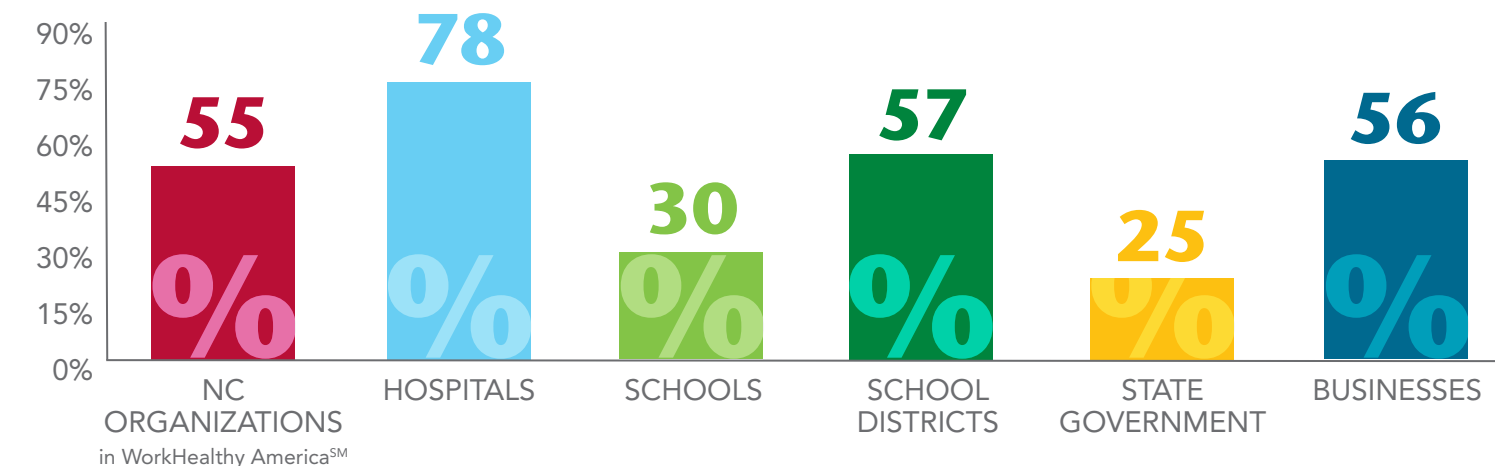
Worksite policy provides employees with paid time to exercise during each work day



Worksite policy offers employees flexible work hours for physical activity



Worksite provides employees with easy access to exercise facilities in or near the worksite

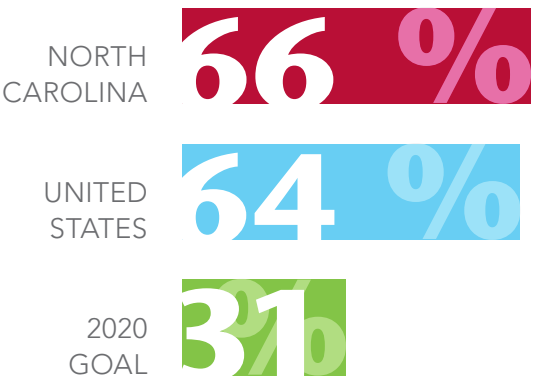


# OVERWEIGHT & OBESITY GRADE: F

North Carolina  
RANKS **5th**  
WORST  
in the nation  
in terms of obesity.

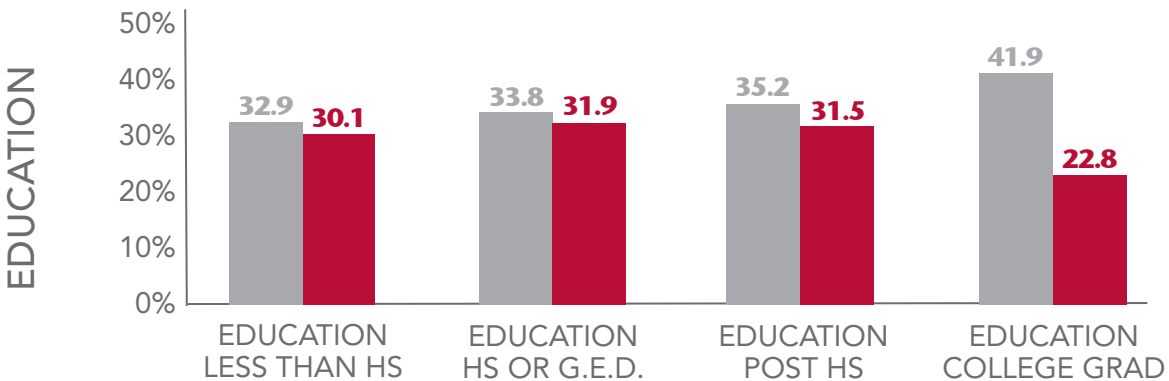
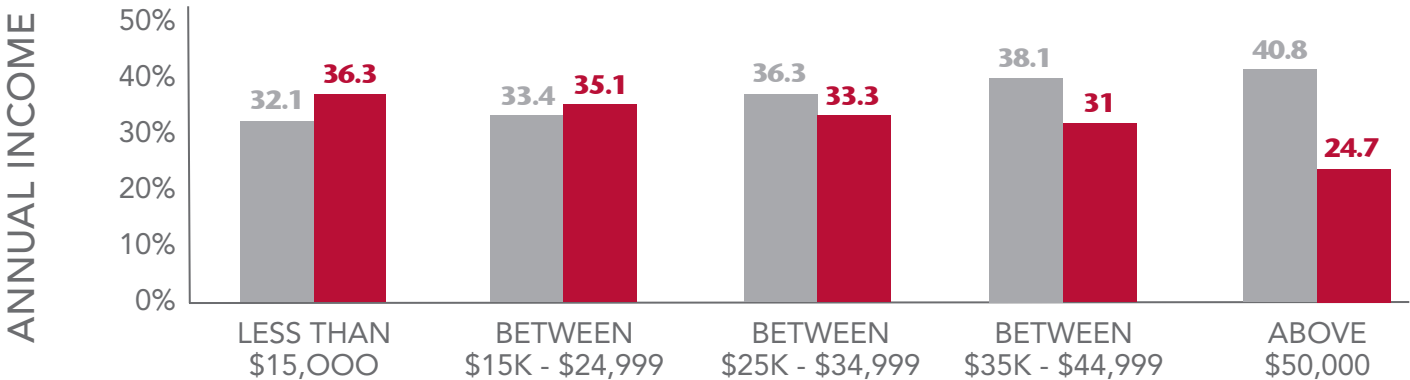
Two out of every three NC adults (66%) and over a quarter (28%) of NC high school students are overweight or obese. Obesity is a leading risk factor for other chronic conditions such as heart disease, diabetes and stroke as well as some cancers.

## ADULT OVERWEIGHT & OBESITY<sup>20</sup>



## ANNUAL INCOME AND EDUCATION ARE LINKED TO OVERWEIGHT AND OBESITY<sup>20</sup>

% OVERWEIGHT      % OBESE



# NOTES & REFERENCES

## PAGE 2 INSIDE FRONT COVER

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9. NC DHHS, Tobacco Prevention & Control Branch, 2008, 2009.
10. NC Prevention Partners WorkHealthy America<sup>SM</sup> 2012.

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11. NC Prevention Partners WorkHealthy America<sup>SM</sup> Data, 2012.

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12. US & NC BRFSS, Prevalence and Trends Data, 2010.
13. NC BRFSS, 2009.
14. NC BRFSS, 2010.
15. NC YRBS, 2009.

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16. NC Prevention Partners WorkHealthy America<sup>SM</sup> Data, 2012.

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19. NC Prevention Partners WorkHealthy America<sup>SM</sup> Data, 2012.

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20. US & NC BRFSS, 2010.