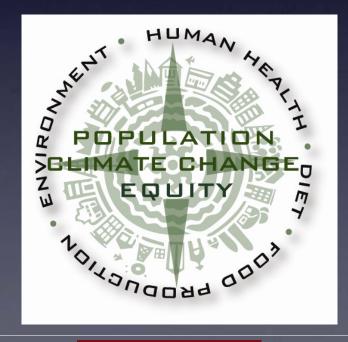
"Health, Healthy Eating, Improved Relationship with Food"

Roni Neff, PhD MS Rneff@jhsph.edu

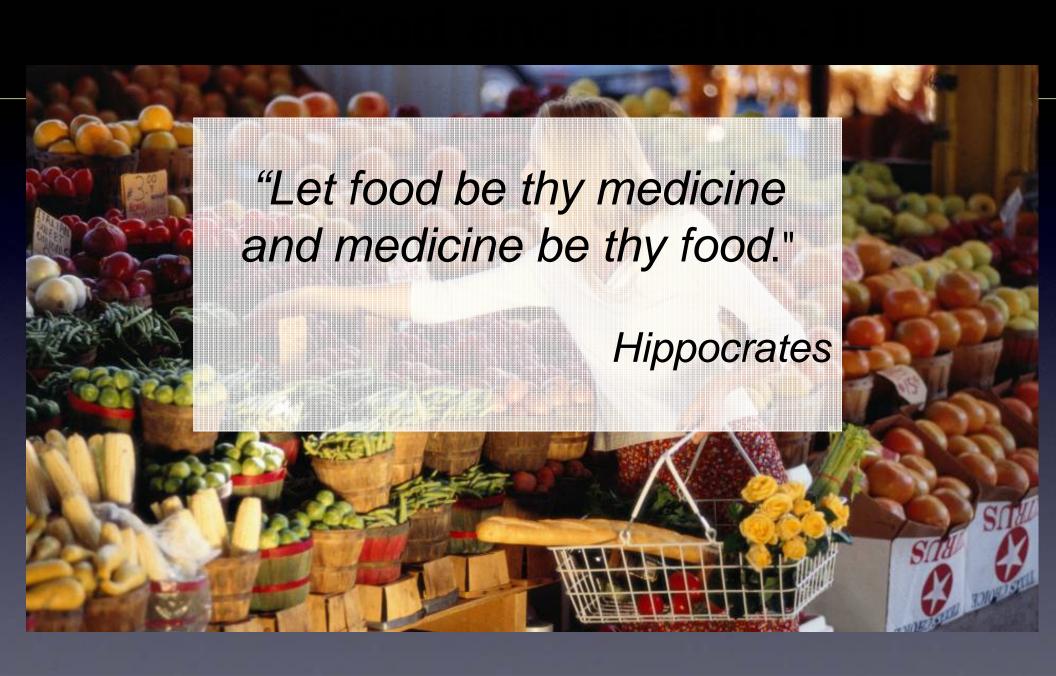
Research Director, Center for a Livable Future Johns Hopkins Bloomberg School of Public Health

DVRPC March 19, 2010











Flavor Environment

Time

Nutrition

Longterm food supply

Status

Family

Food Safety

Local Economy

Money

Guilt

Culture

Religion

Comfort



Center for a Livable Future

Rebellion

What we Eat

- > 1/10 Americans meet US dietary guidelines for fruits/vegetables (9)
 - Most eat 3 servings
- Average caloric intake up 300 cals 1985-2000
- Almost 1/3 of average grocery bill: "other food at home"
- 12 tsp/day HFCS



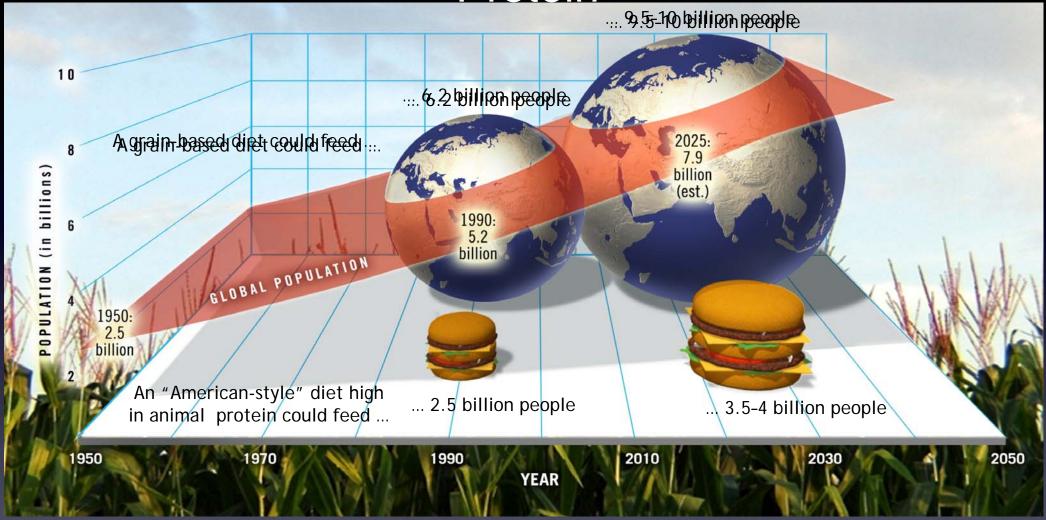


Food & Health





Plant-Based Diets vs. Diets with Animal Protein



Height of each world = Number of people that could be fed on a plant-based diet in 1990 and 2020 Height of each hamburger = Number of people that could be fed on a diet with 30% of calories from animal protein

Height of red line = actual world population to 2004, then estimated to 2050



Nutritional Quality

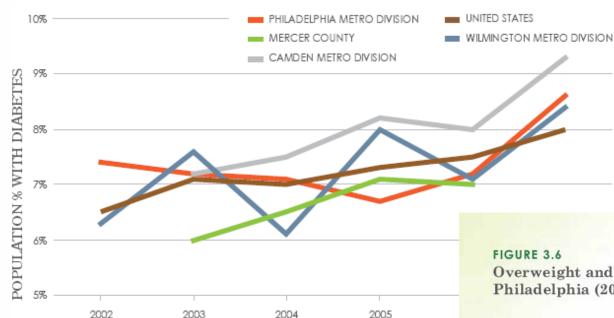
- Declines in key nutrients, many foods, since 1950
 - Methods to increase crop yield
 - Soil depletion
- Loss of vitamins over transport, storage time
- Corn/soy animal feeds reduce Omega 3 fatty acids

Note on Local Foods and Health

- No direct evidence of public health benefit from local food
- Nutrition benefit if motivated to eat more
- Food security rising gas prices, peak oil, terror
- Possible benefit if fresher
- Food safety
- Strengthening local economy, social capitalindirect effects on health



FIGURE 3.5 Adults with Diabetes in Greater Philadelphia

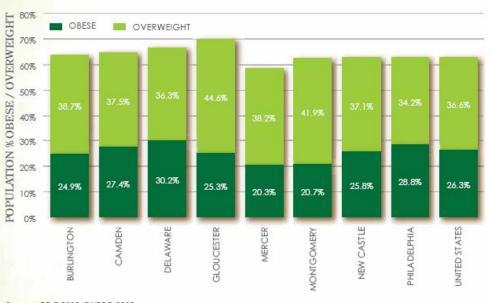


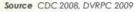
Note: Data set incomplete for Camden Metro Division and Mercer County.

Source CDC 2008, DVRPC 2009

US Medical costs obesity: \$417 billion

Overweight and Obese Adults in Selected Counties of Greater Philadelphia (2007)

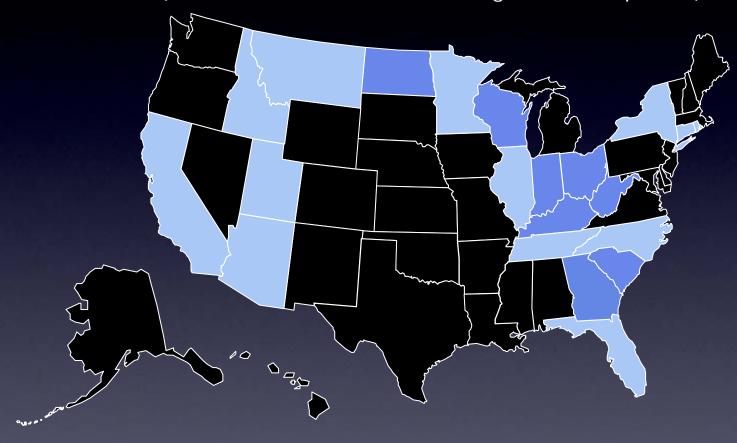






BRFSS, 1985

(*BMI ≥30, or ~ 30 lbs. overweight for 5′ 4″ person)



No Data

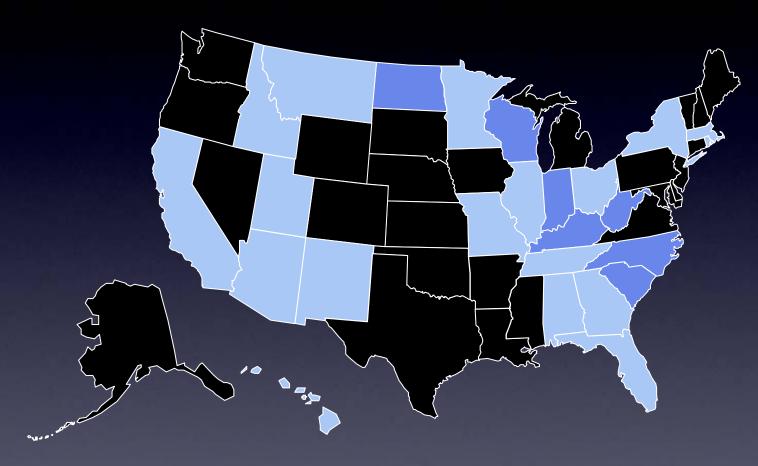
<10%





BRFSS, 1986

(*BMI ≥30, or ~ 30 lbs. overweight for 5′ 4″ person)



No Data

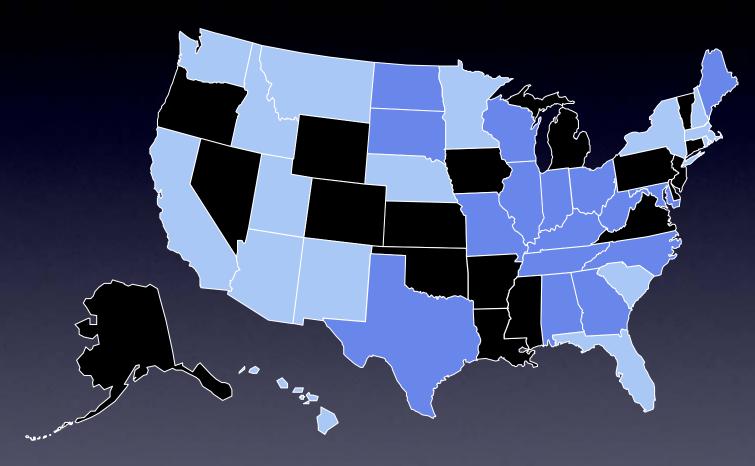
<10%





BRFSS, 1987

(*BMI ≥30, or ~ 30 lbs. overweight for 5′ 4″ person)



No Data

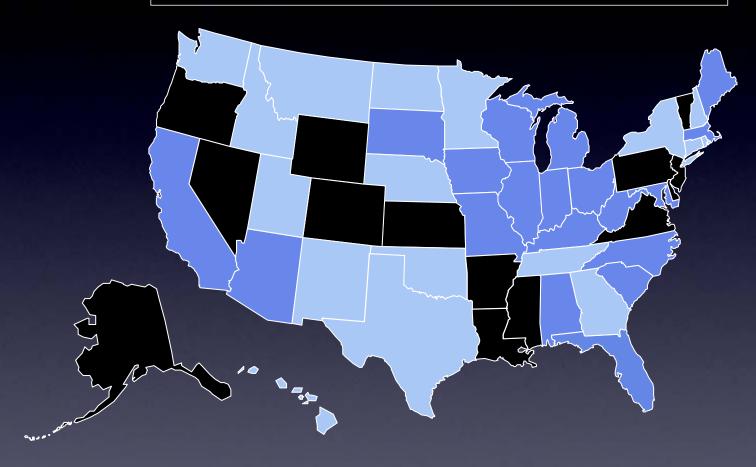
<10%





BRFSS, 1988

(*BMI ≥30, or ~ 30 lbs. overweight for 5′ 4″ person)



No Data

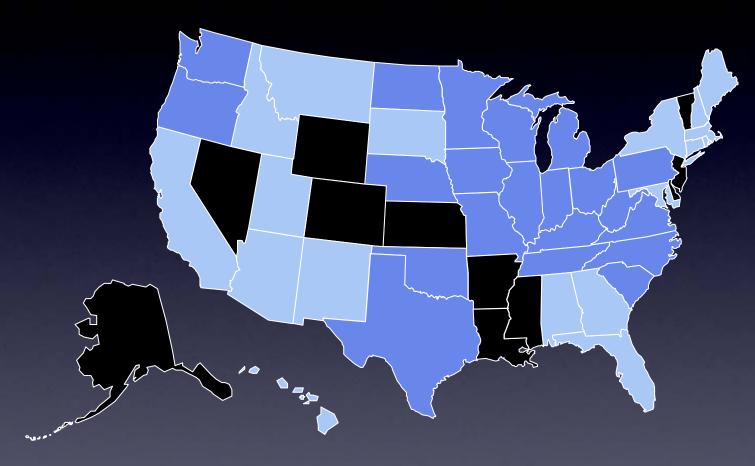
<10%





BRFSS, 1989

(*BMI ≥30, or ~ 30 lbs. overweight for 5′ 4″ person)



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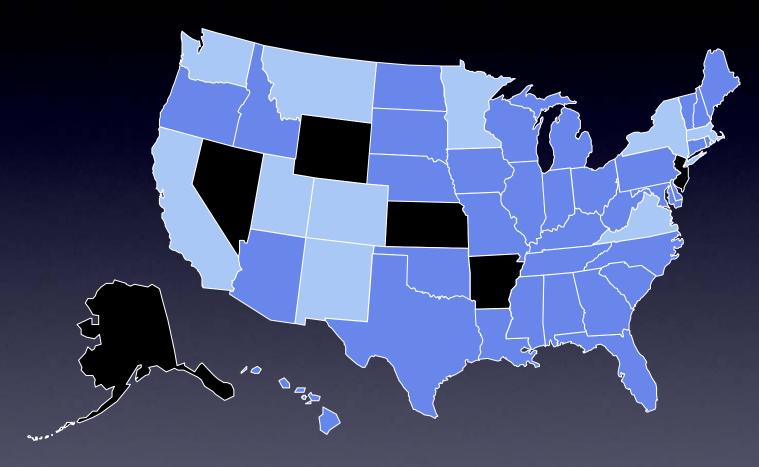
<10%





BRFSS, 1990

(*BMI ≥30, or ~ 30 lbs. overweight for 5′ 4″ person)



No Data

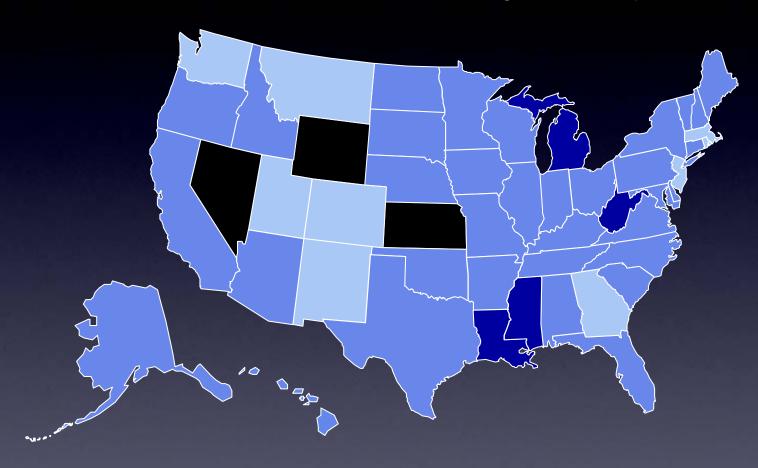
<10%





BRFSS, 1991

(*BMI ≥30, or ~ 30 lbs. overweight for 5′ 4″ person)







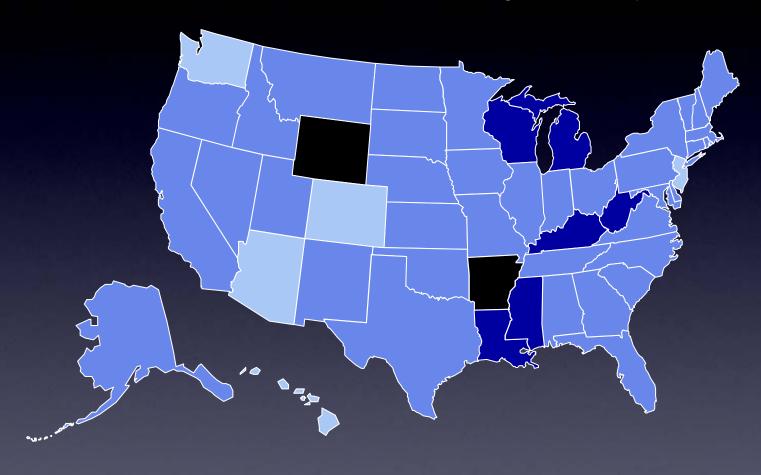
10%–14

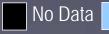




BRFSS, 1992

(*BMI ≥30, or ~ 30 lbs. overweight for 5′ 4″ person)







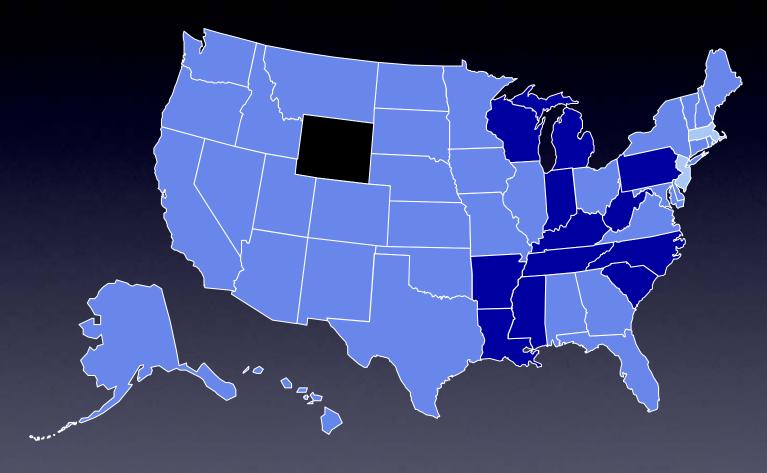
10%–14





BRFSS, 1993

(*BMI ≥30, or ~ 30 lbs. overweight for 5′ 4″ person)







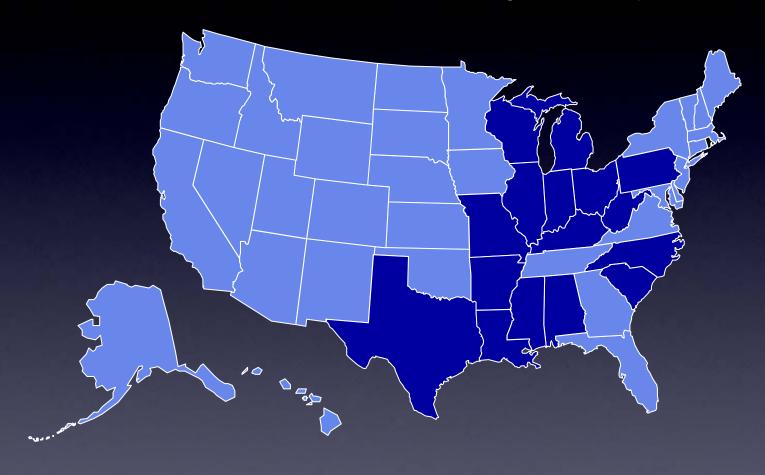
10%–14

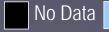




BRFSS, 1994

(*BMI ≥30, or ~ 30 lbs. overweight for 5′ 4″ person)







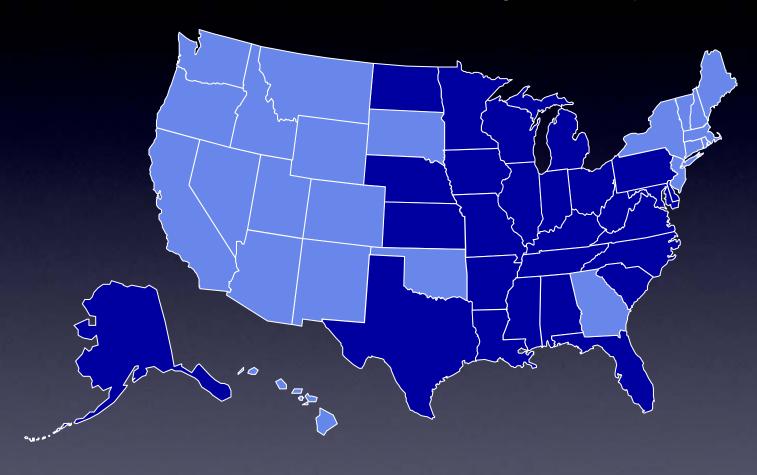
10%–14





BRFSS, 1995

(*BMI ≥30, or ~ 30 lbs. overweight for 5′ 4″ person)







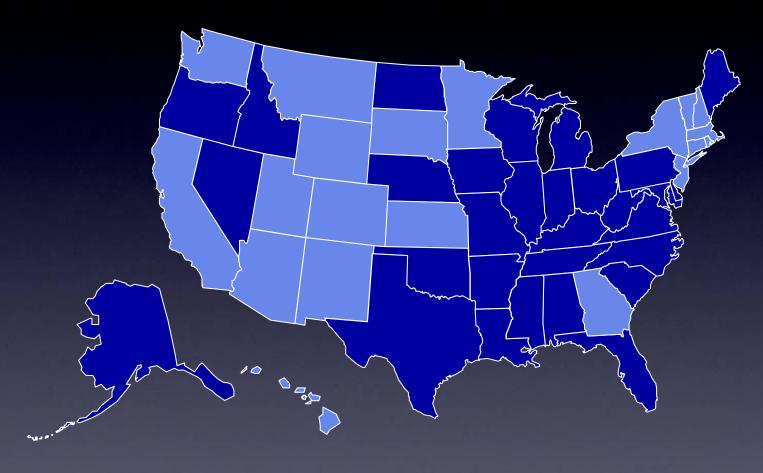
10%–14





BRFSS, 1996

(*BMI ≥30, or ~ 30 lbs. overweight for 5′ 4″ person)







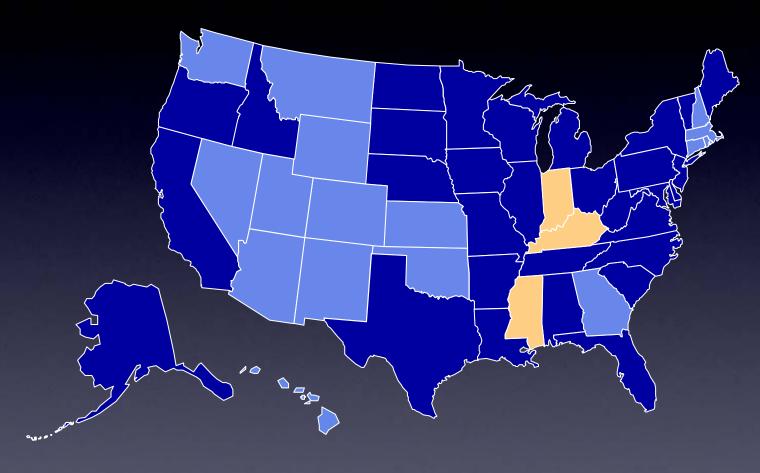
10%–14





BRFSS, 1997

(*BMI ≥30, or ~ 30 lbs. overweight for 5′ 4″ person)







10%–14

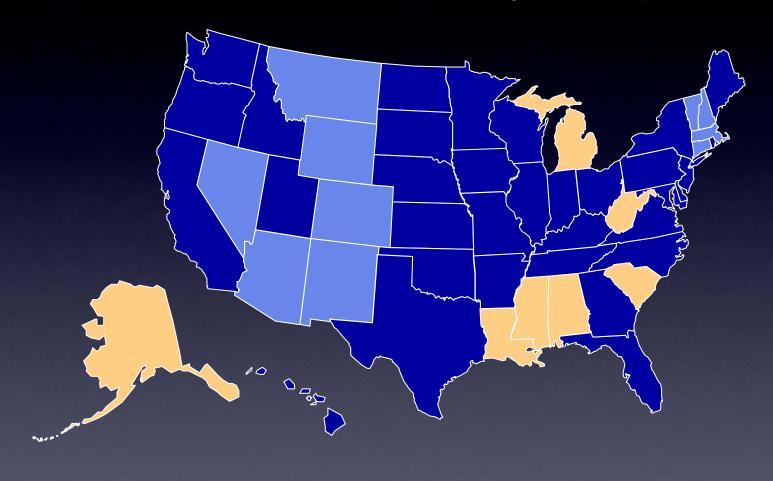
15%–19





BRFSS, 1998

(*BMI ≥30, or ~ 30 lbs. overweight for 5′ 4″ person)







10%–14

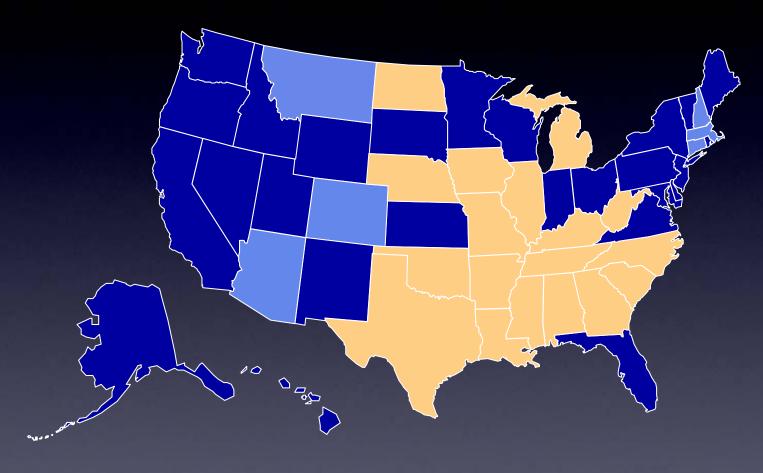
15%–19

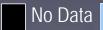




BRFSS, 1999

(*BMI ≥30, or ~ 30 lbs. overweight for 5′ 4″ person)







10%–14

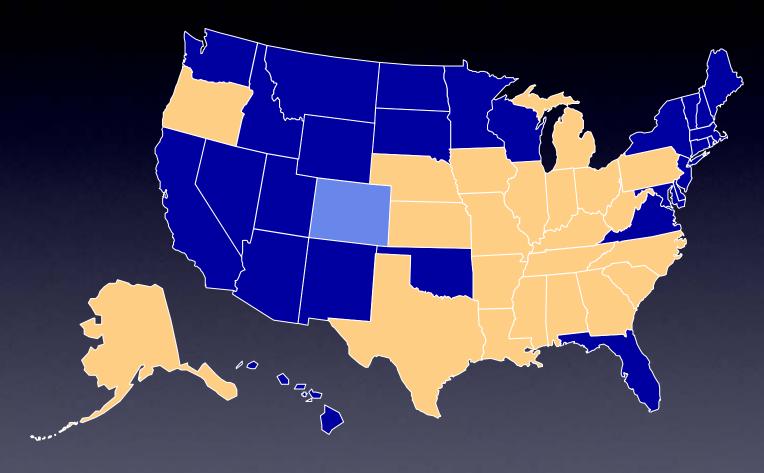
15%–19





BRFSS, 2000

(*BMI ≥30, or ~ 30 lbs. overweight for 5′ 4″ person)







10%–14

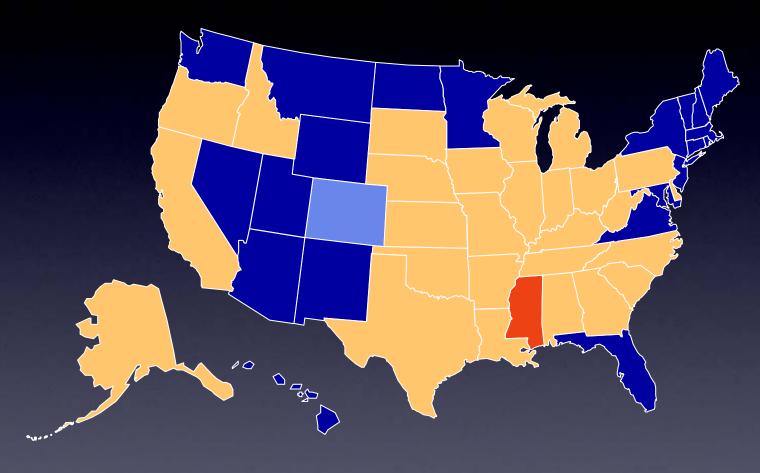
15%–19





BRFSS, 2001

(*BMI ≥30, or ~ 30 lbs. overweight for 5′ 4″ person)







10%–14

15%–19%



20%-24%

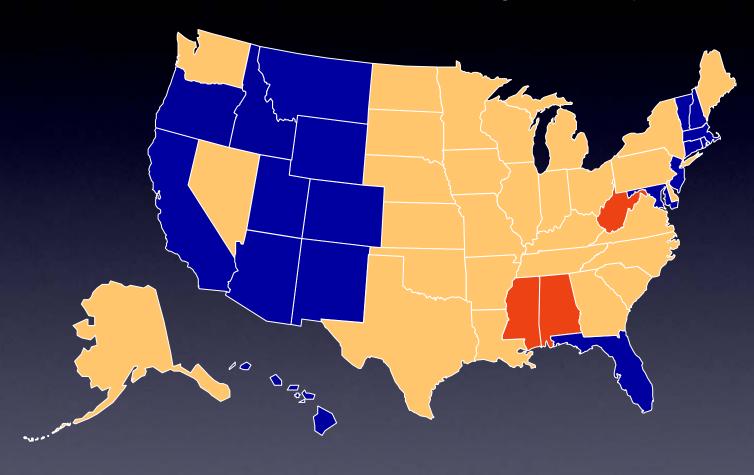






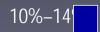
BRFSS, 2002

(*BMI ≥30, or ~ 30 lbs. overweight for 5′ 4″ person)









15%–19%



20%-24%

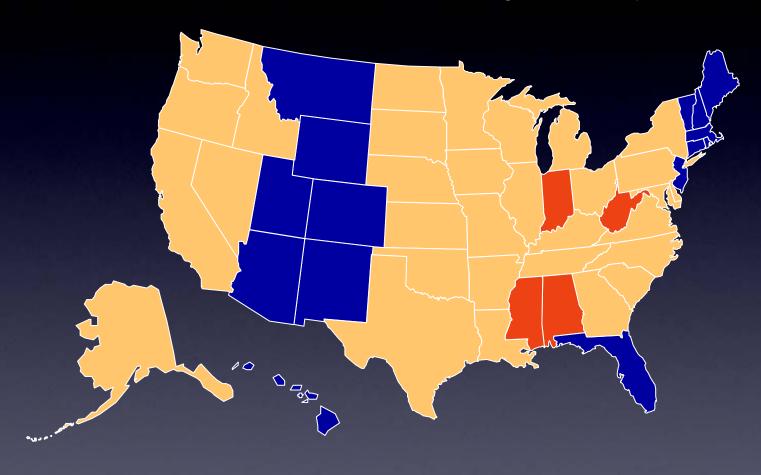






BRFSS, 2003

(*BMI ≥30, or ~ 30 lbs. overweight for 5′ 4″ person)







10%–14

15%–19%



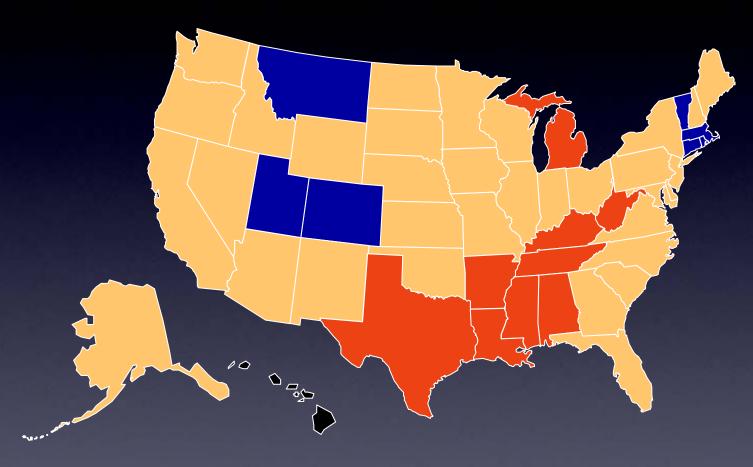
20%-24%





BRFSS, 2004

(*BMI ≥30, or ~ 30 lbs. overweight for 5′ 4″ person)







10%–14

15%–19%

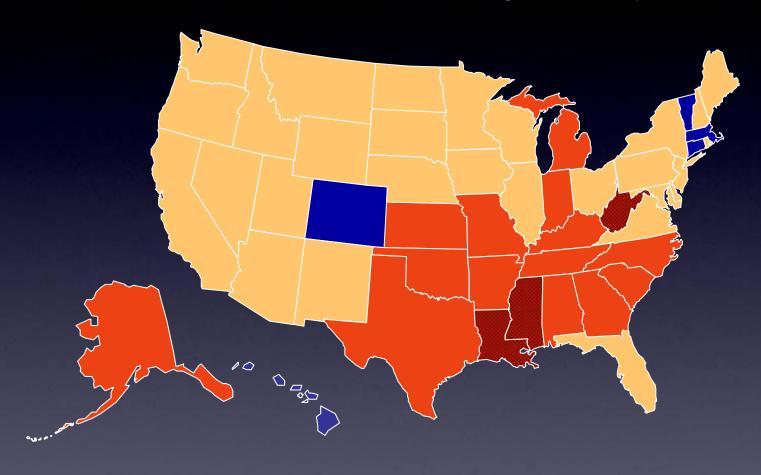


20%-24%





(*BMI ≥30, or ~ 30 lbs. overweight for 5′ 4″ person)





<10%

10%

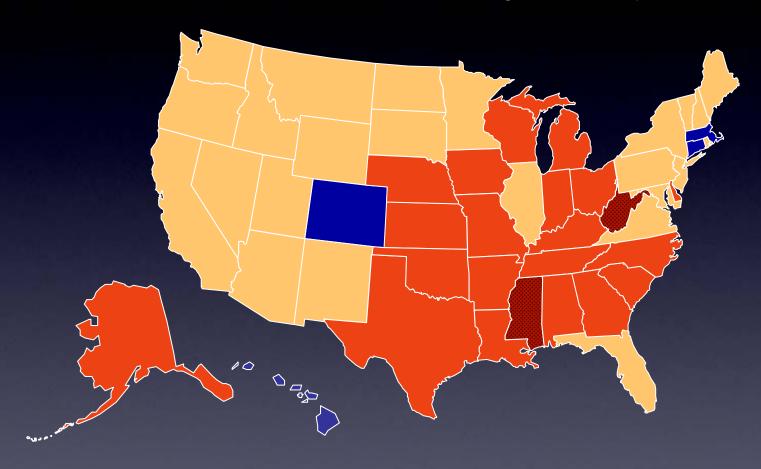
10%–14% 15%–19%

20%–24%

25%-29%



(*BMI ≥30, or ~ 30 lbs. overweight for 5′ 4″ person)





<10%



10%-14%



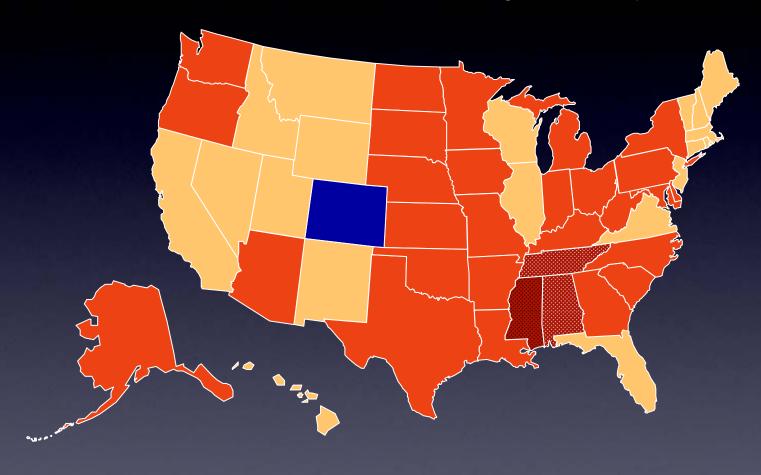


25%–29%





(*BMI ≥30, or ~ 30 lbs. overweight for 5′ 4″ person)





<10%

10%-

10%–14% 15%–19%

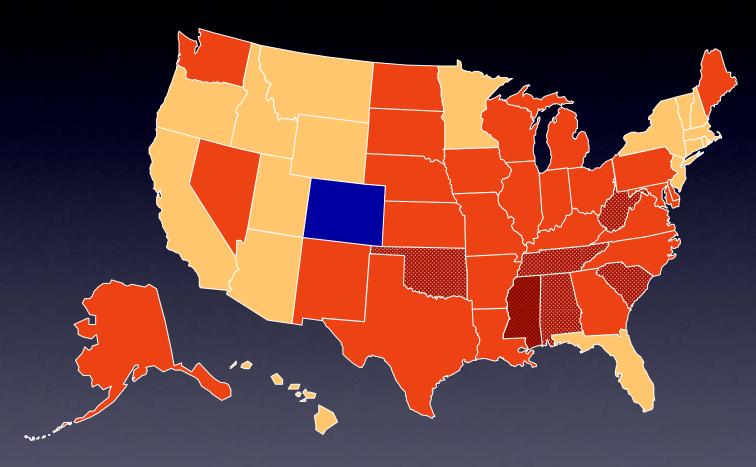
20%–24%

25%-29%





(*BMI ≥30, or ~ 30 lbs. overweight for 5′ 4″ person)





<10%

10%

10%–14%

15%–19%

20%–24%

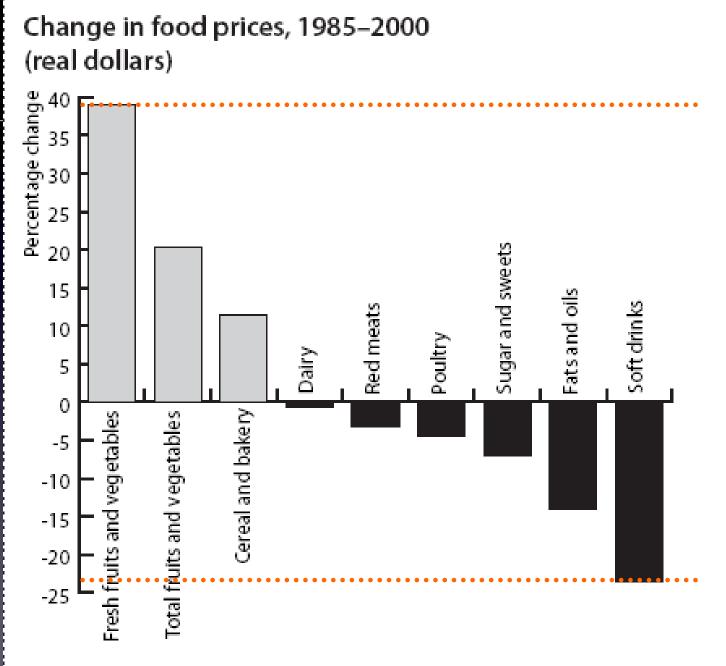
25%-29%

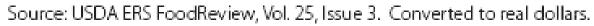


What's Changed?

















Food Science, Hyperpalatability

"Biological system for maintaining energy

balance goes awry"

- Key:
 - Sugar, fat, salt
 - Variety
 - Ready availability
 - Large size
 - Complexity / multisensor
 - ★ Engage cues associated with desire, e.g., deservingness





Promoting Health Through Delaware Valley Regional Food System Planning



Health Recommendations Currently

- Education esp youth and marketing
- Change environment/menu of options
- Model good behaviors
- Monitor
- Networking build community
- Access
- Availability
- Affordability
- Sustainability





Recommendation 1

- Address toxic food environment
 - Marketing
 - Zoning
 - Vending
 - Taxation
 - Procurement policy
 - Engagement in broader policy





"There is no connection between food and health.

People are fed by the food industry, which pays no attention to health, and are healed by the health industry, which pays no attention to food."



Wendell Berry

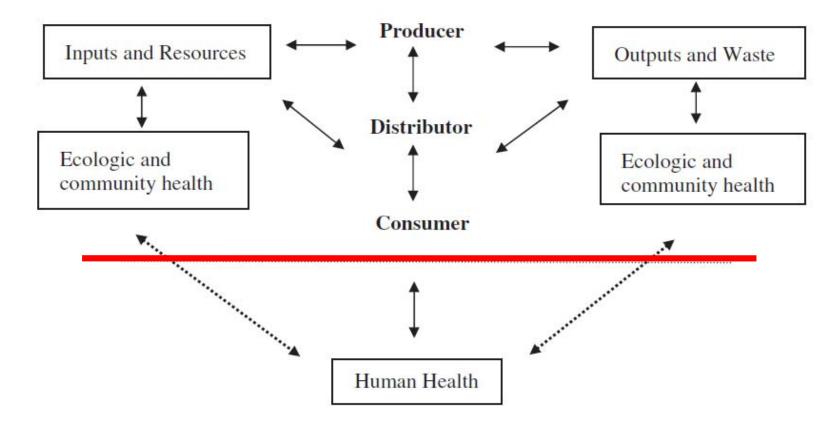


FIGURE 1 Model of the food production and nutrition system.

Table 1 adapted from Sobal, J., Khan, L.K., Bisogni, C.A. A conceptual model of the food and nutrition system. Social Science and Medicine 1998;47(7):853–63 and Lang, T., and M. Heasman. 2004. *Food Wars: the battle for mouths, minds and markets.* London: Earthscan Books.

Recommendation 2

- Engage the health sector more in food system planning!
- Delaware Valley is a center for hospital and health industry
 - Nationally -- \$12 billion food delivery budgets
- Much of their resources go to treating dietrelated disease
- Has played leadership role in addressing other health threats
- They need to know what you know
 - Credibility





Opportunities

- Locally
 - 4 hospital farmers' markets, 2 CSAs
 - 3 hospitals took Balanced Menus challenge
 - Pilot: 4 hospitals dropped >1000 tons GHG, equiv of 102,454 gallons gas
- Opportunities:
 - Education/messaging
 - Sites for programs
 - Health tracking
 - Food purchasing power
 - Food waste







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Events







The Gateway allows researchers, journalists, advocates and educators to explore the links between agriculture and public health. by searching several databases simultaneously, or by browsing a vetted collection of reports, journal articles and other resources. [more about How to use this site ...]

Highlighted Resources

.....in Science, Policy and Advocacy

Produce industry looks to reassure consumers

Food-borne illness outbreaks associated with fresh or fresh-cut produce have led both government and industry to develop new guidelines to improve produce safety on the farm, according to a new report jointly authored by Food & Water Watch and the Institute for Agriculture and Trade Policy.



http://aphg.jhsph.edu/

olitics in Heartland ity Coalition's annual Des Moines, Iowa, from special one day food policy council

organizers and practitioners on Oct. 10, as well as six field trips around Iowa. The conference is entitled "From Commodity to Community: Food

Politics and Projects in the Heartland."

CDC tracks fruit and vegetable consumption The federal Centers for Disease Control and Prevention have issued their State Indicator Report on Fruits and Vegetables, 2009, which provides for the first time information on fruit and vegetable consumption and policy and environmental support within each U.S. state.



Report evaluates carbon calculators A new report in the journal Ecological

Search Databases

Search several key health and agriculture databases at one time.

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- AGRICOLA Books
- EarthTrends
- NASD
- PubMed

Sugar Sweetened Beverage Tax (Phila, Proposed)

- Sugar sweetened beverages associated with obesity (many studies)
 - No nutritional value
 - No fullness
 - Affect children's taste preferences
- SSB -> water 2x/week → save
 >\$40/person; lose 7lbs/person/year
- Funds from tax support obesity prevention



