

State Burden

NPAO:

- In 2007, 62% of adults in Wisconsin were overweight or obese and 14% of high schools students were overweight, based on self-reported height and weight.
 - 82% of high school students and 76% of adults in Wisconsin consumed fewer than 5 fruits and vegetables per day.
 - 45% of adults in Wisconsin were not engaged in sufficient moderate or vigorous physical activity.
- Excerpt from CDPHP State Profiles at www.cdc.gov*

Diabetes:

- 1,276 adults in Wisconsin died from diabetes mellitus in 2005.
 - In 2007, 6% of adults in Wisconsin reported being diagnosed with non-pregnancy related diabetes.
- Excerpt from CDPHP State Profiles at www.cdc.gov*

Heart Disease:

- Heart disease accounted for 25% of deaths in Wisconsin in 2005, while stroke caused 6% of deaths.
 - In 2007, 26% of adults in Wisconsin reported having high blood pressure (hypertension) and 35% of those screened reported having high blood cholesterol, which puts them at greater risk for developing heart disease and stroke.
- Excerpt from CDPHP State Profiles at www.cdc.gov*

Poverty:

% of people living below the poverty level (2007-2011) = 12.0(*US Dept of Commerce, US Census Bureau*)

Funding

FFY 2012 funding level:

FY12 Estimated total: \$2,388,775

FY 2014 funding level

SPHA Basic Award: \$ 524,746
Enhanced Award Requested: \$1,850,000
SPHA Enhanced Award: \$1,226,894

Staffing Impact:

Total FTEs lost 0

Program Impact:

- Positive – Overall: The intent of the SPHA Program allows us to further institutionalize coordination across risk factors and diseases and push ourselves and our partners to think about broad system and environmental changes that will impact health outcomes
- Negative – NPAO: The reduced funding limits our ability to provide funding and training and technical assistance to local community coalitions. Coalitions are vital to implementing multiple strategies in multiple settings that result in sustainable environmental and system change for healthy eating and improved physical activity
- Negative – NPAO: The required strategies/interventions/performance indicators in domain 2 involve work and partner engagement in all settings. These strategies weren't necessarily in alignment with previous efforts and

needs for the State. Also, with the reduced funding it will be difficult to maintain and/or scale up efforts in these multiple settings. We will be doing many things but none very comprehensively

- Negative – Overall: It is necessary to support the core public health infrastructure to prevent and reduce chronic disease. The SPHA Program assumes the infrastructure, but doesn't specifically recognize or provide a space to show the cross-cutting foundation
- Negative – Diabetes: Many existing initiatives rely on program funding to be sustained. With a 25-30% drop in funding, we will have to reexamine contracts and have to scale back our efforts. We had planned to expand our reach and scope with these funds, but it looks like the opposite may occur
- Negative – School Health: The relationships and infrastructure that has been built between WI DPI and WI DHS was critical to the success of the school health program in Wisconsin. While implied in the grant application, there was no language or place to emphasize the importance of this infrastructure which could potentially lead to a decrease in future focus or dedicated resources