



HEALTHY LIFESTYLES FUNDING REPORT

2022-2023

Healthy Lifestyles Annual Report July 2022 - June 2023

Overview

During the 2022-23 fiscal year, \$890,000 was allocated to Healthy Lifestyles funding and equally divided between the West Virginia Division of Health Promotion and Chronic Disease (HPCD) and the West Virginia Division of Tobacco Prevention (DTP). Both Divisions are housed within the West Virginia Department of Health and Human Resources, Bureau for Public Health's Office of Community Health Systems and Health Promotion.

DIVISION OF HEALTH PROMOTION AND CHRONIC DISEASE (HPCD)

Partnerships and Collaborations

HPCD works in partnership with community-based organizations to disseminate health education, community programming, and capacity-building funding to improve statewide health around physical activity and nutrition. Two positions supported by Healthy Lifestyles funding are integrating strategies with current chronic disease prevention and management projects for better impact. Evaluation is provided by the West Virginia University (WVU) Prevention Research Center. Partners Active Southern West Virginia (ASWV), the Center for Active West Virginia (CAWV), and Try This West Virginia disseminate funding to organizations to improve their capacity and to implement planned strategies to increase community nutrition and physical activity access. Funded organizations for these projects include schools, cities, health care clinics, recreational organizations, environmental conservation groups, youth development programs, and others. Additionally, HPCD is in the third year of running the Celebrating Healthy West Virginia (CHWV) Community Recognition Awards Program (previously known as Healthy People Healthy Places). This work focuses on city and county policies around physical activity, nutrition, and tobacco prevention/cessation and is only possible through a collaboration between internal Bureau partners, university/academic partners, and subject matter experts within the community.

The impressive synergies between the grant facilitating organizations and their grantees continue to build the infrastructure needed to address the health of West Virginia residents. The relatively small amount of money invested reached over 300,000 people across the state during this grant cycle. Even with some additional technical assistance needs, grantees completed a number of equitable and sustainable policy, system, or environmental (PSE) changes that will help create a context where the healthy choice is the easier choice.

Center for Active West Virginia

During the 2022-23 grant cycle, CAWV funded 13 projects across West Virginia to increase physical activity. Grantees received a total of \$58,098.80 in funding, of which \$39,367 was spent locally on goods and services in West Virginia. One CAWV grantee did not complete the year-end evaluation survey, so they were excluded from the analysis. They were awarded \$5,000 for their project, which is not reflected in the total amount of funding above. The 13 projects reached an estimated total of 333,555 individuals. CAWV grant recipients completed a total of 24 project activities (80%) of 30 proposed activities. The activities focused on creating a built environment to increase physical activity, such as improving trails,

creating walking paths, providing exercise equipment and facilities, and installing bike racks, among others. Environmental changes comprised 76% of all completed activities. Grantees also made one policy change and four systems changes. All project activities completed by grantees were PSE changes. The primary focus on environmental changes is consistent with CAWV's funding purpose. The most frequently reached health-disparate populations by CAWV grant partners were women (50%) and other commonly reached populations included people with disabilities, uninsured or underinsured populations, older adults, and racial and ethnic minorities. The most commonly identified strategies for health equity considerations included having an accessible project location, providing financial assistance, and focused recruitment. The most common strategies for ensuring project sustainability were implementing long-term environmental changes (77%) and identifying partners or collaborators (54%). Many of the CAWV project successes were related to environmental changes. Eleven organizations reported that the grant project led to increased opportunities and access to engage in healthy behaviors (85%). Other successes noted include increase in program participation (46%) and increase in physical activity (39%). Nine out of 13 grantees reported that they did not face any barriers or challenges in implementing their projects. The most commonly cited barriers among the other four grantees were related to issues with accessibility of space, facilities, equipment, or resources (15%). Other barriers included administrative changes, delayed construction, and issues with communications.

Active Southern West Virginia

During the 2022-23 grant cycle, ASWV funded 10 projects across West Virginia to promote Workplace Wellness. Grantees received a total of \$19,458, of which \$3,510 was spent locally on goods and services in West Virginia. The projects reached a total of 3,925 individuals. As of this report, ASWV grant recipients had completed 45 activities in 2023. The completed activities focused on promoting physical activity and healthy eating by providing equipment, facilities, educational programming, and wellness challenges. Policy, systems, environment, and individual (PSEI) changes are increasing in all grantee locations. The 45 PSEI changes consisted of 11 policy changes (24.4%), 14 systems changes (31.1%), 14 environment changes (31.1%), and six individual changes (13.3%). In the first half of 2023, Workplace Wellness programming focused on expanding the number of organizations that are certified in the Centers for Disease Control and Prevention's (CDC) Work@Health program. ASWV began working with nine new organizations to certify employees in Work@Health. A focus on expanded grant reach resulted in 11 new projects through Workplace Wellness capacity building grant funding. HPCD and ASWV also started a pilot project with the WVU School of Medicine Department of Exercise Physiology, granting them \$5,000 to reach first responders and tactical athletes in Morgantown. The major goal of this program is creating a curriculum for Workplace Wellness that can be shared with first responders and tactical athletes across the state. ASWV also expanded its in-person presentations and began planning for the 2023 WV Workplace Wellness Conference and Awards. Through the efforts of HPCD and ASWV, the Work@Health Employer Training course is developed by the CDC and delivered by CDC-certified Work@Health trainers at HPCD and ASWV. This evidence-based course provides employers and employees with the knowledge and tools to promote good health in their workplaces. Such tools can help prevent chronic illness and disability, thereby improving productivity and competitiveness as an employer. In 2023, 13 individuals from nine different worksites received the Work@Health training covering a total of 12,975 employees.

Try This WV

HPCD is a founding member of Try This WV, whose mission is to knock West Virginia off the worst health lists. Expertise on building community capacity to assess, plan, and partner for obesity prevention initiatives have resulted in communities obtaining a \$15 dollar return on investment for every \$1 spent through the

initiatives funded by Try This WV. In 2023, nine communities received funds to support fruit and vegetable consumption and to increase physical activity. Funded projects this year included Cooking Connections for Young Adults in Berkeley County, Enhancing River-Trail Community Connections in Upshur County, Hedgesville Community Harvest Market, Mon Safe Routes in Monongalia County, Movin' It Outdoors in Jackson County, Pocahontas County FARMacy, Pop-Up Line Dancing/Yoga Project in Ohio County, Springfield Community Walking Track, and Year 2: Bike Lending Road Repair in Monongalia County.

Celebrating Healthy West Virginia

The CHWV Community Recognition Program began in 2019 (then known as Healthy People Healthy Places) and grew out of a state engagement meeting led by HPCD and the National Association of Chronic Disease Directors. CHWV acknowledges exceptional community leaders who work together to create healthy communities. Counties, as well as cities of any size, are eligible to apply and are assessed by the policies they have implemented around water consumption, healthy eating, physical activity access, and tobacco prevention or cessation. Depending on what benchmarks they meet in these areas, communities are awarded either gold, silver, or bronze level recognition. For 2023, Kanawha County was awarded gold level recognition. CHWV will expand in 2024 to recognize the great work that community groups, organizations, and worksites are doing to help improve the health of West Virginians where they live, work, learn, eat, and play.

Statistical Data

All data provided is from the CDC's 2022 Behavioral Risk Factor Surveillance System Prevalence & Trends Data Tool, unless otherwise indicated.

Weight status:

- Obesity (BMI of 30.0 or above): the crude prevalence of West Virginian adults who have obesity was 41.0% compared with the median rate of 33.6% among all states and DC.
- Overweight (BMI of 25.0-29.9): the crude prevalence of West Virginian adults who are overweight was 33.4% compared with the median rate of 34.1% among all states and DC.
- Overweight or having obesity (BMI of 25.0 or above): the crude prevalence of West Virginian adults who are overweight or have obesity was 74.4% compared with the median rate of 67.7% among all states and DC.

Physical Activity:

- Exercise: the crude prevalence of West Virginian adults reporting **no** participation in physical activities during the past month was 30.2% compared with the median rate of 23.4% among all states and DC.
- Met physical activity guidelines (data from **2019**):
 - Met aerobic activity guidelines (150 minutes or more of aerobic physical activity per week): the crude prevalence of West Virginian adults reporting they met aerobic physical activity guidelines was 47.2% compared with the median rate of 50.1% among all states and DC.
 - Met strength activity guidelines (participated in muscle strengthening exercises two or more times per week): the crude prevalence of West Virginian adults reporting they met strength activity guidelines was 26.1% compared with the median rate of 35.7% among all states and DC.

- Met full physical activity guidelines (both aerobic and muscle activity guidelines): the crude prevalence of West Virginian adults reporting they met full physical activity guidelines was 17.1% compared with the median rate of 23.2% among all states and DC.

Nutrition: (data from 2021)

- Fruit consumption: the crude prevalence of West Virginian adults who reported consuming fruit **less than** one time per day was 46.0%, compared with the median rate of 40.8% among all states and DC.
- Vegetable consumption: the crude prevalence of West Virginian adults who reported consuming vegetables **less than** one time per day was 18.9%, compared with the median rate of 19.7% among all states and DC.

Health status:

- Fair health: the crude prevalence of West Virginian adults reporting fair health was 17.1%, compared with the median rate of 13.1% among all states and DC.
- Poor health: the crude prevalence of West Virginian adults reporting poor health was 8.4%, compared with the median rate of 3.9% among all states and DC.
- Fair or poor health: the crude prevalence of West Virginian adults reporting fair or poor health was 25.4%, compared with the median rate of 17.0% among all states and DC.

Additional data:

- Food insecurity: according to the U.S. Department of Agriculture Economic Research Service, looking at data from 2019-2021, the prevalence of food insecurity in West Virginia was 14.0%, a statistically significant percentage above the U.S. average of 10.4%.
- Access to exercise opportunities: according to the 2022 County Health Rankings Summary Report, the percentage of the population in West Virginia that had adequate access to locations for physical activity was 50% (counties ranging from 1% to 99%) compared to the national value of 80%.

DIVISION OF TOBACCO PREVENTION (DTP)

Partnerships and Collaborations

The DTP is the lead state agency for comprehensive tobacco prevention, cessation, and control, and works to prevent and reduce tobacco use in West Virginia - the leading cause of preventable disease, disability, and death in the United States. The DTP partners with local coalitions, community agencies, and state and national organizations to implement and evaluate effective tobacco prevention and cessation activities that strive to:

- Eliminate secondhand tobacco smoke;
- Promote quitting among adults and youth;
- Prevent youth tobacco use initiation, including vaping and other electronic delivery devices; and
- Identify and eliminate disparities among populations.

Partners this past year were the American Lung Association (ALA), the McDowell County Commission on Aging, the Ritchie County Family Resource Network (RCFRN), WV Covenant House, and the WVU Research Corporation.

Statistical Data

- The leading cause of death and disease in West Virginia continues to be smoking. West Virginia continues to have the highest reported adult smoking rates in the nation: 21% of adults living in West Virginia are current smokers - smoking every day or some days.*
- The national smoking prevalence for adults is 11.5% (BRFSS, 2022). Gender - Men: 13.1% and Women: 10.1% reported current smoking.
- West Virginia adults who die each year from their own smoking – 4,300.**
- High school students who smoke – 7.6% .**
- High school students who use e-cigarettes – 27.5%.**

*<https://www.americashealthrankings.org/explore/measures/Smoking/WV>

**https://www.tobaccofreekids.org/problem/toll-us/west_virginia

Progress Report

A Tobacco Cessation Coordinator was hired in 2020 and is charged with managing the Tobacco Cessation program. Duties include overseeing the operation of WV Tobacco Quitline vendor, managing subrecipient grants for tobacco cessation and prevention for the West Virginia African American population, and the LGBTQ+ inclusive community. Additionally, this position represents DTP at regional and national meetings and conferences regarding tobacco cessation and prevention. The current staff member is a Certified Tobacco Treatment Specialist (CTTS). Total amount reflects both salary and benefits - \$70,385

McDowell County on Aging (MCOA)

The Division worked with the MCOA to increase knowledge about the dangers of smokeless tobacco, provide oral health screenings, and promote local and statewide tobacco cessation services, among blue-collar workers in Mercer, Raleigh, Wyoming, Mingo, Logan counties - \$50,000

American Lung Association (ALA)

The Division worked with the American Lung Association to educate and reduce tobacco and nicotine use among West Virginia youth and young adults. Funding supported both school and community-based, student-led Raze crews as well as capacity building in communities for providing cessation services to West Virginia youth and young adults. Messaging focused on both tobacco products as well as on e-cigarette/vaping education and prevention for teens. The evidence-based vaping prevention program CATCH My Breath was promoted as a tool to help educate and prevent youth vaping. Additionally, the tobacco cessation programs INDEPTH and Not on Tobacco (N-O-T) were promoted tools to help decrease tobacco use among teens in West Virginia - \$195,615

Ritchie County Family Resource Network (RCFRN) and Coalition for a Tobacco-Free West Virginia (CTFWV)

DTP worked with the RCFRN and CTFWV to educate the public about tobacco related issues and options to reduce tobacco and nicotine-based electronic vapor device use in West Virginia. They sought to involve local residents and organizations in tobacco control, education, and prevention efforts through community education, organizing, and strategic planning as well as targeting activities and initiatives on disparate populations - \$50,000

WVU Research Corporation - School of Dentistry

DTP partnered with the WVU Research Corporation to train professionals (medicine, dentistry, social work, counseling, pharmacy, nursing, and public health) with evidence-based strategies that will enable them to provide patients/clients/communities with effective tobacco cessation opportunities - \$63,000

The three-day CTTS training program included:

- a. Lectures, role-playing, and case presentations used to discuss pharmacological and counseling interventions with patients interested in tobacco cessation;
- b. Education on alternative nicotine delivery methods such as the electronic cigarette and smokeless tobacco; and
- c. Tobacco Treatment Specialist certification examination.

Tobacco Quitline

Additional funding was provided to supplement the WV Tobacco Quitline's goal of assisting West Virginia residents to quit tobacco use, including Electronic Nicotine Delivery System (vaping) products - \$16,000

- a. Medicaid and uninsured and underinsured West Virginia residents are eligible for enrollment with the Quitline. Medicare and privately-insured people are also able to enroll.
- b. It's free for tobacco users who want to stop.
- c. Participants have four calls with a CTTS to assist the quitting process, and unlimited reactive coaching calls.
- d. Participants may receive an eight-week supply of nicotine patches, lozenges, or gum (Nicotine Replacement Therapy (NRT)).
- e. Pregnant women and those under 18 may participate with physician approval, and are able to enroll and receive NRT.