

COMMUNITY OBESITY SURVEY: Executive Summary

In late 2010, the Southern Nevada Health District – Office of Chronic Disease Prevention & Health Promotion contracted with the Cannon Survey Center at the University of Nevada, Las Vegas to conduct a statewide adult telephone survey. A total of 1,508 people participated in the survey: 1,207 Southern Nevada residents and 301 from Northern Nevada. The purpose of the study was threefold: 1) to determine public perceptions as to the severity of obesity in the community; 2) to identify perceptions as to the causes of obesity, and 3) to identify support for specific interventions to combat obesity, particularly in children.

Demographically, the sample respondents were split with nearly half (50.7 percent) being male and nearly half (49.3 percent) being female. In terms of age, there was a large minority (40.0 percent) of respondents aged 25 to 44 years, followed by 45 to 64 (30.6 percent) and 18 to 24 (13.3 percent). The majority of respondents (70.0 percent) identified as being White/Caucasian, followed by Hispanic/Latino (14.2 percent) and Black/African American (9.4 percent). The survey was conducted in both English and Spanish and interviewers were able to access both land lines and cell phone numbers to contact potential participants.

The following presents the key findings from residents of Southern Nevada and their implications for future obesity prevention efforts:

Childhood Obesity

Respondents were asked a series of questions related to childhood obesity. An overwhelming majority indicated that childhood obesity was either a “very serious” (58.5 percent) or “somewhat serious” (37.9 percent) issue in the community. When asked about factors that contributed to childhood obesity, the majority of respondents felt that factors such as easy access to unhealthy or fast food, unhealthy foods and beverages tend to cost less than healthy foods and beverages, consumption of soda and/or sugary drinks, marketing/advertising unhealthy food to children, children/youth spending more than 2 hours per day playing video games, watching TV or on the internet, lack of physical education, neighborhoods with high crime or uninviting environments

for physical activity, portion sizes, parents not teaching children the right choices about healthy eating and exercise all contributed a significant amount to childhood obesity.

In terms of what level of responsibility various entities had in the reduction of childhood obesity, the vast majority of respondents (95.5 percent) felt that parents have a high level of responsibility. Other entities that are believed by a majority of respondents to hold a high level of responsibility are schools and healthcare providers or physicians.

Respondents were also asked whether they support or oppose several interventions to address childhood obesity in the community. Almost all interventions were either strongly supported or supported by a majority of respondents, with the exception being re-zoning to prohibit fast food locations near schools or child care centers as an intervention to address childhood obesity. When asked about funding for interventions to address childhood obesity, a majority of respondents supported or strongly supported the use of state funds or a tax on sodas or junk foods to support programs dealing with childhood obesity prevention.

Adult Obesity

Respondents were also asked a series of questions related to adult obesity. Similar to childhood obesity, 68.2 percent of respondents indicated that adult obesity is a very serious problem in the community, followed by 29.8 percent who reported that adult obesity is somewhat serious. The majority of respondents felt that factors such as easy access to unhealthy food or fast food, the cost of unhealthy food/beverages compared to the cost of healthy food/beverages, consumption of soda and sugary drinks, spending more than 2 hours per day on the internet, watching TV, or playing video games, a lack of physical exercise/

activity, portion sizes all contributed a significant amount to adult obesity.

Highlights

Contributors to Obesity

- 41.3 percent of respondents indicated that a lack of availability of fresh fruits and vegetables contributes a significant amount to childhood obesity.
- 81.8 percent of respondents indicated that easy access to unhealthy or fast food contributes a significant amount to childhood obesity.
- 62.1 percent of respondents indicated that marketing and advertising unhealthy food to children contributes a significant amount to childhood obesity.
- 45.9 percent of respondents reported that no access to safe and affordable places to play or exercise contributes a significant amount to childhood obesity.
- 84.1 percent of respondents indicated that parents not teaching children the right choices about healthy eating and exercise contribute a significant amount to childhood obesity.
- 64.9 percent of respondents indicated that easy access to unhealthy food or fast food contributes a significant amount to adult obesity.
- 87.6 percent of respondents indicated that a lack of physical exercise/activity contributes a significant amount to adult obesity.
- 76.0 percent of respondents reported that portion sizes contribute a significant amount to adult obesity.

Support for Interventions

- The vast majority of respondents indicated that they would either strongly support (47.5 percent) or support (45.9 percent) a physical education requirement in elementary schools as an intervention to address childhood obesity.
- The majority of respondents indicate that they would either strongly support (30.2 percent) or support (40.4 percent) banning trans fats in schools as an intervention to address childhood obesity.
- A large majority of respondents indicated that they would either strongly support (32.7 percent) or support (40.4 percent) the banning of junk food or soda sales in schools as an intervention to address childhood obesity.
- 33.8 percent of respondents indicated that they would strongly support and 54.6 percent of respondents indicated that they would support the requirement that child care centers provide physical activities for children and offer only nutritious meals and snacks as an intervention to address childhood obesity.
- The vast majority of respondents indicated that they would either strongly support (32.1 percent) or support (60.7 percent) community planning practices that make it easier to walk and bike as an intervention to address childhood obesity.
- 63.9 percent of respondents indicated that they agree with the statement, "The community a person lives in influences that person's health."
- 53.1 percent of respondents agree with the statement, "Personal decisions like diet and being physically active are the main factors in determining how healthy a person is," over, "Circumstances in a community, such as access to healthy food, recreational activities, or places to be physically active are the main factors in determining how healthy a person is."



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