Report to the Community

March 25, 2008

Warner Girls Leadership Academy
What is Steps?

• Funded by the U.S. Dept. of Health & Human Services
• Part of Steps to a HealthierUS
  – www.cdc.gov/steps
  – Five year cooperative agreement program
• Focus on:
  • Diabetes
  • Obesity/overweight
  • Asthma
  • Improving nutrition
  • Increasing physical activity
  • Reducing tobacco use and exposure
Core Values—Lasting Impact

• Evidence-based interventions
• Behavior change
• Environmental and social change
• Policy change
• Integration
• Sustainability

• Evaluation (not research)
Areas of Focus

• Neighborhoods
• Schools
• Health care and community health settings
• Worksites
• Health communications & social marketing
Helping Clevelanders live longer, better and healthier lives

**SOCIOECOLOGICAL MODEL**

- **Individual**
  - Knowledge, attitudes, values, intentions

- **Interpersonal**
  - Family, friends, peers, co-workers

- **Organizational**
  - Rules, policies, procedures, incentives

- **Community**
  - Social norms, social networks, standards and practices

- **Public Policy**
  - Local, state, federal govt. policies, regulations, laws
THE STATE OF CLEVELANDER’S HEALTH

Center for Adolescent Health
Center for Health Promotion Research

Case Western Reserve University
School of Medicine
Data Keepers

- CASE Center for Adolescent Health
  - Josh Terchek
  - Michael Rueschman
  - Michelle Del Toro
  - Jean Frank
  - Ed Hill
- CASE Center for Health Promotion Research
  - Elaine Borawski
  - Katie Przepyszny
  - Matt Russell
  - Erika Trapl
  - Nathan Gardner
Where Does the Data Come From?

- Cleveland Youth Risk Behavior Survey (YRBS)
- Cleveland Behavioral Risk Factor Surveillance Survey (BRFSS)
- Steps Process Evaluation Reporting System (SPERS)
Steps Cleveland YRBS

• National health behavior survey developed by the CDC
• A collection of 99 questions designed to provide a “snapshot” of teenage students’ health risk behaviors
• Administered in schools to randomly selected classrooms
  – Anonymous
  – Voluntary
• Steps YRBS 2007
  – 15 CMSD high schools
  – 942 high school students
Cleveland BRFSS

- Cleveland BRFSS is adapted from CDC-developed state-based health survey system in use since 1984
- Telephone survey by trained interviewers of randomly selected adults 18+ from randomly sampled Cleveland households
- 2657 sample respondents between 2005-2006
- Sample answers are aggregated and weighted to represent the city population
Methodological Notes

• Where available, local estimates are compared to county, state and national estimates, as well as comparable cities to Cleveland.

• Comparative data are derived from YRBS and BRFSS equivalent surveys.

• Typically, only one year of data are used when making comparisons to state, other cities or national estimates.

• Adult Data: In order to examine smaller subgroups, 2005-2006 data were combined.
Methodological Notes

Statistical Notes

• While group % may look different, may not be statistically significant due to sample sizes.
• Most analyses are not adjusted for other factors that could contribute to the differences.
• Self-reported data
  – Accurate for behavior
  – Validity issues with disease reporting
• Comparisons are valid
  – Made to other self-reported data
Steps Process Evaluation Reporting System (SPERS)

- Online reporting system
- Steps grantees report monthly based on specific scopes of work:
  - program reach, barriers, lessons learned
- Can summarize program reach across all Steps projects
Standardized, centralized reporting by each grantee funded through Steps

**SPERS: Steps Process Evaluation Reporting System**
Example: Reporting Screen for Agencies Providing Individual Training or Education

Gives us program reach, types of programming provided --- are we reaching who we said we’d reach; doing what we said we’d do?
Helping Clevelanders live longer, better and healthier lives

The Result:

Bi-Monthly Reports that Summarizes Across All Grantees

Table 1: SPERS Process Information: Individual, Group, and Professional Trainings

<table>
<thead>
<tr>
<th></th>
<th>Individual Training/Education</th>
<th>Group Training/Education</th>
<th>Professional Training/Education</th>
</tr>
</thead>
<tbody>
<tr>
<td># Agencies Reporting</td>
<td>7</td>
<td>6</td>
<td>5</td>
</tr>
<tr>
<td># Activities Described</td>
<td>5</td>
<td>9</td>
<td>6</td>
</tr>
<tr>
<td># Neighborhoods Targeted</td>
<td>N/A</td>
<td>16</td>
<td>7</td>
</tr>
<tr>
<td>Total Training/Education Hours</td>
<td>N/A</td>
<td>218</td>
<td>42</td>
</tr>
<tr>
<td>Total Served</td>
<td>994</td>
<td>1,620</td>
<td>727</td>
</tr>
<tr>
<td>Gender Breakdown</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>296 (30%)</td>
<td>562 (35%)</td>
<td>52 (7%)</td>
</tr>
<tr>
<td>Female</td>
<td>698 (70%)</td>
<td>670 (41%)</td>
<td>298 (41%)</td>
</tr>
<tr>
<td>Unknown</td>
<td>0 (0%)</td>
<td>388 (24%)</td>
<td>377 (52%)</td>
</tr>
<tr>
<td>Age Breakdown</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0-5</td>
<td>1 (0%)</td>
<td>4 (0%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>6-12</td>
<td>2 (0%)</td>
<td>993 (61%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>13-17</td>
<td>8 (1%)</td>
<td>76 (5%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>18-34</td>
<td>182 (18%)</td>
<td>44 (3%)</td>
<td>51 (7%)</td>
</tr>
<tr>
<td>35-54</td>
<td>370 (37%)</td>
<td>58 (3%)</td>
<td>207 (28%)</td>
</tr>
<tr>
<td>55+</td>
<td>399 (40%)</td>
<td>40 (2%)</td>
<td>92 (13%)</td>
</tr>
<tr>
<td>Unknown</td>
<td>52 (5%)</td>
<td>405 (25%)</td>
<td>377 (52%)</td>
</tr>
<tr>
<td>Race/Ethnicity Breakdown</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>African American</td>
<td>655 (68%)</td>
<td>542 (33%)</td>
<td>278 (38%)</td>
</tr>
<tr>
<td>Caucasian</td>
<td>219 (22%)</td>
<td>197 (12%)</td>
<td>55 (8%)</td>
</tr>
<tr>
<td>Hispanic</td>
<td>102 (10%)</td>
<td>177 (11%)</td>
<td>10 (1%)</td>
</tr>
<tr>
<td>Asian</td>
<td>2 (0%)</td>
<td>4 (0%)</td>
<td>1 (0%)</td>
</tr>
<tr>
<td>Other</td>
<td>15 (2%)</td>
<td>1 (0%)</td>
<td>6 (0%)</td>
</tr>
<tr>
<td>Unknown</td>
<td>1 (0%)</td>
<td>699 (43%)</td>
<td>377 (52%)</td>
</tr>
<tr>
<td>Steps Focus Areas Covered</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Smoking Cessation</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Smoking Prevention</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Exercise/Physical Activity</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Nutrition Education/Counseling</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Weight Management</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Diabetes Screenning</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
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<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Asthma Management</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Other</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Total</td>
<td>7 of 9 Areas</td>
<td>6 of 9 Areas</td>
<td>9 of 9 Areas</td>
</tr>
</tbody>
</table>
SO....HOW ARE WE DOING?
Steps Focus
Area #1
DIABETES
The prevalence of diabetes in Cleveland is **higher** than the state and national rate.

- Cleveland: 10.8%
- Ohio: 6.7%
- USA: 7.5%

Data Sources: 2006 BRFSS, Cleveland, Ohio, US (median)
Adult Diabetes

However, similar to Detroit, Youngstown, Akron, Pittsburgh rates.

- Detroit: 12.3%
- Youngstown: 11.2%
- CLEVELAND: 10.8%
- Akron: 8.0%
- Pittsburgh: 8.0%

Data Sources: 2006 BRFSS, Cleveland, Ohio, US (median)
Adult Diabetics: Who are They?

**Cleveland adults with diabetes tend to be:**

- Female
- Older
- Lower socioeconomic status
- Lower education
- Similar across racial groups
  - 10% white; 11% Af-American; 9% Hispanic + Other
Diabetes Management

- We do have a high prevalence of diabetes.
- But we do a good job on disease management, both with self-care and professional care.
Compared to the US, we do pretty well with regard to diabetes self-care.
Diabetes Management

Health Professional-Care for Diabetes

- Annual Doctor Visit: 91% (Cleveland) vs 89% (USA)
- 2+ Annual A1c Tests: 59% (Cleveland) vs 69% (USA)
- Annual Foot Exam: 77% (Cleveland) vs 69% (USA)
- Annual Dilated Eye Exam: 74% (Cleveland) vs 69% (USA)

With the exception of regular A1c testing, we also do well in comparison to the US when it comes to professional care of diabetes.
Youth Diabetes

- The YRBS only recently began including a question about diabetes; however, it has not proven to be a reliable measure.
• This past year, 437 individuals were trained in diabetes management or education
  – School personnel
  – Health care providers

• Steps provided 2,064 diabetes screenings at events or through community health workers.
Steps Programming Reach - Diabetes Screening and Management

Legend
Diabetes Screening and Management
- Received Programming
- Neighborhood Boundary
- Greater Cleveland Area

Programming Provided at these levels:
- Individual
- Group
- Professional Training
Steps Focus
Area #2
ASTHMA
The prevalence of Asthma in Cleveland is similar to the state and national rate.

- Cleveland: 9.2%
- Ohio: 9.8%
- USA: 8.4%

Data Sources: 2006 BRFSS, Cleveland, Ohio, US (median)
Adult Asthma

And, is similar to Detroit, Youngstown, Akron, Pittsburgh rates.

<table>
<thead>
<tr>
<th>City</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Detroit</td>
<td>10.3%</td>
</tr>
<tr>
<td>CLEVELAND</td>
<td>9.2%</td>
</tr>
<tr>
<td>Pittsburgh</td>
<td>8.8%</td>
</tr>
<tr>
<td>Akron</td>
<td>7.4%</td>
</tr>
<tr>
<td>Youngstown</td>
<td>6.6%</td>
</tr>
</tbody>
</table>

Data Sources: 2006 BRFSS, Cleveland, Ohio, US (median)
Severity of Adult Asthma

- Cleveland adults with asthma appear to suffer from more frequent symptoms than asthmatics across the state
  - 66% vs. 52% of 1+ days of symptoms/month.

- Asthmatics report more routine check up visits (66% vs. 59%) than Ohio adults with asthma, but also more ER visits (36% vs. 16%).
Severity of Adult Asthma

• Cleveland adults with asthma report lower quality of life than those without asthma
  – 27% vs. 10% report 1+ week/past month restricted limitations due to asthma.
The prevalence of current asthma among high school YOUTH in Cleveland is lower than national rates.
Youth Asthma

And lower than self-reported rates in similar cities, such as Detroit and Milwaukee.

- Milwaukee: 19%
- Detroit: 17%
- CLEVELAND: 12%
• 37% of Cleveland youth with current asthma report at least one visit to the ER in the past year due to severe asthma symptoms.
This year, 360 health care professionals, student nurses and community health workers have been trained in asthma screening, prevention and management through Steps to a Healthier Cleveland.
Steps Focus
Area #3
TOBACCO USE

Tobacco use is the #1 preventable cause of disease and death in the U.S.
Youth Tobacco

EVER TRIED A CIGARETTE (even a puff or two?)

53.8%  
CLEVELAND

54%  
USA

Same here as everywhere else

Over half of high school students have tried smoking a cigarette.
Youth Tobacco

CURRENT CIGARETTE USE

10.8% CLEVELAND

23% USA

Reported cigarette smoking is much lower in Cleveland
27.4% of Cleveland high school students report to currently smoke little cigars.
Over 50% of Cleveland adults smoked at least 100 cigarettes in their lifetime.

Over 30% continue to smoke.
The prevalence of cigarette use among Cleveland adults is significantly higher than the county, state and nation.

Data Sources: 2006 BRFSS, Cleveland, Ohio, US (median)
Other Tobacco Products

Adult Tobacco Use In Cleveland

- Cigarettes: 31% (2005), 32% (2006)
- Regular Cigars: 6% (2005), 9% (2006)
- Little Cigars: 7% (2005), 7% (2006)
- At Least 1 Product: 34% (2005), 36% (2006)
## Who Uses What?

### Characteristics of Adult Tobacco Users (2005-2006)

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Cigarette Users</th>
<th>Cigar Users</th>
<th>Little Cigar Users</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average Age (mean years)</td>
<td>43</td>
<td>39</td>
<td>33</td>
</tr>
<tr>
<td>Gender:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>52%</td>
<td>73%</td>
<td>65%</td>
</tr>
<tr>
<td>Female</td>
<td>48%</td>
<td>27%</td>
<td>35%</td>
</tr>
<tr>
<td>Race:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>42%</td>
<td>37%</td>
<td>25%</td>
</tr>
<tr>
<td>Other</td>
<td>58%</td>
<td>63%</td>
<td>75%</td>
</tr>
<tr>
<td>Education (HS or less)</td>
<td>68%</td>
<td>61%</td>
<td>79%</td>
</tr>
<tr>
<td>Employed</td>
<td>56%</td>
<td>62%</td>
<td>56%</td>
</tr>
<tr>
<td>Income (&lt; 25 K)</td>
<td>57%</td>
<td>54%</td>
<td>73%</td>
</tr>
</tbody>
</table>

### Lil’ Cigar Users:
- Younger
- Male
- Minority
- Lower education and income
### Multiple Tobacco Product Use 2005-2006

<table>
<thead>
<tr>
<th>% who also use:</th>
<th>Among Cigarette Users</th>
<th>Among Cigar Users</th>
<th>Among Little Cigar Users</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cigarettes</td>
<td>---</td>
<td>60%</td>
<td>65%</td>
</tr>
<tr>
<td>Cigars</td>
<td>15%</td>
<td>---</td>
<td>57%</td>
</tr>
<tr>
<td>Little Cigars</td>
<td>14%</td>
<td>50%</td>
<td>---</td>
</tr>
</tbody>
</table>

Well over half of all cigar and little cigars users ALSO smoke cigarettes.
Adult Quit Attempts

Past Year Smokers: Smoking Quit Attempts 2005-2006

- Still Smoking: 54%
- No Quit Attempt: 37%
- Not Smoking: 9%

63% of all past year smokers made at least one quit attempt in the past 12 months.
Who Made Quit Attempts

• Very few differences with regard to gender, age, education.
• Black adult smokers more likely to make a quit attempt than white adult smokers (70% vs. 54%).
• Interestingly, individuals at the lowest and highest income levels reported the highest incidence of quit attempts in the past year.
Health Care Influences

Percentage of Quit Attempts by Health Care (2005-2006):

- Have Health Care Coverage: 62% Yes, 64% No
- Have a Regular Primary Care Physician: 64% Yes, 62% No
- *Were Advised to Quit by a Health Professional: 70% Yes, 57% No

* Among those who saw a health care professional in past year.
SECONDHAND SMOKE

• Is smoking permitted in the home?
  – 58% of Cleveland youth say smoking is not allowed
  – 55% of Cleveland adults say that smoking is not allowed

• Among adults smokers with children in the home
  – 23% do not allow smoking in the home.
  – 77% of smokers with children in the home expose their children to the consequences of secondhand smoke.

• Good news:
  – Adults reporting no smoking in the home increased from 51% to 55% between ‘05 and ‘06
Steps Programming

- Active participants of the county-wide effort through the Tobacco Partnership, which has significant programming throughout Cleveland.
- This past year, 67 Cleveland employees participated in the Freedom from Smoking program.
- 75 individuals were referred to the QuitLine.
- Played a significant role in promotion of the CMSD tobacco free school policy with school and campus signage.
Steps Focus

Area #4

OBESITY
Adult and Youth Obesity

**Definition:** Both adult and youth classifications are based on Body Mass Index (BMI). Youth are gender and age specific.
The prevalence of adult obesity in Cleveland is significantly higher than both that of the state and the nation.

- Cleveland: 33.7%
- Ohio: 28.4%
- USA: 25.1%

Data Sources: 2006 BRFSS, Cleveland, Ohio, US (median)
Adult Obesity

And, with the exception of Detroit, higher than most of our comparable cities.

<table>
<thead>
<tr>
<th>City</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Detroit</td>
<td>34.5%</td>
</tr>
<tr>
<td>CLEVELAND</td>
<td>33.7%</td>
</tr>
<tr>
<td>Akron</td>
<td>27.8%</td>
</tr>
<tr>
<td>Baltimore</td>
<td>25.8%</td>
</tr>
<tr>
<td>Pittsburgh</td>
<td>24.3%</td>
</tr>
</tbody>
</table>

Data Sources: 2006 BRFSS, Cleveland, Ohio, US (median)
Profile of Adult Obesity

- Female, older, African-American, less affluent
- Similar across education level
- 75% report actively trying to lose weight
  - Many with dual strategy of diet and exercise
- But report less moderate or vigorous exercise than non-obese adults (40% vs. 52%)
OBESITY: COMORBIDITIES

The links to chronic disease are undeniable.

Data Sources: 2005-2006 BRFSS, Cleveland.
Obesity and Exercise

The obvious: overweight and obese adults are more sedentary and less active than normal weight adults.

- 3+ hrs/day of blue screen (TV, computer, video)
- Adequate vigorous physical activity
  - Intensive exercise: 20 min/day, 3 days/wk

<table>
<thead>
<tr>
<th>Normal</th>
<th>Overweight</th>
<th>Obese</th>
</tr>
</thead>
<tbody>
<tr>
<td>68%</td>
<td>40%</td>
<td></td>
</tr>
</tbody>
</table>
• As weight goes up, confidence that one can be physical active goes down.

• However, normal and overweight adults are more similar in their confidence.

• Obese adults are less likely to use city recreation center, bike paths/walking trails and playground/parks than normal or overweight adults.

• However, they are more likely to take a nutrition class or participate in an organized health promotion activity.

• Less than half (49%) of all obese adults who saw their doctor in the past year report that their HCP advised them to lose weight.
## Weight Management: Adults and Youth

### I’m trying to....

<table>
<thead>
<tr>
<th></th>
<th>Adults</th>
<th>Youth</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lose weight</td>
<td>47%</td>
<td>37%</td>
</tr>
<tr>
<td>Maintain weight</td>
<td>33%</td>
<td>23%</td>
</tr>
</tbody>
</table>

### Weight management efforts

<table>
<thead>
<tr>
<th></th>
<th>Adults</th>
<th>Youth</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diet</td>
<td>24%</td>
<td>31%</td>
</tr>
<tr>
<td>Exercise</td>
<td>13%</td>
<td>50%</td>
</tr>
<tr>
<td>Diet and Exercise</td>
<td>52%</td>
<td>-----</td>
</tr>
</tbody>
</table>
The prevalence of obesity among high school youth in Cleveland is slightly higher than for the state and the nation.
Youth Obesity

But somewhat less than comparable cities, such as Detroit and Milwaukee.

- Detroit: 20%
- Milwaukee: 17%
- CLEVELAND: 16%
SO WHAT ARE WE DOING ABOUT IT?
Steps Focus
Area #5
NUTRITION
• How many servings of fruits and vegetables should an adult get everyday?

a. Two
b. Three
c. Five
d. Seven
e. Ten

Only 23% of Cleveland adults identified the correct answer.

HOW DID YOU DO?
Knowledge -> Action

• Only 21% of Cleveland adults and 19% of high school youth report meeting the recommended amount of fruits and vegetables (5+ day).

• However, we are not alone:

<table>
<thead>
<tr>
<th></th>
<th>OHIO</th>
<th>U.S.A.</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADULTS</td>
<td>23%</td>
<td>23%</td>
</tr>
<tr>
<td>YOUTH</td>
<td>---</td>
<td>20%</td>
</tr>
</tbody>
</table>
Youth Nutrition

• When asked, “when I want junk food at school there is plenty available”

61% AGREE

• When asked, “when I want fresh F&V, there are plenty available”

65% AGREE!

14% drink 4 or more a day!
Steps Programming: Nutrition

- Trained 190 individuals in the DIET (Dieticians Involved in Education and Training) Program.
- Grab-n-Go Program, 1125 students were PER DAY
- Served 200 people in the Step-n-Shop Program.
- 110 people participated in the Lunch-n-Learn Program.
- 476 youth participated in the summer nutrition education programs.
- Corporate challenges
Steps Focus
Area #6

PHYSICAL ACTIVITY
Physical Activity: Definitions

FOR ADULTS:

• Moderate Activity
  – brisk walking, bicycling, vacuuming, gardening, or anything else that causes some increase in breathing or heart rate.
  – Adequate: At least 30 min, 5 days a week

• Vigorous activity
  – running, aerobics, heavy yard work, or anything else that causes large increases in breathing or heart rate
  – Adequate: At least 20 min, 3 days a wk
Adult Physical Activity

- **48%** of adults report that they get adequate moderate or vigorous physical activity.
- **27%** report getting adequate vigorous physical activity.

<table>
<thead>
<tr>
<th></th>
<th>OHIO</th>
<th>U.S.A.</th>
</tr>
</thead>
<tbody>
<tr>
<td>MODERATE</td>
<td>49%</td>
<td>49%</td>
</tr>
<tr>
<td>VIGOROUS</td>
<td>27%</td>
<td>27%</td>
</tr>
</tbody>
</table>

Data Sources: 2006 BRFSS, Cleveland, Ohio, US (median)
Sedentary Behaviors

• Blue screen time: TV, computers, video games.
• 63% of Cleveland adults report three or more hours of blue screen time each day.
DEFINITION:

• Any kind of PA that increases the heart rate and makes one breathe hard some of the time.

• Adequate: 60 min/day on 5 or more days/week
Youth Physical Activity

• 35% of Cleveland high school students report that they get adequate physical activity.

• Similar to national rates; better than some comparable cities.
  – U.S. rate: 36%
  – Milwaukee: 24%
  – Chicago: 25%
  – Baltimore: 25%
Sedentary Behaviors

• **27%** of Cleveland youth report **three or more** hours of **VIDEO GAME** use each day.

• **57%** of Cleveland youth report **three or more** hours of **TV** watching each day.

• **67%** report **three or more** hours of **VIDEO GAME** use **OR** **TV** watching each day!
Sports Participation

★ Nearly half (46%) of high school youth participated on one or more sports team in the last year....

★ But, we’re lower than state and national estimates.

Ohio 58%
USA 56%
P.E. Class in School

- 26% of Cleveland high school students reported having **AT LEAST ONE** Physical Education class in the last week.

- Detroit: 42%; Milwaukee: 59%

- HP2010: 50% of youth to receive DAILY physical education!!!
Steps Programming in P.A.

• Nearly **200** CMSD students from 13 schools participated in the Marathon Program.
  – This year, there will be nearly 500 students from twenty schools!

• **569** people have participated in the Walk A Hound, Lose a Pound program.

• **7** neighborhood walking clubs established; neighborhood walking maps.

• **371** people participated in the Step Up to the Plate challenge.
Steps Programming Reach - Nutrition, Weight, Physical Activity

Legend
- Received Programming
- Neighborhood Boundary
- Greater Cleveland Area

0 2 4 6 8 Miles

[Map showing different areas of Cleveland with some shaded in green indicating received programming.]
### 2006-2007 Steps Program Year

**Number of Individuals Reached Through:**

<table>
<thead>
<tr>
<th>Type of Activity</th>
<th>Hours</th>
<th>Individuals Reached</th>
</tr>
</thead>
<tbody>
<tr>
<td>INDIVIDUAL TRAINING</td>
<td></td>
<td>4,490</td>
</tr>
<tr>
<td>GROUP TRAINING</td>
<td></td>
<td>3,878</td>
</tr>
<tr>
<td>PROFESSIONAL TRAINING</td>
<td></td>
<td>722</td>
</tr>
<tr>
<td>RESOURCE DEVELOPMENT</td>
<td></td>
<td>1,912 HOURS 600,000</td>
</tr>
<tr>
<td>MEDIA DEVELOPMENT</td>
<td></td>
<td>450 HOURS 42,000</td>
</tr>
<tr>
<td>SPECIAL EVENTS</td>
<td></td>
<td>68 EVENTS 8,311</td>
</tr>
</tbody>
</table>
SUMMARY

• Thank you, Steps for helping us, as a community, take our “first step” to having real-time local youth and adult health behavior data.

• We now have a method for tracking our successes (and failures) as we work together to improve the health and lives of Cleveland children, youth and adults.
Steps to a Healthier Cleveland

Youth Risk Behavior Survey

2007

Helping Clevelanders live longer, better and healthier lives

NOW AVAILABLE!!
• CASE Center for Adolescent Health
   – www.case.edu/med/adolescenthealth
• CASE Center for Health Promotion Research
   – www.case.edu/affil/healthpromotion
• OTREC (tobacco-specific)
   – www.otrec.org
• CDPH/CCBH/Case - LocalHealth
   – www.ClevelandHealth.info