

Evidence-Based Population Health Improvement Plan: Obesity in Minneapolis

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Community evaluation

Major Population Health Issue in Minneapolis

The high incidence of obesity among Minneapolis inhabitants is the biggest public health problem identified by the statistics. Obesity affects a considerable section of the US population (41.9%), therefore Minneapolis is likely to encounter comparable difficulties. Obesity is linked to a variety of chronic illnesses, including cardiovascular disease, type 2 diabetes, stroke, cancer, and hypertension, and has far-reaching repercussions for people and communities (Chauvet-Gelinier et al., 2019). Environmental variables have a significant impact on the health of Minneapolis inhabitants, especially their likelihood of obesity. The availability and accessibility of nutritional foods, such as fresh fruits and vegetables, might affect dietary choices and effect obesity rates. Food deserts, or areas with limited availability to cheap nutritious food alternatives, may lead to bad eating patterns and greater obesity rates. Another element is the architecture of neighborhoods, which may encourage or discourage physical activity by providing sidewalks, parks, and bike lanes.

Obesity rates are lower in communities with safe and accessible exercise facilities and active transportation choices, such as walking or bicycling. Obesity is intimately connected to socioeconomic status. Income and education disparities may have an impact on access to healthcare, housing quality, and physical exercise possibilities. Access to inexpensive, nutritious food and services for living a healthy lifestyle may be more difficult for low-income groups in Minneapolis. Cultural norms and societal factors may alter people's food and physical activity behaviours and choices (Chauvet-Gelinier et al., 2019). Obesity rates may be increased by community norms that prioritize unhealthy food alternatives or discourage physical exercise.

Meeting outcomes

To mitigate the incidence of obesity and enhance the overall health and well-being of Minneapolis people. This may be accomplished by increasing access to nutritious foods by making more inexpensive, fresh, and nutritious meals available in marginalized communities via projects such as community gardens, farmers' markets, and mobile markets. Heslehurst et al. (2019) states that promoting healthy food alternatives and incentivize the creation of grocery shops or supermarkets in food deserts may help collaborate with local companies and groups. Nutrition education initiatives are also being implemented to enhance knowledge about healthy eating habits and enable people to make educated food choices. Create and maintain safe and accessible recreational places, such as parks, playgrounds, and walking/biking routes, to improve the built environment. Collaborate with schools, community centers, and companies to promote physical activity programs and initiatives such as walking or bicycling to school or work, as well as workplace wellness programs.

Offering resources and assistance to community-led physical activity programs such as fitness classes, sports leagues, and walking groups. Advocating for policies that alleviate socioeconomic inequities and promote health equality, such as raising the minimum wage and providing affordable housing access. Increasing access to healthcare services, such as preventative care, nutrition counseling, and obesity control programs, in marginalized populations. Encourage efforts that give financial aid for the purchase of nutritious foods, such as SNAP (Supplemental Nutrition aid Program) incentives for fruits and vegetables. Developing and implementing comprehensive obesity prevention and intervention programs in collaboration with community-based groups, healthcare professionals, schools, local businesses, and lawmakers. Community involvement and outreach are carried out to ensure that programs and activities are culturally acceptable, inclusive, and responsive to the needs of varied people.

When implementing a population health improvement plan for obesity in Minneapolis, several potential barriers may arise. It is important to anticipate and address these barriers to ensure the effectiveness of the interventions. Some potential barriers include: Certain neighborhoods within Minneapolis have limited access to resources such as healthy food options, recreational facilities, and healthcare services. Economic disparities and geographic factors can contribute to these inequities. Addressing this barrier requires targeted interventions to improve access and overcome transportation and financial constraints. Socioeconomic status is strongly linked to obesity rates. Lower-income individuals may face financial constraints that limit their ability to afford healthy food options or participate in recreational activities. Addressing this barrier requires targeted strategies, such as subsidies for healthy food, workplace wellness programs, and community-based initiatives that minimize financial barriers to physical activity. Limited health literacy and lack of awareness about the impact of obesity on health can be barriers to behavior change. Providing clear, culturally appropriate health education materials and targeted outreach campaigns can help address this barrier and empower individuals to make informed decisions about their health.

Measuring outcomes

When evaluating the outcome criteria for the population health improvement plan for obesity in Minneapolis, measuring the change in the prevalence of obesity within the target population of Minneapolis over a specified period. This can be assessed using reliable data sources such as population surveys, health records, or surveillance systems. Assess changes in physical activity levels among Minneapolis residents. This can be evaluated using self-reported surveys, wearable devices, or fitness trackers, and should include indicators such as frequency, duration, and intensity of physical activity. Measure improvements in access to affordable and

nutritious food options in underserved neighborhoods. This can include indicators such as the opening of new grocery stores, increased availability of fresh produce, or the establishment of community gardens and farmers' markets. Assess the implementation and impact of policy changes or environmental modifications aimed at promoting healthier behaviors and reducing obesity rates including evaluating the adoption and enforcement of zoning regulations, marketing restrictions, or other policies that influence food environments and physical activity opportunities (Jastreboff et al., 2019). Measure the level of community engagement and collaboration throughout the implementation of the plan. This can involve tracking the number of community partnerships established, participation rates in community programs, and qualitative assessments of community feedback and involvement. Evaluate the sustainability of the interventions and their long-term impact on obesity rates and related health outcomes. This can include monitoring the continuation of initiatives beyond the initial implementation phase and tracking outcomes over an extended period. These outcome criteria provide a comprehensive assessment of the effectiveness and impact of the population health improvement plan for obesity in Minneapolis. By evaluating these measures, it will be easy for the stakeholders can gauge the progress made, identify areas of success, and make informed decisions for further intervention and improvement

Community plan

Relevant community stakeholders may include local government officials and agencies, community-based organizations, healthcare providers, schools and educational institutions, local businesses and employers, faith-based organizations, community leaders, residents, and advocacy groups in the implementation of the Population Health Improvement Plan for obesity in Minneapolis. Engaging these stakeholders is essential for collaboration, resource mobilization,

community support, and ensuring that the interventions are tailored to the community's particular requirements and cultural context. Prioritizing data privacy and confidentiality is essential for developing a communication strategy that takes into account cultural and ethical norms. According to Rashid & Sipahi (2021), confidentiality can be accomplished by obtaining participants' informed consent, anonymizing data when presenting findings, and adhering to applicable data protection regulations. Transparency regarding data collection, storage, and use is crucial, as are plain explanations of how the privacy rights of individuals are protected. To ensure comprehension of intricate medical terms and concepts, regardless of language, disability, or education level, it is essential to use uncomplicated language. Provide visual aids, such as infographics or diagrams, to facilitate comprehension. Consider the linguistic and cultural diversity of the community when implementing culturally appropriate and inclusive communication strategies. Incorporate multiple communication channels, such as community meetings, educational seminars, multilingual materials, accessible formats (e.g., braille, large print), and online platforms with language translation capabilities. Employing community health workers or interpreters can also facilitate effective communication and ensure that all community members have access to and can comprehend the shared information. Regular feedback mechanisms, such as surveys or focus groups, can also enable community members to provide input and assist with customizing the communication strategy to their particular requirements and preferences.

Value & Relevance of Evidence

The value and relevance of evidence and technology resources as the basis of a population health improvement plan are significant for multiple reasons. Firstly, evidence

provides a factual and objective basis for understanding the community health concern being addressed, such as obesity in this case. It helps stakeholders gain insights into the prevalence, risk factors, and associated health outcomes, enabling them to prioritize interventions and allocate resources effectively. Each piece of evidence, whether it is environmental and epidemiological data, prevalence statistics, or evidence linking obesity to health concerns like cardiovascular disease and diabetes, is valuable and appropriate as it informs the goal of improving community health by highlighting the scope, impact, and interconnectedness of the problem (Chauvet-Geliiier et al., 2019). By relying on this evidence, interventions can be tailored to target specific factors contributing to obesity, address related health concerns, and create meaningful and sustainable improvements in the health of the community. Additionally, technology resources play a crucial role by facilitating data collection, analysis, and communication, allowing for real-time monitoring, evaluation, and collaboration among stakeholders. They enable the implementation of evidence-based interventions, enhance efficiency, and foster innovation in addressing community health concerns.

References

- Chauvet-Gelinier, J. C., Roussot, A., Cottenet, J., Brindisi, M. C., Petit, J. M., Bonin, B., ... & Quantin, C. (2019). Depression and obesity, data from a national administrative database study: Geographic evidence for an epidemiological overlap. *PloS one*, 14(1), e0210507. <https://doi.org/10.1371/journal.pone.0210507>
- Heslehurst, N., Vieira, R., Akhter, Z., Bailey, H., Slack, E., Ngongalah, L., ... & Rankin, J. (2019). The association between maternal body mass index and child obesity: A systematic review and meta-analysis. *PLoS medicine*, 16(6), e1002817. <https://doi.org/10.1371/journal.pmed.1002817>
- Jastreboff, A. M., Kotz, C. M., Kahan, S., Kelly, A. S., & Heymsfield, S. B. (2019). Obesity as a disease: the obesity society 2018 position statement. *Obesity*, 27(1), 7-9. <https://doi.org/10.1002/oby.22378>
- Rashid, M. H., & Sipahi, E. (2021). The importance of quantitative research in language testing and assessment: in the context of social works. *Linguistics and Culture Review*, 5(S1), 317-330. <https://doi.org/10.21744/lingcure.v5nS1.1413>