

COMMUNITY FEEDBACK ON MDWHC STRATEGIES

Summary from Town Hall Meetings and Online Survey

In February 2007, the MDHWC adopted a set of draft priorities that were presented to the community for public input during five regional townhall meetings, as well as via a web-based online survey. The draft priorities included strategies in three focus areas-- worksites, schools/child care facilities, and public sector policies and programs. Questions presented within the online survey, and during the town hall meetings, focused on obtaining feedback on health and wellness priorities in each priority area, as well as reasons why they feel people in general are physically inactive and choose to eat unhealthy. A total of 142 people responded to the online survey and 260 participated in the town hall meetings. Not all participants responded to every question.

Demographic Make-up of Participants

Eighty-three percent of participants were Caucasian (non-Hispanic). The race/ethnicity of others was: African American (7%), Hispanic/ Latino (4%), Asian/ Pacific Islander (2%), American Indian (1%), and Other (2%).

Thirty-six percent of participants live in Denver County compared with 21% from Jefferson County, 18% Arapahoe County, 8% Douglas County, 5% Broomfield County, 4% Adams County, 3% Boulder County and 4% elsewhere.

When asked what was their primary perspective when providing feedback, the largest group, participants identified their perspective as follows:

- 21% - health providers/public health professional
- 14% - nonprofit organization representative
- 13% tied as educators or government employee/elected official
- 11% - community member
- 6% tied as business person or parent
- 5% tied as employee or advocate
- 4% - employer
- 3% - student.

Considering that perspective the largest percentage again represented Denver County (31%) with 15% of participants tied as representing Jefferson County or multiple counties..

Barriers to Physical Activity and Healthy Eating

Physical Activity: “Lack of time” (28%) and “not a priority for individuals”(28%) tied as the top two reasons people are not physically active according to people at the town hall meetings. “Lack of knowledge” was a distant third with 9% of the vote. When asked to identify the three top barriers, 74% of online survey respondents named “lack of time”, 38% said “not a priority at worksites”, and 37% said “lack of social support.”

Healthy Eating: The number one reason why people do not eat healthy is a “preference for less healthful foods”, according to 29% of town hall participants “Affordability of produce/nutritious foods” was identified by 17% as the second largest reason for not eating healthy foods, followed by 16% who believe it is “not a priority at home”. Those were also the top vote recipients, in the same order, for online survey respondents.

Top Strategic Priorities

In each of the three focus areas, the MDHWC had identified two or more priority strategies in the February draft. Each participant was asked to rank their top health and wellness priorities in schools, worksites, public sector (local government and state government).

Schools/Child Care Facilities: By far the top strategy in this focus area was “incorporate K-12 PE, physical activity, and nutrition education” with 73% choosing it as their top priority. Twelve percent selected “food and beverages meet or exceed healthy standards”, and as their top priority with “secure funding to maintain and expand after school physical activity” receiving 7% of the top priority votes.

Worksites: Of the two worksite MDHWC strategies, 62% of participants identified “comprehensive worksite wellness programs, including senior management support, targeted interventions, incentives, supportive environment, etc” as their top worksite priority.

Public Sector-Local Government: Forty-eight percent identified “land use plans and policies, including transportation funding, supporting active community environments” as their number one choice in this category. “Community-driven initiatives with targeted policies and programs” was second at 24% and “access to healthy and affordable food” was third with 15% of the first place votes.

Public Sector-State Government: Thirty-eight percent selected “develop and adopt “Complete Streets” standards, e.g. sidewalks, bicycle lanes” as their top choice, “pilot program to encourage healthy lifestyles for Medicaid recipients” received 24% of first place votes and “transportation funding to benefit pedestrians, bicycles, wheelchairs, strollers” was third with 23% of first place votes.