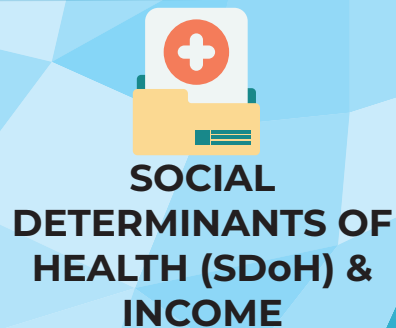




## WHY DOES OUR REGION HAVE HIGH RATES OF **CHRONIC DISEASE?**

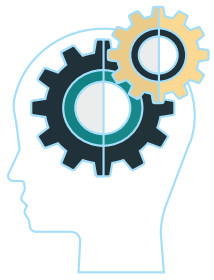


## WHY IS THIS IMPORTANT?

Chronic diseases such as heart disease, cancer, and diabetes are the leading causes of death and disability in the United States. They are also leading drivers of the nation's \$4.1 trillion in annual health care costs (CDC).



## BEHAVIORAL



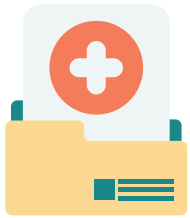
- No regular physician
- Fear of visiting medical provider
- People ignore symptoms
- Delay in prevention starts after symptoms
- Lack of support when adopting healthier habits
- Behavioral changes are challenging to maintain
- Need for individualized counseling (self-awareness, pattern interruption, sustainability)
- Adverse Childhood Experiences (ACES)
- Denial of the problem
- Self-care is hard, takes a long time, and competes with other priorities
- Lack of knowledge for prevention/ behaviors to change

## FOOD



- Limited means to access healthy food options
- Access and affordability of fresh produce
- Produce can be expensive
- Inadequate community, worksites, and family support for breastfeeding
- Poor nutrition
- Farm Bill
- Ingredients in processed foods (govt subsidized corn)
- Marketing of sugar sweetened beverages
- Michigan Food Charter not known
- Culture of fast and easy foods ingrained in families
- Cooking is hard and time consuming

## SOCIAL DETERMINANTS OF HEALTH (SDoH) & INCOME



- Unstable living conditions/trouble developing a routine
- Lack of transportation to groceries, medications, appointments
- Other living costs rising which impact healthy decisions
- No healthcare coverage
- Inability to pay for prescriptions
- No connections to ask for assistance
- Implicit bias among healthcare providers
- Income disparities, ALICE

## CULTURAL FACTORS



- Prescribing medicine vs. other alternatives
- No follow-up when medical instructions
- Lack of consistent resources
- Lack of supportive systems where people spend time outside of home
- Community buy-in to strategies
- PSE change strategies aren't fun
- Environmental changes and global warming
- Disconnect among elected officials between policy development and implications on health outcomes

## ACCESS TO HEALTH CARE



- No primary doctor/regular visits
- Lack of access to specialty providers (few peds specialists in area)
- Lack of preventative care
- Lack of knowledge of health care providers
- People can't afford healthcare costs
- Lack of motivational interviewing skills when providing health education
- No licensure for RDs in state
- Do providers address obesity "head-on", counseling patients for change?

## LARGE & GROWING AGING POPULATION



- Obesity and high blood pressure
- Lack of vision and dental coverage
- Infectious diseases treatable or preventable

## RURILITY



- Transportation to physician visits
- Limited access to providers
- Lack of screening resources in rural areas
- Rural geography doesn't lend itself to easily accessible exercise