

# 3-4-64 IN OKLAHOMA

## 3 BEHAVIORS

### TOBACCO USE



1 in 5  
adults  
currently  
smoke

### POOR NUTRITION



1 in 2  
adults  
consume <1  
fruit/day

1 in 5  
adults  
consume <1  
vegetable  
/day

### SEDENTARY LIFESTYLE



1 in 2  
adults do not meet  
physical activity  
recommendations

## 4 CHRONIC DISEASES

### CARDIOVASCULAR DISEASE

13,279 DEATHS



### CANCER

8,422 DEATHS



DIABETES  
1,340 DEATHS

CHRONIC LOWER  
RESPIRATORY DISEASES

3,013 DEATHS



## 64% OF OKLAHOMA DEATHS

Over 40,000 annual deaths  
from all causes in Oklahoma

3 in 5

Oklahomans die from a  
3-4-64 chronic disease



# WHAT WE DO & WHY WE DO IT



## TRACK

Chronic diseases and their risk factors through surveillance and evaluation to guide, prioritize, deliver, and monitor public health programs.



## PARTNER

With communities, tribes, and organizations through technical assistance and consultation to make the healthy choice the easy choice while promoting health equity.



## SUPPORT

Health care to deliver quality clinical services that prevents chronic diseases by managing risk factors and detect diseases early, especially among disparate groups.



## CONNECT

Community programs to clinical services that help people prevent and manage their chronic diseases, with guidance from their physicians.

## OUR IMPACT



During state fiscal year 2007-2017, there has been a 22.7% decline in cigarette consumption (307.2 stamps to 237.4 stamps).



Since the introduction of the GO NAP SACC program in 2015, 97 Early Child Care & Education providers across the state enrolled to complete an environment and policy assessment to increase health promoting practices.



An ever increasing number of organizations across Oklahoma are committed to make health and wellness a priority as indicated by a 27% increase in the percent of Certified Healthy Oklahoma Excellence level certifications in the last five years.



In 2018, the Choctaw Nation Health Services clinic in McAlester, in collaboration with OSDH and ASTHO, achieved their goal of improving hypertension control by 10% through team-based care strategies, including pharmacist counseling and management programs.



Oklahoma has seen an increase in Diabetes Self-Management Education & Support (DSMES) programs from 39 in 2013 to 53 in 2018, a 36% increase. These programs have provided support to 1,500 diabetic individuals during 2015-2017.



Since 1994 the Take Charge! program has served 73,157 women, diagnosed 590 breast cancer and 40 cervical cancers, and 12,648 women received referral and/or followed up through the Program.

## OUR OBJECTIVES



Reduce adult smoking prevalence from 20.1% in 2017 to 15.8% in 2022.



Reduce annual per capita consumption of cigarettes from 60.5 packs per capita in 2017 to 47.5 packs per capita in 2022.



Reduce adult obesity prevalence from 36.5% in 2017 to 35% in 2022.



Increase the percent of adults who engage in physical activity for at least 150 minutes per week from 42.5% in 2017 to 50% in 2022.



Increase the proportion of schools across the state that do not sell less healthy foods and beverages from 53.5% in 2016 to 76% in 2022.



Decrease cardiovascular disease death rate from 297.9 per 100,000 in 2017 to 285.5 per 100,000 in 2022.



Increase participation of Oklahomans with diabetes in ADA recognized or AADE accredited DSMES programs from 4.4% annually to 5% annually by 2022.



Decrease cancer death rate from 177.3 per 100,000 in 2017 to 168 per 100,000 in 2022.

# Contact us for more information

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