



CWHS

Data Points

RESULTS FROM THE 2008 CALIFORNIA WOMEN'S HEALTH SURVEY

Nearly half of California women ages 18 to 65 are overweight or obese.¹ Two-thirds of California women in this age group are employed fulltime (56.3 percent) or part-time (11.1 percent).¹ Good nutrition and physical activity are the cornerstones of reaching and maintaining a healthy weight. However, for many adults, lack of availability of healthy food when they are away from home² or inadequate time to be physically active are barriers to achieving those behaviors.³ The *Network for a Healthy California (Network)*, a California Department of Public Health program, is the largest provider of Supplemental Nutrition Assistance Program nutrition education (SNAP-Ed) in the nation.⁴ The *Network's* Fruit Vegetable and Physical Activity Campaign's Worksite Program works with employers of low-wage workers statewide to build supportive work environments to improve access to healthy foods and physical activity at workplaces.

A core question in the 2008 California Women's Health Survey (CWHS) was, "Are you currently: employed full time, employed part time, self-employed, out of work for more than 1 year, out of work for less than 1 year, homemaker, student, retired, or unable to work?" The women who reported working full or part time (N = 2,161) were asked, "Does your employer provide any physical fitness benefits, such as exercise classes, release time for physical activity, walking clubs, stairwell promotions, or discount health club memberships?" and "Does your employer provide any nutrition-related benefits, such as nutrition classes, fruit and vegetable snacks, healthy foods

during meetings, healthy foods in vending machines, and discounts on healthy food choices in the worksite cafeteria?" In both cases, women who answered "yes" were asked if they had used the benefits in the past 12 months. Women were also asked standard sociodemographic questions as well a series of questions about how many days a week they took part in moderate or vigorous physical activity and how much time they spent doing each. Self-reported height and weight were used to calculate body mass index (BMI), a density measure used to define body weight status.⁵ The relationship between sociodemographic variables and having and/or using nutrition/physical activity benefits was examined for statistical significance using bivariate statistics. Responses were weighted in these analyses by age and race/ethnicity to reflect the 2000 California adult female population.

- Of the women who worked, 25.0 percent reported their employer provided physical fitness (PF) benefits and 24.5 percent reported their employer provided nutrition benefits.
- The highest rates of both PF benefits and nutrition benefit availability in the workplace were reported by African American/Black women (39.9 percent and 35.0 percent, respectively), compared to White women (26.9 percent and 26.0 percent, respectively), Asian/Other women (24.2 percent and 23.4 percent, respectively), and Hispanic women (19.5 percent and 20.7 percent, respectively). While the availability of

Nutrition and Physical Activity Benefits in the Workplace Among California Women, 2008

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Public Health Message: *Sociodemographic disparities were identified regarding access to worksite wellness programs, including those related to improved consumption of fruit and vegetables. When physical fitness benefits were available, low-income women used them more than other women. Worksite programs that support environments where workers have greater access to healthy foods and physical activity can enhance California's obesity prevention efforts.*

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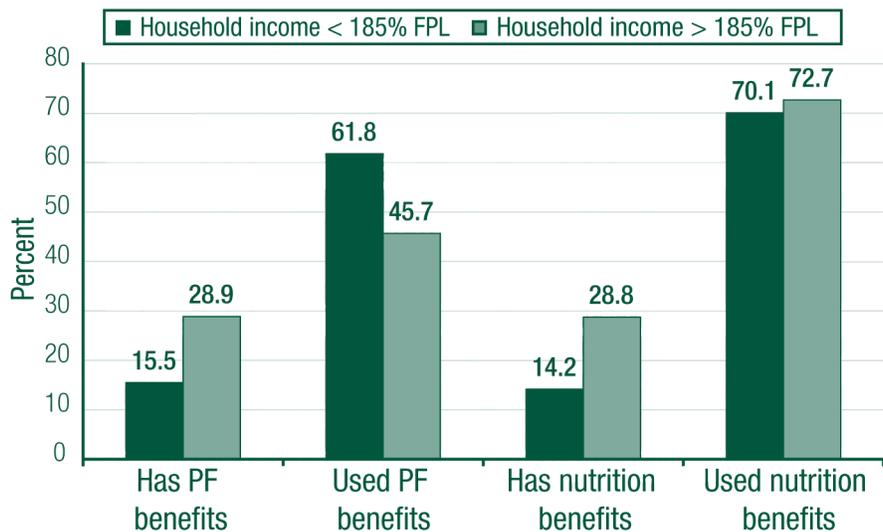
benefits varied by the race/ethnicity of the respondent ($P < .01$ for physical activity; $P < .05$ for nutrition), there were no significant differences in usage rates among the groups.

- Availability of both PF benefits and nutrition benefits in the workplace was associated with higher educational attainment. Reported availability was highest among college graduates (30.1 percent and 29.8 percent, respectively) compared to women with some college (23.6 percent and 22.6 percent, respectively), high school graduates (21.3 percent and 20.4 percent, respectively), and women with less than a high school education (15.2 percent and 15.5 percent, respectively). The reported availability of these benefits varied by educational attainment ($P < .001$ for both PF and nutrition). However, there were no significant differences in the proportion of respondents who utilized these benefits.

- Poverty-related factors were highly associated with access to healthy benefits (see Figure 1). Among women from households with income reported as less than or equal to 185 percent of the Federal Poverty Level (FPL), 15.5 percent reported that they had PF benefits compared to 28.9 percent for women with household income above that level ($P < .001$). Half as many of the women whose household income was less than 185 percent of the FPL reported nutrition benefits than the higher income women (14.2 percent versus 28.8 percent; $P < .001$).
- Lower-income women who had PF benefits were more likely to have used them than higher income women (61.8 percent and 45.7 percent, respectively; $P < .05$). There was no difference in usage rate for nutrition benefits.
- When SNAP participants (130 percent < FPL) had access to physical fitness benefits at work, they were significantly

Figure 1

California Women Who Had Physical Fitness (PF) and Nutrition Benefits at Work in the Past 12 Months and Used Them, by Federal Poverty Level (FPL)



Source: California Women's Health Survey, 2008

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more likely to have used them (89.1 percent) than non-SNAP women from equal income households (58.0 percent), women from the 131 percent to 185 percent of the FPL income households (51.3 percent), or women from households with income greater than 185 percent of the FPL (45.8 percent; $P < .05$). However, this relationship was not found for nutrition benefits.

- Women whose employers provided nutrition benefits were more likely than women whose employers did not, to report eating at least five servings

of fruit and vegetables daily (32.3 percent versus 21.9 percent; $P < .001$). Likewise, women whose employers provided PF benefits were also more likely to report eating at least five servings of fruits and vegetables daily (31.6 percent versus 23.6 percent; $P < .01$).

- Neither the presence nor the usage of either of the two types of benefits was significantly related to being obese or overweight, nor were they related to meeting the Centers for Disease Control recommendation of 150 minutes of physical activity a week.

- 1 University of California, Los Angeles, Center for Health Policy Research. California Health Interview Survey 2007. AskCHIS Internet data query system. Los Angeles, CA. Accessed October 1, 2009.
- 2 Oppen M, Sugerman S, Foerster SB. Fruit and vegetable consumption in California adults: Ten-year highlights from the California dietary practices surveys, 1989-1999. Sacramento (CA): California Dept of Health Services, Cancer Prevention and Nutrition Section, 2002.
- 3 Sugerman SB, MKNelly B, Mitchell P. *Achievement of Recommended Levels of Physical Activity Among California Women, 2004*. Sacramento, CA. Dept of Health Care Services and California Dept of Public Health, Office of Women's Health: *Data Points, Results from the California Women's Health Survey: vol 4(23)*. <http://www.dhcs.ca.gov/dataandstats/reports/Documents/OWHReports/DataPoints2003-2004/OWH-DP24.03-04.pdf>. Published Summer 2006. Accessed October 1, 2009.
- 4 In 2009, the name of the federal Food Stamp Program was changed to the Supplemental Nutrition Assistance Program (SNAP). The qualifying income level for SNAP is household income no higher than 130 percent of the FPL.
- 5 BMI definitions: healthy weight (18.5-24.9), overweight (25-29.9), obese (> 30)

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