

# SHIP: The Statewide Health Improvement Program

*Working to reduce chronic disease in Minnesota*

The goal of the Statewide Health Improvement Program (SHIP) is to help Minnesotans live longer, better, healthier lives by reducing the burden of chronic disease.

SHIP is modeled after Steps to a HealthierUS,<sup>1</sup> a federal initiative tested in four Minnesota communities. Building on the success of Steps, SHIP will use effective, evidence-based strategies to create changes in policies, environments and systems to support healthy behaviors in the population.

## The Role of SHIP in Health Care Reform

SHIP is an integral component of an overall health care reform initiative passed during the 2008 Legislative session. Minnesota's health reforms aim to simultaneously improve the health of Minnesotans, improve the patient experience and address the spiraling costs of health care in our state.

SHIP interventions are designed to address the top three preventable causes of illness and death in the United States by:

- Reducing the percentage of Minnesotans who use or are exposed to tobacco.
- Reducing the percentage of Minnesotans who are obese or overweight through better nutrition and increased physical activity.

## What is Taking Place?

After a competitive process, state grants will be awarded to community health boards (CHBs) and tribal governments across Minnesota. Grantees will utilize policy, systems and environmental change in four settings:

- Schools
- Communities
- Worksites
- Health care systems

## The Current Situation

Tobacco use and exposure and obesity caused by physical inactivity and poor nutrition are leading causes of chronic disease.

Unfortunately, unhealthy behaviors are common in Minnesota. According to the Behavioral Risk Factor Surveillance System (BRFSS)<sup>2</sup>:

- 38 percent of adults are classified as overweight based on Body Mass Index (BMI).
- 25 percent adults are classified as obese based on BMI.
- Only 24 percent of adults consume five or more fruits and vegetables per day.
- Only 51 percent of adults get 30 or more minutes of moderate physical activity five days per week.
- 33 percent adults have been told by a health professional they have high cholesterol.
- 18 percent of adults are current smokers.

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The result is that many Minnesotans live with chronic diseases:

- 23,520 new cases of cancer were identified in 2006.
- In 2006 139,000 Minnesotans were diagnosed with coronary heart disease or angina, and 71,000 Minnesotans had a stroke.
- There were 73,000 hospitalizations for cardiovascular disease in 2005.
- 322,000 Minnesotans had diabetes and another 1,013,000 Minnesotans had prediabetes in 2005. These conditions increase the risk of heart disease, blindness, renal failure, amputations and death.
- 11 percent of Minnesotans either have asthma or have had it in the past.

### The Cost of Doing Nothing

While lost lives and the stress and disability of living with chronic diseases may be the greatest concern to individuals, the economic cost of chronic diseases is also substantial. In 1995 the direct cost of medical treatments related to obesity was estimated at \$52 billion. By 2003 that figure had risen to \$75 billion. Meanwhile, the economic burden of tobacco use is more than \$96 billion in direct medical expenditures.<sup>3</sup>

In addition to direct costs, there are many indirect costs attributable to chronic diseases. These include lost productivity due to increased sick days from work and lost productivity due to early death. Tobacco use alone costs the U.S. an additional \$97 billion annually.<sup>3</sup>

### References:

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<sup>1</sup> <http://www.cdc.gov/steps/>

<sup>2</sup> Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, <http://www.cdc.gov/BRFSS/>

<sup>3</sup> Centers for Disease Control and Prevention, from <http://www.cdc.gov/nccdphp/press/> retrieved 1/2009