



Childhood Obesity Intervention
Cost Effectiveness Study

CHOICES Project: Leveraging Opportunities to Address Winnable Battles

Angie Cradock, ScD



June 21, 2016
Denver, Colorado



HARVARD T.H. CHAN
SCHOOL OF PUBLIC HEALTH

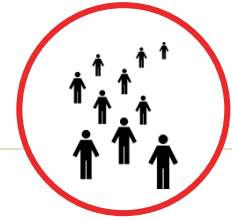
CHOICES- Why are we doing this?



Childhood
obesity
prevention
policies and
programs



Best results
for dollars
invested



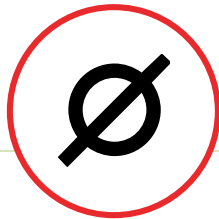
Public policy,
public health,
general public

Cost Effectiveness Analysis

Cost Effectiveness Analysis
compares the costs and outcomes of:



vs.



One policy or
program intervention
with no intervention

OR

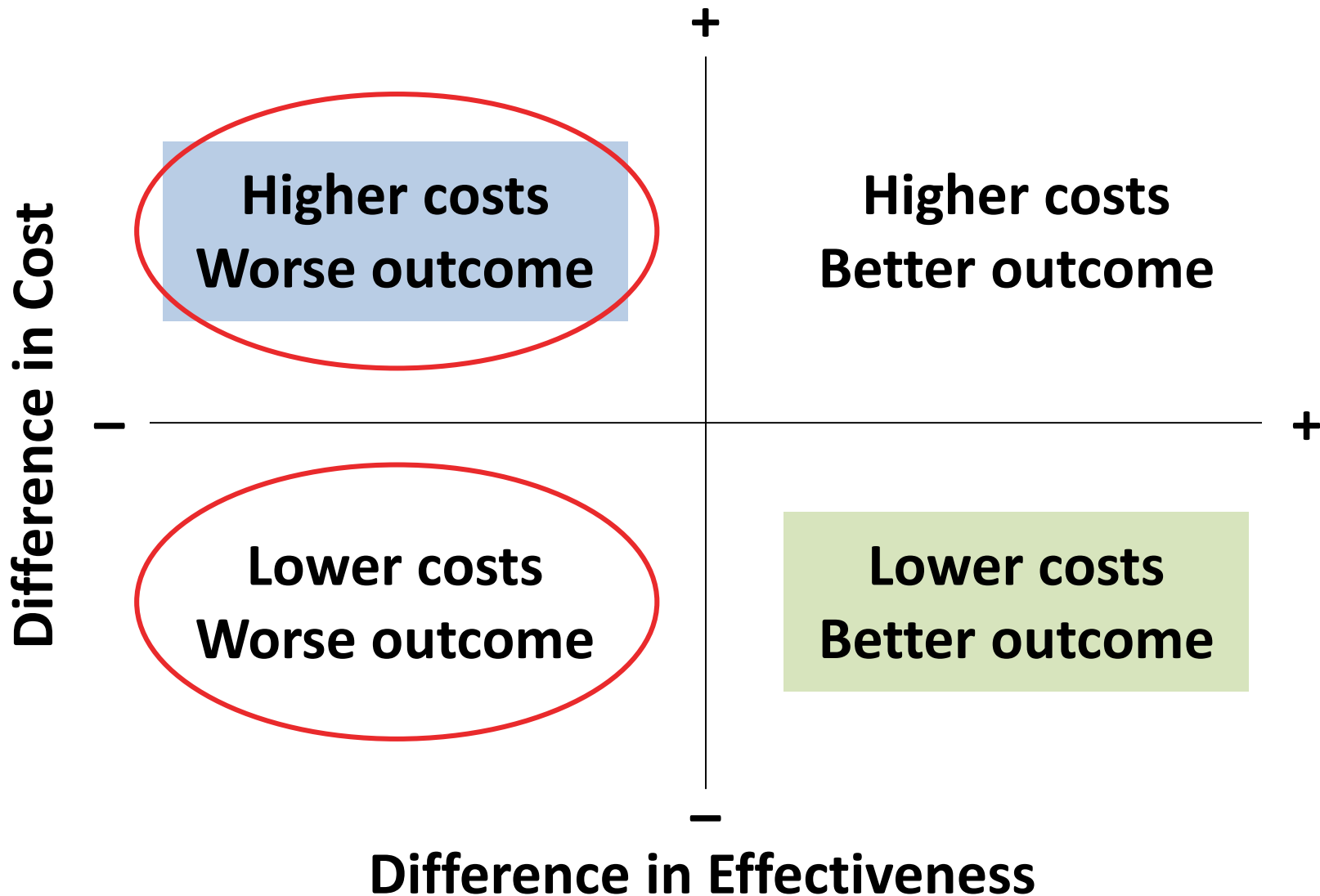


vs.

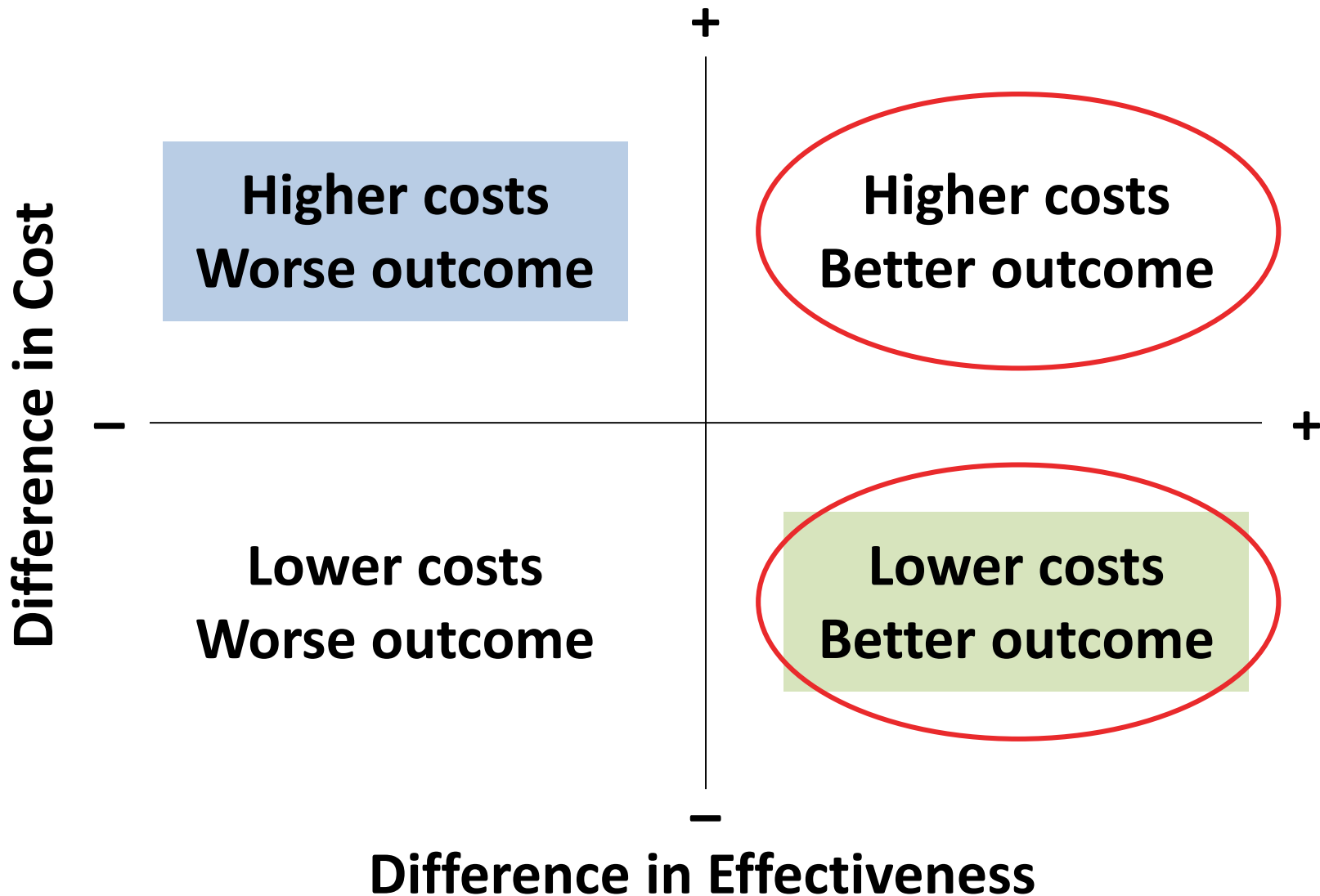


Two policy or
program
interventions

Costs & Outcomes



Costs & Outcomes



How Can CHOICES Methods/Results Help You?

- ✓ Provide evidence for action
- ✓ Explain impact on population
- ✓ Uncover effective implementation strategies
- ✓ Guide resource investment
- ✓ Cultivate alliances and support

Opportunity to Partner w/CHOICES

CHOICES partnership work in year 2



States



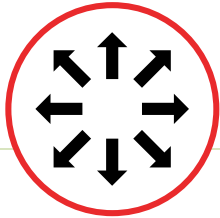
Large cities



Large counties

Overview of CHOICES

CHOICES Model Outcomes



Reach

Who will benefit?



Effect

How much will they benefit?

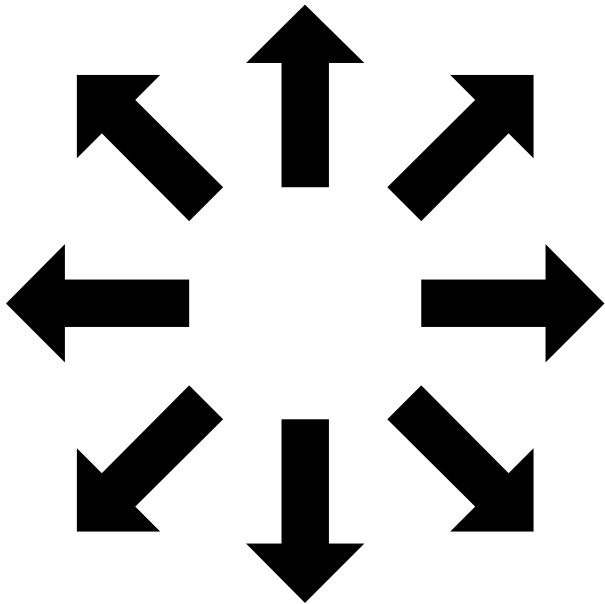


Cost

How much will a program/policy change cost and will healthcare savings be more than implementation costs?

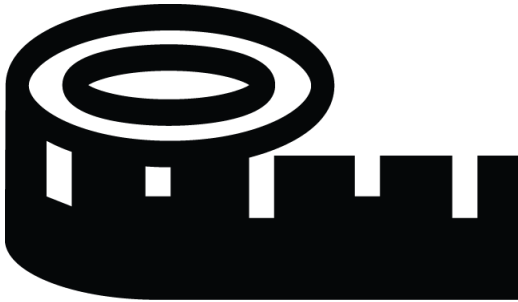
Focus on obesity-related initiatives

Who will benefit?



- Who?
- How many?
- Criteria to narrow description and number?

How much will they benefit?



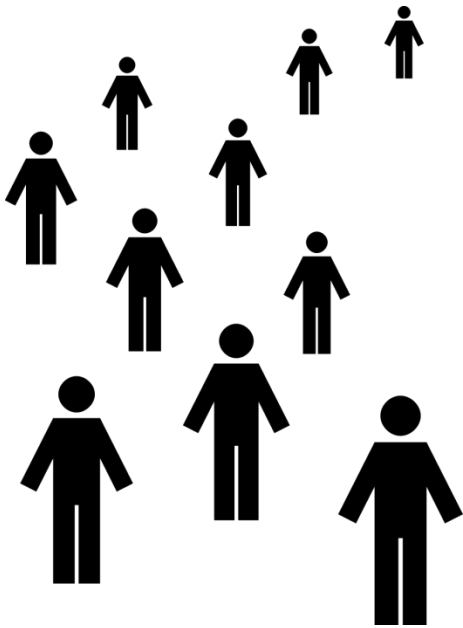
- How much will the intervention reduce BMI?
- Peer-reviewed articles/evidence

Cost to make change?



- Activities and resources to achieve effect
- All costs regardless of payer
- Value for all necessary resources
- Not intervention participants' time

Population - CHOICES Model

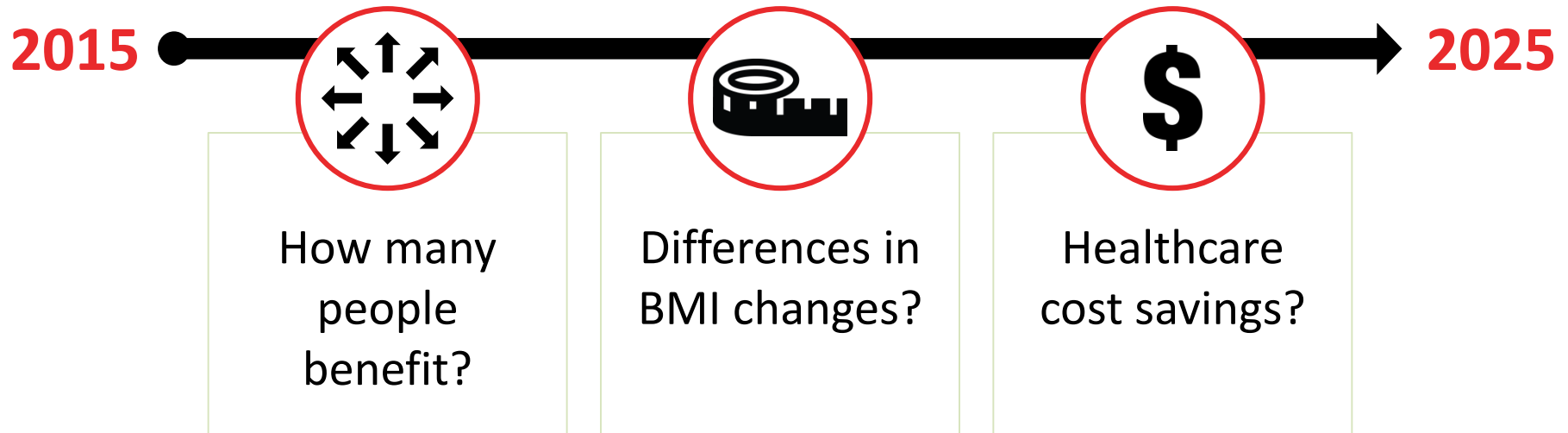


Virtual population = 1 million people

- Matches state population
- Accounts for personal characteristics like dietary intake, body growth, and behaviors like smoking

Ten-Year Trends - CHOICES Model

From 2015-2025, no intervention vs. intervention:



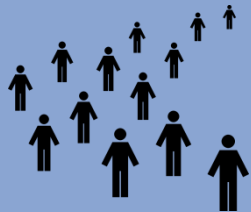
How the Model Works

BASELINE SCENARIO

Start: 2015

Simulate to:
2025

VIRTUAL POPULATION



*From 2010 U.S.
Census Data*

POPULATION FACTORS



Population
Growth



BMI Trends

INDIVIDUAL FACTORS



Body Growth



Personal
Characteristics
(e.g. dietary intake)



Smoking

HEALTH STATUS



Obesity

OUTCOMES



Obesity



Healthcare
Costs



Mortality

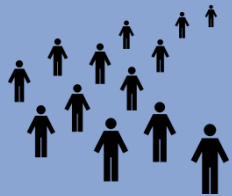
How the Model Works

INTERVENTION SCENARIO

Start: 2015

Simulate to:
2025

VIRTUAL POPULATION



*From 2010 U.S.
Census Data*

POPULATION FACTORS



Population
Growth



BMI Trends

INDIVIDUAL FACTORS



Body Growth



Personal
Characteristics
(e.g. dietary intake)



Smoking

INTERVENTION Dietary Intake/Physical Activity

HEALTH STATUS



Obesity

OUTCOMES



Obesity



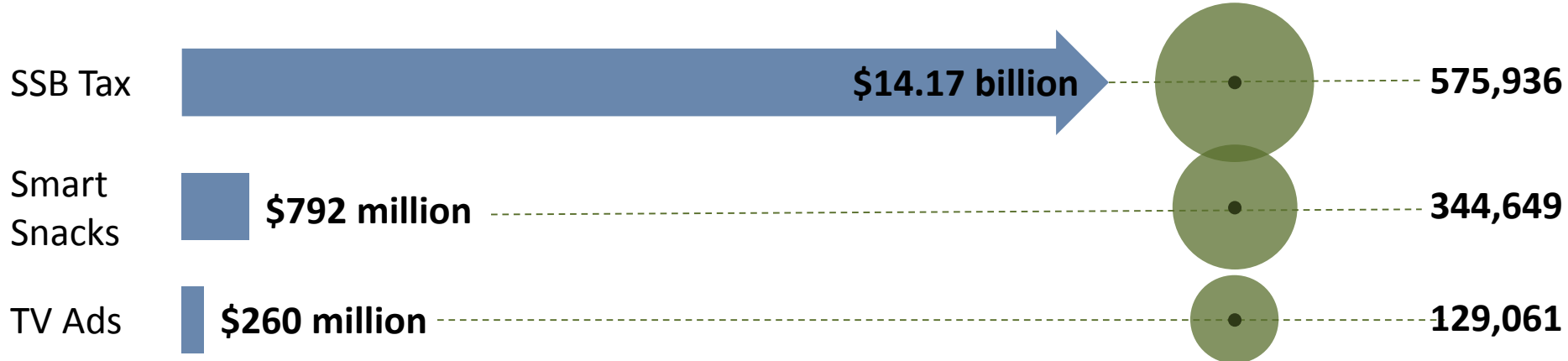
Healthcare
Costs



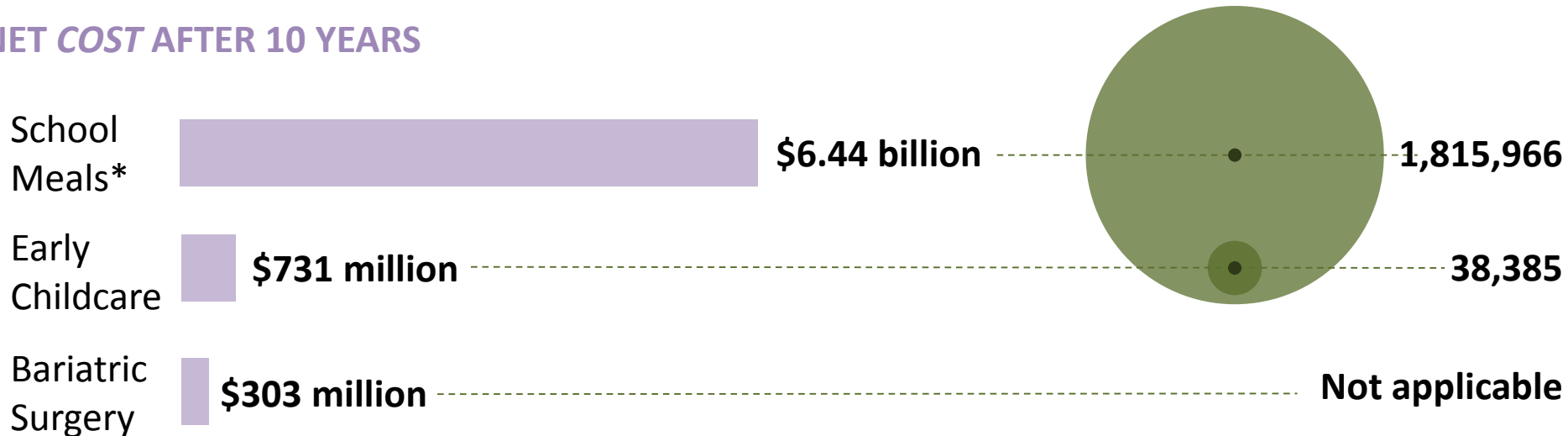
Mortality

Interventions That Reduce Childhood Obesity

NET COST SAVINGS AFTER 10 YEARS



NET COST AFTER 10 YEARS



*The 95% uncertainty interval for the estimate includes zero (Gortmaker et al., *Health Affairs*, Nov. 2015.)

CHOICES State Partnership



- ASTHO connects states and other partner organizations to work with CHOICES team
- ASTHO advised on framework and logistics for the state learning community partnership

CHOICES State Partnership

Partner w/ state health agencies to:

- ✓ Identify and assess 2-3 interventions
- ✓ Apply state-specific implementation scenarios
- ✓ Communicate results to inform decision making

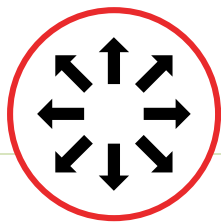
State Models



**Input state-specific data
for cost-effective analysis**



State-specific intervention profiles



Who will benefit?



How much will
they benefit?



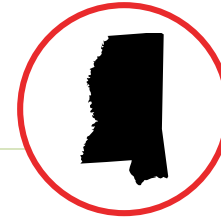
How much does
it cost to make a
program change?

States Use of CHOICES Model



Washington

Example: Active
Recess Program



Mississippi

Example: Early Care
and Education
Screen Time Policy
and Programs

More Info on Year 2 Partnerships

Application process:

- Application materials on <http://choicesproject.org/work-with-us/>
- FAQ webinar July 14th 12 pm EST
- Proposals due Aug 5th
- Awardees notified Aug 31st

Project year: Oct 1, 2016 - Sept 30, 2017

Includes financial assistance to health agencies to complete work

For additional information:

www.choicesproject.org, cgiles@hsph.harvard.edu