
Community Action Plan to Increase Healthful Eating and Regular Physical Activity among Children in SLO County

Childhood Obesity Prevention Task Force 2007



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Community Action Plan
to Increase Healthful Eating and Regular Physical Activity
among Children in SLO County

Childhood Obesity Prevention Task Force
2007

Funded by
San Luis Obispo County Administrative Office

Convened by
San Luis Obispo County Community Foundation

Report prepared by
Amy Gilman, Diringier and Associates



SAN LUIS OBISPO COUNTY
COMMUNITY
FOUNDATION

da
DIRINGER
AND ASSOCIATES





The members of this Task Force demonstrated their commitment to the health of our community through their dedication of time and energy to participate in this planning process. The members' participation and motivation greatly stimulated the planning process with intensive learning, information sharing and discussion. We would like to thank all of the members for their contributions, especially the Task Force Steering Committee and the individuals and teams, who led each learning session.

Task Force Steering Committee:

- Janice Wolf, San Luis Obispo County Community Foundation;
- Gloria Johnson, Latino Outreach Council;
- Lisa Nicholson, Healthy Eating and Active Living, SLO County;
- Annie Robb, Paso Robles Library and Recreation Services;
- Greg Thomas, County Public Health;
- Nancy Orton, County Planning and Building;
- Christine Enyart-Elfers, County Office of Education
- Joel Diring, Diring and Associates;
- Amy Gilman, Diring and Associates.



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Our Children's Health

Childhood obesity rates have doubled and tripled over the past two decades, leading to serious health concerns. Children who are overweight are at risk of developing a host of health problems, including high blood pressure, high cholesterol, asthma and Type 2 diabetes. The Center for Disease Control and Prevention estimates that 1 in 3 children born in 2000 will become diabetic unless eating and activity practices improve¹. Furthermore, overweight children are also 70-80 percent more likely to be overweight as adults, thus increasing their risk of developing stroke, high blood pressure, heart disease, some cancers and arthritis. Considering the health risks of obesity, children today may not live as long as their parents². According to the U.S. Surgeon General³, an estimated 300,000 deaths may be attributable to obesity. Annual health care costs for illnesses due to overweight are estimated at \$117 billion, nationally, and are rising⁴. In California, it is estimated that obesity and inactivity costs \$21.7 billion a year (in 2000 dollars) in healthcare expenses, injuries and lost productivity⁵.

Childhood obesity is a public health epidemic with complex causes. Two key causes are lack of physical activity and unhealthy eating, but there are many underlying causes. Prevention efforts should address individual practices and environmental factors which limit our ability to make healthful choices. Modifying behaviors and environmental factors is challenging, but crucial. Establishing healthy lifestyles will translate into fewer cases of diabetes, stroke, heart attack, and obesity among children and adults, as well as reduced health care costs for chronic illnesses associated with overweight and obesity.

Overweight and Obesity: An Overview

- Overweight and obesity result from an energy imbalance. This involves eating too many calories and a lack of adequate physical activity.
- Body weight is the result of genes, metabolism, behavior, environment, culture and socio-economic status.
- Behavior and environment play a large role in causing people to be overweight or obese. These are the greatest areas for prevention and treatment actions.

Adapted from The Surgeon General's Report, 2001³

Despite the popular notion that San Luis Obispo County is prosperous and healthy, the reality is that the obesity epidemic is here among our children. A 2005-2006 survey conducted by the Maternal, Child, and Adolescent Health Division of the County Public Health Department found that 29 percent of local, pre-school children, 3-5 years old, were at-risk or overweight.

HEAVY TOLL

For children, poor nutrition and physical inactivity have weighty consequences.

34

Percentage of U.S. children who are overweight or obese

2.3- to 3.3-fold

Increase in childhood obesity in the U.S., past 25 years

30

Percentage of children who eat fast food on a given day

10-fold

Estimated increase in prevalence of childhood diabetes, last 20 years

500

Percent increase in soft drink consumption per capita, 1950s to today

60

Percent increase in children's obesity risk from one additional soft drink per day

167

Number of calories per day added to children's diets for every one-hour increase in TV viewing

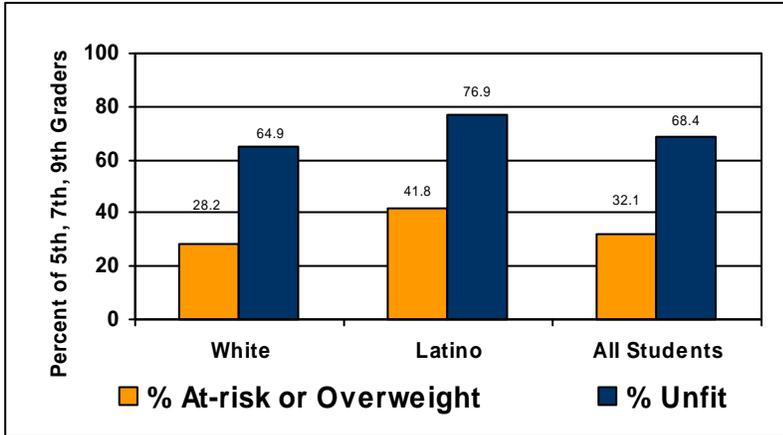
49

Percentage of every U.S. food dollar spent on food eaten outside the home (includes take-out items)

44.5

Average number of hours per week that kids ages 8-12 spend in the recreational use of TV, videos, music, video games, computers, movies, and print media

Sources: Centers for Disease Control and Prevention, *Journal of the American Medical Association, Pediatrics*, U.S. Department of Agriculture, *Lancet, Archives of Pediatrics and Adolescent Medicine*, Tufts University/Friedman School of Nutrition Science and Policy, Kaiser Family Foundation



Percent of 5th, 7th, 9th graders who are at-risk or overweight and who are physically unfit

Source: CA Department of Education, Physical Fitness Test, 2005-2006

Data from California Department of Education, 2005-2006, show that 32.1 percent of SLO County 5th, 7th, and 9th graders are at risk or overweight and 68.4 percent are not physically fit. Among school children, the risk of being overweight and unfit is greater among Latino children compared to white, non-Hispanic children. School districts in the northern and southern parts of the county reflect higher rates of being unfit, which is in line with the demographic distribution of low-income families and Latino communities.

Community Course of Action

Community Goal:
All children in SLO County will be healthier through healthful eating and regular physical activity

The severity of this epidemic and the resulting costs to the individual, community and nation have inspired action at various levels. In February 2006, the San Luis Obispo County Board of Supervisors endorsed a community- and County Health Commission-led call for the creation of a Childhood Obesity Prevention Task Force. The Task Force was charged to develop a county-wide strategic action plan to guide collaborative efforts in preventing childhood obesity and its related chronic diseases. County leaders funded the San Luis Obispo County Community Foundation (SLOCCF) to convene and facilitate the Task Force through the planning process.

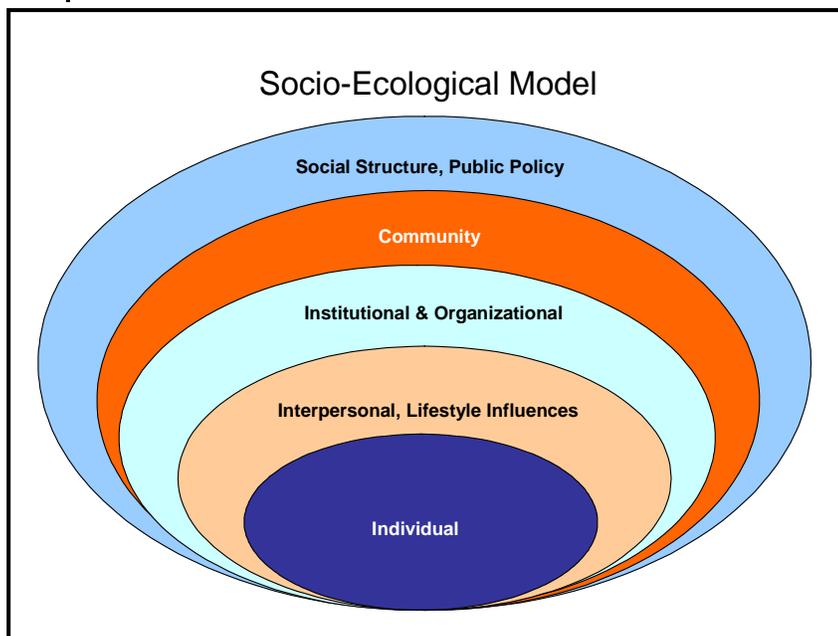
Aware that successful prevention efforts would require partners from various sectors of the community, a Task Force Steering Committee was formed to develop and guide the strategic planning process. The Steering Committee included representatives from SLOCCF; Latino Outreach Council; the local coalition, Healthy Eating and Active Living, SLO County; Paso Robles Library and Recreation Services; County Public Health and Planning and Building Departments; and County Office of Education. The Steering Committee, along with Task Force staff, developed a six-month planning process to raise awareness of the health problem, the various factors contributing to its prevalence, and of opportunities to address the problem. The Steering Committee also crafted a broad-scope invitation list of community stakeholders, vital to enabling systemic environmental and policy change, to participate on the Task Force. A list of Task Force members is included in Appendix 1.

Six meetings were designed to provide overviews to food availability and physical activity availability, and to address both issues within four domains: family settings, (pre-)school environments, health care environments, and community design. Each meeting included discussions as to what actions county partners could take to prevent childhood obesity. The resulting recommended actions were organized to reflect a socio-ecological model for behavior change (see page 3). The recommended actions are not all inclusive, yet are intended to guide further obesity prevention efforts. The higher-level recommended actions are presented in the body of this report. The detailed list of recommended actions, with priority designations, is included in Appendix 2.

The Socio-Ecological Model⁶

Educational programs and materials to address the key behavioral factors causing overweight and obesity: over-consumption of food (calories) and inadequate physical activity have long been available, yet clearly with decreasing success population-wide. It is now more widely known that behavior change is more likely to endure when a person's environment is simultaneously changed in a manner that supports the behavior change. Therefore, efforts to prevent obesity should address an individual's intentions and knowledge and their social and physical environments, including the social networks and organizations that affect them.

The basic levels of social and environmental influences are identified in the socio-ecological model for behavior change: Individual, Interpersonal and Lifestyle, Institutional and Organizational, Community, and Social Structure and Public Policy. The model is also referred to as 'the onion' because each level wraps around another – moving outward from the individual to the larger societal factors. The model recognizes that each level of the model influences individual choices and behaviors, therefore each level of the model must be addressed to effectively prevent obesity.



Individual: Motivating change in individual behavior by increasing knowledge, or influencing attitudes or challenging beliefs.

Interpersonal: Recognizing that groups provide social identity and support, interpersonal interventions target groups, such as family members or peers.

Institutional and Organizational: Changing the policies, practices, and physical environment of an organization (e.g., a workplace, health care setting, a school/child care, a faith organization, or another type of community organization) to support behavior change.

Community: Developing and enforcing local policies that support beneficial health behaviors and creating opportunities within the 'built environment' (homes, neighborhoods, parks and trails, schools, roadways, workplaces) to access healthful foods and regular physical activity.

Social Structure/Public Policy: Developing and enforcing state policies and laws that can increase beneficial health behaviors. Developing media campaigns that promote public awareness of the health need and advocate for change.

Specific Immediate Recommendations

Continued collaborative effort is needed to assure the sustained commitment and successful implementation of the recommended strategies and actions within this plan. The Childhood Obesity Prevention Task Force recognizes that various levels and sectors of society, from grassroots organizers to policy makers, must participate in further developing and implementing the Action Plan. To help achieve this, specific immediate recommendations include:

1. Raise awareness about the *Community Action Plan to Increase Healthful Eating and Regular Physical Activity* through a defined communications strategy, public relations and other outreach efforts.
2. Create and fund a position within the County Public Health Department to coordinate and support county-wide collaborative prevention efforts.
3. Create an on-going multi-disciplinary advisory and oversight committee to further collaborate, advise and monitor obesity prevention efforts.
4. Initial efforts of the advisory committee may include the following:
 - Recruitment of partners from under-represented disciplines or organizations to more effectively address and sustain prevention activities
 - Establishment of evaluation and tracking mechanisms to determine progress of plan implementation
 - Identification of 'working groups' to further develop action plans or materials and to 'champion' for specific environments or issues.

Obesity: A Complex Problem with Many Causes⁷

- **Advertising:** Restaurants and the food industry spend \$10 billion on advertising each year while the National Cancer Institute spent \$7.75 million on advertising the "5-A-Day" fruits and vegetable diet recommendations in a seven year period (1992-1999)⁸
- **Fast Food Meals:** Cost less but have more calories.
- **Limited Access to Healthy Food:** Convenience stores and local stores generally do not offer quality fresh fruits or vegetables. Healthy food is usually more expensive or not in convenient locations.
- **Screen Time:** TV, computer and computer games increasingly occupy children's time. On average, children, 2-17 years, spend 6 hours per day in media activities.
- **Changing Culture:** Evolving from a nation of farmers to a nation of commuters. Family time is increasingly spent on sedentary activities, e.g., eating out, going to movies, watching TV and driving.
- **Urban Sprawl:** Increasing use of cars for transportation to school, shopping, work, and recreation.
- **Inadequate Infrastructure:** Lack of adequate sidewalks, bike and walking paths, and local areas for physical activity.
- **Perception of Unsafe Neighborhoods:** Perceived lack of safety results in children not playing outside or walking to school.

Recommendations for Action

The over-arching **community-wide goal** that **all children in SLO County will be healthier through healthful eating and regular physical activity** was identified in the planning process. Reaching this community-wide goal will require three broad, interlinked areas of action: 1) Community Awareness and Commitment, 2) Opportunities for Healthful Eating, and 3) Opportunities for Physical Activity. These areas of action are designated as **goals** within the strategic action plan.

The goal of ‘Community Awareness and Commitment’ critically works in conjunction with both of the other two goals. This goal focuses on strategies and actions to raise community awareness of the problem posed by obesity, ways to address the problem, and increasing commitment to take action on individual and environmental levels.

The two goals of ‘Opportunities for Healthful Eating’ and ‘Opportunities for Physical Activity’ address individual and environmental factors that enable the adoption of healthful lifestyle practices. For each of these two goals, the **Recommendations for Action** are organized, as **strategies**, according to the levels of the socio-ecological model: individual and family; institutional and organizational (including schools, child care centers, community- and faith-based organizations, workplaces, and places of health care provision); and community. ‘Community’ refers to issues of planning and design for neighborhoods, schools, parks and trails, roadways, and work and shopping areas. Recommendations for action pertaining to Social Structure and Public Policy are included within the related strategy and level of the socio-economic model.

Examples of Promising Local Practices

- TV and radio advertisements that highlight the family behaviors contributing to childhood obesity and diabetes (CA First 5 Commission)
- Establishment of school gardens and inclusion of local produce in school cafeteria menus (SLO Grown Kids in San Luis Coastal School District and Templeton Unified School District)
- Adoption of Wellness Policies in all county school districts (County Office of Education)
- Elimination of deep frying kitchen equipment (Atascadero Unified School District)
- Sponsorship of after-school programs at all elementary schools (Lucia Mar School District)
- Expansion of Eat Smart, Play Hard! educational program for children, 6-8 years old, with an adult caretaker to sites in Paso Robles and Oceano (U.C. Cooperative Extension and EOC, Child Care Resource Connection)
- Inclusion of weekly cooking classes and alternative physical activities for children in the after-school program, Healthy Kids Club (YMCA)
- Completion of the Youth Center (City of Atascadero)
- Piloting of ‘safe routes to school’ projects in four schools (Regional Rideshare)
- Farmers’ Markets in 11 locations throughout the county (local Farmers’ Market Associations)
- Development of local walking trail maps for use as ‘prescriptions’ in medical provider offices (CA and local Parks and Recreation Departments)
- Completion of county-wide Trails Master Plan (County Parks and Recreation Department)
- Expedited process for development proposals meeting ‘smart growth’ criteria (County Department of Planning and Building)

Community Goal:
All children in SLO County will be healthier through healthful eating and regular physical activity

Goal 1: Raise community awareness and commitment to increasing opportunities for healthful eating and physical activity

Strategies	Recommended Actions
Implement culturally appropriate media-based social marketing campaign	<ol style="list-style-type: none"> 1. Ensure commitment of funding for the development and dissemination of social marketing messages to create healthy normative behaviors 2. Create a collaborative working group to develop coordinated, culturally appropriate media-based messages to establish the importance of preventing obesity. 3. Create a collaborative working group to strategize message dissemination
Engage community partners to raise awareness and to address their environments	<ol style="list-style-type: none"> 1. Host a Wellness Fair or Summit for community partners to share resources and information on promising practices in obesity prevention 2. Create a collaborative working group to strategize community outreach and empowerment in support of environment and policy changes to increase accessibility to healthy food and physical activity opportunities 3. Encourage and support partners to conduct assessments of opportunities and barriers to accessing healthy foods and physical activity and to advocate for environment and policy changes 4. Encourage partners to follow a model for community engagement to increase community participation, especially among youth, low-income and Latino communities, in program planning and in community advocacy
Strengthen coordination and leadership for community engagement and advocacy for environmental and policy changes	<ol style="list-style-type: none"> 1. Establish and fund a staff position in the Public Health Department to coordinate county-wide activities to increase opportunities for healthy foods and physical activity 2. Establish an on-going ‘advisory committee’ of multi-sector partners to continue collaborative planning and to monitor progress 3. Create an advocacy network to address community-wide policy changes to increase accessibility to healthful food and physical activity opportunities (specific issues are included in the ‘community environment’ of both the Healthful Eating and Physical Activity Goals, Appendix 2) 4. Partner with local educational institutions, such as Cal Poly’s Center for Obesity Prevention and Education, to conduct research for program development and evaluation

Potential Partner Agencies:
 County Public Health Department • County Office of Education • City/County Departments of Planning and Building • City/County Parks and Recreation Departments • SLO County Community Foundation • Cal Poly • U.C. Cooperative Extension • Economic Opportunity Commission, Youth Services Organizations • Faith-based Organizations • Latino Outreach Council • Chambers of Commerce • Local Businesses • Local media and marketing firms

Existing and Potential Resources:
 CA and San Luis Obispo First 5 Commissions • U.S. Department of Agriculture and affiliated programs • Food industry corporations • Center for Advanced Studies in Nutrition and Social Marketing, U.C. Davis • Government Agency and Organization operating funds • Public and Private Foundations

Community Goal:
All children in SLO County will be healthier through healthful eating and regular physical activity

Goal 2: To increase access to opportunities for healthful eating for children and families

Strategies	Recommended Actions
Enhance parent /child awareness of the importance of and means to healthy eating	<ol style="list-style-type: none"> 1. Create a collaborative working group to develop and disseminate coordinated, culturally appropriate public information and education materials, addressing parenting skills, portion size, reading nutrition labels, cooking and recipes, growing food 2. Create a collaborative working group to address the accessibility of family programs that integrate physical activity and nutrition education
Address organizations and institutions to increase opportunities to access healthy foods	<p><u>(Pre-) School Environments</u></p> <ol style="list-style-type: none"> 1. Adopt a county-wide ‘gold standard’ Wellness Policy and establish monitoring and oversight of Wellness Policy implementation 2. Fund training for K-12 teachers on incorporating food and nutrition into curricula and provide nutrition education binders/resource materials for teachers 3. Develop a toolkit for school nurses, health clerks and school counselors to address health issues related to eating behaviors and inactive lifestyles 4. Institute a Employee Wellness Program for school staff to increase modeling of healthy behaviors 5. Enable use of school facilities outside of school hours for after-school programs and community activities <p><u>Community- and Faith-based Organizational Environments</u></p> <ol style="list-style-type: none"> 1. Raise community- and faith-based organization members’ awareness of healthy lifestyles and provide culturally appropriate educational materials 2. Train staff and volunteers to provide educate and support members and parents with nutrition and physical activity 3. Engage organization members to establish guidelines for foods and beverages at community- and faith-based organizations and activities 4. Engage organization members to establish guidelines for healthy fundraising 5. Eliminate marketing of unhealthy foods and beverages at community- and faith-based organizations and activities <p><u>Child Care Environments</u></p> <ol style="list-style-type: none"> 1. Institute healthy food and beverage standards consistent with USDA Dietary Guidelines while children are in care and advocate for a county-wide standard for all licensed and unlicensed providers 2. Train staff to educate and support children and parents with nutrition and physical activity 3. Enlist parent support to achieve the dietary standards and encourage healthy behaviors at home through awareness raising of nutrition and physical activity and provision of culturally appropriate educational materials 4. Develop partnerships to finance and implement food and nutrition educational opportunities for children <p><u>Worksite Environments</u></p> <ol style="list-style-type: none"> 1. Raise employees awareness of healthy eating, as part of employee wellness, and provide culturally appropriate educational materials 2. Engage employees to establish guidelines for workplace-based vending machines, cafeterias and office parties, ensuring healthy options

Strategies	Recommended Actions
	<ol style="list-style-type: none"> 3. Advocate for county and city employee wellness policies and programs, including screening days 4. Work with employee insurance providers to provide incentives/rewards for personal wellness 5. Provide appropriate space and support to breastfeeding women <p><u>Health Care Environments</u></p> <ol style="list-style-type: none"> 1. Establish worksite wellness policies and programs in health care offices and hospitals, in part to model healthy behaviors for clients 2. Engage employees to establish guidelines for workplace-based vending machines, cafeterias and office parties, ensuring healthy options 3. Work with health plan providers to train health care professionals in appropriate prevention and treatment of childhood overweight and provide toolkits, appropriate educational materials, and resources 4. Ensure that children’s Body Mass Index (BMI) or weight-for-length is monitored in wellness check ups and provide appropriate counseling or referral 5. Participate in collaborative efforts to advocate for community-wide environmental and policy changes in support of healthier eating, including provider reimbursement rates for nutrition services 6. Eliminate the promotion and distribution of infant formula in hospitals, WIC, and pre- and post-natal care services in support of breastmilk as the optimal food for infants
Address the community environment to increase access to healthy foods	<ol style="list-style-type: none"> 1. Create a advocacy and outreach group to support community-wide environment and policy changes to increase accessibility to healthy food sources and to create financial disincentives for unhealthy food products 2. Strengthen city and county community planning processes to enable the promotion and creation of healthier, livable communities with access to healthy foods for all

Potential Partner Agencies:
 County Public Health Department • County Office of Education and local school districts • City/County Departments of Planning and Building • City/County Parks and Recreation Departments • SLO County Community Foundation • Economic Opportunity Commission, including the Child Care Resource Connection • U.C. Cooperative Extension • Food Bank Coalition • YMCA • Children’s Services Network • Youth Services Organizations • Cal Poly • Faith-based Organizations • Latino Outreach Council • SLO County Medical Association • Chambers of Commerce • Local Businesses • Local media and marketing firms

Existing and Potential Resources:
 Local Hospitals and affiliated Foundations • Local insurance providers, such as Blue Cross, Santa Barbara and San Luis Obispo Regional Health Authority, Tenet Healthcare and Catholic Healthcare West • American Dietetic Association • U.S. Department of Agriculture • CA and San Luis Obispo First 5 Commissions • Government Agency and Organization operating funds • Public and private foundations and local donations

Community Goal:

All children in SLO County will be healthier through healthful eating and regular physical activity

Goal 3: To increase access to opportunities for physical activity for children and families

Strategies	Recommended Actions
Enhance parent/child awareness of the importance of and means to physical activity	<ol style="list-style-type: none"> 1. Create a collaborative working group to develop and disseminate coordinated, culturally appropriate public information and education materials, addressing parenting skills, family active play methods, negative affects of TV/video time, recommended amounts and cumulative benefits of physical activity, the benefit of ‘livable communities’ 2. Create a collaborative working group to address the accessibility of family programs that integrate physical activity and nutrition education
Address organizational and institutional environments to increase opportunities for physical activity	<p><u>(Pre-) School Environments</u></p> <ol style="list-style-type: none"> 1. Adopt a county-wide ‘gold standard’ Wellness Policy and establish monitoring and oversight of Wellness Policy implementation 2. Fund training of K-12 teachers to integrate social, cultural, emotional and mental health aspects of physical activity and health education into existing curriculum 3. Develop a toolkit for school nurses, health clerks and school counselors to address health issues related to eating behaviors and inactive lifestyles 4. Institute an Employee Wellness Program for school staff to increase modeling of healthy behaviors 5. Enable use of school facilities outside of school hours for after-school programs and community activities, including advocating for statewide liability insurance for schools for after school programming <p><u>Community- and Faith-based Organizational Environments</u></p> <ol style="list-style-type: none"> 1. Raise community- and faith-based organization members’ awareness of nutrition and physical activity and provide culturally appropriate educational materials 2. Train staff and volunteers to educate and support members and parents with nutrition and physical activity 3. Engage organization members on ways to incorporate opportunities for physical activity into organization events <p><u>Child Care Environments</u></p> <ol style="list-style-type: none"> 1. Institute physical activity standards appropriate for children’s ages while children are in care and advocate for a county-wide standard for all licensed and unlicensed providers 2. Train staff to educate and support children and parents with nutrition and physical activity 3. Enlist parent support to achieve the physical activity standards and encourage healthy behaviors at home through awareness raising of nutrition and physical activity and provision of culturally appropriate educational materials 4. Develop partnerships to finance procurement of equipment and materials for physical activity <p><u>Worksite Environments</u></p> <ol style="list-style-type: none"> 1. Raise employee awareness of physical activity, as part of employee wellness, and provide culturally appropriate educational materials 2. Engage employees in ways to access and encourage physical activity, such as taking the stairs 3. Advocate for county and city employee wellness policies and programs, including screening days

Strategies	Recommended Actions
	<p>4. Work with employee insurance providers to provide incentives/rewards for personal wellness</p> <p><u>Health Provider and Institutional Environments</u></p> <ol style="list-style-type: none"> 1. Establish employee wellness policies and programs in health care offices and hospitals, in part to model healthy behaviors for clients 2. Work with health plan providers to train health care professionals in appropriate prevention and treatment of childhood overweight and provide toolkits, appropriate educational materials, and resources 3. Ensure that children’s Body Mass Index (BMI) or weight-for-length is monitored in wellness check ups and provide appropriate counseling or referral 4. Participate in collaborative efforts to advocate for community-wide environmental and policy changes in support of healthier eating, including provider reimbursement rates for nutrition services 5. Create collaborations between pediatricians, allied health agencies, universities to provide family based nutrition and supervised physical activity programs
Address the community environment to increase opportunities for physical activity	<ol style="list-style-type: none"> 1. Create a collaborative advocacy network to support community-wide environment and policy changes to increase accessibility to physical activity opportunities 2. Strengthen city and county community planning processes to enable the promotion and creation of healthier, livable communities with access to physical activity opportunities for all

Potential Partner Agencies:

County Public Health Department • County Office of Education and local school districts • City/County Departments of Planning and Building • City/County Parks and Recreation Departments • SLO County Community Foundation • Economic Opportunity Commission, including the Child Care Resource Connection • U.C. Cooperative Extension • YMCA • Children’s Services Network • Youth Services Organizations • Cal Poly • Faith-based Organizations • Latino Outreach Council • SLO County Medical Association • Chambers of Commerce • Local Businesses • Local media and marketing firms

Existing and Potential Resources:

Local Hospitals and affiliated Foundations • Local insurance providers, such as Blue Cross, Santa Barbara and San Luis Obispo Regional Health Authority, Tenet Healthcare and Catholic Healthcare West • American Dietetic Association • U.S. Department of Agriculture • CA and San Luis Obispo First 5 Commissions • Government Agency and Organization operating funds • Public and private foundations and local donations

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2. Oshansky, et al. "A Potential Decline in Life Expectancy in the United States in the 21st Century". *New England Journal of Medicine*, Volume 352:1138-1145, Number 11. March 17, 2005.
3. U.S. Department of Health and Human Services, Office of the Surgeon General; <http://www.surgeongeneral.gov>.
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5. Chenoweth, et al. *The Economic Costs of Physical Inactivity, Obesity and Overweight in California Adults: Health Care, Workers' Compensation, and Lost Productivity*, 2005.
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7. Adapted from Go for Health! *A Comprehensive Plan to Increase Healthy Nutrition and Regular Physical Activity Among Children and Youth in Santa Cruz County*. June 2004.
8. National Health Institute. National Cancer Institute. 5-A-Day for Better Health Program Evaluation Report: Evaluation. Cancer Controls & Population Sciences; http://dcccps.nci.nih.gov/5ad_6_eval.html.

Appendix I: List of Task Force Members

- School Wellness Policy Development Committee, Michelle Ritter-Taylor
- *Latino Outreach Council, Gloria Johnson
- Economic Opportunity Commission, Julie Andrews-Scott
- Children's Services Network, Lisa Fraser
- YMCA, SLO, Jenifer Rhynes
- U.C. Cooperative Extension, Shirley Peterson
- Central Coast Ag Network, Kathleen DeChadenades
- Cal Poly – Kinesiology, Kris Jankovitz
- *Cal Poly – Community Nutrition, Lisa Nicholson
- Food Bank Coalition, Carl Hansen
- First 5 Commission, Susan Hughes
- *SLO County Community Foundation, Janice Wolf
- Healthy Eating Active Living, SLO County, Maureen Eyerman
- Chamber of Commerce, SLO, Patricia Wilmore
- Wellness author/speaker, Michael Framberger
- Pediatrician, Richard Macias, M.D.
- French Hospital, Denise Gimbel
- SLO County Medical Association, Andrew Anthony, M.D.
- Community Health Centers of the Central Coast, Bernadette Alexander
- Paso Robles, Library and Recreation Services, Annie Robb
- *County Public Health Department, Greg Thomas, M.D.
- County Health Commission, Lynn Enns
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- *County Office of Education, Christine Enyart-Elfers
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- County Social Services Department, Lee Collins
- County Parks and Recreation Department, Jan DiLeo
- SLO County Council of Governments, Steven Devencenzi
- County Board of Supervisors, Jerry Lenthall
- County Board of Supervisors, Jim Patterson
- *Served on Task Force Steering Committee

APPENDIX 2: Detailed List of Recommended Actions

Community Goal: All children in SLO County will be healthier through healthful eating and regular physical activity

* Indicates priority

Goal	Strategy	Recommendations for Action	Possible Partner Agencies	Existing /Potential Funding
<p>I. Raise <u>community awareness and commitment</u> to increase opportunities for physical activity and healthy eating</p>	<p>Implement culturally appropriate media-based social marketing campaign</p>	<ol style="list-style-type: none"> 1. *Ensure commitment of funding for the development and dissemination of social marketing messages to create healthy normative behaviors by all partners 2. *Create a working group to develop coordinated, culturally appropriate media-based messages to establish the importance of preventing obesity. Key issues could include: <ol style="list-style-type: none"> a. Establishment of common language defining the problem b. Positive branding of healthy behaviors and practices Promotion of safe neighborhoods to counter perception that it is unsafe to walk and play outside c. Promotion of walking/biking trails as being good for the health of the community d. Utilization of non-traditional ways to educate, i.e. technology 3. Create a working group to strategize message dissemination, considering: <ol style="list-style-type: none"> a. *Involvement of media professionals in development and dissemination of positive nutrition/physical activity marketing b. Utilization of free media outlets c. Development of a 'team' of respected, identifiable public figures, such as youth spokespersons, doctors, business leaders, athletes and celebrities to give the social marketing messages 	<ul style="list-style-type: none"> - County Public Health Department - County Office of Education - City/County Departments of Planning and Building - City/County Parks and Recreation Departments - SLO County Community Foundation - Cal Poly - U.C. Cooperative Extension - Youth Services Organizations - Faith-based 	<ul style="list-style-type: none"> - CA and San Luis Obispo First 5 Commissions - U.S. Dept. of Agriculture and affiliated programs, such as Eat Smart, Play Hard! - Food industry, such as Dole - Center for Advanced Studies in Nutrition and Social Marketing, U.C. Davis - Government Agency and Organization operating funds - Public and
<p>Engage community partners to raise awareness and address their environments</p>	<ol style="list-style-type: none"> 1. *Host a Wellness Fair or Summit for community partners to share resources and information on promising practices in obesity prevention 2. Create a working group to strategize community outreach and empowerment in support of environment and policy changes to increase accessibility to healthy food and physical activity opportunities, such as: <ol style="list-style-type: none"> a. *Community planners, developers, builders and the public in finding ways to increase accessibility and availability of physical activity opportunities b. *Law enforcement/crime prevention specialists and community groups in the promotion and protection of neighborhood safety and 'safe routes to school' c. *Licensed and unlicensed child care providers about the importance of promoting and enabling physical activity and healthy eating d. School/college board members, administration, staff, and students about the 			

Goal	Strategy	Recommendations for Action	Possible Partner Agencies	Existing /Potential Funding
		<p>importance of promoting and enabling physical activity and healthy eating and publicizing local Wellness Policies</p> <ol style="list-style-type: none"> e. Community- and faith-based organization administration and staff about the importance of promoting and enabling physical activity, healthy eating and safe neighborhoods f. Employers and workplace leaders in promoting and enabling physical activity and healthy eating g. Health care providers and health institutions in promoting and enabling physical activity and healthy eating, possibly by working with SLO County Medical Association h. Community groups, such as PTAs, neighborhood groups, and other 'grassroots' groups <ol style="list-style-type: none"> 3. Encourage and support partners to conduct assessments of opportunities and barriers to accessing healthy foods and physical activity and to advocate for environmental and policy changes 4. Encourage partners to follow a 'community engagement' model to increase community participation, especially among youth, low-income and Latino communities, in program planning and in community advocacy 	<p>Organizations</p> <ul style="list-style-type: none"> - Latino Outreach Council - Chambers of Commerce - Local Businesses - Local media and marketing firms 	<p>Private Foundations, such as The California Endowment, the Wellness Foundation and the Robert Wood Johnson Foundation</p>
	<p>Strengthen coordination and leadership for community engagement and advocacy for environment and policy changes</p>	<ol style="list-style-type: none"> 1. *Establish and fund a staff position in the Public Health Department to coordinate county-wide activities to increase opportunities for healthy foods and physical activity, such as: <ol style="list-style-type: none"> b. Convening regular meetings with multi-sector partners c. *Compiling data as part of monitoring progress that can be used to evaluate implementation at the process, outcome and impact levels d. Providing regular community-wide news and information to help keep organizations up-to-date on community obesity prevention 2. Establish an on-going 'advisory committee' of multi-sector partners to continue collaborative planning and to monitor progress 3. Create an advocacy network to address community-wide policy changes to increase accessibility to healthy food and physical activity opportunities (specific issues are included in the 'community environment' of both the Nutrition and Physical Activity Goals) 4. Partner with local educational institutions, such as Cal Poly's Center for Obesity Prevention and Education, to conduct research for program development and evaluation 		

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<p>2. To increase opportunities for healthy eating for children and families</p>	<p>Enhance parent /child awareness of the importance of and means to healthy eating</p>	<p>I. *Create a collaborative working group to develop and disseminate coordinated, culturally appropriate public information and education materials, addressing parenting skills, portion size, reading nutrition labels, cooking and recipes, growing food, targeting:</p> <ul style="list-style-type: none"> a. *Health care provider offices and institutions, including reimbursable group learning sessions b. Sports/physical activity and nutrition programs c. Community- and faith-based organizations d. Licensed and unlicensed childcare settings e. (Pre-) schools, such as in school newsletters f. Local workplaces g. Grocery and convenience stores h. Food Bank Coalition distribution sites <p>2. Create a collaborative working group to address the accessibility of family programs that integrate physical activity and nutrition education, such as:</p> <ul style="list-style-type: none"> a. Funding the program expansion to increase the availability of such programs b. Fostering community cooperation to provide educational opportunities, such as cooking classes c. Ensuring affordability for all members of the community d. Providing transportation and child care to enhance participation of working/single parent families 	<ul style="list-style-type: none"> - County Public Health Department - County Office of Educations and local school districts - City/County Parks and Recreation Depts. - EOC, including the Child Care Resource Connection - Children's Services Network - U.C. Cooperative Extension - SLO County Medical Association - Cal Poly 	<ul style="list-style-type: none"> - Local Hospitals and affiliated Foundations - Local insurance providers, such as Blue Cross; Santa Barbara and San Luis Obispo Regional Health Authority; Tenet Healthcare; Catholic Healthcare West - American Dietetic Association - U.S. Dept. of Agriculture - CA and San Luis Obispo First 5 Commissions - Government Agency and
<p>Engage organizations and institutions to increase opportunities to access healthy foods</p>	<p>Engage organizations and institutions to increase opportunities to access healthy foods</p>	<p>(Pre-) <u>School Environments</u></p> <p>I. Adopt a county-wide 'gold standard' Wellness Policy and establish monitoring and oversight of Wellness Policy implementation. Local policy standards could include:</p> <ul style="list-style-type: none"> a. *Enhancing USDA Dietary Guidelines and state nutrition mandates by incorporating the use of local food products into the school food services b. Instituting healthy food and beverage standards for all meals and snacks available in pre-school, school and after-school programs c. Establishing guidelines for healthy fundraising d. Funding/providing incentives for programs that provide education involving nutrition and growing food, such as school gardens 	<ul style="list-style-type: none"> - U.C. Cooperative Extension - SLO County Medical Association - Cal Poly 	<ul style="list-style-type: none"> - U.S. Dept. of Agriculture - CA and San Luis Obispo First 5 Commissions - Government Agency and

Goal	Strategy	Recommendations for Action	Possible Partner Agencies	Existing /Potential Funding
		<p>e. Funding school environmental changes to coincide with educational messages, including cafeterias and food processing facilities</p> <p>f. Mandating food preparation and nutrition education as part of general education</p> <p>g. Eliminating marketing of unhealthy foods and beverages on school property</p> <p>2. *Develop a toolkit for school nurses, health clerks and school counselors to address health issues related to eating behaviors and inactive lifestyles</p> <p>3. Initiate a referral program for nutritionally at-risk children to counseling or other therapeutic services</p> <p>4. Fund training for K-12 teachers on incorporating food and nutrition into curricula and provide nutrition education binders/resource materials for teachers</p> <p>5. Maximize student participation in federal school meal programs to help offset costs of providing healthy foods</p> <p>6. Institute a Employee Wellness Program for school staff to increase modeling of healthy behaviors</p> <p>7. Foster partnerships and volunteerism to support provision of lessons and activities</p> <p>8. Enable use of school facilities outside of school hours for after-school programs and community activities</p> <p>9. Advocate for a health and physical education college entrance requirement and its inclusion as part of general college education to increase the importance within K-12 education and to extend health learning opportunities</p> <p><u>Community- and Faith-based Organizational Environments</u></p> <ol style="list-style-type: none"> Raise community- and faith-based organization members' awareness of healthy lifestyles and provide culturally appropriate educational materials Train staff and volunteers to provide education and resources to members and parents on nutrition and physical activity Engage organization members to establish guidelines for foods and beverages at community- and faith-based organizations and activities Engage organization members to establish guidelines for healthy fundraising Eliminate marketing of unhealthy foods and beverages at community- and faith-based organizations and activities <p><u>Child Care Environments</u></p> <ol style="list-style-type: none"> Institute healthy food and beverage standards consistent with USDA Dietary 	<ul style="list-style-type: none"> - YMCA - Food Bank Coalition - Youth Services Organizations - Faith-based Organizations - Latino Outreach Council - Chambers of Commerce - Local Businesses - Local media and marketing firms 	<p>Organization operating funds</p> <ul style="list-style-type: none"> - Public and Private Foundations and local donations

Goal	Strategy	Recommendations for Action	Possible Partner Agencies	Existing /Potential Funding
		<p>Guidelines while children are in care and advocate for a county-wide standard for all licensed and unlicensed providers</p> <ol style="list-style-type: none"> 2. Train staff to provide education and resources to children and parents on nutrition and physical activity 3. Enlist parent support to achieve the dietary standards and encourage healthy behaviors at home through awareness raising of nutrition and physical activity and provision of culturally appropriate educational materials 4. Develop partnerships to finance and implement food and nutrition educational opportunities for children <p><u>Worksite Environments</u></p> <ol style="list-style-type: none"> 1. *Raise employees awareness of healthy eating, as part of employee wellness, and provide culturally appropriate educational materials 2. Engage employees to establish guidelines for workplace-based vending machines, cafeterias and office parties, ensuring healthy options 3. Advocate for county and city employee wellness policies and programs, including screening days 4. Work with employee insurance providers to provide incentives/rewards for personal wellness 5. Provide appropriate space and support to breastfeeding women <p><u>Health Provider and Institutional Environments</u></p> <ol style="list-style-type: none"> 1. *Establish worksite wellness policies and programs in health care offices and hospitals, in part to model healthy behaviors for clients 2. Engage employees to establish guidelines for workplace-based vending machines, cafeterias and office parties, ensuring healthy options 3. * Work with health plan providers to train health care professionals in appropriate prevention and treatment of childhood overweight and provide toolkits, appropriate educational materials, and resources 4. Ensure that children’s Body Mass Index (BMI) or weight-for-length is monitored in wellness check ups and provide appropriate counseling or referral 5. Participate in collaborative efforts to advocate for community-wide environmental and policy changes in support of healthier eating, including provider reimbursement rates for nutrition services 6. Eliminate the promotion and distribution of infant formula in hospitals, WIC, 		

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	<p>Address the community environment to increase opportunities to access healthy foods</p>	<p>and pre- and post-natal care services in support of breastfeeding for infant health</p> <p>I. Create a collaborative advocacy and outreach group to support community-wide policy changes to increase accessibility to healthy food sources, such as:</p> <ol style="list-style-type: none"> a. *Advocating for the adoption of Smart Growth Principles in all cities and the incorporation of Smart Growth Principles into general and comprehensive development plans b. *Supporting Farmers' Markets and Swap Meets to accept Food Stamp EBT cards and WIC vouchers c. *Supporting local stores to increase availability of healthy foods with recognition, promotion, healthy food availability lists/resources d. *Advocating for changes in the Farm Bill 2007 to enhance availability and cost of fruits and vegetables e. *Advocating for county and city ordinances to ban drive-through restaurants throughout the county f. *Advocating for CA Senate Bill 120: requiring chain restaurants to post nutrition information on menus and menu boards and work with local restaurants, especially fast food restaurants, to implement the bill g. Advocating for local and/or state disincentive to buy or supply unhealthy food products, such as a tax on sodas h. Advocating that food manufacturers improve labeling on foods, including content, nutritional values and portion size i. Advocating that limits be placed on the number of fast food restaurants per sq. mile j. Increasing access to and utilization of federal/state nutrition programs, such as Food Stamps, WIC, and School Meal Programs and advocating with the programs to ensure alignment between healthy messages and what the program provides k. Supporting the development of programs to link local farms to schools, hospitals, and other institutions l. Supporting direct marketing of local food products, including infrastructure development and distribution systems m. Revising county and city food service contracts so that the contractors must have healthy foods, and providing funds to support organizational improvements to be able to provide the healthy environment n. Advocating for healthy food and beverage options in county and city vending 		

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		<p>machines</p> <ul style="list-style-type: none"> o. Working with local stores to place candy behind counters p. Advocating for increased health insurance coverage for all children to ensure access to healthy weight monitoring anticipatory guidance about diet and physical activity <p>2. Strengthen city and county community planning processes to enable the promotion and creation of healthier, livable communities with access to healthy foods for all by:</p> <ul style="list-style-type: none"> a. Raising community planners, advisory groups, developers and builders awareness of the relationships between community planning and community health b. Developing a resource of ordinances that support the implementation of 'smart growth principles' in development plans c. Developing a checklist of health issues to be used to review community development proposals d. Creating an expedited application process if 'smart growth principles' are included in development plans e. Including a health element in development plans, starting with the County Conservation Plan f. Creating means for DPH, Planning agencies, and other partners to collaborate for healthy community planning 		

Goal	Strategy	Recommendations for Action	Possible Partner Agencies	Existing /Potential Funding
<p>3. To increase opportunities for physical activity for children and families</p>	<p>Enhance parent/child awareness of the importance of and means to physical activity</p>	<ol style="list-style-type: none"> 1. *Create a collaborative working group to develop and disseminate coordinated, culturally appropriate public information and education materials, addressing parenting skills, family active play methods, negative affects of TV/video time, recommended amounts and cumulative benefits of physical activity, the benefit of ‘livable communities’, targeting: <ol style="list-style-type: none"> a. Sports/physical activity programs b. Health care provider offices and institutions, including reimbursable group learning sessions c. Community- and faith-based organizations d. Licensed and unlicensed childcare settings e. (Pre-) schools, such as school newsletters f. Local workplaces g. Grocery and convenience stores h. Food Bank Coalition distribution sites 2. Create a collaborative working group to address the accessibility of family programs that integrate physical activity and nutrition education, such as: <ol style="list-style-type: none"> a. Funding the expansion to increase the availability of such programs b. Foster community cooperation to provide educational opportunities, such as volunteering c. Ensuring affordability for all members of the community d. Providing transportation and child care to enhance participation of working/single parent families 	<ul style="list-style-type: none"> - County Public Health Department - County Office of Educations and local school districts - City/County Parks and Recreation Departments - EOC, including Child Care Resource Connection - Children’s Services Network - U.C. Cooperative Extension - SLO County Medical Association - Cal Poly 	<ul style="list-style-type: none"> - Local Hospitals and affiliated Foundations - Local insurance providers, such as Blue Cross; Santa Barbara and San Luis Obispo Regional Health Authority; Tenet Healthcare; Catholic Healthcare West - American Dietetic Association - U.S. Dept. of Agriculture - CA and San Luis Obispo First 5 Commissions - U.C. Cooperative
<p>Engage organizations and institutions to increase opportunities for physical activity</p>		<p><u>(Pre-) School Environments</u></p> <ol style="list-style-type: none"> 1. Adopt a county-wide ‘gold standard’ Wellness Policy and establish monitoring and oversight of Wellness Policy implementation. Local policy standards should include: <ol style="list-style-type: none"> a. Providing all students with physical education classes, which are at least in compliance with state physical education standards for grades K-12 b. Encouraging other opportunities for physical activity during the school day to contribute to children achieving at least 60 minutes per day of vigorous physical activity c. Mandating physical education as a requirement through grade 12 d. Ensuring on-going professional development of K-12 teachers in health and physical 		

Goal	Strategy	Recommendations for Action	Possible Partner Agencies	Existing /Potential Funding
		<p>education</p> <p>e. Promoting and funding school environmental changes to coincide with educational messages, including physical activity areas and equipment, such as through participating in the Governor’s Fitness Challenge</p> <ol style="list-style-type: none"> 2. *Fund a variety of after school physical activity programs 3. *Fund training of K-12 teachers to integrate social, cultural, emotional and mental health aspects of physical activity and health education into existing curriculum 4. *Develop a toolkit for school nurses, health clerks and school counselors to address health issues related to eating behaviors and inactive lifestyles 5. Initiate a referral program for nutritionally at-risk children to counseling or other therapeutic services 6. Institute an Employee Wellness Program for school staff to increase modeling of healthy behaviors 7. Foster partnerships and volunteerism to support provision of lessons and activities 8. Enable use of school facilities outside of school hours for after-school programs and community activities, including advocating for statewide liability insurance for schools for after school programming 9. Advocate for a health and physical education college entrance requirement and its inclusion as part of general college education to increase the importance within K-12 education and to extend health learning opportunities <p><u>Community- and Faith-based Organizational Environments</u></p> <ol style="list-style-type: none"> 1. Raise community- and faith-based organization members’ awareness of nutrition and physical activity and provide culturally appropriate educational materials 2. Train staff and volunteers to provide education and resources to members and parents on nutrition and physical activity 3. Engage organization members on ways to incorporate opportunities for physical activity into organization events <p><u>Child Care Environments</u></p> <ol style="list-style-type: none"> 1. Institute physical activity standards appropriate for children’s ages while children are in care and advocate for a county-wide standard for all licensed and unlicensed providers 2. Train staff to provide education and resources to children and parents on nutrition and 	<ul style="list-style-type: none"> - YMCA - Food Bank Coalition - Youth Services Organizations - Faith-based Organizations - Latino Outreach Council - Chambers of Commerce - Local Businesses - Local media and marketing firms 	<p>Extension</p> <ul style="list-style-type: none"> - Government Agency and Organization operating funds - Public and Private Foundations and local donations

Goal	Strategy	Recommendations for Action	Possible Partner Agencies	Existing /Potential Funding
		<p>physical activity</p> <ol style="list-style-type: none"> 3. Enlist parent support to achieve the physical activity standards and encourage healthy behaviors at home through awareness raising of nutrition and physical activity and provision of culturally appropriate educational materials 4. Develop partnerships to finance procurement of equipment and materials for physical activity <p><u>Worksite Environments</u></p> <ol style="list-style-type: none"> 1. *Raise employee awareness of physical activity, as part of employee wellness, and provide culturally appropriate educational materials 2. Engage employees in ways to access and encourage physical activity, such as taking the stairs 3. Advocate for county and city employee wellness policies and programs, including screening days 4. Work with employee insurance providers to provide incentives/rewards for personal wellness <p><u>Health Provider and Institutional Environments</u></p> <ol style="list-style-type: none"> 1. *Establish employee wellness policies and programs in health care offices and hospitals, in part to model healthy behaviors for clients 2. * Work with health plan providers to train health care professionals in appropriate prevention and treatment of childhood overweight and provide toolkits, appropriate educational materials, and resources, such as the locally prepared ‘Walking Prescription’ and American Heart Association’s START Program 3. Ensure that children’s Body Mass Index (BMI) or weight-for-length is monitored in wellness check ups and provide appropriate counseling or referral 4. Participate in collaborative efforts to advocate for community-wide environmental and policy changes in support of healthier eating, including provider reimbursement rates for nutrition services 5. Create collaborations between pediatricians, allied health agencies, universities to provide family based nutrition and supervised physical activity programs 		
	Address the community environment to increase	<ol style="list-style-type: none"> 1. Create a collaborative advocacy network to support community-wide policy changes to increase accessibility to healthy food and physical activity opportunities, such as: <ol style="list-style-type: none"> a. *Advocating with County Advisory Councils/City Councils and Commissions on 		

Goal	Strategy	Recommendations for Action	Possible Partner Agencies	Existing /Potential Funding
	opportunities for physical activity	<p>'smart growth principles' and zoning as a mechanism to encouraging physical activity</p> <ul style="list-style-type: none"> b. *Establishing school walkability and bike-ability through 'safe routes to school' type programs c. Advocating for creating more and maintaining walking and biking paths d. Advocating for creating more and maintaining community and neighborhood parks and areas for activity e. Advocating for increased community walkability and bike-ability through mixed-use community planning and street safety measures f. Promoting parking in outlying areas to encourage walking g. Encouraging the commercial fitness industry to provide family programs h. Working with Housing and Neighborhood Associations to remove barriers to activity, to promote neighborhood safety, and to advocate for safe and healthy neighborhoods i. Advocating for health insurance coverage for all children to ensure access to healthy weight monitoring anticipatory guidance about diet and physical activity j. Advocating for changes in the Federal Farm Bill 2007 that enhance the viability of livable communities <p>2. Strengthen city and county community planning processes to enable the promotion and creation of healthier, livable communities with access to physical activity opportunities for all by:</p> <ul style="list-style-type: none"> a. Raising community planners, advisory groups, developers and builders awareness of the relationships between community planning and community health b. Developing a resource of ordinances that support the implementation of 'smart growth principles' in development plans c. Developing a checklist of health issues to be used to review development proposals d. Creating an expedited application process if Smart Growth Principles are included in development plans e. Including a health element in development plans, starting with the County Conservation Plan f. Creating means for DPH, Planning agencies, and other partners to collaborate for healthy community planning g. Fostering cooperation between communities and schools to increase opportunities for physical activity opportunities, to share costs, and to address liability issues 		

Examples of Actions For Healthful Eating and Regular Physical Activity within the Socio-Ecological Model of Behavior Change

Individual: Offering cooking classes; developing booths and displays for county fairs and community events; offering one-on-one counseling; targeting behavior change through media campaigns (posters, billboards, newspaper stories, and radio/television/newspaper advertisements.)

Interpersonal: Written information given to parents; training lay health advisors; developing buddy systems and support groups like weight management clubs.

Institutional and Organizational: Setting policy about healthy foods to be included in all menus planned for events; sponsoring school, faith organization, and worksite nutrition events, including healthy eating messages in newsletters and websites; adoption of worksite policies that provide time off or flex time during work hours for physical activity; establishing a policy allowing community members access to indoor and outdoor school facilities before and after regular school hours.

Community: Forming a community coalition to assess availability of high quality, nutritious foods in neighborhoods and local food establishments; working with local community groups to establish neighborhood walking trails; promoting 'mixed use' community design to increase community walkability; working with schools and public safety to create 'safe routes to school' to allow children to walk or bicycle to school.

Social Structure/Public Policy: Partnering with the Department of Agriculture to increase facilities (Farmer's Market programs) for increasing the availability of fruits and vegetables; improving the quality of all foods and beverages sold in schools; increasing incentives for the planning and development of healthier menus in communities; developing statewide media campaigns promoting the need for environments that encourage physical activity.

