

Preface

Slide 1 - Introduction

Defining Success in a Systems Approach: The San Diego County Childhood Obesity Initiative

Slide 2 - Video

Hello, I'm Dr. Don Wright, Director of the Office of Disease Prevention and Health Promotion at the U.S. Department of Health and Human Services.

Part of our mission is to translate disease prevention and health promotion science into programs and policies that improve the health of the Nation.

The Healthy People Academy was designed to help communities reach our Nation's health goals as outlined by Healthy People 2020. Which brings us to today's lesson.

Few problems are more complex than our obesity epidemic. That is why Nutrition, Physical Activity, and Obesity has been identified as one of the 12 Leading Health Indicators for this decade for Healthy People 2020.

And, that's why the topic of childhood obesity is the focus of the first Healthy People Academy lesson. I invite you to join me to learn about childhood obesity from the perspective of one community - San Diego, California- where the rates of childhood obesity have been decreasing since 2005.

The question is how are they doing it? And that's the question we posed to the leadership of the San Diego Childhood Obesity Initiative.

This lesson travels behind the scenes of the Initiative to delve into how San Diego County is moving beyond a single isolated intervention to make systems changes throughout the county.

We'll learn how the Initiative engages 7 domains, or sectors of influence, including businesses, media, and government, to work together to prevent and reduce overweight and obesity among children in San Diego.

We will also explore a key challenge this community faces. And that is when taking a systems approach, how is success defined and how is it measured?

At the Office of Disease Prevention and Health Promotion, we've been privileged to learn from leaders in San Diego about how they are collaborating and innovating, the challenges they have faced, and what they are doing that really works.

We are pleased to bring about their story and to invite you to collaborate and problem-solve around what you have learned by joining LinkedIn discussions after the lesson. Be sure to sign up to the HealthyPeople.gov listserv to stay informed about upcoming lessons and Healthy People 2020 events.

Slide 3 - Welcome and Course Overview

Welcome! This Healthy People 2020 online lesson is for:

- Students
- Health professionals
- Community leaders

This course is designed to help communities reach our Nation's health goals as outlined by Healthy People 2020.

- This course features a case study from a community working to reach Healthy People 2020 Leading Health Indicator objectives.
- This course takes participants beyond the data to explore the challenges, successes, and processes involved in creating and sustaining healthier communities.

#### Slide 4 – Course Instructions

To complete this lesson, you will need to proceed through the introduction and all four chapters. Each chapter includes a variety of resources including audio clips, call-out boxes, and links to videos and websites. You are encouraged to explore these resources, but they are not required for the completion of the lesson. Key learning activities that will help you achieve the course learning objectives include:

- Chapter 2: Exploring the 7 Domains
- Chapter 2: Exploring the 5 Processes of Collective Impact
- Chapter 3: Exploring the CDC Guide

Please note, that some resources are to non-federal websites and will include this symbol. The symbol is a box with an arrow inside it. You can read our exit disclaimer policy at <http://www.healthypeople.gov/2020/exitDisclaimer.aspx>.

#### Slide 5 - How to Obtain Continuing Education for this Lesson

Once you have completed this lesson, the following continuing education is available, free of charge, through the Centers for Disease Control and Prevention (CDC) Training and Continuing Education Online system.

- For Continuing Education Contact Hours in Health Education (CECH): Sponsored by the Centers for Disease Control and Prevention, a designated provider of continuing education contact hours (CECH) in health education by the National Commission for Health Education Credentialing, Inc. This program is designed for Certified Health Education Specialists (CHES) and/or Master Certified Health Education Specialists (MCHES) to receive up to 1 total Category I continuing education contact hours. Maximum advanced level continuing education contact hours available are 0. CDC provider number GA0082.
- For IACET Continuing Education Units (CEU): The CDC has been approved as an Authorized Provider by the International Association for Continuing Education and Training (IACET), 1760 Old Meadow Road, Suite 500, McLean, VA 22102. The CDC is authorized by IACET to offer 0.1 ANSI/IACET CEU's for this program.

After the lesson, you will be directed to CDC Training and Continuing Education Online system. Once there, you must complete the online evaluation by March 22, 2015, to receive your continuing education or the certificate of completion.

Slide 6 - What is Healthy People 2020?

[Healthy People 2020](http://healthypeople.gov/2020/default.aspx) (<http://healthypeople.gov/2020/default.aspx>) provides science-based, 10-year [national objectives](http://healthypeople.gov/2020/topicsobjectives2020/default.aspx) (<http://healthypeople.gov/2020/topicsobjectives2020/default.aspx>) for improving the health of all Americans.

For 3 decades, Healthy People has established benchmarks and monitored progress over time in order to:

- Encourage collaborations across communities and sectors.
- Empower individuals toward making informed health decisions.
- Measure the impact of prevention activities.

Healthy People 2020 contains 39 topic areas with objectives, with others still evolving. Healthy People 2020 is the result of a multiyear process that reflects input from a diverse group of individuals and organizations

Slide 7 - The Healthy People 2020 Leading Health Indicators

A smaller set of Healthy People 2020 objectives, called [Leading Health Indicators \(LHIs\)](http://healthypeople.gov/2020/LHI/default.aspx) (<http://healthypeople.gov/2020/LHI/default.aspx>), has been selected to communicate high-priority health issues and actions that can be taken to address them. There are 26 indicators organized under the 12 health topics featured on this slide.

Description of graphic: There is a grid of images and each image has text underneath. Together the images and text are displayed in four rows and three columns. The text underneath each image is for a Leading Health Indicator topic. From left to right and moving down from the first row to the bottom the Leading Health Indicator topics read as follows: Access to Health Services; Clinical Preventive Services; Environmental Quality; Injury and Violence; Maternal, Infant, and Child Health; Mental Health; Nutrition, Physical Activity, and Obesity; Oral Health; Reproductive and Sexual Health; Social Determinants; Substance Abuse; and Tobacco.

Animation: The Leading Health Indicator topic of Nutrition, Physical Activity, and Obesity becomes larger and moves to the upper right hand corner of the next slide.

Slide 8 - How does this course relate to Healthy People 2020?

This course will focus on the [Nutrition, Physical Activity, and Obesity](http://www.healthypeople.gov/2020/LHI/nutrition.aspx) (<http://www.healthypeople.gov/2020/LHI/nutrition.aspx>) Leading Health Indicator topic and its indicators related to childhood obesity.

This course covers the following indicators:

- Reduce the proportion of children and adolescents aged 2 to 19 years who are considered obese. (NWS-10.4)  
(<http://www.healthypeople.gov/2020/topicsobjectives2020/objectiveslist.aspx?topicId=29>)
- Increase the contribution of total vegetables to the diets of the population aged 2 years and older. (NWS-15.1)  
(<http://www.healthypeople.gov/2020/topicsobjectives2020/objectiveslist.aspx?topicId=29>)

Description of Graphic: The indicators have an image of a small green box with the letters LHI in the center. This image is used to indicate an objective is a Leading Health Indicator.

Slide 9 - What will I learn in this course?

This course will help you think of childhood obesity as a systems problem that requires a systems solution.

You will:

- Learn about the structure and dynamics of San Diego County's systems approach to reduce childhood obesity.
- Explore a key challenge they face: when taking a systems approach, how is success defined and measured?
- Study its structure and evaluation framework to learn how it takes into account the collective impact of multiple organizations working together toward this shared goal.

The definition of systems thinking: "Systems are dynamic architectures of interactions and synergies. Systems thinking is an approach to problem solving that views "problems" as part of a wider dynamic system. Systems thinking involves much more than a reaction to present outcomes or events. It demands a deeper understanding of the linkages, relationships, interactions, and behaviors among the elements that characterize the system." – World Health Organization. Find out more about this definition at <http://www.who.int/alliance-hpsr/resources/9789241563895/en/index.html>.

Slide 10 – Overview of Chapter 1

Introducing the Issue and the Case Study: Obesity as a Systems Problem in San Diego

This chapter provides you with an introduction to San Diego County and a brief overview of childhood obesity as a systems problem that requires a systems solution. The chapter also introduces you to the San Diego County Childhood Obesity Initiative (COI).

Description of Graphic: Graphic lists the names and titles of each chapter. At the top of the graphic it says: What will I learn in this chapter? Then it lists each chapter beginning with Chapter 1: Introducing the Issue and the Case Study. Then Chapter 2: The Case Study in Action, Chapter 3: Defining Success, and Chapter 4: Review and Next Steps.

Slide 11 - Overview of Chapter 2

The Case Study in Action: How is San Diego County Working to Reduce Childhood Obesity?

This chapter allows you to explore the COI's systems approach by learning about its 7 Domains, including specific program examples, and the main challenges faced by the COI. You will also learn about the 5 processes the COI takes to achieve collective impact.

Description of Graphic: Graphic lists the names and titles of each chapter. At the top of the graphic it says: What will I learn in this chapter? Then it lists each chapter beginning with Chapter 1: Introducing the Issue and the Case Study. Then Chapter 2: The Case Study in Action, Chapter 3: Defining Success, and Chapter 4: Review and Next Steps.

Slide 12 - Overview of Chapter 3

Defining Success: Where to Begin?

This chapter focuses on the challenge of defining and measuring success in a collaborative organization like the COI. You will also learn how the COI uses the Centers for Disease Control and Prevention's (CDC) Recommended Community Strategies and Measurements to Prevent Obesity in the United States, as a tool to evaluate its programs.

Description of Graphic: Graphic lists the names and titles of each chapter. At the top of the graphic it says: What will I learn in this chapter? Then it lists each chapter beginning with Chapter 1: Introducing the Issue and the Case Study. Then Chapter 2: The Case Study in Action, Chapter 3: Defining Success, and Chapter 4: Review and Next Steps.

Slide 13 - Overview of Chapter 4

Review and Next Steps

This chapter revisits the learning objectives for the course and provides you with resources to begin developing a systems approach to achieve collective impact in the fight against childhood obesity in your own community.

Description of Graphic: Graphic lists the names and titles of each chapter. At the top of the graphic it says: What will I learn in this chapter? Then it lists each chapter beginning with Chapter 1: Introducing the Issue and the Case Study. Then Chapter 2: The Case Study in Action, Chapter 3: Defining Success, and Chapter 4: Review and Next Steps.

Slide 14 – Now that you have an overview of the lesson

Now that you have an overview of the lesson, let's move on to the first chapter, Introducing the Issue and the Case Study: Obesity as a Systems Problem in San Diego County.

Description of Graphic: Graphic lists the names and titles of each chapter. At the top of the graphic it says: What will I learn in this chapter? Then it lists each chapter beginning with Chapter 1: Introducing the Issue and the Case Study. Then Chapter 2: The Case Study in Action, Chapter 3: Defining Success, and Chapter 4: Review and Next Steps.

## Chapter 1

### Slide 1 - Chapter 1

Introducing the Issue and the Case Study: Obesity as a Systems Problem in San Diego County

### Slide 2 - Chapter Learning Objective:

By the end of this chapter you will be able to recognize the value of using a systems approach to reduce childhood obesity.

### Slide 3 - The Facts

Between 2007-2008, 1 out of 3 children in the United States was overweight or obese.

Source: Ogden CL, Carroll MD, Curtin LR, Lamb MM, Flegal KM. 2010a. Prevalence of high body mass index in US children and adolescents, 2007-2008. *Journal of the American Medical Association* 303(3):242-249.

Learn about the Healthy People 2020 Leading Health Indicator for childhood obesity.

The Healthy People 2020 Leading Health Indicator objective NWS-10.4 tracks the proportion of children and adolescents who are considered obese (body mass index at or above the gender- and age-specific 95th percentile from the CDC Growth Charts; United States).

Baseline: In 2005 through 2008, 16.2 percent of children and adolescents ages 2 to 19 were considered obese.

Target: 14.6 percent, a 10 percent improvement over the baseline.

Note: Healthy People does not currently have an objective on the rate of children and adolescents who are considered overweight.

Learn more about the Healthy People 2020 Nutrition and Weight Status topic area at <http://healthypeople.gov/2020/topicsobjectives2020/overview.aspx?topicId=29>.

### Slide 4 - The Facts

1 out of 7 low-income, preschool-aged children is obese.

Source: Centers for Disease Control and Prevention, 2012. Overweight and Obesity: Data and Statistics. Available from: <http://www.cdc.gov/obesity/data/childhood.html>.

### Slide 5 - The Facts

These children are at a greater risk for heart disease, diabetes, and other chronic diseases including cancer and arthritis.

Source: Overweight and Obesity: Basics About Childhood Obesity. Available from: <http://www.cdc.gov/obesity/childhood/basics.html>.

## Slide 6 - Childhood Obesity is a Complex Problem

At a basic level, childhood obesity is the result of eating too many calories and not getting enough physical activity. Yet, solving the problem is much more complex.

There are a variety of factors that may influence whether or not the healthy choice is the easy choice for children and their parents.

These influencing factors fall into 4 main groups within a broader social-ecological model.

Description of Graphic: The graphic demonstrates the social-ecological model using layered circles. The largest circle is Social and Cultural Norms and Values which includes belief systems, heritage, religion, priorities, lifestyle, and body image. Within that circle is Sectors of Influence which includes government, public health and health care systems, agriculture, marketing/media, community design and safety, foundations and funders, and industry (food, beverage, physical activity, entertainment). Within that circle is Environmental Settings which includes homes, schools, workplaces, recreational facilities, foodservice and retail establishments, other community settings. Within that circle is Individual Factors, which includes demographic factors (e.g., age, gender, socioeconomic status, race/ethnicity, disability status, psychosocial factors, knowledge and skills, gene-environment interactions, other personal factors. Within Individual Factors are two circles: Physical Activity and Food and Beverage Intake.

Source: U.S. Department of Agriculture and U.S. Department of Health and Human Services. Dietary Guidelines for Americans, 2010. 7th Edition, Washington, DC: U.S. Government Printing Office, December 2010. Available from:

<http://health.gov/dietaryguidelines/dga2010/DietaryGuidelines2010.pdf>.

Slide 7 - Some of the specific factors that affect the prevalence of childhood obesity in the United States include:

- Increased availability of sugar-sweetened beverages
- Lack of daily, quality physical activity in all schools
- Limited access to affordable healthy foods
- Lack of breastfeeding support
- Increasing screen time (television, phone, computer, and other media)

Source: Centers for Disease Control and Prevention, 2012. Overweight and Obesity: A Growing Problem. Available from: <http://www.cdc.gov/obesity/childhood/problem.html>.

Slide 8 - Can a problem this complex be addressed?

Yes, but the answer has to consider the complexity of factors that influence an individual's behaviors related to food and physical activity.

The answer lies in developing a coordinated system-wide approach—one that engages all sectors of society, including:

- Individuals and families

- Educators
- Communities and Organizations
- Small and Large Businesses
- Policy makers

Slide 9 - Childhood obesity is a complex problem, meaning that no single entity has the resources or authority to bring about the necessary change.

With this in mind, let's learn more about San Diego County and the San Diego County Childhood Obesity Initiative.

Slides 10 – How does San Diego County compare to rest of the Nation?

San Diego County is:

- Diverse: Urban, Suburban, Rural, and Agricultural.  
Source: County of San Diego. (n.d.). About HHS: Geography. Available from: [http://sdcounty.ca.gov/hhsa/statistics\\_geography.html](http://sdcounty.ca.gov/hhsa/statistics_geography.html).
- Geographically Unique: To the north of San Diego County is a military base. To the east there is desert and mountains. To the south is Mexico. And, to the west is the ocean.  
Source: County of San Diego. (n.d.). About HHS: Geography. Available from: [http://www.sdcounty.ca.gov/hhsa/statistics\\_geography.html](http://www.sdcounty.ca.gov/hhsa/statistics_geography.html).
- Large: San Diego County is 4,200 square miles, about the same size as Connecticut. Source: U.S. Census Bureau: State and County QuickFacts. Data derived from Population Estimates, American Community Survey, Census of Population and Housing, State and County Housing Unit Estimates, County Business Patterns, Nonemployer Statistics, Economic Census, Survey of Business Owners, Building Permits, Consolidated Federal Funds Report. Available from: <http://quickfacts.census.gov/qfd/states/06/06073.html>.

Slides 11 – How does San Diego County compare to rest of the Nation?

Average Household Income:

- United States: \$49,445
- San Diego County: \$63,857

Source: National Data: DeNavas-Walt C, Proctor BD, and Smith JC. U.S. Census Bureau, Current Population Reports, P60-243, Income, Poverty, and Health Insurance Coverage in the United States: 2011, U.S. Government Printing Office, Washington, DC: 2012. Available from: <http://www.census.gov/prod/2012pubs/p60-243.pdf>.

County Data: U.S. Census Bureau: State and County QuickFacts. Data derived from Population Estimates, American Community Survey, Census of Population and Housing, State and County Housing Unit Estimates, County Business Patterns, Nonemployer Statistics, Economic Census, Survey of Business Owners, Building Permits, Consolidated Federal Funds Report. Available from: <http://quickfacts.census.gov/qfd/states/06/06073.html>.

## Slides 12 – How does San Diego County compare to rest of the Nation?

- The United States:
  - Population of approximately 308,745,538
  - 72.4 percent White
  - 16.3 percent Hispanic or Latino
  - 12.6 percent Black or African American
  - 6.2 percent Some other race
  - 4.8 percent Asian
  - 2.9 percent 2 or more races
  - 0.9 percent American Indian and Alaska Native
  - 0.2 percent Native Hawaiian and other Pacific Islander
- San Diego County:
  - Population of approximately 3,095,313
  - 64 percent White
  - 32 percent Hispanic or Latino
  - 5.1 percent Black or African American
  - 13.6 percent Some other race
  - 10.9 percent Asian
  - 5.1 percent 2 or more races
  - 0.9 percent American Indian and Alaska Native
  - 0.8 percent Native Hawaiian and other Pacific Islander

Source: National Data: U.S. Census Bureau, 2010 Census. Available from:

[http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=DEC\\_10\\_DP\\_DPDP1&prodType=table](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=DEC_10_DP_DPDP1&prodType=table).

Local Data: U.S. Census Bureau: State and County QuickFacts. Data derived from Population Estimates, American Community Survey, Census of Population and Housing, State and County Housing Unit Estimates, County Business Patterns, Nonemployer Statistics, Economic Census, Survey of Business Owners, Building Permits, Consolidated Federal Funds Report. Available from: <http://quickfacts.census.gov/qfd/states/06/06073.html>.

### Slide 13 - Childhood Obesity in San Diego

Similar to the Nation, San Diego County has experienced high rates of childhood obesity.

In 2005, more than 1 in 4 fifth, seventh, and ninth graders in San Diego County was overweight or obese.

Source: Babey SH, Wolstein J, Diamant AL, et al. (2011). A Patchwork of Progress: Changes in Overweight and Obesity among California 5th, 7th, and 9th Graders, 2005-2010. UC Los Angeles: UCLA Center for Health Policy Research. Available from: <http://escholarship.org/uc/item/8wr3t0zc>.

### Slide 14 - Fighting Childhood Obesity in San Diego

The alarming rates of childhood obesity led to the development a comprehensive Action Plan (<http://ourcommunityourkids.org/media/17878/action%20plan%20revision%202010%20final.pdf>) and creation of the San Diego County Childhood Obesity Initiative (COI). The COI was formed to implement the Action Plan by creating, supporting, and mobilizing partnerships among multiple domains; providing leadership and vision; and coordinating county-wide efforts to prevent and reduce childhood obesity.

The mission of the COI, as a public-private partnership, is to reduce and prevent childhood obesity in San Diego County, California, by creating healthy environments for all children and families through advocacy, education, policy development, and environmental change.

The COI is facilitated by Community Health Improvement Partners (CHIP), a non-profit organization that assesses and addresses the region's priority health needs through collaboration.

Watch this video to learn more about the COI at <http://www.youtube.com/watch?v=K-HWBZMPxB8>.

Slide 15 - The COI carries out its mission by:

- Convening organizations from multiple sectors to collaborate on programs and policy development.
- Providing an overarching strategy for reducing childhood obesity that informs long-term goals of programs and policy development activities among the partners it brings together.
- Providing a centralized infrastructure through dedicated staff to manage and coordinate ongoing collaboration efforts.
- Establishing shared measures for success among partners and stakeholders.

Slide 16 - The COI's mission demonstrates a systems approach to promoting a healthy environment.

The COI's steering committee realized from the start that a person's health decisions aren't made in a vacuum. To change behaviors, they knew a systems approach that fosters a supportive environment was needed. They used the social-ecological model to illustrate the multiple influencing factors that must be taken into consideration.

More information on the social-ecological model is available on Chapter 2, Slide 6.

Audio of Cheryl Moder, Senior Director, Collective Impact, Community Health Improvement Partners, talking about making healthy choices: The core group informing the development of the COI understood from the beginning that even though individual behavior change is very important, if our environments—the places where people live, work, learn, play, and worship—don't support health, then it's difficult and in some cases impossible for families to make healthy choices in their daily lives.

Slide 17 - The COI's approach seems to be making a difference.

"We've seen a reduction in childhood obesity between 2005 and 2010. It may be too early to call that a trend, but we're very excited about this." —Cheryl Moder, Senior Director, Collective Impact, Community Health Improvement Partners

Surely childhood obesity reduction interventions had been in place prior to 2005. What was different about the COI? What can we learn from it that can help other communities successfully reduce childhood obesity?

Let's start by learning more about how San Diego County's systems approach works.

Read the report "A Patchwork of Progress," which documented the reduction in rates of childhood obesity in San Diego County at

[http://www.publichealthadvocacy.org/research/patchworkdocs/OFT%20brief\\_final.pdf](http://www.publichealthadvocacy.org/research/patchworkdocs/OFT%20brief_final.pdf).

Slide 19 – Chapter 1 Complete!

Now that you have completed this chapter, you are able to recognize the value of working to reduce childhood obesity in a community using a systems approach.

In the next chapter, you will explore the COI's systems approach more in-depth by learning about its 7 domains. You will also see how this approach works to achieve collective impact.

## Chapter 2

### Slide 1 - Chapter 2

The Case Study in Action: How is San Diego County Working to Reduce Childhood Obesity?

### Slide 2 - Chapter Learning Objective:

By the end of this chapter you will be able to identify the 5 processes of a successful systems approach.

### Slide 3 – Let’s Begin by Exploring the work of the San Diego County Childhood Obesity Initiative

Let’s begin by exploring the work of the San Diego County Childhood Obesity Initiative more closely.

### Slide 4 - San Diego County Childhood Obesity Initiative’s 7 Domains

To achieve the collaborative intent of the Childhood Obesity Initiative, its [Action Plan](http://ourcommunityourkids.org/media/17878/action%20plan%20revision%202010%20final.pdf) (<http://ourcommunityourkids.org/media/17878/action%20plan%20revision%202010%20final.pdf>) identifies priorities and strategies in 7 domains, or sectors of influence.

Description of Graphic: There are animated puzzle pieces that appear on the slide and represent the 7 domains including Government, Health Care, Early Childhood, Business, Schools and After School, Community, and Media. The COI logo appears on top of puzzle pieces of the 7 domains. The COI logo has the 7 domain puzzle pieces connected. The San Diego County Childhood Obesity Initiative name appears to the right of the connected puzzle pieces, and the text “Working Together to Share a Healthy Future Facilitated by Community Health Improvement Partners” appears below.

### Slide 5 - San Diego County Childhood Obesity Initiative’s 7 Domains

Explore the scope of each domain and its programs by clicking on each of the domain buttons. Please review at least 3 domains before moving on.

### Slide 6 - Government

The Government Domain offers a forum for city, county, and tribal governments to advance policy and planning strategies that help establish active, healthy, and thriving communities. This domain focuses on policy and environmental change at the municipal and regional levels.

Domain Highlight: Land Use and Transportation Planning for Healthy Communities. COI Government Domain partners support local communities to integrate health into planning documents, including municipal general plans, a safe-routes-to-school strategic plan, and the regional transportation plan.

Hear about the Government Domain from Lindsey.

Audio of Lindsey Cox McDermid, M.S., Program Director, Chronic Disease and Health Equity Unit, County of San Diego Health and Human Services Agency: Our focus is on engaging municipalities throughout San Diego County to establish and promote policies and community environments that allow families to live healthier lives.

## Slide 7 - Health Care

The Health Care Domain engages health care systems (including health plans and providers) to include obesity prevention in routine clinical practice, support local resources, advocate for healthier communities, and model healthy eating and active living in all health care settings.

Domain Highlight: The San Diego Regional Immunization Registry (SDIR). When the COI began, the only way to track Body Mass Index (BMI) in children in the County was through FITNESSGRAM® testing. Mandated by the California Department of Education, this testing is conducted only on students in 5th, 7th, and 9th grades.

In an effort to develop a surveillance mechanism that is more reliable and includes children of all ages, the SDIR, managed by the County of San Diego Health and Human Services Agency, added the capacity for BMI reporting in June 2008. The addition of height and weight to the SDIR made it one of the first immunization registry-based BMI reporting systems in the Nation. Supported by the COI, this feature provides the opportunity to enhance obesity surveillance, prevention, and treatment.

Hear about the Health Care Domain from Cheri.

Audio of Cheri Fidler, Director, Center for Healthier Communities, Rady Children's Hospital: Our goal is to engage our healthcare systems, health plans, and providers to support and advocate for healthy systems, policy, and environmental improvements as well as to positively impact provider attitudes and support their best practices and innovation related to childhood obesity.

## Slide 8 - Early Childhood

The Early Childhood Domain is comprised of early childhood educators and stakeholders committed to the prevention and reduction of childhood obesity. This domain focuses on implementing wellness policies in childcare and preschool settings that promote nutrition and age-appropriate physical activity, as well as providing information and support to families of young children.

Domain Highlight: Farm to Preschool Program. The Farm to Preschool Program represents an ongoing effort to promote access to healthy, fresh food and improve preschoolers' eating habits. The COI partners include the Occidental College Urban and Environmental Policy Institute, the YMCA Childcare Resource Service, and North County Community Services.

Check out this video about the Farm to Preschool Program at [http://www.youtube.com/watch?feature=player\\_embedded&v=XZsbK6seXJQ#](http://www.youtube.com/watch?feature=player_embedded&v=XZsbK6seXJQ#).

Hear about the Early Childhood Domain from Debbie.

Audio of Debbie Macdonald, Executive Director, YMCA Childcare Resource Service: Our focus is on improving access to nutritious foods and active lifestyles to support children ages 0 to 5, their families, and their early care and education providers.

## Slide 9 - Business

The Business Domain operates with the purpose of engaging businesses in the implementation of policy and environmental strategies that contribute to the prevention and reduction of childhood obesity. Through this domain, partners strategize ways to engage the business community to support healthy eating and active living in all business settings.

Domain Highlight: Cilantro to Stores Program. The Cilantro to Stores Program encouraged the owners of 4 convenience stores in the underserved area of Western Chula Vista to dedicate a percentage of their square footage to the sale of locally grown fresh produce. Individual stores worked in partnership with the COI and the City of Chula Vista to install new equipment and furnishings to create the capacity to stock, merchandise, and sell fresh fruits and vegetables, which are provided by local certified farmers. This program contributes to the local economy for both farmers and local corner stores and to the health of the community by providing more healthy food choices.

Description of Graphic: There is a poster from the Cilantro to Stores program. At the top of the poster is the tagline: Eat local, buy fresh! Underneath is the text: Fresh farmed fruit and vegetables are now available at the following stores. The poster then shows four maps for the following stories: 1) Broadway Liquor: 151 Broadway; 2) Bobar Market & Gas #8: 600 F Street; 3) Sunset Market and Liquor: 985 Broadway; 4) Eagle Liquor Market: 1296 3<sup>rd</sup> Avenue. Beneath the maps the poster shows logos for: SANDAG, County of San Diego Health and Human Services Agency, Healthy Works: Paths to Healthy Living, City of Chula Vista, San Diego County Childhood Obesity Initiative, Community Health Improvement Partners, and Champions for Change. The bottom of the poster states that it was made possible by funding from the U.S. Department of Health and Human Services, through the County of San Diego. Administered by the City of Chula Vista in conjunction with the San Diego County Childhood Obesity Initiative facilitated by CHIP. For more information, call 619-409- 5888.

Hear about the Business Domain from Cheryl.

Audio of Cheryl Moder, Senior Director, Collective Impact, Community Health Improvement Partners: We improve food and physical activity environments by building new collaborations between businesses and other Domain partners and by raising awareness about healthy workplace environments.

Slide 10 - Schools and After School

The Schools and After School Domain unites school districts, staff and faculty, administrators, after-school programs, parents, and other key stakeholders in strategies for creating healthy and active learning environments. Through this domain, the COI improves food access, healthy eating, and physical activity by supporting district wellness policies and incorporating locally grown produce into school food programs.

Domain Highlight: The Farm to School Taskforce. The San Diego County Farm to School Taskforce is a collaborative effort to increase consumption of local, nutritious, seasonal foods and to improve food literacy within schools. The Taskforce seeks to improve the quality of school meals and supports the incorporation of whole and locally sourced foods into school meal programs. It brings together school food service directors, farmers, distributors, chefs, public health professionals, and other community partners with a shared vision and a common agenda.

Hear about the Schools and After School Domain from Deirdre.

Audio of Deirdre Kleske, Health Educator, California Project LEAN: We promote good nutrition and opportunities for physical activity in all school settings by supporting implementation of effective local school district wellness policies. We support and encourage schools to make a broad, sustained commitment to wellness.

#### Slide 11 - Community

The Community Domain enlists and empowers community, faith, and youth organizations—as well as community residents—to create neighborhood environments that support healthy eating and active living.

Domain Highlight: YEAH! Program. The Youth Engagement & Action for Health (YEAH!) program demonstrates the importance of youth engagement. As part of YEAH!, youth are trained to conduct neighborhood assessments, select a meaningful community improvement project, and advocate for change with local policy and decision makers. Engaging neighborhood youth and adults creates a strong community of people who become empowered to collaborate and work for changes that support a healthier lifestyle.

Watch this video by the YEAH! Project participants at [http://www.youtube.com/watch?feature=player\\_embedded&v=zqQmfAD4Zrw#](http://www.youtube.com/watch?feature=player_embedded&v=zqQmfAD4Zrw#).

Hear about the Community Domain from Jennifer.

Audio of Jennifer Tracy, M.N.P.L., Executive Director, San Diego Hunger Coalition: We improve food and physical environments by supporting and building the capacity of community residents and community-based organizations to advocate for healthy policies and environmental change.

#### Slide 12 - Media

The Media Domain provides ongoing outreach and education to the media about policy and environmental change as they relate to childhood obesity. The domain works to create a common language for partners when addressing the issue of childhood obesity.

Domain Highlight: 5-2-1-0 Every Day! Messaging Campaign. The 5-2-1-0 Every Day! campaign encourages healthy eating and active living by encouraging 4 daily behaviors, which are evidence-based and recommended to promote good health:

- 5 or more servings of fruits and vegetables
- 2 hours or less of recreational screen time (Keep the TV and computer out of the bedroom. No screen time for children under age 2.)
- 1 hour or more of physical activity
- 0 sugary beverages, and more water and low-fat milk

This campaign is implemented by COI partners in all domains and reaches community residents through schools, preschools, public health, physicians, and community-based organizations. The 5-2-1-0 Every Day! campaign was developed by the Let's Go program in Portland, Maine, and was piloted in

San Diego County by the San Diego Healthy Weight Collaborative, a project of the Health Resources and Services Administration and the National Initiative for Children's Healthcare Quality.

Watch a video on the 5-2-1-0 Everyday! Messaging Campaign at <http://www.youtube.com/watch?v=wbffVuNK9To>.

Hear about the Media Domain from Dan.

Audio of Dan Bennett, Communications Manager, Healthy Works: Community Transformation Grant, SNAP-Ed, County of San Diego Health and Human Services Agency: We work to reframe media coverage of childhood obesity with a focus on policy and environmental change and assure that partners speak the same language regarding obesity prevention.

#### Slide 13 – Additional Examples

Within and across each domain, the COI works to address the complex, influencing factors that contribute to childhood obesity. Here are a few additional examples of activities:

**Government:** The COI calls on local governments to adopt 24 strategies, including ensuring that all government-owned or -leased property has nutritious food options in vending machines, cafeterias, concessions, etc., and establishing procurement practices and policies that prioritize nutritious foods and local agriculture.

**Health Care:** The COI calls health care systems and providers to action through 12 strategies, including partnering with Women, Infants, and Children (WIC) agencies and other food assistance programs to increase availability of affordable, nutritious foods and deliver uniform nutrition messaging.

**Business:** The COI calls on business and local government to promote breastfeeding as the healthiest first food by implementing workplace lactation policies that provide safe, private, and clean breastfeeding accommodations.

#### Slide 14 - Additional Examples

Within and across each domain, the COI works to address the complex, influencing factors that contribute to childhood obesity. Here are a few additional examples of its activities:

**Schools and After School:** The COI calls for schools and after-school providers to make a broad, sustained commitment to wellness by implementing nutrition education, physical education, and physical activity programs on an ongoing, year-round basis to offer student opportunities to learn and practice healthy behaviors, and to adopt the CDC's Coordinated School Health Model.

**Early Childhood:** The COI calls the early childhood community to action through 5 strategies, including adopting and implementing wellness policies that include limited screen time, healthy role modeling by staff and caregivers, adequate physical activity each day including outdoor free play time, and healthy celebrations.

Slide 15 - Now that you've had a chance to explore the 7 domains of the San Diego County Childhood Obesity Initiative, you may be wondering:

“How have they pulled it off?”

#### Slide 16 - The COI Takes a Unique Approach to Collaboration

Collaboration is not a new concept.

Public health agencies, nonprofits, and other organizations participate in joint efforts and partnerships in communities across the United States.

#### Slide 17

Yet traditional collaboration efforts and funding mechanisms among organizations create isolated impact.

Isolated impact happens when:

- Organizations compete for resources to produce the greatest independent impact.
- Large-scale change depends on expanding single organizations or programs.
- Evaluation efforts attempt to isolate the impact of a particular organization or program.

#### Slide 18

The COI differs from traditional collaboration efforts by calling for organizations from private and public sectors alike to commit to solving the problem of childhood obesity together by:

- Adjusting policies.
- Implementing new programs.
- Reorganizing resources to comprehensively incorporate healthy eating and active living opportunities.

#### Slide 19

Through its systems approach the COI is working to achieve large-scale social change—collective impact—by creating a social and physical environment that supports healthy behaviors.

#### Slide 20 - The 5 Processes to Achieving Collective Impact

The idea of collective impact was introduced by a [recent article](http://www.ssireview.org/articles/entry/collective_impact) (2011) ([http://www.ssireview.org/articles/entry/collective\\_impact](http://www.ssireview.org/articles/entry/collective_impact)) in the Stanford Social Innovation Review. This article helps translate how systems approaches, like the COI, work by presenting 5 processes involved in working collaboratively to achieve collective impact.

These 5 processes help describe the COI's efforts in the fight against childhood obesity. Click on each one to read more.

- Establishing a common Agenda: All partners have a shared vision for change.
- Undertaking Mutually Reinforcing Activities: Each partner's efforts fit into an overarching plan.

- Developing Trust through Continuous Communication: There is a sense of trust among participating partners.
- Serving as a Neutral Convener: There is a dedicated staff, separate from the participating partner organizations, that plans, manages, and supports the initiative.
- Developing Shared Measurement Systems: All partners agree on the ways success will be measured and reported.

Slide 21 - Learning Activity: Exploring the 5 Processes of Collective Impact at Work in the COI

Let's take a look at how collective impact works in action. In this section of Chapter 2, you will read descriptions of four different activities of the Childhood Obesity Initiative. After reading each description, choose all of the 5 collective impact processes that you think best match the statement.

Slide 22 - 1. The COI provides an overarching strategy for reducing childhood obesity that informs programs and policy development among partners.

The COI originated after a thorough formative research process that resulted in the Call to Action: San Diego County Childhood Obesity Initiative Action Plan (Action Plan).

A local non-profit organization—Community Health Improvement Partners (CHIP)—was engaged to facilitate the development of the Action Plan and the resulting public-private partnership. CHIP has extensive experience building multi-sector partnerships and provides a neutral and inclusive venue in which diverse partners work together to realize shared goals.

The Action Plan

(<http://ourcommunityourkids.org/media/17878/action%20plan%20revision%202010%20final.pdf>) is the roadmap for the COI: it outlines the mission, goals, and objectives and includes the 7 domains the COI believes have the most influence in creating environments that support healthy choices and behavior change.

Slide 23 - 1. The COI provides an overarching strategy for reducing childhood obesity that informs programs and policy development among partners.

The process to develop the Action Plan included:

- A rigorous literature review of effective strategies to reduce and prevent childhood obesity.
- One-on-one key informant interviews with experts from a variety of fields.
- Expert workgroup meetings with more than 200 people, which included a wide array of participants ranging from early childhood educators to members of the business community.
- 6 regional community meetings to obtain feedback from more than 300 residents representing various populations.

A key to the success of establishing the COI was the initial and ongoing support of the publicly elected County of San Diego Board of Supervisors. Their ability to frame the issue of childhood obesity as a significant countywide health issue allowed the COI to successfully engage a variety of partners beyond the health sector.

Slide 24 - 1. The COI provides an overarching strategy for reducing childhood obesity that informs programs and policy development among partners.

Choose 1 or more collective impact processes this strategy uses from the list below:

- Establishing a Common Agenda
  - When chosen, this response appears: That's right! This formative research process allowed the COI to incorporate stakeholder voices so that all partners would have a shared vision for change. In addition, political support from the county brought in nontraditional stakeholders from the beginning.
- Undertaking Mutually Reinforcing Activities
  - When chosen, this response appears: Correct! By developing a roadmap for the COI through the Action Plan, COI partners can plan for activities that fit within an overarching plan.
- Developing Trust through Continuous Communication
  - When chosen, this response appears: Yes, in a way. The formative research process allowed a variety of stakeholders to weigh in on the complex issue of childhood obesity in the county. Inclusion in the planning process is the first step toward building trust.
- Serving as a Neutral Convener
  - When chosen, this response appears: Somewhat. The COI needed an overarching strategy before being able to convene different stakeholders together. However, the development of this overarching strategy does not really showcase the COI's use of a neutral convener.
- Developing Shared Measurement Systems
  - When chosen, this response appears: Not quite. Although the COI needs an overarching strategy to develop shared measurement systems, the development of this overarching strategy does not explain how the COI uses shared measurement systems.

Slide 25 - 2. The COI works by bringing together organizations from multiple sectors as partners to collaborate on programs and policy development.

The COI is facilitated by Community Health Improvement Partners (CHIP). Using its established model of collaboration, CHIP creates new and strengthens existing relationships among traditional and non-traditional stakeholders with the recognition that complex community problems are best solved when people work together.

- CHIP serves as a neutral convener that receives core funding from the County of San Diego, The California Endowment, and Kaiser Permanente.
- The COI's purpose is to bring together partners to implement Action Plan strategies and facilitate communication and trust for long-term collaboration efforts.
- Organizations collaborating together include both traditional partners in the fight against childhood obesity, such as health care providers and schools, and more nontraditional partners, such as media and business.

Slide 26 - 2. The COI works by bringing together organizations from multiple sectors as partners to collaborate on programs and policy development.

Choose 1 or more collective impact processes this strategy uses from the list below:

- Establishing a Common Agenda
  - When chosen, this response appears: Yes! CHIP staff members support partners in every sector as they agree on and establish joint efforts in their policy and programs to reduce childhood obesity.
- Undertaking Mutually Reinforcing Activities
  - When chosen, this response appears: Not quite. This strategy does not showcase how the COI carries out mutually reinforcing activities.
- Developing Trust through Continuous Communication
  - When chosen, this response appears: That's right. By helping to establish long-term collaboration efforts among various partners, the COI facilitates trust and relationship building.
- Serving as a Neutral Convener
  - When chosen, this response appears: Correct! CHIP facilitates relationship building among partners by bringing them together, assisting in their planning efforts, and giving them credit in all shared successes.
- Developing Shared Measurement Systems
  - When chosen, this response appears: Not quite. This strategy does not showcase how the COI develops shared measurement systems.

Slide 27 - 3. The COI provides a centralized infrastructure through dedicated staff to manage and coordinate ongoing collaboration efforts.

By supporting a structured approach to addressing childhood obesity in the county (for example, by creating a guiding Action Plan and helping partners develop annual work plans), the COI—as facilitated by the Community Health Improvement Partners (CHIP)—is able to coordinate the implementation of the Action Plan strategies and intervention recommendations.

By doing this, the CHIP staff members help leverage limited resources to ensure all partners are working in sync with instead of in competition for limited resources.

The Community Healthy Improvement Partners (CHIP) is a nonprofit organization whose mission is to assess and address priority health needs through collaboration. To learn more, visit: [www.sdchip.org](http://www.sdchip.org).

Slide 28 - 3. The COI provides a centralized infrastructure through dedicated staff to manage and coordinate ongoing collaboration efforts.

Choose 1 or more collective impact processes this strategy uses from the list below:

- Establishing a Common Agenda
  - When chosen, this response appears: Sort of. This strategy helps the COI carry out an already-established common agenda.
- Undertaking Mutually Reinforcing Activities
  - When chosen, this response appears: Not quite. This strategy doesn't showcase how the COI carries out mutually reinforcing activities.

- Developing Trust through Continuous Communication
  - When chosen, this response appears: Yes, in a way. The development and use of the annual work plans allows partners across various sectors to follow a basic level of accountability across the COI, which helps to develop trust among a wide range of stakeholders.
- Serving as a Neutral Convener
  - When chosen, this response appears: That's right! CHIP staff members are not part of the county government or any one partner, which allows them to serve a neutral role within the COI.
- Developing Shared Measurement Systems
  - When chosen, this response appears: Yes, in a way. The development and use of the annual work plans allow partners across various sectors to agree on how to report on their process and achievements.

Slide 29 - 4. The COI is establishing shared measures for success among COI partners and stakeholders.

The COI has developed an evaluation plan with 3 goals:

1. Provide meaningful and useful feedback to the COI to refine and enhance its activities.
2. Assess changes in targeted environmental and policy factors that are expected to affect childhood obesity.
3. Use the ultimate outcome measure, the distribution of childhood obesity, for program planning and benchmarking progress.

Through this focused evaluation framework, the COI is beginning to facilitate the concept of shared measurement of childhood obesity reduction and prevention outcomes across the entire county.

Slide 30 - 4. The COI is establishing shared measures for success among COI partners and stakeholders.

Choose 1 or more collective impact processes this strategy uses from the list below:

- Establishing a Common Agenda
  - When chosen, this response appears: Sort of. This strategy helps the COI carry out an already-established common agenda.
- Undertaking Mutually Reinforcing Activities
  - When chosen, this response appears: Not quite. This strategy doesn't showcase how the COI carries out mutually reinforcing activities.
- Developing Trust through Continuous Communication
  - When chosen, this response appears: Not quite. This strategy doesn't showcase how the COI develops trust through continuous communication.
- Serving as a Neutral Convener
  - When chosen, this response appears: Not quite. This strategy doesn't showcase how the COI functions as a neutral convener.
- Developing Shared Measurement Systems

- When chosen, this response appears: That's right! Although the COI has not been able to fully implement its evaluation plan it is working toward developing shared measurement systems.

## Slide 31

To recap, click on each of the collective impact processes below to hear Cheryl discuss how collective impact has been achieved at the ground level.

**Establishing a Common Agenda:** All partners have a shared vision for change.

- Audio of Cheryl Moder, Senior Director, Collective Impact, Community Health Improvement Partners: We were asked by County government leaders to develop a multi-disciplinary, comprehensive plan that didn't recreate the wheel, but that was built on current efforts that we knew were underway.

**Undertaking Mutually Reinforcing Activities:** Each partner's efforts fit into an overarching plan.

- Audio of Cheryl Moder, Senior Director, Collective Impact, Community Health Improvement Partners: We don't expect every organization we work with to be working on all the COI strategies or even to support them all. It's just finding the sweet spot - that one place, the common ground – where we can work with that organization on shared goals.

**Developing Trust through Continuous Communication:** There is a sense of trust among participating partners

- Audio of Cheryl Moder, Senior Director, Collective Impact, Community Health Improvement Partners: We have worked for years to build trust with our partners. Through regular meetings and experience working together we've built a common belief system grounded in our shared motivation. Building relationships and trust takes time. Our partners have become confident that they will be treated fairly and that decisions will be made objectively based on our common goals. Our model depends on our partners coming to the table voluntarily and checking their agendas at the door.

**Serving as a Neutral Convener:** There is a dedicated staff, separate from the participating partner organizations, who plans, manages, and supports the initiative.

- Audio of Cheryl Moder, Senior Director, Collective Impact, Community Health Improvement Partners: The most important thing we do is to connect the dots — by creating, supporting, and mobilizing partnerships across multiple sectors or domains. We aim to break down silos and encourage partners to work together in new and innovative ways.

**Developing Shared Measurement Systems:** All partners agree on the ways success will be measured and reported.

- Audio of Cheryl Moder, Senior Director, Collective Impact, Community Health Improvement Partners: Our staff provides technical assistance and support to our partners to help them

implement and evaluate the COI strategies. We oversee the evaluation and other ancillary activities relating to the Initiative.

#### Slide 32

Now that you have seen how the COI is working to achieve collective impact, it is important to note that the work of the COI has been filled with challenges and lessons learned.

Luckily, the COI leadership has been very open and transparent about the path they have forged.

#### Slide 33

In this section of the course, you can explore the COI's major challenges by "asking" the COI about them yourself.

Click on each question below to hear Cheryl talk about the COI's approach to the various challenges it has faced.

When it comes to outreach, how have you been able to bring together such diverse partners?

- Audio of Cheryl Moder, Senior Director, Collective Impact, Community Health Improvement Partners: Engaging partners and support from various Domains can be difficult. Elected officials, organizations, partners, and other factors within the community are constantly changing, so it's important to stay flexible and informed. We have to approach every individual or organization differently and understand how to frame our issue depending on who they are and where we have overlapping agendas.

We might change the way we explain the importance of childhood obesity and the COI based on the individual or organization. For example, if we're approaching an elected official about changing policy related to community gardens, we might emphasize the importance of improving access to healthy food or the neighborhood-building aspects of community gardens, or we might point out that community garden raise property values and decrease crime. Our messages are framed based on our audiences and their intrinsic values and interests.

How do you keep your partners engaged on a long-term basis?

- Audio of Cheryl Moder, Senior Director, Collective Impact, Community Health Improvement Partners: Keeping partners actively involved is a common challenge. We try not to be prescriptive and to let work happen organically within different Domains, as long the work fits within the overall Action Plan. We also work on building shared accountability through work plans, which CHIP staff members help to manage and implement.

How do you fund the coordination efforts of the COI?

- Audio of Cheryl Moder, Senior Director, Collective Impact, Community Health Improvement Partners: When you are breaking new ground with what you are doing it can be challenging to make your case to funders and get needed support. We are 100% grant-funded, with core funding provided by the County of San Diego, the California Endowment, and Kaiser

Permanente. Fortunately, we've had some consistently supportive and ongoing funding sources, but we also seek additional funding as part of our contract with the County.

Part of our challenge is to change the mindset of potential funders to help them recognize the value of funding collective impact versus more traditional, programmatic funding. Breaking the mold of traditional funding mechanisms and keeping potential partners from seeing us as competition can also be a challenge. As a result we try to lead by example by serving as a neutral convener and demonstrating credibility, integrity, and follow-through.

As part of our contract with the County, we assist partners in their childhood obesity-related funding efforts. We write letters of support, provide fundraising technical assistance, and inform them of funding opportunities that might be a good match for them. Lastly, we handle potential conflicts of interest or competition in fundraising by bringing the funding opportunities we are interested in to our leadership council for review and approval. In this way, the issue of competition is taken care of transparently and with a due process.

How do you reframe childhood obesity from an individual to a community issue?

- Audio of Cheryl Moder, Senior Director, Collective Impact, Community Health Improvement Partners: It's not uncommon for the public and the media to blame parents, not the environment, for childhood obesity. We have to reframe the issue and really encourage a broader view of childhood obesity that recognizes the social determinants of health and root causes of this problem.

How do you recognize and share credit with partners when taking a collective impact approach?

- Audio of Cheryl Moder, Senior Director, Collective Impact, Community Health Improvement Partners: Because we have so many partners and organizations involved, it can be difficult to determine what the COI can take credit for and how to best recognize our partners. Within each of our Domain work plans, we encourage partners to identify how they want to be recognized for their work. Since the beginning we've been committed to the notion of horizontal integration — that is, gathering partners together through high-level leadership, but letting partners take ownership over their roles and responsibilities. It's important to note, however, that it took time to develop trust with partners, especially during the first 2 years.

Slide 34

Before moving on to the next part of the course—focusing on evaluation—listen to one more COI challenge.

How do you measure your overall work across such a wide range of activities?

- Audio of Cheryl Moder, Senior Director, Collective Impact, Community Health Improvement Partners: "The COI's focus is on creating healthier communities through policy development and environmental change. We have found that traditional research methods haven't really fit our work and believe that a new research paradigm - an approach for defining and measuring success - is necessary to measure community prevention efforts."

Slide 35 - Chapter 2 Complete!

Now that you have completed this chapter, you are able to identify the 5 processes of a successful systems approach.

The next chapter will discuss ways to define and measure success and will introduce a toolkit from the Centers for Disease Control and Prevention (CDC) that can help.

## Chapter 3

### Slide 1 - Chapter 3

Defining Success: Where to Begin?

### Slide 2 - Chapter Learning Objectives

By the end of this chapter you should be able to outline an evaluation framework for addressing the collective impact of a systems approach to reducing childhood obesity.

You should also be able to use the Centers for Disease Control and Prevention's (CDC) "Recommended Community Strategies and Measurements to Prevent Obesity in the United States: Implementation and Measurement Guide" to evaluate specific strategies to reduce childhood obesity and determine at least 2 evaluation measures to assess progress.

### Slide 3

Traditional collaboration efforts and funding mechanisms typically require that organizations assess their work and provide a report of outcomes throughout their funding cycle.

For example, a program may be required to report the number of participants in a program 12 months into a 2-year project.

This process may not be as informative for evaluating a more complex approach like the COI because the goal is system-wide change instead of a single isolated impact.

### Slide 4 - In an approach like the COI:

- No one organization, not even the convener, has enough control over all of the factors or stakeholders involved in reducing childhood obesity.
- Part of the systems approach involves changing communities at multiple levels ranging from policies to social norms.

There are few existing tools to measure success in approaches like this.

### Slide 5 - This doesn't mean that evaluation is impossible.

In fact, assessing progress, adjusting activities, and looking for long-term shifts in social norms and community health indicators are necessary for a successful initiative.

However, using a systems approach does mean we need to think differently about how to define and measure success.

Keeping this in mind, let's look at how the COI has developed a plan to evaluate its work. From there, we'll revisit the relationship between strategy and evaluation.

Listen to Cheryl talk about why measuring success takes time.

Audio of Cheryl Moder, Senior Director, Collective Impact, Community Health Improvement Partners: We understand that this work is going to take time. It took several decades for the rates of childhood obesity to rise, and it's certainly going to take us time to change our communities in a way that will support health and lead to a reduction in these rates.

#### Slide 6 - Defining and Measuring Success: The San Diego County Childhood Obesity Initiative's Experience

In order to determine its evaluation framework, the COI began by convening an evaluation committee comprised of academics and public health professionals, including:

- San Diego State University
- University of California San Diego
- County of San Diego Community Health Statistics Unit
- Health Policy Consulting Group
- Center for Latino Research and Health Promotion, San Ysidro Health Center

The COI was developed from the Call to Action: San Diego County Childhood Obesity Action Plan (Action Plan) at

<http://www.ourcommunityourkids.org/media/17878/action%20plan%20revision%202010%20final.pdf>, which involved a lengthy formative research process.

Slide 7 - In this chapter, we're going to cover the COI's evaluation plan that was developed as a result of the Action Plan and the COI's work.

The COI evaluation plan includes process evaluation components and medium- and long-term outcome assessments and will be fully implemented when funding becomes available.

While direct causation between COI strategies and childhood obesity rates is difficult to determine, the goal of the evaluation plan is to focus on the correlation between COI strategies and childhood obesity in the county.

Learn more about the COI's evaluation activities at

<http://www.ourcommunityourkids.org/resources/evaluation-committee.aspx>

Slide 8 - The COI evaluation plan has the following 3 overarching goals:

1. Use the outcome measure of the distribution of childhood obesity to benchmark progress.
2. Provide meaningful and useful feedback to help the COI refine and enhance its activities.
3. Assess changes in targeted environmental and policy factors that affect childhood obesity.

Let's look at each of these goals more closely.

Slide 9 – Use the outcome measure of the distribution of childhood obesity to benchmark progress.

The first level of measurement focuses on a direct outcome measure—body mass index (BMI).

When the COI began, the best way to track BMI in children in the county was through the state-mandated FITNESSGRAM® testing in schools, conducted in 5th, 7th, and 9th grades.

FITNESSGRAM is a health-related physical fitness assessment that measures three components important to overall health and function:

- Aerobic capacity
- Body composition
- Muscular strength, endurance, and flexibility

Slide 10 – Use the outcome measure of the distribution of childhood obesity to benchmark progress.

Incorporating BMI into the San Diego Regional Immunization Registry

In an effort to develop a surveillance mechanism that is more reliable and includes children of all ages, the San Diego Regional Immunization Registry (SDIR), managed by the County of San Diego Health and Human Services Agency, added the capacity for BMI reporting in June 2008.

The addition of height and weight to the SDIR made it one of the first immunization registry-based BMI reporting systems in the Nation.

The registry allows entry of BMI information in real time, using electronic health records. The COI promotes and solicits support for this effort among health care providers and will be able to use the local BMI data from this system to inform program activities.

Slide 11 – Provide meaningful and useful feedback to help the COI refine and enhance its activities.

The second evaluation goal focuses on providing meaningful and useful feedback to help the COI refine and enhance activities. For the COI, this involves documenting the work and outcomes within the 7 domains to build a sense of shared accountability among all partners involved. This includes:

- The COI provides support to the domain workgroups—whose members participate on a volunteer basis—to write work plans that map the COI goals and strategies and include specific objectives and timelines.
- Evaluation consultants collect information twice a year on progress relating to the domain work plans.

The COI has also conducted a social network analysis to determine opportunities for improving operational excellence.

Slide 12 - Provide meaningful and useful feedback to help the COI refine and enhance its activities.

In addition, the COI leverages limited resources for evaluation by conducting more in-depth case study evaluations. These require a short-term gathering of data on specific measures across several broad categories, such as:

- Healthy Eating and Food Access
- Built Environment and Physical Activity

- Community Engagement

Want to see a sample evaluation report? Check out this evaluation report at <http://www.ourcommunityourkids.org/media/5292/CTS%20Case%20Study%20FINAL%20REVISED%20052412.pdf> from the Cilantro to Stores Program.

Slide 13 - Assess changes in targeted environmental and policy factors that affect childhood obesity.

The final goal in the COI's evaluation plan is to assess change in targeted policy and environmental factors that affect childhood obesity.

This involves identifying:

Policy Factors:

- Short, medium, and long-term measures to monitor policy-level changes related to obesity prevention

Environmental Factors:

- Progress at the community level. Challenging research questions this evaluation component tries to answer include:
  - Are we making progress in improving access to healthy food in all communities?
  - Are we making progress in providing more opportunities for physical activity in these neighborhoods?

Slide 14 - Assess changes in targeted environmental and policy factors that affect childhood obesity.

Originally, the COI struggled with finding the appropriate measures for policy and environmental factors—mainly because there was not a strong evidence base available at the time.

In the next section of this chapter, we will use a guide developed by the CDC to identify ways systems approaches, like the COI, can track success at the policy and environmental levels.

Listen to Cheryl talk about the challenge of being an early adopter.

Audio of Cheryl Moder, Senior Director, Collective Impact, Community Health Improvement Partners: At the time we started our efforts, there very few community-based, cross-sector obesity prevention efforts, so we really felt like we were building the plane as we were flying it. I think that there's much more evidence now supporting the work we're doing.

Slide 15 - Tools to Evaluate Systems Approaches to Reducing Childhood Obesity

Since the creation of the COI, more robust reports and tools have been developed that can inform the assessment of policy and environmental factors in the fight against childhood obesity.

The CDC developed one of these tools in 2009.

Healthy People 2020 and its tools and data can also be used to benchmark progress and compare local and state data. Learn more about tools at <http://healthypeople.gov/2020/Implement/default.aspx> and data at <http://www.healthypeople.gov/2020/topicsobjectives2020/default.aspx>.

Slide 16 - Introducing the CDC Guide to Help Track Obesity Prevention Progress at a Local Level

The CDC's Recommended Community Strategies and Measurements to Prevent Obesity in the United States: Implementation and Measurement Guide at [http://www.cdc.gov/obesity/downloads/community\\_strategies\\_guide.pdf](http://www.cdc.gov/obesity/downloads/community_strategies_guide.pdf)—or the CDC Guide, as we'll refer to it in this course, was developed to local communities pinpoint the types of policies and strategies that can have the greatest influence in reducing obesity.

It was originally developed with a focus on local governments.

However, community leaders and organizations seeking guidance on how to begin addressing obesity at a local level can also use the recommended strategies and measures.

Slide 17 - The CDC Guide presents 24 strategies and measures that are organized into 6 categories.

The categories represent different aspects of the physical and food environments that a community might want to address in its fight against obesity.

- Category 1: Strategies to promote the availability of healthy food and beverages (Strategies 1 to 6)
- Category 2: Strategies to support healthy food and beverage choices (Strategies 7 to 10)
- Category 3: Strategy to encourage breastfeeding (Strategy 11)
- Category 4: Strategies to encourage physical activity or limit sedentary activity among children and youth (Strategies 12 to 15)
- Category 5: Strategies to create safe communities that support physical activity (Strategies 16 to 23)
- Category 6: Strategy to encourage communities to organize for change (Strategy 24)

Slide 18 - Let's dig deeper into how the CDC Guide works

Below are examples of specific strategies within the CDC Guide categories.

- CDC Strategy 1: Increase availability of healthier food and beverage choices in public service venues.
- CDC Strategy 6: Provide incentives for the production, distribution, and procurement of foods from local farms.
- CDC Strategy 11: Increase support for breastfeeding.
- CDC Strategy 12: Require physical education in schools.
- CDC Strategy 21: Zone for mixed-use development.
- CDC Strategy 24: Participate in community coalitions or partnerships to address obesity.

Slide 19 - Let's dig deeper into how the CDC Guide works

Here's an example of the information on each strategy.

Description of graphic: A visual of a strategy page within the CDC Guide. The header has the name of the strategy. Underneath the name is an overview of the strategy and why it is relevant to obesity. Next are examples of how the strategy has been implemented by local communities. Under the examples are Resources that may be useful to communities that want to implement the strategy.

Slide 20 - Let's dig deeper into how the CDC Guide works

Here's an example of the information for each strategy.

Description of graphic: The CDC Guide also includes a suggested measurement for the strategy. Underlined terms are defined in the CDC Guide's Appendix B. Questions to guide data collection for the measure are listed as well as potential sources of data for the measure; other useful contacts to facilitate data collection are provided in the CDC Guide's Appendix C.

Slide 21

The CDC Guide and the COI align closely when it comes to focusing on policy and environmental factors that affect childhood obesity at the local level.

The CDC Guide was published in 2009—well after the COI had established its initial set of goals and strategies—however, many of the strategies later identified by the CDC were included in the COI Action Plan. The COI leadership is now reviewing the CDC Guide measures, and others have been developed to determine how to better evaluate its strategies.

Overall, you can think of the CDC Guide as your starting point in assessing the policies in your community that influence the complex issue of childhood obesity. Policies alone won't change or reduce childhood obesity rates, but they are a concrete place to begin addressing such a complex issue.

Slide 22 - By providing these resources in one place, the CDC Guide can serve as a manual to assist you in 3 specific ways

1. To serve as a baseline assessment at the beginning of your planning process.
  - Help determine whether the current policies and environmental conditions in your community currently promote active living and healthy eating.
  - Help assess how your community's local policies and environmental conditions compare with communities of similar size, type, and population.
2. To identify priorities for action when you seek out and allocate resources to address childhood obesity across your community.
  - Help determine what is in greatest need of improvement to promote health in your community. It can help you determine where to focus your initial efforts.
3. To measure change over time as part of your evaluation efforts.
  - Assess initial progress from year to year in changing policies to promote active living and healthy eating in your community.

Slide 23 - Learning Activity: Explore the CDC Guide strategies and related measures more in-depth with examples from the COI

Browse through at least 3 of the following examples of strategies and measures from the CDC Guide and related COI programs and Healthy People objectives. The Healthy People objectives can be used to benchmark and compare the strategies with related national data sources.

- CDC Strategy 1: Increase availability of healthier food and beverage choices in public service venues.
- CDC Strategy 6: Provide incentives for the production, distribution, and procurement of foods from local farms.
- CDC Strategy 11: Increase support for breastfeeding.
- CDC Strategy 12: Require physical education in schools.
- CDC Strategy 21: Zone for mixed-use development.
- CDC Strategy 24: Participate in community coalitions or partnerships to address obesity.

Slide 24 - CDC Guide Strategy 1: Increase availability of healthier food and beverage choices in public service venues.

#### CDC Guide Measure

A policy exists to apply nutrition standards that are consistent with the Dietary Guidelines for Americans to all food sold (e.g., meal menus and vending machines) within local government facilities in a local jurisdiction or on public school campuses during the school day within the largest school district in a local jurisdiction.

#### Healthy Vending Policy

##### Overview

##### Government Domain

COI Government Domain members worked to pass and implement a healthy vending policy.

Based on an earlier policy developed by the County of San Diego Department of Parks and Recreation, the policy stipulates that vending machines on county property must contain the following percentages of items that meet nutritional standards:

- 100 percent of foods and beverages sold in vending machines at county facilities that primarily serve youth
- 50 percent of the foods and beverages in all other vending machines

Nutrition standards are based on standards set by California Education Code and recommendations from California Project LEAN.

Slide 25 - CDC Guide Strategy 1: Increase availability of healthier food and beverage choices in public service venues.

## CDC Guide Measure

A policy exists to apply nutrition standards that are consistent with the Dietary Guidelines for Americans to all food sold (e.g., meal menus and vending machines) within local government facilities in a local jurisdiction or on public school campuses during the school day within the largest school district in a local jurisdiction.

## Healthy Vending Policy

## Data Questions and COI Responses

## Government Domain

1. Does your local government have a policy to apply nutrition standards that are consistent with the Dietary Guidelines for Americans to all food sold (e.g., foods sold in cafeterias and vending machines) within local government facilities? Yes.
  - a. If you answered yes to question 1, to which of the following types of local government facilities does the policy apply?
    - Administrative office facilities: Yes.
    - 24-hour “dormitory-type” facilities: Yes.
    - Recreation/community center facilities: Yes.
    - Detention facilities: Yes.
    - Other facilities: County of San Diego Health and Human Services Agency offices and worksites.

Slide 26 - CDC Guide Strategy 1: Increase availability of healthier food and beverage choices in public service venues.

## CDC Guide Measure

A policy exists to apply nutrition standards that are consistent with the Dietary Guidelines for Americans to all food sold (e.g., meal menus and vending machines) within local government facilities in a local jurisdiction or on public school campuses during the school day within the largest school district in a local jurisdiction.

## Healthy Vending Policy

## Data Questions and COI Responses

## Government Domain

1. Does your local government have a policy to apply nutrition standards that are consistent with the Dietary Guidelines for Americans to all food sold (e.g., foods sold in cafeterias and vending machines) within local government facilities? Yes.
  - a. If you answered yes to question 1, please describe the nutrition standards. Nutrition standards are based on standards set by California Education Code and recommendations from California Project LEAN.

- b. Is there a State requirement regarding nutrition standards that applies to your local jurisdiction? No.

Slide 27 - CDC Guide Strategy 1: Increase availability of healthier food and beverage choices in public service venues.

#### CDC Guide Measure

A policy exists to apply nutrition standards that are consistent with the Dietary Guidelines for Americans to all food sold (e.g., meal menus and vending machines) within local government facilities in a local jurisdiction or on public school campuses during the school day within the largest school district in a local jurisdiction.

2. Does the largest school district within your local jurisdiction have a policy to apply nutrition standards that are consistent with the Dietary Guidelines for Americans to all food sold (e.g., foods sold in cafeterias and vending machines) on public school campuses during the school day? Yes.
  - a. If you answered yes to question 2, please describe the nutrition standards. Nutrition standards are based on standards set by California Education Code.

Slide 28 - CDC Guide Strategy 1: Increase availability of healthier food and beverage choices in public service venues.

#### CDC Guide Measure

A policy exists to apply nutrition standards that are consistent with the Dietary Guidelines for Americans to all food sold (e.g., meal menus and vending machines) within local government facilities in a local jurisdiction or on public school campuses during the school day within the largest school district in a local jurisdiction.

#### Healthy Vending Policy

#### Project Challenges and Resources

#### Government Domain

#### Challenges:

- County employees expressed initial concern that their “favorite” items would be eliminated.
- Due to staffing limitations, policy enforcement has been limited.
- Vendors have resisted providing “healthy” foods and beverages; continued education and enforcement are necessary to ensure compliance.

#### Resources:

- County of San Diego - Healthy Vending and Concessions Policy at <http://www.ourcommunityourkids.org/media/2398/CofSD-vending-machines.pdf>

- City of Chula Vista - Healthy Vending and Concessions Policy at [http://ourcommunityourkids.org/media/2399/CV\\_Vending\\_Policy.pdf](http://ourcommunityourkids.org/media/2399/CV_Vending_Policy.pdf)

Slide 29 - CDC Guide Strategy 1: Increase availability of healthier food and beverage choices in public service venues.

#### CDC Guide Measure

A policy exists to apply nutrition standards that are consistent with the Dietary Guidelines for Americans to all food sold (e.g., meal menus and vending machines) within local government facilities in a local jurisdiction or on public school campuses during the school day within the largest school district in a local jurisdiction.

#### Related Healthy People 2020 Objectives

##### Nutrition and Weight Status (NWS)

- Increase the number of States with nutrition standards for foods and beverages provided to preschool-aged children in child care. (NWS-1)
- Increase the proportion of schools that do not sell or offer calorically sweetened beverages to students. (NWS-2.1)
- Increase the proportion of school districts that require schools to make fruits or vegetables available whenever other food is offered or sold. (NWS-2.2)
- Increase the number of States that have State-level policies that incentivize food retail outlets to provide foods that are encouraged by the Dietary Guidelines for Americans. (NWS-3)

Slide 30 - CDC Guide Strategy 1: Increase availability of healthier food and beverage choices in public service venues.

#### CDC Guide Measure

A policy exists to apply nutrition standards that are consistent with the Dietary Guidelines for Americans to all food sold (e.g., meal menus and vending machines) within local government facilities in a local jurisdiction or on public school campuses during the school day within the largest school district in a local jurisdiction.

#### Related Healthy People 2020 Objectives

##### Nutrition and Weight Status (NWS)

- (Developmental) Increase the proportion of Americans who have access to a food retail outlet that sells a variety of foods that are encouraged by the Dietary Guidelines for Americans. (NWS-4)
- Reduce the proportion of children and adolescents aged 2-19 years who are considered obese. (NWS-10.4)

- Increase the contribution of fruits to the diets of the population aged 2 years and older. (NWS-14)
- Increase the contribution of total vegetables to the diets of the population aged 2 years and older. (NWS-15.1) [graphic: LHI icon]

Slide 31 - CDC Guide Strategy 6: Provide incentives for the production, distribution, and procurement of foods from local farms.

#### CDC Guide Measure

Local government has a policy that encourages the production, distribution, or procurement of food from local farms in the local jurisdiction.

#### Farm to School Taskforce

##### Overview

##### Schools and After-School Domain

The San Diego County Farm to School Taskforce is a collaborative effort to increase consumption of local, healthful, seasonal foods and to improve food literacy within schools.

The Taskforce seeks to improve the quality of school meals and supports the incorporation of whole and locally sourced foods into school meal programs. It brings together school food service directors, farmers, distributors, chefs, public health professionals, and other community partners with a shared vision and a common agenda.

Slide 32 - CDC Guide Strategy 6: Provide incentives for the production, distribution, and procurement of foods from local farms.

#### CDC Guide Measure

Local government has a policy that encourages the production, distribution, or procurement of food from local farms in the local jurisdiction.

#### Farm to School Taskforce

##### Overview

##### Schools and After-School Domain

San Diego Unified School District Farm to School Program: The San Diego Unified School District has established guidelines related to farm to school, which include definitions of the terms “San Diego local,” “local,” and “regional” grown/raised products and specify the types of businesses it wants to work with including:

- Farms that are no larger than 1,000 acres, with preference for farms that are 500 acres or less
- Farms that grow no less than 1 crop per 500 acres, with preference for farms that grow no fewer than 2 crops per 250 acres

- Preference for farms that utilize human labor power in the growing, harvesting, packing, and selling of their food
- Farms that grow food organically and/or in a sustainable manner

#### Slide 33

- Farms that are within the borders of the United States of America.
- Farms that grow food without organophosphate pesticides
- San Diego-owned and -operated food-based businesses

Slide 34 - CDC Guide Strategy 6: Provide incentives for the production, distribution, and procurement of foods from local farms.

#### CDC Guide Measure

Local government has a policy that encourages the production, distribution, or procurement of food from local farms in the local jurisdiction.

#### Farm to School Taskforce

#### Data Questions and Responses

#### Schools and After-School Domain

1. Does your local government have a policy that encourages the production, distribution, or procurement of food from local farms? Yes.
  - a. If you answered yes to question 1, which of the following incentives are offered to local farmers?
    - Purchasing electronic bank transfer machines for farmers' markets: Yes.
    - Farm-to-school programs: Yes.
    - Farmland preservation: No.
    - Marketing of local crops within the jurisdiction: No.
    - Allowing farm stands: Yes.
    - Support for grower cooperatives for smaller farms: No.
  - b. Is there a State policy or requirement that encourages the production, distribution, or procurement of food from local farms that applies to your local jurisdiction? No.

Slide 35 - CDC Guide Strategy 6: Provide incentives for the production, distribution, and procurement of foods from local farms.

#### CDC Guide Measure

Local government has a policy that encourages the production, distribution, or procurement of food from local farms in the local jurisdiction.

#### Farm to School Taskforce

#### Project Challenges and Resources

## Schools and After-School Domain

### Challenges:

- Shifting the taskforce toward a common language. When food service, growers and advocates first met, they did not understand each other's needs, limitations, and working environments.
- Creating a common vision, mission, goals, and activities to strategically advance farm to school in San Diego County

Slide 36 - CDC Guide Strategy 6: Provide incentives for the production, distribution, and procurement of foods from local farms.

### CDC Guide Measure

Local government has a policy that encourages the production, distribution, or procurement of food from local farms in the local jurisdiction.

### Farm to School Taskforce

### Project Challenges and Resources

## Schools and After-School Domain

### Challenges:

- Partnering with businesses to address business gaps in the food system that will make farm to school more affordable and accessible. Examples include:
  - Identifying businesses and encouraging new business ventures that would help growers more easily source foods to local schools (e.g., distributors with local foragers, processors, etc.); and
  - Scaling up and training staff in the cafeteria (e.g., adequate kitchen equipment for scratch cooking, trained and educated staff).
- Funding for support staffing from the COI.

### Resources:

- COI Farm to School Taskforce at <http://www.ourcommunityourkids.org/domains--committees/schools-and-after-school/farm-to-school-taskforce.aspx>
- San Diego Unified School District Farm to School Program at <http://www.sandi.net/Page/993>

Slide 37 - CDC Guide Strategy 6: Provide incentives for the production, distribution, and procurement of foods from local farms.

### CDC Guide Measure

Local government has a policy that encourages the production, distribution, or procurement of food from local farms in the local jurisdiction.

### Related Healthy People 2020 Objectives

## Nutrition and Weight Status (NWS)

- Increase the proportion of schools that do not sell or offer calorically sweetened beverages to students. (NWS-2.1)
- Increase the proportion of school districts that require schools to make fruits or vegetables available whenever other food is offered or sold. (NWS-2.2)
- Increase the number of States that have State-level policies that incentivize food retail outlets to provide foods that are encouraged by the Dietary Guidelines for Americans. (NWS-3)
- (Developmental) Increase the proportion of Americans who have access to a food retail outlet that sells a variety of foods that are encouraged by the Dietary Guidelines for Americans. (NWS-4)

Slide 38 - CDC Guide Strategy 6: Provide incentives for the production, distribution, and procurement of foods from local farms.

### CDC Guide Measure

Local government has a policy that encourages the production, distribution, or procurement of food from local farms in the local jurisdiction.

### Related Healthy People 2020 Objectives

#### Nutrition and Weight Status (NWS)

- Reduce the proportion of children and adolescents aged 2-19 years who are considered obese. (NWS-10.4)
- Increase the contribution of fruits to the diets of the population aged 2 years and older. (NWS-14)
- Increase the contribution of total vegetables to the diets of the population aged 2 years and older. (NWS-15.1) [graphic: LHI icon]

Slide 39 - CDC Guide Strategy 11: Increase support for breastfeeding.

### CDC Guide Measure

Local government has a policy requiring local government facilities to provide breastfeeding accommodations for employees that include both time and designated space for breastfeeding and expressing breast milk during work hours.

### County of San Diego Lactation Policy

#### Overview

#### Government Domain

The Government Domain members worked to pass and implement a lactation policy in the San Diego County Health and Human Services Agency (HHSA) to accommodate employees who wish to breastfeed and pump breast milk at work. The policy requires HHSA department directors to ensure

that employees have the option to pump or express their breast milk in a secure and private designated space at the worksite.

The activities conducted to accomplish this included:

- Conducting a literature review, forming a Steering Committee, and drafting the HHSA workplace lactation policy
- Supporting the passage of the HHSA workplace lactation policy (passed in March 2009)
- Supporting implementation of the policy by training staff, working with facilities to identify lactation rooms, and supporting integration of the policy into maternity leave packets

Slide 40 - CDC Guide Strategy 11: Increase support for breastfeeding.

CDC Guide Measure

Local government has a policy requiring local government facilities to provide breastfeeding accommodations for employees that include both time and designated space for breastfeeding and expressing breast milk during work hours.

County of San Diego Lactation Policy

Data Questions and COI Responses

Government Domain

1. Does your local government have a policy requiring local government facilities to provide breastfeeding accommodations for employees, including both time and designated space for breastfeeding during working hours? Yes.
  - a. If so, which of the following types of facilities does your local government's policy regarding breastfeeding accommodations apply? Other facilities: County of San Diego Health and Human Services Agency offices and worksites.

Slide 41 - CDC Guide Strategy 11: Increase support for breastfeeding.

CDC Guide Measure

Local government has a policy requiring local government facilities to provide breastfeeding accommodations for employees that include both time and designated space for breastfeeding and expressing breast milk during work hours.

County of San Diego Lactation Policy

Project Challenges and Resources

Government Domain

Challenges:

- Due to budget cuts and staffing issues, efforts to expand the policy to other county government agencies slowed as of early 2010.
- Staffing constraints prevented the development of assessment reports after policy development and implementation stages. However, informal positive feedback from site managers was obtained via email.

Resource:

1. County of San Diego – Lactation Policy at <http://ourcommunityourkids.org/media/59877/hhsa%20lactation%20policy.pdf>

Slide 42 - CDC Guide Strategy 11: Increase support for breastfeeding.

CDC Guide Measure

Local government has a policy requiring local government facilities to provide breastfeeding accommodations for employees that include both time and designated space for breastfeeding and expressing breast milk during work hours.

Related Healthy People 2020 Objectives

Nutrition and Weight Status (NWS)

- Reduce the proportion of children and adolescents aged 2-19 years who are considered obese. (NWS-10.4) [graphic: LHI icon]

Slide 43 - CDC Guide Strategy 11: Increase support for breastfeeding.

CDC Guide Measure

Local government has a policy requiring local government facilities to provide breastfeeding accommodations for employees that include both time and designated space for breastfeeding and expressing breast milk during work hours.

Related Healthy People 2020 Objectives

Nutrition and Weight Status (NWS)

Healthy People 2020 Related Maternal, Infant, and Child Health (MICH) Objectives

- Increase the proportion of infants who are breastfed ever. (MICH-21.1)
- Increase the proportion of infants who are breastfed at 6 months. (MICH-21.2)
- Increase the proportion of infants who are breastfed at 1 year. (MICH-21.3)
- Increase the proportion of infants who are breastfed exclusively through 3 months. (MICH-21.4)
- Increase the proportion of infants who are breastfed exclusively through 6 months. (MICH-21.5)
- Increase the proportion of employers that have worksite lactation support programs. (MICH-22)

Slide 44 - CDC Guide Strategy 12: Require physical education in schools.

## CDC Guide Measure

The largest school district located within the local jurisdiction has a policy that requires a minimum of 150 minutes per week of physical education in public elementary schools and a minimum of 225 minutes per week of physical education in public middle schools and high schools throughout the school year.

## Local School Wellness Policy Analysis

### Overview

### Schools and After-School Domain

The School and After-School Domain members, through school district representatives, analyze district wellness policies, which are summarized and published on the COI website.

In addition, Domain partners worked together to identify examples of policy language related to more than 20 coordinated school health topics for 40 wellness policies throughout San Diego County.

Slide 45 - CDC Guide Strategy 12: Require physical education in schools.

## CDC Guide Measure

The largest school district located within the local jurisdiction has a policy that requires a minimum of 150 minutes per week of physical education in public elementary schools and a minimum of 225 minutes per week of physical education in public middle schools and high schools throughout the school year.

## Local School Wellness Policy Analysis

### Data Questions and COI Responses

### Schools and After-School Domain

1. Does the largest school district located within the jurisdiction have a policy that requires a minimum of 150 minutes per week of daily physical education in public elementary schools throughout the school year? Yes.
  - o For each grade included in your elementary school system, is there a minimum requirement for time spent in daily physical education per week? If yes, what is the minimum weekly requirement in minutes per grades? Yes, 200 minutes per week for grades K through 5.

Slide 46 - CDC Guide Strategy 12: Require physical education in schools.

## CDC Guide Measure

The largest school district located within the local jurisdiction has a policy that requires a minimum of 150 minutes per week of physical education in public elementary schools and a minimum of 225 minutes per week of physical education in public middle schools and high schools throughout the school year.

2. Does the largest school district located within the jurisdiction have a policy that requires a minimum of 225 minutes per week of daily physical education in public middle and high schools throughout the school year? Yes.
  - a. For each grade included in your elementary school system, is there a minimum requirement for time spent in daily physical education per week? If yes, what is the minimum weekly requirement in minutes per grade? Yes, 400 minutes per week for grades 6 through 12.

Slide 47 - CDC Guide Strategy 12: Require physical education in schools.

#### CDC Guide Measure

The largest school district located within the local jurisdiction has a policy that requires a minimum of 150 minutes per week of physical education in public elementary schools and a minimum of 225 minutes per week of physical education in public middle schools and high schools throughout the school year.

#### Local School Wellness Policy Analysis

#### Project Challenges and Resources

#### Schools and After-School Domain

#### Challenges:

- Administrative support and technical assistance requires an ongoing amount of staffing resources, even if minimal.
- Connections exist with wellness leads from nearly all of the 42 school districts in the county. However, because not all districts have wellness councils, it's difficult for the Domain to obtain information regarding wellness policies in an ongoing manner.

#### Resource:

- Schools and After-School - Policy Clearing House at <http://www.ourcommunityourkids.org/resources/policy-clearinghouse.aspx#providers>

Slide 48 - CDC Guide Strategy 12: Require physical education in schools.

#### CDC Guide Measure

The largest school district located within the local jurisdiction has a policy that requires a minimum of 150 minutes per week of physical education in public elementary schools and a minimum of 225 minutes per week of physical education in public middle schools and high schools throughout the school year.

#### Related Healthy People 2020 Objectives

#### Nutrition and Weight Status (NWS)

- Reduce the proportion of children and adolescents aged 2-19 years who are considered obese. (NWS-10.4) [graphic: LHI icon]

Slide 49 - CDC Guide Strategy 12: Require physical education in schools.

#### CDC Guide Measure

The largest school district located within the local jurisdiction has a policy that requires a minimum of 150 minutes per week of physical education in public elementary schools and a minimum of 225 minutes per week of physical education in public middle schools and high schools throughout the school year.

#### Related Healthy People 2020 Objectives

##### Physical Activity (PA)

- Increase the proportion of adolescents who meet current Federal physical activity guidelines for aerobic physical activity. (PA-3.1)
- (Developmental) Increase the proportion of adolescents who meet current Federal physical activity guidelines for muscle-strengthening activity. (PA-3.2)
- (Developmental) Increase the proportion of adolescents who meet current Federal physical activity guidelines for aerobic physical activity and muscle-strengthening activity. (PA-3.3)
- Increase the proportion of the Nation's public and private elementary schools that require daily physical education for all students. (PA-4.1)
- Increase the proportion of the Nation's public and private middle and junior high schools that require daily physical education for all students. (PA-4.2)

Slide 50 - CDC Guide Strategy 12: Require physical education in schools.

#### CDC Guide Measure

The largest school district located within the local jurisdiction has a policy that requires a minimum of 150 minutes per week of physical education in public elementary schools and a minimum of 225 minutes per week of physical education in public middle schools and high schools throughout the school year.

#### Related Healthy People 2020 Objectives

##### Physical Activity (PA)

- Increase the proportion of the Nation's public and private senior high schools that require daily physical education for all students. (PA-4.3)
- Increase the proportion of adolescents who participate in daily school physical education. (PA-5)
- Increase the number of States that require regularly scheduled elementary school recess. (PA-6.1)
- Increase the proportion of school districts that require regularly scheduled elementary school recess. (PA-6.2)

- Increase the proportion of school districts that require or recommend elementary school recess for an appropriate period of time. (PA-7)
- Increase the proportion of children aged 0 to 2 years who view no television or videos on an average weekday. (PA-8.1)

Slide 51 - CDC Guide Strategy 21: Zone for mixed-use development.

#### CDC Guide Measure

Percentage of zoned land area (in acres) within a local jurisdiction that is zoned for mixed use that specifically combines residential land use with 1 or more commercial, institutional, or other public land uses.

#### Community Gardens and Urban Agriculture Policy Development

##### Overview

##### Government Domain

The COI has supported the establishment of policies that facilitate the development of community gardens and urban agriculture.

For example, the City of San Diego made changes to its land development code and policy amendments. The new code reduced barriers to urban agriculture, simplified the approval process for establishing farmers' markets on private property, adjusted community garden regulations, and eased restrictions on keeping chickens, goats, and bees.

The city also strengthened its general plan language, providing a strong policy base in support of urban agriculture, food systems planning, and further incorporation of public health concerns into the planning process.

Slide 52 - CDC Guide Strategy 21: Zone for mixed-use development.

#### CDC Guide Measure

Percentage of zoned land area (in acres) within a local jurisdiction that is zoned for mixed use that specifically combines residential land use with 1 or more commercial, institutional, or other public land uses

#### Community Gardens and Urban Agriculture Policy Development

##### Data Questions and COI Responses

##### Government Domain

1. What is the total number of acres of zoned land within your jurisdiction?
2. Of the area reported in question 1, how many acres are zoned for mixed use (combination of residential and nonresidential)?
3. Divide the answer to question 2 by the answer to question 1.

Listen to Cheryl talk about the challenge of using these data questions to measure success.

Audio of Cheryl Moder, Senior Director, Collective Impact, Community Health Improvement Partners: This measure does not take into consideration that many jurisdictions have large areas zoned for open space and agriculture. These lands will never be zoned for mixed use due to their purpose. Adding lands zoned for agriculture and open space, including parks, trails, canyons and valleys, into the measurement calculation would negatively impact the result even though these are positive land uses that contribute to a community's well being. For example, in the City of San Diego, over 27% of existing land is in parks, open space, and recreation uses, and about 3% is used for agriculture.

Slide 53 - CDC Guide Strategy 21: Zone for mixed-use development.

CDC Guide Measure

Percentage of zoned land area (in acres) within a local jurisdiction that is zoned for mixed use that specifically combines residential land use with 1 or more commercial, institutional, or other public land uses

Community Gardens and Urban Agriculture Policy Development

Project Challenges and Resources

Government Domain

Challenge:

- In the City of San Diego, a key challenge to community garden reform was addressing the concerns and gaining the buy-in of the city's neighborhood-based, citizen-run land use advisory committees to support a land use activity in which many of their neighborhoods had little experience and familiarity within their communities.

Resource:

- Government - Policy Clearinghouse at <http://www.ourcommunityourkids.org/resources/policy-clearinghouse.aspx>

Slide 54 - CDC Guide Strategy 21: Zone for mixed-use development.

CDC Guide Measure

Percentage of zoned land area (in acres) within a local jurisdiction that is zoned for mixed use that specifically combines residential land use with 1 or more commercial, institutional, or other public land uses.

Related Healthy People 2020 Objectives

Nutrition and Weight Status (NWS)

- Reduce the proportion of children and adolescents aged 2-19 years who are considered obese. (NWS-10.4) [graphic: LHI icon]

Slide 55 - CDC Guide Strategy 21: Zone for mixed-use development.

#### CDC Guide Measure

Percentage of zoned land area (in acres) within a local jurisdiction that is zoned for mixed use that specifically combines residential land use with 1 or more commercial, institutional, or other public land uses.

#### Related Healthy People 2020 Objectives

##### Physical Activity (PA)

- (Developmental) Increase legislative policies for the built environment that enhance access to and availability of physical activity opportunities. (PA-15.1)
- (Developmental) Increase street-scale policies for the built environment that enhance access to and availability of physical activity opportunities. (PA-15.2)
- (Developmental) Increase transportation and travel policies for the built environment that enhance access to and availability of physical activity opportunities. (PA-15.3)

Slide 56 - CDC Guide Strategy 24: Participate in community coalitions or partnerships to address obesity.

#### CDC Guide Measure

Local government is an active member of at least 1 coalition or partnership that aims to promote environmental and policy change for active living and healthy eating (excluding personal health programs such as health fairs).

#### The San Diego County Childhood Obesity Initiative

##### Overview

The San Diego County Childhood Obesity Initiative (COI) is a public-private partnership, which includes local government involvement and support. The COI's mission is to reduce and prevent childhood obesity in San Diego County by creating healthy environments for all children and families through advocacy, education, policy development, and environmental change.

##### The COI's Strategic Plan:

While there are no related objectives at this time, Healthy People uses the MAP-IT framework to plan and evaluate public health interventions. You can use MAP-IT to help:

- Mobilize partners.
- Assess the needs of your community.
- Create and implement a plan to reach Healthy People 2020 objectives.

- Track your community's progress.

Learn more at <http://healthypeople.gov/2020/implement/MapIt.aspx>

Slide 57 - CDC Guide Strategy 24: Participate in community coalitions or partnerships to address obesity.

#### CDC Guide Measure

Local government is an active member of at least 1 coalition or partnership that aims to promote environmental and policy change for active living and healthy eating (excluding personal health programs such as health fairs).

#### The San Diego County Childhood Obesity Initiative (COI)

#### Data Questions and COI Responses

1. Does your local government participate in at least 1 coalition or partnership that addresses active living and/or healthy eating? Yes.
  - If so, in how many coalitions or partnerships does your local government participate?

Listen to Cheryl talk about the challenge of using this data question.

Audio of Cheryl Moder, Senior Director, Collective Impact, Community Health Improvement Partners: Having too many coalitions can deplete time, energy, and resources. I don't believe the number of coalitions or partnerships is as important as the strength and collective impact of the coalition.

Slide 58 – Chapter 3 COMPLETE!

Now that you have completed this chapter, you are able to outline an evaluation framework for assessing the collective impact of a systems approach to reducing childhood obesity.

You can also use the CDC's "Recommended Community Strategies and Measurements to Prevent Obesity in the United States: Implementation and Measurement Guide" to evaluate specific strategies to reduce childhood obesity and determine at least 2 evaluation measures to assess progress.

The next chapter will provide you with a summary of the course, resources to start working in your community, and next steps.

## Chapter 4

### Slide 1 - Chapter 4

#### Review and Next Steps

### Slide 2 - Review and Next Steps

This course served as an introduction to a systems approach that works to reduce childhood obesity through collective impact.

Our goal was to help you think beyond traditional program planning and evaluation strategies that may be limited in their long-term impact to address complex issues like childhood obesity.

In this chapter you will find out what's next for the San Diego County Childhood Obesity Initiative, review the learning objectives for this lesson, and find a list of resources to help with your own program planning and evaluation.

### Slide 3 - Learning Objectives for the Course

By now you should be able to:

1. Recognize the value of using a systems approach to reduce childhood obesity.
2. Identify the 5 processes of a successful systems approach.
3. Outline an evaluation framework for assessing the collective impact of a systems approach to reducing childhood obesity.
4. Use the Centers for Disease Control and Prevention's (CDC) "Recommended Community Strategies and Measurements to Prevent Obesity in the United States: Implementation and Measurement Guide" to evaluate specific strategies to reduce childhood obesity and determine at least 2 evaluation measures to assess progress.

### Slide 4 - So, what's next for San Diego County?

Identifying measures to assess change in policy and environmental factors has been a challenge for the COI. Fortunately, a growing body of research and reports—such as the CDC Guide—provide a helpful starting point.

The COI plans to fully implement its evaluation plan as funding becomes available and hopes to continue to learn about and build upon its success.

The collective effort and systems approach behind the COI are also being applied at a broader level.

"We are committed to being conveners, catalysts, and regional stewards."—Nick Macchione, Director, County of San Diego Health and Human Services Agency

### Slide 5 - Introducing Live Well, San Diego!

In 2010, the County of San Diego Board of Supervisors launched Live Well, San Diego!—a 10-year strategy to improve the health and wellness of the region.

The ultimate goal of Live Well, San Diego! is to achieve the vision of a healthy, safe, and thriving San Diego County.

By its very nature, it is a collective effort that involves intimate partnering with those beyond the county government walls.

We look forward to following and learning from both of these innovative, collective efforts!

To learn more about Live Well, San Diego! visit

[http://www.sdcounty.ca.gov/hhsa/programs/sd/live\\_well\\_san\\_diego/index.html](http://www.sdcounty.ca.gov/hhsa/programs/sd/live_well_san_diego/index.html)

Read the Live Well, San Diego! Annual Report at

[http://www.sdcounty.ca.gov/dmpr/gfx/Live\\_Well\\_Annual\\_Report\\_2011-12/](http://www.sdcounty.ca.gov/dmpr/gfx/Live_Well_Annual_Report_2011-12/)

Watch a video explaining Live Well, San Diego! at <http://www.youtube.com/watch?v=ZpmX2r1az9c>

Stay up to date with the COI at <http://ourcommunityourkids.org/>

Slide 6 - Congratulations!

You have completed the Healthy People 2020 online lesson, Defining Success in a Systems Approach: The San Diego County Childhood Obesity Initiative.

Slide 7 - Next Steps

Now that you have completed the lesson, consider taking some of the following next steps:

- Obtain your continuing education by taking the post-test and evaluation:  
<http://www.cdc.gov/tceonline/>.
- Explore related resources to plan, evaluate, and fund your own systems approach to childhood obesity.
- Discuss what you learned and problem solve with other learners on our LinkedIn group at [http://www.linkedin.com/groups?gid=4839792&trk=hb\\_side\\_g](http://www.linkedin.com/groups?gid=4839792&trk=hb_side_g)
- Receive updates on future lessons as well as related news and events by signing up for the Healthy People Academy listserv at [https://public.govdelivery.com/accounts/USOPHSODPHPHF/subscriber/new?category\\_id=USOPHSODPHPHF\\_C5](https://public.govdelivery.com/accounts/USOPHSODPHPHF/subscriber/new?category_id=USOPHSODPHPHF_C5)
- View acknowledgments.

Slide 8 - Resources to Get Started

We've gathered resources to provide you with information you may need as you brainstorm the creation of a systems approach to reduce childhood obesity in your own community.

- Systems Thinking and Collective Impact Resources
- Funding Resources
- Obesity Prevention Resources

- General Program Planning and Evaluation Resources
- Physical Activity Resources
- Nutrition Resources

#### Slide 9 - Systems Thinking and Collective Impact Resources

Systems Thinking for Health Systems Strengthening. World Health Organization (WHO).  
<http://www.who.int/alliance-hpsr/resources/9789241563895/en/index.html>

Greater Than the Sum: Systems Thinking in Tobacco Control. National Cancer Institute (NCI).  
[http://cancercontrol.cancer.gov/tcrb/monographs/18/m18\\_complete.pdf](http://cancercontrol.cancer.gov/tcrb/monographs/18/m18_complete.pdf)

Collective Impact. Stanford Social Innovation Review.  
[http://www.ssireview.org/articles/entry/collective\\_impact](http://www.ssireview.org/articles/entry/collective_impact)

ChangeLab Solutions.  
<http://changelabsolutions.org>

#### Slide 9 - General Program Planning and Evaluation Resources

Healthy People 2020. U.S. Department of Health and Human Services (HHS).

Healthy People 2020 is a 10-year agenda for improving the Nation's health. The site provides data and objectives on a number of key health topic areas, including nutrition and weight status. It also provides helpful resources for implementing and evaluating public health programs.

<http://www.healthypeople.gov/2020/default.aspx>  
<http://www.healthypeople.gov/2020/implementing/default.aspx>

State Health Department Highlights and Stories. Centers for Disease Control and Prevention (CDC).

Shares current state activities related to nutrition, physical activity, and obesity; showcases program achievements; and facilitates peer-to-peer learning.

<http://www.cdc.gov/obesity/stateprograms/highlights.html>

Developing an Effective Evaluation Plan: Setting the course for effective program evaluation. Centers for Disease Control and Prevention (CDC).

Helps public health program managers, administrators, and evaluators develop a joint understanding of what constitutes an evaluation plan, why it is important, and how to develop an effective evaluation plan in the context of the planning process.

<http://www.cdc.gov/obesity/stateprograms/resources.html>

#### Slide 11 - General Program Planning and Evaluation Resources (cont'd.)

Communities Putting Prevention to Work. Centers for Disease Control and Prevention (CDC).

Examples of how Communities Putting Prevention to Work (CPPW) is supporting 50 communities to tackle obesity and tobacco use. CPPW communities are building healthier environments for their

residents.

<http://www.cdc.gov/CommunitiesPuttingPreventiontoWork/action/index.htm>

Health Impact Assessment. Centers for Disease Control and Prevention (CDC).

Provides information and resources about conducting a health impact assessment (HIA), defined as “a combination of procedures, methods, and tools by which a policy, program, or project may be judged as to its potential effects on the health of a population, and the distribution of those effects within the population.”

<http://www.cdc.gov/healthyplaces/hia.htm>

Community Commons.

An interactive mapping, networking, and learning utility for the broad-based healthy, sustainable, and livable communities’ movement.

<http://www.communitycommons.org/>

Slide 12 - Funding Resources

Healthy People 2020: Funding Resources. U.S. Department of Health and Human Services (HHS).

Healthy People 2020 provides a list of funding resources and suggestions on how to use Healthy People 2020 data to make your case to potential funders.

<http://www.healthypeople.gov/2020/implementing/funding.aspx>

Grants.gov. U.S. Department of Health and Human Services (HHS).

Grants.gov is a comprehensive, Federal grant search website. The site has a blog, email alerts, and an RSS feed that you can subscribe to. RSS stands for “Really Simple Syndication” and is an easy way to keep up with information that’s important to you.

<http://www.grants.gov>

NIH Obesity Research Grants. National Institutes of Health (NIH).

NIH Obesity Research Grants presents information about NIH funding opportunities that are currently accepting applications.

<http://obesityresearch.nih.gov/funding/funding.aspx>

Slide 13 - Obesity Prevention Resources

San Diego County Childhood Obesity Initiative (COI).

All of the COI resources listed below—and more—can be found on the COI website.

<http://www.ourcommunityourkids.org>

Recommended Community Strategies and Measurements to Prevent Obesity in the United States: Implementation and Measurement Guide. July 2009. Centers for Disease Control and Prevention (CDC).

As we covered in this course, this document supplies a list of 24 community-level strategies that can reduce obesity rates, along with a list of data collection questions and data sources for each strategy.

[http://www.cdc.gov/obesity/downloads/community\\_strategies\\_guide.pdf](http://www.cdc.gov/obesity/downloads/community_strategies_guide.pdf)

Accelerating Progress in Obesity Prevention. Consensus Report. May 2012. Institute of Medicine (IOM).

This consensus report from the IOM's Committee on Accelerating Progress in Obesity Prevention includes a summary of the IOM's evaluation of prior obesity prevention strategies and recommendations to accelerate progress.

<http://www.iom.edu/Reports/2012/Accelerating-Progress-in-Obesity-Prevention.aspx>

Slide 14 - Obesity Prevention Resources (cont'd.)

Measuring Progress in Obesity Prevention. Workshop Report. February 2012. Institute of Medicine (IOM).

This workshop report from the IOM's Committee on Accelerating Progress in Obesity Prevention summarizes opportunities and challenges related to measurement and expert opinion in relevant fields, including public health, economics, nutrition, media studies and communication, marketing, and public policy.

<http://www.iom.edu/Reports/2012/Measuring-Progress-in-Obesity-Prevention.aspx>

Healthy Communities: What Local Governments can do to Reduce and Prevent Obesity Presentation 2009. Centers for Disease Control and Prevention (CDC).

This presentation for local governments provides an overview of the obesity epidemic, an explanation of how it happened, why it's important, policy and environmental changes to address obesity, and CDC-recommended community strategies and measurements to prevent obesity.

[http://www.cdc.gov/obesity/downloads/CDC\\_Healthy\\_Communities.pdf](http://www.cdc.gov/obesity/downloads/CDC_Healthy_Communities.pdf)

Slide 15 - Obesity Prevention Resources (cont'd.)

Promoting Healthy Communities and Reducing Childhood Obesity: Legislative Options. National Conference of State Legislatures: The Forum for America's Ideas.

The National Conference of State Legislatures provides a list of policy-level efforts by State to promote healthier communities and reduce childhood obesity.

[http://www.ourcommunityourkids.org/media/2695/Leg\\_Options.pdf](http://www.ourcommunityourkids.org/media/2695/Leg_Options.pdf)

The Obesity Epidemic 2011. Centers for Disease Control and Prevention (CDC).

This video explains the many factors contributing to the obesity epidemic and showcases several community initiatives taking place to prevent and reduce obesity.

<http://www.cdc.gov/cdctv/ObesityEpidemic/>

Social Marketing Resources. Centers for Disease Control and Prevention (CDC).

A list of resources for planning, implementing, and evaluating social marketing efforts in nutrition, physical activity, and obesity.

<http://www.cdc.gov/nccdphp/DNPAO/socialmarketing/index.html>

Slide 16 - Obesity Prevention Resources (cont'd.)

State-based Nutrition, Physical Activity, and Obesity Programs. Centers for Disease Control and Prevention (CDC).

Stories from 25 states addressing the problems of obesity and other chronic diseases through statewide efforts.

<http://www.cdc.gov/obesity/stateprograms/statestories.html>

The Weight of the Nation Documentary Series. HBO and the Institute of Medicine (IOM).

The Weight of the Nation is one of the most far-reaching public health campaigns on this epidemic to date, comprising 4 documentary films, a 3-part series for families, 12 bonus shorts, a robust website and social media campaign, a book published by St. Martin's Press, and nationwide outreach to more than 40,000 community-based organizations.

<http://theweightofthenation.hbo.com/>

Slide 17 - Physical Activity Resources

Physical Activity Guidelines for Americans. U.S. Department of Health and Human Services (HHS) and U.S. Department of Agriculture (USDA).

The Federal Government has issued its first-ever Physical Activity Guidelines for Americans. This site describes the types and amounts of physical activity that offer substantial health benefits to Americans.

<http://www.health.gov/PAGuidelines/>

Be Active Your Way: A Guide for Adults. U.S. Department of Health and Human Services (HHS).

Based on the 2008 Physical Activity Guidelines, this guide provides basic, user-friendly information for adults aged 18 and over.

<http://health.gov/paguidelines/adultguide/default.aspx>

Let's Move! Initiative by First Lady Michelle Obama.

Let's Move! is a comprehensive initiative, launched by the First Lady, dedicated to solving the problem of obesity within a generation, so that children born today will grow up healthier.

<http://www.letsmove.gov>

Slide 18 - Physical Activity Resources (cont'd.)

Guide to Strategies to Increase Physical Activity in the Community 2012. Centers for Disease Control and Prevention (CDC).

Guidance for program managers, policy makers, and others on how to select strategies to increase physical activity with the most relevant information on each type of strategy.

<http://www.cdc.gov/obesity/resources/recommendations.html>

The U.S. National Physical Activity Plan, 2009. Centers for Disease Control and Prevention (CDC).

A comprehensive set of policies, programs, and initiatives that aim to increase physical activity in all segments of the American population. The Plan is the product of a private-public sector collaborative. Hundreds of organizations are working together to change our communities in ways that will enable every American to be sufficiently physically active.

<http://www.cdc.gov/physicalactivity/>

Youth Physical Activity Guidelines Toolkit 2008. Centers for Disease Control and Prevention (CDC).

To promote the guidelines and support youth physical activity, CDC and several partner organizations developed the Youth Physical Activity Guidelines Toolkit, which highlights strategies that schools, families, and communities can use to support youth physical activity.

<http://www.cdc.gov/HealthyYouth/physicalactivity/guidelines.htm#1>

Slide 19 - Nutrition Resources

Dietary Guidelines for Americans, 2010. U.S. Department of Health and Human Services (HHS).

The Dietary Guidelines for Americans, 2010 provides evidence-based nutrition information and advice for people age 2 and older. They serve as the basis for Federal food and nutrition education programs.

<http://www.health.gov/dietaryguidelines/>

Food and Nutrition Information Center. U.S. Department of Agriculture (USDA).

The Food and Nutrition Information Center—a leader in food and human nutrition information dissemination since 1971—provides credible, accurate, and practical resources for nutrition and health professionals, educators, Government personnel, and consumers.

<http://fnic.nal.usda.gov>

Food Environment Atlas. U.S. Department of Agriculture (USDA).

The Food Environment Atlas assembles statistics on food environment indicators to stimulate research on the determinants of food choices and diet quality, and provides a spatial overview of a community's ability to access healthy food and its success in doing so.

<http://www.ers.usda.gov/data-products/food-environment-atlas.aspx>

Slide 20 - Nutrition Resources (cont'd.)

Pediatric and Pregnancy Nutrition Surveillance System. Centers for Disease Control and Prevention (CDC).

The Pediatric Nutrition Surveillance System (PedNSS) is a program-based surveillance system that monitors the nutritional status of low-income infants, children, and women in federally funded maternal and child health programs.

<http://www.cdc.gov/pednss/>

Women, Infants, and Children (WIC). U.S. Department of Agriculture (USDA).

WIC provides Federal grants to States for supplemental foods, health care referrals, and nutrition education for low-income pregnant, breastfeeding, and non-breastfeeding postpartum women, and to infants and children up to age 5 who are found to be at nutritional risk.

<http://www.fns.usda.gov/wic/>

Breastfeeding Report Card 2011. Centers for Disease Control and Prevention (CDC).

The CDC Breastfeeding Report Card brings together State-by-State information to help tell the story of breastfeeding practices in states.

<http://www.cdc.gov/breastfeeding/data/reportcard.htm>

Slide 21 - Nutrition Resources (cont'd.)

Children's Food Environment State Indicator Report 2011. Centers for Disease Control and Prevention (CDC).

This report highlights selected behaviors, environments, and policies that affect childhood obesity through support of healthy eating.

<http://www.cdc.gov/obesity/downloads/ChildrensFoodEnvironment.pdf>

Early Care and Education Policy Review 2012. Centers for Disease Control and Prevention (CDC).

To help educate public health practitioners, child care providers, and decision makers about the current conditions that exist by identifying actions in Early Care and Education programs to prevent obesity, this review provides State-specific child care demographics and highlights enacted State legislation and current licensing regulation.

[http://www.cdc.gov/obesity/downloads/Early-Care-and-Education-Policy-Review-FINAL\\_web508.pdf](http://www.cdc.gov/obesity/downloads/Early-Care-and-Education-Policy-Review-FINAL_web508.pdf)

Healthier Food Retail: Beginning the Assessment Process in Your State or Community 2011. Centers for Disease Control and Prevention (CDC).

Fact sheets for States and communities to assess the retail food environment, with a focus on Geographic Information System mapping.

<http://www.cdc.gov/obesity/downloads/HFRassessment.pdf>

Slide 22 - Nutrition Resources (cont'd.)

The CDC Guide to Strategies to Increase the Consumption of Fruits and Vegetables, 2011. Centers for Disease Control and Prevention (CDC).

Guidance for program managers, policy makers, and others on how to select strategies to increase consumption of fruits and vegetables, with the most relevant information on each type of strategy.

[http://www.cdc.gov/obesity/downloads/FandV\\_2011\\_WEB\\_TAG508.pdf](http://www.cdc.gov/obesity/downloads/FandV_2011_WEB_TAG508.pdf)

DNPAO State Program Highlights: Maternity Care Practices 2012. Centers for Disease Control and Prevention (CDC).

Highlights of programs funded by the CDC Division of Nutrition, Physical Activity, and Obesity (DNPAO) and strategies for maternity care practices with the potential to influence breastfeeding.

[http://www.cdc.gov/obesity/downloads/CDC\\_MaternityCarePractices.pdf](http://www.cdc.gov/obesity/downloads/CDC_MaternityCarePractices.pdf)

Guide to Breastfeeding Interventions, 2005. Centers for Disease Control and Prevention (CDC).

This guide provides State and local community members with information to choose breastfeeding intervention strategies. You can download the entire guide or any of the 9 chapters.

<http://www.cdc.gov/breastfeeding/resources/guide.htm>

Slide 23 - Nutrition Resources (cont'd.)

State Indicator Report for Fruits and Vegetables 2009. Centers for Disease Control and Prevention (CDC).

Information for each State on how many fruits and vegetables people are eating and highlights 3 key areas within communities and schools that can be improved to increase access, availability, and affordability of fruits and vegetables. Specific action steps and resources are also detailed in a National Action Guide.

<http://www.cdc.gov/nutrition/downloads/StateIndicatorReport2009.pdf>

Vital Signs: Hospital Support for Breastfeeding 2011. Centers for Disease Control and Prevention (CDC).

CDC Vital Signs on breastfeeding consists of (1) a *Morbidity and Mortality Weekly Report* (MMWR) early release; (2) a fact sheet for consumer audiences and a dedicated website that mirrors the fact sheet on the topic; (3) a media release; and (4) a series of announcements via social media tools.

<http://www.cdc.gov/VitalSigns/BreastFeeding/>

Health and Sustainability Guidelines for Vending and Concessions. Centers for Disease Control and Prevention (CDC).

This site assists contractors in increasing healthy food and beverage choices and sustainable practices at Federal worksites by applying the 2010 Dietary Guidelines for Americans to food service operations.

<http://www.cdc.gov/chronicdisease/resources/guidelines/food-service-guidelines.htm>

Slide 24 - Acknowledgments

- San Diego County Childhood Obesity Initiative facilitated by Community Health Improvement Partners
- San Diego County Health and Human Services Agency

- Office of the Director, Division of Nutrition, Physical Activity, and Obesity Prevention, National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention
- Office of Planning, Evaluation, and Legislation, National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention
- Educational Design and Accreditation Branch, Division of Leadership and Practice, Scientific Education and Professional Development Program Office, Centers for Disease Control and Prevention
- Healthy People 2020 Federal Interagency Working Group

Slide 25

Thank you for participating in this Healthy People 2020 online lesson!

Return to <http://www.healthypeople.gov/2020/Learn/default.aspx>.