







Community Health Initiative

- 39 community collaboratives
- 9 communities where KP is the primary funder
- focus on Healthy Eating Active Living (HEAL)
- place-based, multi-sectoral
- emphasis on environment and policy changes
- promotes organizational practice changes within KP

4 KAISER PERMANENTE.

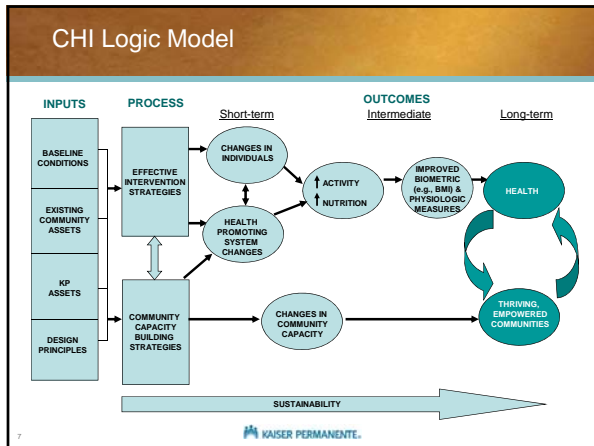
Community Health Initiative

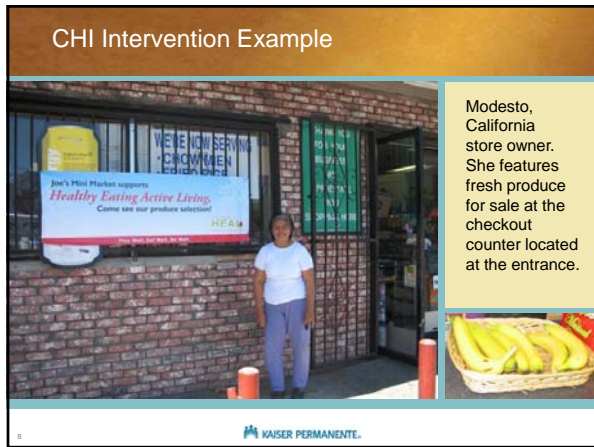
- Evidence-informed interventions
- Leverages KP expertise
- Long-term (5+ years)
- Strong evaluation component

5 KAISER PERMANENTE.

CHI in KP Regions

6 KAISER PERMANENTE.







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What is the CHI Cross-Site Evaluation Approach?

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Evaluation Goals

- Program improvement
- Impact assessment
- Building and sharing knowledge

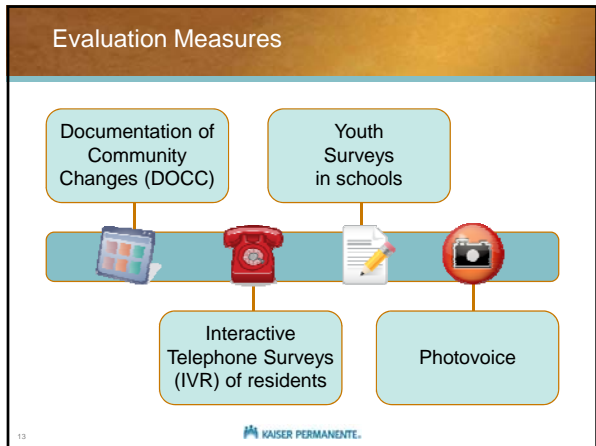
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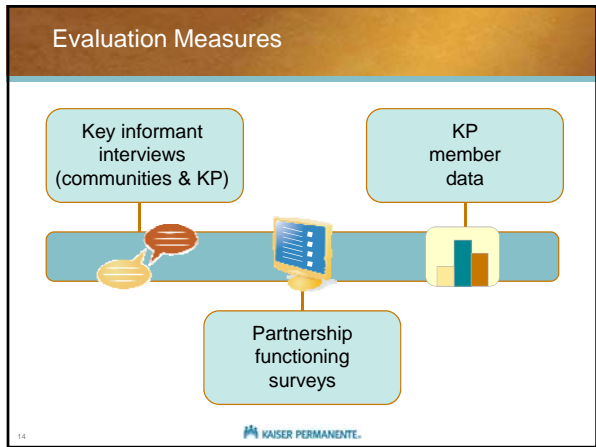
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Evaluation Strategies

- Track intermediate outcomes in communities
- Collaborate with communities
- Use local evaluators
- Focus on environmental and policy changes
- Incorporate behavioral surveillance measures

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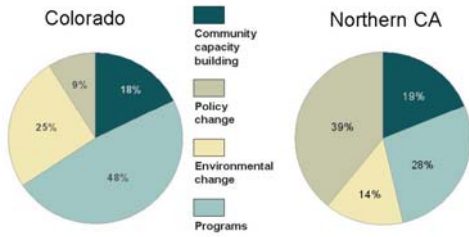




What are the Key Findings from the CHI Interim Evaluation Report?

15 KAISER PERMANENTE.

Findings: Early CHI Strategy Mix



Source: Documentation of Community Change (DOCC), 2008

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Findings: Population Change



Over time, expect to see community residents more active and eating healthier

Measuring Impact



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Findings: Challenges

Reach and intensity of the community interventions

Measuring Impact: Population Change

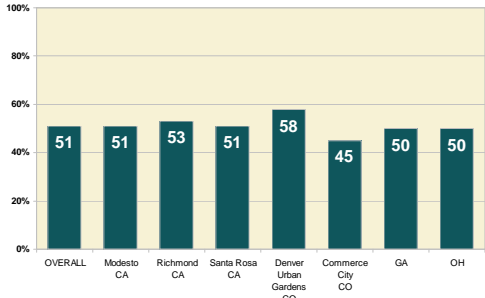
Detecting behavioral changes and attributing them to the interventions

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What Do We Know About Community Environments?
Access to Healthy Food

Percent Reporting it is Easy to Buy Healthy Snacks in the Neighborhood

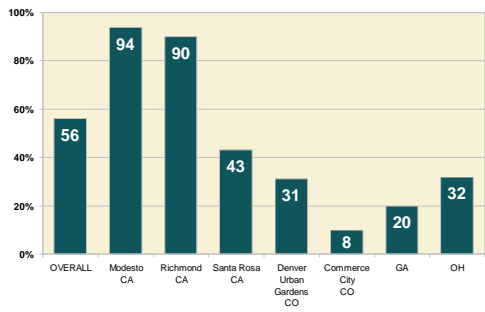


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What Do We Know About Community Environments?
Access to Physical Activity

Percent Taking PE Year Round

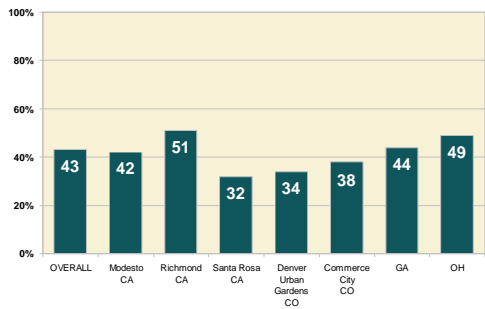


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What do we know about community environments?
Safety is a big issue for kids.

Percent Who Do Not Feel Safe in Their Neighborhoods

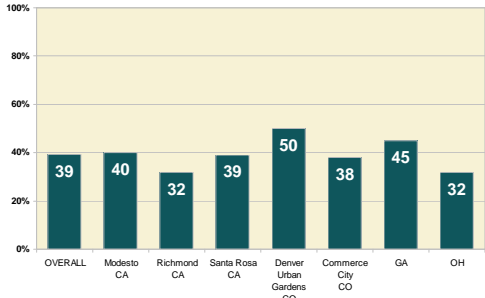


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What do we know about physical activity in these communities?

Percent Doing Recommended Physical Activity

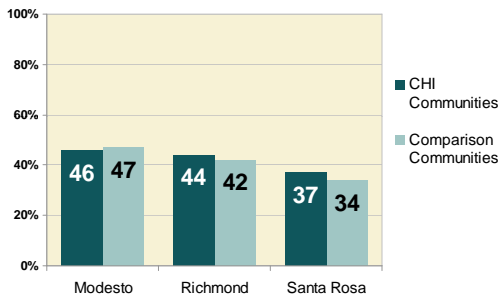


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Findings Example: KP Members

Percent Obese



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Findings: Measuring Impact

The evaluation focuses on measuring changes taking place in the community because:



Changes can be detected here first

Information supports program improvement



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Findings: Community Changes – California

	<p>Santa Rosa Environment Change <i>Safe Routes to School</i></p>	
<p>Richmond Land Use Planning <i>Photovoice picture contributed to liquor store removal</i></p>		<p>Modesto After School Program <i>Walk It Out</i></p>

25 KAISER PERMANENTE.

Findings: Community Changes – Colorado

<p>Commerce City Land Use Planning <i>Streetscape improvements</i></p>		<p>Park Hill, Denver Program, Policy, Environment <i>Bike Depot project</i></p>
	<p>Denver Urban Gardens Food Access <i>Community gardens</i></p>	

26 KAISER PERMANENTE.

Findings: How many people are reached?

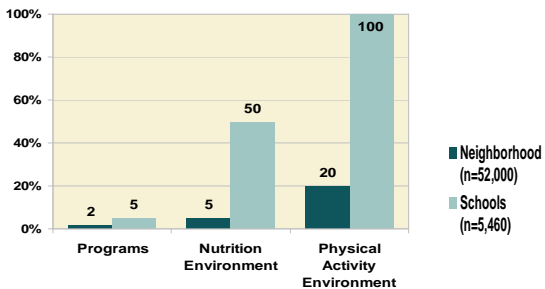
HEAL-CHI in Northern California
RICHMOND
Contra Costa County

Large project areas can be challenging

27 KAISER PERMANENTE.

Findings: How many people are reached?

Percent Reached, by Sector and Strategy, Richmond, CA



28

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Findings: Organizational Changes in KP



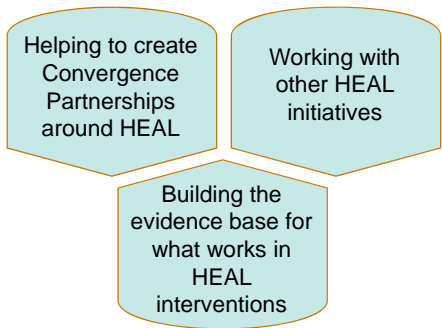
"CHI's not just about talking the talk but walking the walk. I think that it's changed nutrition, what's in our vending machines, what's served in our hospitals, how we build our facilities, the farmer's market[s], the food that we serve at meetings, the employees who work on CHI. They're change agents—it's having a ripple effect in the organization."

"It's had a pretty profound effect on the personality of our workforce."

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Findings: KP Part of Broader Movement



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Conclusions and Recommendations

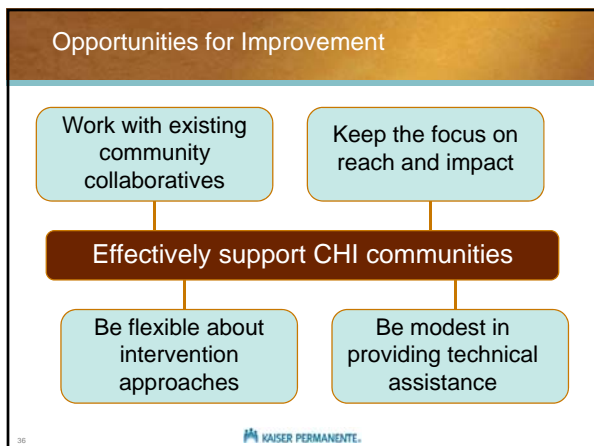
31 KAISER PERMANENTE

- ## Successes so far...
- Built community collaboratives
 - Created promising environmental change strategies
 - Made in-roads on changes to public policy
- 32 KAISER PERMANENTE

- ## Successes so far...
- Made sizable organizational changes within KP
 - Developed convergence efforts in multiple states
- 33 KAISER PERMANENTE







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The California Endowment



**Healthy Eating,
Active Communities**


Presenter: Maria Casey, MA, MEd
HEAC Program Office Director
Partnership for the Public's Health, Public Health Institute

Childhood Obesity Conference
June 12, 2009



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I. HEAC Goals, Design & Sites



OUR APPROACH

Healthy Eating, Active Communities models a comprehensive approach to obesity prevention that is place-based and that focuses on environmental and policy change.

DESIGN

Community Grants

- HEAC Phase I – Six local community collaboratives were awarded 4-year grants to achieve policy and environmental change across five sectors: schools, after school programs, neighborhoods, media / marketing, and health care.
- HEAC Phase II – An additional 15 months of funding provided to communities to deepen the work in two redefined sectors: schools, including school-based after school programs; and neighborhood, including community-based after school programs and health care.

Community Building/TA Support

- Network of TA Providers – Support achievement of results in each sector.
- Evaluation Team – Support development of logic models and provide a range of data to support planning and policy change efforts.



Community Grants



Healthy Eating, Active Communities Sites




II. Intervention Strategies



School/School-based After School Sector Strategies Include:

- Full implementation of current state standards (SB12 and 965) for competitive school beverages and foods, district-wide in grades K through 12.
- Full and ongoing implementation of California's required minutes for PE and policies and practices that support having 50% of PE/PA time spent in moderate-to-vigorous physical activity throughout the school day.
- Implementation, monitoring and revision of local school wellness policies.
- Linking after school programs with the core school day to create a seamless nutrition and physical activity environment.



Neighborhood Sector Strategies Include:

- Improved access to affordable healthy food and physical activity opportunities in neighborhoods/communities.
- A broad cross-section of youth (K-12) have access to healthy "out-of-school" environments (including summer programs, local parks, league programs, faith-based programs and youth development programs).
- Accomplishments in the health care sector are sustained by linking interventions to neighborhood/community strategies.
- Local health departments develop data capacity to support environmental approaches to improve nutrition and physical activity.




III. Highlights of Cross-Site Priorities, Accomplishments, Challenges & TA Provided




Cross-Site Priorities

- Develop joint-use agreements with school districts.
- Align implementation of Wellness Policy activities before, during and after school.
- Work on SB12/965 and PE Code monitoring and compliance.
- Continue to build capacity of local residents (parents and youth) as an advocacy and sustainability strategy.
- Cultivate stronger relationships with business community (e.g. farmer's markets, private/public partnerships for capital improvements, public relations, etc.).
- Work closer with elected officials and district leadership to secure ongoing buy-in—continue to make link between food & PA environments and academic performance.



Baldwin Park

Cal Trans awarded a grant to HEAC Baldwin Park that will allow several partner organizations to support the city to conduct community planning for four major street corridors, resulting in improved pedestrian mobility and safety and promoting physical activity.



Chula Vista

Building on a model community planning and design process to revitalize Lauderbach Park, the community is expanding opportunities for physical activity in safe environments by revitalizing five additional parks.



Oakland

Leveraged HEAC funding with four-year Healthy Kids, Healthy Communities Grant from the Robert Wood Johnson Foundation to implement the Oakland Schoolyards Initiative and expand the number of school-based produce markets throughout Oakland.



Santa Ana

"Healthy Santa Ana" was created to identify businesses, institutions and organizations that provide access to healthy foods and encourage physical activity opportunities. The partnership with Northgate Market is a promising model.



My kitchen, my rules - a sign in Spanish promotes fruits and vegetables at Northgate Market as part of an Orange County Regional Network weekend in-store food demonstrations.

Henry Torres, worksite program coordinator, leads employees at Northgate Market in stretch exercises.

Slide 15

E3 We need to validate this in the survey
Erin, 1/21/2009

South Los Angeles

Salud con Sabor SmartMenu Program – Seven vendors located in the Mercado La Paloma are participating 100% in a highly successful menu labeling effort.



Shasta

Happy Valley is predominantly a farming community that has started to market itself, with the support of local healthy eating advocates. HEAC partners created a Farm Trail Map to promote farm businesses and encourage residents to consume more locally grown fresh produce.



Drip irrigation hoses feed naturally heat and drought resistant crops on the Jones farm.



Marjorie and Ernel Jones hold some of the produce they grow on their small farm.



Ripe raspberries hang heavy on Coleen Wogomen's 4 acre Double W Ranch farm.

Cross-Site Challenges

- School district leadership support
- Budget cuts
- Turnover in administration at district level and school sites
- Staff turn over and displacement in other institutions
- Disconnect between schools and after school programs make it difficult to monitor SB12/965 and PE/PA compliance
- Ongoing external pressures— e.g., food trucks and unhealthy parent fundraising activities
- Corner store conversion efforts negatively impacted by the down turn in economy
- Difficulty implementing PE standards



TA Provided Across Sites Has Included:

- Alternative fundraising options
- Support to develop joint-use agreements and private/public partnerships
- Support to develop and implement a monitoring tool for PE/PA
- Support to develop, strengthen, implement and monitor wellness policies
- Accessible communication materials and tools for community members
- Support to engage youth and other residents in data gathering and policy and advocacy



Use of Data to Support Change

- The evaluation results by sector provide evidence of the progress that the HEAC grantees are making towards achieving environmental changes in their neighborhoods/communities.
- Grantees are linking assessment data to policy action by sharing findings with policymakers and public officials.
- Evaluation findings have informed the evolution of the HEAC environmental change model and have helped grantees prioritize and refine strategies.

- HEAC Phase I Evaluation Findings 2005-2008



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Thanks to Jesus Verduzco and Tonya Hammond for their support in developing this presentation.



Capturing Youth Voices to Assess the Impact of Comprehensive Community Based Interventions

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Wendi Gosliner, MPH, RD
Dr. Robert C and Veronica Atkins
Center for Weight and Health
University of California, Berkeley



Childhood Obesity Conference 2009

Acknowledgements



The work presented here represents the efforts of many individuals and institutions. These projects have been a true collaborative effort. I would like to acknowledge my colleagues on the panel and their organizations, as well as the numerous adults and children we've worked with in communities throughout California and the nation.



Why Collect Individual Level Data in Environmental and Policy Interventions?

- Working to change environments for *youth*
- Important to understand what youth (users) think, believe, do— both to shape interventions and to understand interventions' effects
- Need to use rigorous methods to capture and communicate their experiences
- Ultimately, if our efforts don't impact youth, we need to reconsider our approach

What is important to collect?

1. Student beliefs and perceptions:

- What do students think of their home, school, community environments?
- Do they think health is important?
- Do students think they have access to places to do physical activities? Do they like those places?
- Do they want more access to particular kinds of foods?
- Do students notice changes to their school environment? If so, what do they think?

What is important to collect?

2. Student Behaviors:

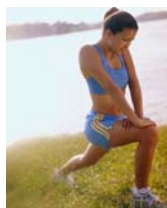
- What kinds of foods and beverages do students consume at home? At school? Other places?
- What types of activities are students engaged in?
- Where are students physically active? At school? In their communities?



What is important to collect?

3. Health Outcomes

- Do interventions affect students' aerobic fitness?
- Do interventions ultimately affect students' BMI?



How are we collecting student experiences?

- Two sources of data:
 - Student survey of nutrition and physical activity attitudes and behaviors
 - Fitnessgram measurements: BMI & aerobic fitness
- Design:
 - Cross Sectional
 - Pre/Post intervention

Student Survey

- Administered to 7th and 9th grade students during class at school
- Includes about 40 questions (141 items including submeasures)
- Takes students 30 minutes to complete

Fitnessgram

- Measurements taken annually for all 5th, 7th, and 9th grade students in California
- We provide equipment (scale/stadiometer) to schools along with minimal training
- Analyze secondary data from CA Dept of Education



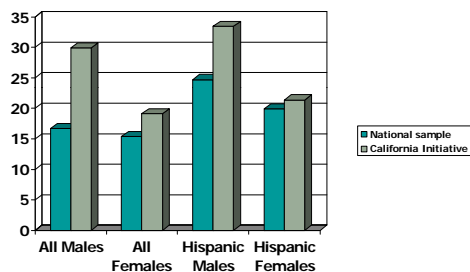
Participating Students Have High Rates Of Overweight & At-Risk for Overweight

Figure 2: 2006 Fitnessgram BMI Results

BMI Category (<small>≤</small> 5 th Percentile)	All HEAC students % (n)	Gender	
		Male	Female
Underweight (<small>≤</small> 5 th Percentile)	2% (96)	2% (55)	2% (41)
Healthy Weight (5-85 th Percentile)	53% (2951)	49% (1386)	58% (1565)
At risk for overweight: (85 th – 95 th Percentile)	20% (1120)	19% (537)	22% (583)
Overweight: (<small>≥</small> 95 th Percentile)	25% (1360)	30% (844)	19% (516)

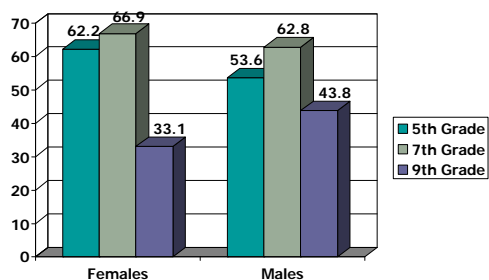
Comparing youth in initiatives to national data: (BMI \geq 95th Percentile)

Figure 4: Percent of overweight students (BMI \geq 95th Percentile)



Aerobic capacity fitness levels of the youth (note precipitous drop at 9th grade)

Figure 8



Student Findings Inform our Work

What kinds of things are we learning from students that are relevant to our environmental and policy work in schools and communities?

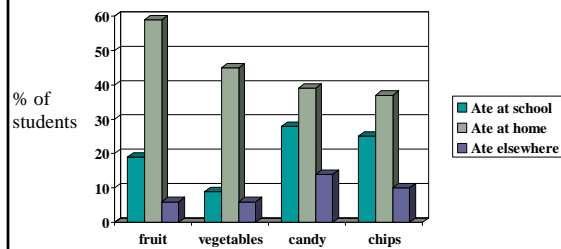


Student Beliefs and Perceptions?

- Most students think good nutrition is important— for feeling good (90%), doing well in school (90%*), being healthy (94%)
- Most students do not perceive foods sold at school to be healthy



Student Behaviors: What foods they eat and where; very few eat fruits and vegetables at school

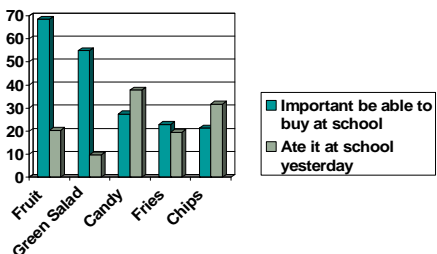


Center for
Waters &
Health

Food

University of California, Berkeley

Student beliefs: they think healthy foods are important to be able to buy at school, even though they don't consume them there



Linking values to behaviors

- Students who think it's important to be able to buy particular food/beverage items at school are more likely to report consuming those items




Linking school meal participation to healthy food consumption

- Students who eat school meals are more likely to eat healthy items at school than students who don't eat school meals... but no difference was observed in less healthy food intake




Linking student beliefs and perceptions to fitness

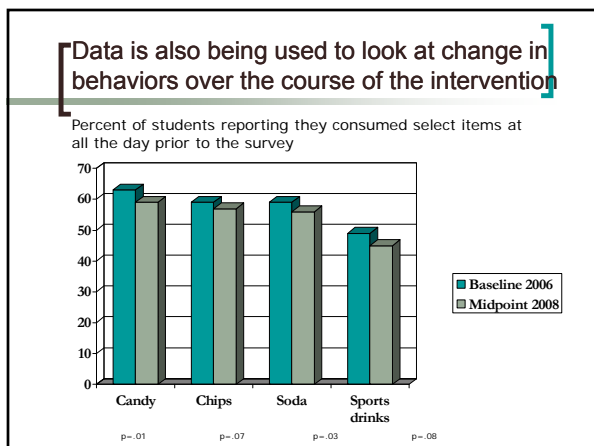
- Perceived access to physical activity resources was *not* associated with fitness
- Student utilization of physical activity resources was associated with fitness: use of school grounds for PA outside of school hours was associated with improved fitness and utilization of bike/jog paths was associated with better fitness

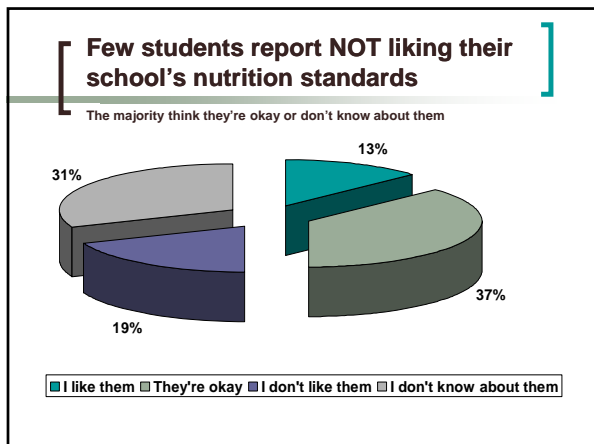


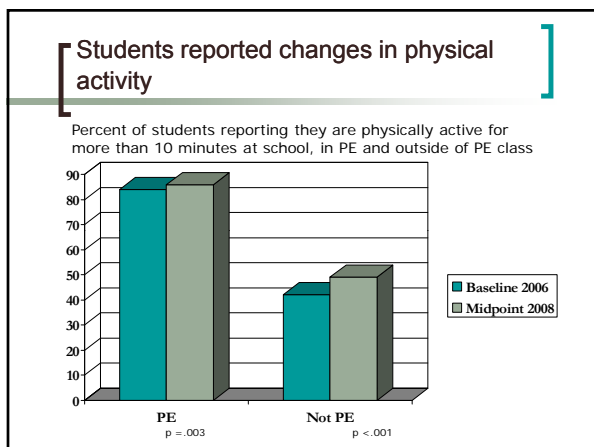
Linking student behaviors and perceptions to fitness

- Liking PE was associated with fitness
- Student behaviors such as walking to school were associated with better fitness, but BMI was higher. Walking also was associated with making purchases of food/beverages on the way to/from school (Madsen, In press 2009)









- ### Four challenges in community interventions
1. With community driven interventions, it can be difficult to select baseline measures
 2. When the overall environment is changing it is hard to truly "control" for the intervention

Four challenges in community interventions

3. Capturing data from those directly impacted by the various intervention elements is difficult in comprehensive community based programs
4. Intensity of exposure may not be adequate for some groups included in the evaluation

Recommendation:

We must continue to develop new methods and we must work to share information in order to advance the field and better understand the ways to improve children's environments

Opportunities:

- If we can demonstrate even small changes at the population level, we have been successful
- Stories from youth are difficult to capture, but critically important to all of us working to positively change the environment in which they live

Thank you to all the youth who so willingly have contributed to this effort!





Creating Healthier Communities in California's Central Valley: a Regional Approach

Geneveva Islas-Hooker, MPH
5th Biennial Childhood Obesity Conference



Central California

- Central California stretches almost 300 miles.
- It's home to more than 3.8 million residents. The population is expected to more than double 2050.
- Our families represent over 70 ethnicities and speak over 105 languages making it one of the most culturally diverse areas in California and the nation.



Central California



- The annual unemployment rate is almost 2 times higher than the unemployment rate for California.
- 21.7% of the population live below 100% of the FPL, compared to the average rate of 15.5% in California.
- More than 1 in 4 Valley children live in a household whose family income is below 100% of the FPL.

Life in Central California

- Within Central California, lies one of the largest and richest agricultural regions in the world.
- Although the valley produces a multitude of nutritious foods, many families still struggle to put food on their tables.
- Dire health conditions and persistent poverty plague this vast region, despite the prosperity generated by the agriculture industry.



Health in Central California



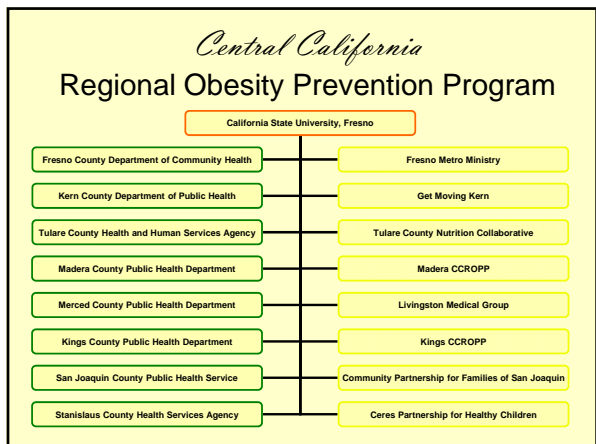
- 1 out of 3 children, <12 years of age, are overweight and obese
- 15.5% of adolescents, ages 12-17, are overweight and obese compared to 14.2% in California
- 65% of adults, ages 18-64, are overweight and obese compared to 56.2% in California
- 63% of adults age 65 and over are overweight and obese compared to 55.7% in California

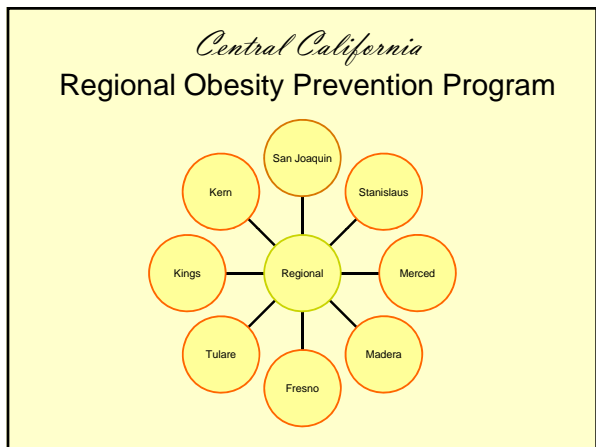
Health in Central California

Overweight and Obese by Age Group-
San Joaquin Valley and California, 2001 and 2008

County	Ages 12-17		Ages 18-64		Age 65+	
	2001	2008	2001	2008	2001	2008
Alameda	14.1%	18.8%	63.8%	58.7%	58.8%	65.7%
Butte	7.3%	9.0%	61.4%	59.0%	59.2%	62.1%
Colusa	19.4%	7.4%	62.3%	52.9%	58.0%	59.2%
Contra Costa	11.8%	4.8%	66.1%	54.2%	58.6%	69.5%
El Dorado	15.7%	15.1%	67.4%	58.2%	67.2%	61.6%
San Francisco	13.8%	14.7%	66.0%	51.6%	60.3%	59.7%
Stanislaus	12.8%	15.0%	64.8%	50.4%	52.4%	63.0%
Tulare	7.6%	25.1%	71.6%	56.9%	58.1%	63.5%
San Joaquin Valley	11.8%	15.6%	65.1%	60.0%	60.6%	63.8%
California	13.3%	14.2%	65.0%	56.2%	56.5%	65.7%
Healthier People 2010 Objective	5.0%	5.0%	15.0%	16.0%	15.0%	15.0%

Sources: U.S.A. Census for Health Policy Research, 2002; 2007.
 *Statistically unstable
 †Adult obesity is defined as having a Body Mass Index (BMI) of 30 or higher.
 ‡Using the Body Mass Index (BMI) ≥ 25 level, the value "overweight or obese" includes the respondents who have a BMI of 25 or greater.





Our Approach

- We believe that in order for community members to apply healthy eating and active living they need the environmental context and policy support to practice these behaviors.

Assessment

- How easy is it to eat healthy?
- How easy is it to be physically active?

*Community Driven
Logic Models + Work Plans*

Regional
County
Local

CCROPP Target Locations

1. *Fresno County* - Southeast Fresno neighborhood
2. *Kern County* - Greenfield neighborhood of Bakersfield & Delano
3. *Kings County* -Kettleman City
4. *Madera County* -Southeast Madera neighborhood & Fairmead
5. *Merced County* -Southeast Merced neighborhood
6. *San Joaquin County* -Southeast Stockton neighborhood
7. *Stanislaus County* -Ceres
8. *Tulare County* -Pixley & Earlimart

Local-level Successes

- 2008 zoning ordinance change
 - Fresno City Ordinance on Farmer’s Markets revision now permits farmers markets in neighborhoods.
- EBT/WIC acceptance at flea markets and farmer’s markets
 - Merced and Atwater Flea Markets (combined there are more than 6,000 visitors per weekend)
 - Ceres Farmers Market
 - Madera Farmers Market (has the highest WIC redemption rate in the state)
 - Kern County Department of Public Health farmers market (first market to be certified on public health department grounds)
- School farm stands
 - Farmers Market at Burroughs (first ever to open on Fresno Unified school grounds)
 - Pixley Fruit and Vegetable Stand



Local-level Successes

- Park enhancements
 - Greenfield Walking Group transformed Stiern Park- it’s now safer and more accessible for residents to enjoy recreational activities
 - Cesar Chavez Leadership Program youth documented Stiern Park challenges, wrote a grant for new play equipment and received healthier, safer playground
 - Pixley Park received new soccer goal posts; Youth are rebuilding park arbor to make their local park more inviting and more accessible



County-level Success

- Worksite Wellness
 - Four out of eight counties have established/implemented policies that center around the promotion of breast-feeding, removal of vending machines, healthier food choices, increased physical activity at work, etc.
- Land Use & Planning
 - CCROPP sites have built partnerships with city and county planning departments
 - CCROPP partners inform key stakeholders about the role public health plays in the built environment
 - Inclusion of health elements in general plans
 - Restricting fast food businesses
 - Residential development to remain walkable/bikeable



Regional-level Successes

- Increasing access to healthy food
 - Establishing farmers markets, community gardens and markets with fresh foods in low-income neighborhoods
- Increasing opportunities for safe places to play
 - Improving parks, sidewalks and other opportunities for physical exercise
 - Creating smart use of schools and recreational facilities through joint use
- Formation of partnerships within each neighborhood, community, county and across the region.



Unexpected Successes

- Grassroots community leadership (Assets not liabilities)
- Increase community cohesion
- San Joaquin Valley voice & identity
- Informing statewide and national interventions
 - Joint-use
 - Incentivizing small store conversions.



Linking to Community Priorities

- Reframing from just obesity prevention to social equity and justice.
- Promoting the sales and consumption of more fruits and vegetables is linked to economic development for our region.
 - Increasing access to physical activity space is linked to greater community safety, increase community cohesion and community ownership.

Lessons Learned

- Policy and environmental change work
- takes time
 - necessitates relationship building
 - requires community engagement & mobilization
 - requires educating decision makers and persuading them to act.

Evaluation

Samuels and Associates – Phase 1 Synthesis Report
Central Valley Health Policy Institute – Opens Systems

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Thank you!



The California Endowment

Robert Wood Johnson Foundation

**HEAC and CCROPP:
Building the Evidence for
Changing Nutrition and
Physical Activity Environments
Phase I Evaluation Findings**

California Childhood Obesity Conference
Friday, June 12, 2009

Sarah E. Samuels, DrPH
Samuels & Associates

**HEAC and CCROPP:
Changing Nutrition and Physical Activity
Environments in Low Income Communities in
California**

<p>Healthy Eating Active Communities Program (HEAC)</p> <ul style="list-style-type: none"> • 4 years • 6 communities throughout CA • Policy and environmental change in 5 sectors: schools, after school, neighborhood, healthcare and advertising/marketing • Partnership: schools, community based organization and Public Health Department 	<p>Central California Regional Obesity Prevention Program (CCROPP)</p> <ul style="list-style-type: none"> • 3 years • Central Valley, CA • 6 counties funded • Regional policy change • Partnership: Public Health Department and community based organization • Local obesity councils identify priority interventions for built environment, schools and workplaces
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It Works!



Improving Community Environments Makes Children Healthier:

- FACT: When Communities Provide Places to be Active, Young People Exercise More
- FACT: When Communities Have Access to Fresh Affordable Foods, Families Are Less Likely to be Overweight and Less Likely to Suffer From Diabetes
- FACT: When Schools Prioritize Physical Education, Children Are Healthier
- FACT: When Schools Serve Only Healthier Foods, Students' Eating Habits Improve
- FACT: Prevention Is a *Great* Investment

May 2009 The California Endowment

Healthy Eating, Active Communities

Phase I Evaluation Findings 2005-2008



HEAC Phase I Evaluation Team

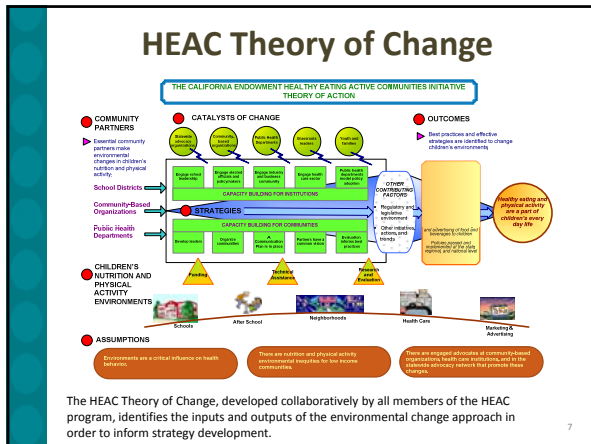
- Samuels & Associates
- UC Berkeley Center for Weight and Health
- UCLA School of Public Health, Department of Health Services
- Abundantia Consulting
- Field Research Corporation
- Expert counsel provided by HEAC National Evaluation Advisory Committee

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The California Endowment's Healthy Eating, Active Communities (HEAC) Program

- **Objective:** reduce disparities in obesity/diabetes by improving food and physical activity environments for school-age children
- **Focus:** 5 sectors - school, after school, neighborhood, health care, marketing/advertising environments
- **Funded Partners:** Grants to schools, community organizations, and local public health departments
- **Approach:** change environments, policies and organizational practices that influence eating/physical activity
- **Location:** 6 low-income communities in California, USA
- **Duration:** 4 years, \$26 million, extended to 2010
- **Evaluation:** Comprehensive external evaluation

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- ### Logic Model
- The HEAC program-wide logic model places primary focus on efforts to prevent childhood obesity by addressing directly the environmental factors that are linked to poor nutrition and physical inactivity among children
 - The HEAC program-wide logic model frames the environmental approach for each sector (schools, after school, neighborhoods, health care), listing program-wide goals and expected outcomes to be achieved across all communities and guiding the HEAC sites in local planning and strategy development
 - HEAC sites developed their own site-specific logic models that reflect the goals and the strategies of the HEAC program, tailored to their community's needs

- ### HEAC Evaluation Questions
- The HEAC evaluation will continue to be guided by the following cross sector research questions:
- Across sectors, how and to what extent did the place-based strategies utilized by the collaboratives impact the food, physical activity, built, and policy environments in the grantee communities?
 - How and to what extent did the Initiative impact individual attitudes, perceptions, knowledge, behaviors and engagement in changing food and physical activity environments? How did this vary by demographic characteristics, geography, and population size?
 - How well were the local collaboratives able to operationalize plans, utilize technical assistance, engage youth and their families, and link to local, state and national policy initiatives?
 - How will the activities and accomplishments of the local collaboratives be sustained over time?
 - How did the collaboratives disseminate their lessons learned? What are best practices for replication?
 - To what extent did the collaborative activities contribute to reducing health disparities in low-income and underserved communities?

Evaluation Design and Methods

SECTOR	METHODS
Schools	<ul style="list-style-type: none"> ▪ School Competitive Foods and Beverages Environmental Assessment ▪ School Physical Activity Environment Assessment ▪ PE Activity Levels ▪ School Stakeholder Survey ▪ Student Nutrition and Physical Activity Survey ▪ Financial Impact Study ▪ Fitnessgram data analysis
After School	<ul style="list-style-type: none"> ▪ After School Beverage and Food Environmental Assessment ▪ After School Physical Activity Environmental Assessment ▪ After School Physical Activity Levels ▪ After School Stakeholder Survey
Health Care/ Public Health	<ul style="list-style-type: none"> ▪ Health Care Provider Survey ▪ Health Care Environmental Assessment ▪ Health Care Stakeholder Survey ▪ Public Health Department Survey
Neighborhood	<ul style="list-style-type: none"> ▪ Physical Activity Environmental Assessment ▪ Food and Beverage Environmental Assessment ▪ In-Store Food and Beverage Assessment ▪ Neighborhood Stakeholder Survey ▪ Community Resident Survey ▪ Youth Focus Groups ▪ Parent Focus Groups

HEAC Site Accomplishments

- Major changes to school foods & meals
- Healthy snacks in after school programs
- PE training for teachers
- No new fast food restaurants
- New/improved park facilities
- Athletic leagues discourage sodas/promote healthier foods
- Walking safer and easier through sidewalk & traffic safety improvement
- New school-based produce stands and community farmers markets
- Providers trained as advocates
- Hospitals adopt/implement policies to improve foods & beverages sold
- Pediatrician PA prescription pad: refers children to Dept. of Parks and Rec. activities

HEAC Site Accomplishments

- Public health department and communities providing language on healthy communities to general plans
- Implemented acceptance of food stamp EBT at two local farmer's markets
- Developing worksite breastfeeding policy
- Engage local policymakers and public officials
- Engage in general plan process to include health outcomes
- Greater sense of hope from people and pride in knowing that we can make a difference

HEAC Program -Wide Accomplishments

- HEAC has created an innovative and cohesive framework for a policy and environmental change approach to childhood obesity prevention in diverse communities
- The HEAC experience confirms that a multi-sector approach is feasible and necessary; Synergy between sectors facilitates progress
- Access to healthy food and physical activity has increased in the HEAC communities
- Strong leadership strengthens reach and sustainability
- Community engagement has been essential to HEAC's success
- HEAC sites are working to sustain their accomplishments

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SCHOOLS

- The HEAC sites' greatest achievements have occurred in the school sector

[You] need 100% support from everyone in the district, including the superintendent, the school board, teachers and principals. [We] need to give information and get parents' help. Everyone needs to understand that this is important.

- School stakeholder



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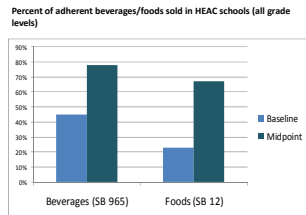
Schools: Making policy and environmental changes

- The school sector work was facilitated by a strong set of state and national policies supporting the development of healthy school environments, including:
 - California legislation (SB 12 and SB 965) setting nutrient standards for competitive foods and beverages
 - A USDA mandate requiring school districts to adopt a wellness policy addressing nutrition and physical activity
 - California law requiring schools to provide a specific number of minutes of physical education for students

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Schools: Changing the food environment

- All HEAC schools have changed the snack foods sold on campus. From 2005 to 2008, adherence to California's school nutrition standards increased 33% for beverages and 44% for foods:
- Most HEAC school districts have worked to increase participation in the school meal programs, which provide healthy food to students

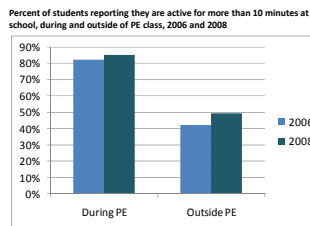


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Schools: Changing the physical activity and physical education environments

- All HEAC school districts have adopted new physical education curricula to improve the quality of physical education classes
- All HEAC school districts have implemented teacher trainings to maximize physical education class adherence to State standards

- PE offers a good opportunity for students to be physically active:



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AFTER SCHOOL

- The after school sector has emerged as an area of promising policy and program improvement opportunities

We have trained all of our after school coordinators on the wellness policy. All of our afterschool teachers have been trained in CATCH and have materials and equipment through CATCH.
- After school stakeholder

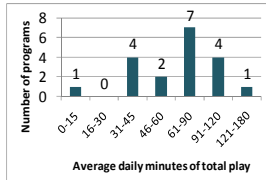


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After School: Changing the physical activity environment

- After school is a good opportunity for students to be physically active. The majority of after school programs had at least one hour of physical activity/playtime:
- All HEAC after school programs are adopting physical activity standards and/or curricula to improve the quality and quantity of physical activity during after school programming

Number of programs by average daily minutes of total play, all grades combined



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NEIGHBORHOOD

- The neighborhood sector encompasses many activities including policy adoption, built environment improvements, and community and youth engagement strategies



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How HEAC is changing neighborhood food and physical activity environments:

- Converted two neighborhood corner stores in **South LA** to sell healthier foods and implemented Smart Menu, a menu labeling project, with vendors at SLA's Mercado La Paloma
- **South Shasta** youth worked with Walmart to create healthy check-out aisles with displays of snack foods that meet CA school food standards
- Produce stands operating at **Oakland** schools, selling fresh fruits and vegetables to children, parents, teachers and neighborhood residents
- **Chula Vista** improved park facilities and created mobile recreation van to support physical activity in local parks
- Community residents provided input into **Baldwin Park's** Parks Master Plan and city redevelopment plan
- Youth letter-writing campaign in **Santa Ana** convinced the Superintendent to open school grounds after school

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YOUTH ENGAGEMENT

- Grantees have been successful in engaging youth and have cultivated a cadre of youth leaders by building youth capacity around understanding policy, conducting research, formulating policy solutions, and presenting data to policy makers
- Youth leaders have successfully advocated for environmental change to local decision makers and business leaders

It'll give me experience for the future – to change the community, which gives me pride and dignity.
- Youth focus group participant

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How HEAC is engaging youth to change food and physical activity environments

- Youth in **Chula Vista** conducted walkability assessments around schools and assessed marketing and advertising and accessibility to healthy foods in the community
- **Baldwin Park** created Associated Student Body (ABS) health commissioner positions to work on implementing a healthy marketing campaign and supporting HEAC issues at high schools
- Youth and community residents have provided input to the **Shasta** visioning process
- **South Los Angeles** youth created documentaries on food access that have been presented at national conferences and used for advocacy efforts
- High school youth teaching cooking classes for elementary students, and involved in other after school programming in **Oakland** schools
- Youth councils in **Santa Ana** requested more fruits and vegetables and salad bars in middle schools and high schools

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Public health departments and leadership

- The Alameda County Public Health Department has a representative on the City of Oakland Planning Commission
- The Orange County Public Health Department is building capacity to collect and report obesity data
- Los Angeles County Department of Public Health created a Division of Chronic Disease and Injury Prevention
- Shasta County Public Health Department funded training programs and equipment purchases in schools
- San Diego County Public Health Services is training students and promotoras to be advocates

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Health Care/Public Health: Nutrition and Physical Activity Policies

Nutrition and Physical Activity Provisions in Health Care Facility/Public Health Department Policies

Provisions	San Diego County (Adopted 2006)	LA County (Adopted 2006)	Kaiser Permanente (Adopted 2004)	Children's Hospital Oakland (Adopted 2007)
Healthy vending machine foods and beverages	X	X	X	X
Healthy cafeteria foods and beverages			X	X
Healthy meeting/conference foods and beverages		X		
Healthy fundraising foods and beverages		X		
Physical activity				

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Health Care Providers

- Health care providers understand the importance of obesity prevention; about half do clinical prevention, but few are involved in policy advocacy
- Strategies:
 - Involve in local issues
 - Academic detailing
 - Training and tools
 - Personal stake
 - Advocate for reimbursement

Central California Regional Obesity Prevention Program

Phase I Evaluation Findings
2006-2008



CCROPP Phase I Evaluation Team

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Unique Characteristics of CCROPP

- The CCROPP design builds on many features found in HEAC – particularly the environmental and policy approach to obesity prevention – but it has unique features as well, including:
 - ability to combine both local and regional strategies and leadership
 - focus on urban, rural and unincorporated communities, and
 - engagement of strong grassroots community advocates for environmental change

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CCROPP Program

- **Objective:** Address childhood and adult obesity through place-based policy changes that support access to physical activity and healthy foods in California's Central Valley region
- **Funded Partners:** Public health departments and community-based organizations
- **Approach:** Change environments, policies and organizational practices that influence eating/physical activity
- **Location:** Eight contiguous counties in CA's Central Valley
- **Duration:** \$2.6 million; three-year regional initiative, extended to 2010
- **Evaluation:** Comprehensive multi-method evaluation

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Logic Model

- A CCROPP regional logic model that focuses on a shared vision and local grantee logic models
- The overarching goals of CCROPP are to promote safe places for physical activity and play throughout the region, increase access to fruits and vegetables grown locally throughout the region, and support community and youth engagement
- CCROPP grantees are pursuing interventions in parks, neighborhoods, and in the built environment, as well as schools, and worksites at the county level and in defined geographic areas
- The evaluation data provides evidence of the progress that the CCROPP sites as are making towards achieving their local expected outcomes

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CCROPP Evaluation Questions

The evaluation design is driven by several overarching research questions:

- How has the capacity of public health departments changed at the local and regional levels to support nutrition and physical activity environmental change for obesity prevention?
- What are the regional and community barriers to changing environments and how were these barriers addressed during this initiative?
- How has the regional work contributed to changes in community-level environmental and health policy changes?
- How, and to what extent, did the environmental strategies developed by the grantees impact the food, physical activity and policy environments in the grantee communities?
- How will the activities and accomplishments of CCROPP be sustained over time? What are best practices for replication?
- What processes, models, and interventions unique to rural, agricultural, and Latino communities did CCROPP develop?
- How, and to what extent, did the public health departments and community-based organizations collaborate for obesity prevention?
- What factors needed to be in place to develop an obesity council with full resident representation?
- To what extent did the obesity councils contribute to advocacy? What were the accomplishments of the councils?

Evaluation Design and Methods

METHODS

- Environmental Assessments
 - Public health departments
 - Farmer's markets/produce stands
 - Physical activity/built environments
- Community Resident Focus Groups
- Elected/Government Official Stakeholder Interviews
- Grantee Reporting Interviews/Grantee Profiles

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CCROPP Program-Wide Accomplishments

- CCROPP has created an innovative community-driven policy and environmental change approach to obesity prevention in the Central Valley
- CCROPP grantees are increasing access to healthy food and physical activity opportunities
- Strong leadership deepens impact and extends CCROPP's reach
- Community resident engagement is the cornerstone of CCROPP's success changing food and physical activity environments
- CCROPP sites are working to disseminate and sustain their accomplishments

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Environmental Change: Public Health Departments

Public Health Departments in the Central Valley have achieved important goals:

- Engaged staff around healthy eating and physical activity
- Adopted or are pursuing wellness policies (including breast feeding policies)
- Expanded public health department wellness policies and/or programs county-wide

Tulare public health department's worksite wellness policy has been adopted county-wide by the Department of Health and Human Services

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Environmental Change: Farmer's Markets

Impact of Farmer's Markets and Produce Stands in the Central Valley:

- Increasing access to healthy foods in the Central Valley
- Increasing opportunity for collaboration between community, schools, public health departments, farmers/vendors
- Increasing redemption of WIC vouchers and use of EBT
- Keeping local produce local
- Attracting diverse customers (community residents, parents, school staff, WIC clients)



Implemented the acceptance of food stamp EBT at the Merced and Atwater flea markets

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Environmental Change: Physical Activity/Built Environments

CCROPP grantees are increasing physical activity opportunities:

- All CCROPP sites are engaged in the CX3 process and other local data collection activities to document local food and physical activity environments
- CCROPP sites are advocating for the inclusion of health language in general plans, participating in land use/parks planning or zoning ordinance reform to increase access to physical activity opportunities and healthy foods, and increasing walkability
- CCROPP sites are improving parks and access to open space through interventions such as infrastructure enhancements, equipment upgrades, walking groups, opening of school grounds, and development of joint use agreements

Greenfield Walking Group, now a self-sustaining community resident group, advocated for creation of a new walking path at Stiern Park

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Community Engagement: Community Resident Focus Groups

CCROPP has led community engagement efforts in each of the eight communities to identify the most critical areas for intervention and to plan practical solutions:

- Issues related to crime and safety were identified as a major deterrent to physical activity and a contributing factor to obesity
- Lack of places to play and concerns regarding crime and traffic safety make it difficult for children and families to be physically active
- Lack of healthy food establishments, such as supermarkets and farmers markets, high cost of food, and safety concerns make it difficult to eat healthy
- Community residents need support and trainings to build advocacy skills as well as opportunities for their voice their opinion and to be heard

It's very difficult because we don't have a park, we don't have a community center and we have children who don't do anything. They are inside playing video games or hanging around with the wrong crowd.

- Community resident

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HEAC and CCROPP: Policy Strategies

Over 45 distinct food and physical activity policy strategies identified

HEAC/CCROPP Food & Nutrition Policies and Strategies

- Implementing California state nutrition standards in schools
- Adopting and implementing School Wellness policies
- Adopting and implementing county/city vending machine policies
- Eliminating sale of foods with trans fat at schools
- Moratorium on fast food/zoning regulations for fast food
- Regulating/restricting vending trucks
- After school program nutrition
- Farmers' market ordinances

HEAC/CCROPP Physical Activity Policies and Strategies

- Including health language in general plans
- Making neighborhoods more walkable
 - Safe routes to school
 - Complete streets programs
- Exploring joint use/school yard improvements
- Increasing bikeability
 - Bike paths/routes
 - Bike cages at schools
- Establishing open spaces for parks

HEAC and CCROPP: Program Challenges

HEAC Program: Challenges

- Current economic conditions impacting resources available to public and private agencies as well as community members' ability to engage as advocates
- Implementation of policies
- Mobilizing community members to change food and physical activity environments
 - Funding alone is not enough to mobilize communities to action
- Changing physical activity environments in schools and communities
- Engaging students in moderate to vigorous physical activity during PE
- Time is required to achieve measurable outcomes
- Gaining long term support among leadership within institutions and government for environmental and policy change

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CCROPP Program: Challenges

- Gaining support for the environmental change approach is slow due to the prevalent perception that individual behaviors are primarily responsible for obesity.
- The region's geographic distance from other parts of the state impedes travel and in-person communication, resulting in isolation.
- Gaining the support of local elected and governmental officials for environmental and policy change is a long term process.
- Community residents are reluctant to approach decisions makers due to language barriers and lack of confidence or experience
- Anti-immigrant sentiment and racism thwart community resident advocacy.

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HEAC and CCROPP: Building the Evidence

- The HEAC and CCROPP experience demonstrates that it is possible to improve access to fruits and vegetables and physical activity spaces in historically disadvantaged and under-resourced communities
- Uncovered limitations of weak policies that do not make a significant enough change in the environment to have an impact on health behaviors and outcomes
- Authentic community engagement is a necessary condition for making and sustaining change
- The evaluation is capturing impacts through a combination of quantitative and qualitative methodologies that document measurable outcomes as well as the processes and context for making changes

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HEAC and CCROPP: Looking to the Future

- The following joint HEAC/CCROPP evaluation methodologies will be implemented:
 - Policy tracking
 - Statewide web-based policy maker survey
 - Joint use policy assessment
 - Public health department capacity assessment
 - Sustaining community engagement interviews
 - Linking obesity and violence prevention
 - Small store conversion
 - Public health department capacity assessment
- Additional HEAC methodologies:
 - Physical activity and food environmental assessment in control schools
 - Survey of elementary teachers on obstacles to teaching PE
 - Expanded physical activity assessment
 - Health care sustainability survey

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HEAC and CCROPP: Shaping the Future

- HEAC/CCROPP evaluations can help inform future funding opportunities: federal government (ARRA), CDC, and foundation funding initiatives by answering the following questions:
 - Which strategies have had the greatest impact?
 - Which strategies can get to scale the quickest?
 - Which strategies can be easily replicated in other communities?
 - What are the costs of community based prevention programs?
 - What are the cost benefits?

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Contact Information

To access the HEAC and CCROPP evaluation reports and other resources online please visit:

www.calendow.org or www.samuelsandassociates.com

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