

Healthy Eating, Active Communities

Phase I Evaluation Findings 2005-2008

Executive Summary

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Map of Healthy Eating, Active Communities Sites



Map courtesy of Partnership for the Public's Health

Executive Summary

Introduction

The Healthy Eating Active Communities (HEAC) program, established in 2005 by The California Endowment, was the first program of its kind to utilize policy and environmental change strategies as the primary approach to reversing the childhood obesity epidemic. The HEAC program has helped to frame and inform a national movement that has engaged multiple entities, including federal, state, and local government agencies, foundations, schools and health care institutions to address the underlying factors that promote obesity.

The pioneering work of the HEAC program has led to the emergence of a new type of childhood obesity prevention initiative that seeks to create environments rich with healthy food choices and opportunities for physical activity, rather than focus on changing individual eating and activity behaviors in an unsupportive physical and social environment. The HEAC environmental approach has influenced the design and implementation of other obesity prevention initiatives in California. The design of TCE's Central California Regional Obesity Prevention Program (CCROPP) was based on the environmental approach used in HEAC, tailored to the experiences, needs and geography of the Central Valley region. The design of the Kaiser Permanente (KP) HEAL initiative was informed by KP's experience as an early funding partner in HEAC.

Healthy Eating, Active Communities:
Growing a statewide movement to change community food and physical activity environments and reduce health disparities for children in low-income communities in California.

As part of the HEAC program, The California Endowment funded six collaboratives in low-income California communities to address five key environments that influence children's nutrition and physical activity behavior—schools, after-schools, neighborhoods, health care, and marketing and advertising. This report provides a summary of the key findings that have emerged from the HEAC evaluation efforts to date.

Evaluation Design and Methods

The evaluation of the HEAC program seeks to understand how community food and physical activity environments can be changed, what it takes to make and sustain changes over time, and what impact the changes have on health disparities related to diabetes and obesity in the participating communities. The evaluation team has created a number of innovative tools to measure a range of outcomes, including changes in the built environment, organizational and legislative policy change, behavioral change in children’s diet and physical activity, as well as changes in children’s fitness levels. The HEAC evaluation design and data collection instruments were reviewed and approved by the University of California at Berkeley Committee for the Protection of Human Subjects. The qualitative and quantitative methodologies developed capture accomplishments, challenges, lessons learned and best practices from the HEAC work to change policies and environments. The following table outlines the quantitative and qualitative assessment tools created and implemented during the HEAC evaluation:

SECTOR	METHODS
<i>Schools</i>	<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
<i>After School</i>	<ul style="list-style-type: none"> ▪ After School Beverage and Food Environmental Assessment ▪ After School Physical Activity Environment Assessment ▪ After School Physical Activity Levels ▪ After School Stakeholder Survey
<i>Health Care/ Public Health</i>	<ul style="list-style-type: none"> ▪ Health Care Provider Survey ▪ Health Care Environmental Assessment ▪ Health Care Stakeholder Survey ▪ Public Health Department Survey
<i>Neighborhood</i>	<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

Schools

Over the last four years, the HEAC sites have made significant improvements in the healthfulness of the school environment. Sites have adopted school wellness policies and have implemented a range of state and local school district policies that have improved the healthfulness of competitive foods and beverages sold and have enhanced the quality of physical education (PE) on campus. Evaluation findings from the HEAC school sector demonstrate that changing school nutrition and physical activity environments is feasible and has become a higher priority for school districts over the program period. Findings suggest that by implementing policy, the healthfulness of the school environments has improved and students are engaging in more healthy behaviors.

After School

During phase I of the HEAC program, California’s Proposition 49 augmented funding for after school programs in all HEAC communities, and helped accelerate improvements in the

quality of the foods served and physical activity opportunities offered. The HEAC sites have worked to extend school wellness policy nutrition standards to after school programs, have trained after school providers on nutrition and physical activity standards, and have adopted curricula to improve the quality of after school physical activity programming. The HEAC evaluation found that children are much more physically active in after school programs than during school PE – highlighting the important role after school programming can play in helping children and youth meet their recommended daily activity level.

Neighborhood

The HEAC neighborhood sector encompasses many activities, including local policy adoption, built environment improvements, and community and youth engagement strategies. The HEAC evaluation has shown that neighborhood environments are changing in the HEAC sites and that grantees are deeply immersed in policy and institutional activities that are leading to short and long term improvements to children’s access to healthy foods and opportunities for physical activity. HEAC sites have participated in community planning commissions and influenced general plans and policies ensuring that land use and redevelopment limit fast food expansion, increase healthy food options at neighborhood food outlets, and improve physical activity spaces at parks and school yards. The sites have used nutrition and physical activity as a vehicle for addressing broader community issues such as economic disparities and community safety and have formed relationships with elected officials, who have now become advocates for the HEAC strategies.

Health Care/Public Health

The health care and public health sector has experienced success in changing health care provider practices and advocating for environmental changes. Within health departments and other health care institutions, HEAC efforts have led to the adoption of policies setting standards for foods and beverages sold at health care and public health facilities. Health care providers in all sites have been trained on the importance of tracking BMI and delivering obesity prevention messages to patients. Additionally, health department staff

members are working with city and county planning agencies within their jurisdictions to insert health language into land use plans. Health care institutions and public health departments have emerged as role models for environmental change, influencing organizational policies and practices to promote healthy eating and physical activity in the communities they serve, as well as in their own places of work.

Accomplishments

Evaluation of the HEAC program is informing the strategies employed by HEAC sites as well as extending the HEAC learning to the broader scientific, advocacy, philanthropic, grassroots, and policy communities. Across the various sectors, numerous accomplishments have begun to transform community physical activity and food environments. Accomplishments across sites and sectors include the following:

HEAC has created an innovative and cohesive framework for a policy and environmental change approach to childhood obesity prevention in diverse communities:

- The HEAC Theory of Change, developed collaboratively by all members of the HEAC program, identifies the inputs and outputs of the environmental change approach in order to inform strategy development.
- 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.
- The evaluation results by sector provide evidence of the progress that the HEAC grantees are making towards achieving the goals and outcomes in the logic model.
- Grantees are linking assessment data to inform 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.
- Due to their experience, the HEAC sites have emerged as vanguards and role models for communities across the country seeking to change nutrition and physical activity environments.

The HEAC experience confirms that a multi-sector approach is feasible and necessary; Synergy between sectors facilitates progress:

- HEAC collaboratives include broad representation from: institutions (such as school districts, planning departments, community clinics, policy departments, social service agencies, youth organizations, and advocacy organizations) within all sectors, local governments and community members. Most of the HEAC sites consistently have broad participation from a diverse set of partners.
- Collaborative members have partnered across organizations and institutions; working across sectors (schools, after school, neighborhood and health care) has enabled HEAC sites to engage a broad coalition of partners to work together toward the common goal of creating a seamless healthy environment for children.
- HEAC sites have responded to additional challenges, such as safety and crime, by leveraging existing partnerships and creating new alliances.

Access to healthy food and physical activity has increased in the HEAC communities:

Healthy Food

- In response to a USDA policy mandate, the HEAC school districts have adopted wellness policies that accelerated setting nutrition standards for snack foods sold on school campuses. Most HEAC districts strengthened the wellness policies by including a clause banning the marketing and advertising of foods that do not meet nutrition standards.
- 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.
- After school programs in all HEAC sites, which represent an important nexus between the school and the community, are adopting the State school nutrition standards for after school programs as required by CA proposition 49.
- HEAC communities have worked with major food retailers to reduce the presence of unhealthy food and increase the visibility of healthy food.
- HEAC communities have made fresh produce accessible to low income families through work with small neighborhood stores, mobile food vendors, farm stands and school-based produce stands.
- Health care facilities in all HEAC sites have adopted policies setting standards for the types of food sold at the facility.
- Many HEAC sites have adopted county or city policies setting standards for the foods and beverages served in local government worksites.

Physical Activity

- 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.
- 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.
- All HEAC communities have advocated for park development, maintenance, or improvement, creating safe, appealing spaces for physical activity.
- Pedestrian safety improvements have been instituted around schools (traffic signal installation, employing crossing guards, walking clubs, and creating safe walking paths between residential areas and schools) to encourage walking to and from school in all HEAC sites.

Strong leadership strengthens reach and sustainability:

- Public Health Departments have provided strong leadership to the HEAC collaboratives and promoted links with community institutions and government agencies including planning commissions, city councils and county board of supervisors, and school districts.
- HEAC has cultivated local leaders – HEAC site coordinators have emerged as role models and champions for environmental and policy change in their communities.
- Local leadership has identified the importance of self-monitoring within local institutions to assure policy implementation and sustainability.
- The HEAC model is most successful in geographic areas that have their own local governmental structures that facilitate high level institutional (school district, health department) and governmental leadership and buy-in.
- Statewide leadership and legislation around issues has given legitimacy and momentum to local policy strategies.

Community engagement has been essential to HEAC's success:

Youth

- 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 and ideas to policy makers.
- Youth leaders have successfully advocated for environmental change and local decision makers and business leaders have heard the youth voice.

Parents and community residents

- Parents have become involved in changing school nutrition and physical activity environments through participation on wellness policy committees.
- HEAC sites have engaged community residents in defining priorities and advocating for policy change with local policymakers and government officials.

Health care professionals

- Physicians have been trained to communicate more effectively with patients and families regarding weight, nutrition and physical activity issues.
- Promotoras and physician champions have been trained and are advocating for healthy food and physical activity environments.

HEAC sites are working to sustain their accomplishments:

- Several HEAC sites are recipients of the first round of RJWF Healthy Kids Healthy Communities funding in recognition of their pioneering work.
- All HEAC sites have applied for and five have received CA Prop 49 funding supporting expansion and improvements in after school programming.
- HEAC sites are active participants in California Convergence activities and helping to shape a statewide policy agenda.

Conclusion

The Healthy Eating Active Communities (HEAC) program has played a major role in accelerating the obesity prevention movement not only in California but at the national level. The evaluation findings provide the field with growing evidence that environmental policy change interventions result in concrete changes in nutrition and physical activity environments and that these changes improve community access to healthy food and physical activity.