



# **Chronic Disease Prevention in Stanislaus County**



## **A Framework to Improve Nutrition and Increase Physical Activity**



## Acknowledgment

Public Health of the Stanislaus County Health Service Agency wishes to thank the many partners and stakeholders of the public health system for their input and support in the creation of this document. The purpose of this document is to provide a roadmap and framework for preventing chronic diseases in Stanislaus County, focusing on the two most prevalent and preventable risk factors: obesity and physical inactivity.

### Prepared by

Stanislaus County Health Services Agency, Public Health

Esmeralda Gonzalez, Chronic Disease Prevention Manager

Phoebe Leung, Assistant Director

Cleopathia Moore, Director of Public Health



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### Health Services Agency Public Health Administration

Cleopathia L. Moore, P.H.N., N.P., M.P.A., Director of Public Health

John Walker, M.D., Stanislaus County Public Health Officer

Phoebe Leung, B.S., R.D., Assistant Director, Public Information Officer

Nancy Fisher, B.S., P.H.N., Assistant Director, Director of Nursing

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## Introduction

Chronic diseases are non-communicable illnesses that are prolonged in duration, do not resolve spontaneously, and are rarely cured completely. Examples of chronic diseases include cardiovascular/heart disease (CVD), cancer, stroke, diabetes, respiratory illnesses, and arthritis. The 2007 Stanislaus County Public Health Report identified that more people die each year from CVD than from any other cause in Stanislaus County and within the State of California. In the last decade, Stanislaus County has consistently ranked among the top three worst counties in the State, in death rates due to heart disease. In general, chronic diseases are the major cause of death and disability in Stanislaus County. Risk factors contributing to chronic diseases include high cholesterol, high blood pressure, and obesity.

Obesity is a major health risk factor leading to most chronic diseases. In Stanislaus County, it is estimated that over 60% of the adults are overweight<sup>1</sup>, while over 34% of the County's 5<sup>th</sup>, 7<sup>th</sup>, and 9<sup>th</sup> grade school children are in the unhealthy fitness zone for body composition<sup>2</sup>. Consequently, the current obesity epidemic is a challenging public health problem.

Although chronic diseases are among the most common and costly health problems, they are also among the most preventable. Four common, health-damaging, but modifiable behaviors—tobacco use, insufficient physical activity, poor eating habits, and excessive alcohol use—are responsible for much of the illness, disability, and premature death related to chronic diseases. Adopting healthy behaviors such as eating nutritious foods, being physically active, and avoiding tobacco use and substance abuse can prevent or control the devastating effects of these diseases. Engaging in regular physical activity can be associated with taking less medication and having fewer hospitalizations and physician visits, while fruit and vegetable consumption may be linked to reduced risk of developing heart disease, some cancers, and type 2 diabetes.

In addressing obesity and combating chronic disease, there are two necessary elements to support and create lasting changes: personal behavior changes, and measures that support the adoption of healthy behaviors. Eating healthy and increasing physical activity are two behavior changes that a person can adopt. Access to healthy foods and a built environment that facilitates and promotes physical activity are imperative to sustaining and encouraging behavior change, in order to address the obesity epidemic, and combat chronic disease.

This document, “**Chronic Disease Prevention in Stanislaus County – A Framework to Improve Nutrition and Increase Physical Activity**”, is developed by the Stanislaus County Health Service Agency/Public Health, with the intention of providing a roadmap for community stakeholders and partners to collectively address obesity in Stanislaus County. The Framework outlines a multi-sector approach to address this health concern. It describes existing efforts and resources, while providing guiding principles and specific recommendations in obesity prevention strategies. These strategies focus on how to affect healthy eating and active living, by improving nutrition and increasing physical activity. Organizations and agencies are encouraged

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<sup>1</sup> Stanislaus County Community Health Assessment, 2008

<sup>2</sup> Health Services Agency, Public Health Annual Report 2008

to utilize this Framework in planning and developing goals and priorities, while ensuring collaboration and alliance with all partners and stakeholders.

## **The Problem of Obesity in Stanislaus County**

Stanislaus County, with a population of half a million, is a multicultural and multi-lingual diverse county with high poverty rates and low levels of educational attainment. In 2007, the greatest proportion of Stanislaus County residents was between the ages of 20 and 59 years old (54%). The racial breakdown in 2007 showed that 87% of the population was White, with 3% Black and 5% Asian. Those who reported they were Hispanic or Latino was at 39%.<sup>3</sup>

According to the 2008 Stanislaus County Community Health Assessment conducted by Applied Survey Research, less than one third (30%) of survey respondents had a normal body mass index, which is used to define overweight and obesity. Thirty-five percent (35%) of respondents were overweight, and 33% were obese<sup>1</sup>. The California Health Interview Study of 2001, and 2003 showed the prevalence of overweight or obese adolescents and adults in Stanislaus County was 58%, exceeding the state average of 50.7%; (8.2% in adolescents ages 12-17 and 66% in adults 18 and over).

In 2007, of the 23,412 students in Stanislaus County who participated in the California Physical Fitness Test (PFT) for 5<sup>th</sup>, 7<sup>th</sup>, and 9<sup>th</sup> graders, 36% of the 5<sup>th</sup> graders, 35% of 7<sup>th</sup> graders, and 35% of the 9<sup>th</sup> graders had body compositions that were not in the healthy fitness zone (HFZ)<sup>4</sup>.

## **The Spectrum of Prevention**

A comprehensive and coordinated approach is the most effective and efficient way to address health concerns and issues in the community. The entire “Public Health System”, defined as the wide range of public, private and voluntary organizations such as governmental agencies, academia, health care providers, hospitals, community-based organizations, associations, businesses and individuals, is responsible for promoting health and preventing diseases in a community. It is best to rely on the Spectrum of Prevention model, where multiple levels of intervention are engaged, for program planning and implementation. The Spectrum is a multifaceted framework that encourages a scope of solutions to a given problem. According to this model, strategic plans that incorporate solutions from all levels of the Spectrum are more successful and sustainable than those of limited breadth. It recognizes that complex health issues require a collaborative approach among stakeholders, and a commitment to change on a variety of levels is vital to be successful<sup>5</sup>. These levels are complementary and when used together produce a synergistic effect where greater effectiveness is achieved. These different levels

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<sup>3</sup> US Census Bureau, American Community Survey, 2008. Note: According to the US Census Bureau, race and Hispanic origin are two separate concepts; people who are Hispanic may be of any race.

<sup>4</sup> California State Department of Education (<http://dq.cde.ca.gov/dataquest/>)

<sup>5</sup> The Prevention Institute ([http://www.preventioninstitute.org/spectrum\\_injury.html](http://www.preventioninstitute.org/spectrum_injury.html))

include the individual, providers, the community, coalitions, organizations, as well as policy makers and legislation. These entities also make up the Public Health System.

Additionally, utilizing the Spectrum of Prevention in planning and implementing prevention strategies can promote responsiveness among individuals and families, address some of the root causes and broader social, economic and cultural determinants of health, as well as ensure sustainable outcomes.

Below is a table illustrating the seven levels of the spectrum and the definition for each level.

**Table 1 – Spectrum of Prevention**

<b>Level of Spectrum</b>	<b>Definition of Level</b>
1. Strengthening Individual Knowledge & Skills	Enhancing an individual’s capacity of preventing injury or illness and promoting health and safety
2. Promoting Community Education	Reaching groups of people with information and resources to promote health and safety
3. Educating Providers	Informing providers who will transmit skills and knowledge to others
4. Fostering Coalitions & Networks	Bringing together groups and individuals for broader goals and greater impact
5. Mobilizing Neighborhoods & Community	Meeting with communities to share agendas, prioritize community concerns as well as health department goals
6. Changing Organizational Practices	Adopting regulations and shaping norms to improve health and safety
7. Influencing Policy & Legislation	Developing strategies to change laws and policies to influence outcomes

For the past decade, Public Health has been leveraging the “Spectrum of Prevention” model to address and mitigate chronic disease across Stanislaus County. A similar strategy has been implemented in the effort of obesity prevention. A critical component of this strategic initiative is to consistently promote healthy eating and active living behaviors within all levels of the Spectrum. The ultimate goal is to create a sustainable healthy community, where residents can simultaneously learn about the importance of pursuing a healthy lifestyle, as the environment they live in enables them to incorporate those healthy behaviors into their everyday lives.

**Creating Sector Specific Changes**

In addition to reaching each of the seven levels in the Spectrum of Prevention, it is also important to ensure that prevention strategies are implemented and changes be effected in the four respective sectors that generally make up a community. These four sectors include the neighborhood within a community, the school system, the health care providers, and the workplace/employer. This Framework also outlines the roadmap to help develop and promote synergy among stakeholders in each of the four sectors.

**Neighborhood**

The neighborhood sector implies the ability to address the built environment that supports healthy eating and active living. It supports policy and systems changes that impact the neighborhoods to increase access to affordable fruits and vegetables or to provide a safe environment for physical activities.

### **Schools**

Children spend the majority of their day in a school setting, from pre-school to high school, including after school programs. Providing universal school breakfast, healthy meals and snacks as well as physical education and activity for each child who is in school is imperative for them to be ready to learn.

### **Healthcare**

Community residents visit health care providers when they are ill or for routine preventive care. Agencies need to work collaboratively with healthcare providers to assist in prevention strategies, including the adoption and implementation of case management standards and guidelines. One example is the “Chronic Care Model – The Healthcare Campaign to Stop the Epidemic”<sup>6</sup>. This is a model that incorporates the environmental factors with the medical system that ultimately impacts the family and patient, and promotes self-management.

### **Workplace**

The majority of adults spend most of their day at work. Having healthy and productive employees reporting to work is a win-win situation for both the employer and employee. The employer can help put in place policies and guidelines to facilitate and promote healthy eating and physical activity for its employees.

## **Local Resources and Efforts**

### **Public Health Programs and Initiatives**

Various Public Health programs have been assessing local health problems with community residents and stakeholders, and developing community health improvement plans to address issues identified. In the last decade, obesity has been identified as a major concern, not only by the health care community, but also by neighborhoods and local residents. Most of the Public Health programs have taken on obesity and chronic disease prevention as major areas of focus. In response to the obesity epidemic, Public Health has engaged in coordinated and unified efforts in the development of prevention strategies.

The *Maternal Child Adolescent Health (MCAH) Program* facilitates the annual Community Health Assessment for Stanislaus County, with a particular focus on the health and safety of women, infants, children, and adolescents. The assessment and subsequent identification of health concerns and gaps in services allow staff to engage the community in the development of strategies to address those identified health concerns. The MCAH Five Year Needs Assessment

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<sup>6</sup> CMA Foundation & California Association of Health Plans, “Child & Adolescent Obesity Provider Toolkit – 2008”



and Plan identified obesity as a priority area based on secondary and primary data. Strategic planning sessions allowed stakeholders to participate in several exercises to analyze the problem, determine influencing factors or causal pathways, identify gaps and assets, and logically identify the most effective strategies for use in Stanislaus County. MCAH and Health Promotion staff successfully incorporated findings into existing programs initiated through partnerships with community based organizations, such as the Healthy Birth Outcomes Project, the Stanislaus County Promotora (community educators) Network, and Walk to School events.

The *Child Health and Disability Prevention (CHDP) Program* is a prevention program that delivers periodic health assessments and services to low income children and youth in Stanislaus County. CHDP staff works with providers and families to assist with medical appointment scheduling and referrals, the provision of health information and resources, and provider in-service training. Childhood obesity prevention activities, messages, and strategies have been incorporated and implemented within the Program's work plan.

The *Healthy Birth Outcomes (HBO) Project* is a program funded by the local Children and Families Commission, with the goal of improving birth and child health outcomes. This Program provides intensive case management, community education and awareness, and provider networking and outreach activities. Many of the activities, messages and educational information are in line with the Public Health obesity prevention initiative.

The *Women, Infants, and Children (WIC) Supplemental Nutrition Program* is a federally funded program for pregnant, breastfeeding and postpartum women, and their children up to the age of five, who are at-nutritional risk and meet income guidelines. WIC is a unique program which not only provides food assistance, but also prescribes specific nutritious foods, requires healthcare screenings, and provides nutrition education and counseling, including breastfeeding promotion and support, and encourages active living. One of its primary goals is to facilitate access to preventive health care and social services, with current emphasis on childhood obesity prevention.

The local *Network for a Healthy California Program* seeks to increase consumption of fruits and vegetables, increase daily physical activity, and to achieve full participation in Federal food assistance programs for food stamp eligible families, via several venues which include parent education, community special events, and social marketing activities. Unfortunately, because of funding complications, this Program ends the end of September 2009. However, the Program has put in place the Nutrition and Fitness Council, and other sustainable resources and activities within the community. It is anticipated that the healthy eating and active living message will be continued and carried on by work through members of the Nutrition and Fitness Council.

The *Healthy Eating Active Living – Community Health Initiative (HEAL-CHI)* is a partnership between Public Health and the West Modesto King Kennedy Neighborhood Collaborative. Funded by Kaiser Permanente Community Benefits, this five year grant focuses on policy and systems change in four specific sectors, which are the schools, the health care community, the worksite, and the neighborhood. Its goal is to improve the health of community residents, reduce health disparities, and curb the obesity rates in the West Modesto area.

On the heels of HEAL-CHI, Stanislaus County is one of the eight central valley counties funded for the *California Central Regional Obesity Prevention Program (CCROPP)*, by the California Endowment. The goal of this regional effort is to create local environments and places that support healthy eating and active living to combat obesity. This program also adopts a partnership approach, between Public Health and the community based organization of Ceres Partnership for Healthy Children. Together, the partners address obesity through place-based policy change that supports healthy eating and active living.

### **Community Partnerships and Collaborations**

Fostering coalitions and mobilizing communities and neighborhoods are two vital strategies within the Spectrum of Prevention. In Stanislaus County, there are a number of Coalitions and Partnerships moving the obesity prevention agenda forward.

***HEART Coalition*** – The Heart Education Awareness Resource Team (HEART) Coalition was formed in 1999 to combat and reduce cardiovascular disease in Stanislaus County. The Coalition’s mission is to reduce cardiovascular disease risk factors to improve the health status and quality of life of the residents of Stanislaus County by increasing public awareness, promoting prevention and education, and coordinating and directing accessible community resources. There are about 20 organization members, including area hospitals, local health plans, community clinics and providers, academia, health care organizations, foundations, as well as concerned residents. In the past few years, the Coalition has sponsored and implemented projects to promote public awareness, employee health, and obesity prevention in school children.

***Safe Communities Coalition*** – The Safe Communities Coalition is a dynamic and enthusiastic group of 20 some agencies and individuals, committed to improve safety for all residents of Stanislaus County. The Coalition’s vision is “Making Stanislaus County Safer for All.” Coupled with the concerns of childhood obesity, and the impact of the built environment on health, the Coalition decided to expand its goals to include community and personal safety, focusing on safe routes to school, and safe and walkable community.

***Breastfeeding Coalition*** - This Coalition is an active network of advocates promoting and supporting breastfeeding through different activities including education of families, community members and healthcare providers, as well as promoting breastfeeding guidelines and policies.

***Nutrition and Fitness Council*** – Facilitated by the Health Services Agency, the mission of the Council is to improve the health of people in Stanislaus County by promoting healthy eating and physical activity. Council members are diverse, including health professionals, teachers, community advocates and students. The Nutrition and Fitness Council stakeholders are focused on nutrition education and obesity prevention, and had taken on several projects over the years. Currently, the Council acts as a venue to share resources and best practices for its members, on promoting healthy eating and physical activity in various environments.

***HEAL-CHI Stakeholders*** – The HEAL-CHI Stakeholders, coordinated by the West Modesto King Kennedy Neighborhood Collaborative and the Health Services Agency, consists of over forty members of community agencies and partners working together to achieve the goals and objectives of the HEAL-CHI program. Members are working towards systems and policy



changes within the four sectors of schools, health care, worksite, and neighborhood, to promote and facilitate healthy eating and active living in the West Modesto area.

***County Nutrition Action Plan (CNAP) Partnership*** – This is a collaboration of the many nutrition assistance program providers within the County, working towards a common goal of increasing fruit and vegetable consumption of program participants. Stanislaus CNAP was established in June 2006. Partners include local providers of food assistance programs such as Supplemental Nutrition Assistance (SNAP - Food Stamp), WIC, School Lunch and Breakfast, Child and Adult Care Food Program, Summer Food Service Program, and SNAP Education. The partnership collaborates with each other to develop consistent nutrition education and public awareness messages, and share best practices and resources to achieve its common goal.

***CCROPP Council*** – The CCROPP Council serves as an advisory group to support and promote the activities and priorities of the CCROPP Program. Council members include concerned residents of the Ceres neighborhood, government agencies, community based organizations, the Ceres School District, health care providers, and local businesses. The ultimate goal of the Council is to create a healthier community, where residents have easy access to healthy foods, and an environment that supports physical activity for both adults and children.

## Prevention Strategies and Recommendations

Based on evidence based research and best practices, the following are guiding principles on prevention strategies for each level of the Spectrum of Prevention:

***Strengthening Individual Knowledge & Skills - Enhance capacity of an individual's knowledge regarding good nutrition and the importance of physical activity***

### **Recommendations:**

***Promote Healthy Lifestyle*** - Promote and support healthy lifestyles for children and adults at home, in school, in childcare facilities, and in the community. Strategies include: to provide individuals with education on healthy eating, active living, and on how to promote and support opportunities for good nutrition and physical activity.

***Healthy Eating*** – Provide sound nutritional information, to include: the Dietary Guidelines recommended by the United States Department of Agriculture, understanding portion size and energy density, and regularly eating recommended servings based on the MyPyramid Food Guide. Promote healthy eating patterns to include: eating a variety of foods, having regular meals and snacks, responding to body signals of hunger and fullness, and eating family meals together often.

*Physical Activity* - Promote the following recommendations for children: be active at least one hour (sixty minutes) a day; reduce sedentary activities, such as limiting television to less than 2 hours a day, and replacing excessive television and screen time with more activities that increase strength, endurance, and fitness. Assist to create opportunities for children to be physically active within the school day, in after-school activities, at home with family and friends, and in the community neighborhoods. For adults: be active at least 30 minutes most days of the week.

***Promoting Community Education – Reach groups of people with information and resources that promote healthy eating and active living***

**Recommendations:**

*Promote Healthy Lifestyle* – Encourage and provide cultural and age appropriate health education classes and/or community events for adults and children on the importance of healthy eating and active living and provide resources as needed.

*Social Environment* - Develop environmental cues to facilitate health-promoting behaviors among residents such as point of decision prompts.

***Educating Providers – Inform providers who will transmit skills and knowledge to others regarding healthy eating and active living***

**Recommendations:**

*Healthcare Provider Education* - Provide training opportunities to medical providers and/or staff on chronic disease prevention protocols including routine Body Mass Index (BMI) screenings; breastfeeding promotion and education, and case management guidelines on obesity and diabetes management.

*Educator Training* – Provide training to educators such as school teachers, afterschool program staff, and community health workers on basic nutrition and physical activity. Provide resources for these providers to work with children to promote healthy eating habits and increase physical activity.

*Childcare Provider Education* – Provide in-service training and resources to childcare providers on nutrition and physical activity standards for young children. Encourage the provision and facilitation of healthy meals and routine physical activity within the childcare environment.

***Mobilizing Neighborhoods & Community – Meet with communities and share health disparities information and engage them in healthy eating and active living initiatives***

**Recommendations:**

*Community Advocates* – Educate and inform community members and grass root organizations of the issues that impede access to healthy eating and active living. Provide training and resources to support their efforts in bringing about change within their community.

*Photovoice* – Support Photovoice projects that depict/illustrate challenges and barriers within the neighborhoods that affect healthy lifestyles, which include the access to affordable and healthy foods, and an environment that is safe to engage in physical activity. Encourage community members/groups to use the photos to tell their story to decision makers to affect change, and to track progress.

***Fostering Coalitions and Networks – Bring together groups and individuals for broader goals and greater impact on promoting healthy eating and active living***

**Recommendations:**

*Community and Collaborative Planning* – Participate and commit resources in collaborative planning among partners to address healthy eating and obesity prevention strategies throughout Stanislaus County.

*Partnership Expansion* – Expand partnerships to include all members of the public health system. There is an absence of some non-traditional health related organizations in a number of the current coalitions and networks. Having these partners on board is vital in the effort to gain momentum and truly address the health concerns of obesity. Some of these partners include local employers, private businesses, housing, planning, developers, and redevelopment agencies.

***Changing Organizational Practices – Adopt regulations and shape norms to improve healthy eating and active living***

**Recommendations:**

*Community Environment* – Encourage communities to support fitness and physical activity by providing safe parks, playgrounds, and other facilities that are affordable places for children and parents to spend time.

*Breastfeeding Policies* – Promote breastfeeding policies within the worksite and healthcare settings.

*Worksite Wellness* – Encourage worksites to adopt and implement worksite wellness policies that promote healthy eating with healthy food options and physical fitness for staff. Provide education to employers on the benefits of healthy employees.

*Healthy Eating At School* - Promote positive attitudes toward a variety of healthy food choices. Encourage Universal Breakfast in elementary schools. Assist in school policies to provide healthier lunch choices and promote the implementation of SB 12 and SB 965.

*Physical Activity At School* – Promote the provision of physical education classes that meet the State’s minimum requirement for both during school, and in after-school programs.

***Influencing Policy & Legislation – Develop strategies to change laws and policies that promote healthy eating and active living***

**Recommendations:**

*Local* – Support and promote local policies and ordinances that: improve access to healthy foods in the community, especially those that are identified as “food deserts”; limit access to or sales of unhealthy foods to young children in schools and child care facilities; and improve access to increased physical activity for community residents.

*Statewide and National* – Support and promote legislations that will improve and promote healthy eating and active living. Such legislation can include menu labeling for all restaurants, planning and zoning laws that limit fast food restaurants, the banning of certain unhealthy or

harmful ingredients in foods, and the marketing of unhealthy foods to young children.

## Call to Action

The 21<sup>st</sup> Century public health approach to prevention goes beyond educating the individual, and providing the individual with information and knowledge to be healthy. Individual education is only effective when people start to put into practice their acquired knowledge, and the practice is supported by the environment and society itself. Everyone within the public health system will need to take part in this effort to reach each level of the spectrum of prevention, and to affect change in the four sectors within a community.

Below are some activities that stakeholders of the public health system can help carry out to create a healthier community and workplace environment to reduce the impact of obesity and chronic disease.

**Policy Makers and Elected Officials:** Incorporate chronic disease prevention and risk factor reduction into proposed policies or planning efforts, such as the inclusion of walking and biking trails, and supporting smart growth strategies. Promote and adopt policies and local ordinances that support healthy eating such as zoning for farmers markets and grocery stores. Direct local government resources or other support to chronic disease prevention efforts.

**Business Community and Community Based Organizations:** Adopt worksite wellness policies and/or programs that encourage and facilitate healthy eating and active living in the work place. Partner with other community agencies and the Health Services Agency/Public Health to collaborate on community improvement action plans for chronic disease prevention.

**Schools:** Enforce school wellness policies, including healthy foods in school and after school meals, and at school events; and meeting the standards on physical education for students and after school students. Explore partnerships with community organizations on joint use policies to make school facilities available to the local community for after school activities.

**Health Care Organizations and Providers:** Adopt standards of practice that include routine risk factor screening, such as Body Mass Index and smoking. Incorporate risk factor education, counseling, and referrals into protocols, and procedures, and advocate for, support, and attend provider training on chronic disease prevention, including breastfeeding promotion and support.

**Childcare Organizations:** Support and attend provider training on healthy eating and active living. Adopt nutrition and physical activity standards and guidelines. Provide healthy meals and offer up to sixty (60) minutes of fun activities for children attending child care.

**Media:** Become more informed about chronic disease issues, programs, community efforts, and relevant policies within the county. Pursue stories that will convey chronic disease prevention and risk factor reduction messages. Help create human interest stories that highlight prevention risk factors and efforts.

**Community Residents:** Be informed and knowledgeable on how to eat healthy and be active, and recognize personal choices and responsibilities. Be aware of public policies and marketing strategies by manufacturers which can promote or limit access to healthy choices. Become advocates on policies that promote healthy eating and active living.



# Appendix



**2009 Obesity Prevention Efforts in Stanislaus County**

Activities	Spectrum of Prevention Levels*						
	1	2	3	4	5	6	7
<b>Increase Access to Physical Activity</b>							
<p><b><i>Walking School Bus –</i></b>                      A tool kit has been developed for communities and schools to work together to encourage children walking to school every day, with parents and volunteers as walking bus drivers. Currently, Walking School Bus are being implemented at:</p> <ul style="list-style-type: none"> <li>▪ Don Pedro</li> <li>▪ Caswell</li> <li>▪ Franklin</li> </ul>	✓	✓	✓	✓	✓	✓	
<p><b><i>Walk to School Events–</i></b>                      Sponsored by the Safe Communities Coalition, this is an annual event to encourage parents to walk their children to school. At the same time, children help assess the “walkability” of the route to school, and identify barriers and challenges, for organizations to make changes. Schools that participated in this event in 2008:</p> <ul style="list-style-type: none"> <li>▪ Franklin</li> <li>▪ Kirschen</li> <li>▪ Marshall</li> <li>▪ Martone</li> <li>▪ Orville Wright</li> <li>▪ Robertson Road</li> <li>▪ Shackelford</li> <li>▪ Tuolumne</li> <li>▪ Wakefield</li> </ul>	✓	✓		✓	✓	✓	
<p><b><i>West Modesto Walking Trail</i></b>                      An effort to increase physical activity and provide safe routes for schools and park access, a proposed walking trail will lie on the</p>				✓	✓	✓	✓

Activities	Spectrum of Prevention Levels*						
	1	2	3	4	5	6	7
half mile stretch of the MID canal bank between California and Maze Blvd.							
<p><b><i>Walk It Out – Afterschool/Before School</i></b>  Walk It Out is a year-long program that teaches elementary school students about healthy living and the benefits of being physically active. The program gives students the opportunity to let the rubber meet the blacktop as they walk with their classmates during the After School Program times and before school. This Program is currently being implemented at:</p> <ul style="list-style-type: none"> <li>▪ Modesto City Schools after school program</li> <li>▪ Vaughn Elementary School</li> </ul>		✓			✓	✓	
<p><b><i>Fit for the Future</i></b>  Adopted by the Stanislaus County Office of Education, this program’s goal is to increase physical activity for students from K-12. Students and teachers are encouraged to participate in the Governor’s Challenge, which requires they be active 30-60 minutes a day for three days a week over a 28-day period. In addition, parents and community members can also sign-up for the challenge to support their children and local schools.</p>	✓	✓	✓	✓		✓	
<b>Increase Access to Healthy Foods</b>							
<p><b><i>Farmers Markets</i></b>  The establishment of Certified Farmers Marketed to be located in communities that have poor access to fresh fruits and vegetables.</p> <ul style="list-style-type: none"> <li>▪ West Modesto at Mellis Park</li> <li>▪ Downtown Ceres, Whitmore Park</li> </ul>		✓		✓	✓		✓
<p><b><i>Healthy Neighborhood Markets</i></b>  This project aims to promote the sale of affordable fresh fruit and</p>		✓		✓	✓		

Activities	Spectrum of Prevention Levels*						
	1	2	3	4	5	6	7
vegetables in small neighborhood stores located in west Modesto. Currently there are seven Healthy Neighborhood Markets.							
<b><i>New WIC Food Package</i></b> WIC will be implementing its new food package to include fruits and vegetables for its participants, effective October 1, 2009. In addition, it will limit dairy products to low fat and non fat, and include whole grain products.	✓	✓	✓				✓
<b><i>School Based Nutritional Services</i></b> Improve meal/menu program to ensure meal compliance with nutritional standards and needs. By 2008 all schools have implemented SB 12 and SB 965. Assist schools to include healthier vending machines and healthier fundraising options. In addition, there is the promotion of Universal Breakfast in schools. Active participants include: <ul style="list-style-type: none"> <li>▪ Modesto City Schools</li> <li>▪ Turlock Unified School District</li> <li>▪ Salida Union School District</li> <li>▪ Stanislaus Union School District</li> <li>▪ Migrant Head Starts</li> </ul>			✓		✓	✓	✓
<b>Worksite Wellness</b>							
<b><i>Worksite Wellness Policies</i></b> The adoption and implementation of worksite wellness policies to increase access and choices to healthy foods and beverages in the work environment and promote physical activity among employees. <ul style="list-style-type: none"> <li>▪ Stanislaus County</li> <li>▪ Sutter Gould Medical Foundation</li> <li>▪ Kaiser Permanente</li> </ul>	✓				✓	✓	✓

Activities	Spectrum of Prevention Levels*						
	1	2	3	4	5	6	7
Breastfeeding Support: Development and implementation of breastfeeding policies in the work place. The Breastfeeding Coalition has awarded a number of employers for its efforts in supporting breastfeeding amongst employees.							
<b>Community Education</b>							
<b>Nutrition Education classes</b> The development and provision of classes to community residents: <ul style="list-style-type: none"> <li>▪ Eat Well Be Well Classes both English &amp; Spanish, by the Health Services Agency</li> <li>▪ Healthy Eating Active Living Classes both English &amp; Spanish for families of children (0-5; 5-13 yrs)</li> <li>▪ Weight management class for children 6-13 yrs, with BMI's that are at risk of overweight, by HSA</li> <li>▪ Familias Fuertes classes by the Nutrition Network Program</li> <li>▪ Classes by Sutter Gould Medical Foundation</li> <li>▪ Classes by Doctors Medical Center Foundation</li> <li>▪ Classes to seniors by Howard Training Center, who are the provider of the Senior Meals Program</li> </ul>	✓	✓					
<b>Provider Education</b>							
<b>Medical Provider Education</b> Providing in-service training to medical office staff and physicians on: <ul style="list-style-type: none"> <li>▪ Case management and screening protocols for obesity prevention. As a result, two HSA Clinics have adopted the Childhood Obesity Prevention Provider Tool Kit.</li> <li>▪ Breastfeeding Lactation Specialist training and local resources</li> </ul>	✓		✓		✓	✓	

Activities	Spectrum of Prevention Levels*						
	1	2	3	4	5	6	7
<p>have been provided.</p> <ul style="list-style-type: none"> <li>Preventing Obesity and Diabetes in Children Symposium in September of 2009.</li> </ul>							
<p><b>Childcare Provider Education</b> Provide in-service training on nutrition and physical activity to child care providers:</p> <ul style="list-style-type: none"> <li>Head Start</li> <li>Childcare Providers</li> <li>CARES</li> </ul>	✓		✓			✓	
<p><b>School Staff Education</b> Conducting trainings to Modesto City Schools After School Program staff and teachers:</p> <ul style="list-style-type: none"> <li>PowerPlay</li> <li>SPARK training</li> <li>Game Day hands-on physical education curriculum training</li> <li>Harvest of the Month</li> </ul>	✓		✓			✓	
<b>Advocacy/Community Empowerment</b>							
<p><b>CX3</b> A tool to conduct assessment on local communities and neighborhoods. It takes an in depth on the ground look at neighborhoods to measure the nutrition environment and identify opportunities for improvement:</p> <ul style="list-style-type: none"> <li>Ceres</li> <li>West Modesto</li> <li>Turlock</li> </ul>				✓	✓	✓	✓
<p><b>Community Leadership and Advocacy Program</b> A year long training to selected community residents to become</p>	✓	✓		✓	✓		✓

Activities	Spectrum of Prevention Levels*						
	1	2	3	4	5	6	7
community advocates and change agents. 15 members currently enrolled, provided by CCROPP.							
<b><i>Youth Engagement - Project Uplift</i></b> Project Uplift is a youth mentoring program, with youth who have been trained to sustain a one-acre fruit and vegetable garden at the nonprofit Heifer International farm. They are selling their fresh produce at the West Modesto Farmer's Market. They also supply the Healthy Neighborhood Markets with produce.	✓			✓	✓		✓
<b><i>West Modesto Neighborhood Advisory</i></b> A neighborhood advisory group to act as the advocacy body on food policies, such as Universal Breakfast for all schools. Conduct training and education to community leaders, parents, youth, and families. Provides monitoring and advocacy in schools.				✓	✓		✓
<b><i>Community and School Gardens</i></b> Fruit and vegetable gardens are being planned and planted in a number of neighborhoods and schools. Community gardens provide residents the opportunity to increase physical activity, have access to fresh and affordable fruits and vegetables, and make a profit by selling their produce. School gardens provide students the opportunity to learn to garden while incorporating healthy eating and physical activity into their learning. <ul style="list-style-type: none"> <li>▪ West Modesto</li> <li>▪ Modesto City Schools</li> </ul>	✓	✓		✓		✓	
<b>Resource Development</b>							
<b><i>Food Assistance Resource Guide</i></b> Resource guide on all the government food assistance programs	✓	✓	✓		✓		



Activities	Spectrum of Prevention Levels*						
	1	2	3	4	5	6	7
in Stanislaus County, such as food stamp, WIC, school breakfast and lunch, etc.							
<b><i>My Garden Series Brochures</i></b> In development by the County Nutrition Action Plan partners, this is a series of brochures on how to grow a fruit and vegetable garden at home, including container gardens. The series includes topics such as how to get started, fall and spring veggies, herbs, fruits, and more.	✓	✓	✓		✓		
<b><i>CVD Prevention Resource Guide</i></b> Developed by the HEART Coalition, this resource guide outlines resources on heart disease prevention.	✓	✓	✓		✓		
<b><i>Childhood Diabetes and Obesity Prevention Materials</i></b> Developed by the Childhood Obesity/Diabetes Prevention Task Force, these educational materials are aimed for school age children and their parents, with healthy eating and active living messages.	✓	✓	✓	✓			

\*Spectrum of Prevention Levels

1. Strengthening Individual Knowledge & Skills - Enhance capacity of an individual's knowledge regarding good nutrition and the importance of physical activity
2. Promoting Community Education – Reach groups of people with information and resources that promote healthy eating and active living
3. Educating Providers – Inform providers who will transmit skills and knowledge to others regarding healthy eating and active living
4. Mobilizing Neighborhoods & Community – Meet with communities and share health disparities information and engage them in healthy eating and active living initiatives
5. Fostering Coalitions and Networks – Bring together groups and individuals for broader goals and greater impact on promoting healthy eating and active living
6. Changing Organizational Practices – Adopt regulations and shape norms to improve healthy eating and active living
7. Influencing Policy & Legislation – Develop strategies to change laws and policies that promote healthy eating and active living

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