



Healthy Children, Healthy Communities

An Action Guide for California Communities

Cities, Counties & Schools Partnership

*A Partnership of the League of California Cities, the California State Association of Counties
and the California School Boards Association*

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The Cities, Counties and Schools (CCS) Partnership is unique in the nation. Incorporated in 1997, it is a nonprofit, nonpartisan collaboration of associations of local elected officials. The partners that constitute CCS Partnership are the League of California Cities, the California State Association of Counties, and the California School Boards Association.

The Board of Directors of the Partnership is comprised of the officers of the three statewide associations and three public members. Together the board members represent the majority of local elected officials in the state. The goal of the partnership is to create a culture of collaboration among local elected officials in California's 478 cities, 58 counties, and more than 1000 school districts. The purpose of local jurisdictional collaboration is to improve the conditions and quality of life for California's children, families and communities.

2006 Conditions of Children Task Force

In 2005 the CCS Partnership established the Conditions of Children Task Force with each association appointing members to serve one-year terms. In 2005 the task force discussed multiple issues facing children and their families. The 2006 task force had a single focus – understanding childhood obesity and creating an action agenda for addressing it.

Members of the 2006 Task Force

Pat	Eklund	Chair CCS Partnership	Immediate Past President League of California Cities
Terry	McKittrick	Vice Mayor	City of Dinuba
Jean	Quan	Vice Mayor	City of Oakland
Vince	Torres	Parks & Recreation Director	City of Paramount
Acquanetta	Warren	Council Member	City of Fontana
Renee	Zeimer	Youth & Family Services	City of Walnut Creek
Barbara	Kondylis	Supervisor	Solano County
Alene	Taylor	Supervisor	Kings County
Susan	Cash	Supervisor	Inyo County
Maggie	Carrillo-Mejia	Superintendent	Sacramento City Unified School District
Karen	Clancy	Board Member	Belmont-Redwood Shores School District
Ron	Dwyer-Voss	Board Member	Natomas Unified School District
Janice	Friesen	Board Member	Castro Valley Unified School District
Nancy	Newkirk	Board Member	Sunnyvale School District
David	Tokofsky	Board Member	Los Angeles Unified School District
Suzan	Solomon	Board Member	Newhall Elementary School District

The task force was supported in its efforts by staff from the three associations and CCS Partnership. They were:

Mary	Creasey	Policy Intern	League of California Cities
Liisa	Stark	Legislative Representative	League of California Cities
Qiana	Charles	Legislative Analyst	California State Association of Counties
Martin	Gonzalez	Assistant Executive Director	California School Boards Association
Leslie	Jordan	Research Consultant	California School Boards Association
Marguerite	Noteware	Research Consultant	California School Boards Association
Connie	Busse	Executive Director	CCS Partnership
Francesca	Wright	Consultant	CCS Partnership

The Process

The task force met four times in 2006 to learn from experts and discuss the role of local governments in addressing the child obesity crisis. Speakers included: Harold Goldstein DrPh, Executive Director, California Center for Public Health Advocacy; Judith A. Corbett, Executive Director, Local Government Commission; Martin Gonzalez, Assistant Executive Director, California School Boards Association; and Lisa Cirill, Acting Chief, California Center for Physical Activity at the California Department of Health. Following each presentation the members discussed what they had learned and developed their ideas into this action agenda. In September of 2006, the California Department of Health released its *California Obesity Prevention Plan*¹. Staff refined the recommendations to align with the plan where appropriate. The task force selected only those ideas that they believed are:

- Possible to do;
- Important to do;
- Effective in promoting active, healthy living.

The Product

The *Healthy Children Healthy Communities Action Agenda* is the result of the group's efforts. It represents the viewpoint of local government for how to best address the issue. The Action Agenda has two parts. This first is a set of recommendations for action by the CCS Partnership Board of Directors. The second is a set of guiding principles and strategies for communities across California to adopt and implement.

¹ *California Obesity Prevention Plan: A Vision for Tomorrow, Strategic Actions for Today*, Sacramento: Dept. of Health Services, 2006

Healthy Kids, Healthy Communities

An Action Agenda for Creating Community Wellness Through Preventing Childhood Obesity

The Issue

"Obesity is the fastest growing, most threatening disease in America today,"² reports Surgeon General Richard Carmona.

In California, public health data show nearly 30 percent of children and teens are overweight or obese. These numbers have more than doubled in the last 10 years. In 2004, seven of the ten largest cities in California had childhood overweight rates that were higher than the statewide average, ranging from 36.3% in Los Angeles to 24.4% in San Francisco.³

The costs of this epidemic are high. California spent \$7.7 billion in 2003 on direct health care costs attributed to obesity alone.⁴ For the first time in US history, children no longer have a life expectancy greater than their parents. Collectively, today's children will have less productive school and work lives, higher medical expenses, and in short, a decreased quality of life.

The Obesity Formula: Physical Activity and Nutrition

One element of the obesity formula is physical activity. For many, walking is no longer a common mode of transportation. Communities need to ensure that children have safe routes to walk, skate or bicycle to and from schools. Children need safe places to be active before, during, and after school hours such as parks, ball-fields, pools, gyms and recreation centers. These facilities need to be in locations that are accessible and well-maintained.

On the other element is access to healthy foods. Children and youth need nutritious foods in reasonable portions at home, at school and in their neighborhoods. Children and families rely on what is available in their community. In some areas, the only sources are fast food outlets, convenience and liquor stores.

The issue is complex and linked to land use. Decisions made about where to locate schools, parks, convenience stores, fast food restaurants, and the design of new or infill housing all have an impact on the overall health of children. Many neighborhoods lack access to fresh food, open space, sidewalks and parks. Parents, concerned about their children's safety, keep them indoors where they engage in sedentary activities. Surfing

² Carmona, Richard. Speech to California School Board Association, December 2002. San Francisco, CA.

³ California Center for Public Health Advocacy. *The Growing Epidemic: Childhood Overweight Rates on the Rise in California Assembly Districts*. August 2005.

⁴ UCLA Center for Health Policy Research

the web and watching television exposes them to the \$15 billion junk-food advertising industry which further reinforces an unhealthy lifestyle.

Call to Action

Public policy makers have an important role as leaders and conveners in efforts to promote active healthy living. Community wellness and childhood obesity are community responsibilities. It will take everyone: government; education; business; and residents working together to make a difference. This document provides suggestions for how local communities can address the physical and nutritional health needs of children.

CCS Partnership calls on cities, counties and schools to work together to address this critical issue. It recommends using a coalition to develop a local plan of policies and programs that will support healthy, active living, especially for children. In cases where there is an existing collaborative or coalition (such as a children's planning council or an ongoing wellness task force), this body should be encouraged to take on the task of developing a plan of action. Where there is no local collaborative or commission dedicated to children and their health, local regions are encouraged to develop one.

The CCS Partnership is an organization dedicated to collaboration between local jurisdictions. It has spent the past two years holding forums that bring together local elected officials and other key decision makers to raise awareness of the issue and to begin to explore possible local actions.

Seven Guiding Principles for Public Policy and Community Action

As local officials begin to address the issue of community wellness through local policies, the CCS Partnership recommends applying the following principles as guides:

1. **This is a public problem**, not just the personal concern of those who are overweight. The fiscal impacts on our health system and community vitality loom large.
2. **Don't blame the victim**: the issue is beyond mere individual or family responsibility.
3. **Address the environmental aspects of the issue**. Regulate land use to encourage active living and ready access to healthy food choices.
4. **Work collaboratively to maximize the impact**. Encourage formation of local partnerships between cities, counties, and schools. Share planning and program

development. Engage parents, children, and community members in the dialogue.

5. **Make information, knowledge and solutions accessible** and appropriate for all ethnicities, cultures, and economic levels.
6. **Act on the belief that every child has the right to walk and bike in their home community.** Both suburban and urban children have the right to walk to school.
7. **Active and healthy living can become the norm for all California communities.**

Five Strategies for Local Communities

Each community will determine the best approach and specific goals they wish to achieve in addressing healthy active living for their children. A good starting point for community dialogue and planning is to review school district student wellness plans which most districts completed in the summer of 2006. These policies, mandated by the federal government for schools participating in the federal nutrition program, include higher nutritional standards for food and beverages sold on school campuses and recommendations for increased physical activity. Wellness plans were developed using an inclusive process that included parents/guardians, students, school food services professionals, school administrators and members of the public.

The CCS Partnership recommends including these five strategies.

1. Plan Collaboratively for Healthy Kids/Healthy Communities

- ☑ **Work cross jurisdictionally.** Use a coalition of local jurisdictions to develop a local plan of policies and programs that will support healthy, active living, especially for children.
- ☑ **Expand the responsibilities and membership of an existing collaborative** to address children's health and childhood obesity.
- ☑ **Organize for success.** Where there is no local collaborative council dedicated to children and their health, develop one.
- ☑ **Councils should report jointly to county supervisors, city councils and school boards.** Membership should include explicit linkages to elected and executive staff. Some important areas to include are: county health; city and county parks and recreation departments; city and county planning departments; school facilities and food services. Additional community leaders could be recruited from the local medical community, members of the business community, advertising, food industry, and members of faith-based community and parent groups.

- ☑ **Identify opportunities** for co-development and shared use of recreational facilities and programs.
- ☑ **Identify the role of local** government and other community leaders in modeling healthy active living.

2. Ensure Access to Healthy Food near Homes and Schools

- ☑ **Establish zoning guidelines** and **incentive grants** to improve access to nutritional food and reduce access to unhealthy food. For example:
 - Offer tax incentives for grocery stores to locate in urban and rural areas.
 - Develop community standards for healthy food available within walking distance to all, especially for open high school campuses.
 - Use funding similar to the “façade grants” Oakland used to eliminate tobacco advertising in stores and commercial outlets where children can read them.
 - Offer incentives for liquor and convenience stores to sell fresh foods.
 - Regulate the number of fast food outlets, especially near schools.
- ☑ **Establish policies for nutritional quality of foods** offered by city, county and school programs. For example:
 - Re-assess vending machine contracts; ban vending machines sales of junk food.
 - Require sports leagues and other organizations using city/county parks or facilities to offer healthy food choices for events.
- ☑ **Promote Healthy Food Programs.** For Example:
 - Expand the number of community gardens and farmers’ markets.
 - Teach the preparation of traditional ethnic foods in healthy ways.
 - Encourage local restaurants to provide “Healthy Choice” options on children’s menus.
- ☑ **Partner with media to change** messages and marketing regarding appropriate food for children.

3. Offer Programs and Facilities for Physical Activity

- ☑ **Coordinate physical education and recreational activities** between park and recreation departments and school and after-school programs.
- ☑ **Evaluate local parks and open spaces** for ways to increase the level of vigorous physical activity for children and their parents.
- ☑ **Provide for indoor physical activity** within communities and schools.
- ☑ **Preserve and increase** physical activity time, as opposed to waiting time, within physical education classes.
- ☑ **Preserve recess at elementary schools** and create alternatives for homework completion or other important activities that take children away from active recess.

- ☑ **Offer walking and bicycling programs:** coordinate “walking school-busses⁵” to and from school, walking groups, senior walking clubs, walkathons with incentives, health fairs, multigenerational events, bicycle safety events.
- ☑ **Promote campaigns** such as “Turn Off the Screen Week” and “Walk to School Week.”
- ☑ **Encourage participation in** the Governor's Council on Physical Fitness and Sports Awards and the Governor’s Challenge to Teens.

4. Plan for Walking, Biking, and Access to Open Spaces

Commit to increased walkability

- ☑ **Include an active living component in general plans**
 - Survey residents on walkability and safety.
 - Create pedestrian and biking master plans with links to public transportation.
 - Develop parks and open space in areas of dense development.
- ☑ **Negotiate active living infrastructure in development requirements.**
 - Require new multi-story construction to have open, well-lit, visible stairways.
 - Utilize mixed-use development to provide multiple destinations within walking distance.
 - Locate schools near residential neighborhoods
 - Require sidewalks and bicycle trails.
- ☑ **Use *Safe Routes to Schools*⁶,** to plan, fund and build safe walking and biking infrastructure.

5. Educate the Public

- ☑ **Educate the public** on the obesity epidemic and solutions using multiple media formats including public access television
- ☑ **Celebrate May as “*Healthy Living Month*”** with activities and health education.
- ☑ **Teach** portion control and how to prepare traditional foods in healthier ways.
- ☑ **Involve** teachers, parents, the medical community, and the food industry.
- ☑ **Partner** with universities, cooperative extensions, adult education programs, and other existing training organizations

⁵ A walking school bus is a group of children walking to school with one or more adults.

⁶ Safe Routes to School is a federal grant administered through the Department of Transportation. Its purposes are : 1) to enable and encourage children in kindergarten through eighth grade (K-8), including children with disabilities, to safely walk and bicycle to school, and per Americans with Disabilities Act (ADA) Guidelines, traverse to school via accessible routes, 2) to make walking and bicycling to school a more appealing mode choice, and 3) to facilitate the planning, design, and implementation of projects that will improve safety, the environment, and overall quality of life.

Conclusion

Childhood obesity affects one third of California's children and has a major impact on the future well being of our communities and state. It is a situation that continues to grow at an alarming rate. The problem is far beyond individual choice. The antecedents of the epidemic are many -- communities planned for driving not walking; a shift to sedentary lifestyles; concern for safety in many neighborhoods; easily available, inexpensive and heavily advertised food that has little if any nutritional value; decreased physical activity at school and in non-school hours; schools placed at far distances from residences; convenience stores and fast food outlets near schools; and the list goes on.

But, the situation is not without hope. The obesity trend can and must be reversed. Local government, including school districts, must play their part. With financial and policy support from the state and federal level, local government can and ought to lead the way toward crafting California communities for more active healthy living.

Selected Resources

California Center for Public Health Advocacy (CCPHA) provides policy information related to childhood obesity. www.publichealthadvocacy.org

California Project Lean examines the school-based solutions to healthy food and activity choices. www.californiaprojectlean.org

California School Boards Association offers nutrition and physical activity resources, including policy briefs on the new nutrition standards and school wellness policies. www.csba.org/ps/nutrition_phys_resources.cfm

California School Nutrition Network provides resource for schools and nutrition advisory councils, including proposed nutritional standards. www.calsna.org/index.htm

Cities, Counties and Schools Partnership seeks cross-jurisdictional solutions for creating healthy communities. Many cities, counties and schools are already addressing aspects of the problem. Some cities like the City of Arcata and the City of Orinda have enacted ordinances to limit access to junk food. Some counties like San Diego County have developed master plans. All California school districts have recently developed school wellness plans through a year-long planning process. Other communities like the City of Walnut Creek have developed civic engagement processes as a springboard from sound policy planning to action. Find these and other examples at www.ccspartnership.org

Future of Children provides background on the epidemic and its consequences. Their Spring 2006 issue of *Childhood Obesity* provides in depth articles. http://www.futureofchildren.org/pubs-info2825/pubs-info_show.htm?doc_id=349724

Local Government Commission (LGC) is a nonprofit, nonpartisan, membership organization that provides technical assistance to local elected officials and other dedicated community leaders who are working to create healthy, walkable, and resource-efficient communities. LGC convened a group of experts in 1997 at the Ahwahnee Lodge in Yosemite to explore the elements that make communities vibrant and healthy. The discussion resulted in the Ahwahnee Principles, which have become a blueprint for compact, mixed-use, walkable, transit oriented development. More about livable communities and the Ahwahnee principles can be found at their website. www.LGC.org

www.NoJunkFood.org is a website designed with and for youth interested in nutritional advocacy.

Strategic Alliance for Healthy Food and Activity Environments (Strategic Alliance) is a coalition of nutrition and physical activity advocates in California. Visit their database of local policies and practices which support healthy eating and physical activity. www.eatbettermovemore.org