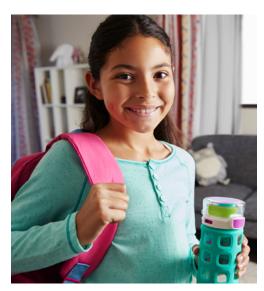




2018 PROGRESS REPORT

A LOOK BACK AT THE FIVE YEARS OF PROGRESS OF VOICES FOR HEALTHY KIDS



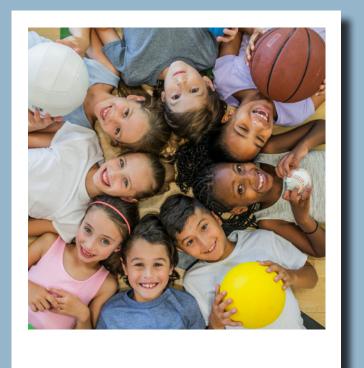












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Closing

The following stories regarding campaigns run by Voices for Healthy Kids used a mix of non-lobbying and lobbying strategies as noted below. The activities described in this report were supported with funds from a variety of sources.

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In 2013, the American Heart Association and the Robert Wood Johnson Foundation launched Voices for Healthy Kids, an innovative advocacy initiative with the monumental goal of reversing childhood obesity through policy change in disproportionately affected areas. Over time, the initiative evolved and, today, it focuses on promoting health equity, building a culture of health, and making each day healthier for all children.

Ensuring health equity means making healthier options more accessible and affordable for all families. By championing public policies eliminating junk food marketing in schools, increasing access to healthier foods, and improving walking paths and other places for safe physical activity and more, Voices for Healthy Kids is elevating the health and wellness of children nationwide. The results speak for themselves — from campaign funding and technical assistance to policy wins and community impact

We influenced policies that have increased access to healthier foods and beverages for people in 25 communities and the state of Louisiana. We supported funding for grocery store creation and expansion, and the purchase of healthy foods in low-income areas in Austin, Texas; Seattle, Washington, and throughout California and Michigan. We worked to ensure that only healthy beverages like water and milk —not sugary drinks —are the default options in kids' meals at restaurants in Lafayette, Colorado; Baltimore, Maryland, and all of California. We also backed regulations that improved standards of early care for children in Colorado, Maryland, Mississippi, North Carolina, Rhode Island, Tennessee, Utah, Vermont and Washington.

Thanks to our advocacy, New York City schools have higher quality physical education with better reporting and curriculum, while in Minnesota, Nevada and Massachusetts, streets and paths are safer for walking, biking and rolling.

We look forward to the future. Together, we will continue to empower our allies and advocates to ensure that every child is healthy, happy and on the path to a bright future.

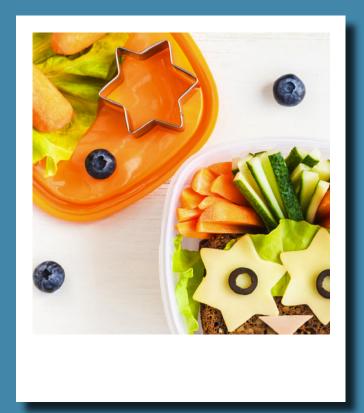
Sincerely,

Cunc a Brom

Nancy Brown CEO, American Heart Association

01 INTRODUCTION LETTER





02 BY THE NUMBERS

BY THE NUMBERS 2013-2018









increased chance of passing a state policy with Voices for Healthy Kids support



144 policy wins

167,508,818 people affected by Voices for Healthy Kids

policy wins

*Bleich, Sara N, et al. The Voices for Healthy Kids Campaign and US State Legislation to Prevent Childhood Obesity. American Journal of Public Health: March 2016, Vol. 106, No. 3: 436-439



140+ organizations collaborating in the initiative

84,000 Voices for Healthy Kids Action Center online grassroots advocates

STRATEGIC ADVISORY COMMITTEE

- Afterschool Alliance
- Alliance for a Healthier Generation
- American Academy of Pediatrics
- American Cancer Society Cancer Action Network
- American Heart Association
- Center for Science in the Public Interest
- ChangeLab Solutions
- Child Care Aware of America
- Healthy Eating Research
- Healthy Food America
- MomsRising
- NAACP
- National Alliance on Hispanic Health
- Nemours
- Physical Activity Research Center
- Public Health Law Center
- Robert Wood Johnson Foundation
- Rudd Center for Food Policy & Obesity
- Safe Routes to School National Partnership
- Salud! America/UT Health Science Center San Antonio
- SHAPE America
- The Food Trust
- The Funders' Collaborative on Youth Organizing
- The Praxis Project
- UnidosUS
- YMCA of the USA

BY THE NUMBERS 2013-2018



18 advocacy toolkits created



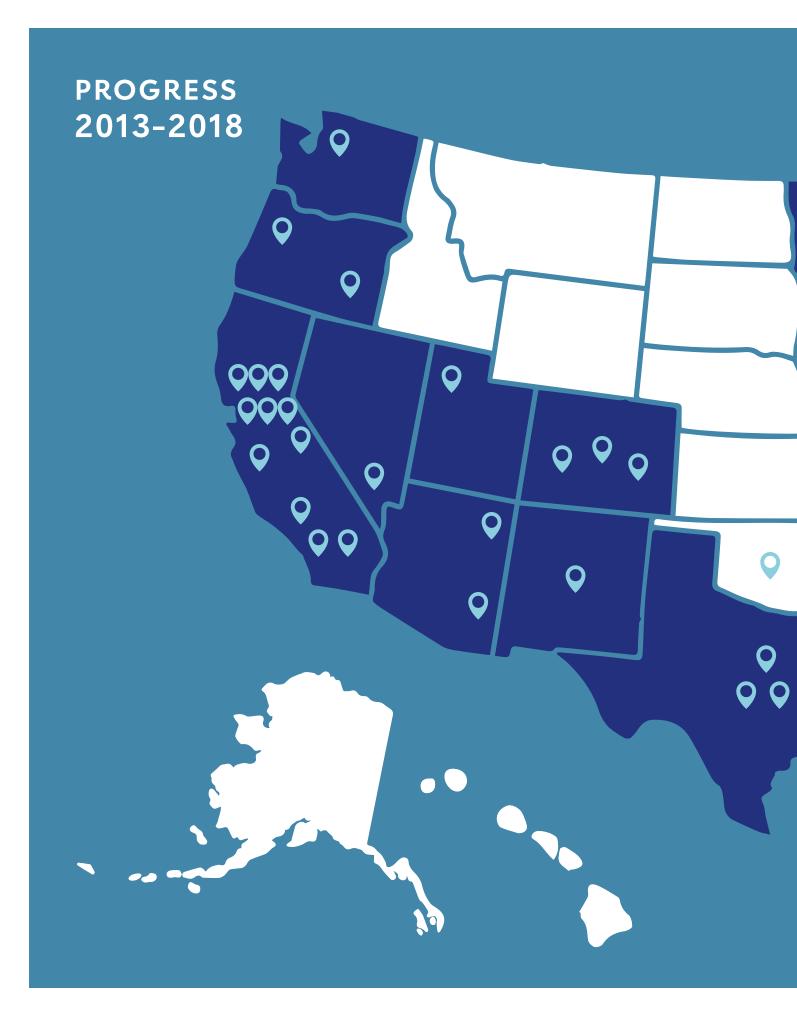


requests for skills building, planning, and consultation (technical assistance)



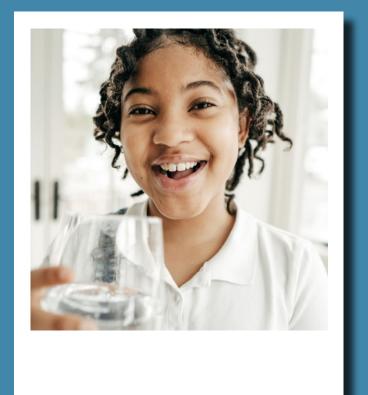
16 national message research projects







cities that have passed Voices for Healthy Kids policies 



04 A SELECTION OF HIGHLIGHTS OVER THE YEARS

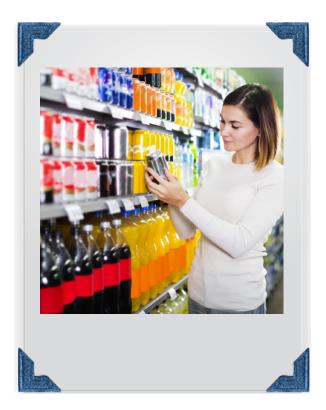
MINNESOTA SAFE ROUTES TO SCHOOL:

Health and school advocates in Minnesota created the Safe Routes to School (SRTS) funding program to make communities safer for students to walk and bike to school. This program provided planning and street improvements, such as safer crosswalks and bike trails. The initiative was so successful, a coalition of over 40 organizations established a state-based SRTS program in 2012 and secured more than \$1 million annual state funding in 2014.

BERKELEY SUGARY DRINKS*:

Berkeley, CA, was the first city to pass a 1-cent-per-ounce sugary drink tax. The tax generated more than \$1.5 million in revenue in the first year, which was used to fund nutrition and health programs. The success of the Berkeley tax led to Philadelphia passing a similar tax and other California cities are considering following in their footsteps.

*This campaign was not funded by the Robert Wood Johnson Foundation.



SAFE ROUTES TO SCHOOL IN WASHINGTON:

The Childhood Obesity Prevention Coalition, American Heart Association and Washington Bikes partnered to find a solution that will help get more kids walking and biking to school. Together, the advocates organized the Safe Routes Healthy Kids Campaign and urged policymakers to approve funding for improvements such as safer crosswalks, sidewalks and bike routes in Washington State. Ultimately the efforts lead to securing \$75 million for a Bicycle and Pedestrian Safety Grant Program, \$89 million for a Bicycle and Pedestrian Safety Project List and \$56 million for Safe Routes to School, totaling \$186.05 million in state funding.

NEW MEXICO SMART SNACKS IN SCHOOLS:

New Mexico adopted new state regulations ensuring only foods and beverages that meet the federal nutrition guidelines are sold in schools during the day. These guidelines give students access to snacks that primarily consist of whole grains, fruits, vegetables, dairy or protein. These standards also place strict requirements on fundraising with food.

HEALTHIER CHILDCARE CENTERS IN MARYLAND:

All licensed childcare center operators in Maryland must provide healthier drinks to children, give support to breastfeeding mothers and reduce non-educational screen time. This approach to achieving healthier childcare centers was part of a new requirement Sugar Free Kids Maryland was instrumental in passing to improve childhood health.

EFFECTIVE PHYSICAL EDUCATION IN NEW YORK CITY:

An American Heart Association survey found that students in the country's largest school district, New York City, were not receiving adequate physical education. This increased awareness led to the allocation of millions in city-funded dollars dedicated to hiring more certified PE teachers.

WATER ACCESS IN CALIFORNIA SCHOOLS:

California Governor Jerry Brown approved the final FY 2016-2017 budget with \$9.5 million allocated for school filtration systems. This ensured more than 100,000 students living in low-income communities have access to safe drinking water at school.

HEALTHY FOOD ACCESS IN AUSTIN, TEXAS:

Almost 25 percent of Austin residents were living in neighborhoods without access to stores selling healthy food. To address these food-access challenges, a working group was established and, with the help of Austin City Councilwoman Delia Garza, \$800,000 of the city's budget went to addressing food access and food insecurity through hiring a food access coordinator, increasing access to the Supplemental Nutrition Assistance Program, providing money to retail food outlets and more.

SAFER STREETS IN CALIFORNIA:

Los Angeles County made strides to improve its walking and biking fatality rates, which ranked among the worst in the nation. The advocacy organization Investing in Place played a critical role in the implementation of the Los Angeles County Transportation Improvement Plan, which helped create better sidewalks, street crossings and bike lanes to ensure that everyone, regardless of age, ability, income, race or ethnicity, has comfortable and convenient access to safer streets.

ELIMINATING JUNK FOOD MARKETING IN NEVADA SCHOOLS:

In compliance with a new state regulation, all items sold and marketed in Nevada schools must meet the federal nutrition standards. This policy prohibits any posters, coupons or fundraising efforts promoting unhealthy foods in schools to create a healthy food environment and encourage students to choose healthier foods inside and outside school walls.

NAVAJO NATION SCHOOL NUTRITION STANDARDS:

Schools in the Navajo Reservation in New Mexico faced significant healthy eating challenges due to their location, the lack of quality refrigeration systems and a generational shift in the types of food Native American youth consume. However, by advocating for healthy eating and the use of culturally relevant grains, students and parents found a mutual place to reconnect over the stove.

STOCKTON, CALIFORNIA KIDS' MEALS:

The Stockton City Council passed an ordinance requiring either water or milk to be served as the default beverage in children's meals. At the time, this was the second law of the "healthy-by-default" rule in the United States. Since Stockton, we've seen kids' meals progress in Perris, Santa Clara County, Berkeley, Cathedral City, Long Beach, and Daly City, CA as well as Lafayette, CO and Baltimore, MD.

PHILADELPHIA SWEETENED BEVERAGE TAX:

Philadelphia became the largest and second city to tax soda and other sweetened drinks. Following two unsuccessful attempts to pass a sugary drink tax, the City Council passed the 1.5-cents-per-ounce tax after Mayor Jim Kenney proposed the measure to fund community and education initiatives.

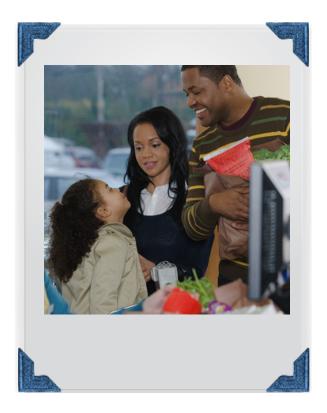
*This campaign was not funded by the Robert Wood Johnson Foundation.

ALABAMA'S HEALTHY FOOD FINANCING PROGRESS:

Almost half a million Alabama children live in areas with limited access to healthy food retailers. The Alabama Healthy Food Financing Initiative Study Commission was created through Senate Joint Resolution 105. Under State Senator Bobby Singleton's leadership, Alabama's Healthy Food Financing Initiative received a commitment for an initial state investment of \$300,000 to fund projects and communities across the state.

LOUISIANA HEALTHY FOOD FINANCING (2016 AND 2017):

Louisiana passed the Healthy Food Retail Act in 2009 to help expand healthy food into areas most in need, however, the funding was never allocated. In 2016, Governor John Bel Edwards first signed a budget bill to include \$1 million in funding for this critical initiative. Then by 2017, Governor Edwards signed House Bill 1 into law, bringing the total initiative funding to \$2 million.

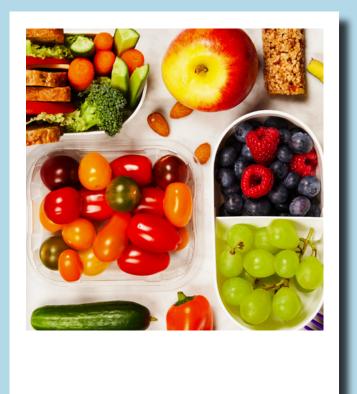








05 A SELECTION OF HIGHLIGHTS FROM 2018



2018 FEATURE STORIES

INCREASING ACCESS TO HEALTHIER FOODS IN MICHIGAN

Children benefit from proper nutrition, but there are many parents and caregivers who simply don't have the means to purchase the food their children need to grow up healthy. Unfortunately, this is the case in Michigan where nearly 18 percent of individuals are "food insecure." That means 1.8 million Michigan residents—including 300,000 kids—have limited access to fruits and vegetables because they live too far from a grocery store^[1].

In Michigan, nearly one in four children live in poverty, with household incomes under \$24,036 for a family of four^[2]. These families often struggle to feed their children at all, let alone feed them healthy and nutritional meals that their bodies need.

While these are startling statistics, the American Heart Association in Michigan, funded by a grant from Voices for Healthy Kids, is encouraged by a new law that will help mitigate food insecurity issues in Michigan. Public Act 239 of 2017, known as the "Grocery Store Bill," will allocate approximately \$12 to \$15 million toward increasing healthier food options in Michigan over the next five years. The goal is to ensure that underserved areas of the state get access to fruits and vegetables. In exchange, participating eligible properties for development or existing businesses, including small grocers or other stores, can apply for incentives that include grants, loans, or other economic assistance.

MAKING AN IMPACT: EXPANDING ACCESS TO AFFORDABLE FRUIT AND VEGETABLES

Callie Bradford, an American Heart Association advocate, local business owner, health coach and mom who lives in Warren, the third largest city in MI, believes this bill will significantly impact communities across the state. She explains that for many working families living in rural areas, the nearest grocery store may be miles away. "If you don't have a car, then how do you have access to healthy foods?" Bradford asks. This issue forces parents to buy food from the nearest gas station or convenience store, limiting their options to packaged and over-processed foods.

With this new law, Bradford expects that local gas stations and convenience stores will be able to expand their food selection and provide fruit and vegetables. In fact, she's already seen more "local grocery stores popping up," as smaller businesses are now better able to meet the health needs of these communities.

Increased access to locally sourced fruits and veggies would not only benefit the health of many residents but also provide a boost to local economies. While it's too early to predict specific numbers, Bradford sees the bill as a job creator. From mom-and-pop shops to the larger grocery chains, stores may need to staff more employees to get the produce on their shelves.

WHAT'S NEXT: A HEALTHIER MICHIGAN

For Bradford, creating awareness around these important changes is the next step for progress in Michigan. She believes it's important for communities across the state to ensure that families, local organizations, farmers, city councils and business owners understand how the legislation will impact them.

As an advocate for health and wellness in her own community, Bradford is excited to do her part to help spread awareness of this positive, life-impacting change in Michigan. "Business owners will have to be educated on how this would benefit them ultimately in the long run," Bradford says. Among other things, it's about "helping these gas stations to expand and...think more like grocers than gas station owners."

Food insecurity is not going to be solved with one shift in policy, but Michigan's "Grocery Store Bill" is a step in the right direction. "We've known for a long time access to healthy food has a measurable impact on people's diet and health outcomes. For many in Michigan, a full-service grocery store isn't close by or doesn't exist at all. That leaves them farther from healthy fruits, vegetables and proteins and closer to an increased risk of heart disease" said David Hodgkins, Government Relations Director at the American Heart Association. "It will take a 'multifaceted approach to solve this complex problem' and there are complimentary efforts underway, like Michigan's Double Up Food Bucks Program and The Food Bank Council of Michigan."

With the implementation of this law, advocates expect to see a change in the lives of families across the state of Michigan who can now provide their children with more options for nutritious food. The hope is that other states can follow Michigan's lead.

[1] http://thefoodtrust.org/uploads/media_items/michigan-mapping-final.original.pdf

[2] http://www.gcfb.org/know_more_hunger_facts

 [3] https://datacenter.kidscount.org/data/tables/5201-children-living-in-households-that-were-food-insecure-at-some-point-during-the-year?loc= 24&loct=2&loc=24&loct=2#detailed/2/24/true/573/any/11675



FORWARD PROGRESS FOR HEALTHIER KIDS' MEAL OPTIONS IN BALTIMORE, MD

In April, Baltimore became the 10th city to pass legislation that creates healthier beverage options for kids' meal offerings after strong advocacy and leadership from the Sugar Free Kids Maryland, a grantee of Voices for Healthy Kids. The "Baltimore City Healthy Kids' Meal Bill" ensures restaurants make the default beverage to water, 100-percent juice or milk for all children's meals.

TIME FOR CHANGE: WHAT THIS BILL MEANS TO BALTIMORE

In Baltimore City, one out of every four children consumes at least one sugary drink a day. But the American Heart Association recommends that children have no more than one eight-ounce sugary drink a week. The "Healthy Kids' Meal Bill" aims to reduce the health risks associated with the consumption of sugary drinks, risks that have become a major concern of the greater Baltimore community. In her testimony before the City Council in support of the bill, local Baltimore mother and grandmother Tracy Newsome stated, "I have seen the ravages of chronic disease on my neighborhood. Kids are now being diagnosed with type 2 diabetes. This can be avoided if we help children choose healthy beverages."

Pastor Kevin A. Slayton Sr. of the New Waverly United Methodist Church in Baltimore also witnesses the severity of this issue within his own congregation. "Many members have fought weight issues their entire lives. These problems stem from habits developed as children," he wrote in an op-ed. "Now we are learning lessons from these congregants that will help our younger members avoid poor health and live longer, healthier lives."

Despite the law changing business practices, the legislation received support from several restaurants early on, even before it was introduced. "We just never thought to put it out there as an option. If they want it, they can ask to have it," said Lori Gjerde of the restaurant Wicked Sisters. As people turn to restaurants to feed their families more often, it's imperative that owners realize and embrace the responsibility they have to provide our children with healthy options.

The law in Baltimore, along with the other nine cities that have passed similar legislation, reflects a growing understanding—among restaurant owners, community members and policymakers alike—of the importance in feeding children nutritious meals. To paraphrase the words of Baltimore mother Robi Rawl—every family should have the privilege of healthy options when they go out to eat and advocates across the nation agree.

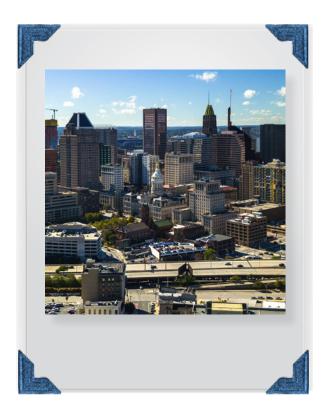
BUILDING MOMENTUM: EMPHASIZING HEALTHY DEFAULTS

The enactment of the law in Baltimore marks the 10th success in an important movement that is sweeping the nation. Baltimore is the first city on the East Coast to pass this type of legislation. Recently, California became the first state to pass the law. Leading up to statewide passage, Santa Clara County, Davis, Stockton, Perris, Berkeley, Cathedral City, Long Beach, and Daly City pioneered it. Additionally, Lafayette, Colorado has adopted the legislation. Similar statewide bills were filed in California, New Hampshire, New York, Rhode Island, Vermont, and Hawaii this year. The City of Louisville, Kentucky is also working to pass a bill that would provide nutritious kids' meal default options.

When the "'Healthy-by-Default' Kids' Beverage Ordinance" passed in Stockton back in 2016, Vice Mayor Christina Fugazi explained the predicament that this type of legislation solves: "Instead of getting an unwanted soda without asking for one, parents will be given the opportunity to start the meal off right with a healthy beverage." Vice Mayor of Long Beach Rex Richardson reinforced Fugazi's sentiment when his city's ordinance passed in October 2017: "The goal is to help kids see these healthy options as the norm, not the exception."

In addition to the exciting progress that is being made in local communities, six large national restaurant chains have decided to remove sugary drinks from their kids' menu displays making restaurant meals for children healthier across the country.

Vikraman S, Fryar CD, Ogden CL. Caloric intake from fast food among children and adolescents in the United States, 2011-2012. NCHS Data Brief 2015; (213):1-8.
Bleich SN, Vercammen KA, Koma JW, Li Z. Trends in beverage consumption among children and adults, 2003-2014. Obesity. 2018; 26(2):432-441, doi: 10.1002/oby.22056



OVERCOMING FOOD INSECURITY IN WASHINGTON, DC

A grantee of Voices for Healthy Kids, DC Greens uses the levers of food education, access, and policy to advance food justice in the nation's capital. Through their Community Advocates Program, residents who have actually experienced food insecurity in their everyday lives are empowered to become informed, critical, and persuasive advocates.

The success of the program, as well as that of DC Greens' overall equity work, has depended on a strong foundation of trust and relationships built with partner organizations and the communities in which they operate.

"Change moves at the pace of trust," said Lillie Rosen, DC Greens' deputy director. "We can't do any of the work that we do successfully if we haven't taken the time to build trust with partners, with organizations, with the communities most impacted and marginalized from these issues."

COMMUNITY ADVOCATES PROGRAM: EMPOWERED TO FIGHT FOOD INSECURITY

Thanks to an initial incubator grant from Voices for Healthy Kids, DC Greens began by implementing a storygathering project focused on DC residents experiencing food equity injustices who were committed to ongoing justice work. Many participants experienced a lack of financial resources to acquire healthy food, lived in an area where access to healthy food was unreliable or were recipients of SNAP, TANF, WIC, or Senior Grocery Plus boxes. DC Greens' goal was to connect the dots between different but related struggles people face within food systems and the gaps within DC Green's overall strategy.

"Initially we thought we would be using some of those stories in our advocacy work. But what we realized was that it made more sense for us to be investing in the people with the stories. Instead of just conditioning them to exclusively tell their stories, we wanted them to direct their own work and build their own critical analysis about the efforts," said Asha Carter, community engagement specialist.

As the story-gathering project continued, DC Greens realized that most of the spaces where decisions were made about people's lives were missing the experience of those on the receiving end, so they set out to address that need.

Dominque Hazzard, community engagement specialist, recounted how the project helped her understand "that people don't live single-issue lives. It helped me to be able to paint the picture when we're doing advocacy and designing our programs." Funded by a second grant from Voices for Healthy Kids, DC Greens expanded the Community Advocate Program. Today, in its second year, it's comprised of six to eight supporters who participate in the program over a sixmonth period and who are compensated at \$20/hour, which DC Greens reports is critical to the program's success. It signifies that the time and effort invested by advocates is respected and important, and it affords advocates the opportunity to spend the appropriate level of time to build depth in their relationships and work.

Advocates learn how to navigate the policy environment in DC, including community organizing, advocacy, food justice, the industrialized food system, power mapping, and relationship building. With a combination of funds from Voices for Healthy Kids and others, advocates have the opportunity to attend and present at select city hearings, neighborhood meetings, and events where they work with leading city agencies and private businesses to inform new policies intended to create a more just food system. In return for their time and financial investment, advocates help DC Greens understand pressing local concerns, gaps in services, unintended policy outcomes, and emerging issues that could lead to changes in their work.

This work has already garnered success. Four advocates from the initial year have continued to engage with the program. And in 2016, DC Greens' advocacy and policy work secured \$1.2 million in municipal funding for food access and helped to bring the perspectives of impacted residents to DC's first-ever Food Policy Council.

HEALTH CARE PROVIDERS USE FRUIT AND VEGETABLE PRESCRIPTIONS FOR CHRONIC ILLNESS

DC Greens also partners with a variety of organizations to host two food equity programs in the DC Area— Produce Plus and Produce Rx. Produce Plus is a nutrition incentive program that, in giving DC residents \$10 to spend at the farmer's market, connects them to healthy food. With a focus on prevention, Produce RX allows health care providers with food-insecure patients or those experiencing diet-related chronic illness to issue monthly prescriptions for fruits and vegetables that can be redeemed at farmer's markets.

Voices for Healthy Kids also supported DC Greens in developing a strategic plan, obtaining technical assistance, and attending trainings. As a result, DC Greens was able to consider their bigger strategic plans, think about where they wanted to be within three years, and outline how they were going to achieve that vision.

"There was an initial nebulous goal with the advocacy program," said Hazzard. "But we never talked about what, specifically, it looked like. Having the ideas down on paper was a game changer for us."

Attending the Voices for Healthy Kids all grantee meeting was also pivotal. After listening to how different organizations were working for change, DC Greens was inspired to organize a Grocery Walk "to give the [City Council] the opportunity to directly experience what's happening about healthy food financing and food access." Held in October 2017 and in partnership with a dozen other organizations, hundreds of people, including six city council members, walked two miles from a food insecure neighborhood to the nearest grocery store to elevate the issue of food injustice in the nation's capital.

Having the guidance and support from an external organization that was valid in the field was reassuring to DC Greens—especially when they were pioneering new programs.

"We have felt that support deeply," said Hazzard. "It's really facilitated us to walk in this new direction."

BUILDING TRUST IS A PRECURSOR TO SUCCESS

To establish themselves as an organization capable of impacting food policy and building the coalition necessary to continually raise the profile of marginalized community members, establishing trust was critical. This trust was built through years of authentic listening and proactive problem-solving across sectors. It was built by investing time and resources in residents too frequently considered "recipients" of programs instead of partners, co-collaborators, and employees.

"There isn't always an organization that's able and willing to do the actual work of collaboration," said Rosen. "And that's the work that DC Greens does. It's one of the reasons we've been able to be successful. We work very hard to develop trusting relationships across the food system and to then make sure that we're doing the actual work that is being asked of us in those spaces and contributing our knowledge and expertise. But we also make sure that all of the right people are participating in the conversation to provide their knowledge and expertise."

With momentum building from DC Greens' work, the range of voices involved in policy discussions has broadened. Instead of depending solely on the knowledge base of professional advocates, those with a lived experience of food insecurity are compensated for their wisdom, and their perspectives are valued. Leveraging their ability to build trust and relationships, DC Greens is building in-roads to leadership and decision-making for a new set of advocates who have deeper local ownership of the food system.

Community Advocate Beatrice Evans said, "I always wanted to be a part of these [decision-making] conversations, but every time I showed up, I never could understand what everyone was talking about. Now I feel educated on the issues. I feel like I can be a voice for my community."



A COMMUNITY MOVEMENT FOR ACCESS TO HEALTHY FOODS IN KENTUCKY AND INDIANA

Imagine a food justice movement where food insecure communities claim their power to organize and unite with local farmers, so everyone wins. A movement that not only makes healthy food available to underinvested communities that struggle with this challenge daily, but one that appeals to veggie lovers of all races, incomes, and zip codes. A movement that promotes leadership among the same volunteer leaders who personally struggle with the challenges of food insecurity, yet also leverages their ideas and experience to make food equity possible. What you have imagined is not a utopia, but the reality of what can occur when equity is a core tenet of an organization's work.

New Roots, a grantee of Voices for Healthy Kids, is a food justice organization which has tackled the idea of health equity head on and has partnered with food insecure neighborhoods by organizing 14 Fresh Stop Markets across the Kentucky and South Indiana area. Their model is predicated on the idea that the community members will willingly learn the skills necessary to start a healthy food movement within their neighborhoods and share their knowledge with others. The planning and execution of the pop-up Fresh Stop Markets are co-created by New Roots and community leaders and relies heavily on volunteer buy-in. Through this model, New Roots is able to keep equity infused in every aspect of the process giving all families the purchasing power to bring healthy, affordable food to their tables.

Locations for Fresh Stop Markets are never decided upon in advance; instead, New Roots is pulled into communities facing food insecurity by local leaders who seek their help and guidance. Once leaders are able to form a coalition with other local volunteers, community centers, churches, other non-profits organizations, and businesses, they must get buy-in from each party to create, implement, and sustain their Fresh Stop Markets. Once agreed upon, leaders are then invited to attend the pay-it-forward coaching program called "Fresh Stop Training Institute." This knowledge-sharing program is self-sustaining since it is taught by seasoned Fresh Stop Market leaders. Topics include price negotiation, ordering, forecasting, community organizing, and SNAP Benefit collection so that the new leaders gain the skills necessary to run the markets long after New Roots moves on to the next neighborhood.

The Fresh Stop Markets business model leverages strong relationships with local organic farmers, the host site (local churches or community centers), the passion and time of volunteers who take ownership to ensure their neighborhood has access to healthy food, and the concept that everyone, despite their income level, wants access to the best organic food available at affordable prices.

The food is paid for in advance by "shareholders" who guarantee a market for the farmers so that they don't face the risk of a standard farmers' market where produce may go unsold. As a result, shareholders are able to pool their money to have the buying power to obtain wholesale prices. Every other week, each shareholder can purchase a share of seasonal produce on a sliding pay scale. Though the Fresh Stop Market shares are

primarily reserved for families facing limited resources, 25% of shares are offered to higher income families to ensure there is sufficient money to cover food costs. Higher income families contribute knowing that they are paying at or below retail prices for the produce and knowing that their share is putting more money in the pool so everyone can eat healthily. For those who cannot afford a share, the community always finds ways so that no one is denied access to fresh, healthy food.

Fresh Stop Market produce is nearly 100 percent locally sourced from 50 local farmers within a 100-mile radius of Louisville. The relationship between the owners and the community members is an example of how to integrate equity into all aspects of a movement. While not required, Fresh Stop Markets go the extra mile to ensure community members have a say in the food that shows up in their community. In January, community members sit down with farmers to determine what the farmer can grow and what the community likes to eat. When the season starts, Fresh Stop Market farmer liaison team members purchase according to what is in season and what has been forecasted. Anyone from any neighborhood can attend any Fresh Stop Market, and in fact, the markets have grown beyond a site that just offers healthy food.

These pop-up markets have grown into an anticipated bi-weekly event where neighbors come together to socialize, learn, and spread awareness of the program. To ensure shareholders are able to eat everything in their basket, Fresh Stop Markets have local professional and novice chefs perform cooking demos on-site using all of the vegetables available in that week's share. Local volunteers or "veggie cheerleaders" are also on-site to advocate for each vegetable and to share tips about cooking and storing the produce. These roles tap into the expertise, knowledge, and context of the local community instead of relying solely on outside volunteers.

Beyond this major initiative, New Roots also holds food justice workshops, partners with organizations on health equity campaigns, runs farm tours, raises funding for the Fresh Stop Markets, and speaks on behalf of food justice around the country. However, New Roots knows that in order to expand their impact beyond the local communities they work in, to create widespread, sustainable impact on food access, the natural progression is for them to enter into the policy space. To start to overcome the effects of institutional biases and impact healthy food access policies, New Roots has become an incubator grantee of the Voices for Healthy Kid's Strategic Campaign Incubator Fund. The grant kick-started New Roots' policy work enabling its board of directors to approve the creation of a policy team with the goal to eventually address health inequity on all levels—local, state, and federal.

As part of the incubator grant, New Roots worked with the American Heart Association on the 'Healthy 4 Louisville' initiative, a coalition effort to increase parents' access to healthy beverage options for their children at all Louisville, KY restaurants. After community and advocate support, the city passed an ordinance in May to make milk, non-dairy milk, water, sparkling water, flavored water with no added natural or artificial sweeteners the default in kids' meals. In another example of letting community issues drive their work, New Roots is working to convince the State Department of Agriculture to recognize Fresh Stop Markets as official farmers' markets. Without the official designation, senior citizens who are given food vouchers for fresh food cannot redeem them at the Fresh Stop Markets.

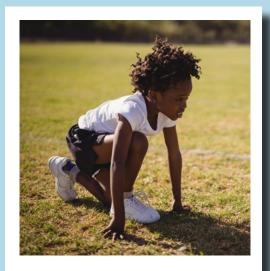
New Roots is igniting a movement to ensure all people have access to a basic need-affordable, healthy food. Its grassroots efforts have shown communities they have the power to find a sustainable, economical and accessible solution to food insecurity. Now communities, not just organizations, are able to mobilize for health equity together.













IMPROVING PHYSICAL EDUCATION THROUGH HEALTH EQUITY IN WASHINGTON AND OREGON

"We have a real philosophy about the difference between 'power over' or 'power for' vs 'power with," said Joe Chrastil Regional Organizer for the Industrial Area Foundation (IAF) Northwest. The organization is working to promote academic and health equality and sees physical education as a way to ensure that all children are receiving an education that supports the whole child—physically and mentally. "If you want to exercise 'power with,' you have to engage with the people most impacted with these problems with real, engaging, and policysetting leadership roles.

HOW DO YOU DEVELOP ADVOCATES WHO ARE NEW TO THE CONCEPT OF HEALTH EQUITY?

For some advocates and organizations, health equity may be a common concept that is core to their missions and practices. But for many grassroots advocates, this phrase comes across as a vague, complex concept that takes some time to digest and then implement.

IAF Northwest, a regional network of broad-based community alliances in Washington, Oregon, Australia, the United Kingdom, and Germany, has been working on a strategy that has proven successful so far. Understanding that many of the people they interact with are new to the advocacy process, they focus on teaching one key principle: "power with," which means leveraging your own experiences and skills because that is where the power lies.

LOCAL LEADERSHIP INSTITUTE TEACHES PRINCIPLES OF COMMUNITY ENGAGEMENT AND ORGANIZING AND LEADS TO THE CREATION OF THE FAMILY MEDICINE RESIDENCY PROGRAM

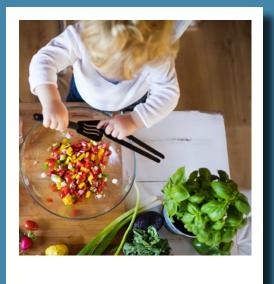
The health equity work began within Health Equity Circles, which are comprised of student organizations across Seattle, Spokane, and Portland that are made up of students that want to join a health field in the future. The objective was to prepare students with organizing skills and concepts and to help them develop the leadership skills to become civic voices within their communities. For example, spurred by the learnings in their Health Equity Circles, students in Seattle and Spokane successfully advocated receiving credit for a health equity organizing and leadership class on their campuses.

Building on that success, IAF Northwest turned to organizing professionals who directly work with those experiencing the impact of disparities and developed the Family Medicine Residency. In the first year, residents undergo a year of organizing and leadership training, and in the following year, residents are placed in low-income clinics where they encourage patients to identify issues impacting their own well-being and guide them on how they can change their situation.

As they developed the program, Chrastil noted that getting support from the leaders of the clinics was critical. The first step was to get providers to realize clinics are a vehicle to engage people. Once that mind shift occurs and providers agree to the program, they are invited to attend the Local Leadership Institute.

"After [the training] they have a way of seeing both the importance of the shift and a practical way of engaging through building meaningful relationships rooted in people's stories and experiences. [We] establish the glue required for the exercise of this 'power with.' Our model of organizing is real relationships and story-based. How do you get people to talk about their own story and experience and interpret this way of organizing through that?"

As a result of the Family Residency Program training that was supported through funding from Voices for Healthy Kids, residents have now begun working on an advocacy campaign to influence the Seattle school board to increase accountability of schools to uphold the state standard of physical education. The work is on-going, but Chrastil reminds us that "the way that people are changed in terms of their own perception of themselves through good organizing is as valuable as the policy change that can come about."

















USING DATA TO IMPROVE PHYSICAL EDUCATION IN RHODE ISLAND

For many in the non-profit world, the work is deeply personal; change is fueled by a desire to help others. But the challenge is that while many policymakers may support the same cause, they also need data to justify their budget decisions. With the help of a grant from Voices for Healthy Kids, the American Heart Association (AHA) in Rhode Island has started to unlock the potential of marrying both the data and the story together to work for change Their multi-year strategy is to ensure that physical education is funded and supported in all Education who can provide technical support to schools and secure additional funding for high-need districts.

THE AHA RI USES DEMOGRAPHIC DATA TO IDENTIFY FACE OF STATEWIDE CAMPAIGN

Central Falls is a largely Hispanic, low-resourced, high-need district, and they were in dire need of resources and funding for physical education equipment, facilities, and professional development for physical education staff. The AHA selected Central Falls to become the face of a statewide campaign that leveraged data and storytelling to encourage lawmakers to commit funds and resources to physical education. Though demographic data would help pinpoint which districts should be classified as high-need, Central Falls School District would illustrate that the decisions made at the local and state levels had a very real impact on kids.

By engaging deeply with one district, the AHA RI was able to personalize a statewide campaign by demonstrating the impact an effective school physical education program can have on a community and developing a base of advocates—physical education teachers, administrators, parents and youth. The campaign highlighted the fact that where a child lives or goes to school can have an impact on health outcomes and the critical role of equity in reducing disparities.

Throughout the course of the partnership, the AHA RI provided professional development for physical education teachers across the Central Falls District and advocacy training for teachers and youth at no cost. They also partnered with the district on local events that created awareness about the many benefits of effective physical education beyond the obvious health impact, including improved cognition, mood, attention, cooperation, and social skills. To capture the impact of the support provided by the AHA and the heightened awareness of an engaged community, a short advocacy film was created and shared with lawmakers and school leaders across Rhode Island to illustrate the importance of policy choices and decisions.

To drive home the results in an indisputable manner, the AHA is again leveraging the power of data by deploying a survey among physical and health education teachers across school districts. The data will ultimately be shared with policymakers so they can objectively understand the need of schools.

The AHA RI and Central Falls are encouraged and hopeful that the state will recognize the importance of physical education and approve a dedicated resource to ensure its equitable implementation.

"Physical education and health are the most important classes that you can take in school," said Richard Sousa, physical education teacher at Central Falls District. "Because we all know our own health affects us so much. And if you don't have your health, you don't have anything."



RHODE ISLAND ADVOCATES TAKE ACTION ON JUNK FOOD MARKETING IN SCHOOLS

In June 2018, the Governor of Rhode Island signed into law legislation to eliminate junk food advertising and marketing on school property with the goal of providing all children across the state with a healthier learning environment.

In 2016, the U.S. Department of Agriculture (USDA) adopted a final rule that states that any food or beverage marketed on school property must meet federal nutrition guidelines. Following the USDA's decision, advocates in Rhode Island sought to enact state legislation that would provide clarification and establish processes to help local schools achieve the USDA's mission.

Rhode Island is just the fourth state in the United States, after Maine, Nevada and California, to enact specific legislation prohibiting the marketing of junk food in schools. While many Rhode Island school districts had been proactive in adopting a general policy ban on junk food marketing, community leaders still saw the need for more specific and relevant guidance. Senate Bill 2350A and House Bill 7419A, known as the "School Marketing Bill", was championed as a tool for districts to use to help support and influence their own wellness policies.

ON THE ROAD TO CHANGE: IN IT FOR THE LONG HAUL

The four-year campaign to ban junk-food marketing in schools saw many challenges along the way. The campaign started off strong, securing the bill's passage in the Senate by an overwhelming majority.

In the third year of the campaign, advocates expected a swift vote in the Senate but ran into last-minute problems with the Grocery Manufacturers Association, which believed the bill would eliminate label redemption programs such as Box Tops for Education and hurt sales. In 2018, the American Heart Association worked with the Grocery Manufacturers Association to address participation in label redemption programs, while still limiting marketing to healthy foods and beverages and non-food items.

THE POWER OF PARTNERSHIP

The success of the campaign was largely dependent on collaboration with local community partners to boost grassroots engagement. The American Heart Association (AHA) in Rhode Island, with the support of a grant from Voices for Healthy Kids, worked with 30 different organizational partners such as the Alliance for a Healthier Rhode Island. Throughout the campaign, advocates engaged the community in a variety of ways, including educating lawmakers about the many ways the food and beverage industry target children with aggressive marketing tactics. Community partners also worked with youth leaders to develop and share personal stories and examples of what they were seeing in their schools.

The AHA also partnered with the Rhode Island Department of Education and Department of Health, which helped in getting the support that was needed for this legislation early on. Working with officials who were willing to champion school health was a critical part of gaining momentum in the legislature.

THE KEY TO SUCCESS: ENGAGING THE LOCAL COMMUNITY

Advocates for the bill found that mobilizing local students to speak up was an essential strategy in the campaign's success. Peter Chung of Young Voices—an organization that empowers youth to become civic leaders in their communities—said that while local kids were aware of the issue, they needed more education and a platform where they could voice their opinions. "When young people are informed, they become passionate about the issues that concern them," Chung said. Furthermore, when they are "knowledgeable about an issue, they become civically engaged, they can get very organized and they can shift the needle of policies they believe in."

As a member of the "School Marketing Bill" coalition, Chung noted that Young Voices partnered with the AHA and the Rhode Island Coalition for Healthy Schools to further educate, train and empower these students, so they were "fully prepared to represent themselves and their peers" when they advocated on the issue. Young Voices also co-organized a number of focus groups to allow kids from different schools to discuss their experiences with junk food marketing. In addition, the group arranged round table discussions between youth and local government officials to allow the students to raise their concerns directly to decision makers.

Chung believes that it is important for youth to have an authentic voice and bring that to the table with legislators. Now that the "School Marketing Bill" has passed, he is eager to see the positive impacts of this legislation for students throughout Rhode Island.

"It is one step in the right direction to promote healthy eating habits among our children and families," Chung said. "We know that creating a habit for junk food starts at an early age, so if measures are put in place to remove them from schools, we can create more spaces to promote healthy eating habits."



ADVOCATING FOR PHYSICAL EDUCATION IN NORTH CAROLINA SCHOOLS

Physical education is a crucial component of school curriculums in the United States. Throughout the past year, the North Carolina Alliance for Health has worked on a campaign, with support from Voices for Healthy Kids, that aims to increase state accountability reporting around physical education and health programs by encouraging an amendment to the State Board of Education's Healthy Active Children policy.

SETTING THE STAGE: ACTIVE STUDENTS ARE SUCCESSFUL STUDENTS

The North Carolina State Board of Education passed the Healthy Active Children policy in 2005. The policy outlines requirements for Local Education Agencies and schools regarding numerous aspects of student health, including physical education. It states that students enrolled in kindergarten through eighth grade will participate in physical activity as part of a Local Education Agency's physical education curriculum^[1].

Research shows that active kids are more successful in the classroom. One study revealed kids were 20 percent more likely to earn an "A" in math or English when they are physically active at school^[2]. Physical activity also helps teachers create a more productive learning environment, as evidence shows that one physically active lesson creates a 21 percent decrease in teachers' time managing behavior^[3].

However, current standards vary from state to state, and many policies are broad, which leads to variation in local implementation. At the state level, 48 states have adopted some sort of legislation or guidance for physical education, but 31 states allow substitutions for physical education class time or credit, leaving unequal opportunities for physical activity depending on the school district.

THE COMMUNITY SPEAKS OUT FOR QUALITY PHYSICAL EDUCATION

North Carolina Alliance for Health's Every Student Succeeds Act campaign utilized a variety of tactics to enact change, including email action alerts, a press conference, letters to the editor, and op-eds. Ultimately, the campaign garnered support from key decision makers and advocates across the state, including the American Heart Association, American Cancer Society, North Carolina Alliance of YMCAs, North Carolina Parent Teacher Association and more. Dr. Sarah Armstrong, a pediatrician from Duke Health Center, wrote an op-ed expressing her support for physical education in North Carolina schools. "Physical inactivity has replaced smoking as the most common cause of preventable death in the United States," Dr. Armstrong said.

In fact, diet-related chronic diseases, such as type 2 diabetes and heart disease, impact many families in North Carolina. The state is part of the "Stroke Belt," an 11-state region of the United States where the risk of stroke is 34 percent higher for the general population than in other areas of the country^[4]. Physical education programs help teach children lifelong skills to keep them active and healthy and reduce their risk of developing preventable chronic diseases.

"The science tells us that even short bouts of activity, done in a high-quality way and delivered at a moderate to vigorous level, can have a tremendous impact on children's health," Dr. Armstrong explained. "It can reduce BMI [body mass index], reduce blood pressure, and can even reduce their cholesterol. So, physical education in schools really does matter."

MAKING STRIDES FOR PHYSICAL EDUCATION IN NORTH CAROLINA

Artie Kamiya, chair of the North Caroline Alliance for Health's Physical Education Workgroup, and Executive Director of the North Carolina Alliance for Athletics, Health, Physical Education, Recreation, Dance and Sport Management, supported the initiative by coordinating communication efforts for his organization's members, who represent the 4,000-plus health and physical education teachers across the state. Kamiya explained that thanks to the support of decision makers, advocates and partners, "[t]he North Carolina General Assembly did see fit in pushing back pending legislation that would have had very serious and dramatic cuts to the existing levels of elementary physical education teachers." For the first time, the state designated new funding to public school districts specifically for art, music and physical education teachers. Looking forward, Kamiya says that "a more sustained effort needs to be established in order to maintain the positive changes made to date." In particular, schools in low-income, rural communities are routinely underfunded and are the most likely to lack access to physical education. By addressing physical education standards, North Caroline Alliance for Health can increase the level of discourse about the need for physical education and work to address disparities in these communities.

Kamiya believed this campaign saw its greatest success in creating an urgent sense of the need to change. It encouraged the current North Carolina General Assembly to value physical education and see the need for enhanced policy change and increased fiscal support. The campaign has also paved the way for future opportunities to continue moving local decision makers to advocate for physical education programs in schools.

[1] http://hlnces.ncdpi.wikispaces.net/file/view/Healthy Active Children%20Policy.pdf/533330420/Healthy Active Children%20Policy.pdf
[2] http://hlnces.ncdpi.wikispaces.net/file/view/2015%20Healthy Active Children%20Policy%20Report.pdf/600253900/2015%20Healthy Active Children%20Policy%20Report.pdf
[3] http://hlnces.ncdpi.wikispaces.net/file/view/2015%20Healthy Active Children%20Policy%20Report.pdf/600253900/2015%20Healthy Active Children%20Policy%20Report.pdf
[4] http://www.thepreventioncenter.com/cardiovascular-disease/stroke-belt/



WORKING TO IMPROVE OUT-OF-SCHOOL TIME PROGRAMS IN SOUTH CAROLINA

Increasing children's access to healthy foods and time for physical activity promotes lifelong health. And outof-school time programs—which include before-school care, after-school care, weekend programs, and summer day and resident camps—can play an integral role in developing these healthy habits^[1]. In South Carolina, a coalition comprised of both local and national partners is working together to improve upon these initiatives.

EXPANDING HEALTHY EATING AND PHYSICAL ACTIVITY (HEPA) STANDARDS

In November 2017, the South Carolina Alliance of YMCAs received a grant from Voices for Healthy Kids to lead a statewide initiative to pursue policy changes that require out-of-school time programs to integrate national standards for healthy eating and physical activity (HEPA).

The HEPA standards serve as a guide to increase kids' access to healthy foods and time for physical activity while in out-of-school time programs. But for many out-of-school time program providers, it may be difficult to know how to implement these standards, or they lack the adequate resources to do so. That's why the South Carolina Alliance of YMCAs partnered with the South Carolina Afterschool Alliance (SCAA) to create a coalition that would advocate for S.C. House Bill 4285—legislation that would appropriate funds to support the implementation of a statewide healthy out-of-school time program.

The bill was introduced but appeared to stall in committee. However, the coalition kept the momentum going with help from a key legislative ally, S.C. State Rep. Gilda Cobb-Hunter. Through a separate appropriations bill, she successfully secured nearly \$160,000 to launch pilot out-of-school time programs across the state. The data compiled from these programs will inform the coalition's efforts to introduce a new bill and encourage legislators to push the bill through in 2019. As they gear up for the next legislative session, campaign leaders have focused on looking at out-of-school-time programs from a more comprehensive perspective.

"We've expanded beyond the HEPA standards to really look at quality overall, which includes safety as well as academic enrichment," said Meg Stanley, Campaign Coordinator for the coalition.

ON THE ROAD TO SUCCESS: THE POWER OF COLLABORATION

In a coalition comprised of both local and national partners, it's important to recognize the value of different organizational perspectives and capabilities.

"No entity can do something like this alone. The power is in the collective," said Amy Splittgerber, Executive Director of the South Carolina Alliance of YMCAs. While national organizations provided a lot of the resources, she said pulling in a statewide entity like the SCAA has been critical to the campaign.

The SCAA is comprised of more than 1,400 out-of-school time programs across the state. It was able to engage directly with out-of-school time providers, so their opinions and feedback could be incorporated into the campaign objectives.

"Being able to bring those partners to the table...and look at how we can support, build capacity and have a great impact on over 100,000 kids is just beyond words," said Zelda Waymer, Executive Director of the SCAA.

The SCAA was integral in keeping the local providers educated on the campaign and informed about how the changes would impact them and the children and youth they serve. Giving them "a voice and a buy-in in the process" was critical to Waymer and the other coalition leaders.

The collaboration with the YMCA played an important role in the campaign as well. As a nationally recognized leader in youth development, the YMCA proved to be a key member of the coalition.

"The 'Y' is one of the leading providers in afterschool and childcare programs in the nation. So, when you think about the reach and impact that the YMCA can have if we are to implement these national standards, it's huge," said Splittgerber.

The coalition leaders also emphasized the value AHA added, creating an ability to tap into larger networks. By providing the coalition with new connections and resources, AHA expanded its own advocacy efforts.

"With any advocacy campaign, it takes a lot of manpower," said Splittgerber. "That collaboration between AHA through Voices for Healthy Kids and the partnerships they create at the state level to get this work done, to have those dedicated resources, it's just been invaluable."

[1] http://afterschoolalliance.org/documents/issue_briefs/issue_hepa_sel_72.pdf

EQUITY THROUGH ACCESS TO HEALTHY FOOD IN NEW YORK

"The individuals who are directly impacted by passing these policies have a role to play. And the role has to be integral. It can't just be a token effort. You can't find a spokesperson and put them in front of a microphone and anticipate the effort is going to check off a box. You need to be focused on building a trustworthy relationship." Robin Vitale, Vice President of Health Strategies at American Heart Association in New York City.

HEALTHY EATING ISSUES HELP IDENTIFY OTHER OBSTACLES

Nearly 1.9 million residents of New York City—nearly a quarter of the city's population—live in lower-income communities with limited access to healthy food retail, and data show they are at risk of poor nutrition and rising rates of heart disease. The American Heart Association in New York City, with support from a grant from Voices for Healthy Kids, aims to help residents address these issues by advocating for city funding that will directly impact this outcome. They are doing this by advocating for funding for incentives for the purchase of healthy food under the federal Supplemental Nutrition Assistance Program (SNAP), which provides nutrition assistance to eligible, low-income individuals and families, and healthy food financing, which provides incentives to bring healthy food to retail settings in underserved neighborhoods. Along their journey, they have realized that despite best efforts, there is no single solution. Because people live in a complex world, there are other critical issues, including public housing standards, that need to be solved as well.

The New York City Housing Authority (NYCHA) is the largest public housing authority in North America and is home to one in 14 New Yorkers—roughly equal to the population of the City of Miami. Per one NYCHA resident, there is no point in obtaining healthy food if it is not consumed immediately, even if they could afford it as fruits and vegetables stored overnight could be eaten by vermin and pests.

"It was an eye-opener for us," said Vitale. "Here we are trying to get affordable, healthy foods in these neighborhoods, but they're still going to have obstacles. We have to really think critically about what role we're going to play. Will we find ourselves asking NYCHA for improved living spaces and making sure they have the proper inspections? We could find ourselves in that conversation and we have to be ready."

In addition to being aware and equipped to deal with these intersectional issues, Vitale stresses that it is important to not fall prey to the idea that a long list of coalition partners and stakeholders automatically equates to immediate positive impact for the intended community. "It's imperative that our community partners include those members who have often had their voices ignored," she said. "You have to make sure that you are really thinking critically about those voices that may have not been involved in the past but may either benefit or be harmed by the decisions that you're making."

THE AMERICAN HEART ASSOCIATION OF NY FINDS NEW ADVOCATE IN HEALTH-COMMITTED MOM

New York resident Annabelle Jimenez knows firsthand about the challenges of living in an underserved neighborhood. She was going through a self-transformation and her unhealthy habits were harming her and her school-aged son. She needed to be a better role model and ensure he was living a healthier lifestyle, so she began a health journey that resulted in the loss of 170 pounds. To celebrate this achievement, she was recognized for her lifestyle change at a celebratory event. But her story did not end there.

"We were excited to connect with Annabelle and discuss the challenges she's faced in her neighborhood," Vitale said. The American Heart Association quickly connected her with active policy campaigns to improve nutrition across the city. The prevalence of restaurants with unhealthy meals combined with a lack of affordable, healthy food options was having a direct impact on Annabelle's family.

Knowing these issues were very personal, the American Heart Association built an effective and authentic relationship with Annabelle to start her on the path for a new transformation—this time as an advocate for change. Equipping her with advocacy and media training, Annabelle is now a community leader who helps identify new advocates and is a well-versed spokesperson for the American Heart Association's healthy food campaign.

"Annabelle's remarkable life transformation not only inspires the AHA team, but it is helping to mobilize decision makers in City Hall to prioritize the needed policies to improve her community," said Vitale. "We look forward to seeing her efforts drive impact across New York."



ESTABLISHING EARLY CARE AND EDUCATION STANDARDS IN ALABAMA

66% of children in Alabama have both parents in the workforce and more than 1.8 million Alabamians, including half a million children, live in communities with little to no access to healthy food options. While the state ranks as one of the unhealthiest in the nation, Voices for Alabama's Children, with assistance from a grant from Voices for Healthy Kids, is working to improve health standards in childcare facilities by focusing on research, public awareness, and advocacy^[1].

The heart of their strategy and success is their ability to leverage data to educate others on the areas of highest need and to understand the root causes behind issues. "The very center of all the work that we do is based on a solid foundation of research and data," said Mann. "The research helps us understand if there is a need, and the data actually tells us the extent of the need."

The Kids Count project is both a state- and national-level initiative. In Alabama, the Kids Count project reports on over 60 indicators for all 67 counties—tracking everything from infant mortality to children in poverty to the number of deaths of children. It aims to provide high-quality data and trend analysis so that all parties are able to have a non-partisan, evidence-based conversation about children's issues. Tracking these indicators also helps to identify "where we can do the most good and where low-hanging fruit exists," said Mann.

But the indicators are just the beginning of a larger equity conversation. "We've gone to the Department of Public Health and asked 'Why are black babies dying at such high rates?' It's not just one thing but you have to know that poverty plays a role. Access to healthcare in a rural setting plays a role. Education could play a role. Access to healthy food is going to play a role. Our indicators don't stand alone, they're interwoven. There's not one thing that causes it, and there's not one solution to fix it all, but we have to start somewhere."

FINDING UNCOMMON ALLIES TO IMPROVE CHILDCARE STANDARDS

Though the progress in establishing early care and education standards in Alabama has been slower due to the lack of funding, Mann said that finding partners with the same policy priorities has been a key to their incremental success. For example, in their campaign for more funding for Pre-K education, they identified that the business community also had a stake in the issue. The business community recognized that the quality of their future workforce was dependent on the quality of today's education. Similarly, in their campaign for healthy food access, having the support of the American Academy of Pediatrics proved to be successful.

"It was a different voice that decision makers were hearing. It wasn't a single child advocacy organization. You have pediatricians now echoing us about how the need for intervention and warning about the impact of inaction," said Mann.

Voices for Alabama's Children has taken on the task of improving the minimum standards for nutrition and physical activity and limit the amount of screen time for children in early care and education centers. Not only would this policy change address issues such as the prevention of diet-related diseases, it would also begin to address the disparities in health outcomes. "We're here to speak for children," said Mann. "And their health and wellbeing are our priorities."

[1] https://www.cdc.gov/obesity/data/prevalence-maps.html

ERASING FOOD INEQUITIES IN NEW MEXICO AND TEXAS

"We know that sometimes the policies with the best intentions, if not written correctly, end up serving the systems that are already in place without actually creating any meaningful change. Good intentions can have bad outcomes." – Krysten Aguilar, La Semilla Director of Operations and Advocacy

SHARED LEADERSHIP MODEL AMONG THREE WOMEN OF COLOR HELPS ORGANIZATION DEMONSTRATE EQUITY IN ACTION

Founded eight years ago, La Semilla has been helping the communities of Southern New Mexico and El Paso become healthier and more politically vocal through programs such as Edible Education, Community Farm, Farm Fresh Mobile Markets, and Food Planning and Policy. They are also committed to ensuring that resources are targeted at underserved communities and that those communities are given the flexibility to direct the funds in a way that makes their communities self-reliant and sustainable.

"A lot of our focus is really ensuring the flow of resources are going back into the communities and the *colonias* (unincorporated towns located close to the U.S. and Mexico border) and not just in the urban centers, which is often happening," said Aguilar.

One of their core organizational goals is looking at the "intersectionality of agency and power" which cut off certain populations from sources to capital—like the young farmers of color who are often at higher risk of losing their livelihood because they do not have access to the same capital necessary to buy farmland with water access.

"The way we address these intersectional issues is by focusing on how the actual policy gets written. The policy should ensure this money isn't available just to grocery stores or already established larger businesses in these underserved communities, but that this money includes individuals or small businesses in these communities that want to grow food or set up a farm stand. This broadens the scope of who qualifies for Healthy Food Financing loans, while also focusing on this community base and the people and businesses they serve."

Aguilar acknowledges that the concept of health equity and social capital can be difficult because it "requires people to ask those who typically hold leadership positions to take a step back and make room for new ways of doing things, new definitions of success, and new leaders."

Though La Semilla was founded as a co-leadership model, it was only recently that all three co-directors were women and women of color. Not only is the model meant to dismantle traditional hierarchical issues by flattening out the organizational structure, it is also designed to cultivate the leadership of the 16 staff members within the organization. "It's really important to operate on this model because we need a different system. If you're talking about equity and changing systems, you must be very intentional about how you operate as an organization. It's really important to us to practice that," said Aguilar.

HEALTHY FOOD FINANCING HELPS BOOST LOCAL ECONOMIES AND "CREATE VIBRANT COMMUNITIES"

Through a grant from Voices for Healthy Kids, for the last two years, La Semilla expanded their community gardening and education program "La Cosecha," where community health advocates are trained and given cooking and gardening tools to do outreach in their own personal networks. In the past year, they have increased their impact with a focus on developing capacity and leadership skills with the *promotoras* who participate in the program.

In the La Cosecha program, participants learn how to tell their stories in order to demonstrate the need for policy change at county commission and city council meetings. This is a critical piece of La Semilla's work—empowering those who are most impacted to advocate to decision makers about food policies that would be most effective for improving quality of life. At the end of their program, the *promotoras* lead their own education and outreach projects—a strategy that has already proved successful in their efforts to promote the establishment of a Healthy Food Funding Initiative, which provides financial incentives to bring healthy food to retail settings in underserved neighborhoods.

A Healthy Food Funding Initiative has been a strategic goal for La Semilla because of the far-reaching impact it would have on the communities it serves. The funding would finance revolving and forgivable loans that would fund both the production and selling of healthy foods in the communities. Funds can be used to open new grocery stores, retrofit corner stores, or to help local farmers and producers reach consumers through farm stands and local farmers markets. Not only did the promotoras gather 520 postcards in support of a Healthy Food Funding Initiative in Dona Aña and El Paso counties—a remarkable number for the small community La Semilla serves—they also rallied 25 people to attend the Las Cruces City Council meeting to speak in favor of it. As a result, the city unanimously voted to move forward with drafting and funding a pilot version of a Healthy Food Funding Initiative. "It was a huge win," said Aguilar.

For others, the win has been more personal. Socorro Linden attended many of the programs and workshops La Semilla has to offer—La Cosecha, the Food and Farm Business Workshop series, and trainings on ancestral health and wellness. Empowered with the knowledge and tools to create her own success, Socorro experimented and perfected a recipe for a healthy vegan *buñuelo*, a Mexican cookie, and has begun the journey to start her own small business.

"We work from the assumption that our communities have the knowledge, power, and the understanding to create vibrant communities all on their own. The issue isn't a lack of innovation or a lack of knowledge. The challenge is systemic issues that keep people from accessing resources," said Aguilar.

SAFER STREETS FOR PHYSICAL ACTIVITY IN OREGON

The Jade District is one of the most diverse census tracts in the State of Oregon with a population comprised of a majority of people of color. It is a thriving international and multicultural district in Portland that serves as a hub for businesses, arts, entertainment, and a place to celebrate the many heritages of its inhabitants. It has a high density of low-income immigrants and 88% of students are on a free or reduced lunch program. Citizens experience asthma rates that are twice as high compared to surrounding areas as well as low birth rates, elevated cancer rates, and other chronic health issues.

The immigrants that the Asian Pacific American Network of Oregon serves are up against more than the traditional barriers of systemic racism. Not only is English a second language, they are also new to American systems, such as understanding how to access the legal and medical systems or how to navigate a five-lane highway that was clearly not designed for the safety of pedestrians.

The Asian Pacific American Network of Oregon employs four key strategies to help its members: 1) base-building organizing and cultural work, 2) leadership and political development, 3) policy advocacy and civic engagement campaigns, and 4) community and economic development. Its board members are also strategically placed on other boards of directors throughout the city to serve as a conduit for change and to ensure the Asian Pacific Islander voice has a seat at the table. For example, one former board member sits on the TriMet board, which is a local transportation agency with a \$2-\$3 billion budget.

"It's really making sure that our communities have a voice in decision making where historically we've been underrepresented. We're not going to break the cycle of poverty and systemic racism through social services as important as they are," said Duncan Hwang, Asian Pacific American Network of Oregon (APANO) Associate Director. "It's about culture shift and narrative shift and systems change. That's the durable change we'll need for the long term."

TRAGIC DEATHS OF FOUR ELDERLY IMMIGRANTS SPUR COMMUNITY-WIDE MOVEMENT TO IMPROVE NEIGHBORHOOD SAFETY

On December 7, 2016, the Asian Pacific Islander community was rocked by the news of two fatalities—two elderly pedestrians over the age of 65 were hit by cars crossing a road. Their deaths meant that over a course of four years, four people had died exactly the same way—crossing a busy road at night in a commercial-heavy corridor. "It's not like these are all random events," said Hwang. "There's something systemic happening."

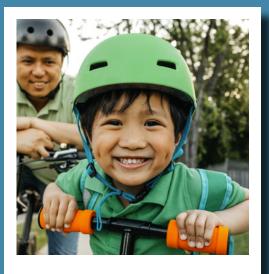
A transportation study showed that there was no time in the day for pedestrians to safely cross the five-lane street. For the elderly who may walk more slowly or are not fully informed about road safety, the lack of crosswalks compounded with low lighting and a high-speed limit has had a fatal impact. The story is even more tragic as the families of the deceased are faced with a language barrier when trying to communicate with first responders.

After the incident, community and transportation advocates came together to express their concern at the systemic issues causing these pedestrian deaths. As a result, the City of Portland declared a state of emergency, and Asian Pacific American Network of Oregon began the campaign for a safer community for the most vulnerable members of their community—the elderly and the young. Funded by a grant from Voices for Healthy Kids, they embarked on a campaign to create policy to ensure streets were complete for multiple modes of transportation, routes to school were safe, and biker and pedestrian safety were explicitly acknowledged in local and statewide policies. Because of the community—wide effort among the Asian Pacific American Network of Oregon and other coalition members, new medians and sidewalks have been created, the speed limit has been reduced, a traffic camera and a speed reduction board has been installed, and a greenway is under construction. The Asian Pacific American Network of Oregon also held a safety workshop in Chinese for over 200 people and offered in-language materials and issued them flashlight beacons.

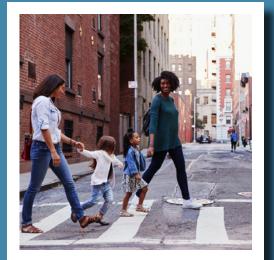
"It is difficult as an immigrant to feel like you can make changes," said Hwang. "But just because we don't talk about it, doesn't mean it's not important. It needs to be done."







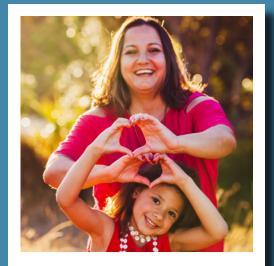












EMPOWERING YOUTH ADVOCATES IN NORTH CAROLINA

Young people under the age of 18 make up more than a quarter of the U.S. population, yet their voices are often limited by "an arbitrary line to adulthood" says Martin. Youth Empowered Solutions (YES!) believes one of the keys to a more just and equitable community is equipping high school youth and their adult allies with the tools necessary to unite their communities and create positive change.

As a national nonprofit based in North Carolina, the adult staff at YES! work alongside paid youth staff who are high school students between 14-19 years old, on community health issues that impact youth and adults. They work at the local and state level through a racial justice approach to reduce weight-related diseases, ensure access to health care, eliminate teen tobacco use, decrease substance misuse, and strengthen youth-adult partnerships so that youth can become the public health leaders of tomorrow. With this youth advocacy perspective, they train youth and their adult allies across the country on organizing and advocating for change in their communities.

"Youth are affected by policy change, but oftentimes aren't involved in creating it," says Pam Diggs, YES! Director of Programs and Racial Equity. "We create a vehicle and a partnership with them to be a part of the change they seek."

"Not creating a space for youth to take part in these conversations would be detrimental to the process," said Katie Spears Warner, Director of National Partnerships at YES!. She added that "if young people aren't equal partners at the table, we will continue to have to do this time and time again." According to Katie, their unique experiences and fresh outlook help them find creative solutions. YES! attributes their increased focus on racial equity to the young people on their team who challenged them to be clearer and more explicit about the issue not only discussing and analyzing it but addressing the root causes.

Recognizing the components of an equitable society meant they also needed to examine the root causes of inequity within their own organization. Last year, YES! underwent an assessment that identified opportunities to increase their internal capacity to lead systematic changes in racial equity. As a result of the assessment, YES! is now more racially conscious and applies an equity lens to their internal practices and external work.

Hiring, partnering and contracting with individuals with lived experience and proximity to the issues of racial inequities increases YES!'s ability to create transformative impact. Job descriptions now include language about YES! as an inclusive organization, and job applications are reviewed blindly to reduce implicit bias creating a more equitable hiring process.

"If you want to work towards achieving health equity through a racial equity lens, you have to start inside and work your way out. If it's not authentic and it's not reflective on the inside, you're going to go out and do further harm," says Diggs.

NATIONALLY-RECOGNIZED YOUTH EMPOWERMENT MODEL PROPELS YOUNG PEOPLE INTO LASTING ROLES OF CIVIC ENGAGEMENT AND COMMUNITY LEADERSHIP

"What would it look like to have a society whereupon starting high school someone is teaching you that civic engagement is the standard and not an option?" asked Martin.

The YES! Youth Empowerment Model® is a three-pronged approach that engages young people to develop their personal skills, analyze the issues affecting their lives and communities, and participate in decision making and advocacy to create community change. YES! supports a network of youth and adult teams across the country as they implement the model. The YES! Youth Network was relaunched and supported in part by an incubator grant from Voices for Healthy Kids. Over the past two years, youth and adult staff from YES! supported **34** systems, policies and environmental changes, across **13** states, through **50+** partners and projects, **impacting 2,701,839 people**.

"The system inadvertently leaves youth out of policy work and these conversations, so of course it's the default to think young people don't care," said Warner. "That is a mistake—they very much care and are very interested."

Jabari Brooks, a YES! graduate who has been involved since his sophomore year of high school echoes the same thoughts. "They (youth) are not going to care about issues if you constantly push the stereotype that people under the age of 19 are apathetic. Then suddenly they hit 19 and 'I'm an adult! I suddenly care.' That's not how life works." Brooks is a sophomore in college and is still working at YES!. He plans to attend law school after college and focus his career on civil rights. Having facilitated trainings and oriented incoming staff in his role at YES!, Brooks knows the organization has empowered him with the skills and critical thinking that will be valuable throughout his life. But most importantly, he understands how his outlook on life has been indelibly changed.

IMPROVING QUALITY WATER IN SCHOOLS IN LOS ANGELES, CA

InnerCity Struggle (ICS) has a long legacy of working for change in the Eastside of Los Angeles community, which is predominantly immigrant, Latino, and low-income. For almost 25 years, they have been organizing students and residents to take an active role in changing the landscape of their communities for the better. Initially, the organization's goal was to disrupt the pipeline from school-to-prison and redirect public investment to better prepare young people for success. They continue that work today as well as works on increasing civic engagement and preventing housing displacement. They have changed lives for the better by leveraging a strategy of base-building and leadership development through three platforms: youth organizing, parent and resident organizing, and civic engagement.

Brenes acknowledges that initially, the hardest part of the work was to demonstrate that change was possible. The goal of ICS is to empower students and residents to elevate their voices and teach them that power through numbers can change the conditions of their community—such as in the case of the Student Equity Need Index.

Due to decades of disinvestment in public education, the State of California moved from first in the nation in per-pupil spending to number 47 in 2018. The data also show that the children in the Eastside of Los Angeles have lower achievement rates in reading and math compared to more affluent areas in the region. In response, ICS helped form the Equity Alliance for LA's Kids to help lead efforts in organizing students and residents to influence the school board to vote to adopt the Student Equity Need Index. The resolution that was proposed to the school board allocated state funding based on need that could be used towards a menu of options like college access, restorative justice, and wellness support. Approval of the resolution would indicate the board was acknowledging inequitable schooling, neighborhoods, and student experiences.

By the day of the school board meeting where the resolution was considered, ICS and their allies had secured just two votes out of the four needed to pass among the board of seven members. Some board members were undecided, while others had expressed opposition. It was believed that a unanimous vote would be needed to ensure effective implementation of the resolution. After months of campaigning, the possibility of concession was looming. Refusing to give up, students and parents mobilized, made their voices heard, and helped change the equity landscape of the second largest school district in the country. The resolution was passed with a unanimous vote!

"Students spoke. They filled the board room. They cheered. They chanted. They had their shirts. They testified. And we got a unanimous decision," said Bernes. "We cannot underestimate the power of organizing and mobilization."

STUDENTS VOICE A NEED FOR ACCESS TO QUALITY WATER

"When we talk about schools and the conditions that schools are in, it is a civil rights issue. It is an equity issue," said Laura Zavala Director of Policy & Research at ICS. "If we are not providing the conditions and the quality to provide the optimal learning experience for our students, we are doing a disservice, and it is an inequitable environment."

In the past months, with the support of a grant from Voices for Healthy Kids, Zavala and ICS have begun to dig deeper into what it means to have the right conditions at school and to understand the policies that do or do not exist to support those conditions. As part of that work, they discovered that students were concerned about a lack of access to quality water. As a result, they are now working towards proposing a resolution to the school board that aims to strengthen equity within the existing water access policies, such as securing a certain amount of water stations, ensuring every school has high-quality water access, and ensuring conditions of water sources are up to a certain minimum standard.

The students are proving they are more than just a voice. Next, they will take part in a photo lab project where they will take pictures of water sources at their schools, code the pictures, and develop a series of recommendations. This work will then be incorporated in the overall resolution and play a critical role in communicating their direct experiences to the board.



CAMPAIGN CHANGES THE LIVES AND TRAJECTORY OF STUDENTS

The students in Eastside Los Angeles, and specifically those in ICS' United Students program, have learned their voices can make a difference. After going through the program, many students continue to develop their civic voice and pledge to find ways to stay connected to the community.

Having earned a full scholarship to UCLA because of her work and relationship with ICS, Alejandra Peguero said she will explore social policy, social work, and the social impact of the arts and build on the organizing and advocacy skills ICS has taught her.

"I'm more comfortable asking questions about what I don't know. I see myself as someone who has the power of changing things that are unjust. [ICS] changed the way I perceived youth voices. I saw the impact it can have when youth come together and organize around issues they are affected by. Our voices are often dismissed, and decisions are made for us without our input."

And for others like Brandon Najera, ICS has fundamentally shifted his life perspective. "It really opened my eyes and helped me come to peace with certain things. I have had a lot of tension with my family, but I realize the challenges in my neighborhood - what we go through - isn't my parents' fault. ICS helped me realize maybe some things that happen to me aren't just my problem. It's a systemic thing that happens to a lot of people in my community."

Najera will go onto UC San Diego this fall to explore ethnic studies and determine the best way he can continue to give back to his community—he wants to become a community organizer after graduation or go on to law school and come back to help drive change.

"I've seen myself grow so much from just barely being able to speak to other students in the program to now being one of the people that helps organize walkouts and speaks in rallies. Going out to Sacramento to speak to legislators has given me the drive to continue to dedicate myself to the community."



WHOLE SCHOOL, WHOLE COMMUNITY, WHOLE CHILD IN VERMONT

MODEL CONSIDERS COMMUNITY INTERVENTION AS PRIMARY FORM OF PREVENTATIVE HEALTHCARE

Embedded as an organization of the Northwestern Medical Center in Franklin and Grand Isle Vermont, RiseVT is a collaboration consisting of community-based wellness specialists, program managers, and health coaches focused on improving the healthy lifestyles where people live, work, learn and play. Its mission is to address the intersectional issues of equity and to work towards stronger wellness policies, healthier residents, improved quality of life, and lower healthcare costs. Its unique model allows communities to drive the initiatives and policies as long as everyone is working towards one holistic goal, "to make the healthiest choice the easiest choice, and the easiest choice the healthy choice."

When asked how to engage a community to take action, Smith advises that it "calls for the fullness of time. It's not something you go in and do. It takes relationships, it takes showing up, and it takes paying attention." In fact, launching the Whole School, Whole Community, Whole Child (WSCC) campaign in the region was the result of paying attention to the fact that the Vermont State Board of Education was requiring all districts to pass a new wellness policy.

To ensure the local school boards did not pass mediocre policies, RiseVT worked in communities and advocated in support of a stronger wellness policy that represented the needs of the students. "It was important for us to come with data and statistics. When you come with information, solutions, and a willingness to get involved, the leadership starts to listen." But the communities and parents advocated for more than stronger wellness policy language. They insisted the boards provide updates on policy implementation, and as a result, an administrator from each School Supervisory Board was assigned to spearhead the effort which would eventually be known as the WSCC campaign.

A grant from Voices for Healthy Kids enabled RiseVT to strengthen and focus the WSCC campaign, which Smith describes as a "framework for which communities, parents, administrators, school personnel, and staff can enter into a conversation together about the health and wellbeing of our children. It could result in stronger policy language for our wellness policies and will most likely result in a larger conversation about how all of these interacting pieces can create the conditions for a healthier school community."

WHOLE SCHOOL, WHOLE COMMUNITY, WHOLE CHILD MOVEMENT TRANSFORMS THE WELLNESS CULTURE AT SCHOOL

Knowing that one of the biggest roadblocks preventing community members from attending meetings is scheduling, RiseVT is intentional about when wellness meetings are scheduled and who is invited. Every quarter, each of the five school districts hosts a meeting with a topic that is predetermined by its committee members and communicated in advance. The timing of the meeting is also deliberate. In one district, the meeting is scheduled during the day, so teachers can take time off to attend, and for another district, the meeting is held right after school, so parents can conveniently participate. One thing is consistent throughout all of the meetings—"all of the people coming are concerned about the health and wellbeing of the children."

The conversation has been transformative to the entire community. Bellows Free Academy in Fairfax, a leader in developing a modern wellness policy for its students, implemented a wellness period in addition to the traditional physical education period. During this time students can choose among various wellness options such as going to the gym or doing yoga—as long as it improves their wellbeing. Their success has become an example to other schools and districts in the area as they reassess their wellness policies.

At another WSCC meeting, a local school shared how they were dealing with excess food which was the effect of a new healthy school meal standard requiring more fruits, vegetables, and dairy products. Students were asked to place their uneaten food in a refrigerator called the "Share Fridge." This creative solution solved multiple issues at once. Those who were hungry during the school day or were facing a food insecurity situation at home could take out food from the fridge, which also kept food from being wasted.

For Lisa Curry, who is both a teacher and parent engaged in the WSCC campaign, the support from RiseVT and the ideas shared in WSCC meetings have impacted her personally and professionally. In addition to offering more movement opportunities for her kids, the focus on health and wellness has resulted in her ability to add flexible seating in her classrooms (e.g., yoga balls and pedal bikes) so that kids can choose the best study environment for them. They have also advocated for funding to plant an orchard on the school grounds.

Getting the students excited about trying new foods and about gardening is important to Curry who "values the importance of being healthy" because it signifies the beginning of a life-long habit for healthy eating and wellness. "In talking with my students and even my own son, they're pretty excited about it. It's an exciting time for us."



OTHER 2018 PROGRESS AND GRANTEE HIGHLIGHTS

HEALTH EQUITY ROUNDTABLE FOCUSES ON NUTRITION FOR INCARCERATED INDIVIDUALS:

Voices for Healthy Kids

Voices for Healthy Kids is committed to making health equity a key component of each campaign we support. To encourage innovation, we hosted issue-specific roundtables around the country to further examine our policy priorities with a focused health equity lens. One roundtable held in Washington, DC, focused on nutrition in facilities serving incarcerated individuals. The event brought together prison food contractors, families of incarcerated individuals, correction nutrition directors, prison advocate organizations, and public health professionals to discuss the complexities and opportunities to improve food quality within correctional facilities and juvenile justice centers.

MORE FUNDING FOR SAFE ROUTES TO SCHOOL PROGRESS IN MINNESOTA:

MN for Healthy Kids Coalition ~ American Heart Association MN

Minnesota Governor Dayton signed HF4425, a bonding bill which increases the current \$500,000/year funding by \$1 million. This funding will go toward Safe Routes to School grants to improve the safety of walking and biking to school. Additionally, Hennepin County, which contains Minneapolis, will invest \$6 million to fix problematic intersections throughout the county.

DENVER PUBLIC SCHOOLS PROMOTE DRINKING WATER:

Stapleton Foundation

The Denver Public Schools District promoted healthy beverages with their "Do You Know H2O" school drinking water challenge. As a result, two schools in Aurora received new water bottle filling stations, while Ashley Elementary submitted a signed, official water access policy committed to making safe drinking water available to students throughout the day. Two other schools, North Middle School and McGlone Academy, submitted their water access policy language and are currently awaiting administrative approval.

MASSACHUSETTS INCREASES FUNDING FOR THE HEALTHY INCENTIVES PROGRAM:

Massachusetts Public Health Association

Massachusetts Governor Baker released his FY19 Capital Investment Plan, which included \$1 million for the Massachusetts Food Trust Program. This additional funding will launch the program with a total of \$2 million in capital funding. The supplemental budget was also passed, which included \$2.15 million for the Healthy Incentives Program (HIP). The final House and Senate budgets included an additional \$100,000 for the Food Trust and \$4 million for HIP.

ARIZONA-GROWN FRUIT AND VEGETABLE INCENTIVES: Pinnacle Prevention

Arizona Governor Ducey signed a bill that appropriated \$400,000 of Arizona's general funds to Supplemental Nutrition Assistance Program (SNAP). This bill was the first investment of its kind in the state and gave SNAP enrollees incentives to purchase Arizona-grown fruits and vegetables. The win was the result of a large network of partners actively involved in advocacy efforts from across the state, strong media presence, and cross-sector engagement from farmers, health care and the community!

LA COUNTY'S SUMMER LUNCH PROGRAM HIGHLIGHTS GOOD FOOD PURCHASING POLICY:

Los Angeles Food Policy Council

Los Angeles Food Policy Council (LAFPC) hosted an event celebrating LA County's Summer Lunch Program to highlight the importance of expanding the Good Food Purchasing Policy currently in place in the city of Los Angeles to all of LA County. The event included a garden planting, free pop-up produce market, healthy food demonstrations, a social media action photo booth, and enrollment for both Calfresh and WIC. Most presenters at the event had participated in a spokesperson training earlier in the year as part of their Voices for Healthy Kids technical assistance.

EARLY CARE AND EDUCATION REGULATIONS IN TENNESSEE:

American Heart Association TN

Regulations approved by the state attorney general established nutrition, physical activity and screen time standards for childcare providers in Tennessee. These regulations made home- and center-based childcare settings healthier for more than 350,000 children.

IMPROVED TRANSPORTATION IN CHARLOTTE: Sustain Charlotte ~ American Heart Association NC

In 2017, the Charlotte City Council passed the Charlotte WALKS plan to improve the safety of walking and biking paths, but the plan had a few loopholes, which prevented it from being as safe and effective as it could be. Advocates activated volunteers to address these issues and ultimately, the Council voted in favor of amending the ordinance and closing the two loopholes impeding the Charlotte WALKS plan.

ROOTS OF TODAY'S CHALLENGES ADDRESSES HISTORICAL DISPARITIES:

The Praxis Project ~ Voices for Healthy Kids

At the Voices for Healthy Kids Annual Grantee Meeting in 2017, The Praxis Project unveiled the Roots of Today's Challenges project and tool. This resource highlights the role policy has played in creating disparities and how it can help address current needs. The project includes four narratives that discuss and explain the historical significance of Voices for Healthy Kids policy issue areas: Active Places, Healthy Schools, Early Care and Education/Out of School Time, and Healthy Food. The tools will be used to train staff, grantees, and advocates in their work to make their communities healthier through addressing health disparities.

IMPROVED STREETS AND SIDEWALKS IN OKLAHOMA CITY:

American Heart Association OK

The Oklahoma City Council adopted a Livable Streets policy to create opportunities for residents to be active and travel safely. The transportation policy included increasing bike lanes, sidewalks and crosswalks, ultimately leading to safer streets and improved community health.

HEALTHY KIDS' MEALS IN DALY CITY:

Public Health Advocates ~ American Heart Association CA

Daly City, CA unanimously voted to adopt a healthy default drink in kids' meals. This vote established that water or milk would be the default drink in kids' meals. This win is part of a growing movement among California localities to adopt ordinances that require healthy default beverage options in kids' meals.

COMPLETE STREETS POLICY IN KANSAS CITY: Kansas City Healthy Kids ~ American Heart Association MO

The Kansas City, MO City Council unanimously approved a Complete Streets policy that integrated active transportation into street design. This policy encompassed all forms of transportation and physical abilities, with an emphasis on low- and moderate-income areas. Connected to the Bike, Walk and Trails city plans, this plan also addressed staff training needs, focused on interdepartmental coordination and required the policy to be reviewed every three years to encompass new technology.

COLLABORATIONS TO BUILD DIVERSITY AND INCLUSION WITHIN THE DISABILITY COMMUNITY:

Voices for Healthy Kids ~ Lakeshore Foundation/NCHPAD

Voices for Healthy Kids developed a collaboration with the Lakeshore Foundation / National Center for Health, Physical Activity and Disability (NCHPAD). This collaboration is expected to bring valuable technical assistance and expertise to help build stronger campaigns that consider diversity, disability and inclusion. The goal is that this collaborative effort will help ensure our policies provide the 54 million people living with disability in the United States equal access and opportunities for healthy living.

HEALTHY KIDS' MEALS IN SOUTHERN CALIFORNIA CITIES:

Public Health Advocates ~ American Heart Association CA

Both Cathedral City and the City of Long Beach joined the growing movement to serve kids better by voting to adopt a healthy default drink in kids' meals at restaurants. This policy made water, milk or juice the default beverage option in bundled kids' meals in these two California localities.

EARLY CARE AND EDUCATION STANDARDS IN NORTH CAROLINA:

North Carolina Alliance for Health ~ American Heart Association NC

North Carolina approved nutrition, physical activity and screen time standards for center- and home-based Early Care and Education (ECE) providers. Meals and snacks must comply with the Meal Patterns for Children in Child Care Programs from the USDA and drinks are limited to milk, water and formula.

ELIMINATING JUNK FOOD MARKETING IN CALIFORNIA SCHOOLS:

American Heart Association California

Governor Brown signed a bill that prohibits the marketing of unhealthy foods and beverages on school campuses during the school day. This bill impacted more than six million California students by eliminating junk food marketing.

ADVOCATES ENCOURAGE CEOS TO MAKE KIDS' MEALS HEALTHIER

Voices for Healthy Kids Action Center

Advocates rallied to encourage the CEOs of five major fast food companies to make their kids' meals healthier. Through the Voices for Healthy Kids Action Center, 3,500 emails were sent to CEOs asking to make water and milk the default beverage in children's meals instead of sugary drinks, as well as limiting the amount of saturated fat, sugar, and salt on their menus.

HEALTHY VENDING MACHINES IN PRINCE GEORGE'S COUNTY:

Sugar Free Kids Maryland ~ American Heart Association MD

County Executive Baker signed a bill that expanded access to healthier foods and drinks in vending machines on public property in Prince George's County, MD. This law required at least half of the snacks and drinks in vending machines to meet the full nutritional standards, and all items must meet the sodium and trans-fat standards and contain less than 200 calories per package. Additionally, 50 percent of drinks must be water, milk, 100 percent juice, or drinks with fewer than 40 calories per serving.





06 INDIAN COUNTRY FEATURE



IMPROVING THE HEALTH OF THE NATION'S NATIVE AMERICAN AND ALASKA NATIVE POPULATIONS

The release of the Seeds of Native Health Semi-Annual Report by the Shakopee Mdewakanton Sioux Community reminds us again of the significant challenges to the health and well-being of Native peoples. Arguably, no set of domestic policies implemented by the United States since the nation's founding has had a greater detrimental impact on the health of a population of people than this nation's Indian policies. These policies have resulted in the loss of culture, language, and the ancestral lands and traditional diets that had nourished Native Americans for eons.

In an attempt to address the significant levels of food insecurity that existed on and around the nation's Indian reservations, the United States government created and implemented food distribution programs, under which they would provide Native Americans with a variety of foods^[1]. However, this came with its own significant problems. A 2008 U.S. Department of Agriculture study found that the program provided two times the required total grains and only about half of the fruits, vegetables, and low-fat dairy amounts to meet dietary recommendations^[2].

The health and social impacts of these policies and programs are truly staggering. According to the American Indian Cancer Foundation, the nation's Native American population was once among the healthiest people in the world, but today the opposite is true. It's estimated that more than 80 percent of adult Native Americans are overweight or obese^[3]. More than 15 percent of Native Americans suffer from type 2 diabetes, more than double the rate among Caucasians^[4]. American Indians and Alaska Natives have a life expectancy that is about four years less than the general U.S. population (all race/ethnicities), and they have higher rates of mortality from heart disease, cancer, and diabetes^[5].

Grassroots advocates have been working for a number of years to reverse these trends. Some tribes, public health officials and local advocates have taken important steps to improve access to healthier foods and to reintroduce native culture to local diets. These localized efforts have recently been infused with new attention, energy and funding to help further raise awareness of the problem, create opportunities for positive change and develop long-term solutions. Two developments, in particular, are notable.

First, Voices for Healthy Kids, commissioned Feeding Ourselves, a landmark report released in 2015, surveying the state of Native American food access and health disparities. The report issued a call to action for greater investment in food and dietary health work to benefit Native peoples.

Second, at almost the same time, the Shakopee Mdewakanton Sioux Community (SMSC) launched Seeds of Native Health, a multifaceted national campaign to improve Native American nutrition. The SMSC, a tribe in Minnesota, is known for its leading role in philanthropy in Indian Country. Because they had developed a wellness program for their own members, created an organic farm and operate a healthy food market, the SMSC first-hand experience inspired them to commit \$10 million over four years to the campaign. Seeds of Native Health includes grant-making, sharing of best practices, capacity-building, sponsored research, and educational initiatives. Voices for Healthy Kids became an early strategic partner in the SMSC's Seeds campaign. The tribe and Voices for Healthy Kids collaborated to organize two national convenings: Fertile Ground (2015) and Fertile Ground II (2016). The first was a roundtable of 41 philanthropic organizations from across the country to discuss the needs and opportunities to invest in Native nutrition and food access work. The second brought together nearly 200 Native leaders, Native youth advocates, and national philanthropic organizations and focused on creating a roadmap for Native-led policy changes to improve health and nutrition.

And the collaboration involving the SMSC and Voices for Healthy Kids continues and deepens. In 2017-18, the SMSC's Seeds of Native Health and Voices for Healthy Kids co-funded a new re-granting program to support innovative nutrition-based, health-focused advocacy efforts in Native American communities. The American Indian Cancer Foundation (AICAF), which was Created in 2012 seven years ago to address the growing cancer burdens among Native Americans, served as the grant administrator and provided technical assistance for the five grantees of the Fertile Ground Grant Program. Kris Rhodes, AICAF's CEO, said that the grants were designed to support community conversations to build a foundation for the creation and implementation of policies that will improve access to healthy, indigenous foods. That initial effort created a lot of enthusiasm among tribes and other Native advocates and leaders.

Understanding the needs of Native advocates and leaders to build and advance community was the subject of an Indian County Technical Assistance assessment. Conducted and produced by Echo Hawk Consulting, the TA assessment delved into the collective wisdom of Native community health and food advocates about the types of technical assistance and capacity building that is needed to support their important work. It includes capacity building needs, training and technical assistance, including fundraising topics, and describes characteristics and examples of positive technical assistance and training experiences.

These learnings helped to shape and inform two Fertile Ground Leadership Institutes implemented in the Summer of 2018. Sponsored by Voices for Healthy Kids and the Shakopee Tribe, the Leadership Institutes provided participants with training and sessions to deepen their understanding of the root causes of the challenges to health and wellness in Indian Country and to position participants to build a skill set to plan campaigns for policy shifts that improve the living conditions for all.

Deepening our commitment and working to address these crucial issues is key to Voices for Healthy Kids and the American Heart Association. The new, Phase 2 of re-granting is being launched as the Fertile Ground Advocacy Campaign that will support Native-led advocacy efforts to advance new policies and innovative policy making approaches that will benefit Native American nutrition and health—access to healthy food; reductions in sugary beverages and food, and food sovereignty work rooted in tradition, culture and Indigenous knowledge.

While the health problems linked to the nation's Indian policies are not easily addressed, change is starting to happen, change that gives Rhodes and others confidence in the future. "My hope is that 100 years from now Native people have access to indigenous foods, they know how to harvest those foods, there is a robust native foods economy within tribal communities and ultimately we will once again be the healthiest people in the world," she said.

[5] Indian Health Service. Indian Health Disparities. Rockville, MD: U.S. Department of Health and Human Services, Indian health Service, 2017. https://www.ihs.gov/newsroom/includes/themes/responsive2017/display_objects/documents/factsheets/Disparities.pdf.

 ^[1] U.S. Department of Agriculture, Food and Nutrition Services. Food Distribution Program on Indian Reservations. Nutrition Program Fact Sheet, 2018. https://fns-prod.azureedge.net/sites/default/files/fdpir/pfs-fdpir.pdf.

^[2] U.S. Department of Agriculture, Food and Nutrition Services. FDPIR Food Package Nutritional Quality: Report to Congress, 2008. https://fns-prod.azureedge.net/sites/default/files/ops/FDPIR_FoodPackage.pdf.

^[3] Indian Health Service. Healthy Weight for Life: A Vision for Healthy Weight Across the Lifespan of American Indians and Alaska Natives, Actions for Health Care Teams and Leaders. Rockville, MD: U.S. Department of Health and Human Services, Indian Health Service, 2011. https://www.ihs.gov/healthyweight/includes/themes/newihstheme/display_objects/documents/HW4L_TeamsLeaders.pdf.

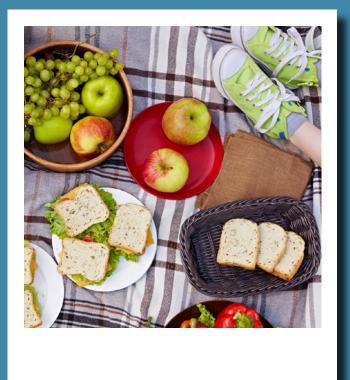
^[4] Centers for Disease Control and Prevention. National Diabetes Statistics Report, 2017. Atlanta, GA: Centers for Disease Control and Prevention, U.S. Dept of Health and Human Services; 2017. http://www.diabetes.org/assets/pdfs/basics/cdc-statistics-report-2017.pdf

Reflecting on our progress over the past five years, we are optimistic about what the future holds. Building on previous successes, 2018 marked yet another year of big wins and inspiring progress. We've taken a large step in the right direction to provide opportunities for all children to eat healthier, increase their physical activity and improve their all-around health.

But we still have work to do. With the support of our network, allies, strategic advisory committee and many more, we strive to continue the success and momentum of the past five years as we improve the health of generations to come.

We're grateful for and motivated by every single one of the hundreds of thousands of advocates who have joined our cause and commitment to building a culture of health. Each signature, email, and voice mattered and helped make a difference in children's lives.

07 CLOSING



JOIN US IN MAKING EACH DAY HEALTHIER FOR ALL CHILDREN AT VOICESFORHEALTHYKIDS.ORG

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