

BUILDING A CULTURE OF HEALTH *for all* CHILDREN

 American Heart Association
TAKING ACTION TO PREVENT OBESITY

 Robert Wood Johnson Foundation

 **Voices**
for Healthy Kids

2016 PROGRESS REPORT





TABLE *of*
CONTENTS



03

REMOVING OBSTACLES

05

POLICY SUCCESSES

09

**MESSAGING AND
PUBLIC OPINION**

13

**MEDIA TRAINING
AND OUTREACH**

17

**CAPACITY BUILDING:
EQUITY ENGAGEMENT
AND OUTREACH**

20

**CREATING NATIONAL
PARTNERSHIPS AND
BUILDING ENGAGEMENT**

21

LOOKING AHEAD

The activities described in this report were funded primarily by the Robert Wood Johnson Foundation, as part of its support for Voices for Healthy Kids. However, to the extent this report includes lobbying, no RWJF funds were used. Voices for Healthy Kids requires campaigns to have unrestricted dollars to support any lobbying activities.

REMOVING OBSTACLES

CHILDREN TODAY FACE FAR TOO MANY OBSTACLES THAT STAND IN THE WAY OF MAKING HEALTHY CHOICES. THAT'S THE REASON WHY WE FOUNDED VOICES FOR HEALTHY KIDS THREE YEARS AGO. OUR PREMISE HAS ALWAYS BEEN SIMPLE: LET'S DO EVERYTHING WE CAN TO REMOVE THOSE OBSTACLES. BY DOING SO, WE CAN ENSURE THAT THE PLACES WHERE CHILDREN LIVE, LEARN, AND PLAY MAKE IT EASY AND ENJOYABLE FOR THEM TO EAT HEALTHY FOODS AND BE ACTIVE.

We're proud of the progress we've made in our first three years, with more than 50 policy wins, impacting more than 66 million lives. A study published this year in the American Journal of Public Health offered powerful evidence that Voices for Healthy Kids is a promising model for changing policies that improve the nutrition and physical activity environment. The study reported that Voices for Healthy Kids support, both financial and technical, could increase the chances of passing state policy by 50 percent. In states without initiative support, 10 percent of bills were enacted, compared to 15 percent of bills in states with support from the initiative.

The power of Voices for Healthy Kids is not only in the direct policy wins we support, but also through technical assistance, capacity-building, and public education that is leading the way to positive change. We recognize that our success would not be possible without the collaboration of dozens of organizations in states across the nation who are sharing their expertise and passion for a healthier future.

The following pages detail many key highlights from the third year of Voices for Healthy Kids, with inspiring examples of schools and communities that are truly dedicated to helping all children grow up at a healthy weight. Thank you again to everyone whose support has been so vital to our ongoing work to build a culture of health.



NANCY BROWN
CEO, AMERICAN HEART ASSOCIATION

POLICY SUCCESSSES



CREATING EFFECTIVE COALITIONS IN OREGON TO FUND SAFE ROUTES TO SCHOOL

THE PUBLIC AND POLICYMAKERS alike are well aware of the benefits of more students walking and biking to school. That activity not only creates lifelong healthy habits, but it helps improve student academic performance. But assuring that the infrastructure is there to make walking and biking to school safer — such as better street crossings, improved lighting and designated bicycle routes — can be expensive, which is why support for funding state-based Safe Routes to School (SRTS) sometimes crumbles among policymakers.

However, advocates in Oregon found that by building and maintaining an effective, broad-based coalition to argue for Safe Routes funding, and then keeping that coalition focused throughout the legislative session, they were able to overcome potential opposition and secure funding for the program. The result was an unprecedented \$3.5 million investment in SRTS in Oregon by the Metro Council and the Joint Policy Advisory Committee on Transportation.

“We heard from the very beginning that a coalition would be very powerful in this process,” says LeeAnne Ferguson, SRTS director for Oregon’s Bicycle Transportation Alliance, who helped organize the coalition.

That coalition — the For Every Kid Coalition — quickly grew to 40 members, due largely to a series of community

meetings that began in the summer of 2014. It not only included large well-known organizations such as the American Heart Association and the Safe Routes to School National Partnership, but also smaller, highly effective organizations, thanks to capacity building grants that were provided to those organizations.

“The coalition not only added a lot of value and ideas to make the legislative task more well-rounded, it allowed us to come to the Legislature as a united front with strong, broad-based support,” says Ferguson.

The funding will improve safety for students who walk, bike, or use transit. The \$3.5 million includes \$1.5 million for a regional Safe Routes to School program and \$2 million for street improvements near Title 1 schools which Ferguson says is critically important from the standpoint of health as well as safety. The neighborhoods surrounding those schools largely lack sidewalks as well as safe street crossings. Mapping in Oregon has shown a direct correlation between rates of type 2 diabetes and Title 1 schools.

“You would hear people audibly gasp when they saw the map,” says Ferguson.



CREATING SAFER ROUTES TO SCHOOL IN COLORADO

ALTHOUGH COLORADO has long been viewed as an outdoor mecca for those engaged in recreational pursuits

such as skiing, mountain biking and hiking, only one in four Colorado youth get the recommended 60 minutes of daily physical activity, due in part to the safety challenges many youth face walking and biking in their communities, especially to and from school. Because dollars for the federal Safe Routes to School program have been dramatically reduced and the program itself rolled into a program that funds other non-school active transportation projects as well, a coalition of Colorado health and transportation parties successfully established a state-based program.

“... only one in four Colorado youth get the recommended 60 minutes of daily physical activity, due in part to the safety challenges many youth face walking and biking in their communities, especially to and from school.”

“Colorado had received a lot of grants from the federal program, and if it was going to go away, we wanted to make sure that the good it did continued in some way,” says Erin Hackett, government relations director with the American Heart Association in Colorado, which led the coalition that worked to create the program.

The coalition worked to highlight the benefits and demand for the program in Colorado among cities and towns, schools, and health and active transportation interests. Chief among the benefits cited was the safety of students.

“Public safety was clearly one of our strongest arguments with the public, with communities and with legislators,” says Susanna Mizer, senior government relations director with the American Heart Association in Colorado.

In 2014, the coalition found legislative support to introduce a bill to fund a Colorado-based Safe Routes Program with \$3 million in one-time finding. Unfortunately, the funding was eventually cut to \$700,000 and it could only be used for bicycle and pedestrian education initiatives in the schools. Undeterred, the coalition returned the next year to the Legislature to support the reintroduction of legislation to provide infrastructure funding for the program. That effort

stalled out when the bill was killed in the Colorado Senate’s State Affairs Committee.

Fortunately, Colorado Governor John Hickenlooper and his transportation director had been watching the debate over whether or not to fund the Colorado Safe Routes Program, and the important safety and health benefits it would help bring to the state. Hickenlooper, an avid supporter of biking, announced in September of last year that as part of a spending program to help increase and support bicycling in the state, he would dedicate \$10 million to the Colorado Safe Routes to School Program over four years. No less than 70 percent of that funding can go to infrastructure funding – funding for safer crosswalks, sidewalks and trails.



PROVIDING INCENTIVES FOR SAFER STREETS IN MASSACHUSETTS

ADVOCATES IN MASSACHUSETTS played a key role in getting that state to approve funding for implementing complete streets policies at the municipal level. The funding will help assure that complete streets principles, which are designed to enable safe, convenient and comfortable travel and access for users of all ages and abilities regardless of their mode of transportation, are incorporated in municipal street and road construction and reconstruction throughout the state.

Existing law in Massachusetts had required complete-streets principles to be incorporated into all state-based roadway and bridge work and development projects, including new construction, reconstruction, rehabilitation, repair, maintenance, and operations projects. However, at the municipal level there is no complete streets requirement, resulting in a mishmash of sometimes dangerous street and road design in communities throughout the state.

Allyson Perron, senior government relations director for the American Heart Association, says that the coalition working on the funding effort recognized early on in the process that they had to do more than just encourage municipalities to implement complete streets policies; they had to provide a carrot as well.

“When it comes to policies like complete streets, incentives are very important not only because municipalities often

don't like having restrictions placed on them, but because many don't have the financial resources to implement full-scale complete streets projects," she says.

The result was that in 2014 the Massachusetts General Court (that state's legislative body) allocated \$12.5 million through a bonding bill to help implement complete streets in municipalities. The funding, which was allocated in 2015, could be used for both design and construction, allowing the state to support communities that may be challenged to provide these funds. In 2016, that financial commitment was further increased with the approval by the governor's office of \$10 million per year, through the state's capital improvement plan, for technical assistance and construction grants over a five-year period.

The funding will do more than enhance safety — it will also support public health. The complete streets policy and supporting funding will be a significant tool in that state's efforts to help improve the health of its citizens, and decrease rates of chronic disease that has occurred due to increasing levels of obesity and overweight, brought on, in part, by sedentary lifestyles. The funding will be especially important to the effort to help end health disparities in Massachusetts. The policy's stated objectives include promoting regional equity by ensuring program dollars are distributed as equally as possible among different community types, and working to advance mobility goals for low- and moderate-income residents.



WALKING AND BIKING IN LOS ANGELES COUNTY

ALL CHILDREN DESERVE to live in safe, healthy communities. Complete streets policies make communities and neighborhoods more livable by ensuring all people can get safely to where they need to go — work, school, the library, grocery stores, or parks. This year saw the passage of the Los Angeles County Transportation Improvement Plan, a ballot proposal which will secure more than \$100 billion over the next four decades for transportation infrastructure in L.A. county through a ½ cent sales tax. Included within the language is at minimum 2% in funding for walking and biking, however there are several other projects which will

be funded and will increase the investment for walking and biking to 6 - 8%. This equates to billions in dollars for walking and biking in Los Angeles county.

In addition to the specific funding that was identified for walking and biking, the Metro Planning and Programming Committee unanimously approved policy language into the ballot around local jurisdiction participation in major transit projects. Previously the local jurisdiction had to contribute 3% of the capital cost of the project. This was a hardship

for local jurisdictions who are also trying to build and rebuild their neighborhoods to be more walk and bike friendly. If passed by the voters, those local jurisdictions will now be able to count walking and biking improvements within a mile of the transit project as part of that match. Essentially, it provides an incentive to local cities to continue to build opportunities for walking and biking in relation to the major transit projects. It is estimated that this could lead to an additional \$300 million investment.

Finally, through the engagement of Investing in Place and polling which they completed in May 2016, there is a greater emphasis on walking and biking within the ballot language itself. When originally proposed the ballot language didn't include the word "sidewalks," but thanks to Investing in Place and their advocacy efforts, sidewalks are now included within the language. In addition, the Los Angeles Times came out with an editorial in support of the ballot measure while stating that projects that make it easier to walk and bike are "a vital part of the transportation infrastructure that has been too often overlooked."



BUILDING PUBLIC SUPPORT FOR HEALTHY VENDING OPTIONS IN MARYLAND

PROCUREMENT. IT'S A TERM THAT FOR MANY is hard to define at a glance. But when it comes to public health, and especially advancing healthy eating among public employees and those who frequent state and local facilities, it has incredible importance as demonstrated by study after study.

In Maryland, a coalition is pushing for adoption of the Maryland Healthy Vending Act by that state's legislature. The legislation would require that 75 percent of the food and drinks offered in vending machines on state property

meet healthy food and drink standards, as well as trans-fat and sodium standards. Equally important, from a marketing perspective, the healthy foods and drinks would be given prominent placement and information on calorie content would be placed in or around the vending machines.

“When it comes to increasing healthy eating, experts across the nation point to healthy vending on public property as one of the key places to start by making sure people have the ability to make a healthy choice,” says Robi Rawl, the executive director of Sugar Free Kids Maryland, a statewide coalition of more than 200 organizations that is the catalyst behind the measure.

Being that it is highly unusual for a new piece of legislation to make it through the Maryland Legislature in the first

year it is introduced, the Maryland Senate Finance Committee voted the measure down. But thanks to the attention Sugar Free Kids Maryland brought to the issue, healthy vending machine offerings and their link to public health are resonating with both the public and policymakers. In the long run, that awareness will serve Maryland health advocates well. The existence of a strong and diverse statewide coalition, reams of positive stories, and a successful framing of the issue as being about choice has Rawl and others feeling very optimistic as to the legislation’s chances in future sessions of the Legislature.

“We framed this issue as simply a matter of choice ... about expanding food and drink options,” says Rawl. “That brought a lot of attention to the issue and now the legislation has widespread support ... we made a lot of headway.”

Eventual passage of the legislation is important because making healthier food and drinks more widely available in vending machines could help reduce rates of type 2 diabetes, heart disease and other chronic diseases in Maryland, especially among those who work on or frequent state property. Its passage will also send an important signal to state residents and the owners and operators of other vending machines that healthy vending offerings are an important public health issue that deserves everyone’s participation.

As Rawl succinctly states, “This sends the message that government prioritizes health.”



SECURING HEALTHY VENDING MACHINE OFFERINGS IN BALTIMORE

SOMETIMES IN PUBLIC HEALTH policy campaigns, the right player stepping up to the plate at the right time can give advocates the strength and momentum they need to bring a campaign to a successful conclusion, and as a result, make significant public health improvements. For public health advocates in Maryland, that exact scenario played out recently when the AHA helped turn a pilot project to require healthy offerings in vending machines on Baltimore city property into a full-scale policy change affecting hundreds of vending machines in public facilities throughout the city.

The Baltimore healthy vending effort initially began in late 2013 when the city’s mayor announced a Healthy Vending Pilot Project with a commitment to full implementation by 2015. When the pilot project was completed, the AHA stepped in and helped put in place a permanent policy that will positively impact the city’s 18,000 employees, as well as many of the 622,000 residents of Baltimore who visit the city’s libraries, community centers, parks, pools, museums, and skate and ice rinks.

“The AHA has always been trustworthy and we have always used science to back up and support our work,” says Michaeline Fedder, Maryland government relations director for the AHA, which led the effort.

“ Sometimes in public-health-policy campaigns the right player stepping up to the plate at the right time can give advocates the strength and momentum they need to bring a campaign to a successful conclusion, and as a result, make significant public-health improvements. ”

Behind the Movement

MESSAGING AND PUBLIC OPINION

KEY TO ANY PUBLIC-POLICY CAMPAIGN, whether at the state or local level, is the right message being delivered at the right time to the right audience. Effective messaging is critical to helping get public policy makers to act positively on an initiative. It is also central to helping build public support for those initiatives.

Recognizing that fact, Voices for Healthy Kids has worked extensively to equip advocates with the knowledge, skills and research to develop and execute effective messages to help increase the likelihood of successful policy initiatives. Thus far, the initiative has presented on message research to the staffs at five of the American Heart Association's affiliates, forty-two individual state and local campaigns, at six national conferences and to dozens of partner organizations as part of work groups, coalitions and strategic advisories and on an individual organization basis. All of these interactions have helped provide advocates with the skills to become better and more effective communicators.

"Public opinion research guides our work in public policy change by helping us to best understand how the public thinks about, talks about, and processes information related to our issues. Using the right messages allows our campaigns to effectively engage with advocates, build momentum, and broaden support towards improved health for all communities," says Isabelle Gerard, policy and public opinion research manager for Voices for Healthy Kids.

To help further those messaging skills, Voices for Healthy Kids has also provided public opinion research technical assistance for advocates. This service includes sharing findings and key messages from prior national, state and local research, assistance in choosing a research firm, selecting research methodology with a campaign's specific goals in mind, determining project deliverables, creating a strategic dissemination plan, developing questionnaires, analyzing data, and creating materials based on the research findings such as press releases, fact sheets, infographics and key messages for engaging the public. Thus far, that assistance has been provided to more than forty healthy-eating and physical-activity campaigns in 2015-2016.

One example of the benefits of messaging technical assistance is a Voices for Alabama's Children poll on healthy food financing. Technical assistance was provided to the campaign throughout the process, drawing on learning from a national message research project on healthy-food access. The results of the poll were positive and helped gain public support, but just as important, the results helped inform the campaign of its strengths and weaknesses and resulted in the realigning of some of its internal strategies. Using the information, Voices for Alabama's Children developed highly effective fact sheets and infographics that have become an example for other campaigns.

"Good message strategy allows you to determine where you are, in terms of support, and then to determine the key message that is easy for people to grasp - it's really vital to informing strategy," says Gerard.

Considering that Baltimore has hundreds of vending machines in public facilities all over the city, developing and implementing the full-scale policy was no small feat. Recommendations for the nutrition standards that would apply to all vending machines on Baltimore city property had to be developed. An extensive review of existing vending contracts — some of which were in place for three- or five-year periods and couldn't be broken — had to be conducted. An education campaign about the link between nutrition and heart disease was implemented.

The policy requires vending machines to provide items with no trans-fat and that are lower in sodium. Fifty percent of the foods offered must be lower in saturated fat, lower sugar and lower calorie. All beverages must have fewer than 250 calories total and vegetable juice must contain less than 230 mg of sodium per serving. And 50% of beverages must contain less than 40 calories per serving, except for 100% juice and unsweetened milk.

The policy also exhibits a clear understanding of the importance of marketing and placement to consumer behavior. It requires that healthy items be placed prominently and competitively priced. For example, water is required to be stocked and placed “in the position with the highest selling potential”— high-calorie beverages get the opposite treatment.

“We didn't take anything away; we just gave people more and better options,” says Fedder.



HEALTHIER VENDING IN SAN FRANCISCO

RIGHT NOW, there are few healthy food and beverage options available in many public places, like parks, recreation centers, and other state and city buildings.

But as many people try to eat healthier, the demand for healthier options is increasing. San Francisco is leading the way to answer that demand. The city has adopted a new ordinance that improves the nutritional quality of foods and beverages in vending machines on city and county-owned properties.

Ordinance No. 91-16, “Nutritional Standards for Food and Beverages Sold in Vending Machines on City Property

or Served at City Meetings and Events” requires that prepackaged food and beverages sold in vending machines on City and County property meet specified nutritional standards and calorie labeling requirements. The new ordinance will give 29,000 city employees and more than 830,000 residents access to healthier foods and beverages in public places.

What we eat and drink impacts our health, and we tend to eat what is easily available. Making healthy food and beverages available in public places lets children and families eat healthy, decreasing their risk for heart disease and type 2 diabetes.



SETTING SMART SNACK STANDARDS IN MISSISSIPPI'S SCHOOLS

SCHOOLS NOT ONLY have the ability to provide students with the skills and insights to be active and productive members of society, but they are also capable of directly and positively impacting lifelong habits related to food choices and eating habits. After all, during the school year students spend as much as eight hours a day or more on school property — hours that can be dedicated to helping to create good eating habits.

The Mississippi Department of Education seized that opportunity in February of 2016 when it adopted Smart Snack standards for that state's schools, ensuring that all public-school students have healthy options beyond what is provided in the School Meal Program. The standards are designed to make sure that schools in that state build on existing federal healthy eating guidelines.

The Mississippi Smart Snack standards require that grain-based products must be at least 50 percent whole-grain. Other products must have fruit, vegetable, dairy or protein as a first ingredient. Fewer than 35 percent of calories must be from fat, and the rules limit sodium, sugar, caffeine and total calories. Junk food in school fundraisers — like doughnuts, pizza and candy — are also prohibited and there is a zero exemption fundraising policy. An incentive program that uses grants has also been created to help schools develop healthier school environments.

“ A survey found that 97% believe that serving nutritious foods in schools is important to ensure that children are prepared to learn and do their best scholastically. ”

“It’s well known that Mississippi is not the healthiest state in the nation,” says Katherine Bryant, the American Heart Association’s senior director of government relations and advocacy in Mississippi. “Anything the state can do to make this newest generation a healthier generation is important. In addition, it’s a well-known fact that when the school environment is healthier, academics improve.”

Mississippi voters are not only well aware of the problem, they support the state taking action. A survey found that 97% believe that serving nutritious foods in schools is important to ensure that children are prepared to learn and do their best scholastically. Of that survey total, 79% think it is very important to serve such foods.

Thus it was no surprise that Bryant and other advocates were able to recruit a large number of volunteers to advocate for the adoption of the policy. A letter-writing campaign into the state board of education was implemented, as was a highly effective social-media campaign.

“Creating healthy environments in the schools is a priority for Mississippi. We’ve seen some positive movement, and this policy adds another tool to the effort,” says Bryant.



DEVELOPING PARTNERSHIPS IN RHODE ISLAND TO ACHIEVE NUTRITION POLICY GAINS

ADVOCATES WORKING IN RHODE ISLAND to secure passage of legislation to update nutrition standards to ensure that the state meets — and continues to exceed — new federal guidelines for snacks and beverages sold in schools, as well as a requirement that only healthy foods and

beverages are advertised and marketed to children on school property, quickly discovered that partnerships are the key in getting the legislation passed.

Rhode Island has long been at the forefront of school nutrition. Despite having strong state standards and quickly adopting new federal guidelines, one loophole remained — the advertising and marketing of unhealthy junk foods and beverages. “We came to the realization that if we are working to improve health opportunities for those communities being targeted by the junk food marketing interests, it was important to get those communities engaged in the effort,” says Megan Tucker, director of government relations for the American Heart Association in Rhode Island.

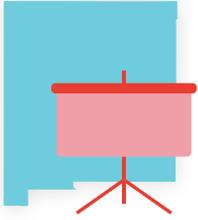
The result was the forging of working relationships between Rhode Island health advocates and the NAACP Providence Branch, Oasis international, Progreso Latino and the Liberian Community Association. Each of these organizations were leaders in their respective communities and several had strong youth leadership programs. That made engaging the youth in advocacy efforts related to nutrition and healthy food access much easier and more effective.

But the partnership worked both ways. “We learned a great deal from the community groups that will continue to inform our work,” says Tucker.

The result of the collaboration and sharing of knowledge was the passage of legislation that requires all Rhode Island elementary, middle and high schools that sell or distribute competitive foods and beverages on the school campus during the school day to offer only healthy foods and beverages as defined by the U.S. Department of Agriculture, the Rhode Island Department of Education and the local school district. That legislation is expected to be signed into law by Governor Gina Raimondo.

A second measure requiring that only healthy foods and beverages are advertised and marketed to children on school property passed the Rhode Island Senate but stalled in the — House of Representatives, which Tucker views as a temporary setback. She predicts that the growing coalition will continue to work together on other key health issues as well.

“I think the long-term outcome is a continued partnership on the issues that are important for the health of their communities, such as improved physical education, opportunities for physical activity and access to healthy foods,” she says.



CREATING OPPORTUNITIES FOR HEALTHIER SCHOOL FOODS FOR NATIVE AMERICAN STUDENTS

THE ISOLATED LOCATION of the Navajo Reservation in New Mexico near Four Corners, coupled with a lack of resources for quality refrigeration systems and a generational shift in the kinds of foods Native American youth consume, have created a significant challenge to healthy eating in the schools there. While school lunches comply with federal nutrition standards, school snacks and foods used for fundraising and rewards commonly do not. The result is that students often consume unhealthy foods during the school day in a region that is already plagued by rampant rates of type 2 diabetes and other health challenges.

To help build support and momentum for healthier school offerings, youth are being recruited and trained in not only advocating for healthy eating but also in the use of culturally relevant grains and wild foods such as wild onions and corn. The effort is ultimately designed to get Navajo youth to promote healthy eating and thereby get school administrators to act on the growing interest by implementing healthier food policies in the schools.

“Our goal is to strengthen the school wellness policy as it pertains to snacks, vending machines and school fundraising. But we also want to strengthen the cultural components of health and nutrition,” says Merrissa Johnson, programmatic grants administrator for Capacity Builders, Inc., which works with the Reach Food Coalition, a Navajo Nation partnership that focuses on food security.

Johnson says that the knowledge is there as are the traditional food resources. It’s just a matter of getting youth to understand the importance and benefits of those foods and then to make it sustainable.

“There is a generational gap – nonperishable items are often eaten by youth while their parents had the ability to eat their grandmother’s produce,” she says. “We want students and their parents to reconnect over the stove.”

As part of the effort to increase nutrition education and understanding among students, a poster contest is also being implemented in the schools. The contest and posters will focus on the importance of incorporating traditional foods in the diet. Each grade level will have a competition.

“Many of the students from the Navajo nation are very artistically inclined so the poster contest will be very positive,” says Johnson.



GROWING DIALOGUE AROUND FOOD ACCESS IN INDIGENOUS COMMUNITIES

In May 2016, The Shakopee Mdewakanton Sioux Community and American Heart Association co-hosted Fertile Ground II: Growing the Seeds of Native Health to spark strategic dialogue between more than 200 tribal representatives, funders and government agencies aimed at raising awareness of the food crisis in Indian Country.

Inspired by the initial gathering in October 2015, Fertile Ground I, event organizers saw the conference as a way to continue defining the scope of the issue and joining forces to address the impact of historical trauma as it relates to food systems in a way that supports tribal sovereignty.

Attendees joined panel presentations, participated in targeted work groups and exchanged best practices for Native communities. The convening developed 35 bold ideas, 21 capacity-building needs, and 7 next steps for action for creating food policy and programs at the local, tribal, state and federal levels.

The events were inspired by Seeds of Native Health, a campaign to improve the nutrition of Native Americans. Launched in March 2015 with a \$5 million contribution from the SMSC, the campaign has brought together top experts and philanthropists in an effort to develop permanent solutions to the problem of limited healthy food access in Indian Country.

A KEY COMPONENT TO PUBLIC-POLICY CAMPAIGNS is the ability to successfully reach out and engage the news media. It is so important that its effective use can mean the difference between a successful and unsuccessful campaign. Recognizing that, Voices for Healthy Kids is working to build this capacity and skillset among grantees.

“We have found that while many campaigns are really good at reaching out to and engaging the news media, they aren’t always strategic,” says Shelly Hogan, media advocacy manager for the initiative. “For example, it’s important to make sure messages are framed so that the focus is policy change rather than individual behavior change.”

Trainings have taken place across the nation to provide grantees and key campaign members with the skills needed to be able to work effectively with the news media to get their key messages out. Media spokesperson trainings in the last year have been held in Alabama, California, Florida, Michigan, North Carolina, Texas, and Virginia. Trainings have included tips on how to prepare for on-and off-camera interviews to maximize campaign effectiveness and support. In addition to better news-media stories and increased-advocacy skills, the trainings are also helping advocates better frame their campaign issues.

“One of the biggest benefits of the media spokesperson training is the assurance that effective and consistent language is being used and that advocates talk about both the problem and the policy solution,” says Hogan.

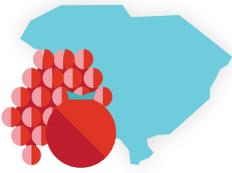
One such example of the effectiveness of the capacity-building effort was a media training that was held in Virginia just as a public-policy campaign was getting started there. The lead staff for the campaign participated in the training, along with a staff member from the campaign coalition. The result was consistent and effective messaging both in news-media outreach and in the materials created by the coalition.

Hogan says that the initiative is also working with campaign communications and advocacy staff throughout the nation to host Voices for Healthy Kids Media Roundtable events. The events are designed to raise knowledge and awareness of the systemic issues that contribute to childhood obesity, as well as to help the news media covering the issue see the need for a policy approach to the problem.

The roundtables are a partnership between communications and advocacy staff and build new relationships with members of the media who report on these issues. The events also help train field-based staff on how to structure and execute similar roundtables in other markets. Roundtables have been held in Alabama, California, Illinois, Connecticut, North Carolina, Ohio, and Texas.

Behind the Movement

MEDIA TRAINING AND OUTREACH



SOUTH CAROLINIANS SUPPORT SMART SNACKS IN SCHOOLS

KIDS EAT THE MAJORITY of their calories at school, so all schools should make sure that all the food and beverages they sell are healthy. This is why consistent nutrition standards are so important. The South Carolina Department of Education will now require snacks sold at school meet the same nutritional standards as breakfast and lunch. For two years, Eat Smart Move More SC, a health advocacy group, worked to ensure that every student in every school would be offered healthier snacks at school.

This year, the Healthy Food in Schools Bill was signed into law by Governor Nikki Haley to update the state nutrition standards to be in line with the USDA. Sponsored by State Senator Katrina Shealy, the bill helps schools, parents and communities play an active role in school nutrition and healthy choices for students through public reporting and school health improvement plans.

The focus on school snacks is especially important for the state of South Carolina which has the second highest obesity rate in the United States for youth ages 10 to 17 and many children consume up to half their daily calorie at school. A 2015 survey of parents in South Carolina showed that 77% supported national standards for school meals and 75% supported nutrition standards for snacks sold at school.

Eat Smart Move More SC summarizes the bill as having two critical pieces: an update to South Carolina's nutrition standards to meet those set by the USDA and ensure they are regularly updated with the USDA guidelines. Doing this gives all students throughout the state equal access to healthy foods and helps prevent and address disparities; and a requirement that all schools to report on compliance in existing school health improvement plans. Making this information public allows the community to understand how schools are meeting nutrition standards.



SAFE DRINKING WATER FOR CALIFORNIA STUDENTS

SUGARY DRINKS are a major contributor to the increasing rates of diabetes and heart disease. With our country already spending \$190 billion per year treating these preventable diseases, we must address the problem.

This year, California Governor Jerry Brown approved his final 2016-2017 budget with \$9.5 million allocated for school filtration systems to ensure California students, particularly those living in low-income communities or areas of acute water shortage or contamination, have access to safe drinking water.

The investments included in the budget will provide safe drinking water for more than one hundred thousand California students. For many students who live in small, low-income communities impacted by unsafe drinking water, school is the only option for access to free, fresh drinking water, which is essential to health and educational attainment.



REDUCING SUGARY DRINKS IN PHILADELPHIA*

CONSUMING SUGARY DRINKS, such as fruit drinks with added sugar, sports drinks, and soda, poses a real health risk to kids. This year, Philadelphia became the largest, and only the second, U.S. city to tax soda and other sugary drinks.

For years, cities such as Seattle, San Francisco and Chicago have tried and failed to do the same, faced with intense opposition from the soda industry. Even in Philadelphia, two previous attempts to pass a sugary drinks tax failed.

But this time, instead of focusing on the health aspect, the city's new mayor, Jim Kenney, proposed the tax as a way to fund community and education initiatives. The new Philadelphia

tax of 1.5 cents per ounce will be used to fund programs such as citywide pre-K education. The tax, passed by the City Council with a 13-4 vote, will take effect Jan. 1, 2017.

“Philadelphia made a historic investment in our neighborhoods and in our education system today,” Kenney said in a statement. “I ... thank my colleagues in Council for working with our administration to craft a shared agenda that will improve the education, health and prosperity of children and families all across our city for years to come.”

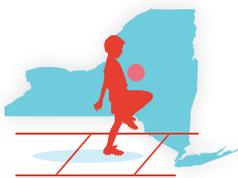
When big cities pass taxes such as the one in Philadelphia, it can set a precedent for other cities to follow. For example, tobacco taxes that were once largely opposed became commonplace.

Berkeley, California, is the only other U.S. city to pass a sugary drinks tax. Since the 1-cent-per-ounce tax went into effect in March 2015, it has so far generated \$1.5 million in revenue, most of which is used to fund nutrition and health programs.

The wins in Berkeley and Philadelphia make it possible for other cities to consider similar taxes. In addition to San Francisco, at least two other California cities — Oakland and Albany — are considering a tax.

According to the American Heart Association, men should have no more than 9 teaspoons of added sugar each day and women should have no more than about 6 teaspoons a day. A 12-ounce can of soda contains about 8 teaspoons of added sugar.

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



BIG IMPROVEMENTS IN PE FOR NEW YORK CITY SCHOOLS

NEW YORK CITY is big by any standard — population, geographic spread, density and even vertical reach. With more than 1700 schools spread across its five boroughs, it is also the largest school district in the country, serving more than 1 million students.

New York City has often led the way on innovative public health policies. But when it came to the next generation of

New Yorkers, the city struggled to provide enough effective physical activity during the school day. In 2010, the American Heart Association's Advocacy Committee began exploring why schools couldn't expand the time spent on physical education, only to quickly realize schools were not able to comply with the existing state standards for PE class time which fall below national benchmarks.

Fueled by questions related to why schools were struggling to meet existing PE standards, the American Heart Association conducted a survey in 2012 to better understand the obstacles faced by school administrators. The survey data further demonstrated the call-to-action for lawmakers, school officials, parents and advocacy groups to mobilize efforts.

Entitled, “Physical Education in New York City: Ignoring the 800 lb. gorilla” the survey found that the vast majority of students weren't receiving the recommended minutes of PE, PE classes were commonly not taught by certified PE instructors and that nearly half of the city's schools lacked adequate space for physical activity. Coupled with similar research achieved by the City Comptroller, the Women's City Club and other partners, the findings became a wake-up call for New York City policymakers and a rallying point for the community.

As a result of this effort, the city's Phys Ed 4 All Coalition was formed. Joining with like-minded partners from education, social justice, immigrant rights and other circles, the new group mobilized quickly to change the reality in city schools.

The coalition worked to pass a law in November 2015 requiring school reporting on PE throughout the city. The report card, the first of which will be issued in August 2016, will be housed on the city's website, allowing parents and community advocates to better understand the limitations of PE in their schools.

As a result of this increased awareness for effective PE, the city has now devoted significant funding to help improve the quality of physical education for all students. In FY 16, City Council dedicated a \$6.6M appropriation that helped create the PE Works program which marked the city's first ever allocation dedicated to hiring more physical education staff. And this year, Mayor de Blasio earmarked \$9M in the FY 17 budget to begin hiring certified PE teachers for all elementary schools currently without one.

Moving forward, the American Heart Association's Advocacy Committee and the Phys Ed 4 All Coalition remain vigilant. They intend on improving the city's PE report card, outlining more detail about the curriculum being used in city schools, the types of space being used for PE, or how many students are allowed to substitute the PE requirement for another activity.



FUNDING HEALTHY FOOD ACCESS IN LOUISIANA

ONE REASON for the alarming trends for obesity and diabetes in the U.S. population, as well as high blood pressure and high cholesterol, is that too many children and adults do not eat a healthy diet. To address this need, Louisiana passed a Healthy Food Retail Act seven years ago to help grocers and farmers' markets expand into fresh food-needy areas, yet until now, the state has never provided funding for the law.

In this year's budget bill, the governor included \$1 million in funding to implement the Healthy Food Retail Act. This is a huge success for a cash-strapped state and research shows that this will contribute to better eating habits and good health, including decreased risk for diet-related diseases like diabetes and heart disease. Groups across the state worked hard for the funding, including leadership from Market Umbrella and their partner Together Louisiana.



INCREASING ACCESS TO HEALTHY FOOD IN MINNESOTA

APPROXIMATELY 1.6 MILLION MINNESOTANS — nearly 30 percent of the state's population — lack access to healthy food because of how far they live from a grocery store that supplies fresh fruits and vegetables. The lack of access to healthy and affordable foods has resulted in significant health challenges throughout the state, including among communities of color and the state's large Native American population.

To remedy the problem, the Minnesotans for Healthy Kids Coalition proposed the creation of the Good Food Access Fund (GFAF), which would be established and funded by the Minnesota Legislature. It would provide grants, low-cost loans, and technical support for food-related enterprises in areas of the state where people don't have the ability to choose healthy, affordable foods. Those enterprises could include new or enhanced grocery stores, mobile markets and farmers' markets, fresh food refrigeration, and other innovative community-driven solutions.

"The goal of the Good Food Access Fund is to help make healthy, affordable food choices possible for communities that currently lack access to those foods, thereby giving Minnesotans of all ages and in all regions of the state the tools they need to help improve their health and well-being," says Rachel Callanan of the Minnesotans for Healthy Kids Coalition, a 25-member group established by the American Heart Association to mobilize advocacy efforts around priority state policies to help all children achieve a healthy weight.

Legislation creating the program was quickly and enthusiastically sponsored by the chairs of the Senate and House agriculture committee, respectively a Democrat and a Republican. Co-sponsors included both urban and rural legislators. Callanan says that the legislation's broad bipartisan and geographic support showed that legislators clearly recognized the gravity of the food access problem in Minnesota.

The 2016 legislative session was supposed to be a building year for eventual passage of the GFAF but momentum grew rapidly due, in part, to the release of survey findings by Minnesota Extension. The survey found that 62 percent of rural grocery store respondents intend to own their store for 10 more years or less and the vast majority do not have a transition plan in place to help assure the store will continue to operate.

In the final hours of the Minnesota legislative session, legislation creating the GFAF and housing it at the Minnesota Department of Agriculture was approved. The program also received \$250,000 in seed money to get it off the ground.

Behind the Movement

CAPACITY BUILDING: EQUITY ENGAGEMENT AND OUTREACH

THE U.S. CENTERS FOR DISEASE CONTROL AND PREVENTION has made it clear that health equity will be achieved only when every person in the United States has the opportunity to “attain his or her full health potential” and no one is “disadvantaged from achieving this potential because of social position or other socially determined circumstances.”

Ending health disparities or inequities that are unfairly linked to social, economic or environmental factors is one of the key focuses of Voices for Healthy Kids and its grantees. That’s why the initiative is also helping to create tools and mechanisms to help grantees and coalition members more effectively address those challenges at the state and local levels.

Central to that effort is applying targeted universalism to Voices for Healthy Kid’s health-equity work. Experts see this approach - designing and implementing broad-based, far-reaching policies that also target populations disproportionately affected by poor health - as an effective strategy for reducing health disparities across the nation, which, in turn, ultimately benefits everyone.

“Targeted universalism is an approach to achieve health equity,” says Jennifer White, Voices for Health Kids equity partnership manager. “It supports policies that target historically marginalized populations, which helps all communities and people and improves health.”

Marla Hollander, Voices for Healthy Kids national partnerships manager, says the reasoning behind that approach is that “we see higher rates of obesity in children of color. We would be doing a disservice and exacerbating health disparities if we did not focus our efforts on historically marginalized populations.”

Another cornerstone of the initiative’s approach is the integration of a health equity through-line in capacity building efforts. Through webinars, in-person trainings, and individual coaching sessions, Voices for Healthy Kids strives to meet grantees, partners and coalition members where they are and develop a circle of support to tackle equity considerations together.

One of the outcomes of the Voices for Healthy Kids is an external audit of the initiative’s Health Equity Action Plan. This will result in a revised action plan, which was a concerted approach to identify and adopt meaningful measures of accountability. As part of the process, 81 separate equity measures were identified for the initiative, which were then narrowed and refined into a half-dozen specific high-value, measureable priority goals. In addition, a health-equity-performance metric was included for staff in the 2015-16 grant year.

The initiative also completed a Strategic Campaign Fund “Incubator” pilot project that directly funded diverse local organizations, ranging from NAACP chapters to Slow Roll Chicago, to engage in policy advocacy work designed to inform and advance policy efforts. The pilot project has become a formal Strategic Campaign fund opportunity. Additionally, the Incubator is currently being evaluated to apply key findings to all future Strategic Campaign Fund grantees.

“From the onset we’ve had a commitment from Voices for Healthy Kids for integrating health equity into all of its initiatives,” says Hollander.



HEALTHY SMALL FOOD RETAILER ACT IN NEW JERSEY

IN MANY NEW JERSEY COMMUNITIES, it's easier to find grape soda than fresh grapes. Too many New Jerseyans live in communities where they are unable to make healthy food choices because there are no well-stocked grocery or convenience stores in their neighborhoods. The USDA identifies 134 low-income areas where a substantial number of residents have low access to a supermarket or large grocery store. The state took steps this year to change that. The Healthy Small Food Retailer Act passed the New Jersey Senate legislature and was passed onto the Governor, who has until September when the legislature reconvenes, to sign the bill.

This legislation creates a fund to expand programs in the state that provide assistance such as training, consumer education, marketing materials and equipment to small stores that wish to offer healthy, fresh food but lack the resources to do so. The initiative will improve access to healthy food and give economic support to smaller corner stores in underserved communities. But it doesn't stop there: the next step is to continue to advocate for the Governor to sign the bill and work with the Legislature, Department of Health, and others to secure a stable source of funding.



IMPROVING ACCESS TO HEALTHY AND AFFORDABLE FOOD IN OHIO

IT'S ONE THING TO ARGUE that people need better access to healthy and affordable food and that access is key to improving health, including among economically challenged communities who suffer from some of the nation's most significant health inequities. But it is another to make that problem and those people more than faceless statistics on a piece of paper, especially for policymakers. Health advocates

in Ohio took that challenge head on and as a result made significant gains in creating and funding a Healthy Food Financing Initiative (HFFI) in that state.

Several years ago, The Food Trust completed a mapping project, which showed the communities in Ohio that had the greatest need related to access to healthy and affordable foods. That map provided health advocates in the Buckeye state with the data they needed to argue for establishing and funding a program that would provide support for HFFI.

"The mapping project was a great first step," says Cresha Auck Foley, the American Heart Association's grassroots director for Ohio and Pennsylvania. "But we needed to do something else to bring decision makers and Ohioans along to support the HFFI."

First, Auck-Foley and her colleagues produced a video that not only highlighted the problem of food access in Ohio, but also potential solutions. The video, which was broadly shown and distributed, featured a county in southeast Ohio with a large aging population that must travel 30 miles in any direction to access a store selling healthy food. The video also featured a grocery chain in Cleveland that is successfully closing the food access gap in diverse neighborhoods. The video was supplemented with one-page stories of individuals and the challenges related to healthy food access. Those one pagers were turned into story cards that were handed out to decision makers, the news media and other stakeholders.

"The video and the cards brought the map to life. They became the starting points for conversations on HFFI," says Auck-Foley.

The effort to attach faces and stories to the food access problem in Ohio proved highly effective. Not only did the Legislature create the program, they provided an initial \$2 million in funding. Already, 19 applicants for funding have been pre-certified in Ohio, showing high demand for this program.

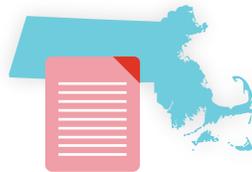
"When we talk about issues such as access to healthy foods, if folks don't see the problem personally it's hard for them to understand the issue," says Auck-Foley. "That's why sometimes we need to take people out of their world and into other people's lives to show the need for solutions."



NORTH CAROLINA GENERAL ASSEMBLY FUNDS HEALTHY CORNER STORE INITIATIVE

WITHOUT ACCESS TO HEALTHY FOOD, a nutritious diet and good health is out of reach. Healthy food financing programs can help. These programs help local grocers to open, expand, and improve grocery stores and corner stores in neighborhoods that need food and jobs the most. The North Carolina General Assembly has included \$250,000 funding for the creation of a statewide Healthy Corner Store Initiative in this year's final state budget. The funding is a great incremental step forward in establishing the Initiative in North Carolina, which will increase access to healthy foods in low- and moderate-income communities across the state. This is the first time that state funds have been invested in a program of this kind. The program will be housed in the Department of Agriculture and connect NC farmers and fisherman with small food retailers so that they can sell fresh produce.

Also included in the budget is a provision to establish a study committee to look at the issue of whether funds from the federal Community Development Block Grants may be used to support the Healthy Corner Store Initiative in future years. The initiative is not just about the physical health of North Carolinians, but is also about the economic well-being of the state.



HEALTHY FOOD FINANCING PROGRESS IN MASSACHUSETTS

THIS YEAR SHOWED SIGNS OF PROGRESS for healthy food access in Massachusetts. Governor Charlie Baker signed into law the FY17 Operating Budget, which included \$100,000 in dedicated funding to administer the Massachusetts Food Trust. Additionally, Governor Baker signed an Economic Development bill with \$6 million authorized to fund the initiative. This is no small feat considering the Commonwealth's significant budget challenges and demonstrates the legislature's commitment to advancing this innovative program that not only creates access to healthy food but also promotes economic development and creates and sustains jobs.

The action comes after nearly four years of intensive advocacy and organizing by the Massachusetts Public Health Association, members of the Act FRESH Campaign, the Massachusetts Association of Community Development Corporations, the American Heart Association and many, many allies.

The Massachusetts Food Trust Program will provide loans, grants, and technical assistance to support new and expanded healthy food retailers and local food enterprises in low and moderate income communities. The results of the program will be increased access to healthy, affordable food and quality jobs in low and moderate income communities.



WALKING AND BIKING IN PHOENIX

PHOENIX, ARIZONA will now have safer streets for walking and biking, ensuring all people can get safely to where they need to go - work, school, the library, grocery stores, and more. As the city population is expected to nearly double over the next 30 years, the Phoenix City Council identified a ballot initiative to increase the sales tax for transportation initiatives from 4/10 of a cent to 7/10 of a cent to fund improvements, including bike lanes and sidewalks.

The Move Phoenix Coalition (MovePHX), including AARP, American Heart Association, Arizona Public Health Association, Arizona State University, and many others, encouraged support of the proposition through education, grassroots efforts, and press events. The ballot initiative, Proposition 104, passed with 55% of the popular vote supporting the increase in the tax.

As a result of the vote, approximately \$16.7 billion is expected to be generated over the life of the tax, with a significant portion of this revenue being spent on walking and biking infrastructure. Half of the dollars are slated to go to improving and maintaining public transportation service throughout the city, while 7% of the dollars are slated to fund street improvements including 680 miles of new asphalt on major streets, 1,080 new miles of bike lanes, 135 miles of new sidewalks, and 2,000 new street lights.

ONE OF THE UNIQUE ROLES Voices for Healthy Kids plays is as a driver of national collaborations and coalition building within the childhood-healthy-weight movement. Helping to connect more than 100 diverse national organizations, including the majority of the Robert Wood Johnson Foundation healthy-weight grantees, the work is creating important opportunities to convene, align and build collective power to improve the health of the nation's children and youth.

“Building collaborations is the key to building power for our collective missions. We are working hard to build engagement spaces where a broad diversity of organizations not only share best practices and innovative ideas, but challenge perspectives to better understand health harms and inequity,” according to Nii-Quartelai Quarthey, Voices for Healthy Kids national strategic partnerships manager.

Work within this area includes expanding the Strategic Advisory Committee to 27 organizations by adding new policy area expertise and diversifying reach and expertise around populations impacted by the greatest health disparities; developing and implementing an engagement-based consortium approach—including grants to Afterschool Alliance, Alliance for a Healthier Generation and Safe Routes to Schools National Partnership; engaging more than 100 organizations in committees, subcommittees and task forces such as the National Active Transportation Diversity Taskforce, Shared Use Taskforce, OST Advisory Workgroup, Schools Consortium Steering Committee, and PE/PA Workgroup; and acting, in close collaboration with Healthy Eating Research, as a hub for engaging the research community through in-person summits, monthly group calls and regular facilitated one-on-one discussions with key research entities.

One of the unique approaches in the effort to improve the health of children is the work Voices for Healthy Kids is doing among the nation's Native American populations – populations that have some of the highest rates of type 2 diabetes and heart disease in the United States due, in part, to diet. Working in close partnership with Minnesota's Shakopee Mdewakanton Sioux Community, leadership and facilitation is being used to drive a Native-led national dialogue building toward a united framework and strategy for improved health in Indian Country. One such effort that took place in the fall – the Fertile Ground event – convened more than 40 different foundations and funders. A follow-up event brought together an unprecedented diverse group of Tribes, funders, local Native advocates, Native youth and national organizations.

The work Voices for Healthy Kids is doing to increase collaboration and partnerships within the nation's childhood healthy-weight movement is also positively impacting efforts among state and local grantees working to pass policy initiatives that positively impact the places children and youth live, learn and play. The impacts include supportive research, expanded coalitions and increased policy-maker attention to the issues that impact opportunities for children and youth to live healthier lives.

Aaron Doeppers, senior manager of field support for Voices for Healthy Kids explains, “Building collaborations to support current state, local, and tribal policy campaigns is a critical starting point, but impacting campaigns goes so much further. Bridging diverse expertise to look into the future and building a braided approach to success across diverse missions is critical to achieving a culture of health.”

Behind the Movement

**CREATING NATIONAL
PARTNERSHIPS AND
BUILDING ENGAGEMENT**

LOOKING AHEAD

WHEN THE AMERICAN HEART ASSOCIATION AND THE ROBERT WOOD JOHNSON FOUNDATION BEGAN THIS EFFORT THREE YEARS AGO, WE KNEW THE TASK BEFORE US WOULD BE ENORMOUS.

Yet we were guided by the belief that all children in America should have the opportunities and the tools to grow up at a healthy weight and thereby live lives free of the health challenges associated with heart disease, obesity, and diabetes. We were also emboldened by the number of advocates at the state, local, and regional level who shared our commitment and resolve to improve the lives of the nation's children, particularly those in populations and communities facing economic challenges, and heartened by the vast array of policymakers who welcomed our work.

We are on the cusp of 2017 - yet another year in the effort to improve the health and welfare of the nation's children - we at Voices for Healthy Kids are once again looking forward to both the opportunities and challenges in our work. But what makes this coming year different than the last three is that we are armed with the knowledge that what we and our collaborators are doing at the state and local level is truly having an impact. If you are a grantee or ally, we look forward to working with you once again over the coming year. If you are a policymaker, we hope you will join our effort. Collectively, we can continue to positively affect the lives of countless American children by providing them with opportunities to eat healthier and engage in increased physical activity, thereby putting them on a path to good health.



“

What makes this coming year different than the last three is that we are armed with the knowledge that what we and our partners are doing at the state and local level is truly having an impact!

”



 American Heart Association
Robert Wood Johnson Foundation
TAKING ACTION TO PREVENT OBESITY

**Voices**
for Healthy Kids