

www.EatSmartMoveMoreNC.com



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The shared **VISION** among the many partner organizations is a North Carolina where healthy eating and active living are the norm, rather than the exception.

The **MISSION** of Eat Smart, Move More NC is to reverse the rising tide of obesity and chronic disease among North Carolinians by helping them to eat smart, move more and achieve a healthy weight.

60+ organizations

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ESMM Leadership Team Executive Committee

Carolyn Dunn, Chair NC Cooperative Extension	Kevin Cain, Member at Large John Rex Endowment
Maggie Sauer, Vice Chair NC Medical Society Foundation	Pam Seamans, Member at Large NC Alliance for Health
Dave Gardner, Member at Large NC Department of Public Instruction	Greg Griggs, Past Chair NC Academy of Family Physicians

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What? Children today may be the first to have a shorter life span than their parents, chiefly because of their growing weight and sedentary lifestyle.



Age 7 Age 12 Age 25 Age 40

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Why?



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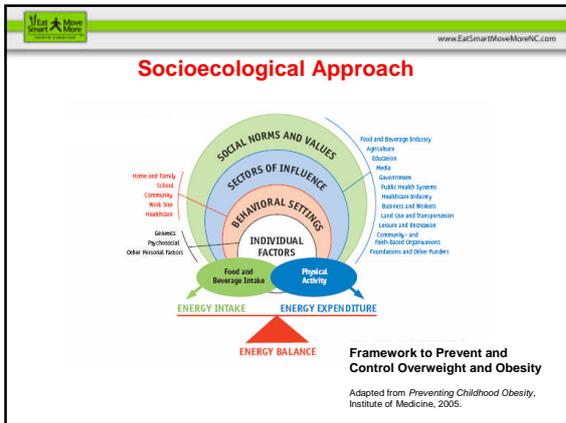
How?

obesogenic → *healthogenic*

Unintended consequences of many economic, individual, political, and social decisions made for other reasons

Political, social, and cultural change

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Eat Smart, Move More, North Carolina
Ad hoc committees

- Key Measures
- Advocacy
- Surveillance

Eat Smart Move More Plan Released in 2006

Eat Smart, Move More: NC's State Plan to Prevent Overweight, Obesity and other Related Chronic Disease 2007-2012

ESMM Leadership Team Advocacy Survey Results

November 2008

Physical Activity Policy #1

Policy strategies to **increase availability of quality, daily physical activity and physical education in schools for all children.** (Example: requirements for increased physical education in K-8, two or more units of healthful living curriculum for grades 9-12, daily physical activity in grades 9-12.)

23 organizations working on this issue

Physical Activity Policy #2

Policy strategies to **increase safe and convenient opportunities for routine walking** (Example: increased funding for sidewalks; requiring sidewalks in commercial and/or retail developments)

16 organizations working on this issue

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Nutrition Policy #1

Policy strategies to **provide healthy options in age-appropriate portion sizes in schools.** (Example: fully implement NC Nutrition Standards with funding/reducing indirect costs; pilot NC Nutrition Standards in Secondary Schools (and perhaps re-do elementary standards for more conclusive results); funding for equipment for schools such as steamers and walk-in refrigerators.)

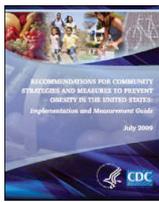
20 organizations working on this issue

Nutrition Policy #2

Policy strategies to increase access to healthy foods. (Example: zoning for farmers' markets, community gardens, and open space.)

14 organizations working on this issue

Evidence-Base for Obesity Prevention



Healthy Policies → Healthy Environments → Healthy Behaviors → Healthy People

Evidence-Base for Obesity Prevention



www.thecommunityguide.org

EAT SMART MOVE MORE NORTH CAROLINA Policy Strategy Platform



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General Action: A description of recommended action that can be taken to advance the strategy through organizational policy change at a state or local level.

Legislative Action: A description of legislative action that can be taken to advance the policy strategy at a state level.

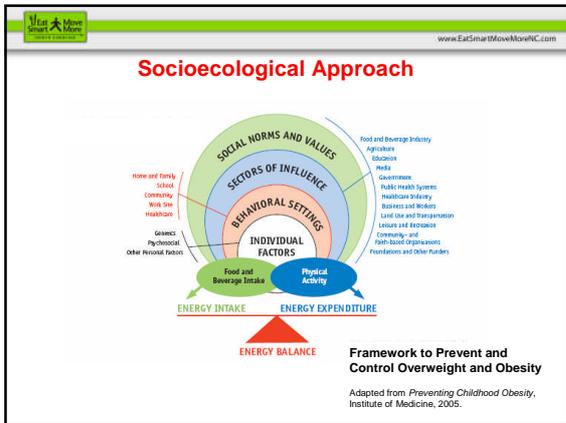
Cost: A summary of any costs identified by the task forces, coalitions or organizations who recommended the strategy.

Sources: A listing of the key task forces, coalitions and organizations that have recommended the policy strategy in recent reports.

Evidence: References to key evidence sources in support of the efficacy of the strategy.

Current Status: Current legislative status of the policy recommendation, if applicable. To be expanded in the future to include status of other types of policy change.

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Who and what will fix this problem?

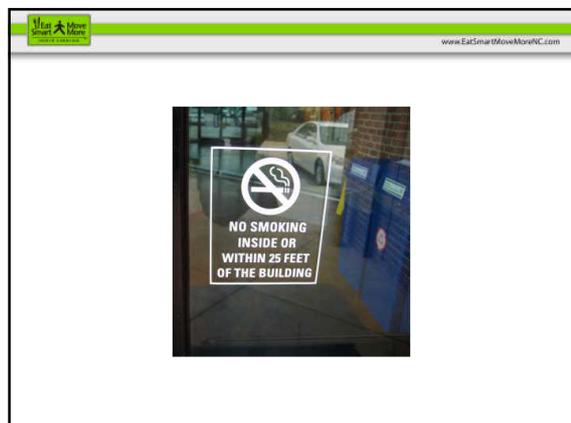
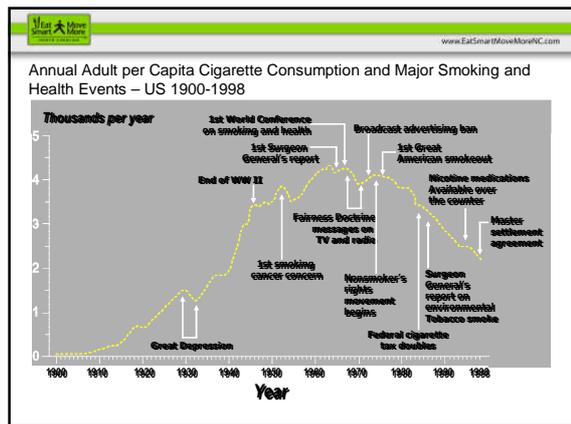
- Government?
- Policy makers?
- Medical community?
- Schools?
- Educators?
- Food industry?

YES

Discovery of knowledge...not enough
Doing the right thing...not enough

If you want more evidence-based practice you need more practice-based evidence.
Dr. Larry Green

Bridge the gap between research and practice.



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Eat Smart Move More
Community Grants

Celebrating 10 years of success!

11 rounds of funding 2000-2010

169 Grant projects funded

\$1,941,660 distributed

Counties Awarded Community Grants

Counties awarded for 2009 - 2010

Counties awarded from 2000 - 2008

169 grants awarded since 2000 - total funding to counties over \$1.94 M

Funding provided by federal funds from the CDC Obesity Grant and state funds from the Justice Warren Heart Disease and Stroke Prevention Task Force.

Start-up funding for 14 Eat Smart, Move More Coalitions, 9 are still active

78 Current ESMM Coalitions representing 77 counties

11 Current Coalitions received ESMM grant start-up funding

3 Coalitions that received ESMM start-up no longer exist

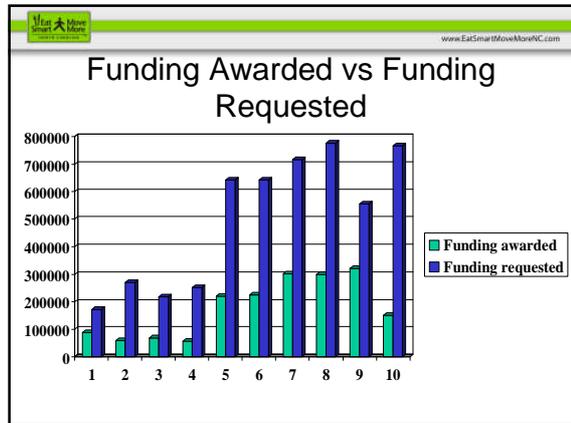
Granville County
Greenway Master Plan

Buncombe's 2001-2002 grant project still going strong!

- 2001 – Grant for \$9019 to change Worksite policies for employees to “Walkabout”
- 2007 – local businesses pooled resources to increase opportunities for staff
- 2009 – over 24 worksites, 400 participants, name changed to “Moveabout”

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Rockingham Co. - local non-profit trust established a school wellness grant to continue school gardens

NORTH CAROLINA

Childhood Obesity Prevention Demonstration Project

Community Approach to Preventing Obesity

- Multi-level, multi-sector interventions
- Evidence-based or promising practices
- Environment and policy change
- Community partnerships**, including non-traditional partners

Example: "Shape Up Somerville"

Background

Purpose:
To reduce rates of childhood overweight and obesity



- \$1.9 million (non-recurring) state funding
- 2008-09 fiscal year (8 months to implement)
- 5 counties selected through competitive application process
- 8 required components; several optional
- UNC Chapel Hill evaluation of the project

Childhood Obesity Prevention Demonstration Project Grants 2008-09



Grants for \$380,000 each to:

- Henderson County
- Watauga County/Appalachian District
- Cabarrus Health Alliance
- Moore County
- Dare County

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Required Components

- Community Partnership Development
- Bicycle/Pedestrian Master Plan Implementation
- Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC)
- NCAAHPERD's In-School Prevention of Obesity and Disease (ISPOD) Initiative

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Required Components (cont'd)

- WakeMed ENERGIZE! Program
- Clinical Pediatric Obesity Tools and Training for Medical Practices
- Hospital Worksite Wellness
- Health Communication/Social Marketing Campaign

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Optional Components

- Other Coordinated School Health - School Worksite Wellness
- Farmers Markets'/ Farm Stands
- Faith Community Intervention

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Evaluation: 4-Tiered Approach

Identify success, challenges, lessons learned, and recommendations for implementing similar community-based programs

UNC
CENTER FOR HEALTH PROMOTION AND DISEASE PREVENTION

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Results in Just Four Months*!

- 5.7% of residents improved what they ate. (Pre=27.3%, Post=33.0%)
- 3.3% of residents started exercising more. (Pre=16.2%, Post=19.5%)
- 4.5% more residents had heard of their county's Partnership. (Pre=19.0%, Post=23.5%)
- 5.7% more residents had heard of the Eat Smart, Move More NC movement. (Pre=18.8%, Post=24.5%)

* Statistically significant finding from a county-wide Health Communication Survey at pre- and post-test, N=4,000.

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Project highlights

- 13,801 employee's impacted by policies
- 4000 people responded to project survey
- 2400 children, 42 participating childcare centers
- 825 members, 9 faith communities impacted
- 180 teachers trained
- 133 health care workers trained
- 14 children reduced their triglycerides to normal
- 6 miles of new sidewalks / greenways built or planned
- 1 statewide movement

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Lessons Learned

Instrumental to success:

- Strong County Coordinators
- Ability to adapt project to fit the local context
- Partnerships ability to leverage resources

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So if this works ...

Why do we still have a problem?

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...the fire is too big for buckets!



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NORTH CAROLINA

Policy Strategy Platform

November 3, 2010

The North Carolina Health Division is pleased to announce the platform document, *Policy Strategy Platform*, which outlines the key policy areas that will guide the state's efforts to improve the health of North Carolina residents. This document is a key component of the state's overall strategy to reduce the burden of chronic disease and improve the health of the state's residents.

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1 | November 3, 2010 | Policy Strategy Platform

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