

Eat Smart Move More North Carolina: Updating Policy Strategy Platform for 2015

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Abstract

North Carolina ranks 25th in adult obesity and 18th in childhood obesity in the nation. Eat Smart Move More North Carolina (ESMMNC) is a state-level organization focused on healthy lifestyle initiatives and education. The ESMMNC mission 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”. In 2012, the ESMMNC developed a policy strategy platform, an important document to provide a link between current legislative updates and its NC plan for obesity prevention in North Carolina. The purpose of this public service project was to update the ESMMNC 2012 policy strategy platform for 2015. These updates reflect recommended changes made in the North Carolina Plan and Healthy Plan NC 2020, another ESMMNC document. New strategies were added from the current ESMMNC plan which included state legislative actions. The final product is an updated ESMMNC policy strategies platform (2015), which will be available on the ESMMNC website. This document will provide quick access to current information on obesity prevention policy strategies. This public service project provided insights into the challenges associated with keeping advocates and other health promoters updated on policy changes, as well as the amount of work that is involved in providing the public with this information.

Key Words: obesity, education, policy, legislative action

Origins of the Project

More than two-thirds of adults age 20 years or older in the United States are considered to be overweight or obese.¹ Roughly one-third of children and adolescents under 19 are considered overweight or obese in the United States as of 2012.² Obesity is a leading cause of death from preventable non-communicable diseases such as type 2 diabetes, certain cancers, stroke and heart disease.^{3,4} The increased costs associated with obesity and obesity related illnesses was estimated at \$663 billion a year in the United States⁵ following closely behind smoking and war as global financial burdens.

North Carolina is rated 25th in adult obesity with 29.4% of adults considered obese.⁶ The obesity rate of children 10-17 years old in North Carolina is 16.1%.⁶ The Behavioral Risk Factor System Survey (BRFSS) of 2009 reported that only 21% of all adults eat the recommended 5 servings of fruits and vegetables a day and less than 50% of adults participate in the recommended amount of daily physical activity.^{4,7} Chronic diseases such as cancer, heart disease, and stroke account for 60% of all deaths in the state of North Carolina.⁷

A diet rich in fruits, vegetables and whole grains in addition to a lifestyle with added physical exercise has been shown to lower the risk for non-communicable diseases that are associated with obesity.⁸ Through policy change at state level and increased attention at a community level, these health benefits are becoming increasingly apparent. Obesity rates have started to slowly decline, but the need for improvement is still very great. One important way to continue encouraging communities and individuals to improve dietary and exercise habits is to provide them with up-to-date policy and legislative actions. With dietary trends and legislative action constantly changing, it is vital that state level policies be up to date.

Eat Smart Move More North Carolina (ESMMNC) is a statewide movement that encourages individuals and communities through education and learning to increase activity and make healthier food choices. The community organization has a mission 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.”⁹ ESMMNC is funded by Blue Cross Blue Shield of North Carolina Foundation, The Duke Endowment, John Rex endowment and the Kate B. Reynolds Foundation.¹⁰ Through continued collaboration and contribution with these funders, ESMMNC is working towards “A North Carolina where healthy eating and active living are the norm, rather than the exception.”⁹

ESMMNC has a 32 page document called NC Obesity Prevention Plan 2013-2020 with the motto of “Making the Healthy Choice, the Easy Choice”.¹¹ The document offers goals and objectives that are easily achieved and implemented in many settings. The message is clear that in order to improve the health of North Carolina, all aspects of community life need to be addressed. The 2013-2020 document offers simple to follow suggestions that can be implemented in individual, family and community settings and includes state level legislative actions in place to promote improved health.

The ESMMNC website includes a Policy Strategy Platform that provides quick links and information about the 2013-2020 NC Plan including legislative updates, and recommendations

made by NC Task Forces from previous years.¹² The Policy Strategy Platform itself is a condensed document that includes brief descriptions of the 8 strategies provided in the 2013-2020 NC Plan. The overall purpose of this project was to update the Policy Strategy Platform from 2012 and ensure that the Policy Strategy Platform 2015 will reflect the ESMMNC 2013-2020 NC Plan. The Policy Strategy Platform 2015 will be available through the ESMMNC website and can be read as a condensed document that highlights strategies and suggestions for improved community health from the 2013-2020 NC Plan.

Methods and Work Undertaken

My role in this project was to update and revise the Eat Smart Move More North Carolina Policy Platform Strategy 2012. The 2012 policy platform was 19 pages total and included information from ESMMNC goals and mission statement to state legislative actions in the past few years. The new Policy Platform should reflect the ESMMNC Plan, in addition to state legislative changes and recommendations from other sources such as the North Carolina Institute of Medicine Task Force (NCIOM) and the Robert Wood Johnson Foundation.

The first item of work was to determine what the ESMMNC member committee was expecting as far as results of this revision. From the beginning of the 2015 spring semester I was in contact with Dr. David Gardner of ESMMNC and Dr. Ameena Batada communicating on the expectations and a rough timeline on when the committee would like to see the initial updates. I was quickly provided with an outline to assist me in taking the proper steps in my revision process and given suggestions on what the ESMMNC committee was looking for in the new updated policy. At this point in the project I was made aware that the ESMMNC executive committee in addition to Dr. Batada and Dr. Gardener were available if I needed any further guidance. Before beginning the revisions I meet with Dr. Batada to discuss different websites that I could use to update the state legislative actions. Dr. Batada was very helpful in guiding me through sites such as North Carolina General Assembly and NC Legislative Task Forces.

The best place to start within the document was in the methodology section of the old policy. I knew that I would be using the same previously-used sources in the document and felt that I should double check each site to ensure that the information was still current. The majority of these sites were located on the NC Institute of Medicine Task Force (NCIOM) page and most, but not all were still posting the same information. I simply updated the years that needed changing and changed any wording to reflect the current Task Force recommendations or titles.

Also in the Methodology section was a paragraph that discussed the order of strategies within the policy and how that order was established by using the CDC recommendations. The new updated policy should reflect and align with the NC Plan rather than the CDC recommendations according to the outline provided to me. I deleted the information about the CDC and placed current information about the NC Plan in its place, but I did leave the language regarding the exact order of the different strategies within the policy platform the same. I felt that it was important that the readers of this policy still understand that the order of certain strategies within the document do not reflect a certain level of importance from one strategy to the next.

The next step in the process was to edit the background in the policy platform section of the policy to reflect current information. These changes consisted of changing the year on the policy to 2015 and also changing the wording in the background information to reflect the current information on the ESMMNC website. The main changes were to ensure that the language was in-line with ESMMNC New Plan and Healthy People 2013-2020. The methods that I used to make these initial changes to the background was to go to the ESMMNC website and read exactly what the NC Plan said and to use similar language in the background section of the policy.

The Definitions section of the policy was a very simple update. I simply eliminated the section of cost and left the remaining language the same. After the definitions section I moved on to the Summary of State Legislation which included information that was incomplete in regards to dates on the ESMMNC website. I included the updated policy platform 2015 as an additional resource. The next section I addressed was the ESMMNC Leadership Team Executive Committee which I updated according to the ESMMNC website. Since the previous policy the Executive committee had had a change in the Chair person and a number of other members had been added.

The main portion of the policy is 8 different strategy sections that needed to be updated to reflect both current legislative action, but also to align with and reflect the ESMMNC Plan. The method that I used to update each strategy was to visit the NC Plan on the ESMMNC website and replace the legislative action with the new updated version and then to provide a local/organizational action that reflects the action and provide a source and support section. Each strategy section was different and had anywhere from 1 to 4 different legislative actions within the NC Plan. For each legislative action, I chose a local/organizational action from the NC Plan that I felt lined up with the action the closest. This process was the longest of the entire update because for each change that was made and inserted I had to then find a reputable source that lined up with the ESMMNC Plan and provide an example of how the action was reflected in local action organizations. The sources I used were those that had been suggested to me at the onset of this project such as the North Carolina Institute of Medicine (NCIOM) Task Force on Preventing Childhood Obesity, the Legislative Task Force on Childhood Obesity and the Robert Wood Johnson Foundation, just to name a few.

The ESMMNC committee members received an initial copy of the policy platform at the time of the conference call and requested that some additional work be included in the final document. At the time of writing this paper, I am in the process of finalizing the second draft of the policy platform update. After the phone conference I began looking into sources that include information at a national level that lines up with the ESMMNC Plan. The committee members suggested using information from the Robert Wood Johnson Foundation website in addition to any other national organization that I felt reflected the mission of the policy document. In addition to including information at a national level, I am also in the process of adding other state organizations as examples of success stories in the fight against obesity.

Ties to Academia

As a Health and Wellness major I have developed knowledge and skills that enable me to assist with a project such as this policy change. Working with ESMMNC has encouraged me to use a variety of different educational information I have acquired at UNC Asheville. This policy update has required me to use information from my previous classes in Food Politics and Nutrition Policy, Nutrition, Health Communications, Research Methods, and Pathophysiology.

I have learned more about the connections made through community outreach programs and how policy updates are more than just changing words on the paper. From my class in Health Communications, this lesson is clear - the way to encourage communities to make important changes to their health is to provide examples and easy lessons on how to implement those changes. The ESMMNC policy update includes specific strategies to emphasize the process of encouraging a community level change and recognizes that in order to promote healthy eating and exercise it is important to understand the target audience. Through examples and evidence-based research, the policy update is able to provide clear and concise evidence as to why the recommended eating and exercise habits are beneficial for a healthy life.

From the time I was very young, I have had a passion for food. I began my educational journey with attending culinary school and learning about many new foods and different ways to prepare them. Through my food education, I came to realize the importance of not just food for health, but also nutrition for health and how the two are tied together. ESMMNC is a community organization that realizes the importance of food and not just for sustenance, but also the whole body benefits of eating nutritiously. I feel that my culinary knowledge in combination with my love of nutrition has greatly benefited me in regards to working with the ESMMNC partner to advocate for improved nutrition in all communities.

I have had the great opportunity of managing the student teaching kitchen on campus and through that I have experienced first-hand how new knowledge about food can alter an individual's perspectives and lifestyle choices. Throughout some of the cooking classes that I have taught or co-taught, many students express their previous lack of knowledge surrounding food and that reading about new techniques and ideas has encouraged them to try new things at home. I feel that through this policy update, people can read about different suggestions made through state legislative action and have examples provided to them on how to better improve their eating and exercise habits. This is similar to the effects of student learning through hands on cooking classes. The process of assisting students to learn new things has broadened my views on how to promote healthy change in people's lives and encourage individuals to try new things.

The ESMMNC policy update is not just a policy about what communities should be doing, but it is an extension of other studies in regards to obesity and its overarching effects on a person's health and wellbeing. While the Policy Platform includes a variety of strategies from their larger 2013-2020 Plan, there are many more strategies not included in this platform. The inclusion of certain strategies pulled directly from the NC Plan are meant to provide a base on which communities and /or individuals can build off of. This policy is a combination of important information on the dimensions of obesity and the impact that obesity has on an entire community

of people not just the individuals. Through my previous classes in Pathophysiology and Nutrition, I understand that when making suggestions in regards to diet and exercise, it is important to be able to tie all of the information together and provide a complete picture of why these changes are necessary. The link between a healthy diet and lowered risk of heart disease is a great motivator to encourage communities to make different choices. ESMMNC is encouraging communities to pick healthier foods and to increase their daily exercise, but they are also providing the communities with information as to why these changes are important to that community. With the use of statistics stating the increase in obesity levels in North Carolina, the growing number of people suffering from cardiovascular disease as a direct result of their diet and exercise choices and the evidence that by making healthier food choices these risks decrease. ESMMNC is also encouraging community advocacy and working together to increase health by recognizing that obesity is not a disease that only affects one community, but that it affects everyone. By creating improved policy on healthier diet and exercise choices, ESMMNC is enabling these communities to work together to fight obesity and to improve healthy food access and exercise knowledge.

Working with ESMMNC really allowed me to tie the knowledge that I received from my Food Policy and Nutrition Politics course. I recognize that knowledge pertaining to health and food has many different layers and also many different barriers when looking into trying new things. The idea that not all communities have equal access to all types of food is a major barrier and one that is not easily broken down. Not only does food access pertain to financial stability and immediate access, but also to education on purchasing healthy foods and how to prepare them. This policy update touches on increased efforts at the state legislative level regarding access to healthier foods with the increased number of farmers markets in communities and also through improved acceptance of S.N.A.P. benefits for purchasing foods at those local markets.

Challenges Faced and Responses to those Challenges

The updating of this policy is very important in regards to providing the public with an easy straight forward guide to different legislative changes taking place, the problem I encountered was how the final document should be formatted. The outline that I was provided with at the onset of the project gave directions that were fairly clear for most sections of the update, but a bit confusing for other parts because there wasn't always an example provided. I found myself reading over the outline and the NC Plan in order to discern what was expected of me and to figure out what should be included in the new update. I ran into the problem of not being sure how to complete the updates and from where I was to gather information. I met on several occasions with Dr. Batada and also with Dr. Gardner to facilitate clearing up these questions for me. Dr. Batada and I worked very hard together on several sections trying to understand exactly what was to be changed and how the committee was expecting the final product to read.

I have learned a great deal about researching policy updates and the writing styles needed for these updates. I had no previous experience with policy updates or how to look into subjects like state legislative action. I struggled on multiple occasions with understanding the language of legislative action and reading government policy in regards to subjects like diet and exercise guidelines. While I felt that I was knowledgeable enough in these areas at the onset of this project, I quickly realized that I had a lot to learn. I spent many hours reading through state

guidelines and legislative action before finally accepting that I did not understand what I was supposed to be writing about and reached out to Dr. Gardner for assistance. With Dr. Gardner's help, I was able to focus in on specific legislative changes that would be beneficial to include in the final policy update.

I was very nervous about my first conference call with the ESMMNC executive committee members and also unsure what I was expected to say about my work on the policy. I felt unsure at the time about exactly what the committee members were expecting as a final result and had not yet made a lot of headway in the actual update. I did not feel that I was bringing very much information to the conference call and was a little embarrassed by my overall lack of knowledge regarding policy changes and updates. Dr. Batada was with me during the conference call and was very supportive and understanding. She answered any questions that the committee addressed to me that I was unable to answer. Together Dr. Batada and I asked the committee to clarify some of the parts that were in the outline. At a certain point the committee members seem to be unsure of what changes needed to be made in the policy platform and why certain things were being added. For example, I was unsure where I was supposed to find examples to include in the policy to show legislative actions being used. The committee also debated whether examples were even necessary, but in the end decided that I should include them and the committee would decide at a later date if they were necessary.

Results

The 2012 Policy Strategy Platform contained a total of 22 different sub headings below 4 main strategy sections. Each of the 22 sections contained its own local/organizational strategy section, a corresponding legislative action, cost for the action and a link to the NC Obesity Prevention Plan Goals. The updated 2015 Policy Strategy Platform has consolidated the sections to 8 community applicable strategies, which are as follows:

- Health care
- Child care
- Schools
- Colleges and universities
- Work sites
- Faith-based organizations and other community organizations
- Local government
- Food and beverage industry

Each of these strategies contain state legislative action and local/organizational actions, which aim to encourage individuals and communities to adopt one or all of the six core behaviors that assist with reducing body weight. The six core behaviors are:

- Increase breastfeeding
- Reduce consumption of energy-dense foods
- Increase consumption of fruits and vegetables
- Increase physical activity
- Decrease consumption of sugar-sweetened beverages
- Reduce screen time

The 22 sections from the 2012 Policy Strategy Platform are still included within the updated 2015 version, but they have been consolidated under one or more of the 8 strategies. For example, the 2012 document contained a strategy section labeled as “*Strategies to Promote the Availability of Affordable Healthy Food and Beverage Choices*” under this strategy section were 10 different sections. The different sections include the following:

- Expand the availability of farmers markets and farm stands at worksites and faith based organizations
- Expand the capacity of farmers markets to accept electronic bank transfer (EBT) cards
- Statewide nutrition standards, test strategies to deliver healthy meals in middle and high schools and ensure that all foods and beverage available in school are healthy
- Expand and enhance the supplemental assistance (SNAP) education
- State matching funds for U.S. department of agriculture (USDA) reimbursement school meal program
- Promote menu labeling to make nutrition information available to consumers
- Increase the availability of obesity screening and counseling
- Expand the community care of North Carolina (CCNC) childhood obesity prevention initiative
- Farm to school programs

Several of the above categories were consolidated under one or more of the 8 main strategies in the 2015 updated platform. The revised platform includes easy to find sections, such as school strategies, that include links about statewide nutrition standards in middle and high schools or, farm to school programs.

The purpose of this project was to continue addressing the healthy weight management goals of NC through the individual, family and the community, while simplifying the platform that conveyed this information. The updated Policy Strategy Platform contains information pertaining to how these core behaviors can impact individuals and communities, in an easy to follow format.

In addition to simplifying the strategy sections, I also included any updated legislative actions since 2012. Under the section *Successes: Policies Passed in Support of Eating Smart and Moving More* I added the following updated legislative actions:

SB402 (Session Law 2013-360) Appropriations Act of 2013. An act to make base budget appropriations for current operations of state departments, institutions and agencies, and for other purposes. [Note: The 2013 State Budget included a provision to sunset the Sustainable Local Food Policy Council on July 31, 2013 (Page 187).]

HB57 /SB193 (Session Law 2013-235) Child Nutrition Program Solvency and Support. An act (1) to prohibit local school administrative units from assessing indirect costs to a child nutrition program unless the program is financially solvent and (2) to promote optimal pricing for child nutrition program foods and supplies, as recommended by the Joint Legislative Program Evaluation Oversight Committee based on recommendations from the program division.

Sustainability

ESMMNC is dependent on individuals such as myself or other students to show an interest in keeping the material provided to the public up to date. Hopefully this will be an ongoing project that will receive student editing and updating at least once a year. I think a great addition in the next update would be added information regarding food access in North Carolina. This could include information on both food deserts and food swamps. The effect of both of these environments on the health and wellness of North Carolinians is relevant to what ESMMNC is trying to accomplish. With the subject of health being the forefront of concern nationwide, specifically the obesity epidemic, I believe that documents such as this one will remain valuable resources.

Conclusion

The updating of the ESMMNC Policy Strategy Platform provides individuals, families, and communities a current tool to continue promotion of healthy lifestyle changes and initiatives. Communities rely on policies such as this to provide them with current knowledge and support on how to better their lives and others. By continuing to provide tools such as this update, ESMMNC is continuing to assist the people of NC with improving their eating habits, and increasing their knowledge of exercise and food as a tool to fight obesity. Hopefully the use of this knowledge will assist with a decrease in obesity and obesity related disease in NC and elsewhere.

This project challenged me on multiple levels regarding both my inexperience with policy change and communication between the different parties involved in the project. Throughout the entire course of this project I have felt great support from both my faculty advisor and also the community member with whom I worked closely. I believe that when multiple people are involved with one project often times the line of communication can become blurred when expressing what is expected as an end result.

In addition to learning a great deal more about the work that ESMMNC does to enhance and support communities in North Carolina, I have also learned a lot about the importance of policy. Policies are an important part of each community because they provide the base for change. Without these policies, communities would lack support to initiate changes needed to promote health. The use of policy and then policy change provides a building block or a starting point for both grassroots changes and legislative action. Both these forms of change are important to create healthier communities.

References

1. National Institute of Diabetes and Digestive and Kidney Diseases. *Overweight and Obesity Statistics*. National Institutes of Health (2012) Retrieved from <http://www.niddk.nih.gov/health-information/health-statistics/Pages/overweight-obesity-statistics.aspx>
2. Centers for Disease Control and Prevention. *Adolescent and School Health: Childhood Obesity Statistics*. (2014) Retrieved from <http://www.cdc.gov/healthyyouth/obesity/facts.htm>
3. Centers for Disease Control and Prevention. *Overweight and Obesity: Adult Obesity Facts*. (2014) Retrieved from <http://www.cdc.gov/obesity/data/adult.html>
4. North Carolina Department of Health and Human Services: *Health Profile of North Carolinians: 2011 Update*. (2011) Retrieved from <http://www.schs.state.nc.us/>
5. McKinsey Global Institute. *Overcoming obesity: An initial economic analysis*. (2014) Retrieved from http://www.mckinsey.com/~media/McKinsey/dotcom/Insights/Economic%20Studies/How%20the%20world%20could%20better%20fight%20obesity/MGI_Overcoming_obesity_Full_report.aspx
6. Trust for America's Health and Robert Wood Johnson Foundation. *The State of Obesity*. (2014) Retrieved from <http://stateofobesity.org/states/nc/>
7. BRFSS, Behavioral Risk Factor Surveillance System, <http://www.cdc.gov/brfss/>
8. United States Department of Agriculture, Center for Nutrition Policy and Promotion: *Dietary Guidelines for Americans*. (2010) Retrieved from <http://www.cnpp.usda.gov/DietaryGuidelines>
9. <http://www.eatsmartmovemorenc.com/AboutUs/TheMovement.html>
10. <http://www.eatsmartmovemorenc.com/Funding/Funders.html>
11. <http://www.eatsmartmovemorenc.com/ESMMPlan/ESMMPlan.html>
12. <http://www.eatsmartmovemorenc.com/PolicyStrategy/PolicyStrategy.html>