



# Community Health Action Plan 2011

*Designed to address Community Health Assessment priorities and to meet Healthy Carolinians Re/Certification requirements*

**County: Mecklenburg    Partnership, if applicable: Mecklenburg Healthy Carolinians    Period Covered: 2011-2013**

## LOCAL PRIORITY ISSUE

- Priority issue: Preventing Chronic Disease through Healthy Behaviors: Reducing Obesity
- Was this issue identified as a priority in your county's most recent CHA?    X Yes    \_\_\_ No

**LOCAL COMMUNITY OBJECTIVE**    Please check one:    \_\_\_ New    X Ongoing (was addressed in previous Action Plan)

- By (year): 2013
- Objective (specific, measurable, achievable, realistic, time-lined change in health status of population): Reduce the rate of obesity and overweight among adults and high school students in Mecklenburg County
- Original Baseline: Adult obesity and overweight: 60%; Youth (grades 9-12) obesity and overweight: 27%
- Date and source of original baseline data: Adults: BRFSS, 2007; Youth: YRBS, 2007
- Updated information (For continuing objective only): Adult obesity and overweight: 65%; Youth (grades 9-12) overweight and obesity: 29%
- Date and source of updated information: Adults: BRFSS, 2009; Youth: YRBS 2009

## POPULATION(S)

- Describe the local population(s) experiencing disparities related to this local community objective: Adults: African Americans, males; Youth: African Americans
- Total number of persons in the local disparity population(s): African Americans: 260,830; Males: 447,624
- Number you plan to reach with the interventions in this action plan: Entire county: 913,639 (because prevention of obesity starts early and all residents can benefit from improved nutrition and physical activity, most interventions listed below are intended to reach the whole community)

## HEALTHY NC 2020 FOCUS AREA ADDRESSED

Check **one** Healthy NC 2020 focus area: (Which objective below most closely aligns with your local community objective?)

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Tobacco Use                                | <input type="checkbox"/> Social Determinants of Health (Poverty, Education, Housing) | <input type="checkbox"/> Infectious Diseases/ Food-Borne Illness                               |
| <input checked="" type="checkbox"/> Physical Activity and Nutrition | <input type="checkbox"/> Maternal and Infant Health                                  | <input type="checkbox"/> Chronic Disease (Diabetes, Colorectal Cancer, Cardiovascular Disease) |
| <input type="checkbox"/> Substance Abuse                            | <input type="checkbox"/> Injury  | <input type="checkbox"/> Cross-cutting (Life Expectancy, Uninsured, Adult Obesity)             |
| <input type="checkbox"/> STDs/Unintended Pregnancy                  | <input type="checkbox"/> Mental Health   |  |
| <input type="checkbox"/> Environmental Health                       | <input type="checkbox"/> Oral Health   |  |

## HEALTHY NC 2020 Objective(s) that most closely match your local community objective include:

Increase the percentage of high school students who are neither overweight nor obese.

Increase the percentage of adults who are neither overweight nor obese.

## RESEARCH RE: WHAT HAS WORKED ELSEWHERE\*

List the 3-5 evidence-based interventions (proven to effectively address this priority issue) that seem the most suitable for your community and/or target group. \*Training and information are available from DPH. Contact your regional consultant about how to access them.

Intervention	Describe the evidence of effectiveness (type of evaluation, outcomes)	Source
Take 10	School based program that integrates academic learning objectives with physical activity. Through this program children have been shown to meet daily physical activity requirements and make small, but meaningful lifestyle changes.	<a href="http://www.take10.net/whatistake10.asp">http://www.take10.net/whatistake10.asp</a>
NC Walks to School	Toolkit for schools to implement walk to school programs and evaluate effectiveness. Evaluation of programs show that children have increased their levels of physical activity increased beyond the particular walk events.	<a href="http://eatSMARTmoveMoreNC.com/NCWalksToSchool/NCWalksToSchool.html">http://eatSMARTmoveMoreNC.com/NCWalksToSchool/NCWalksToSchool.html</a>
Lighten Up Iowa	5 month physical activity and nutrition challenge for community members. Participants were given educational materials at weekly meetings over the course of 8 weeks. Over 12,000 people participated and lost 23.5 tons of weight and covered 2.6 million miles in physical activity.	<a href="http://activelivingbydesign.org/sites/default/files/iowa.pdf">http://activelivingbydesign.org/sites/default/files/iowa.pdf</a>

(Insert rows as needed)

#### WHAT INTERVENTIONS ARE ALREADY ADDRESSING THIS ISSUE IN YOUR COMMUNITY?

Are any interventions/organizations currently addressing this issue? Yes \_\_\_ No \_\_\_ If so, please list below.

Intervention	Lead Agency	Progress to Date
Safe Routes to School	Mecklenburg County Health Department	See Below

(Insert rows as needed)

#### WHAT RELEVANT COMMUNITY STRENGTHS AND ASSETS MIGHT HELP ADDRESS THIS PRIORITY ISSUE?

Community, neighborhood, and/or demographic group	Individual, civic group, organization, business, facility, etc. connected to this group	How this asset might help
Healthy Weight, Healthy Child Initiative	Healthy Carolinians, Mecklenburg County Health Department, Carolinas Medical Centers, UNC Charlotte, Charlotte Mecklenburg Schools, Board of County Commissioners, Mayor's office, Charlotte Observer	Network of individuals with resources committed to implementing The Blueprint for a Healthier Generation, 2020

The Healthy Weight, Healthy Child Initiative's publication ***Blueprint for a Healthier Generation, 2020: Interventions for Promoting Active Living & Supporting Healthy Eating for Mecklenburg County Youth*** represents the most comprehensive action plan our community has ever created. This "blueprint" is the end-product of a year-long planning grant from the Kate B. Reynolds Charitable Trust. This planning process began with a small leadership team with representatives from Charlotte Mecklenburg Schools, Mecklenburg Healthy Carolinians, the Mecklenburg County Health Department, and Carolinas HealthCare System. The leadership team then built a steering committee with representatives from the following domains: Academia, Business, Community Based Organization, Faith Community, Government/Elected Officials, Health Care Providers, Media, Pre-School Aged Organizations, Race/Ethnicity Based Organizations, and School Aged Organizations. In addition, ***The Blueprint*** was officially endorsed by the county Health Director, a county Commissioner, the Mayor, and the Superintendent of CMS.

The plan is comprised of 13 goals addressing active living and healthy eating. These goals are 4 tiered, targeting various levels from interventions to policies. The 4 tiers are (1) Environmental Policy Change (change at county or city level,

laws/regulations/ordinances), (2) Institutional Policy Change (change at institutional level, schools, hospitals, etc.), (3) Public Awareness (target messaging), (4) Targeted Community/Environmental Programs (traditional interventions/programs/activities within specific communities or with specific populations).

The 13 goals are as follows:

**Promoting Active Living**

- Goal 1: Affordable Options for Physical Activity
- Goal 2: Built Environment and Resources for Physical Activity
- Goal 3: Community and Neighborhood Safety
- Goal 4: Public Awareness and Education about Physical Activity
- Goal 5: School, Preschool, and Child Care Environments for Physical Activity
- Goal 6: Sedentary Lifestyles
- Goal 7: Transportation

**Supporting Healthy Eating**

- Goal 8: Affordable Options for Healthy Eating
- Goal 9: Breastfeeding
- Goal 10: Built Environment and Resources for Healthy Eating
- Goal 11: Public Awareness and Education about Healthy Eating
- Goal 12: School, Preschool, and Child Care Environments for Healthy Eating
- Goal 13: Societal Norms and Pressures about Healthy Eating

*The Blueprint* details and prioritizes specific strategies for achieving each of these 13 goals; a total of 29 strategies are listed in the plan. These goals and strategies were developed with a community based participatory research approach. The project coordinator conducted several focus groups with various populations, conducted key informant interviews, and also conducted a literature review of evidence-based practices that promote active living and support healthy eating.

Mecklenburg Healthy Carolinians, among many other community organizations, has adopted *The Blueprint* as our “official action plan for addressing the prevention of chronic disease/reducing obesity.

To access the full plan, including executive summary, visit the link below:

[http://charmec.org/mecklenburg/county/HealthDepartment/hwhc/Documents/HWHC\\_Blueprint.pdf](http://charmec.org/mecklenburg/county/HealthDepartment/hwhc/Documents/HWHC_Blueprint.pdf)

The information in the following chart represents a sample of strategies listed in *The Blueprint*

INTERVENTIONS: SETTING, & TIMEFRAME	COMMUNITY PARTNERS' Roles and Responsibilities	PLAN HOW YOU WILL EVALUATE EFFECTIVENESS
<b>INTERVENTIONS SPECIFICALLY TARGETING HEALTH DISPARITIES</b>		
<p><b>Intervention:</b> Hispanos Saludables</p> <p>Intervention: __ new __X__ ongoing __ completed</p> <p>Setting: Community Centers, Churches</p> <p>Start Date – End Date (mm/yy): Sept 2009 – Sept 2011</p> <p>Level of Intervention - change in: __X__ Individuals __ Policy &amp;/or Environment</p>	<p>Lead Agency: Elizabeth Family Medicine/ Mecklenburg Area Partnership for Primary Care Research (MAPPR)</p> <p>Role: Fund, and evaluate the Hispanos Saludables (HS) program</p> <p>Partners: Meck. Co. Health Dept. Role: Deliver the HS curriculum which addresses physical activity, nutrition, and mental health</p> <p>Include how you're marketing the intervention:</p>	<p><b>1. Quantify what you will do:</b> (# classes &amp; participants, policy change, built environment change, etc.)</p> <p>This is a research study funded by Robert Wood Johnson to deliver an intervention intended to reduce rates of obesity among the Hispanic population. Groups of 20 individuals are recruited to participate in the HS program where they learn culturally appropriate nutrition, participate in physical activity and learn mental wellness/stress reduction techniques. Participants BMI, blood pressure, cholesterol, and glucose are tested pre intervention, post intervention, and at 3 months following intervention.</p> <p><b>2. Expected outcomes: Explain how this will help reach the local community objective</b> (what evidence do you have that this intervention will get you there?)</p> <p>Data is currently being collected and</p>

		analyzed but preliminary results suggest that participants are eating more fruits and vegetables, less saturated fats, and participating in more regular physical activity.
<p><b>Intervention:</b> Trips for Kids</p> <p>Intervention:  <input type="checkbox"/> new <input checked="" type="checkbox"/> ongoing <input type="checkbox"/> completed</p> <p>Setting: various sites throughout the county</p> <p>Start Date – End Date (mm/yy):  1999 – ongoing</p> <p>Level of Intervention - change in:  <input checked="" type="checkbox"/> Individuals <input type="checkbox"/> Policy &amp;/or Environment</p>	<p>Lead Agency: Trips for Kids  Role: Run and fund TFK program, promote, collect bicycles, hold training sessions, organize events.</p> <p>Partner: Various Community Service Organizations  Role: Promote Program, refer kids  Partner: Charlotte Mecklenburg Police Department  Role: Establish community relationships in areas where TFK kids live  Partner: Cycling Clubs  Role: Provide education and organize trips  Partner: Bike shops  Role: Donate supplies, hold repair clinics, educate kids on maintenance  Partner: Safe Kids  Role: Safety education, helmets</p> <p>Include how you're marketing the intervention:</p> <p>Referrals through other agencies, Police Athletic League, promotion at community cycling events, website, word of mouth, active solicitation</p>	<p><b>1. Quantify what you will do:</b> (# classes &amp; participants, policy change, built environment change, etc.)</p> <p>Trips for Kids is a program that reaches out to low-income and minority kids in the Charlotte Mecklenburg region. The purpose is to expose these kids to cycling as lifetime activity. Kids learn about using bikes as transportation, safety, rules of the road, and proper bicycle maintenance. After completing the TFK program, each child receives a bike and helmet free of charge.</p> <p><b>2. Expected outcomes:</b> Explain how this will help reach the local community objective (what evidence do you have that this intervention will get you there?)</p> <p>The overarching goals of TFK are to focus on fostering a sense of respect, teamwork, honesty, ability to overcome challenges, safety, community service, and healthy lifestyle among low-income, minority, and other underserved youth populations. TFK will encourage physical activity among under-served children in the county. Ultimately these kids will report increased levels of physical activity and ideally adopt a healthier lifestyle as they get older and engage in active transportation.</p>
<b>INDIVIDUAL CHANGE INTERVENTIONS</b>		
<p><b>Intervention:</b> Safe Routes to School</p> <p>Intervention:  <input type="checkbox"/> new <input checked="" type="checkbox"/> ongoing <input type="checkbox"/> completed</p> <p>Setting: CMS Schools</p> <p>Start Date – End Date (mm/yy):  2007 - ongoing</p>	<p>The lead agency is Mecklenburg County Health Department and it will work with schools to establish walking programs and set up pedestrian/cyclist safety assemblies</p> <p>List other agencies and what they plan to do:  CMS: promote walk days, dedicate time to walking, host assemblies  Charlotte Department of Transportation: Create walking maps, provide pedestrian/cyclist information  Safe Kids: Offer safety assemblies  Charlotte Mecklenburg Police Dept: Provide crossing guards, train crossing guards</p> <p>Include how you're marketing the intervention:</p> <p>Promotion among school staff, websites, press coverage, flyers, word of mouth, active solicitation of new schools</p>	<p><b>1. Quantify what you will do</b> (# classes, # participants, etc.)</p> <p>Coordinator works with schools (either through staff or parent contacts) to establish a walking/biking program. Programs begin with Walk to School Event and may grow to weekly or monthly events. Schools are encouraged to host a safety assembly to teach students the proper rules of the road for pedestrians, cyclists, and drivers. The ultimate goal is for the schools to adopt and sustain walking programs with their own staff and/or volunteers.</p> <p><b>2. Expected outcomes: Explain how this will help reach the local community objective (what evidence do you have that this intervention will get you there?)</b></p> <p>The long term goal is for walking and other forms of transportation to become normative behavior and established as part of a healthy lifestyle. Schools</p>

		conduct transportation surveys to determine how many children are walking to school. As an unintended consequence families may begin to embrace active transportation as well. This may be reflected in county BRFSS data (active transportation question).
<p><b>Intervention:</b> Fuel Pizza Field to Fork Program</p> <p>Intervention:  <input type="checkbox"/> new <input checked="" type="checkbox"/> ongoing <input type="checkbox"/> completed</p> <p>Setting: CMS Elementary Schools</p> <p>Start Date – End Date (mm/yy):  2009 – ongoing (Jan- June)</p>	<p>The lead agency is Mecklenburg County Fruit &amp; Vegetable Coalition and it will coordinate all meetings, events and promotions around the program</p> <p>List other agencies and what they plan to do:</p> <ul style="list-style-type: none"> <li>o MCHD – Provide staff, evaluate programs, develop media</li> <li>o Charlotte Green – gardening experts</li> <li>o Fuel Pizza Café – Field trip to restaurant</li> <li>o CMS Child Nutrition Services – work with school system</li> </ul> <p>Include how you're marketing the intervention:  All partners have listed information on their website, school nurses, twitter, and Facebook</p>	<p><b>1. Quantify what you will do</b> (policy change, change to built environment, etc.)</p> <ul style="list-style-type: none"> <li>o This project will affect policy change in the school environment with establishing a produce garden and incorporating nutrition, cooking and gardening education into classroom curriculum.</li> </ul> <p><b>2. Expected outcomes:</b> Explain how this will help reach the local community objective (what evidence do you have that this intervention will get you there?)</p> <ul style="list-style-type: none"> <li>o School gardening is a best practice for teaching students the importance of eating fruits/vegetables and incorporating good nutrition practices for a lifetime.</li> </ul>
<b>POLICY OR ENVIRONMENTAL CHANGE INTERVENTIONS</b>		
<p><b>Intervention:</b> Color Me Healthy</p> <p>Intervention:  <input type="checkbox"/> new <input checked="" type="checkbox"/> ongoing <input type="checkbox"/> completed</p> <p>Setting: Childcare Centers</p> <p>Start Date – End Date (mm/yy):  2002 – ongoing</p>	<p>The lead agency is Mecklenburg County Health Department and it will promote and deliver and evaluate CMH training</p> <p>List other agencies and what they plan to do:  Childcare Facilities: provide free space, promotion  Child Care Resources, Inc.: Promotion, provide free space  NC DHHS PAN Unit &amp; NCSU Cooperative Extension: Provide materials and kits</p> <p>Include how you're marketing the intervention</p> <p>Marketing is done through partnering agencies, emails, flyers, word of mouth, website</p>	<p><b>1. Quantify what you will do</b> (policy change, change to built environment, etc.)</p> <p>Curriculum for 4&amp;5 year olds on physical activity and nutrition. Upon completion of 4 hour training, child care providers receive a kit and materials needed to implement Color Me Healthy. Evidence of policy change: Child care centers have implemented the curriculum.</p> <p><b>2. Expected outcomes: Explain how this will help reach the local community objective (what evidence do you have that this intervention will get you there?)</b></p> <p>Long term goal: healthy weight children achieved through physical activity and nutrition.</p>
<p><b>Intervention:</b> Nutrition and Physical Activity Self Assessment for Child Care (NAP SACC)</p> <p>Intervention:  <input type="checkbox"/> new <input checked="" type="checkbox"/> ongoing <input type="checkbox"/> completed</p> <p>Setting: Childcare Centers</p> <p>Start Date – End Date (mm/yy):  2008--ongoing</p>	<p>The lead agency is Mecklenburg County Health Department and it will promote assessment, consult with child care center directors about program requirements, set goals, offer training sessions, develop customized work plan, re-evaluate</p> <p>List other agencies and what they plan to do:  Child Care Resources, Inc.: Promotion  Central Piedmont Community College Dept. of Early Childhood</p>	<p><b>1. Quantify what you will do</b> (policy change, change to built environment, etc.)</p> <p>Assess physical activity and nutrition offerings at child care centers. Set goals for improvements. Train teachers on physical activity and nutrition, childhood obesity, personal health, and working effectively with parents. Consult with center directors to help them achieve goals. Reassessment conducted 6 months after initial assessment. Write policies that reflect improved nutrition</p>

	<p>Edu: Promotion NC DHHS PAN Unit &amp; NCSU Cooperative Extension: Provide supplemental materials</p> <p>Include how you're marketing the intervention</p> <p>Marketing is done through partnering agencies, emails, flyers, Healthy Futures graduates, word of mouth, website</p>	<p>and physical activity practices.</p> <p><b>2. Expected outcomes: Explain how this will help reach the local community objective (what evidence do you have that this intervention will get you there?)</b></p> <p>Long term goal: healthy weight children achieved through physical activity and nutrition.</p>
<p><b>Intervention:</b> Healthy Futures Starting in the Kitchen (HFSK)</p> <p>Intervention: ___ new X ongoing ___ completed</p> <p>Setting: Culinary School, targeting child care center cooks</p> <p>Start Date – End Date (mm/yy): 20 hour, 5 week program (on-going)</p>	<p>The lead agency is Mecklenburg County Health Department and it will coordinate HFSK and provide nutrition education.</p> <p>List other agencies and what they plan to do: Central Piedmont Community College – will provide culinary training to child care center cooks enrolled in HFSK</p> <p>Include how you're marketing the intervention: -MCHD website -HFSK website -HFSK email distribution list -Partnering child care centers participating in Color Me Healthy and NAP SACC -MCHD Child Care Health Consultants market to child care centers</p>	<p>o</p> <p><b>1. Quantify what you will do</b></p> <ul style="list-style-type: none"> <li>-train child care center cooks how to prepare delicious and nutritious menus for cooks</li> <li>-child care centers will make changes to their menu and implement policy changes that will create a healthier food environment</li> </ul> <p><b>2. Expected outcomes:</b></p> <ul style="list-style-type: none"> <li>-A large number of Mecklenburg County children spend the majority of their time in child care centers. The healthier foods served in child care as a result of HFSK will help decrease the calorie and fat consumption of the children helping to fight against childhood obesity in Mecklenburg County.</li> </ul>
<p><b>Intervention:</b> The Core</p> <p>Intervention: X new ___ ongoing ___ completed</p> <p>Setting: The Core is a Youth Council with 30 high school students who work on Nutrition and Physical Activity related policy changes</p> <p>Start Date – End Date (mm/yy): on-going</p>	<p>The lead agency Youth Empowered Solutions (YES!) and it will provide training to youth on council in the area of youth empowerment, advocacy, and media literacy.</p> <p>List other agencies and what they plan to do: MCHD: recruit youth and provide advisory guidance and leadership to council, offer space</p> <p>Include how you're marketing the intervention: -Facebook -MCHD website -Charlotte-Mecklenburg Schools (CMS) Communities in Schools programs -Media press releases</p>	<p><b>1. Quantify what you will do</b></p> <ul style="list-style-type: none"> <li>-the youth will divide into 3 different policy change committees: Community Nutrition, Community Physical Activity, and School. The committees will select 1 policy change from the Height Weight, Healthy Child (HWHC) initiative Blueprint for a Healthier Generation 2020 and develop an action plan to advocate for and implement this policy change</li> </ul> <p><b>2. Expected outcomes:</b></p> <ul style="list-style-type: none"> <li>-this will help reach our local community objective because the blueprint is designed in partnership with MCHD, CMS, and Carolinas HealthCare System to provide interventions for promoting active living and support healthy eating for Mecklenburg County youth. The Core will help to implement and advocate for the policy changes and interventions outlined in the blueprint.</li> </ul>
<p><b>Intervention:</b> Food Assessment/Food Desert Study</p> <p>Intervention: X new ___ ongoing ___ completed</p> <p>Setting: All census block groups in Mecklenburg County</p>	<p>The lead agency is the Charlotte Mecklenburg Food Policy Council and it will provide study oversight and leadership.</p> <p>List other agencies and what they plan to do: UNC Charlotte: conduct study, collect data, analyze results,</p>	<p><b>1. Quantify what you will do</b></p> <p>The study looked at the availability of full service food stores (ie not corner/convenience stores) within census block groups (CBG) to determine if there were "food deserts" in Mecklenburg County. Next the researchers examined the rates of premature death from heart disease</p>

<p>Start Date – End Date (mm/yy): June 2010 to July 2011</p>	<p>evaluate findings MCHD: Provide data and statistical information, develop policy recommendations based on findings Food Policy Council: make recommendations to elected officials Mecklenburg County GIS: Provide maps</p> <p>Include how you're marketing the intervention: Media press releases to publicize findings</p>	<p>and diabetes within these food deserts and compared them to areas with better access to healthy foods. A total of 60 CBG were designated as food deserts with a total population of about 73,000 residents. The median income for these residents is \$31,000 one third receiving SNAP benefits (food stamps).</p> <p><b>2. Expected outcomes:</b> This information will help inform policy and improve access to health foods in our community. There are efforts being made to incentivize full service grocery stores to open in these food deserts as well as establish farmers' markets in these areas. As a result of this study, researchers and advocates have helped 4 local farmers' markets are now set up to accept SNAP benefits as valid payment. The long term goal is to have improved food access so that all residents have the opportunity to make healthy affordable food choices.</p>
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*(Insert rows as needed)*