

# Healthy Nutrition & Physical Activity for San Francisco's Children

Presented to

San Francisco Board of Supervisors

By

San Francisco Board of Supervisors Childhood Nutrition & Physical Activity Task Force

January 2005

# TABLE OF CONTENTS

## **EXECUTIVE SUMMARY**

# TASK FORCE MEMBERS AND STAFF

I. INTRODUCTION Recommendations Priority Strategies

# **II. NUTRITION POLICY RECOMMENDATIONS**

# **III. PHYSICAL ACTIVITY POLICY RECOMMENDATIONS**

# **III. FUNDING RECOMMENDATIONS**

## IV. APPENDIX

Appendix A - Complete Recommendations & Strategies

# V. **BIBLIOGRAPHY**

# CHILDHOOD NUTRITION & PHYSICAL ACTIVITY TASK FORCE REPORT EXECUTIVE SUMMARY

Unhealthful nutritional habits and physical *in*activity among children and youth have become a national epidemic and a health crisis with profound medical implications. The Childhood Nutrition & Physical Activity (CNPA) Task Force was established in December 2003 by the Board of Supervisors to develop recommendations for San Francisco to address the serious issue of childhood nutrition and physical activity.

#### Nutrition & Physical Activity Policy Recommendations

The following prioritized recommendations reflect the work of the CNPA Task Force to improve access and utilization of nutrition and physical activity opportunities throughout San Francisco (see Appendix A for the full list of recommendations).

**Recommendation 1:** Ensure that at least one reasonably large outlet/vendor that sells healthy, nutritious foods - including fresh vegetables and fruits - is easily accessible to residents in all sectors of San Francisco.

**Recommendation 2:** Increase the enrollment and retention of eligible clients into the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and Food Stamp programs. **Recommendation 3:** Increase the proportion of mothers who exclusively breastfeed their babies through 4 to 6 months of age and continue breastfeeding with supplementary food through one year.

**Recommendation 4:** Expand information and resources for understanding healthful nutrition and physical activity to health care providers, community groups who work with children, youth, and families, and parents/guardians.

**Recommendation 5:** Ensure that organizations have environments that provide optimal opportunities for youth to engage in physical activity.

**Recommendation 6:** Develop partnerships across public and private agencies to increase physical activity opportunities.

**Recommendation 7:** The San Francisco Board of Supervisors and the Mayor will issue recommendations of ideal levels of physical activity for children and youth to City/County Departments.

**Recommendation 8:** Implement city-wide awareness campaign(s) addressing nutrition and physical activity developed by youth for San Francisco.

#### Funding Recommendations

**Recommendation:** Create revenue streams to fund the Childhood Nutrition and Physical Activity recommendations.

#### **Strategies:**

- 1. Levy a fee or tax on soft drinks and/or fast foods.
- 2. Encourage the Board of Supervisors to support a statewide effort to levy a tax on soda and/or fast foods.
- 3. Advocate for a streamlined application process in all Federal Nutrition Programs.
- 4. Establish public/private partnership to leverage the philanthropy community.
- 5. Establish partnership with fast food industry to assist in funding nutrition and physical activity programs.
- 6. Support federal and/or state legislation that institutes or expands funding for nutrition education and physical activity opportunities for children, youth and families.
- 7. Include funding to pay for qualified staff who are content specialists in nutrition and physical activity in all future grant applications, where appropriate.
- 8. Consider existing funding streams such as Prop H and Prop 63.

#### TASK FORCE MEMBERS AND STAFF

Trish Bascom - Director of School Health Programs, San Francisco Unified School District

Stacey Blankenbaker - Department of Children, Youth & Their Families

Dena Bushman - Adolescent Health Working Group, a youth between the ages of 12-23

Christina Goette Carpenter - Department of Public Health, Staff to Task Force

Elena Escalera – St. Mary's College, Child Psychologist

**Andrea Garber** – Assistant Professor of Pediatrics (Nutrition), University of California, San Francisco

Lynn Gavin - San Francisco Unified School District Parent Teacher Student Association

Ibukun Hambolu - San Francisco Unified School District Student Advisory Council

Mel Heyman – Professor of Pediatrics, Chief (Division of Pediatric Gastroenterology, Hepatology and Nutrition), University of California, San Francisco

Scott Hoshida – Team Up For Youth, a philanthropic organization

Tracy DeAmicis McMahan – General Pediatrician

**Constance Mourning** – San Francisco Youth Commissioner

Iman Nazeeri-Simmons - Department of Public Health, Staff to Task Force

Jennifer Portnick – Feeling Good Fitness, offer physical activity programs for youth

**Erik Rosegard** – Assistant Professor, San Francisco State University, Department of Recreation & Leisure

**Ginger Smyly**, Task Force Chair – Deputy Director of Community Programs (Prevention), Department of Public Health

James Threat – Assistant Superintendent, Department of Recreation & Parks

Marilyn Wann – FatSo?, a civil rights organization for weight or size discrimination

Sophia Yen - Pediatrician and Child Advocate, American Academy of Pediatrics

# I. INTRODUCTION

Unhealthful nutritional habits and physical *in*activity among children and youth have become a national epidemic and a health crisis with profound medical implications. The Childhood Nutrition & Physical Activity (CNPA) Task Force was established in December 2003 by the Board of Supervisors to develop recommendations for San Francisco to address the serious issue of childhood nutrition and physical activity.

Over the past year, the CNPA Task Force has met monthly to review existing literature, recommendations, and best practices, meet with other nutrition and physical activity experts, and compile a comprehensive set of recommendations to improve the nutrition and physical activity opportunities for children, youth and their families. The CNPA Task Force is committed to developing recommendations that improve the nutrition and physical activity opportunities for all children and youth. The CNPA Task Force broke into smaller work groups to focus on nutrition and physical activity separately, with the understanding that the significant overlap between these two areas requires some shared recommendations.

Additionally, funding recommendations are presented as potential revenue sources for the support of the nutrition and physical activity recommendations.

#### **Recommendations**

The attached list of recommendations reflects the work of the CNPA Task Force to improve access and utilization of nutrition and physical activity opportunities throughout San Francisco (see Appendix A). The recommendations are prioritized within the categories of Nutrition and Physical Activity with the top four strategies highlighted as priority areas. Additionally, the recommendations are broken out into three topic areas: **Environmental** – structural improvements in the physical environment to improve access and utilization (e.g. transportation, pedestrian safety, grocery store location); **Organizational** – City agencies and departments (e.g. Department of Public Health, School District, Mayor's Office); and **Awareness/Behavior Change** – individual education and behavior change (focused on children, youth and their families).

#### **Priority Strategies**

The CNPA Task Force has identified the following strategies as priority areas in which to focus immediate attention – they are not listed in order of importance. Although these eight strategies have been identified to improve nutrition and physical activity opportunities for children and youth, it is important to note that all recommendations in Appendix A are integral to improving the health of children and youth in San Francisco. The Childhood Nutrition and Physical Activity Task Force worked diligently over the course of 2004 to create a set of prioritized recommendations that support children to eat nutritiously and be physically active.

As the task force finalized the recommendations, it became clear that youth development would be an important approach in the implementation process. A brief definition of youth development is provided: Youth Development is an approach that ensures healthy adult outcomes by providing youth the opportunity to develop skills, connect to their families & community, take risks, and practice leadership. This happens in settings that are safe: both physically and emotionally. That is, programs and agencies must create environments in which all youth are respected and supported regardless of race/ethnicity, socioeconomic status, physical ability, height or weight, gender, or age. In short, youth development is embracing all youth and their various abilities, talents and differences.

Additionally, the Department of Public Health adopted the Youth Development Standards of Practice in July 2004 (<u>www.dph.sf.ca.us/Reports/YthDevStdsPract.pdf</u>), that may serve as a model for other City/County Departments.

For ease of reference, the prioritized recommendations have been numbered. The prioritized recommendations described below are also listed with all other strategies identified by the Task Force in Appendix A. The numbers attributed to the recommendations in this document do not align with the numbering in Appendix A.

# **II. NUTRITION POLICY RECOMMENDATIONS**

The following are four **prioritized** nutrition recommendations and associated strategies made by the CNPA Task Force. The recommendations span several areas that affect environments, organizations, and awareness/behavior change. Each recommendation will have a rationale encapsulating discussions Task Force members had about the recommendation, best practices for the implementation, and appropriate implementation agencies/departments.

# **ENVIRONMENT**

**Recommendation 1:** Ensure that at least one reasonably large outlet/vendor that sells healthy, nutritious foods - including fresh vegetables and fruits - is easily accessible to residents in all sectors of San Francisco.

**Strategy:** Ensure that every neighborhood in San Francisco has access to affordable fresh fruits and vegetables through either

- (a) reasonably large outlet/vendor
- (b) locally-owned vendor that provides fresh fruit and vegetables, as well as a selection that meets the ethnic and cultural needs of the specified area/neighborhood
- (c) farmer's market
- (d) community supported agriculture (subscription service)
- (e) community garden and/or
- (f) good neighbor policies

*Rationale:* A key component for healthy eating is ensuring access to and affordability of fresh fruits and vegetables. Despite its small area, there are sections of San Francisco where purchasing fresh fruits and vegetables at an affordable cost is difficult. San Francisco should promote and ensure equitable opportunities for healthful eating, particularly for disadvantaged communities.

*Best Practices:* Promoting access to healthy eating can be ensured through various mechanisms, including encouraging a farmer's market in every Supervisorial District in the City, encouraging community gardens, and locating a large grocery outlet/vendor in all sectors of the City. It is also important to ensure good neighbor policies (such as encouraging corner markets to provide affordable fresh fruits and vegetables for purchase).

*Lead Agencies:* Planning Department, Department of the Environment, Department of Public Health, Department of Children, Youth & Their Families, Small Business Commission

# **ORGANIZATIONAL**

**Recommendation 2:** Increase the enrollment and retention of eligible clients into the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and Food Stamp programs.

**Strategy:** Through a Board of Supervisor's resolution, strongly encourage the United States Congress to improve the federal guidelines for the WIC program by including access to fruits and vegetables and to ensure that the eligible foods are culturally appropriate. Additionally, advocate San Francisco as a California site for a WIC Fruit and Vegetable pilot program.

*Rationale:* Started in 1974, the Special Supplemental Nutrition Program for Women, Infants, and Children was designed to meet the special nutritional needs of low-income pregnant, breastfeeding, or postpartum women; infants; and children up to 5 years of age who have at least one nutritional risk factor. Approximately 7.5 million people (average monthly participation) are enrolled in WIC nationally. Approximately half of all infants and 25% of all children aged 1 to 4 in the United States participate in the WIC program. In San Francisco 4170 women, infants and children are enrolled in WIC (monthly participation during March 2003).

The WIC Program provides three main benefits: supplemental foods, nutrition education, and referrals to health and social services. The 2004 Preliminary Report of the Committee to Review the WIC Food Packages recommends that WIC revise the food packages to include emphasizing the vegetable group for children, emphasizing the fruit and dairy group for women, limiting the amount of added sugars, saturated fat, cholesterol, and trans fatty acids, promoting breastfeeding of infants, and keeping juice allowances within recommendation.

**Best Practices:** Current research has established that good nutrition and a balanced diet includes eating fresh fruits and vegetables. The *Institute of Medicine Committee on Preventing Childhood Obesity* is encouraging pilot programs that focus on increasing the availability of fresh fruits and vegetables and other nutritious foods or provide incentives for the purchase of these items to participants in the federal food assistance programs such as WIC. Specific ideas for these programs include special fruit and vegetable vouchers; coupons or other discount promotions; and the ability to use electronic benefit transfer cards at farmers' markets or community-supported agricultural markets.

The San Francisco Childhood Nutrition & Physical Activity Task Force strongly recommends San Francisco as a site for a California WIC Fruit and Vegetable pilot program.

*Lead Agencies:* Department of Public Health, Department of Human Services, Board of Supervisors, Mayor Gavin Newsom's Office, American Academy of Pediatrics, American Dietetic Society, United States Department of Agriculture, California WIC Association, California WIC Program

# **AWARENESS/BEHAVIOR CHANGE:**

**Recommendation 3:** Increase the proportion of mothers who exclusively breastfeed their babies through 4 to 6 months of age and continue breastfeeding with supplementary food through one year.

**Strategy:** The City and County of San Francisco will encourage all hospitals to become designated as Baby Friendly by the World Health Organization (WHO) and United Nations Children's Fund (UNICEF) Baby-Friendly Hospital Initiative accreditation process.

**Rationale:** Human milk is the preferred food for all infants, including premature and sick newborns, with rare exceptions (American Academy of Pediatrics, 1997). Breastfeeding provides a range of benefits for the infant's growth, immunity, and development. According to the American Academy of Pediatrics, exclusive breastfeeding is recommended for the first four to six months of life and breastfeeding, along with the age-appropriate introduction of complementary foods, is encouraged for the first year of life.

According the Institute of Medicine Preventing *Childhood Obesity: Health in the Balance* (2005) report, epidemiological data suggest that breastfeeding...confers a small but significant degree of protection from childhood obesity, although it is not certain why this is so. Breastfeeding is thought to promote the infant's ability to regulate energy intake, allowing him or her to eat in response to hunger and satiety cues. In contrast, a caregiver who is formula feeding an infant may encourage the infant to finish the bottle, potentially fostering overeating.

**Best Practices:** The Baby-Friendly Hospital Initiative (BFHI), launched in 1992, is a global program sponsored by the WHO and UNICEF to encourage and recognize hospitals and birthing centers that offer an optimal level of care for lactation. The BFHI assists hospitals in giving breastfeeding mothers the information, confidence, and skills needed to successfully initiate and continue breastfeeding their babies and gives special recognition to hospitals that have done so. Although the hospital is not and should not be the only place a mother receives support for breastfeeding, hospitals provide a unique and critical link between the breastfeeding support provided prior to and after delivery.

*Lead Agencies:* Department of Public Health, California Pacific Medical Center, University of California San Francisco Hospital, Kaiser Permanente, St. Luke's Hospital, Chamber of Commerce, First 5 Commission, Department of Human Services (Family Resource Centers)

**Recommendation 4:** Expand information and resources for understanding healthful nutrition and physical activity to health care providers, community groups who work with children, youth, and families, and parents/guardians.

**Strategy:** Compile an online resource list of programs for San Francisco children, youth and their families containing healthy nutrition and physical activity programs.

*Rationale:* There are many free and low-cost recreation programs available throughout the City, however if people are unaware of programs, utilization may be low. Therefore, from already existing lists and compilations, bring information together in a master list for a variety of users including: health care providers, parents/guardians, and children and youth.

**Best Practices:** Health care professionals have great influence over their patients/client behavior change. In order for the health care professionals to give current and appropriate nutrition and physical activity counseling and guidance, a list of available resources for their client is necessary. Parents/Guardians and other adult family members can have positive influence over their children's and youth's involvement in recreational and physical fitness activities. Having a readily accessible list of current nutritional and physical activity opportunities in the City will help support the positive health of San Francisco's children and youth.

*Lead Agencies:* Department of Public Health, Department of Children, Youth & Their Families, Department of Recreation & Parks, American Academy of Pediatrics, San Francisco Health Plan, San Francisco Public Library

#### **III. PHYSICAL ACTIVITY POLICY RECOMMENDATIONS**

The following are four physical activity prioritized recommendations and associated strategies made by the CNPA Task Force. The recommendations span several areas that affect policy, organizations, and awareness/behavior change. Each recommendation will have a rationale encapsulating the discussions Task Force members had about the recommendation, best practices (if applicable) for the implementation, and appropriate implementation agencies.

The issues surrounding physical activity go well beyond an individual's desire to get moving. Many of our residents live in community environments that promote disease and injury and do not support healthy behaviors. Inactivity issues have largely been defined as problems of individual choices to over-consume or remain sedentary, rather than viewing these "choices" as shaped by the environment in which they are made. Many neighborhoods are unsafe because of violence, drug activity, or poor lighting. To keep them safe, many parents keep their children indoors, reducing the opportunity to be outside and active, and increasing more sedentary screen (computer/TV) time. Walking or biking to school is no longer safe because of violence, and a car-oriented society. Violence is not the only environmental barrier: sidewalks in poor repair, limited physical education funding, and community design that does not promote walking, biking or jogging also make physical activity less likely.

# **ORGANIZATIONAL**

**Recommendation 5**: Ensure that organizations have environments that provide optimal opportunities for youth to engage in physical activity.

**Strategy**: Involve youth in the development of programs and creation of spaces that increase physical activity.

**Rationale:** This recommendation is focused on increasing activity among children and youth; the importance of location and setting is absolutely vital to the success of increased movement. Incorporating youth input into the creation of physical space as well as programming is not only logical, but is also supported by research (Blyth & Roehlkepartin, 1992, Pittman, Diversi, et al., 2002, National Research Council and the Institute of Medicine, 2002). Involving youth in such a manner is classic implementation of youth development practices; which is a best practice. In July 2004, the Department of Public Health adopted the *Youth Development Standards of Practice* as guidelines for DPH programs serving youth (whether provided directly by DPH or its contractors). Focus groups with youth provided a number of key elements for programs or services they consider successful including a clear youth imprint on the space and youth help design and run programs. The *Youth Development Standards of Practice* were developed based on best practices and research.

Funding for such programs and spaces is vital to ensuring that both the physical and social environments promote safe, fun places for youth to get active. Funding recommendations are listed at the end of this document.

**Best Practices:** All youth serving programs, be they city agencies or community based organizations, adopt and implement *Youth Development Standards of Practice* based on those adopted by the Department of Public Health.

A systematic review of published studies, conducted by the Task Force on Community Preventive Services by a team of experts, found several program areas to be effective in getting people to be more physically active including *Creating or Improving Access to Places for Physical Activity*. These interventions involve the efforts of worksites, coalitions, agencies, and communities in attempts to change the local environment to create opportunities for physical activity. Such changes include creating walking trails, building exercise facilities, or providing access to existing nearby facilities. Many of these programs also train participants to use the equipment and offer health education, risk factor screening, referrals to physicians or additional services, health and fitness programs, and support or buddy systems. These multicomponent programs were evaluated as a "combined package" because it was not possible to separate out the effects of each individual component.

*Lead Agencies*: San Francisco Unified School District, Department of Recreation and Parks, Department of Children, Youth and their Families, Department of Public Health, Community Based Organizations

**Recommendation 6**: Develop partnerships across public and private agencies to increase physical activity opportunities.

**Strategy**: City agencies that provide funding to community based organizations should mandate partnerships to increase physical activity and should provide opportunities for such collaboration.

*Rationale*: To properly address the issue of sedentary lifestyle, it is imperative that we consider the range of reasons, both at individual and community/social environment levels, that contribute to inactivity. This can only be done when appropriate agencies are working together to address the issues be they access to food, violence, hazardous sidewalks, excessive speeding, poor lighting, etc.

Additionally, collaborating across agencies and programs not only avoids unnecessary duplication, but it also ensures that we maximize limited resources and create optimal opportunities for youth and children to be physically active. Mandating collaboration in some cases may be the first step toward voluntary and cooperative collaboration as the benefits of working together become apparent to all involved parties.

*Best Practices*: A number of resources are available that provide structure and guidelines for partnership and collaboration. A few such examples follow.

The Prevention Institute: Developing Effective Coalitions: An Eight Step Guide (http://www.preventioninstitute.org/eightstep.html)

National Network for Collaboration. (http://crs.uvm.edu/nnco/collab/)

*Lead Agencies*: Department of Children, Youth & Their Families, Department of Recreation & Parks, Community Based Organizations, Department of Public Health, San Francisco Unified School District, Housing Authority, Planning Department, Department of Public Works, Department of Parking & Traffic, Mayor's Office of Community Development

# **AWARENESS/BEHAVIOR CHANGE:**

**Recommendation 7:** The San Francisco Board of Supervisors and the Mayor will issue recommendations of ideal levels of physical activity for children and youth to City/County Departments.

Strategy: The city/county will recommend the following goals for physical activity:

- Elementary school-aged children and youth should accumulate between 30 to 60 minutes of moderate, age- and developmentally-appropriate physical activity from a variety of activities on all, or most, days of the week.
- Adolescents should engage in three or more sessions per week of activities that last 20 minutes or more at a time and that require moderate to vigorous levels of exertion. All youth should meet these minimum requirements.
- All children and youth should be physically active daily, or nearly every day, as part of play, games, sports, work, transportation, recreation, physical education, or planned exercise, in the context of normal, everyday family, school, and community activities.
- The benefits of physical activity should be made available to children and youth with special needs (i.e., physical, mental, and emotional).
- Ensure that physical activity is not overly competitive nor so focused on educating about the benefits of physical activity that it diminishes the fun and motivating factors for youth and families.

**Rationale:** Establishing minimum levels help raise awareness about the need for regular physical activity, thereby encouraging increased levels of physical activity. Providing standards for physical activity also helps people determine whether their level of physical activity is beneficial to their health, as well as providing goals toward which to work or maintain. The Centers for Disease Control and Prevention developed a set of guidelines recommending certain levels of physical activity for adolescents and children; the Task Force agreed upon slightly modified CDC recommendations (original recommendations can be found at www.cdc.gov/HealthyYouth/physicalactivity/promoting\_health/background.htm).

**Best Practices:** Issuing a resolution for physical activity guidelines is an excellent first step, as modeled by the Centers for Disease Control and Prevention. Subsequent to the Board of Supervisors adopting the guidelines, some follow up education, minimally with providers and educators is recommended to raise awareness and support implementation. Approved guidelines should be made easily accessible on the internet as well. Other Task Force recommendations support awareness and education of these guidelines.

A systematic review of published studies, conducted on behalf of the Task Force on Community Preventive Services by a team of experts, found several program areas to be effective in getting people to be more physically active. They include:

- □ **Community-wide campaigns**. These interventions are large-scale, intense, highly visible, community-wide campaigns with messages directed to large audiences through different types of media, including television, radio, newspapers, movie theaters, billboards, and mailings.
  - Community-wide campaigns were typically conducted as part of a multicomponent effort that also included strategies such as support or self-help groups, physical activity counseling, risk factor screening and education, community health fairs and other community events, and environmental or policy changes such as the creation of walking trails
- □ **Social Support**. These interventions focus on changing physical activity behavior through building, strengthening, and maintaining social networks that provide supportive relationships for behavior change.
  - creating new social networks or working within existing networks in a social setting outside the family, such as in the workplace
  - setting up a buddy system, making contracts with others to complete specified levels of physical activity, or setting up walking groups or other groups to provide friendship and support
- □ **Point-of-decision prompts**. These interventions are generally low-cost and are part of a multicomponent effort to increase individual behavior change.
  - Signs placed by elevators and escalators encourage people to use nearby stairs for health benefits.
- □ **Individually-adapted health behavior change programs**. Teach behavioral skills to help participants incorporate physical activity into their daily routines. The programs are tailored to each individual's specific interests, preferences, and readiness for change
  - Behavioral skills include: 1) goal-setting and self-monitoring of progress toward those goals, 2) building social support for new behaviors, 3) behavioral reinforcement through self-reward and positive self-talk, 4) structured problem solving to maintain the behavior change, and 5) prevention of relapse into sedentary behavior
  - Interventions are delivered to people either in group settings or by mail, telephone, or directed media
- □ Creating or improving access to places for physical activity: As described in Recommendation 5

*Lead Agencies*: Board of Supervisors, Department of Public Health, Department of Children Youth & Their Families, San Francisco Unified School District, Department of Recreation & Parks.

**Recommendation 8:** Implement city-wide awareness campaign(s) addressing nutrition and physical activity developed by youth for San Francisco.

**Strategy:** Identify proven strategies to encourage youth to incorporate up to 60 minutes of moderate physical activity daily (including before, during, and after school). Involve youth and other focus audiences in development of campaign.

*Rationale*: Basing our work on strategies that have already been shown to be effective is the best use of time and resources. Ensuring youth participate in the development of any awareness campaign is in and of itself a best practice (as described above).

The Task Force also emphasized the importance of not targeting any specific group (for example overweight youth) and ensuring that programs are sensitive to the different concerns or issues facing youth. Programs/Strategies will be respectful of and will not discriminate based on race/ethnicity, age, gender, weight, height, special needs, income, fitness level or ability. Additionally, the Task Force emphasizes that presenting physical activity options as something fun is critical to the success of any program.

**Best Practices:** Conducting internet searches as well as participating in state and national networks that work on promoting physical activity can link to effective practices. For example, the Strategic Alliance based in Alameda, California, has developed strategies to improve opportunities for physical activity. The Task Force on Community Preventive Services also has conducted research on important approaches – specific programs are yet to be identified. Regardless of which specific programs or approaches are identified, they may need to be adapted to the audience for which it is intended.

*Lead Agencies*: Department of Children, Youth & their Families, Department of Recreation & Parks, Community Based Organizations, Department of Public Health, Coalitions (SF Bike, Walk SF)

# **III. FUNDING RECOMMENDATIONS**

**Recommendation:** Create revenue streams to fund the Childhood Nutrition and Physical Activity recommendations.

#### **Strategies:**

- 1. Levy a fee or tax on soft drinks and/or fast foods.
- 2. Encourage the Board of Supervisors to support a state-wide effort to levy a tax on soda and/or fast foods.
- 3. Advocate for a streamlined application process in all Federal Nutrition Programs.
- 4. Establish public/private partnership to leverage the philanthropy community.
- 5. Establish partnership with fast food industry to assist in funding nutrition and physical activity programs.
- 6. Support federal and/or state legislation that institutes or expands funding for nutrition education and physical activity opportunities for children, youth and families.
- 7. Include funding to pay for qualified staff who are content specialists in nutrition and physical activity in all future grant applications, where appropriate.
- 8. Consider existing funding streams such as Prop H and Prop 63.



NUTRITION			
Recommendation	Potential Strategies	Who	
ENVIRONMENT: <ol> <li>Ensure that at least one reasonably large outlet/vendor that sells healthy, nutritious foods - including fresh vegetables and fruits - is easily accessible to residents in all sectors of San Francisco.</li> </ol>	<ul> <li>a. Ensure that every neighborhood in San Francisco has access to affordable fresh fruits and vegetables through either (a) reasonably large outlet/vendor, (b) locally-owned vendor that provides fresh fruit and vegetables, as well as a selection that meets the ethnic and cultural needs of the specified area/neighborhood, (c) farmer's market, (d) community supported agriculture (subscription service), (e) community garden and/or (f) good neighbor policies. *</li> <li>b. Increase capacity of community members to establish local small businesses (e.g. fresh meat market, produce market, etc).</li> <li>c. Encourage the Board of Supervisors to promote having a Farmer's Market in each District.</li> <li>d. Ensure agencies that distribute food have evening and weekend hours.</li> <li>e. Collaborate with Environmental Health's Eastern Neighborhoods Health Impact Assessment, to support zoning efforts to improve health.</li> </ul>	Small Business Commission, Planning Department, Department of Children, Youth & Their Families, Department of Public Health - Environmental Health Section, California WIC Association, CA WIC Program	



Goal: To improve the health of San Francisco's children and youth by increasing access to nutritious foods and to promote physical activity opportunities.

NUTRITION		
Potential Strategies	Who	
<ul> <li>a. Review the process on how grocery stores are sited.</li> <li>b. Incorporate and build capacity for community involvement in neighborhood zoning.</li> <li>c. Build on existing partnerships with WIC and Food Stamp vendors to expand healthy food choices and improve product placement.</li> <li>d. Utilize federal food assistance programs to provide adequate nutrition to children. Programs include the Summer Food Service Program, the Child and Adult Care Food Program, the After-School Snack Demonstration Project in California, the Homeless Children Nutrition Program and the Food Stamp Program.</li> </ul>	Department of Public Health, Department of Children, Youth & Their Families, Planning Department, Department of Human Services, Redevelopment Department, Food Security Council, Local Grocers' Associations, Community Based Organizations	
<ul> <li>a. Support implementation of SFUSD's Nutrition &amp; Physical Fitness Policy.</li> <li>b. Support SFUSD's efforts to increase enrollment in their free or reduced lunch program.</li> <li>c. Eliminate student access to catering trucks while school-based activities occur.</li> <li>d. Encourage the selling of healthy foods in staff room vending machines.</li> </ul>	San Francisco Unified School District	
<ul><li>a. Ensure that all City-sponsored functions, events and meetings make a good faith effort to provide healthy foods.</li><li>b. Encourage sale of healthy food at city-sponsored vending machines.</li></ul>	Board of Supervisors, City/County Departments, Commissions	
	<ul> <li>a. Review the process on how grocery stores are sited.</li> <li>b. Incorporate and build capacity for community involvement in neighborhood zoning.</li> <li>c. Build on existing partnerships with WIC and Food Stamp vendors to expand healthy food choices and improve product placement.</li> <li>d. Utilize federal food assistance programs to provide adequate nutrition to children. Programs include the Summer Food Service Program, the Child and Adult Care Food Program, the After-School Snack Demonstration Project in California, the Homeless Children Nutrition Program and the Food Stamp Program.</li> <li>a. Support implementation of SFUSD's Nutrition &amp; Physical Fitness Policy.</li> <li>b. Support SFUSD's efforts to increase enrollment in their free or reduced lunch program.</li> <li>c. Eliminate student access to catering trucks while school-based activities occur.</li> <li>d. Encourage the selling of healthy foods in staff room vending machines.</li> <li>a. Ensure that all City-sponsored functions, events and meetings make a good faith effort to provide healthy foods.</li> <li>b. Encourage sale of healthy food at city-sponsored</li> </ul>	

Page 2 of 10

Childhood Nutrition & Physical Activity Task Force - 415-255-3925

\* Bold indicates a priority strategy



NUTRITION		
Recommendation	Potential Strategies	Who
5. Increase the enrollment and retention of eligible clients into the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and Food Stamp programs.	<ul> <li>a. Recommend that the federal guidelines for WIC be revised to include access to fruits and vegetables and that the eligible foods are culturally appropriate.</li> <li>b. Advocate for a California WIC Fruit and Vegetable pilot program.</li> <li>c. Advocate for WIC to expand the definition of authorized vendor to include certified farmers' markets.</li> <li>d. Increase education and training for health care providers to ensure they are maximizing their referrals of eligible women and their children into WIC.</li> <li>e. Strengthen the collaboration between DHS and DPH to increase coordination, referral and follow- up with clients who are eligible for both WIC and Food Stamp programs.</li> </ul>	Department of Public Health, Department of Human Services, Board of Supervisors, American Academy of Pediatrics, American Dietetic Society
<ul><li>AWARENESS/BEHAVIOR CHANGE:</li><li>6. Participate in a City-wide Nutrition &amp; Physical Awareness Month campaign (joint</li></ul>	<ul> <li>Coordinate healthy nutrition and physical activity programs in schools, city agencies/departments, communities, etc.</li> </ul>	City/County Departments, San Francisco Unified School District,
recommendation with Physical Activity)	<ul> <li>b. Conduct campaign to encourage students to eat school lunches that abide by new SFUSD nutrition guidelines.</li> </ul>	private/parochial schools, faith communities



NUTRITION				
	Recommendation		Potential Strategies	Who
7.	Increase the proportion of mothers who exclusively breastfeed their babies through 4 to 6 months of age and continue breastfeeding with supplementary food through one year.	b. c. d. f. g.	The City and County of San Francisco will encourage all hospitals to become designated as Baby Friendly by the World Health Organization (WHO) and United Nations Children's Fund (UNICEF) Baby-Friendly Hospital Initiative accreditation process. Improve prenatal education for all women on the positive health benefits (to both mother and baby) of breastfeeding. Discourage baby formula advertisement in San Francisco. Initiate campaign to educate employers on CA law supporting breastfeeding Workplace Accommodation – AB 1025 (2001). Educate all infant care providers on the "baby- friendly" guidelines. Promote the norm of exclusively breastfeeding and support informed and appropriate complementary infant and toddler feeding. Ensure the availability of Lactation Rooms in all City and County buildings. Conduct public education campaigns with appropriate early feeding messages.	Department of Public Health, California Pacific Medical Center, University of California San Francisco Hospital, Kaiser Permanente, St. Luke's Hospital, Chamber of Commerce, First 5 Commission, Department of Human Services (Family Resource Centers)
8.	Expand healthful nutrition and physical activity information and resources for health care providers, community groups who work with children, youth, families, and parents/guardians. (Joint recommendation with Physical Activity)	<b>a.</b> b.		Department of Public Health, Public Library, American Academy of Pediatrics, San Francisco Health Plan



PHYSICAL ACTIVITY		
Recommendation	Potential Strategies	Who
<ul> <li>ENVIRONMENT:</li> <li>1. Create environments that are safe for all types of physical activity.</li> </ul>	<ul> <li>a. Support Active Community Environments (defined as: characteristics of our communities such as proximity of facilities, street design, density of housing, availability of public transit and of pedestrian and bicycle facilities that play a significant role in promoting or discouraging physical activity.)</li> <li>b. Complete Citywide bike routes.</li> </ul>	Department of Public Health, Planning Department, Department of Parking and Transportation, Redevelopment Department, Housing Authority, Department of Recreation & Parks, San Francisco Unified School District, Community Based Organizations, coalitions, private entities (e.g. churches)
<ol> <li>Create opportunities for youth to safely walk/bike to and from school.</li> </ol>	<ul> <li>a. Create "safety corridors" between schools, recreation centers, and other community based organizations for children and youth.</li> <li>b. Create Safe Routes to school.</li> <li>c. Allow bikes on SFUSD buses and on campuses and create safe and secure places for them to be stored when not being used.</li> </ul>	Department of Public Health, Planning Department, Department of Parking and Transportation, Redevelopment Department Housing Authority, Department of Recreation & Parks, San Francisco Unified School District, Community Based Organizations, Private entities (e.g. churches)
<ol> <li>Improve transportation options for underserved communities/neighborhoods.</li> </ol>	<ul> <li>a. Establish and/or increase interdepartmental collaboration between DPH, DCYF, Muni, DRP, SFUSD, etc.</li> <li>b. Create safe transportation to non-school based after school programs (e.g. Boys and Girls Clubs).</li> </ul>	Department of Public Health, Department of Children, Youth & Their Families, MUNI, Department of Recreation & Parks, San Francisco Unified School District



PHYSICAL ACTIVITY		
Recommendation	Potential Strategies	Who
ORGANIZATIONAL: 4. Ensure that organizations have environments that provide optimal opportunities for youth to engage in physical activity.	<ul> <li>a. Involve youth in the development of programs and creation of spaces that increase physical activity.</li> <li>b. Conduct an assessment of all public recreation &amp; park &amp; SFUSD facilities for physical activity.</li> <li>c. Develop a structure in each public physical activity facility to promote youth participation in program development, implementation, and assessment.</li> <li>d. Promote youth employment programs as funding sources to bring neighborhood youth to local physical activity facilities to assist with programming.</li> <li>e. Offer professional development to all staff that deliver physical activity programs to youth and include training on youth development, best practices and quality sports programming as well as how to be respectful of all children.</li> <li>f. Adopt guidelines on quality physical activity programs for youth that emphasizes the inclusion of all youth, age-appropriate activities, giving youth options for different types of programs, and supports youth with special needs.</li> <li>g. Refurbish/upgrade existing facilities at schools &amp; recreation centers.</li> <li>h. Create an incentive for programs to provide and advertise scholarships for sports programs otherwise inaccessible to low-income youth.</li> <li>i. Provide incentives to make effective physical activity programs.</li> </ul>	San Francisco Unified School District, Department of Recreation & Parks, Department of Children, Youth & Their Families, Department of Public Health, Community Based Organizations



PHYSICAL ACTIVITY		
Recommendation	Potential Strategies	Who
<ol> <li>Develop partnerships across public and private agencies to increase physical activity opportunities.</li> </ol>	<ul> <li>a. City funders should mandate partnerships to increase physical activity for children and youth and provide opportunities for such collaboration.</li> <li>b. Review existing guidelines on quality physical activity programs.</li> <li>c. Engage non-profits (e.g. Walk SF, SF Bicycle Coalition, etc.) to provide professional development training.</li> <li>d. Include physical education/activity in Individual Education Plans (SFUSD) plans for special needs youth</li> <li>e. Institute a system that supports use of public facilities for physical activity programs for youth at cost or at reduced cost</li> <li>f. Enforce physical education requirements in SFUSD.</li> <li>g. Ensure/Mandate that public recreational facilities (DRP, SFUSD) are being used to capacity: <ul> <li>Develop action plans for sites not at capacity</li> <li>Ensure the use of facilities by a broad cross-section of youth from the community (boys and girls, racial/ethnic groups, weight-neutral programs, non-competitive options, etc.).</li> <li>Facilities that do not have staff capacity to fully program should develop relationships with outside organizations to provide low-cost or free programming for youth.</li> <li>Ensure all public facilities are designated for children/youth from 3:00 p.m. – 6:00 p.m. weekdays for after-school programming.</li> <li>Insurance, maintenance, and other regulatory issues must be dealt with at the leadership levels (e.g. Mayor's Office).</li> <li>Promote availability of SFUSD facilities for rent.</li> </ul> </li> </ul>	Mayor's Office Department of Public Health, Department of Recreation & Parks, Department of Children, Youth & Their Families, San Francisco Unified School District, Community Based Organizations, Coalitions



PHYSICAL ACTIVITY		
Recommendation	Potential Strategies	Who
<ul> <li>AWARENESS/BEHAVIOR CHANGE:</li> <li>6. Board of Supervisors and the Mayor will issue recommendations of ideal levels of physical activity for children and youth to City/County Departments.</li> </ul>	<ul> <li>The city/county will recommend the following goals for physical activity:</li> <li>Elementary school-aged children and youth should accumulate between 30 to 60 minutes of moderate, age- and developmentally-appropriate physical activity from a variety of activities on all, or most, days of the week.</li> </ul>	Department of Public Health, Department of Recreation & Parks, San Francisco Unified School District, Department of Children, Youth & Their
	<ul> <li>All children and youth should be physically active daily, or nearly every day, as part of play, games, sports, work, transportation, recreation, physical education, or planned exercise, in the context of normal, everyday family, school, and community activities.</li> </ul>	Families
	<ul> <li>Adolescents should engage in three or more sessions per week of activities that last 20 minutes or more at a time and that require moderate to vigorous levels of exertion. All youth should meet these minimum requirements.</li> </ul>	
	<ul> <li>The benefits of physical activity should also be made available to children and youth with special needs (i.e., physical, mental, and emotional)</li> </ul>	
	<ul> <li>Ensure that physical activity is not overly competitive nor so focused on educating about the benefits of physical activity that it diminishes the fun and motivating factors for youth and families.</li> </ul>	
	*modified based on Centers for Disease Control and Prevention recommendations	
	www.cdc.gov/HealthyYouth/physicalactivity/promoting_health/background.htm	



PHYSICAL ACTIVITY		
Recommendation	Potential Strategies	Who
7. Implement city-wide awareness campaign(s) developed by youth for San Francisco.	<ul> <li>a. Develop a nutrition/physical activity campaign with youth and other stakeholder input.</li> <li>b. Identify proven strategies to encourage youth to incorporate up to 60 minutes of moderate physical activity daily (including before, during, and after school).</li> <li>c. Identify and develop resources for campaign.</li> <li>d. Involve local athletes as spokespeople.</li> <li>e. Educate families, through health providers, schools, childcare centers, about incorporating physical activity into daily life for all children/youth including those with special needs.</li> <li>f. Incorporate physical activity into transportation to/from school, work, etc. (e.g. cycling, walking)</li> <li>g. Provide training to health care workers around patient referrals to community physical activities and develop user friendly, effective referral systems for them to use.</li> <li>h. Engage the Police Activities League (ensure there is a PAL officer in each school).</li> <li>i. Encourage the Mayor's Office to make a public statement around importance of physical activity.</li> <li>j. Implement city-wide youth sports tournaments sponsored by the Mayor to attract private sponsors and donors, create a network of neighborhood-based programs across the city, and provide a series of high-profile annual events that can promote youth physical activity, sport, and health.</li> <li>k. Promote children and youth involvement at walking/running events by making it free for youth under 16.</li> </ul>	Department of Public Health, Department of Recreation & Parks, Department of Children, Youth & Their Families, San Francisco Unified School District, Mayor's Office, Community Based Organizations, coalitions



PHYSICAL ACTIVITY		
Recommendation	Potential Strategies	Who
<ol> <li>Inform parents and youth of low cost/free physical activity opportunities during the summer.</li> </ol>	<ul> <li>a. Use the SF Public Library's database to disseminate information on city-wide physical activity opportunities.</li> <li>b. Utilize mass mailing in the schools and advertisements in newspapers (city newspaper, school newspaper/newsletter, neighborhood paper, school radio/loudspeaker announcements.)</li> <li>c. Encourage health plans to hand out pedometers to youth.</li> <li>d. Coordinate activities with the Mayor's Summer Food Program so that adequate nutrition will be provided.</li> </ul>	Department of Public Health, Department of Recreation & Parks, Department of Children, Youth & Their Families, San Francisco Unified School District, SF Health Plan, Community Based Organizations, child care centers

FUNDING		
Recommendation	Potential Strategies	Who
<ol> <li>Create a revenue stream to fund the Childhood Nutrition and Physical Activity recommendations.</li> </ol>	<ul> <li>a. Levy a fee or tax on soft drinks and/or fast foods.</li> <li>b. Encourage the Board of Supervisors to support a statewide effort to levy a tax on soda and/or fast foods.</li> <li>c. Advocate for a streamlined application process in all Federal Nutrition Programs.</li> <li>d. Establish public/private partnership to leverage the philanthropy community.</li> <li>e. Establish partnership with fast food industry to assist in funding nutrition and physical activity programs.</li> <li>f. Support federal and/or state legislation that institutes or expands funding for nutrition education and physical activity opportunities for children, youth and families.</li> <li>g. Include funding to pay for qualified staff who are content specialists in nutrition and physical activity in all future grant applications, where appropriate.</li> <li>h. Consider existing funding streams such as Prop H and Prop 63.</li> </ul>	State Representatives, Board of Supervisors, private foundations, Community Based Organizations, private industry, California WIC Association (CWA), CA WIC Program, United States Department of Agriculture

#### V. **BIBLIOGRAPHY**

*American Academy of Pediatrics: Breastfeeding and the Use of Human Milk*, Pediatrics, Vol. 100 No. 6 December 1997, pp. 1035-1039.

Blyth, Dale; Roehlkepartain, Eugene C. "A new study highlights what youth need from communities." *Source Newsletter*, May 1992. <u>www.search-institute.org/archives/wt.htm</u>

Centers for Disease Control and Prevention, *Physical Activity Recommendations*: www.cdc.gov/HealthyYouth/physicalactivity/promoting\_health/background.htm).

*Community Programs to Promote Youth Development*, Washington D.C: National Research Council and the Institute of Medicine, National Academy Press, 2002.

Pittman, Karen. Diversi, Marcelo. Ferber, Thaddeus. Social Policy Supports for Adolescence in the Twenty-First Century: Framing Questions. *Journal of Research on Adolescence. Adolescents' Preparation for the Future: Perils and Promise: A Report of the Study Group on Adolescence in the Twenty-First Century.* 12(1):149-158, 2002.

*Preventing Childhood Obesity – Health in the Balance*, Institute of Medicine of the National Academies, 2005.

*San Francisco City & County Lactation Services & Resource Guide* 2004, A Collaboration of The San Francisco Department of Public Health WIC Program & The San Francisco Breastfeeding Promotion Coalition.