

The webinar ***State and Local Nutrition and Physical Activity Policy: What Comprehensive Cancer Control Coalitions Need to Know*** was aired on September 13, 2021. The webinar described how state and local policy work could make a difference, provided policy and coalition examples, and listed some tips for coalitions that were starting or developing policy work on chosen issues.

This document summarizes key takeaways and resources from the webinar at the following link: <https://youtu.be/1tbbDSyn9rl>.

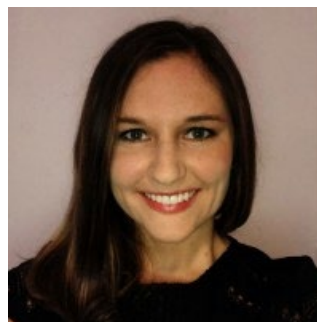
The *American Cancer Society* **Comprehensive Cancer Control (ACS CCC)** team hosted the webinar. The ACS CCC team seeks to build the capacity of grant recipients in the *Centers for Disease Control and Prevention* **National Comprehensive Cancer Control Program** to implement policy, systems, and environmental change approaches and evidence-based promising practices in cancer prevention, screening, diagnostic follow-up, and survivorship.

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This program is supported through funding from the Centers for Disease Control and Prevention Cooperative Agreement #6NU58DP006450. The report's content is solely the responsibility of the authors and does not necessarily represent the official views of the Centers for Disease Control and Prevention or the Department of Health and Human Services.

Flexing Your Policy Muscles: Advancing PSE Change to Support Healthy Eating, Physical Activity, and Better Health for All

Julie Ralston Aoki, JD, Director, Healthy Eating & Active Living Programs, Public Health Law Center (PHLC)

This part of the webinar was about how coalitions could facilitate policy development in the nutrition and physical activity space.

Good Policies Must Be Based on Community Values and Priorities

The superpower of Comprehensive Cancer Control coalitions is that they can help communities to connect with practical and effective policy ideas. For example, there are many good policy ideas in the recent document [*Increasing Healthy Nutrition and Physical Activity Across the Cancer Continuum through Policy, Systems, and Environmental Change: A Resource for Comprehensive Cancer Control Coalitions*](#) that was published by the *American Cancer Society Comprehensive Cancer Control* group.

Good policy ideas must be based on community values and priorities if the policies are to be accepted and sustainable: a good policy on paper will have difficulty if there is no community support for it. So, authentic community engagement and inclusion are important to ensure equity is baked into the policy development process. The policy design process includes the stages of identifying, designing, developing, adapting, implementing, and evaluating new policies.

The Six Stages of Public Health Law and Policy

Principles of equity and community engagement must be part of all six stages of policy development listed below. The six stages do not always occur in a linear order; instead, it is more helpful to view the list as a circle or reiterative process where the focus and work can shift both forward and backward among stages as necessary.

1. Gathering research, evidence, experts, and expertise: culturally competent and representative of community members
2. Identifying solutions: assuring those most impacted have the power to decide on legal solutions
3. Drafting: grounded in cultural competence; consider consequences on marginalized communities
4. Advocacy: compromises are not made at the expense of the most-impacted
5. Implementation and education: those most affected receive support
6. Enforcement and evaluation: assess effectiveness in all communities, troubleshoot, and correct unintended consequences

Think About Implementation Issues Up Front

It is important to recognize the characteristics of the implementation environment upfront when first designing policies before they are written down. Practical implementation considerations should inform the policy design and development, and there should be community support for implementation processes – otherwise, the policy will struggle and be less effective. See the [Focusing on Equity and Inclusion](#) resource by the [Public Health Law Center](#) for more information on how to incorporate equity and inclusion into each stage of the policy process.

Pandemic Impacts on Policy Development

The pandemic impacted many people with loss of loved ones, loss of jobs, economic impacts, remote work and schooling, and accompanying mental health and wellness challenges. In addition, the pandemic and the murder of George Floyd have brought renewed urgency for dealing with structural racism. The environment can make it difficult to think about nutrition and physical activity policy development. But one of the silver linings of hard times is that people become very activated and passionate about various causes. Coalitions might be able to tap into that passion and add newly activated members to support the coalition work.

One way to do this is to think about the movement around racism as a public health crisis. Coalitions can partner with advocates who are addressing systemic racism and how it affects access to healthy food and physical activity opportunities across a spectrum of sectors in society.

Another way is to consider supporting issues such as environmental work and eliminating police violence. These issues may not seem to be related to people, but they all trace back to the same systems and power structures that impede health equity progress. By partnering with advocates who are focused on these issues, you can build your own understanding and see the ways in which these issues intersect, and gain new allies to help advance your work as well. The Public Health Law Center believes that equity and inclusion are the foundation of all public health work, including nutrition and physical activity work, and sees that in the wave of policies declaring racism to be a public health crisis, where racial health inequities connected with nutrition and physical activity issues are surfacing in a variety of ways.

For example, a 2020 local county resolution from Cuyahoga County, Ohio, called out racial disparities in rates of food insecurity, hunger, food deserts, obesity, lack of green space and parks, neighborhood safety, and other conditions that have resulted in significant differences in health outcomes, life expectancy, and infant mortality across the County by racial group. Many of these policy areas are also discussed in [the ACS CCC PSE guide](#).

The pandemic has also shifted the priorities of many healthy eating policy advocates to focus on policy tools for getting healthier food into food shelves and into food banks in ways that are respectful of the clientele while acknowledging the constraints of such food systems. Some programs are focused on making healthy food more easily available to people who are dealing with job losses, disruptions, and economic and social impacts from the pandemic. For example, some policies encourage fresh produce incentive programs (VeggieRx) and support mobile markets to bring food out to neighborhoods where people might be wrestling with transportation issues or where transportation systems are faltering or lacking. Policies supporting community gardens are also helpful.

Policy Priority Ideas for the Pandemic

Nutrition. Healthy food access, healthy food banks, supports for those who have lost jobs; fruit and vegetable incentive programs; mobile markets and community gardens

Physical Exercise. Exercise prescriptions; parks and trails; bike and pedestrian master plans; complete streets; and safe routes to schools and parks

Physical Activity

Improving access to safe, outdoor green spaces for physical exercise is a good strategy for helping people to maintain their physical and mental health resiliency. For example, for exercise prescriptions and follow-up services provided by doctors to be effective and feasible, people need to have access to parks and trail systems to promote physical activity. We have seen that trail systems have become valued and popular in many communities.

Barriers to the use of green spaces can include awareness, language barriers, transportation, racism, and potential interactions with park police, so policies and programs that mitigate these issues are helpful.

Complete Streets policies integrate people and all modes of transportation into the planning, design, construction, operation, and maintenance of transportation networks to ensure streets put safety over speed, balance the needs of different transportation modes, and support local land uses, economies, cultures, and natural environments. Policies that encourage complete streets are beneficial to help people get to the places where they need to go for food, school, work, or exercise. Also, consider Safe Routes to Schools policies – consider that if more kids could walk or bike to their schools, the current school bus driver shortage might be less acute.

Green Spaces and Cultural Relevance

A focus group study in the Twin Cities, Minnesota, showed that different population groups wanted to use green spaces and regional parks for different purposes. The primary barriers experienced by the different population groups in using and being in these spaces were also different. (See excerpts below.) Barriers to the use of parks and green spaces by Black and Brown people can include awareness, language barriers, lack of transportation, actual and perceived racism, fear about potential interactions with park police and white people in parks; policies and programs that are designed to address and mitigate these issues are necessary for making these spaces feel safe, accessible, and relevant to all community members.

Preferred Outdoor Recreational Activities by Focus Group Type				
African American	African Immigrant	Asian Immigrant / Asian American	Hispanic / Latinx	Diverse Composition
Picnic/BBQ	Use playground	Walking	Celebrate/party	Walking
Bike	Walking	Fishing	Picnic/BBQ	Use playground
Basketball	Be with family	Rest and relax	Be with family	Swim, visit the lake

Most Prominent Barriers to Regional Park System Visitation by Focus Group Type				
African American	African Immigrant	Asian Immigrant / Asian American	Hispanic / Latinx	Diverse Composition
Lack of awareness	Time	Lack of awareness	Lack of awareness	Time
Transportation	Lack of awareness	Language barriers	Time	Lack of awareness
Fear/safety Map challenges Discrimination	Transportation	Weather	Cost	Fear/safety

Policy Areas for the Racism as a Public Health Crisis Issue

The following areas are implicated in policies declaring racism to be a public health crisis and calling for action to address it as such:

- Economic: unemployment, minimum wage, wealth, debt, business, retail environment
- Housing: redlining, homeownership/lending, appraisal rates, affordable healthy housing
- Educational: test scores, school discipline, funding, special education
- Social services: reported child maltreatment rates, out of home placement rates
- Legal system: police brutality, stop/arrest rates, access representation, incarceration/sentencing, crimes of poverty, fines, and fees

- Environment: air quality, air pollution exposures, clean water, urban renewal, health, insurance coverage, access to quality and culturally competent medical care, maternal and infant mortality, drowning rates, commercial tobacco rates (flavored tobacco sales, access to cessation), access to affordable, healthy, culturally-relevant food, access to green spaces, mental health/trauma
- Other issues, such as quality assisted living/elder care, substance use disorder, immigration, transportation, labor protections, COVID-19 severity/vaccinations, voter/delegate disenfranchisement

The PHLC is developing a toolkit to support the development of effective policies centered on recognizing and addressing racism as a public health crisis – coming out in late fall 2021.

Coalition Example: Minnesota Cancer Alliance

Coalitions can create significant positive changes through policy work. For example, the [Minnesota Cancer Alliance](#) is a coalition of more than 100 partners that work to reduce the cancer burden in Minnesota. Their 2015 state cancer plan focused on three objectives to reduce obesity: increase healthy eating, increase physical activity, and increase the number of people with healthy body weight.

The Alliance focused on reducing the consumption of sugar-sweetened beverages as a priority policy strategy. They formed a healthy beverage working group that included the state Comprehensive Cancer Control program staff at the [Minnesota Department of Health](#), local public health staff, hospital and health system partners, union kitchen staff, community-based organizations, and the PHLC.

This is an example of the power of a coalition to help amplify and expand partnership networks and coordinate across different sectors. The project encouraged dozens of hospitals and clinics throughout the state to change their food and beverage environments to reduce or eliminate sugary drinks. The [Public Health Law Center](#) developed a [Healthy Healthcare Toolkit](#) based on this work.

State and Local Nutrition Policy: Strategies and Opportunities

Meghan Maroney, MPH, Senior Policy Associate, Center for Science in the Public Interest

This part of the webinar highlighted the power of state and local policy, gave policy examples related to nutrition and school food for children, and encouraged coalitions to recognize opportunities to build partnerships to advance their policy goals.

The *Center for Science in the Public Interest (CSPI)* is an independent, nonprofit, consumer advocacy organization that provides practical, science-based advice to consumers interested in nutrition, food safety, and health and leads advocacy for a healthier food environment in communities nationwide. CSPI's funding comes from the subscribers to its Nutrition Action Healthletter and from foundations and individual donors who support policies that protect the environment and public health. CSPI takes no corporate or government donations. This webinar focused on their school food policy work.

Big P and Little p Policy Actions

Policy approaches can be the most effective way to improve the health of populations through building partnerships to advance policy goals. Big P policies are formal laws, rules, and regulations enacted by elected officials at the local, state, and national levels. Little p policies are also important and typically happen at the organizational level (worksites, hospitals).

Big P federal policies are usually envisioned when talking about policy, but state and local policies play a large role in shaping the federal policy landscape. For example, a large amount of groundwork done at the state and local levels prepared the way for the landmark federal *Healthy, Hunger-Free Kids Act* that was passed in 2010.

When states pass policies, it creates not only state legislators who champion healthy school meals but also helps to create federal champions for the issue. For example, school food improvements in state legislatures cultivated support from members of Congress that ultimately supported the *Healthy, Hunger-Free Kids Act*.

Policy opportunities for state and local school meal policies include the state legislature, a governor's executive order, the Board of Education, the Child Nutrition Agency, and local wellness policies.

CSPI Funding and Policy Activities

CSPI has funding for grants to secure state and local food and nutrition policies that improve public health and provide models that can be replicated and scaled. CSPI is currently funding state/local policy campaigns in SNAP, menu disclosures, healthy retail, kids meals, and school foods.

Of the policies listed in the "Evidence-Based Nutrition and Physical Activity PSE Strategies" table of your PSE guide, CSPI currently works in the following policy areas: restaurant nutrition, labeling, point-of-purchase prompts for healthy foods, fruit and vegetable incentive programs, sugar-sweetened beverage taxes, and healthy vending machine policies.

CSPI provides technical assistance to grantees, resources including model policies, assistance for state legislators to modify legislative bills, fact sheets, talking points for legislators and key stakeholders, and lobbying support for policies.

Policy Development Process Takeaways

The author recommended a policy development process that included the following steps:

- It is very important to find relevant stakeholders in the state or locality where the policy will be enacted, including individuals or groups that represent individuals who will be impacted by the policy. Ask existing partners to help you recruit and facilitate introductions to potential new partners. Do online searches and do cold-calling outreach if needed.
- Set clear goals for the policy effort to ensure that everyone is aligned around the same goals.

Policy Coalition Examples

For example, CSPI co-convenes the *National Alliance for Nutrition & Activity (NANA)* coalition (which has over 500 national, state, and local member organizations) which advocates national policies and programs to promote healthy eating and physical activity to help reduce the illnesses, diseases, disabilities, premature deaths, and costs associated with diet and inactivity. The *American Cancer Society Cancer Action Network (ACS CAN)* is on the steering committee and is a very valuable partner. Working in a coalition is immensely helpful because it multiplies the impact of your efforts. Some examples of the NANA coalition activities include circulating organizational sign-on letters, developing and circulating communications materials, and lobbying to support federal school food priorities.

In 2019, CSPI convened a new coalition called the *State and Local School Nutrition Policy Coalition* and developed a coalition charter that outlined the mission and vision as well as the types of policies that the coalition would support. Since it can be challenging to channel everyone's ideas and priorities into the same issue and remain focused, creating a clear coalition charter is important because it helps to ensure that all coalition members are on the same page.

The mission of the new coalition was *“to collaboratively support the enactment of state and local policies that protect the health of students across the nation by codifying policies and law that require adherence to strong nutritional guidance as intended by the original school meal nutrition standards established by the Healthy, Hunger-Free Kids Act of 2010.”* The coalition has returned to its mission statement multiple times for guidance to help discern the alignment between the original mission

statement and multiple opportunities for new projects and priorities. They have 19 groups that work on separate issues related to healthy water, food, beverages, and nutrition.

The COVID-19 Impact on Policy Work

The COVID-19 pandemic has made state and local policy work more challenging than ever, but the work is also more important than ever. The economic impact of the pandemic made access to school meals a top priority issue for CSPI. They had to pivot and be flexible in their group goals to respond to the pandemic. In response to the pandemic, they developed success stories about schools that had created innovative approaches to serving meals, conducted a qualitative survey of school foodservice operations on pandemic challenges, and conducted a 50-state scan of state agency implementation of federal waivers.

Coalitions should examine the policies they want to support in the context of the COVID-19 environment and think about how to strategically reframe the coalition goals accordingly.

Despite the challenging times for school nutrition, good news recently came out of California and Maine, which are the first two states to fund statewide free meals for all children.

Online Resources

Nutrition Resources

- Center for Science in the Public Interest – nutrition and policy resources by topic
<https://www.cspinet.org/protecting-our-health/nutrition>
- Healthy Food Policy Project - a database with 400 local-level laws related to food systems and healthy food access. <https://healthyfoodpolicyproject.org/>
- Healthy Eating Research - nutrition guidelines for the charitable food system
https://healthyeatingresearch.org/wp-content/uploads/2020/02/her-food-bank_FINAL.pdf
- Feeding America – nutrition and policy resources
<https://hungerandhealth.feedingamerica.org/?s=nutrition+policy>
- Feeding America – *Healthy Food Pantry Assessment Project*.
<https://hungerandhealth.feedingamerica.org/resource/healthy-food-pantry-assessment-project/>
- The National Alliance for Nutrition and Activity (NANA) – policy priorities, resources, membership
<https://cspinet.org/protecting-our-health/nutrition/national-alliance-nutrition-and-activity>

- Public Law Health Center - *Healthy Healthcare Toolkit: Building Blocks for Success*. The toolkit to help organizations create healthy food environments with a special focus on hospitals and healthcare settings.
<https://www.publichealthlawcenter.org/topics/healthy-eating/healthy-healthcare/healthy-healthcare-toolkit>
- Public Law Health Center - community garden policy resources
<https://www.publichealthlawcenter.org/webinar/get-ready-spring-supporting-success-local-community-gardens-through-local-laws-and-policies>
- Wholesome Wave - resources on fruit and vegetable incentives.
<https://WholesomeWave.org>

Health Equity Resources

- Government Alliance on Race & Equity - tools and resources for racial equity
<https://www.racialequityalliance.org/tools-resources>
- King County Equity - *2015 Equity Impact Review Process Overview*.
https://kingcounty.gov/~media/elected/executive/equity-social-justice/2016/The_Equity_Impact_Review_checklist_Mar2016.ashx?la=en
- Montgomery County - *Racial Equity and Social Justice Legislative Review Tool*
<https://www.montgomerycountymd.gov/OLO/Resources/Files/2020%20Reports/RESJLegislativeTool.pdf>
- Network for Public Health Law - *Equity Assessment Framework for Public Health Laws and Policies*.
<https://www.networkforphl.org/resources/equity-assessment-framework-for-public-health-laws-and-policies/>
- Public Health Law Center - *Focusing on Equity and Inclusion*
<https://www.publichealthlawcenter.org/sites/default/files/resources/Focusing-on-Equity-and-Inclusion-2018.pdf>
- St Paul, Minnesota - *Racial Equity Assessment Toolkit*
<https://www.health.state.mn.us/communities/practice/resources/equitylibrary/stpaul-assessmentkit.html>