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Shaping Kentucky’s Future
A Community Guide to Reducing Obesity

Local Success Stories

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EXECUTIVE SUMMARY

In Kentucky, 33% of children, 60% of women, and 80% of men are overweight or obese. Our overweight and obesity rates are the third highest in the nation for children, and the sixth highest for adults.1-4

Health care costs attributable to obesity in Kentucky will reach an estimated $2.3 billion dollars in 2013.5 As these troubling statistics show, the Kentucky obesity epidemic is striking in its dimensions and frightening in its potential. It stands directly in the way of the better life we all want, especially for our children. The diseases associated with obesity—type 2 diabetes, heart disease, and some forms of cancer, to name a few—affect well being and the quality and length of life. An unhealthy work force, expensive to insure and under-productive, undermines our state’s ability to prosper economically.

This epidemic took many years to develop, and it will take many years to reverse. The task is daunting. The important thing is to start, to fight back whenever and wherever possible.

That’s what this report is about: Kentuckians working within their communities and schools to make sustainable changes in policies, environments and systems—changes that make healthy eating and regular physical activity the easy choice. Initiatives like those described in this report have dual benefits. They can help obese and overweight Kentuckians develop healthier lifestyles, and they can help other Kentuckians avoid developing weight problems in the first place.

Prevention is especially important because it can save the state and nation massive amounts of money. An analysis by Trust for America’s Health projected that a five-percent reduction in the national obesity rate would save $30 billion in health care costs in the next five years.5 After reviewing more than 200 published articles, the American Heart Association concluded that:

• Every $1 spent on bike trails and walking paths saves an estimated $3 in health costs.
• Every $1 spent on wellness programs saves a company about $3.27 in medical costs and $2.73 in absenteeism costs.
• Every $1 spent on year-long nutritional and physical activity programs saves $1.17 in medical expenses.6

In addition to statewide policies that support healthy habits, Kentucky clearly needs as many local anti-obesity initiatives as it can muster.7 Here is an overview of the inspiring examples—call them success stories—that are reported in detail in the body of this report.

Success Stories: Communities

WE CAN GET THERE FROM HERE
Making Way for Walkers
Berea/Madison County

One planning commission member’s insistence that all new developments have sidewalks led to a community wide effort to make Berea friendlier to pedestrians. The Complete Streets project is making it much safer and easier to walk or bicycle to school and around town, even to outlying subdivisions and the Indian Fort Theater.

HOW IT AND THEY WILL COME
A Community Trail
Winchester/Clark County

You don’t have to get fancy to create a walking trail for a community. In Winchester, they did it by simply mowing a trail on land owned by the community hospital. Some had their doubts, but now thousands use the Traveling Trail for exercise.

THE BIGGEST BARGAIN
Supporting Breastfeeding Mothers
Louisville/Jefferson County

Breastfed children are more likely to enjoy good health and less likely to become obese. That’s why Louisville’s four birthing hospitals banded together to encourage and support breastfeeding mothers. The program starts at birth, then continues with frequent consultations and, in some cases, home visits. In addition, metro government workplaces have lactation rooms where mothers can express breast milk, increasing the likelihood that they will breastfeed their children for a longer duration.

A CULTURE OF WELLNESS
A Government’s New Look
Madisonville/Hopkins County

In 2004, the Hopkins County government started a wellness program for its 150 employees. It has transformed the health and improved the performance of many of those employees. The county rewards workers for participating—and at the same time is able to save 10-15 percent in annual health insurance costs.

RETHINKING CONCESSION STAND FOOD
Beyond Nachos
Lexington/Fayette County

Public recreational facilities are essential in the fight against obesity, but they hurt the cause when they sell unhealthy food at their concession stands. In the summer of 2011, Lexington Parks and Recreation offered a healthy menu, called Better Bites, at two of its pools. It was a success, and in 2012 there will be a bigger menu and several new venues for Better Bites.

OASES IN FOOD DESERTS
Healthy Food at Urban Markets
Louisville/Jefferson County

Many urban markets used to sell healthy food, but in recent decades some urban neighborhoods have turned into food deserts. Louisville’s Healthy in a Hurry corner stores project is working to change that. Since 2009, the project has helped seven markets sell fresh fruits and vegetables in areas where they were previously hard to find.
GOOD FOOD FOR ALL
Farmers Markets Accept SNAP Benefits
Hopkinsville/Christian County

Fresh produce is great—if you can afford it. In 2009, the Hopkinsville-Christian County Downtown Farmers Market became one of the first farmers markets in Kentucky to accept SNAP nutrition assistance benefits. Now some 30 Kentucky markets are accepting SNAP, making it easier for people with low incomes to enjoy the benefits of fresh produce.

FOOD FILLS THE GAP
Replacing Tobacco Income
Tyner/Jackson County

Looking for ways to help the people of Jackson County replace lost tobacco income, a citizens committee decided to take advantage of the county’s rich food culture by building a fully equipped commercial kitchen. After eight years of effort, it opened in 2010 in Tyner and is available to help people process local food and package it for sale.

SHARING THE HEALTH
Using Schools for Community Fitness
Buckhorn/Perry County; Shelbyville/Shelby County; Lexington/Fayette County

In many communities that lack safe places for the public to exercise, the solution is sitting in plain sight: public school facilities that are often idle after school hours. In these three Kentucky communities, school-community collaborations are putting school facilities to good use in the effort to reduce obesity and improve public health.

PLAY MORE, BE HEALTHIER, LEARN BETTER
Recess Rocks
Science Hill/Pulaski County

Recess is a boon to students’ bodies and minds. One teacher says they may need it most in middle school, but very few Kentucky middle schools offer recess. An exception is the Science Hill Independent School District, where students in grades K-8 get daily recess—and with it a better chance of avoiding obesity and other health problems in the future.

MAKING MONDAYS MARVELOUS
Healthy Monday Campaign
Covington/Kenton County

At Ninth District and Latonia Elementary Schools in Covington, Mondays aren’t blue—they’re a blast. Both schools follow the Healthy Monday program, which includes walking the Monday Mile and eating the Monday Meatless Meal. Students and teachers love it.

PARENT POWER
Fighting Unhealthy Food Practices in Schools
Lexington/Fayette County

Determined to protect her daughters from the diabetes that runs in her family, a Lexington parent began a campaign against the unhealthy use of food in the schools. She has targeted such practices as giving out candy as a reward for good work and passing out fast food coupons to students. Instead of candy, rewards now include extra recess and no-homework passes.

We hope the pioneering work featured here will jump start efforts all across the state. To make it easier to replicate these great ideas, the report includes persuasive language to use in selling the ideas, advice from those who led the initiatives, contact information, and the best resources and references on the topics covered. An Action Worksheet is designed to act as a guide to help your community decide how it will “Shape Kentucky’s Future.” This report will be a success when the stories it tells inspire other Kentuckians to say, “If people can do that in Buckhorn, Lexington, Covington and Hopkinsville, we can do it here!”
Obesity is fast becoming the most serious threat to Kentucky’s health. In the national rankings of overweight and obese children, Kentucky is third, and in the rankings of overweight and obese adults, sixth. From the child who takes medication daily to manage weight-related diabetes to the business owner who is struggling to pay health care costs to the mayor who can’t recruit businesses due to residents’ poor health, this obesity epidemic affects every Kentuckian. It is an obstacle to everything we want to achieve as a state.

Though our obesity picture is disturbing, the work some Kentuckians are doing to reduce obesity is inspiring. These pages feature some of the innovative ways Kentuckians are working to make healthy eating and regular physical activity a way of life in the places where we live, learn, work and play.

Because this is such important work, we propose a challenge to each person who reads this report (yes, you). If there is an idea that inspires you, consider doing what it takes to start something similar in your community. In the following pages, you’ll find resources to make your job easier. Gather together a group to talk about the possibilities, and then take it step by step until you have created something that will benefit your fellow citizens for years to come.

Best practices for reducing obesity at the community level

The efforts featured in this report were successful because they created sustainable, long-term change. In other words, if the people who worked on these initiatives moved away tomorrow, the positive effects would continue without them. The ventures fall into three categories: Policy Change, Environmental Change and System Change (see box). These methods are effective ways of transforming the health of communities. They replace the old way of approaching behavior change, which focused solely on working with individuals rather than populations, and on developing programs that required a continual flow of staff support and money.

The new paradigm asks public health practitioners to create initiatives that “keep on giving.” For example, a workplace class on healthier snacking can give people useful information that contributes to behavior change, but it’s difficult for employees to put what they’ve been taught into practice if the building’s vending machines, cafeterias and meeting fare are chock full of junk food. If, on the other hand, the company provided education and stocked healthy items in all its food outlets, employees would be much more likely to eat better. By creating a system and an environment that makes the healthy choice the easy or default choice, behavior change becomes more doable. The chart on the next page gives more examples of this paradigm shift in public health efforts.

Categories of Sustainable Change

Sustainable approaches change the rules, the physical surroundings and the way day-to-day tasks are accomplished, tipping the scales in favor of healthy choices. These changes alter the fabric of communities in a lasting way.

Policy change

A policy is a rule made up by people in authority to guide the behaviors of other people. It becomes “the way we do things.” It can be implemented through government laws (federal, state or local), and is sometimes referred to as “Policy with a big P.” (See Appendix for Eight Elements of Successful Policy.) Institutions (schools, hospitals, government agencies), businesses, faith-based groups, and even families can also adopt policies. Sometimes the “policies with a little p” (not legislated by elected officials) are written policies; in other cases, they are not written, but are practiced. Examples of policy change include the federal government requiring health messages on cigarette packages, states adopting smoke-free laws, restaurants using only trans-fat-free oils, churches serving water instead of soda at youth events, and parents setting screen time limits for their children.

Environmental change

Environmental changes develop or alter physical conditions or surroundings, especially those in which people live or work. Examples include incorporating sidewalks and bike paths in community design, putting produce coolers in neighborhood stores to increase the sales of fruits and vegetables, designating lactation rooms in workplaces so women can pump breast milk, and removing televisions from home bedrooms.

System change

System change involves creating a workable set of steps for making healthy practices happen as a matter of course. Examples of system change include a school or restaurant setting up a procedure for regularly receiving produce from a local farmer, developing a Walking School Bus that escorts children to and from school, or making a plan for having regular family meals.

Traditional public health practices of health education and promotion are still necessary and support the adoption of the sustainable changes listed above.

Sometimes it is more effective to highlight a cause other than health, such as economics, education or community building.
Get the right people to the table

The chances of successfully implementing policy, environmental and system changes increase when a diverse group of people helps plan and implement initiatives. Getting ideas from representatives of government agencies, non-profit organizations, businesses and the community deepens the understanding of both problems and solutions. Including representatives of the groups you hope to benefit can be a real eye opener for planners as they get an “on the ground” perspective. In years past, health advocates tended to work mostly with other health advocates, but it makes more sense to use a multi-sector approach because health cuts across so many other sectors, including the economy, education, environment and community development. In fact, if an initiative is not moving forward, it can be helpful to ask the question: “Who is missing from the table?” Sometimes adding one or two more people with different perspectives or influence can turn the key.

As you read the stories in this report, you’ll see many examples of collaborative efforts producing better results. For example, the Better Bites initiative that improved the snack options at Lexington public pools and other recreational facilities engaged private and public recreational facility managers, teenage concession workers, pool patrons, farmers, chefs, neighborhood associations, food wholesalers, a food co-op, city council members and the mayor. The range of perspectives and different circles of influence this diverse group brought to the topic greatly enhanced the outcome.

Keep in mind that healthful changes can occur for reasons other than health improvement. For example, architects working to reduce energy costs at Richardsville Elementary School in Warren County recommended removing two fuel-guzzling appliances—the deep fat fryer and the ice cream freezer. Without them, the school used less energy and, as an added benefit, improved the nutritional quality of the meals it served students. Sometimes it is more effective to highlight a cause other than health, such as economics, education or community building. Find out what the people you are working with care about and let that be the focus. Who cares which cause gets the credit as long as things improve?

Health equity is essential

Making health equity an integral part of the planning and implementation process is also an essential element of sustainable change work. Some groups run a significantly higher risk of health problems due to their income, geographic location and/or ethnicity. Something as fundamental as health should not be available to some sectors of the population and not available to others. People with low incomes often don’t have sale places to exercise, or live in “food deserts” with limited access to healthy food. Every proposed health initiative should include careful consideration of how the proposed change would affect vulnerable populations, and be designed to narrow, rather than widen, the health gap. For example, bringing a farmers market to a community could unintentionally widen the gap. Those with higher incomes would gain more access to fresh produce, enhancing their diets, while those who couldn’t afford to shop at the market would make no gains in nutritional status. An Electronic Benefits Transfer (EBT) system that allows people to use their Supplemental Nutrition benefits at the market would help close the gap.

The perfect storm

A perfect storm of events created the obesity epidemic and a perfect storm of actions is needed to reverse it. Our chances of succeeding will be stronger if diverse groups of people, all with an eye to health equity, work together to create sustainable policies and environmental and system changes.

<table>
<thead>
<tr>
<th>Behavior</th>
<th>That was then.</th>
<th>This is now</th>
</tr>
</thead>
<tbody>
<tr>
<td>Healthy eating for senior citizens</td>
<td>Put up signs about the importance of healthy eating at a Senior Citizen Center.</td>
<td>Create a policy and system for a senior citizen center to buy and serve fresh, local produce as a part of a senior feeding program.</td>
</tr>
<tr>
<td>Weight loss for employees</td>
<td>Set up a booth at an annual health fair, handing out flyers about weight loss.</td>
<td>Advocate tax credits for businesses that offer ongoing, quality employee wellness programs.</td>
</tr>
<tr>
<td>Physical activity for children</td>
<td>Help one teacher incorporate physical activity into classroom learning.</td>
<td>Institute a school wellness policy that requires all teachers to incorporate physical activity into classroom learning.</td>
</tr>
<tr>
<td>Physical activity in communities</td>
<td>Provide information to individuals on how to be more physically active.</td>
<td>Work with city planners and government officials to require sidewalks and bike paths in construction and reconstruction of all appropriate road projects.</td>
</tr>
</tbody>
</table>
We Can Get There From Here

Berea’s Complete Streets project is making it safer and easier for residents to walk and bike.

When Donna Alexander’s son walked home from Berea Community School, she instructed him to call her every time he got to the Prospect Street Bridge. “This bridge has no sidewalks and he had to walk in traffic lanes. For so many people that scary crossing is the barrier to walking or biking to town,” Alexander said.

That barrier is about to fall. Thanks to a new Prospect Street Bridge that will have both sidewalks and bike lanes, the Alexander family and others who live in outlying neighborhoods will soon be able to safely walk and ride into town. “It’s going to be huge for us,” said Alexander. And so will the four-and-a-half mile paved trail, now under development, that will connect downtown Berea with Indian Fort Theater. According to Paul Schrader, Berea’s surveyor and Geographical Information Systems (GIS) coordinator, “People from subdivisions outside of town will be able to walk or bike into the city on that trail without stepping on a street.”

These two large projects will powerfully reinforce the smaller efforts Berea has already completed as part of the drive to make streets more pedestrian friendly:

• A walking school bus (a group of children who walk to school with adult chaperones)
• Changing the timing on lights so there is more time for pedestrians to cross
• Making walkway striping more visible (“Abbey Road striping”) at two key intersections
• Putting 18 bike racks around town
• Posting 20 “Share the Road” signs

“Now we have a process where every time we look at a road, we consider walking and biking. It’s not—will there be sidewalks? It’s—where will the sidewalks be?”

• Receiving a $146,500 grant to put bicycle paths around Berea Community School
• Berea’s streets, like those in other Kentucky communities, were designed with cars in mind. So how did this Madison County community become more pedestrian friendly?

According to Mayor Steve Connelly, Berea’s street makeover started with one member of the planning commission. “He was insistent that all new developments have sidewalks. At first, the developers resisted because of the added expense,” Connelly said. “But then his voice was joined by others and it coalesced into a chorus that was heard by local government. We have institutionalized pedestrian safety as part of the Berea strategic plan. Now we have a process where every time we look at a road, we consider walking and biking. It’s not—will there be sidewalks? It’s—where will the sidewalks be?”

In 2004, Connelly began to draw some lines on a map. “We saw places that could be easily and inexpensively connected,” said Schrader. Those lines were the beginning of the Master Trail plan. The Bike Pedestrian Action Committee (BPAC), composed of Berea citizens, was formed to help guide the process.

In 2009, the Madison County Health Department received a $36,000 Healthy Communities grant from the Kentucky Department for Public Health. Health Education Director Ruth Hawkins convened the Berea Healthy Communities Board (BHCB), which brought together representatives from public schools, law enforcement, city government, the Cooperative Extension Service, and parents. High school students joined the BHCB at a Safe Routes to School National Training Course held at Berea Community School. The group learned simple things they could do to make walking and biking to school safer. “We took the students’ comments on the crumbling sidewalks and dangerous crossings they encountered walking and biking to school to the city council. They were very convincing,” said Hawkins.

Berea’s Complete Streets project has continued to gather momentum. It is succeeding thanks to impressive cooperation between community groups, which spoke up clearly and persistently, and government, which lis-
“It’s amazing how much the business sector has told us that it’s the bike trails, hiking and recreation that set Berea apart. It is hard to overestimate how much this kind of infrastructure brings to a community.”

Advice for other communities

- **Have a Ruth:** “Every community needs a Ruth,” said parent activist Rebecca Parish, referring to the work that the Health Department’s Ruth Hawkins has done to pull all the groups together. “Find someone who will be that coordinating force.”

- **Be patient and keep working:** “I can’t overemphasize the difference I hear in city hall over the last six years,” said Paul Schrader. “It’s gone from an attitude of ‘Just suck it up and get over it’ to ‘If you could build one of those trails by my house, I’d sure like to see it.’”

- **Speak out:** A new road that was supposed to have bike paths ended up with none. According to Rebecca Parish, “After this, a group of citizens organized and asked, ‘How can we have a voice so this doesn’t happen again?’” Mayor Connelly said they made a difference. “In order to get local government to change,” he said, “there has to be a constant, thoughtful pressure.”

- **Use GIS (Geographical Information Systems) mapping:** “GIS mapping lets us see where we are and where we want to go. It’s a concrete thing you can show people,” said Ruth Hawkins. Not every city has GIS staff available, but every city in Kentucky has access to that service through their Area Development Districts. [http://www.kcadd.org/District_Contacts.html](http://www.kcadd.org/District_Contacts.html).

- **Make it visual:** “Safe streets need to be visual,” said Rebecca Parish. “The Share the Road signs, cross walk striping and bike racks allow biking and walking to become a part of people’s thinking. They see that this is a possibility. It’s advertising.”

- **Promote collaboration across multiple disciplines and sectors:** “If you just focus on the health benefits, it will be a hard sell,” said Ruth Hawkins. “At the Health Department, we may be thinking about reducing obesity, but other people are thinking about tourism, business, economic development, the tax base and safety. Include people who represent these interests.”

- **Promote the economic benefits:** “It’s amazing how much the business sector has told us that it’s the bike trails, hiking and recreation that set Berea apart. It is hard to overestimate how much this kind of infrastructure brings to a community,” said Mayor Connelly.

- **Ask for help:** When they identified an unsafe crossing that involved a state road, they called the Kentucky Department of Transportation. “We met with them and they took action. It was easier than we ever imagined,” said Ruth Hawkins.

- **Tell them how it affects you:** Residents of Berea were told how Complete Streets spur economic development, the tax base and safety. Include those who have vision impairments, including older people and children, people who use wheelchairs, and those who have vision impairments.

- **Tell them how it affects you:** “I can’t overemphasize the difference I hear in city hall over the last six years,” said Paul Schrader. “It’s gone from an attitude of ‘Just suck it up and get over it’ to ‘If you could build one of those trails by my house, I’d sure like to see it.’”

Where Can You Walk in Kentucky?

The 2010 Kentucky Health Issues Poll (sponsored by the Foundation for a Healthy Kentucky) surveyed Kentuckians about the walkability of their communities. The poll found:

- Only one in three Kentucky adults (32%) says that there are many destinations to walk to within walking distance of their homes.
- Less than half of Kentucky adults (47%) say that there are sidewalks or shoulders on streets that allow for safe walking.

Regional differences in the walkability of Kentucky communities were also reported. The poll found that just 28% of residents in Eastern Kentucky had access to sidewalks or streets with shoulders that allow for safe walking, jogging or biking, compared with 63% of residents in the Lexington area, 61% in Northern Kentucky, 49% in the Louisville area, and 47% in Western Kentucky.

**RESOURCES**

- National Complete Streets Coalition [website](http://www.completestreets.org/)
- Kentucky Transportation Cabinet [website](http://www.saferoutesinfo.org/)

**CONTACT INFORMATION**

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Paul Schrader, GIS Coordinator, City of Berea: pschrader@bereaky.gov
When avid walker and runner Gina Lang moved from Indianapolis to Winchester, she was surprised by the lack of trails in the area. Indianapolis had miles of trails right through the center of the city that she used regularly. Driving to work in Winchester, she noticed a scenic piece of farmland right across from Wal-Mart. That, she thought, would be a great place to walk. "Though I'm good at connecting people," said Lang, "I had no idea how to get a trail started." Luckily, she met Kristian Wagner, Health Education Coordinator of the Clark County Health Department, and shared her "crazy idea of putting a trail smack dab in the middle of Winchester."

Wagner saw promise in the idea and invited Lang to the next meeting of the Clark County Physical Activity Coalition. Lang told the group that the land she had her eye on was at the corner of Colby and By-Pass Roads, and was owned by the Clark County Regional Medical Center, the local hospital. The coalition agreed to ask the hospital if they could borrow the land for a hiking trail. Rather than paving a path that would be expensive and permanent, the coalition proposed creating a trail by simply mowing a .9 mile swath of land for walkers to follow. When the hospital is ready to develop the land, the trail could be moved to a new location, making it a "traveling trail."

The next step was to pitch the idea to the hospital. Lang had worked with the CEO, Bob Fraraccio, on other civic projects. Liability was his main concern. What if someone got hurt on the trail? Lang urged him, "Just see if the hospital board will even consider the idea. If they will, I will figure out the liability piece." Once the hospital board said "maybe" to the trail, Lang went to her neighbor, Ken Mozingo, who was the insurance agent for the health department. Mozingo had an idea: ask the hospital to lease the land to the Clark County Health Department for a dollar a year. The department could then cover the trail on its insurance policy at no additional cost.

After the hospital and health department agreed to the plan, there was one more hoop to jump through: getting approval from the Winchester Commission for Planning and Zoning. Seventy people showed up to support the trail at a public hearing, while ten people opposed it. The opponents had property next to the trail and were afraid it would attract crime. "The idea that trails attract crime is unfounded," said Lang, citing a study by the Rails to Trails Conservancy. The commission approved the Traveling Trail and over time, Lang said, "Some of the people who spoke out against it have become regulars on the trail."

With the plan worked out, the community came together to create the nearly mile long circular route. Parks and Recreation agreed to add the trail to its regular mowing rotation and brought some benches out of storage to provide seating along the path.

“I had the crazy idea of putting a trail smack dab in the middle of Winchester.”
A local construction company, Graves and Dean, spread pea gravel, donated by the city, to make a parking lot. Ertel Medical Center paid for signage. Local veterinary clinics donated the dog stations. The Rails to Trails group built a bridge over lowlands. “That’s why you have a lot of people working on this,” said Lang. “If it were just me, there would have been a lot of walkers with soggy feet. Jon Walker, the president of the local Rails to Trails chapter, saw immediately that we needed a bridge.” Looking ahead, other landowners have come forward to offer their properties as possible sites for the trail if the hospital should decide to build on the land.

The Physical Activity Coalition estimates that the trail has over 3000 uses in the spring and summer. One big fan is 68-year-old Harvey Frye. The trail has made it much easier for him to get the exercise he needs to help control his diabetes. “For several years I walked on neighborhood streets,” said Frye, “but several factors make this form of exercise less than desirable at times: reduced visibility after dark, occasional unrestrained and unfriendly dogs, and vehicular traffic. The availability of a public walking trail near my neighborhood has removed all these problems for me during my daily 2½ mile walks.” In addition to daily use by individuals, the community also uses the trail for special events like the Turkey Trot, a 5K race held a few weeks before Thanksgiving.

“On a pretty day you can see the cars lined up in the parking lot,” said Gina Lang. “And since the trail is so visible, it encourages others to use it when they see people walking. The Traveling Trail has become a very social place. When you make exercise social, you have taken it to a whole other dimension in people’s lives.”

**Advice from Winchester partners**

**Start small:** Even if you can just borrow a quarter of a mile for six months, it’s worth it. Once people see and use the trail, they “get it” and it paves the way for bigger projects.

**Expect some controversy initially:** In almost all communities there is controversy the first time a community use is proposed for private land. The supporters will likely outnumber the naysayers. Just make sure you have the supporters organized to attend public hearings.

**Collaboration is crucial:** Scott Lockard, Public Health Director of the Clark County Health Department, recommends, “Bring as many partners into the process as possible, especially those from the private sector. This initiative was successful because many different entities worked together to come up with creative ideas to address a need in the community.”

### RESOURCES

**Language for the Kentucky Adventure Tourism Bill** / Kentucky Legislative Research Commission

http://www.lrc.ky.gov/record/08rs/SB196.htm

**Winchester Traveling Trail** website / Clark County Physical Activity Coalition

www.travelingtrail.org

### CONTACT INFORMATION

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Nurse Jennifer Ruhs had an “aha moment” in the Baptist East delivery room two months after the Louisville hospital adopted a policy of skin-to-skin contact—called Kangaroo Care—for mothers and newborn babies. Ruhs’ patient planned to bottle feed because her attempt to nurse her first child ended in frustration. Moments after he was born, her second child was placed on her chest to regulate body temperature and encourage bonding. He wriggled around a bit, found the breast on his own and began nursing. “His mother and I were both surprised that it was so easy,” Ruhs said. When the mother went home, she was still breastfeeding and said she intended to continue.

Making skin-to-skin contact routine for newborn babies and their mothers means this baby will now receive the lifelong benefits of breastfeeding. He will benefit from better development of his brain and immune system, and be less likely to become overweight or develop gastrointestinal problems, allergies and ear infections. “Breastfeeding would win awards,” said Karen Lamberton, Advanced Practice Nurse for Women’s Health at Baptist East, “for all it can do to impact an individual over the course of a lifetime. It gives the biggest bang for the buck in the health care world.”

The good news for Louisville families is that the four birthing hospitals in the city have joined together to craft a metro wide policy so that no matter where a woman delivers, she gets the support she needs to make breastfeeding successful. In addition to Kangaroo Care, the hospitals offer comprehensive breastfeeding information for all pregnant women, state-of-the-art training for staff, and one-on-one nursing support for moms and babies while still in the hospital.

Support for breastfeeding moms in Louisville doesn’t stop in the hospital. The federal grant to the Louisville Metro Department of Public Health and Wellness that supports the hospital breastfeeding initiative also provides for Outpatient Lactation Support Clinics. These outpatient services are free to any woman in the city, no matter where she delivered. At Baptist East, the lactation clinic opened in November 2010. “If you don’t provide ongoing support,” said Joan Wempe, Mother Baby Nurse Manager, “the patient may not continue to breastfeed. At discharge we give them info about the lactation clinic.” The Baptist East clinic provided 175 consultation visits in the first five months. “The number of calls we get continues to increase each week,” Wempe said.

First time mother Brittany Piascik used the Baptist East lactation clinic every week for the first six weeks of her daughter’s life. “I don’t think I would still be breastfeeding if it weren’t for this service. Each week I’d have some new problem. I’d call or go see them and get right back on track. My daughter is doing great.”

Women who live in zip codes with less access to health care are prioritized. “Any time we have a woman from those areas deliver, we let the visiting nurses with HANDS (Health Access Nursing Development Services) know so they can provide lactation and other parenting services to

Certified Lactation Consultant Melissa LaMaster, right, assists a new mom. New mothers who need help with breastfeeding can get free assistance through outpatient lactation services offered at Baptist East Hospital in Louisville.
families that might not otherwise get this service,” Lamberton said.

Breastfeeding in the work place

Louisville is also providing breastfeeding support for women who return to work. “We know,” said Barbara Ruedel, Regional Breastfeeding Coordinator, “that 80% of women in the childbearing years have to work. We want to make sure that these moms can breastfeed as long as they want.”

With the support of former mayor Jerry Abramson and his successor, Greg Fisher, Ruedel helped develop policies to assist nursing mothers who work for the city. Nursing mothers in city government are entitled to work breaks to express milk, a private room (lactation station) in which to do so, the loan of breast pumps, and breastfeeding consultation from Ruedel, a Certified Lactation Consultant.

“We identified 12 sites in metro government to set up lactation stations including the Louisville Zoo, City Hall and the Solid Waste Department,” said Ruedell. “When it came time to identify rooms, it sure made it easier to be able to say ‘The mayor says so.’

We furnished each room with a table, chair, bulletin board and lamp. Some places had most of this already. The most we spent on a room was $400.” The worksite Lactation Stations, which require a door that locks, opened in February 2011. The station in the Louisville Health Department building was used an average of seven times a day during the first three months.

Health Department employee Lora Rambo has a desk in a cubicle and expressed milk for her baby before there were any lactation rooms. “I would go into a conference room,” says Rambo. “Someone would need the room and I would have to stop in the middle and scramble around to find another place. This is so much better.”

Employee Marigny Bostock, who uses the room routinely, said, “I have a friend who is a teacher who was given no time or place to pump at work so she could only breastfeed for four months. It’s hard to be away from your baby, but this makes it easier.”

“Since this came out in the news,” said Ruedel, “I have been contacted by GE and UPS for help in setting up lactation rooms at their sites. Hopefully, this will become the norm in public and private work places.”

Advice for other communities

Core group: Find the core group of people who are interested in helping in your community. The more people you include, the more outreach you can do.

Promote federal law: The federal health care reform act passed in 2010 requires businesses with more than 50 hourly wage employees to provide a lactation room (not a bathroom) and flexible scheduling for nursing mothers. Communities can leverage this new law by getting news coverage and holding workshops for employers.

Return on investment: Worksite administrators want to know the ROI (Return on Investment). Show them it’s low cost, keeps mothers happier and more productive, increases loyalty to the company, and reduces absenteeism and health care costs. Work with Human Resources Departments to make lactation support an employee benefit.

RESOURCES

Standards of Medical Care for Breastfeeding Mothers and Infants: Clinical Protocol #7 / Academy of Breastfeeding Medicine
http://www.bfmed.org/Resources/Protocols.aspx

The Baby-Friendly Hospital Initiative / UNICEF and the World Health Organization
http://www.unicef.org/programme/breastfeeding/baby.htm

The Business Case for Breastfeeding: Easy Steps to Supporting Breastfeeding Mothers / U.S. Department of Health and Human Services

Selling Points

for Breastfeeding
in Your Community

- Breastfeeding plays a foundational role in preventing weight problems in children. Children fed only breast milk for the first six months of life are 22% less likely to be overweight by age 14.

- Women who exclusively breastfeed for six months are more likely to lose weight and body fat mass.

- In 2009, only 58% of all Kentucky infants were breastfed at birth, compared with 75% of infants nationwide. At six months, only 33% of Kentucky babies were still being breastfed compared to 44% of babies nationally.

- Mothers are the fastest-growing segment of the U.S. workforce.

- Well-designed work place lactation support programs increase breastfeeding rates and reduce health care costs for businesses.

- Encouraging breastfeeding has many benefits for employers including less illness among the breastfeeding children of employees, reduced absenteeism to care for sick children, lower health care costs (an average of $400 saved per baby over the first year), higher employee productivity, and improved ability to attract and retain valuable employees.

- Creating basic accommodations for lactating women can cost businesses next to nothing, yet the return on investment can be significant.

- A policy supporting worksite lactation will help ensure equal access to accommodation regardless of employee position.

CONTACT INFORMATION
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A Culture of Wellness

The Hopkins County government’s wellness program improves employees’ quality of life and saves money for the taxpayers.

“I have always struggled with my weight,” said Sheila Hopper, the administrative assistant in the Hopkins County Sheriff’s Office. “I probably lost the same ten pounds a hundred times.” But when the county government started an employee wellness program in 2004, Hopper said the fitness and nutrition information they offered pulled it all together for her. “I finally learned how to do the right things. I lost 30 pounds and have kept it off for eight years. My cholesterol levels improved. It has absolutely changed the way I feel. I used to be so tired at the end of the day and now I have much more energy.” And Hopper is not the only person who found the wellness program life changing. Her co-workers, Linda Todd and Punkin Arnett, lost 80 and 100 pounds, respectively.

In eight years, the Hopkins County Government, based in the county seat of Madisonville, has created an enviable culture of wellness in its workplaces. Imagine working in a place where eating healthy and exercising are the norm, and many of your co-workers have lost weight and kept it off for years. Picture healthy potlucks and fitness equipment available for use in your building, plus financial incentives and time off work to attend high quality wellness programs. Envision top administrators serving as role models, losing weight and giving up smoking. These are realities for Hopkins County’s 150 employees.

According to County Treasurer Cindy Jones, the administration started the comprehensive wellness program after an insurance agent with the Kentucky Association of Counties (KACo) said it would lower their insurance premiums. So far, Jones estimated, the program has saved the county 10-15% in insurance costs. She gives much of the credit to Carol Donnelly of K.C. Wellness, the program’s administrator. “We used a high quality wellness provider,” said Jones. “You can’t just do this on your own. You have to have someone who knows what they’re doing. K.C. Wellness has offered excellent services.” These services include assessment of employees’ health issues, goal setting and data collection for the organization, workshops, health fairs, coaching, and weight loss and fitness challenges.

“I know of no other county government in Kentucky that is more proactive in offering comprehensive wellness services to employees,” said Carol Donnelly of K.C. Wellness. “Right from the beginning they incentivized the program by giving employees $25 a month toward health benefits if they attended a minimum number of wellness events. They encouraged Public
“They encouraged Public Works employees to come in off the road and attend wellness sessions. The employees said, ‘Cool, I can stop digging a ditch and come learn about my health in the air conditioning.’”

Works employees to come in off the road and attend wellness sessions. The employees said, ‘Cool, I can stop digging a ditch and come learn about my health in the air conditioning.’ The first year the wellness program was offered they had a 93% participation rate among employees, which is an extraordinarily high rate in the industry.” The reward for participation has changed over time. “Going forward,” Jones said, “it will be a $300 monetary award paid in December 2012 for participation. It will not be associated with health benefits. That dollar amount could go up or down in future years, depending upon the decision of the Fiscal Court.”

Hopkins County Jailer Joe Blue said it was a combination of the wellness program and wanting to get fit for a family cruise that inspired him to lose 40 pounds. He said, “I couldn’t be much of a role model if I couldn’t fit into my uniform. My captain lost 40 pounds too. People think if the guys at the top don’t care, why should they?” Blue made a number of changes to help both employees and inmates improve their health habits, lowering medical costs for both groups and reducing staff absenteeism. The changes include putting exercise equipment in the employee break room, improving the food served to the inmates at the jail (less fried food and more whole grains and vegetables) and starting a 1½-acre garden to raise food for the jail kitchen. “Our food is much better since we started the garden. We serve 1200 meals a day. We couldn’t afford to serve all this fresh produce if we weren’t growing it. The garden has given inmates agricultural job skills, better health and cut food costs,” said Blue. Nine inmates have received the Master Gardener certificate and a culinary program teaches inmates cooking skills to increase job readiness. “I want to make sure that when the men leave Hopkins County Jail, they leave with more than they came in with,” Blue said.

Advice for other communities

Document results: Document the changes that occur as a result of the wellness program. “You have to convince the fiscal court that this is worth it,” said Jones. “I put their concerns to rest every year with figures of improved health and money saved.” In 2009, she reported that 66 Hopkins County employees lost 372 pounds collectively in the Jump on Life program. Individual weight loss ranged from one to 49 pounds over ten months with an average loss of 5.6 pounds per person. “People understand if someone loses weight they’re going to be healthier and more productive.”

Incentivize: Incentivize the program with money and time off work. Employees will see that you take this seriously and that you care about their health.

Advisory group: Set up a wellness committee with representatives from all departments. They can tell you what will work in their area and spread the word about wellness programs to their co-workers.

Community partners: Partner with the community. In Hopkins County, the Trover Health System offers county law enforcement officers free membership to its gym, Fitness Formula.

RESOURCES

(This site has many other quality wellness tools on the right side of page.)

Welcoa: Wellness Council of America website www.welcoa.org

Selling Points for Worksite Wellness in Your Community

- At the current rate of increase, the cost of health care to employers will likely be the single most significant detriment to profitability and viability over the next decade.
- According to the Centers for Disease Control, more than 75% of employers’ health care costs and productivity losses are related to employee lifestyle choices.
- Weight gain and weight loss are contagious. People tend to adopt the behaviors of the people around them, whether it’s burgers and sodas or walking and salads.
- A review of 73 published studies on worksite health promotion programs shows an average return on investment of $4.30 for every dollar spent on wellness programming.
- Healthy employees boost a company’s bottom line. They take less sick time, fewer disability days, run a lower risk of premature death, and are more productive.


Hopkins County Jail Garden http://www.hopkinscountyjail.com/CommunityService/garden.html

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Carol Donnelly, President, KC Wellness: cdonnelly@kcwell.com

The Hopkins County Jail has reduced food costs while providing fresh fruits and vegetables and job skills to inmates. Between 2006 and 2011, 33,149 ears of corn, 21,885 pounds of tomatoes and 15,067 pounds of cantaloupe were harvested.
Durin the summer of 2011, the Lexington Parks and Recreation Department tried something new: putting healthy snack choices on the menu at two of its aquatic centers. “We did it because it’s the right thing to do,” said Brian Rogers, the department’s Deputy Director of Enterprise. Recreational facilities like swimming pools are essential tools in the fight against obesity, but many of these facilities are not as effective as they could be. They undermine the benefits of the activities they provide by selling unhealthy food at their concession stands. If people using recreational facilities take in more calories from unhealthy concessions than they burn off through physical activity, they will gain weight, not lose it!

In partnership with the Tweens Nutrition and Fitness Coalition, Lexington Parks and Recreation took on this dilemma by introducing a healthier snack menu at its Woodland and Southland pools. The new menu—called Better Bites—featured nine healthy items. Better Bites did not replace the concession stands’ traditional menu, but it was posted in bright colors next to the ordering windows while the standard menu was moved farther away. (See photo.)

In addition to on-site signage and announcements over the loud speakers, Better Bites generated some off-site publicity: an article in the Lexington Herald Leader, a Channel 36 news story, email and Facebook messages, and a Tweet by Mayor Jim Gray.

“I wasn’t so sure how Better Bites would go,” said Parks and Recreation Concession Manager Charlotte Jordan, “but it was well received.”

Melanie Johnson, member of the Tweens Coalition and dietitian with Central Baptist Hospital, said, “We hope Better Bites in 2011 is just the beginning of normalizing healthy snacks in places where kids play. We are working with a number of recreational venues in the community to build the brand so people start to equate recreation with healthier food instead of nachos and candy bars. So far, the Lexington Legends ball park and several local businesses have signed up.” The group also hopes to extend the brand to school concession stands.

The Lexington Parks and Recreation Department has agreed to 50% healthy concession menu items for the 2012 season. A committee selected items based on customer satisfaction, storage, ease of preparation, nutrition, and profit. Proposed new menu items include Better Bites combo meals (sandwich, bottled water and fruit), yogurt parfaits, all fruit popsicles, string cheese, sunflower seeds and lowfat yogurt.

Summary of Better Bites Sales in June and July 2011

- Better Bites brought in $6,862, or 9% of the concession revenue from the two aquatic centers.
- Better Bites sales at Woodland rose over the course of the summer, from 10% of total revenue in June to 13% in July.
- Bottled water (1,540 sold), chicken salad on whole wheat (350), and grilled chicken sandwiches (282) were among the bestselling Better Bites items.
- In the fruit category, the bestsellers were:
  - Grapes (608 items sold)
  - Bananas and apples (490)
- Candy sales were 23% lower in 2011 than in 2010 ($6,194 vs. $8,045). This may be, in part, because candy was placed out of view and because fruit sales displaced some of the candy sales.

A survey of pool patrons found that a majority knew about Better Bites:
- Sixty-two percent of youth and 57% of adults had heard of Better Bites. Signage and word of mouth were the most common ways of learning about the program.
- Sixty-seven percent of youth and 57% of adults had purchased items from the Better Bites menu.
- The majority of youth (90%) and adults (76%) reported regularly purchasing items from the concession stand when they come to the pool. Taste and price were the most important factors for youth. Nutrition, taste, and price were the key factors for adults.
popcorn. The less healthy items that remain on the menu will also be improved. The changes include serving turkey dogs, offering smaller serving sizes for high calorie items and replacing oil used for French fries with a trans fat free oil. And another Veggin’ Out at the Pool dinner featuring locally raised food will be held.

New promotional techniques are being used as well. In 2012 a “Better Bites Needs a Slogan Contest” created buzz in the community and brought in 625 submissions. The winning slogan—Snack Strong—was submitted by 8-year old Caitlyn Smith who won $100, lunch with Lexington Mayor Jim Gray and two pool passes. Other ways to improve Better Bites sales include lowering the prices of healthy items, creating combo snacks (popcorn + sunflower seeds + raisins), offering taste tests and displaying posters of local kids enjoying Better Bites. Lifeguards, highly regarded by young pool patrons, will be incentivized to role model eating healthy snacks by providing them free Better Bites items to eat while on duty.

**Advice for other communities**

- **Price healthy items lower:** Pricing healthier items lower than unhealthy foods increases sales of the healthy food. Slightly increasing costs of unhealthy items, asking for adjusted pricing from vendors or soliciting sponsors to subsidize the healthier items can help support this pricing structure.
- **Promotion is a must:** Advertisers spend billions of dollars promoting unhealthy food. Communities need to fight fire with fire. Use signage, social media, contests, raffles, specials, combo meals, clever names, etc. to draw attention to healthy menus.

**RESOURCES**

- **Concessions Model Policy** / Healthy South Dakota http://www.healthysd.gov/Communities/PDF/ModelConcessions.pdf

**CONTACT INFORMATION**

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Anita Courtney, Chairperson of Tweens Nutrition and Fitness Coalition: anitac@qx.net

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**Selling Points for Offering Healthier Concessions in Your Community**

- Small changes do produce benefits. Eating 100 fewer calories a day can produce a ten-pound weight loss in a year.
- A study titled *The Effect of Food and Beverage Prices on Children’s Weight* found that the Body Mass Index (BMI) of children decreased when the prices were lowered on healthy items. A North Carolina study found that a 10% increase in the price of soda produced a 7% decrease in soda calories consumed. The same increase in the price of pizza led to an 11% drop in calories consumed.

- If children engage in water play for two hours at a pool they burn 424 calories. If they eat a hot dog, French fries and soda from the concession stand they take in 620 calories. This results in a net gain of 196 calories, resulting in “positive energy balance,” otherwise known as weight gain.

- Currently there is a disconnect between healthy play and healthy eating. Having healthy food at recreational facilities gives children a consistent message about a healthy lifestyle.

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**Veggin’ Out at the Pool**

**Adult ticket $10:** □ **Child ticket $5:** □

Friday, July 8, 5:30 – 7:30 pm
(Rain date: Saturday, July 9, 5:30 – 7:30 pm)
Southland Aquatic Center, 625 Hill-n-Dale Road
Ticket includes meal and pool admission after 5 pm.

**SPONSORS:**

**TWEENS**

Nutrition and Fitness Coalition

**GOOD FOODS MARKET & CAFÉ**

Parks and Recreation and the Tweens Coalition, with the help of the Lexington Farmers Market and the Good Foods Market and Café, also presented Veggin’ Out at the Pool—a summer dinner of local foods—in June 2011. The menu featured locally raised burgers and brats, veggie burgers, local sandwich garnishes, potato salad, black bean salad, and a fresh fruit medley for dessert. Highbridge Spring Water rounded out what some guests called the “perfect summer menu.” At a cost of $10 for adults and $5 for children, more than 200 people were served, and more than 50 had to be turned away. The event even turned a profit.
Denise Bentley, who grew up in Louisville’s California neighborhood in the 1970s, has fond memories of the Farm Boy Food Mart on the corner of 18th and Oak Streets. Farmers would pull up to the store and sell fresh produce right off their trucks. “I remember them calling out, ‘I've got fresh cabbage, I've got fresh strawberries,’” says Bentley. “This is how people in downtown Louisville got fresh fruits and vegetables back then. The Farm Boy also had a fresh meat counter so people in the neighborhood could buy all of their groceries there.”

But it didn’t last. Big supermarkets, fast food restaurants and socioeconomic shifts changed urban food culture for the worse, turning some areas into food deserts. Neighborhood stores that sold real food disappeared. It happened to the Farm Boy Food Mart. A new owner abandoned nutrition for beer, cigarettes, lottery tickets.

Definition of Food Desert
Food deserts are areas that lack access to affordable fruits, vegetables, whole grains, low-fat milk, and other foods that make up the full range of a healthy diet.

The Healthy Food Financing Initiative defines a food desert more specifically as a low-income census tract where a substantial number of residents live more than a mile from a large grocery store in an urban area and more than 10 miles in a rural area.

Oases in Food Deserts
Louisville’s Healthy in a Hurry corner stores project brings healthy food to underserved communities.

“Now when people walk in the store, the first thing they see is all the fruits and vegetables, not beer.”
and processed snacks, then went out of business in 2003. In 2011, Luai Hasouneh decided to revive the Farm Boy Food Mart. A major renovation brought natural light and a clean, open feel to the store. Hasouneh reinstated the store’s name and its tradition of selling fresh produce and meats. Lathaisha Brim, who lives down the street, says it’s convenient for her to buy collard greens, bananas and meat from Farm Boy. “The greens are fresh and cheaper than the greens at Kroger. They even deliver,” Brim said. “I call in my order and they bring it right down to me for no charge.”

Luai Hasouneh had help in bringing the Farm Boy Food Mart back to life. He received $13,000 from the Healthy in a Hurry initiative. A Communities Putting Prevention to Work grant administered by the Louisville Department of Public Health and Wellness funds the project, begun in 2009 and coordinated by the YMCA. “Healthy in a Hurry is designed to increase access to fresh produce in low income neighborhoods,” said Sasha Belenky, the program coordinator. “We began with an assessment of 40 neighborhood stores. There was a six-month vetting process. We knew it was important to select stores that were ready to take this on.” Key factors in the selection process were neighborhood population density, the owner’s attitude, the store’s reputation and support in the community, and participation in the SNAP electronic benefits transfer (EBT) and Women, Infants and Children (WIC) programs.

The next step, Belenky said, was rallying partners. “Neighborhood associations, police, churches, schools, the United Way, a design firm, a marketing firm and Paul’s Produce all pitched in to make this happen.” And with very encouraging results: Healthy in a Hurry customers are using corner stores for significant grocery shopping. “Some people walk out with three and four bags at a time, although they usually still make trips to a larger store like Kroger. They’re buying not just snack items, but items they would use to make a meal,” said Belenky.

“The Healthy in a Hurry store program has helped me to offer fresh, healthy foods to my customers,” said Muhammad Akbar, who owns the Happy Food Mart. “With the high cost of a new refrigeration unit and displays, I would not have been able to carry fresh fruits and vegetables without their help.” Jimmy Mitchell of Curtis Market said, “Even though we’ve been offering fresh produce for some time, the Healthy in a Hurry initiative has made it possible to expand the selection we offer to our customers.”

Funding for Healthy in a Hurry Corner Stores will end in 2012, but the YMCA will not abandon the seven stores now in the program. It will still offer technical assistance so that the stores can continue to sell produce and improve the food environments of their neighborhoods.

### Seven Healthy in a Hurry Stores in Louisville

- **Shawnee Market**  
  208 Amy Street in the French Plaza
- **Parkway Food Mart**  
  1201 W. Hill Street
- **Berrytown YMCA**  
  1300 Heaver Road
- **Farm Boy Food Mart**  
  18th and Oak Street
- **Webb’s Market**  
  944 E. Muhammad Ali
- **Happy Food Mart**  
  1201 Cecil Avenue
- **Curtis Market**  
  2720 Duncan Street

### Selling Points for Healthy Corner Stores in Your Community

- Studies suggest that the availability of nutritious foods at corner stores is an important way to promote healthy eating particularly in low-income and minority communities with limited access to supermarkets.¹ ²
- African Americans’ vegetable consumption has been shown to increase by 32 percent for each additional supermarket in the neighborhood.³
- In areas with better access to chain grocery stores, teenagers have been found to have lower BMIs (Body Mass Index) than in areas with a high density of convenience stores.⁴
- The amount of shelf space devoted to high calorie snack foods was positively, although modestly, correlated with increased BMI.⁵
- America’s inner city neighborhoods—with $331 billion in annual retail purchasing power—offer major potential for retail business growth.⁶

### RESOURCES

**Food Environment Atlas** provides a spatial overview of a community’s ability to access healthy food / USDA  [http://ers.usda.gov/FoodAtlas/](http://ers.usda.gov/FoodAtlas/)

**Healthy Corner Store Network** website  [www.healthycornerstores.org](http://www.healthycornerstores.org)


### CONTACT INFORMATION

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Farmers markets are thriving in Kentucky, which is truly good news. They improve Kentucky's economy. The fresh produce they sell is healthy and delicious, and eating more of it could help more Kentuckians achieve a healthy weight. Of course, every success brings a new challenge. Because produce tends to be costly, the benefits of local food are not reaching enough lower income people—those who may need them most.

There is a movement to address this challenge in Kentucky, which ranks 48th nationally in consumption of fruits and vegetables. Optimal produce consumption is linked to a wide range of long-term health benefits, including decreased risk of obesity, cardiovascular disease and various cancers. Twenty percent of the state’s registered farmers markets are now part of a program that helps increase access. One of them is the Hopkinsville-Christian County Downtown Farmers Market, which opened in 2006 in a pavilion in Founders Square. It soon became a much loved part of the community, attracting enthusiastic support, but people with lower incomes did not frequent the market because they weren’t able to afford the food. That changed in 2009 when the market became one of the first in Kentucky to allow people to spend their SNAP dollars on fresh produce sold at the market.

SNAP (Supplemental Nutrition Assistance Program) is the new name for Food Stamps. Thanks to a Kentucky Farmers Market Association grant that covered equipment and transaction costs, the Hopkinsville-Christian County market can now sell good food to SNAP recipients by means of electronic benefit transfer (EBT). People with SNAP benefits simply swipe their EBT cards and receive tokens to use at vendors' stands. The vendors cash the tokens in at the end of the week and the market manager writes them checks.

“The ability to accept electronic benefit transfers for SNAP has diversified the customer base. We’re providing more business to farmers and we’re glad that in our first two years nearly $5,000 of fresh produce was made available to community members who probably would not have been able to come to the market otherwise.”

In addition to making EBT benefits available, the Hopkinsville market has added other services to support shoppers. Since preparing fresh fruits and vegetables is something of a lost art, the staff of the Christian County Cooperative Extension office comes to the market once a month to show customers simple ways to prepare the food they’ve bought.

Eight new farm vendors joined the Hopkinsville farmers market the year the EBT system was put in place. “We think that happened, in part, because we expanded our customer base,” Boggess said. “Our EBT sales jumped 177% between the first and second year it was in operation. We also accept vouchers from the Senior Farmers Market Nutrition Program.” (See box.)

The EBT equipment also allows markets to accept debit cards. Holland said that too has increased sales. “People often say, ‘Oh good, now I don’t have to run to the bank’. And we’ve noticed people tend to spend more money.” Sharon Spencer,
Shaping Kentucky’s Future: A Community Guide to Reducing Obesity

SNAP customers to farmers markets is an emerging strategy to attract vendors just need to be realistic about the EBT units available,” said Woods. “I think good for markets, if at all possible, to make an effective market manager. “I do think it’s concentration of EBT users, strong promotion and if they are in urban areas, have a concentration of EBT users, strong promotion and a convenient take home package,” said nutritionist Merritt Bates Thomas. “It might be some potatoes, zucchini and a tomato for a summer stew. This supports the WIC program’s mission to transfer healthy eating practices to participating families.” Contact Beverly Salchi at Beverly.Salchi@ky.gov for more information.

Farmers Market Marketing Specialist for the Kentucky Department of Agriculture, said, “People pay with plastic everywhere they go. If you don’t have a way to make those transactions, you lose a lot of sales.”

The Hopkinsville-Christian County market has been able to implement electronic benefits fairly easily, but Janet Eaton, president of the Kentucky Farmer’s Market Association, says markets that don’t have funding to support EBT find it difficult to sustain. “The service fee on the wireless machines is $45 per month,” she said. “This can be subsidized by offering debit card services and charging a fee to debit card users. The markets tend to need a lot of technical assistance and support for the first few years.” As of July 2011, thirty of the 151 registered farmers markets in Kentucky reported offering EBT.

According to Dr. Tim Woods, an agricultural economist at the University of Kentucky, markets are more likely to be successful with electronic benefit transfer if they are in urban areas, have a concentration of EBT users, strong promotion and an effective market manager. “I do think it’s good for markets, if at all possible, to make EBT units available,” said Woods. “I think vendors just need to be realistic about the impact.”

Though we know of no examples in Kentucky, an emerging strategy to attract SNAP customers to farmers markets is the use of bonus programs. Funded by private foundations, nonprofit organizations and local governments, these programs provide “bonus dollars” in the form of tokens or paper coupons that match or supplement EBT purchases. In 2010, bonus programs accounted for an estimated $1 million worth of vouchers issued around the country.¹ One example is Philadelphia’s Philly Bucks program, which supplements every $5 customers spend in SNAP benefits with a $2 coupon to buy more produce.

**SOURCES**

**Supplemental Nutrition Assistance Program (SNAP) at Farmers Markets: A How-To Handbook / USDA and Project for Public Spaces.**

http://www.ams.usda.gov/AMSv1.0/getfile?dDocName=STELPRDC5085298&acct=wdmgeninfo

**Overview of WIC Farmers Market Nutrition Program / Food and Nutrition Service**


**Overview of Senior Farmers Market Nutrition Program / Food and Nutrition Service**

http://www.fns.usda.gov/wic/seniorFMNP/seniorfmnpoverview.htm

**CONTACT INFORMATION**

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**Other Farmers Market Benefit Programs**

**Senior Farmers Market Nutrition Program**

The Senior Farmers Market Nutrition Program (SFMNP) provides eligible seniors with a $28 voucher to purchase fresh fruits and vegetables at authorized farmers markets. To receive vouchers, participants must be sixty years of age and income eligible (make less than $14,412 a year, based on 130% of the Federal Poverty Income Guidelines). Once the farmers receive the vouchers, they can be deposited in a bank.

“The Senior Farmers Market Nutrition Program is important to the seniors and farmers,” said Jessica Hinkle of the Kentucky Department of Agriculture. “Many times I hear seniors have to choose between purchasing their medicines or food. With SFMNP seniors are provided an avenue to get nutritious, local produce. And farmers are given additional revenue to continue farming, keeping our farmland green. This is a win-win.”

Markets can apply to participate at www.kyagr.com. As of July, 2011, 58 Kentucky counties were enrolled.

**WIC Farmers Market Nutrition Program**

As of 2011, forty markets in the state are authorized to accept WIC Farmers Market Nutrition Program vouchers. (WIC is the Special Supplemental Nutrition Program for Women, Infants and Children.) This program provides $20 worth of vouchers in $4 increments for each person enrolled in the WIC program. The Owensboro Regional Farmers Market has put this system in place successfully. “Some vendors will group veggies together in $4 bundles so a WIC participant can have a convenient take home package,” said nutritionist Merritt Bates Thomas. “It might be some potatoes, zucchini and a tomato for a summer stew. This supports the WIC program’s mission to transfer healthy eating practices to participating families.”

Contact Beverly Salchi at Beverly.Salchi@ky.gov for more information.

**Facts about obesity in Kentucky**

- As of 2011, forty markets in the state are authorized to accept WIC Farmers Market Nutrition Program vouchers. (WIC is the Special Supplemental Nutrition Program for Women, Infants and Children.) This program provides $20 worth of vouchers in $4 increments for each person enrolled in the WIC program. The Owensboro Regional Farmers Market has put this system in place successfully. “Some vendors will group veggies together in $4 bundles so a WIC participant can have a convenient take home package,” said nutritionist Merritt Bates Thomas. “It might be some potatoes, zucchini and a tomato for a summer stew. This supports the WIC program’s mission to transfer healthy eating practices to participating families.”

- EBT systems have been consistently shown to increase farmers’ sales. In one study, 58% of farmers reported an increase in overall sales attributable to EBT, credit card and debit card transactions. In another, farmers reported that customers using credit and debit cards spent $15-$17 more per visit. In addition, farmers markets can have direct economic benefits for nearby businesses. Data from the Food Trust’s customer surveys show that almost two-thirds of patrons shop at nearby stores during their trips to farmers markets.²

- Farmers markets provide other benefits to the local economy, such as helping stimulate downtown development and enhancing public spaces. Situating markets next to non-food retailers can work synergistically as they become linked to broader community revitalization efforts.

- Not eating enough produce is correlated with obesity. Kentuckians have the 48th lowest intake of fruits and vegetables in the country.³

- Twenty-one percent (21%) of Kentuckians overall said it was not easy to get affordable fresh fruits and vegetables in the city or area where they live. The rates were higher for some groups, with 30% of Eastern Kentucky residents and 33% of people living in poverty responding that accessing affordable fresh produce was not easy in their communities.⁴
In 2002, with the end of government subsidies for growing tobacco looming on the horizon, five citizens in Jackson County formed a group to look for alternatives. They knew that when subsidies ended, people in their eastern Kentucky community would take a big economic hit. Residents relied heavily on income from tobacco, and there were few other ways to make money in the county.

The group of five—farmer Beth Tillery, Jeff Henderson of Cooperative Extension, and citizens David Hays, Ovie Adkins and Frank Van Hoeve—named themselves Appalachian Alternative Agriculture of Jackson County (3AJC). “Though we considered several options to replace the money made by tobacco,” said Beth Tillery, “we kept coming back to promoting and processing locally grown food. The majority of people in the county still have gardens and they seem to cook and can vegetables almost effortlessly. Food is very important here and there is a strong skill set.”

Early in their exploration, the team met with officials from the U.S. Penitentiary in Clay County, which has the biggest food service operation in the region. The administrators were excited about the possibility of getting locally raised food. “They asked us, ‘When can you deliver the cole slaw?’” remembered Tillery. “We just looked at each other. We could deliver all the cabbage they wanted, but not a bite of cole slaw. We had no place that we could legally chop the cabbage and prepare the slaw. We learned that there was a market for processed food—now we just had to figure out a way to supply it.”

After a feasibility study showed that the idea was promising, 3JAC took on the task of building a processing center—a daunting and expensive project. But the team persisted, inspired by the hope that such a facility could promote a comprehensive approach to food, farm and nutrition issues by providing jobs, bringing more nutritious foods into the community, and increasing the food self-reliance of the county. They pieced finances together from federal, state, county and corporate sources, threw in a big dose of their own “sheer stubbornness,” and orchestrated the building of a state-of-the-art center that includes a commercial kitchen, a mobile poultry processing unit, and a farmers market shelter.

It’s called the Jackson County Regional Food Center, and it took eight years, but the center finally opened in 2010 in Tyner, Kentucky. The equipment includes 40- and 60-gallon steam kettles, a tilt skillet, large canners, a gas range, convection oven, label machine, filling machine and much more. Small business entrepreneurs can rent the kitchen for $20 an hour to process locally grown food. Manager Greg Golden provides technical assistance for product development.

“Though we considered several options to replace the money made by tobacco, we kept coming back to promoting and processing locally grown food.”

Don Colyer makes barbecue sauce in the Jackson County Regional Food Center.
development, nutritional analysis, labeling and marketing. “We’re here to help someone turn Grandma’s small recipe into a 40- or 60-gallon batch,” Golden said.

Access to a certified commercial kitchen at such reasonable rates allows food entrepreneurs to get a start without spending a fortune. During its first eight months, local residents used the Food Center to process cole slaw, salsa, barbecue sauce and salad dressings. Jackson County High School students used it to make strawberry jam for a school fund-raiser. The center staff makes a product line, Old Time Recipes, that includes strawberry butter and jam. The new Jackson County Detention Center is planning to process the harvest from its garden at the Food Center, which would welcome more business.

“We’ve had a slow start,” said Tillery. “Anyone can use this facility and we hope more people from around the state will take advantage of it. People can schedule an appointment to discuss their product with Greg. Many who have visited it say it is the best commercial kitchen in the state.”

“This team in Jackson County has developed a facility that is not only good for their community, it’s good for the state,” said Janet Mullins of UK Cooperative Extension. “There is no reason we can’t grow and process much more of our own food in Kentucky. This new system has the potential to bring us back to our roots of growing and eating good food. And economic health is tied to physical health. If we can help people in Kentucky counties to raise their incomes, it will likely improve their health.”

**Selling Points for Growing, Processing and Keeping Food in Kentucky**

- Buying locally raised and processed foods strengthens local economies by keeping dollars at home and building a sense of community in the process. Buying Kentucky foods is an investment in Kentucky’s land, people and future.

- Communities reap more economic benefits from the presence of small farms than they do from large ones. Studies have shown that small farms re-invest more money into local economies by purchasing feed, seed and other materials from local businesses, whereas large farms often order in bulk from distant companies.1 Large factory livestock farms also degrade local property values because of the intense odors they emit and other environmental problems they cause.

- Food travels an average of 1,300 miles from farm to table.2 These so called “food miles” increase food costs and greenhouse gas emissions.

- Local food tastes better. Have you ever eaten a tomato 24 hours after it was picked or eaten chicken raised by a small farmer in Kentucky? Enough said.

**CONTACT INFORMATION**

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In many communities that lack safe, adequate spaces for people to exercise, the solution to the problem is sitting in plain sight: public schools with tax-funded recreational facilities that are idle after school hours. Here are the stories of three Kentucky communities where different approaches to school-community collaboration are helping fight obesity and improve public health by making recreational facilities available to more people.

**Buckhorn School/Buckhorn Community, Perry County, Kentucky**

Buckhorn School is nestled in the scenic mountains of Perry County in Eastern Kentucky. In addition to serving approximately 400 students in grades K-12, the school is also the local fitness center. “There are no roads or sidewalks in the area that are safe to walk or bike,” said Buckhorn teacher Stephanie Miller. “The closest exercise facility is a 35-minute drive to Hazard. Our school has become our community gym.” Community members sign out a key to use the facility, which includes basketball courts, a rock-climbing wall, an air hockey table, and exercise equipment. The gym is handicapped accessible and open to people of all ages at no charge. There are no formal or written agreements, said Miller. “We’ve been doing it for years and we’ve had no liability issues. People take care of the place and no one has gotten hurt.”

The school campus connects to three walking trails, which are open to community members. “About 50 people from the community use the trails each week, but there is one gentleman who puts all of us to shame,” said Miller. That gentleman is 77-year-old Eric Schonblom, who says that he has walked one of the school’s trails almost every morning for 15 years. “It’s good aerobic exercise,” says Schonblom, “while also keeping my legs in shape and my weight down. I teach science labs at the school and Bible classes at the church, and I frequently run over in my mind what I will be teaching while I’m walking.”

**Shelby County Parks and Recreation/Shelby County Public Schools, Shelbyville, Kentucky**

The Shelby County Parks and Recreation Department has shared recreational facilities with the Shelby County public school system for 30 years. The schools use

“**You don’t want those facilities sitting empty when they could be used by the community.**”

Mark Johnson teaches Funk Aerobics to a packed gym at William Wells Brown Community Center
The walking path around Buckhorn School is available for public use after school hours. Photo by Eric Schonblom.

the Parks Department’s swimming pool, sports fields and tennis courts for student athletic events. In exchange, the school system opens its gyms to the Parks Department for volleyball and basketball games after school hours. Most of this happens with no cost to either party. “There are a few times when money is exchanged,” said Clay T. Cottongim, Director of Shelby County Parks and Recreation. “If there is not a custodian already in the school when we use the gyms, we’ll pay the custodian fee. And the schools pay for use of our swimming pool or if we have to prepare the fields for a special tournament. Other than that, the exchange is totally free. We have an excellent working relationship with our school board.”

Cottongim described this shared-use approach as “win-win,” ensuring that tax dollars are well used and that the community has maximum access to recreational venues. Liability and damage to facilities have not been problems, he said. “You don’t want those facilities sitting empty when they could be used by the community.”

Fayette County Public Schools/ Lexington-Fayette Urban County Government, Lexington, KY

The William Wells Brown Elementary School and Community Center represents a proactive approach to shared use. The result of a partnership between the Fayette County Public Schools (FCPS) and the Lexington-Fayette Urban County Government (LFUCG), this state-of-the-art facility was designed for students during the day and for the community on evenings and weekends. Unlike the average elementary school, it includes a full-size gymnasium, a weight room, a multi-purpose room, and a kitchen classroom.

“If you’re going to invest taxpayer money into a building,” says Mary Wright, Chief Operating Officer of FCPS, “it should be part of a community. People in the neighborhood should be able to use it.” And use it they do. William Wells Brown Center Director Jill Chenault Wilson reports that the aerobics and Zumba classes average 75 attendees. In addition, the Center offers a Weight Loss Challenge, healthy eating classes, computer courses, arts and crafts, and Hoops Night for teens and young adults. “The Center offers a support system for those interested in making lifestyle changes,” Wilson said. “We see a lot of friendships being built through our programming.”

The idea for a dual-use building came up when the LFUCG was considering renovating a community center in a low-income neighborhood that was also slated to get a new elementary school. After discussions with the school district, the city decided to use its renovation money to put a community center in the new school. “Both parties benefitted,” said Mary Wright. “The schools got a bigger, nicer facility that the students use during the school day. The city got a much better community center than they could have afforded on their own.”

Advice from Mary Wright about planning shared-use schools
- **Involve the community:** Have community meetings so the neighborhood knows the scope of the plan and can contribute to it.
- **Have a formal agreement in writing:** Mayors come and mayors go. So do city council members. The plan should outlast personnel changes.
- **Decide who is going to do what:** At William Wells Brown, the school takes care of cleaning and facility maintenance. The city pays the staff that manages the community center after school hours. Nail down anything that could be open for interpretation.
- **Set boundaries:** For safety reasons, William Wells Brown does not allow the community to use the facility during the day. During school hours, it’s students only.

**RESOURCES**

**Joint Use** website (another name for Shared Use) / Prevention Institute [www.jointuse.org](http://www.jointuse.org)

**Playing Smart:** A nuts-and-bolts toolkit for opening school property to the public through Joint Use agreements / NPLAN, the National Policy and Legal Analysis Network. [http://www.nplanonline.org/nplan/products/playing-smart](http://www.nplanonline.org/nplan/products/playing-smart)


**CONTACT INFORMATION**

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Jill Chenault Wilson, Center Director; William Wells Brown Community Center; jwilson@lexingtonky.gov

**Selling Points for Shared Use in Your Community**

- **The research is clear:** The more active people are, the healthier they will be. Having a place to exercise is vital. It’s hard to be healthy when there’s no place to be active.
- **Everyone—children, adults and families—benefits when playgrounds, basketball courts and gyms are available after school hours.**
- **Shared Use agreements can impact a number of community health indicators:** increased parental involvement, a heightened sense of community, more interaction among age groups, and fewer acts of vandalism.
- **Health impact studies report that feeling connected to others and having places to interact on a community level enhance quality of life and well-being.**
- **The liability risks to schools are minimal and don’t justify denying community access to school facilities for recreational purposes.** 1, 2 In Kentucky schools have the same level of liability protection after hours as they do during the school day when they allow community groups the use of school property. Kentucky operates under governmental immunity for injury on school property. Punitive damages are only awarded where oppression, fraud or malice can be proven. For more details about Kentucky’s Shared Use laws see Resources.
A Healthy Start

Child care centers have unique opportunities to teach children healthy habits. Two very different Kentucky day care operations are seizing those opportunities in creative ways.

Geraldine Wagers, owner of Hands and Feet Learning Center in Berea, is persistent in encouraging healthy habits for children.

- Whole wheat bread has replaced white bread.
- Staff are asked to eat the same food as the children and to “brag on the fruits and vegetables.”
- There are two fifteen-minute activity sessions each day using the CATCH box, which gives the staff directions for easy-to-lead, active games.

“I’ll admit, I got disheartened the first two months because the kids were throwing the food away,” said Wagers. “But we stuck with it and kept saying, ‘You have to try your fruits and vegetables first’. As time went by they started to eat them and to like them. Now my students will ask for more pears and more green beans.”

Advice from Geraldine Wagers
- **Stick with it:** “Start with integrity in your heart that you are going to follow through with it. You will be tried but stick with it. Remind yourself, I’m going to do this because I love kids. They are our future. When parents asked, ‘Can I bring Johnny a Happy Meal on my lunch break?’ I would say, ‘No, you may not, because it will disrupt the whole program.’”
- **Remember the benefits:** “The healthier you feed kids and the more active they are, the healthier they are going to be,” said Wagers. “You’ll have fewer sick kids, fewer germs in your center. The kids sleep better at naptime and behave better too. It’s easier on the staff.”
- **Cut back other places:** “It does cost more to serve healthier food, but not as much as you would think. And it’s worth it.” Wagers said she cuts back on things like toys, Play Doh and crayons—losses parents make up for with gifts bought for the center’s twice-a-year showers. “These gifts bring my costs down so I can serve fresh fruit.”

About a year after Hunter Shelby was diagnosed with Type 1 Diabetes, the day care he attended in Berea made some big changes. Hands and Feet Learning Center started serving its students more fruits and vegetables and fewer sweets, and at the same time began twice-a-day physical activity periods. “When they started the new program,” said Makeesha Shelby, Hunter’s mother, “we were able to lower the amount of insulin Hunter needed. The combination of fewer carbohydrates and more exercise made Hunter’s blood sugar more stable. Taking less insulin lowered his risk of having low blood sugar reactions and gave me much more peace of mind as a parent.”

The healthful changes at Hands and Feet began in 2007 after owner and director Geraldine Wagers received a TEAM Nutrition Grant from the Kentucky Department of Education. The grant included training plus educational materials and exercise equipment. It inspired Wagers, whose center serves 80 children between the ages of six weeks and 12 years. “The four-day training was excellent,” she said, “and we’re still using what I learned there today.”

Here are the main features of the more healthful regime Wagers instituted at Hands and Feet:
- Fresh fruits and vegetables are served every day.
- Children cannot have seconds on other foods until they have tried the fruits and vegetables.
- Milk and water are the main beverages served. One hundred percent fruit juice is served once a week.
- Whole wheat bread has replaced white bread.
- Staff are asked to eat the same food as the children and to “brag on the fruits and vegetables.”
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The YMCA of Greater Louisville provides a lot of child care. While Hands and Feet Learning Center in Berea serves 80 children, the YMCA of Greater Louisville operates almost that many day care centers—69, to be exact—and at all of them the Y has instituted four strong obesity fighting policies:

- **Physical Activity**: For every two hours they’re in a day care center, children must have the opportunity to engage in a minimum of fifteen minutes of physical activity.
- **Screen Time**: Screen time is not to exceed 15 minutes for every two hours the child is in day care and is limited to programs that are educational or activity based.
- **Snack Choices**: Two snack choices are required and at least one must be a fruit or a vegetable.
- **Water Pitchers**: Water pitchers must be in sight, with at least one pitcher for every 20 children.

Mike Bramer, Director of Healthy Actions, says these policies have produced measurable behavioral changes at the Greater Louisville Y’s child care centers. Bramer said YMCA s in central Kentucky and Madisonville are also adopting these policies: “We welcome all centers to take them as their own.”

As a large organization, the Y had to create its anti-obesity policies deliberately and systematically. Bramer believes one reason the policies are effective is that they were developed using the Gulick Collaborative model, which emphasizes staff involvement and real world experimentation. The model is named after Luther Gulick, a visionary physical education advocate. At the International YMCA Training School in Springfield, Massachusetts in 1891, Gulick directed James Naismith, one of his employees, to invent an indoor game. Naismith invented basketball.

Bramer said the Y’s healthy day care policies grew out of practical experimentation, conducted by staff, that generated data to guide policy changes. For example, they wanted to encourage children in their centers to drink more water because drinking more water and fewer sweetened beverages is considered one of the most promising strategies for reducing childhood obesity. The staff came up with the hypothesis that having pitchers of water accessible at all times would prompt children to drink more water. They put it to the test at one center and observed carefully. They found that, in fact, children drank more water when the water pitchers were visible. When they put water pitchers front and center in their other day care locations they observed the same outcomes. The consistent results and easy implementation prompted the YMCA to adopt a policy that water must be in sight at their early child care centers, with at least one pitcher for every 20 children. Involved from the beginning, the staff supported new policies when they were implemented. “The staff saw for themselves what worked,” said Bramer. “It came from them. When staff is involved, they embrace it.”

Eliminating health disparities is also an integral part of the YMCA’s approach. “We look at everything though a health equity lens,” Bramer said. “We serve a large number of kids who live in food deserts so we believe healthier snacks are crucial for them. We took a field trip to a fast food restaurant with the goal of teaching the kids how to order the healthier options, knowing that fast food is a reality and may be the only option in some communities.”

Joan Buchar, Program Officer of the Foundation for a Healthy Kentucky, sees this field-tested approach to policy development as having promise for creating sustainable change. “By conducting their own experiments, staff in the field can work out the kinks and select policies that work in the real world. So many times, polices are created without input from the people doing the actual work and far from the environments and people that will be affected. Not surprisingly, when this happens, implementation can be inconsistent or unsuccessful.”
Advice for other centers from Mike Bramer

- **Use role models:** “With any of these changes, it’s all about how you present it to kids. At one after school site, the kids didn’t want to try the sugar snap peas. The leaders began by eating them with the older kids and displaying their enjoyment. The older kids started eating them saying, ‘These aren’t bad.’ When the younger kids saw that, they started eating them too.”

- **Cut it and they will eat it:** “Cutting up the apples and oranges led to more fruit consumption. We don’t just put the policies out there—we give the staff suggestions for making the policies really work.”

RESOURCES

**The Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC)** / North Carolina Healthy Weight Initiative  
http://www.napsacc.org/

**Child Care as an Untapped Setting for Obesity Prevention: State Child Care Licensing Regulations Related to Nutrition, Physical Activity, and Media Use for Preschool-Aged Children in the United States** / Center for Disease Control.  
www.cdc.gov/pcd/issues/2009/jan/07_0240.htm

**SPaRK Early Child Care Curriculum**  
http://www.sparkpe.org/early-childhood/

**COLOR me healthy**: Preschoolers Moving and Eating Healthy Curriculum / North Carolina Cooperative Extension and North Carolina Division of Public Health  
www.colormehealthy.com/

**CATCH Physical Activity Kits** / University of Texas https://sph.uth.tmc.edu/catch/curriculum_pe.htm

Selling Points for Nutrition and Physical Activity Policies in Early Child Care Centers in Your Community

- Approximately one of every three children aged two to five years in Kentucky is seriously overweight or at risk of being overweight. Once a child becomes overweight, it is very difficult to reverse. Prevention is far more effective than treatment.

- Child care centers are in a unique position to help children develop healthy habits during the important developmental years. They serve as home-away-from-home settings where children adopt early nutrition, physical activity, and television viewing behaviors.

- Preschool-aged children may consume 50-100% of their diets in child care settings, placing a great deal of responsibility on the facility to provide nutritionally adequate, healthful food.

- Strong evidence links childhood obesity to television viewing.
What would it mean to Kentucky’s economy if the biggest food service in the state, the public schools, purchased as much of their food as possible from Kentucky farmers and processors? According to Sarah Fritschner of Louisville Farm to Table, “Tobacco used to bring in $1 billion in Kentucky but now it brings in $250 million annually.” Many think growing more food is the way to fill this huge gap in the agricultural industry. “Kentucky was the tobacco capital of the world, we are the horse capital, why couldn’t we be the food capital?” asked John-Mark Hack of Marksbury Farm Market.

Marksbury Farms is one of the new suppliers for the Jefferson County Public Schools (JCPS), an organization that spends $14 million a year serving 64,000 lunches and 27,000 breakfasts to students each school day. Jill Costin, Coordinator of Nutrition Initiatives, is working to buy more food grown in Kentucky. “When we first started in 2008,” said Costin, “we thought: we can’t do it. We’re just too big. If we serve apples, we need 30,000 apples a day. Nobody can provide that.” Eventually, Costin said, they realized they could start small. “We didn’t have to solve the whole
problem. We just had to do something.” JCPS started by purchasing apples from Huber’s Orchard, just across the Kentucky border in Indiana.

After this small but successful apple venture, Costin began meeting with groups of farmers in the summer of 2010. After several conversations, the district issued a Request for Price for Locally Grown Produce within a 150-mile radius of Louisville, asking farmers to make bids in January for the coming season. “At first the farmers were concerned,” said Costin, “that if they entered into a written agreement with us in January and their crops failed, they would be in trouble. We assured them that the obligation is on our part. We are committed to buying what they produce. This gives them something to go on so they can borrow money to get their crops in the ground. But if for some reason their crops fail, we will buy elsewhere. It took a while for us to convince them that this was real.” JCPS also developed a Local Food Procurement Policy, putting in writing their commitment to prioritizing locally grown food purchases.

In the fall of 2010, JCPS started purchasing apples from Kentucky orchards. “We bought 800 bushels—Jonagold, Gala and Yellow Delicious. Students realized right away that the apples tasted better because they were fresher. The kids are receptive to anything that is locally grown, and take pride in the fact that they are helping the state,” Costin said. “The local apples were two dollars more a bushel, but definitely worth it.”

One of the challenges Farm to School programs face is that most produce is harvested when school isn’t in session. In the summer of 2010, JCPS started processing local food so they could serve Kentucky Proud items year round. They started out with 40 bushels of summer squash and 10 bushels of green peppers, which were processed and frozen for a vegetable marinara sauce. “We created a Blue Ribbon Muffin made from Weisenberger Mills whole wheat flour and zucchini. It takes 700 pounds of zucchini every time they’re on the menu. We might get 500 pounds from one grower and 200 pounds from another. We also buy herbs—basil, oregano and parsley—from the Lassiter Middle School garden. We put them in our barbecue, tacos and soups,” said Costin.

Advice for other communities
• Start small: Don’t try to do it all at once. Maybe you can just get enough fruit for one school the first year. Do it anyway.
• Establish relationships with the farmers: Sit down and talk. Meet with them several times until you understand each other.
• Tell everyone about what you’re doing: That includes school board members, the superintendent, teachers, parents, and students. Everyone understands that local is good.
• Promote: Put posters in the cafeteria. JCPS is putting out two calendars with menus from August to December and January to May, highlighting local produce.
• Borrow what’s already been done: Bath, Montgomery, Mercer, Lee, Perry and Owsley counties have also done innovative Farm to School work.

Gradually expand local food purchases. After working out the details with relatively small orders, JCPS contracted with six farmers to spend $127,000 on fresh produce for school lunches and with two distributors to spend $130,000 for the Fresh Fruit and Vegetable program in 2012.

RESOURCES
Kentucky Farm to School website / Kentucky Department of Agriculture / http://www.kyagr.com/consumer/food/FarmitoSchool.htm

Kentucky Farm to School Resource Guide / Kentucky Departments of Public Health, Agriculture and Education http://www.kyagr.com/consumer/food/FarmitoSchool.htm

Kentucky Proud Restaurant Rewards reimburse schools up to 20% when they purchase Kentucky Proud foods / Kentucky Department of Agriculture http://www.kyagr.com/marketing/restrewards/index.htm

Kentucky Proud Promotional Grants match eligible expenses for prominently promoting the Kentucky Proud logo and sourcing agricultural products from Kentucky farm families. http://www.kyproud.com/forms/KyProudGrantApplication.pdf


Tina Garland, Farm to School Coordinator for the Kentucky Department of Agriculture, is an excellent resource for connecting farms and schools. tina.garland@ky.gov

The National Farm to School Network website www.farmtoschool.org

CONTACT INFORMATION
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Charolette Thompson, Food Service Director, Owsley County Schools charolette.thompson@owsleykyschools.us 606-593-6371
Healthy Growth in Owsley County
Making locally grown vegetables more accessible to schools and the community

Thanks to new vegetable gardens and a farmer’s market, all on public school property, local produce is now much more accessible than it used to be to the residents of Owsley County. Access to fresh food is particularly important in Owsley because only seven percent of adults there eat adequate produce, compared to 18% of adults statewide, and the county ranks last in the state—120th—in community health.\(^1\)\(^2\) The gardens and market are located at the elementary and high schools in the county seat of Booneville. Funded by a small Farm to School grant from the Kentucky Department for Public Health, this project improves the nutrition of students and the community at large. Elaine Russell of the Department for Public Health called it an “excellent example of schools partnering with the community.”

School Gardens
At Owsley County Elementary School, four raised-bed gardens were built in the picnic area in 2011 and planted with strawberries, lettuce, broccoli, peppers, tomatoes and various herbs. Students and community members pitched in to plant and maintain the gardens. The fruits and vegetables they grew were used in the school cafeteria and in the Summer Feeding Program that provides meals to students when school is not in session. In 2012, more beds will increase the yield.

Community Gardens
In 2012, the project created 20 garden plots at Owsley County High School and offered them to community members who don’t have access to land. Interested citizens must submit applications for the plots.

Farmers Market
A Farmers Market opened at Owsley County High School in 2011, providing a convenient place for farmers to sell locally grown produce. “Before we made this arrangement,” said Charolette Thompson, food service director of the Owsley County Schools, “the farmers didn’t have any place to set up and sell.” Now they display their fruits and vegetables in the high school’s rarely used outdoor shelter. This project got off the ground when more than 80 farmers and community members gathered at a BBQ dinner at the high school to talk about their visions for a market. It opened in May with a ribbon cutting and ran through the end of October. “Now 19 farmers are part of the market,” said Thompson, “and their produce sells out by noon every Tuesday and Saturday when the market is open.” Any way you slice it, that’s success.

Produce raised in Owsley County Elementary School gardens is used in the school cafeteria and Summer Feeding Program.
Play More, Learn Better, Be Healthier

Recess is a boon to students’ bodies—and minds.

When she was in the fifth grade at Science Hill School in Pulaski County, Elisabeth Barnett wrote a letter to her principal asking for longer recesses. She argued that having more time for recess would “help us think better and make us healthier.” Her favorite recess activities: swinging, sliding and playing tag.

Elisabeth is on to something. Play is the single most effective strategy for increasing physical activity and is therefore key to reducing the epidemic of childhood obesity. A modest investment in recess has been shown to have a positive ripple effect throughout the school, improving the overall learning environment. Yet students get too little, if any, time for recess any more, especially in middle school. Elisabeth is lucky—she'll be attending middle school in the Science Hill Independent School District, one of a handful of schools in Kentucky that schedules daily recess for middle school students. “Why would you stop recess at middle school?” asked Hanna Young, a teacher in the district. “Middle school students have so much stress and anxiety in their lives. It may be the time they need recess most.”

A commitment to physical activity by school administrators and an extended school day allow the district to schedule daily recess in grades K-8. Science Hill Superintendent Rick Walker knows first-hand the importance of physical activity. After injuring his back and being unable to exercise for months, he put on 50 pounds. “Before, I’d get off work and go home and lie down,” he said. “I was just so tired from the extra weight and not exercising. I have more energy and feel so much better now.”

In addition to a supportive administration, a slightly longer school day also makes recess work well in the district. “We have kids more hours in the year than is required,” said Walker. “It lets us give a good break for lunch and a twenty-minute recess. And there are other pluses. We can give students extra academic help. And when there are a lot of snow days, the fact that we put in some extra time means that we don’t have to make up the days at the end of the year.” Proponents of longer school

“Why would you stop recess at middle school? Middle school students have so much stress and anxiety in their lives. It may be the time they need recess most.”

Science Hill students enjoy recess.
days say putting a little more time in the school day would not only allow schools to schedule more physical activity time, it would relieve other time crunch challenges school systems face as well.

Middle school teacher Hanna Young sees how recess helps relieve classroom challenges. Young said her students come back from recess refreshed and ready to pay attention. She thinks recess is particularly important for students with special issues. “I had an 8th grader who was on medication for ADHD. His doctors suggested seeing if he could get by without medication. By noon this student would be so pent up. He would play vigorously and when he came back in the afternoon, he could sit still again. I honestly don’t think he could have done it without recess. Recess was vital for him.”

Elaine Russell, Coordinator of the Kentucky Obesity Prevention Program, sees the Science Hill Independent School District as a role model for the state. “Kids are in school five days a week, nine months a year. If we could get 30 minutes of physical activity for every child every day, it could make a meaningful contribution to reducing obesity in the state.”

RESOURCES
Recess Rules / Robert Wood Johnson Foundation

Recess Before Lunch: A Guide to Success / Montana Office of Public Information

Peaceful Playgrounds website
http://www.peacefulplaygrounds.com/recess-before-lunch.htm

CONTACT INFORMATION
Rick Walker, Superintendent, Science Hill Independent School District
rick.walker@sciencehill.kyschools.us

A compelling report on the value of recess with practical suggestions for making it work / Robert Wood Johnson Foundation

Selling Points for Recess in Middle School in Your Community

- Kentucky has the third highest rate of overweight youth in the nation and is the fourth most sedentary state in the nation.1,2

- Physical activity rates drop off in middle school. Thirty-five percent of girls ages 6-11 met the 60-minute-a-day physical activity requirement compared to 3% of girls 11-13 years old.3

- If students got 20 minutes of moderate physical activity during recess each school day, it could keep them from gaining approximately 12 unwanted pounds during their middle school years.4

- High school students who participate in physical education five days a week are 28% less likely to be overweight adults.5

- Giving children recess helps solve behavioral problems in the classroom.6

- Providing physical activity for students has been shown to improve on-task behavior during academic instruction.7

- Students who perform well on measures of physical fitness tend to score higher on state reading and math exams, regardless of socioeconomic status or gender.8

- Studies show that play is essential to the physical, emotional and social development of every child.9

- The Kentucky Health Issues Poll asked Kentuckians, “Do you favor or oppose requiring schools to provide 30 minutes a day of physical activity or physical education to students?” Ninety-six percent of respondents were somewhat or strongly in favor.10

- More physical activity in school ranked as the number one recommended strategy for reducing childhood obesity in Kentucky in the 2004 Obesity Forums and the 2009 Partnership for a Fit Kentucky Survey.11
Monday blues? Students at Ninth District Elementary and Latonia Elementary in Covington definitely don’t have time for them. They’re way too busy walking the Monday Mile, eating the Meatless Monday meal, and listening to the Monday Messages about good health and nutrition. Using tools from the nationally acclaimed Healthy Monday Campaign (see box), the Northern Kentucky Health Department has helped these schools make Mondays a day to focus on health and nutrition. “At first it seems like you’re taking away from the academics,” said Ninth District principal Jennifer Maines, “but Healthy Monday actually strengthens the academics. You don’t waste as much time with kids being off task.”

**Monday Mile:** Signs around the school—inside and out—chart the course so students can walk a mile the first day of every week, rain or shine. The Monday Mile is written into the School Wellness Policy at Ninth District Elementary. State law allows elementary schools to use 30 minutes of curriculum time each day for physical activity, meaning the mile can easily be incorporated into the school schedule.

Latonia Elementary third grade teacher Brittany Goetz not only makes sure her students do the mile every Monday, she also integrates exercise into the daily routine by adding a few laps when the class walks to the cafeteria or the library. The students keep track of the laps and as of March 2011, they had logged nine miles from these short jaunts during the 2010-2011 school year. Goetz also uses the Monday Mile to reinforce math principles. “The student at the front calls out a number,” she said. “If it’s a prime number, the leader picks an activity like jumping or dancing for the class to do. If a composite number is called out, the students continue walking.”

**Meatless Monday:** Monday lunches introduce students to an array of new, more nutritious foods. Instead of corn dogs or spaghetti, it’s whole wheat cheese pizza, tossed salads with string cheese, and black bean tacos, all lower in calories, saturated fat and sodium and higher in calcium, vitamin A and protein. A Meatless Monday menu contest encourages students to submit recipes. “If their recipes are picked, students get bragging rights,” said Taryn Stewart, District School Food Service Director. “If you let kids add their own flair, they’re more likely to eat the food. We’ve added baked potato and burrito bars that are very popular.”

“**At first it seems like you’re taking away from the academics, but Healthy Monday actually strengthens the academics. You don’t waste as much time with kids being off task.”**

In elementary schools in Covington, Mondays aren’t blue—they’re a blast.
**Why Mondays?**

Research shows that people who start changing habits on Monday, rather than a milestone date such as New Year’s or a birthday, are more likely to stick with their goals. Weekly health reminders have been shown to boost physical activity, nutritious eating and overall healthy behavior. “We call Monday the day all health breaks loose,” said Cherry Dumaual, project director for the national Healthy Monday Campaign. Johns Hopkins University, Columbia University and Syracuse University began the Healthy Monday Campaign in 2005. Peggy Neu, president of the campaign, said, “It’s just a simple, memorable idea. Problems like obesity can be so overwhelming that people just don’t know where to start. It is a very easy, incremental way to stay on track.”

**Monday Messages:** These weekly announcements by the principal include practical tips about nutrition, physical activity and other health topics, reinforcing the idea that health is an integral part of the school day and the students’ lives.

DaNelle Jenkins, Senior Health Educator at the Northern Kentucky Health Department, says Healthy Monday has changed the environment and culture of the schools. “Kids see the signs, walk the mile, eat the food and hear the messages. Because it is ongoing, it becomes second nature to them. Healthy Mondays are easy and inexpensive to implement compared to a lot of things you could do.” Marilynn Arnold, the Family Resource Center Coordinator for the school, said, “The program could and would continue without me or DaNelle. The teachers have taken up the charge and are doing the Monday Mile without any input or nudging from either of us. I see it happen every Monday.”

Jenkins and former colleague Meredith Potter introduced the idea of Healthy Monday to the Covington schools and provided training, templates for signs, meatless menus and messages to be read over the intercom. In April 2011, the Greater Cincinnati Healthy Monday Conference, for school personnel and community members, attracted 165 people. Mondays may also be getting healthier at Northern Kentucky workplaces. Jenkins said the Northern Kentucky Healthy Monday Coalition is working to bring Healthy Mondays to worksites, Northern Kentucky University, and communities too. “There’s this collective sense that the whole community is doing something healthy on Monday,” said Jenkins. “When the kids get it at school, and parents hear it at work, it starts to become a regular part of life.”

**RESOURCES**

**Twelve-minute video about Healthy Monday in schools** / Northern Kentucky Health Department: [http://www.youtube.com/watch?v=9V1hqM3k7jI&blend=2&lr=1&ob=5](http://www.youtube.com/watch?v=9V1hqM3k7jI&blend=2&lr=1&ob=5)

**Healthy Monday Downloadable Materials** / Northern Kentucky Health Department: [www.healthymondaysnky.org](http://www.healthymondaysnky.org)

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**Selling Points for Healthy Mondays in Your Community**

- Ongoing health prompts have been shown to be effective in changing behavior.¹²
- When healthy behaviors become part of the routine every Monday, they are incorporated into the school system and change the environment. You don’t have to keep reminding people or starting new initiatives.
- It’s turn-key and inexpensive. The materials are developed and easily accessible.

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Students from Ninth District Elementary School walk the Monday Mile.
When Casey Hinds’ daughters were toddlers, their pediatrician told her that good nutrition would help protect them against diabetes, a disease that runs in the family. “I had seen the devastation of a family member suffering from diabetes,” said Hinds. “This was not abstract for me. I saw how it could affect my children’s future. From the very beginning, I’ve prioritized healthy eating for my family.”

When her oldest daughter began kindergarten in Lexington, Hinds was shocked by how much unhealthy food the school gave students. Her daughter brought home Sweet Tarts and M&Ms work sheets that required sorting the candy by color and recording the numbers on a table. If they got the numbers right, the kids were given the candy to eat. “Five year olds were being rewarded for their school work with candy,” said Hinds. “Children are like wet cement. If they start thinking of food as something they reward themselves with when they’re young, that’s likely to set up and they’ll carry that habit into adulthood.”

As her daughter continued through elementary school, Hinds was disheartened by the unhealthy food served at school celebrations, by the cookie dough fundraisers and the Chik-Fil-A cow mascot passing out coupons to students in the halls. “There is so much junk food advertising directed at children outside of school. I mistakenly assumed that school was a safe haven.”

Hinds began to call attention to these unhealthy practices and offer alternatives. First, she met with her daughter’s teacher. “I soon realized that for school-wide change to occur, I needed to work with the Site Based Decision Making Council (SBDM). I could possibly talk my children’s teachers into changing their practices, but I didn’t want any child in the school to be set up for a lifetime of poor health.”

Hinds wrote a letter to the SBDM, asking them to consider updating the School Wellness Policy. (All schools that receive funding from the federal government for the School Lunch and Breakfast programs are required to have a wellness policy. See resources.) The SBDM appointed a parent committee to update the policy. The parents started with a model policy from the National Alliance for Nutrition and Activity. They presented their recommendations to the SBDM and, after several months of discussion, the council adopted a strengthened wellness policy that eliminated food as a reward and promoted healthy fundraisers and healthy school celebrations.

“Teachers shifted from rewarding students with junk food to using healthier alternatives. Now they get extra recess, no-homework passes and school pajama parties, instead of candy, as rewards.”

A Jog-a-Thon held at Cassidy Elementary raised $4000 that was used for a Wii Fit for rainy day recesses, playground equipment and a raised bed garden. The Jog-a-Thon replaced a cookie dough fund raiser.

Cassidy Elementary School also incorporated school wellness into the Gap Reduction Targets, mandated by the No Child Left Behind Act, that address inequities. “Children at the greatest risk for obesity are also at the greatest risk of falling through the academic cracks,” Hinds said. “The kids who don’t have a lot of healthy options at home really need us to offer the better food at school. The school may provide the only fresh fruit or vegetable some kids get that week.”

The Cassidy Elementary PTA reinforced the new School Wellness Policy by adopting a policy of its own—Water First. The Water First policy means that instead of serving sodas, sports drinks and juice drinks at school events, they now only serve water.
broad beverages are one of the main contributors to childhood obesity. “We were surprised at how well received the Water First policy was,” said PTA President Kelli Helmers. “I was a little afraid at the first few events when we just served water, but we didn’t get one complaint. It felt so good to be role modeling this for our kids and it was good for our budget too. After a while, we realized that our cafeteria wasn’t serving water. One of our PTA members made a few calls and the school food service began serving water in the cafeteria too.”

The Water First policy was just the beginning of the PTAs efforts. They also held a Family Wellness Night, and replaced a cookie dough fundraiser with a Jog-A-Thon that raised $4,000. The money from this health promoting fundraiser was used to build raised-bed gardens on the school grounds.

“Parents may be the most effective voice for promoting wellness in schools,” said Hinds. “It’s hard for teachers to suggest that other teachers may be doing something questionable. Principals may not want to spend their political capital on this. But people expect parents to stand up for their children’s well being. Mad moms are powerful. If enough parents speak out about this, schools will change.”

Advice for School Wellness Policies from Casey Hinds

- **School Wellness Policy**: Compare the current wellness policy with a model policy. Go to the School Based Decision Making Council with very specific recommendations about what you want to change. You may want to start by focusing on one issue, such as not using food as a reward children for academic performance or good behavior.

- **Persistence**: Once you have the policy change in writing, it doesn’t stop there. Provide education. Give parents and teachers resources. Hold a Wellness Night, serve healthy food at events, and organize healthy fundraisers.

- **Patience**: This kind of change requires an ongoing conversation. It won’t happen overnight. A lot of times it is two steps forward and one step back. Don’t be discouraged by the steps back. They’re part of the process.

- **Don’t take it personally**: Thick skin is helpful. Not everyone is going to be thrilled to hear your message. No matter how others respond, this is an important issue and worth standing up for. “When someone at the school starts talking about something like bringing Chuck E. Cheese to school,” said Hinds, I say something like, ‘Guys, you all are killing me.’ They laugh and then discuss it.”

- **Don’t reinvent the wheel**: Many others have done this kind of work. Use resources that have already been developed. Find others to partner with. You may feel alone, but you’re not.

RESOURCES

**Background about federal law that requires school wellness policies / USDA Food and Nutrition Service** [http://www.fns.usda.gov/tn/healthy/wellnesspolicy.html](http://www.fns.usda.gov/tn/healthy/wellnesspolicy.html)


**Cassidy Elementary School Wellness Policy** [http://www.cassidy.fcps.net/media/29562/CouncilPolicy3%201%20Wellness%20Policy.pdf](http://www.cassidy.fcps.net/media/29562/CouncilPolicy3%201%20Wellness%20Policy.pdf)

**Cassidy Elementary School Gap Reduction Targets** [http://www.fcps.net/media/464226/cassidy.pdf](http://www.fcps.net/media/464226/cassidy.pdf)

**Alternatives to Food Rewards / Lexington Fayette County Health Department** [http://www.lexingtonhealthdepartment.org/uploadedFiles/Sections/Community/Alternatives%20to%20Food%20Rewards.pdf](http://www.lexingtonhealthdepartment.org/uploadedFiles/Sections/Community/Alternatives%20to%20Food%20Rewards.pdf)

**Center for Science and the Public Interest: Healthy School Fundraising** [http://www.cspinet.org/new/pdf/sweet_deals_one-pager.pdf](http://www.cspinet.org/new/pdf/sweet_deals_one-pager.pdf)

**Center for Science and the Public Interest: Healthy School Celebrations** [http://cspinet.org/new/pdf/healthy_school_celebrations.pdf](http://cspinet.org/new/pdf/healthy_school_celebrations.pdf)

**Water First: Think Your Drink website / Lexington Tweens Nutrition and Fitness Coalition** [www.DrinkWaterFirst.com](http://www.DrinkWaterFirst.com)

**Prichard Committee Commonwealth Institute for Parent Leadership** [http://www.prichardcommittee.org/parents/cipl](http://www.prichardcommittee.org/parents/cipl)

**CONTACT INFORMATION**
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Selling Points for School Wellness Policies in Your Community

- Nutrition and physical activity are fundamental to children’s well-being and development. If these basics aren’t addressed, everything else schools attempt to accomplish becomes more difficult.

- Children learn what they live. If school environments exemplify good nutrition and physical activity, children will see these practices as a way of life.

- A meta-analysis of nearly 200 studies of the effectiveness of exercise on cognitive functioning found that regular physical activity supports better learning and behavior.

- Obese children miss four times as much school as normal weight kids. If this keeps children out of school just one day per month, an average-size school district could forfeit $95,000-$160,000 annually.

- Physically active children are more likely to thrive academically and socially. Evidence suggests that physical activity has a positive impact on cognitive ability and reduces tobacco use, insomnia, depression, and anxiety.

- Many studies show a direct link between nutrition and academic performance. For example, increased participation in breakfast programs is associated with higher test scores, improved daily attendance and better class participation.

- An overwhelming majority (95%) of parents believe physical education should be part of the school curriculum for all students in grades K-12.

- In a survey of more than 2,100 adults, there was a high rate of approval from parents for school initiatives including changing physical education requirements (favored by 92% of parents), requiring a minimum amount of recess time for elementary students (89% of parents) and offering healthy meals (87%).
### Organizing Your Community to Shape Kentucky’s Future: An Action Worksheet

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<thead>
<tr>
<th>Select a Topic</th>
<th>Sample Initiatives to Consider</th>
<th>Multi-Sector Approach / Who to Bring to the Table</th>
<th>Health Equity / Increase Access for Underserved Populations</th>
<th>Community Assets</th>
<th>Community Challenges</th>
<th>How to Address This in Our Community</th>
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<td>Increase safety and access for walking and bicycling</td>
<td>Complete Streets / Berea p. 6 Traveling Trail / Winchester p. 8</td>
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<td>Support breastfeeding in health care and workplace</td>
<td>Breastfeeding policy / Louisville p. 10</td>
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<td>Provide comprehensive Worksite Wellness</td>
<td>A Culture of Wellness / Madisonville p. 12</td>
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<td>Offer healthy food at concession stands</td>
<td>Better Bites / Lexington p. 14</td>
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<td>Increase access to healthy food</td>
<td>Healthy in a Hurry stores / Louisville p. 16</td>
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<td>Increase fresh produce consumption for people with low incomes</td>
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<td>Support local food production</td>
<td>Jackson County Regional Food Center / Tyner p. 20</td>
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<td>Coordinate Shared Use of school and community recreational facilities</td>
<td>Sharing the Health / Buckhorn, Shelbyville Lexington p. 22</td>
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## Organizing Your Community to Shape Kentucky’s Future: An Action Worksheet

### Schools

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<tr>
<td>Improve nutrition and physical activity in early child care centers</td>
<td>A Healthy Start / Berea and Louisville p. 24</td>
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<td>Increase the use of locally grown food in school cafeterias</td>
<td>Farm to School / Louisville and Booneville p. 27</td>
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<td>Prioritize recess, especially in middle school</td>
<td>Recess Rocks / Science Hill p. 30</td>
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<td>Improve nutrition and physical activity in schools</td>
<td>Healthy Monday Campaign / Covington p. 32</td>
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<td>Encourage parents to advocate for wellness in schools</td>
<td>Parent Power / Lexington p. 34</td>
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Eight Elements of Successful Policy

1. It’s a policy, not a program.
   A policy is a law or regulation.

2. It’s legally feasible.
   The government has the legal ability to make the change.

3. It’s financially feasible.
   The policy is low or no cost, uses existing funding, or generates revenue.

4. The implementation is clear and feasible.
   Use language that states exactly what will be done.

5. It accounts for disparities.
   Policies need to consider health inequities.

6. It’s data and context driven.
   Local officials love local data.

7. It changes the conversation.
   It changes the conversation from the individual to the environment (from portrait to landscape).

8. It is part of a bigger plan.
   One policy won’t change the obesity epidemic.

—Adapted from Public Health Law and Policy
References for Executive Summary


References for Introduction


References for We Can Get There From Here


References for Mow It and They Will Come

References for The Biggest Bargain


References for A Culture of Wellness


References for Rethinking Concession Stand Food


References for Oases in the Desert


**References for Good Food For All**


References

References for Healthy Growth in Owsley County


References for Play More, Be Healthier, Learn Better


4. Eighty calories burned in 20 minutes of moderate exercise x 173 school days = 3,500 calories in a pound of fat x 3 years of middle school = 12 pounds.


References for Making Mondays Marvelous


References for Parent Power


A pdf file of this report can be downloaded at www.fitky.org and www.healthy-ky.org.