



# CALIFORNIA Health Policy Forum



Center for  
Health  
Improvement

Policy Brief  
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SOLUTIONS-ORIENTED CONVERSATIONS IMPROVING HEALTH POLICY

## Tackling Obesity by Building Healthy Communities: Changing Policies Through Innovative Collaborations

The numbers are compelling—the proportion of California’s population that is overweight or obese continues to increase and now approaches 60 percent for adults and 30 percent for kids,<sup>1</sup> resulting in dramatic increases in chronic diseases and significant increases in health care costs. In some ways, this seems an intractable problem; yet innovative initiatives in communities and regions across the state are demonstrating the potential for long-term benefits for individuals, businesses, and California overall. These initiatives bring together diverse constituencies that understand the urgency of implementing policies that help to create healthy communities.

While it is easy to identify individuals or organizations as villains, the story of overweight and obesity is a complex one. Many factors affect one’s weight status, including individual and environmental factors in the home, school, workplace, and broader community (see Figure 1). The social determinants of health are the economic and social conditions under which people live that determine their health, such as income, education, literacy, employment and working conditions, and social and physical environments. While the obesity epidemic

***“It is unreasonable to expect that people will change their behavior easily when so many forces in the social, cultural, and physical environment conspire against such change.”<sup>2</sup>***

— Institute of Medicine, 2000

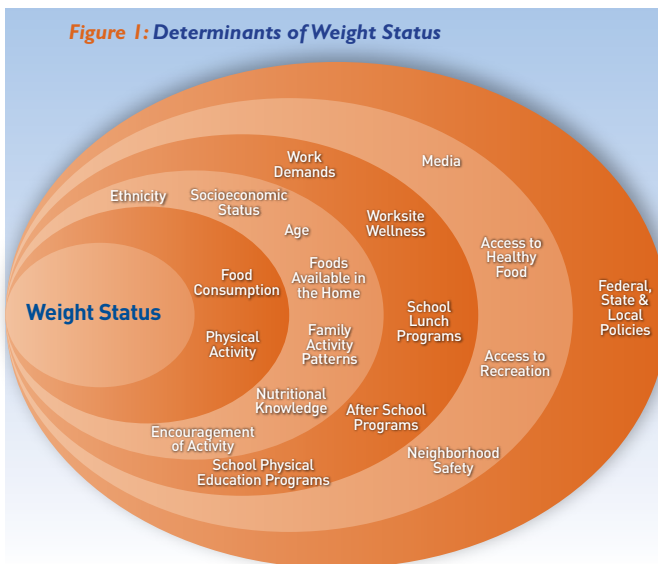
extends into all of California, the state’s most impoverished populations—disproportionately people of color—are hit particularly hard, as they often live in communities without safe and accessible places for recreation, access to affordable fresh food, and adequate transportation.

### Excess Weight Impacts Health and Costs

The excess weight Californians carry threatens their health and burdens the state’s economy. Obesity increases the risk of heart disease, type 2 diabetes, high blood pressure, stroke, arthritis-related disabilities, depression, sleep disorders, and some cancers. According to one study, children born in the year 2000 have a 1 in 3 chance of developing diabetes.<sup>3</sup> That report and others have led some to speculate that “today’s generation of children could become the first in modern history whose lifespan is less than that of their parents.”<sup>4</sup>

The diseases associated with obesity are significant health care cost drivers; obesity-related health expenditures accounted for more than 25 percent of the growth in national health care spending between 1987 and 2001<sup>5</sup> and almost 10 percent of all health care dollars.<sup>6</sup> The total health care and productivity costs associated with overweight and obesity in California alone were estimated to be \$21 billion in 2006.<sup>7</sup> While these costs are astounding, a recent report from the Trust for America’s Health identifies a promising solution: an investment of \$10 per person per year in effective community-based

Figure 1: Determinants of Weight Status



## Transforming the Environment in California's Central Valley

In the heart of the nation's richest farmland in the Central Valley, residents are hard-pressed to buy fresh produce or find safe places to exercise. In the eight counties of the San Joaquin Valley, nearly two-thirds of adults are overweight or obese, exceeding statewide averages across all age groups.

The Central California Regional Obesity Prevention Program (CCROPP) is leveraging its strong regional infrastructure to attack the obesity epidemic by advocating for policy that supports availability of healthy food and safe access to recreation. Each county's community council brings together community residents, schools, public health departments, government, health care providers, and others.

Through a strong, concerted effort, Fresno changed its zoning laws to allow farmers' markets to set up shop. In Bakersfield, a group of women who came together as part of a walking program to shed pounds and control diabetes recognized the need for safer places to walk and play and transformed a community park into a safe haven for community activity. In Tulare County, after much community advocacy, two schools opened their play yards after hours to allow residents to engage in physical activity in a safe place.

Taking a place-based approach to combating obesity, CCROPP partners focus on:

- Establishing farmers' markets, community gardens, and stores with fresh foods in low-income neighborhoods
- Increasing physical activity and physical education in schools and after-school programs
- Improving parks, sidewalks, and other opportunities for physical exercise, including walking trails and bicycle lanes
- Supporting healthy food and physical activity policies in the workplace
- Promoting "smart growth" strategies
- Encouraging healthy eating and physical activity opportunities through the media
- Engaging community residents in changing food and physical activity environments.

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disease prevention programs could save California more than \$1.7 billion in health care costs per year within five years, a return on investment of \$4.80 for each \$1.<sup>8</sup> Further, the California Center for Public Health Advocacy found that a 5 percent improvement in the rate of physical activity and

healthy weight over five years could trim almost \$12 billion from California's obesity-related costs.

## New Solutions: Creating Healthy Communities

Past efforts focused solely on changing individual behaviors have not succeeded in reversing the obesity epidemic, so many of today's efforts build on the concept of creating healthy communities. This new approach requires commitment from diverse organizations and sectors such as education, health care, housing, transportation, city planning, parks and recreation, and public health, as well as engagement of residents in discussions of community transformation.

Although not traditionally represented in discussions of healthy foods and physical activity, experts in transportation and city planning are now being brought into these discussions. In urban environments, design efforts might ensure that residents have access to public transportation, green space, neighborhood supermarkets, and streets that are safe for pedestrians, bicyclists, and motor vehicles. Efforts in rural areas might involve designs that increase walkability in neighborhoods and around schools through safe walking routes, and enable residents to purchase locally grown healthy foods. Potential benefits of such designs will accrue to individuals who will be more physically active if they walk to public transportation or ride a bicycle to work or school, to businesses that sell locally grown produce, and to the environment by mitigating the negative impacts of climate change (e.g., reducing greenhouse gases through fewer vehicle miles traveled).

Several initiatives to address obesity in California focus on underserved communities, particularly low-income communities and those of color, and engage community residents of all ages, along with organizations from multiple disciplines in efforts to change policies that support the creation of healthier environments. Examples of these policy changes include making locally grown food available to a community through farmers' markets and farm-to-school programs, creating joint use agreements for schools so that playgrounds are available for physical activity during non-school hours, and implementing "complete streets" that are safe for all users. Some examples of these statewide policy efforts are:

- California Convergence [www.californiaconvergence.org](http://www.californiaconvergence.org)
- California Department of Public Health's Network for a Healthy California: [www.networkforahealthycalifornia.net](http://www.networkforahealthycalifornia.net) and [www.CAchampionsforchange.net](http://www.CAchampionsforchange.net)

## References

- 1 *F as in Fat: How Obesity Policies Are Failing in America*, Trust for America's Health and Robert Wood Johnson Foundation. July 2009.
- 2 BD Smedley and SL Syme, editors, *Promoting Health: Intervention Strategies from Social and Behavioral Research*. Washington DC: National Academy Press; 2000.
- 3 V Narayan, et al., "One in Three People Will Have Type 2 Diabetes by the Year 2050," *Journal of the American Medical Association*, News Release. October 2003.
- 4 *California Obesity Prevention Plan: A Vision for Tomorrow, Strategic Actions for Today*. California Department of Health Services. 2006.
- 5 K Thorpe, et al., "The Impact of Obesity on Rising Medical Spending," *Health Affairs*. October 2004.

- Healthy Eating Active Communities [www.healthyeatingactivecommunities.org](http://www.healthyeatingactivecommunities.org)
- Healthy Eating Active Living Convergence Partnership [www.convergencepartnership.org](http://www.convergencepartnership.org)
- Active Living by Design <http://www.activelivingbydesign.org>
- Strategic Alliance [www.preventioninstitute.org/sa/index.html](http://www.preventioninstitute.org/sa/index.html) and <http://www.preventioninstitute.org/sa/enact/members/index.php> for a database of best practices to improve nutrition and physical activity environments

Two examples of communities and regions that are tackling obesity are the Central California Regional Obesity Prevention Program and The City Project in Los Angeles (see program highlights on pages 2 and 3).

### Policy Changes Required to Curb Obesity

Opportunities abound for improving home, school, work, and community environments where all California residents can thrive. Many such opportunities involve local, regional, statewide, or national policy changes that require or support healthier environments. Examples include replacing sodas in school vending machines with healthier options like water and non/low-fat milk, creating school fundraisers that support physical activity such as a walk-a-thon rather than depend on candy sales, and implementing worksite wellness programs that encourage people to take the stairs or a walking break outdoors. Community-level changes to support healthy environments include ensuring access to safe, green open spaces (e.g., parks, trails, and school sites); free, safe drinking water; and affordable, desirable, locally grown fruit and vegetables.

Originally released in September 2006, *The California Obesity Prevention Plan*<sup>9</sup> identified four key goals and dozens of actions to be taken by California's local governments, employers, health care

**“We have a vision for a healthier California... As California has been a leader in reducing tobacco use, we can be a leader in the campaign to reduce obesity.”<sup>10</sup>**

— California Department of Health Services, 2006

### Attacking Obesity Among the Underserved in Los Angeles

The City Project in Los Angeles envisions creating “a comprehensive and coherent web of parks, playgrounds, schools beaches, forests, and transportation that promotes human health and economic vitality, and reflects the diverse cultural urban landscape.” Through land-use planning, land conservation, policy and legal work, partnerships, and grassroots organizing, The City Project aims to:

- Increase park space, school fields, and access to natural public places for urban communities
- Build healthy communities by focusing on active recreation and healthy eating in the inner city
- Help students move more, eat well, and stay healthy
- Promote transit to trails (which allows urban residents to experience nature—e.g., through hiking trips to the mountains, camping at Los Angeles County beaches)

By actively engaging community residents and building capacity to advocate for and drive community change, The City Project helped save the sacred Native American site of Panhe and San Onofre State Beach, helped create the Los Angeles State Historic Park and the Rio de Los Angeles State Park, helped save the community and Park in Baldwin Hills, and helped create Ascot Hills Park in East LA. The positive impacts of these efforts are many, including:

- Healthy children playing in parks and school playgrounds
- Stronger policies for physical activity and healthy eating in parks and schools
- Youth development and leadership through physical activity and sports to improve academics and provide positive alternatives to gangs, violence, and crime
- Improved health, and reduced obesity and diabetes.

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insurers and providers, families, schools, the food and beverage industry, and the entertainment and professional sports industries to bring coherence to the attack on obesity in the state. Since the Plan's release, obesity prevention has taken a stronghold in California as well as nationally, and emerging evidence has allowed the California Department of Public Health and its partners to strengthen the plan that calls for California to:

- Create a central point of contact within state government to lead and serve as liaison for working across and within different sectors, such as schools, entertainment, employers, and health care, to create active living and healthy eating environments.

6 EA Finkelstein, IC Fiebelkorn, and G Wang, “National Medical Expenditures Attributable to Overweight and Obesity: How Much and Who's Paying?” *Health Affairs* (Web Exclusive):W3-219-226. May 14, 2003.

7 *The Economic Costs of Overweight, Obesity, and Physical Inactivity Among California Adults-2006*, California Center for Public Health Advocacy, July 2009.

8 *Prevention for a Healthier California: Investments in Disease Prevention Yield Significant Savings, Stronger Communities*, Trust for America's Health. October 2008.

9 *California Obesity Prevention Plan: A Vision for Tomorrow, Strategic Actions for Today*, California Department of Health Services, 2006.

10 *Ibid.*

- Develop and implement a statewide media campaign that supports local policy change and shifts the current norm to healthy food and active living as “California living.”
- Support investments in local assistance grants that strengthen the local public and state health system/infrastructure and implement policy strategies that create place-based, equity focused change to California’s social and physical environments thereby increasing access to, promotion of, and participation in healthy eating and active living.
- Create and implement a statewide research and evaluation system to measure policy and environmental changes, health impacts, population trends, and to assess program performance and impact.

## Policy Recommendations

Many leading organizations have made specific policy recommendations to address the obesity epidemic through changes in school, business, and state and local government practices. The following policy recommendations focus on ways to identify innovative solutions that involve policy changes designed to improve the health of individuals, address the many causes of obesity, and create healthier communities. They are made in the context of a policy principle that reflects a multi-sector, multidisciplinary approach: *Embrace the concept of health and equity in all policies.*

**1. Increase coordination of California’s efforts to create healthier environments and communities.** Current investments in programs to create healthier people in healthier places likely will yield better health and cost outcomes if they are coordinated at the state level. Effectiveness of programs can be determined and lessons learned disseminated earlier to all participants in the state.

**2. Develop new funding streams to support the creation of healthier environments.** Given the enormous popularity of sugar-sweetened beverages, even a small increase in the fee/tax on them has the potential to generate significant funds that could be used to create healthier communities.

**3. Implement, enforce, and measure the impact of evidence-based policies across the spectrum of home, school, work, and community environments.** A comprehensive environmental and policy approach that makes the healthy choice the easy choice is needed. This should incorporate access (e.g., designing community environments to include safe routes to school and places to play and making healthier choices available in cafeterias), pricing (e.g., selling locally grown, in-season fruits and vegetables at lower prices), and communication strategies (e.g., publicizing the media’s role in creating demand for food products). State and local policies must be enforced to ensure they are implemented in a manner that will lead to real changes in the health of individuals and communities, and that results are measured and intended results achieved.

**4. Focus efforts on populations that are experiencing inequities and have higher rates of overweight and obesity, as well as on youth.** Because certain population groups have disproportionately higher rates of obesity, including African-Americans, Latinos, and the poor, special efforts are needed to engage community residents including youth in advocacy and policy changes that impact their communities. Further, upstream support for sustainable agriculture should be provided to help ensure access to healthy foods in all communities. Downstream support should be provided through development of grocery stores in low-income communities, incentives for existing stores to offer more healthy food options, especially fresh produce, and incentives for alternate venues such as farmers’ markets and produce stands.



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