

**Informational Hearing of the Senate Select Committee on Obesity and Diabetes
February 20, 2008
Laurie True, Executive Director
California WIC Association**

Thank you for this opportunity to share my recommendations for strengthening California's response to the obesity and diabetes epidemic. I have been the California WIC Association's Executive Director since 1999. I am a public health nutritionist with many years experience in research, community organizing and legislative advocacy.

I will focus on recommendations for improved coordination of ongoing efforts within relevant state agencies, emphasizing the need for greater public input and accountability for achieving measurable public health outcomes in existing, funded programs.

I will also describe how the implementation of healthy changes to the WIC food packages in 2009 presents an unprecedented opportunity for California health programs to work together in new ways to support and promote positive food choices in low-income communities – an opportunity that should not be missed.

1. Overall Obesity Prevention Efforts Are Poorly Coordinated

In 2005, Governor Schwarzenegger released his own "Vision for a Healthy California" including ten far-reaching changes in state systems and local communities to promote healthier eating and more active living for all Californians. **But the Governor has taken no significant steps to implement this vision.**

In 2005, responding to statutory mandate (Budget Act of 2005, SB 77, Item #4260.001.0001, Provision 7), the California Department of Health and Human Services issued a California Obesity Prevention Plan. The CHHS Plan calls for, among other things, (A) State Level Leadership and Coordination" which will "*Create a central point of contact within state government to serve as lead and liaison in working across and within different sectors – such as schools, entertainment, employers, health care – to create active living and healthy eating environments;*" (B) A Statewide Public Education Campaign which will launch a "*statewide media campaign that frames healthy eating and active living as California living;*" and (C) A "Statewide Tracking and Evaluation System" which will "*Create and implement a statewide tracking and evaluation system to monitor health impacts, population trends, and assess program performance and impact.*" **To date, no discernable progress has been achieved towards these objectives.**

In 2006, the Institute of Medicine report *Progress in Preventing Childhood Obesity: How Do We Measure Up?* urged state governments to provide more leadership and to "establish high-level task forces on childhood obesity prevention to *identify priorities for action, coordinate public sector efforts, and establish effective interdepartmental collaborations.*" **California has not established such a group.**

On July 1, 2007, pursuant to statutory mandate (Senate Bill 162, Chapter 241) the State Department of Public Health came into being. The statute required the Director of this new Department to establish a Public Health Advisory Committee, a group of representative stakeholders with a charge to “*identify strategies to improve public health program effectiveness, identify emerging public health issues, and make recommendations, as necessary, on programs and policies to improve the health and safety of Californians.*” **This mandated Public Health Advisory Committee has not been established.**

The January 2008 Children Now Report Card notes with concern that policy efforts to address childhood obesity in California are *fragmented and uncoordinated,*” with multiple and conflicting approaches which are confusing and distracting policymakers. Specifically, the report notes that “*a coordinating body is needed to effectively pursue a multifaceted strategy that addresses childhood obesity and simultaneously holds policymakers and industry accountable.*” **No coordinating body has been established.**

Recommendations to Improve Statewide Obesity Prevention Coordination:

- A. The California Department of Public Health, under the Direction of the Director and through the Coordinating Office for Obesity Prevention, should be the lead agency in the State of California, responsible for implementation of the existing California Obesity Prevention Plan, which was released by the California Health and Human Services Agency in 2005.**
- B. The California Department of Public Health, under the Direction of the Director and through the Coordinating Office for Obesity Prevention, should include non-state representatives, including academic experts, grassroots organizations, low-income community members, and local community-based organizations, in ongoing meetings or inter-agency convenings designed to create workplans based on the California Obesity Prevention Plan.**
- C. The CDPH Director should report to the Legislature annually on its progress in implementing the California Obesity Prevention Plan, and submit to the Legislature a list of strategic objectives and concrete actions that will be pursued in the coming year, corresponding to the specific objectives and strategies outlined in the Plan.**
- D. The Little Hoover Commission should be asked to analyze and make recommendations regarding role delineation and opportunities for the various branches of state and local government to prevent obesity, and identify policy levers for positively impacting environmental conditions that lead to obesity.**
- E. The University of California Program on Access to Care should conduct research on the disproportionate disease burden and cost of obesity and diabetes among low-income communities of color, identify evidence-based strategies to reduce the burden of obesity and its complications on Californians, and report its findings to the Legislature.**

2. Poorly Coordinated Media Campaigns Waste Precious Resources

Considerable state and federal resources are currently being spent on statewide mass media and public education campaigns or efforts that focus on prevention of childhood obesity, mostly targeting low-income populations. Specifically:

- Within the California Department of Public Health, the Cancer Prevention and Nutrition Section, utilizing \$220 million in federal Food Stamp Nutrition Education Program funds that are generated using local in-kind matching funds, has budgeted over \$15 million for media contracts and campaigns in FFY 2008, with \$4.3 million allocated to Fruit, Vegetable and Physical Activity Campaigns, \$3.9 million for collateral materials, and \$10 million for a mass media campaign entitled “Champions for Change.”
- First Five California, funded by California Children and Families Act, is required to spend 6% of funds on Mass Media and Communications. In 2006-2007, these funds were spent on multi-million dollar mass media campaigns targeting Hispanic and Asian populations with obesity prevention messages. The Commission currently has \$32 million in this account for 2008, but it is not clear how these funds are being used.

Although these campaigns and programs all target low-income populations, they are not coordinated with each other, nor with programs such as WIC, Head Start and other child care programs that serve the very populations who are being targeted! At the local level, the result is a confusing barrage of media and messages urging low-income families to make individual changes to prevent obesity, but very little support for improved local access and affordability for healthier food and physical activity. This is a waste of precious public resources.

For example, both the “Champions for Change” and the First Five mass media campaigns target low-income families with young children – our WIC families. Last year, both campaigns were launched without any substantive coordination of planning, messaging, collateral materials, or follow-up with state or local WIC programs, which serve the same population in virtually every California community. If local WIC programs had been informed well in advance, they could have built these messages and materials into their counseling, classes and general promotional campaigns all over the state. Instead, this was a missed opportunity, and wasted precious resources.

Recommendations to Strengthen Coordination of Mass Media:

- A. Any statewide or regional media or public education campaign that involves obesity prevention, healthy eating or active living should coordinate planning and implementation *at least one year in advance*, using the California Department of Public Health, under the Direction of the Director and through the Coordinating Office For Obesity Prevention as a convening and lead agency.**

B. The CDPH Coordinating Office For Obesity Prevention must, in turn, provide *advance notice and obtain input* and ideas for coordinating complementary efforts among the relevant programs operating out of the State Department of Public Health, The State Department of Health Care Services, The California First Five Commission, The Department of Education or the Department of Food and Agriculture.

3. The New WIC Foods: An Opportunity to Model Interagency Coordination

The Special Supplemental Nutrition Program for Women, Infants and Children (WIC), a 100% federally funded Program of the California Department of Public Health, has a total FFY 2008 budget of close to \$1 billion, with almost \$700 million allocated for direct provision of specific nutritious foods for 1.4 million low-income participants, including 2 of every three infants and 750,000 preschool age children. In addition, the WIC Program will spend about \$275 million for direct nutrition services and administration, which includes nutrition education and breastfeeding support for millions of WIC participants.

By 2009, new federal regulations will allow California to update and improve the nutritional content of WIC foods. The new WIC food packages will include, for the first time, fresh fruits and vegetables, lowfat milk and soy substitutes, whole grains, baby foods, and flexible choices for cultural groups. Breastfeeding will also be further incentivized with new foods and better tailoring of formula distribution.

The implementation of the new WIC foods, which are purchased with WIC checks in over 4,000 WIC-authorized retail grocery stores, is an unprecedented opportunity for state collaboration and coordination. In addition to the \$700 million in permanent annual consumer purchasing power for healthier foods, especially fresh fruits and vegetables, by WIC participants, these foods will be newly available and more accessible to all other low-income shoppers, in neighborhoods where access to affordable and nutritious food is often a critical barrier to healthy choice.

Recommendations for Building Partnerships While Changing WIC Foods:

- A. All relevant California Department of Public Health programs and external partners – not just the WIC Program -- need to maximize the implementation of the new WIC foods with a carefully planned and coordinated rollout strategy.**
- B. Ongoing working partnerships should be clearly articulated and formalized with MOUs, between WIC and Network for Healthy California, the Division of Nutrition Services in the Department of Education, the Department of Food and Agriculture, and First Five California, in particular, on ways that these programs can work together to promote healthy food choices using the WIC foods as a promotional and teaching tool.**
- C. A collaborative rollout strategy should include three basic components: (1) Coordinated and consistent messaging that is culturally competent, evidence-**

based, and crosses traditional program boundaries; (2) Leveraged partnerships between programs serving the same sectors or populations; and (3) Maximized impact through partnerships and use of existing or shared educational or promotional materials.

For more information please contact:

Laurie True, MPH
Executive Director
California WIC Association
1107 Ninth Street, #625
Sacramento, CA 95814
916/448-2280
www.calwic.org