### 2016 - 2020 CLOCC Policy Agenda

#### Policy Priorities that Pertain to the Allocation of Resources for Obesity Prevention:

### A. Support City and/or State Initiatives to Forge Collaboration Between Schools and Health Agencies to Transfer Data for Public Use.

Tracking obesity trends can help the public health system to identify areas with greatest need and monitor progress, or lack thereof. Information of this nature can help direct resources to areas and population groups that need them most. Since 2004, CLOCC has been advocating for a statewide child health examination surveillance system (CHESS) that includes body mass index (BMI) data to monitor childhood overweight/obesity in the State, using data from the mandated Child Health Examination form. Since 2011, the Chicago Department of Public Health and Chicago Public Schools have been collaborating to analyze and report on BMI data among CPS students. CLOCC will continue to support and advocate for sustained collaboration and continued reporting at the city level. CLOCC has been helping lead efforts through the Illinois Alliance to Prevent Obesity to advocate for BMI surveillance across the state using similar approaches. CLOCC will continue to play this role in statewide surveillance efforts.

### B. Advocate for Provisions in Federal Legislation That Positively Affect the Availability of Funding for Obesity Prevention.

The U.S. Congress directs funding to the various federal health agencies through the budget and annual appropriations process. The U.S. Centers for Disease Control and Prevention, the U.S. Departments of Transportation, Education, Agriculture, and others have all used portions of their budget to support programs and strategies that have a positive impact on obesity prevention and that encourage communities to share best practices. Illinois and Chicago have benefitted from these appropriations through, for example, the Communities Putting Prevention to Work (CPPW), Racial and Ethnic Approaches to Community Health (REACH), Community Transformation Grants (CTG), and Partnerships to Improve Community Health (PICH). However, these investments are continually threatened by efforts to reduce budgets, eliminate programs, or re-allocate resources within and across federal agencies, putting obesity prevention efforts at risk. CPPW and CTG have been discontinued and programs like PICH and REACH are particularly threatened. CLOCC will work with local and national partners to educate legislators about the value of these programs and funding streams. We will advocate for federal legislation that maintains or increases obesity funding and against legislation that would reduce or eliminate such funding.

### Policy Priorities that Pertain to Child-Serving Institutions:

### C. Support Expansion of Chicago Physical Activity, Nutrition, and Screen Time Child Care Standards to the State of Illinois.

In 2014 the State of Illinois adopted new licensing requirements for licensed childcare centers that improve physical activity, nutrition, screen time, and breast feeding for children in licensed care. These improvements were based on standards passed by the Chicago Board of Health. CLOCC will work with partners and childcare providers to ensure the successful implementation of these requirements across the city. CLOCC will work with child health advocates across Illinois to support the adoption of these standards by the State of Illinois for licensed childcare family homes as well.



### D. Expand Participation by Schools and Childcare institutions in National School Lunch and Child and Adult Care Food Programs and Advocate for Improved Nutrition Standards in Federally-Funded Food Programs.

The Healthy Hunger-Free Kids Act has increased the funding schools receive for meals purchases by students and improved nutrition standards in a number of federally-funded food programs. CLOCC will work with partners to ensure implementation, local participation, and sustainability of these important changes. Areas of focus will include expanded participation in summer food programs, publicizing the community eligibility provision in the national school lunch program, and advocating against any efforts to weaken nutrition standards or limit access to such programs

### **Policy Priorities that Pertain to Healthy Food Access:**

#### E. Support Novel Models for and Ensure Equity in Healthy Food Retail.

Addressing the food access issues in Chicago requires creative approaches. CLOCC is committed to working with our partners to research and disseminate information about novel healthy food retail approaches, such as produce carts, SNAP "double-value" programs at farmers markets, and healthy corner store strategies for Chicago communities in low food access areas.

### F. Advocate for Provisions in Federal Legislation that Positively Affect Child Nutrition.

Child nutrition is addressed in a variety of federal programs, authorized through legislation. The Farm Bill includes SNAP, agriculture subsidies, food insecurity nutrition incentive grants, and fruit and vegetable programs. Every five years the Child Nutrition and WIC programs come up for reauthorization. These include the School Breakfast and National School Lunch programs, the Child and Adult Care Food Program, and the Summer Food Service Program. CLOCC is committed to researching and disseminating information to Consortium partners about how these federal programs and their supporting legislation are being addressed in Congress and educating the CLOCC network about strategies for ensuring that these programs continue to be funded and implemented with the highest standards of quality.

### G. Ensure Implementation and Sustainability of Fresh Food Financing Initiatives in Illinois and Ensure Access to Available Resources in Chicago.

CLOCC and partners participated in a statewide task force to create the IL Fresh Food Fund in 2009. This fund combined public and private dollars to incentivize grocery retailers to locate in low food access areas. CLOCC is committed to working with our partners to ensure that this fund is sustained, continues to be implemented, and that there are opportunities for the City of Chicago to benefit from these resources.

# H. Create Broad Multi-Sector Community Awareness on Breastfeeding Rights and Resources and Assure Compliance with Existing Laws in Important Institutional Settings.

Illinois has several state laws that promote and protect a woman's right to breastfeed. CLOCC is committed to working with our partners to educate individuals and organizations about these laws, and with government agencies to assure that existing laws are implemented so that breastfeeding women and breastfed babies are supported



### I. Expand the Number of "Baby-Friendly" Hospitals Following the World Health Organization (WHO) Model in Chicago and IL.

The WHO has established a "Baby-Friendly Hospital" designation for hospitals that promote breastfeeding through a comprehensive set of mechanisms. Only 6 hospitals in IL have this designation, none of which are located in the City of Chicago. CLOCC is committed to working with our partners to increase the number of designated "Baby-Friendly Hospitals" in Chicago, and to encourage all maternity units to move towards compliance with all 10 steps that are involved.

#### J. Limit Marketing of Unhealthy Foods and Beverages to Children and Their Parents.

Current and prevailing food and beverage marketing practices adversely influence children's food and beverage preferences and behaviors. Parents are also influenced by advertising of foods and beverages marketed towards children. CLOCC will work with our partners to reduce children's exposure to the marketing of unhealthy foods and beverages and encourage the marketing of healthy food and beverages. CLOCC will focus strategies in retail and educational settings.

# K. Consider the Merits of Proposals at the City, State, and Federal Levels To Tax Sugar-Sweetened Beverages to Reduce Consumption and Fund Obesity Prevention Programs and Services.

The scientific evidence about the contributions of sugar to obesity and the level of sugar consumption in Americans' diets, largely through sugar-sweetened beverages, has led obesity prevention advocates across the country to pursue sugar-sweetened beverage excise taxes as an important obesity prevention policy. CLOCC will evaluate proposals put forward at the city, state, and federal levels and provide information as appropriate to CLOCC partners and elected officials as they consider their positions. CLOCC will also make decisions on positions based on these analyses.

### L. Advance Recommendations in *A Recipe for Healthy Places*: Chicago's Healthy Food Plan.

Addressing the food access issues in IL requires both macro (i.e. improving the overall regional food system) and micro (i.e. working with individual food retailers) approaches. In 2012, CLOCC supported the City of Chicago in the development of a healthy food plan for Chicago, "A Recipe for Healthy Places." CLOCC will explore and advocate for opportunities to implement recommendations in this plan and to integrate its recommendations into state and local public health system plans (e.g., Healthy Chicago, State Health Improvement Plan).

#### **Policy Priorities that Pertain to Physical Activity:**

### M. Develop and Implement Ways to Increase Safety and Funding Equity in Safe Routes to School (SRTS).

Safety is an emerging focus of SRTS Programs nationwide. CLOCC is committed to ensuring that safety and violence prevention are priorities for the IL SRTS program. Additionally, Chicago receives a disproportionately low amount of funding for SRTS compared to the rest of the state (based on child population numbers). CLOCC will work with partners to advocate for IL to rectify this funding inequity and advocate for more overall resources for the program.



#### N. Implement City, County, and State Complete Streets Policies.

Complete Streets policies ensure that all users, with an emphasis on those *not* using motorized vehicles, have safe access to roadways. Chicago, Cook County, and IL have complete streets policies, however not all of these are codified into law. Implementation is ongoing but work remains to achieve full implementation. CLOCC will work with our partners to support these policies and their implementation. We will advocate for equitable street access for all users, with specific attention to those who use non-motorized transportation.

## O. Ensure Active Transportation Inclusion in Relevant State and Federal Legislation Consistent with National Transportation Objectives.

Active transportation is transportation that encourages and promotes safety, physical activity, health, recreation, social interaction, equity, environmental stewardship, and resource conversation. CLOCC will advocate for active transportation principles, consistent with National Transportation Objectives, be included in relevant federal legislation.

#### P. Maintain Daily Physical Education (P.E.) In Schools Every Day.

In this time of fiscal constraint, physical education is vulnerable in schools across the City and State. CLOCC will work with our partners to ensure that current P.E. is not undermined and that P.E. requirements are strengthened to ensure daily physical education for all children Pre K-12.

#### **Policy Priorities that Pertain to Clinical Care:**

#### Q. Improve Quality of and Access to Obesity-Related Preventive Services.

The U.S. Department of Health and Human Services convened an Expert Committee to develop guidance for childhood obesity prevention, assessment, and treatment of child and adolescent overweight and obesity. The Expert Committee recommends that providers universally assess children for obesity risk and then implement strategies or refer children to community resources that can support weight management for those children in need. CLOCC will work with partners to ensure that there is sufficient access to quality clinical and community services for all Chicago children, especially those representing populations with a higher burden of obesity. Strategies may include expanding access to intensive clinical and community counseling and behavioral interventions and other patient and family supports and improving public and private insurer policies and practices.

Note: \* indicate those initiatives in which CLOCC intends on leading.

**For additional information** about the current Policy Priorities, please contact CLOCC at 312-227-7100 or info@clocc.net.

