



**13<sup>th</sup> Annual Southern Obesity Summit**  
**October 28-30, 2019**  
**Breakout Session Agenda**

Tuesday, October 29, 2019: 10:45-12:00: Breakout Sessions One					
1.1	1.2	1.3	1.4	1.5	1.6
Environment and Active Living	Food Systems and Healthy Eating	Game Changing Science	Local Ecological Systems	Social Forces and Individual Psychology	Systems Approaches
<b>Physical Activity in Southern Adults: Rural-Urban Differences and Effects of the Physical and Social Environment</b>	<b>A Statewide Approach to Building Healthy Employers across Oklahoma</b>	<b>Beyond Obesity: Purposefully Advancing the Culture of Well-being in Oklahoma Hospitals</b>	<b>Parents for Healthy Kids: How Parents Are Changing School Health Culture</b>	<b>Middle School Girls Empowerment Project: Exploring Social and System Influences on Health and Behavior</b>	<b>How a Childhood Obesity Systems Model Can Inform State Level Policy &amp; Practice</b>
Our research team surveyed rural (n = 201) and urban (n = 228) South Carolina adult residents to better understand factors affecting obesity and related health behaviors. In this session, we will present findings from a study examining rural-urban differences in physical activity and effects of the physical and social environment on physical activity levels. Physical activity was assessed using the International Physical Activity Questionnaire-Short Form. Aspects of the physical and social environment were assessed using the Rural Active Living Perceived Environmental Support Scale and the Social Support and Exercise Survey, respectively.	Oklahoma has a shared vision for promoting health and wellness where we live, work, learn, play and pray. The Certified Healthy Business program provides a road map for businesses to implement science and evidence based policy and practice interventions, as well as receive recognition for their efforts. Starting with 23 applications in 2003 and growing to more than 900 in 2018, this session will focus on how Oklahoma has been able to systematically reach businesses in all corners of the state to address workplace health. A case study worksite will be presented from an HR perspective as well as next steps to take the statewide program to the next level.	In 2013, the Oklahoma Hospital Association, with funding by the Tobacco Settlement Endowment Trust, committed to creating a culture of well-being within health systems with the goal of improving employee health. The WorkHealthy Hospitals initiative (WHH) works to achieve this goal by providing health systems with a holistic blue print for establishing a culture of well-being within their organizations. Targeting nine dimensions of well-being, WHH provides an online bench-marking assessment, resources for improvement, tailored consultation, individualized score cards and recognition. Currently, the WHH initiative has 30 hospital partners across the state.	Parents and families have the greatest impact on kids' ability to lead healthy lives, both because of their clear influence at home and because of the power they have to affect change at the school level. Parents for Healthy Kids (PFHK) aims to help all parents understand their power to influence, implement and lead changes to the school health culture and use that power to take action with schools to implement health-promoting policies and practices. PFHK includes a framework of resources, educational opportunities and action steps that engage parents and families wherever they are on the continuum of school health involvement while encouraging them to become more deeply involved. PFHK is based on learnings from more than 10 years of working with parents on school health programs across the country. During this interactive session, attendees will discover the benefits of parents participating in health and wellness work, how to engage parents and further build capacity of the school health team.	Sharp gender differences in obesity prevalence and cardiovascular fitness are documented between middle school girls and boys. These gender gaps are worse in regions where chronic disease is highest, in particular, rural poor areas of Georgia. This session will highlight results from the Middle School Girls Empowerment Project in which expert interviews, social online listening, and focus groups with middle school girls were conducted to document barriers, facilitators, solutions and strategies to impact social structures, inform intervention design, and identify system change in communities and schools.	Since 2008, legislators have participated in the Georgia Legislative Health Policy Certificate Program (GLHPCP). Legislators learn to apply systems thinking to state health policy-making using a computer-based systems model. As part of the certificate program, state-level obesity data, partner investments, and obesity-related policies and interventions are explored. This session provides an overview of the GLHPCP and SOS participants become "legislative decision-makers" who use the computer-based systems model and collaborative conversations to explore potential strategies for action. The model simulates the impact of policy interventions on the prevalence of childhood BMI for age percentile from 2014 to 2034.
Demetrius Abshire, PhD, RN, University of South Carolina College of Nursing	Craig Mcneill, DalTile Manufacturing; Julie Dearing, MS, Oklahoma State Department of Health	Sydney Tomlinson, BS, Oklahoma Hospital Association	Ellen Dillon, Action for Healthy Kids	Rachel Campos, MPH, Senior Research Associate, Georgia Health Policy Center, Georgia State University	Debra Kibbe, MS, Senior Research Associate, Georgia Health Policy Center, Georgia State University
<b>Newkirk Pathway Project, An Active Living and Walkability Project</b>	<b>Rethinking Retail: The Public Health Implications of Limited-Service Food Stores</b>	<b>Early Detection of Pre-Diabetes, It's Impact on Obesity.</b>	<b>Family Child Care Home Provider Nutrition Knowledge and Self-Efficacy: Baseline Findings from Happy Healthy Homes</b>	<b>A Teen's perspective of the Individual Psychology of Being Healthier</b>	<b>State Nutrition Action Councils: Collaborations to Reduce Obesity using a Systems Approach</b>
The Newkirk Pathway Project is a community project with the City of Newkirk, TSET Healthy Living Program of Kay County, and community volunteers. The project identified three areas in the community where a fitness path, bike path, and Safe Routes to School path could be created. The partnership with the City of Newkirk led to the adoption and implementation of the pathways. The Newkirk Pathway Project also included an event roll out to complement the announcement of an award of funding to complete the first phase of the pathway, the fitness path	Nineteen million Americans live in low-income communities that are more than one mile from a supermarket. This food access gap has made it possible for limited-service stores like dollar and convenience stores to thrive. These stores keep costs low by collecting placement fees from processed food manufacturers and stocking significantly fewer items that require expensive cold storage like fresh fruits and vegetables. This session will explore the public health implications of the proliferation of such stores, share a tool advocates can use to assess the prevalence	Vision Care Direct (VCD) uses a patented FDA Approved technology to scan a person's eye and provide immediate results if the person is diabetic or even pre-diabetic up to 10 years before an A1C. VCD has built a Population Health Management Program that when implemented has a positive ROI and a direct impact on individuals who are obese. A major component of our program is prevention and that is achieved with a combination of certified diabetic education and remote blood glucose monitoring. Our program brings technology to the employer's location(s) where all testing is completed.	Background: Early obesity prevention in key environments where young children spend substantial time, such as early care and education (ECE) is essential. Children are not eating adequate amounts of whole grains, fruits, vegetables, and nutrients, or getting sufficient physical activity in ECE. Family Child Care Homes (FCCH) are licensed home-based ECEs. Few studies have examined nutrition and physical activity (PA) in FCCHs. Purpose: The purpose of this study was to determine the nutrition and PA practices and policies in FCCH. Methods: Cross-sectional study with self-reported practices and policies	My session will be centered around Individual psychology. (My plan is to piggyback off of my co-contributor Zoe Price who will speak about social factors under the track) I will start with an explanation of the mindset of improving health, and health seeking behaviors, followed by a discussion about attitudes surrounding obesity. Then perceptions of body image and its relation with the weight dominant health paradigm. Lastly I will touch upon obesity transition and health equity.	The State Nutrition Action Council (SNAC) toolkit provides guidance and activities to foster state-level collaboration and contains recommendations, activities, and success stories to support long-term change at the state level. Convening state-level agencies to identify and implement collective programs to reduce obesity is a key strategy in improving health in the most-at-risk communities. Various state-level agencies receive funding to do similar work which may lead to duplication of efforts and an inefficient use of resources. Collaboration allows organizations to work jointly to accomplish a united vision and mission to

	of unhealthy foods, and offer strategies to support healthy eating.		conducted in Oklahoma from October 2017 to November 2018.		accelerate change and maximize resources using a systems approach.
Jenny Creech, Oklahoma State University Prevention Programs, Grant Coordinator, TSET Healthy Living Program	Darya Minovi, MPH, Center for Science in the Public Interest	James Ashford, NAHU Self-Funding Certified American Diabetes Professional Member, Vision Care Direct	Susan Sisson, PhD, CHES, RDN, FACSM, University of Oklahoma Health Sciences Center	Alison Zhang, The Oliver Foundation	Amy DeLisio, MPH, RD, Public Health Institute Center for Wellness and Nutrition
<b>Traditional Employee Wellness Can Save You \$1M!</b>				<b>Teen Obesity in Schools- The Vantage Point of a Sophomore</b>	
After a three year trial of an employee wellness program, our organization has seen a savings of \$1M in claims, an improvement of 25% of blood pressures for employees and covered spouses, 88% of employees and covered spouses are in the normal range for glucose and we have a 95% participation rate in our wellness program.				The 2017 Youth Risk Behavior Surveillance System shows that 14.8% of U.S. high school students had obesity. An additional 15.6% of high-schoolers were overweight. Texas came in the top-5 of this list in this study. Being in a Houston school, I have pondered over this trend and seen the problem and its impact firsthand. For the past year, I have been part of Oliver Foundation which is focused on childhood obesity. In this presentation I will focus on keys causes, impacts, and possible fixes for this trend based on my day to day experience of class schedule, access to food, in-school and after-school physical activities in middle school and high-school.	
Lucy Muller, MSHR, McAlester Regional Health Center				Sreeram Satish, Advisor on the Oliver Foundation Teen Board, Oliver Foundation	
<b>Tuesday, October 29, 2019: 2:15-3:30: Breakout Sessions Two</b>					
2.1	2.2	2.3	2.4	2.5	2.6
Environment and Active Living	Food Systems and Healthy Eating	Food Systems and Healthy Eating	Social Forces and Individual Psychology	Systems Approaches	Local Ecological Systems
<b>Public Library Partnerships: your community connection!</b>	<b>The Effect of the Community Food Environment on Family Child Care Home Meal Quality</b>	<b>Citizen Tools for Jump Starting PSE Systems Approaches in Marginalized Communities</b>	<b>Understanding Commercial Tobacco Beliefs and Behaviors to Promote Health and Prevent Disease</b>	<b>A community of practice approach for understanding and using effectiveness and economic information for obesity prevention</b>	<b>“We’re an online super-coalition!” - Growth of a Cross-Agency Public Health Virtual Community</b>
Libraries partner with many agencies to educate communities in how to actively engage in healthy behaviors that reduce the incidence of obesity. The agencies focusing upon health information that collaborate to improve health via public libraries include the National Network of Libraries of Medicine (NNLM), State Libraries (i.e. Oklahoma Department of Libraries (ODL), Public Health Departments, Non-Profit agencies and Public Libraries. The partnership between these agencies provides programmatic funding, technology, educational resources, professional expertise, and clinical knowledge to enable libraries to provide nutrition, fitness, cooking, wellness and other programs that aim to reduce the incidence of obesity in our communities.	The purpose of this study was to determine if there is a difference in the quality of meals offered to children attending family child care homes (FCCH) by food environment status (food desert vs. non-desert). FCCH providers serving 2-to-5 year olds were recruited from the Oklahoma City area. Data was collected from two lunch visits regarding the presence of fresh fruits and vegetables, nutrients served, and compliance to the Child and Adult Care Food Program (CACFP). Driving distance was collected by provider self-report and through ArcGIS spatial analysis software. Modified retail food environment index (mRFEI) scores were used to operationalize census tracts as food deserts (mRFEI = 0) and non-deserts (mRFEI > 0). FCCH and grocery store addresses and mRFEI scores were layered onto a map of Oklahoma.	This case study highlights Texas A&M’s triangulated planning approach in three marginalized counties by developing basic planning process workbooks, guiding local advocates with technical assistance, and encouraging implementation with action-based starter kits. The program focuses on guiding local advocates to take small but meaningful steps to identify, plan, and pilot test environmental changes and build systems to serve as a map for long term planning, policies, and built environments to improve connectivity to everyday places(e.g. stores) and access to fruits and vegetables.	Oklahoma City Indian Clinic (OKCIC) created a community needs assessment and surveyed 500 patients for commercial tobacco use behaviors, attitudes, and beliefs. Tobacco use questions were combined with 5210 assessments to analyze correlations between obesity, obesogenic behaviors. Increased body mass index (BMI), sugar-sweetened beverages (SSB) intake, and screen time was significantly associated with every trying cigarettes. Increased SSB and screen time were significantly associated with every using e-cigarette. OKCIC will use this data to create and implement targeted tobacco prevention programs and create a marketing campaign.	This session will describe the development and launch of the Childhood Obesity Intervention Cost-Effectiveness Study (CHOICES) Community of Practice. The CHOICES Community of Practice is mainly a virtual community resource intended to help build the capacity of state and local health agencies to use effectiveness and economic evaluation to make strategic investments in activities and plans they create to outline their states activities to implement childhood obesity prevention initiatives.	Leaders from three Oklahoma state public health agencies established the OK In the Know (OKITK) coordinated knowledge management system to align distinct missions in obesity prevention, tobacco control, and substance abuse prevention. This online community of practice encourages peer to peer sharing and multi-sectoral collaboration among grantees and staff of state-funded community programs. It is a cost-efficient, centralized platform for disseminating evidence-based information and promising practices to a wide range of public health stakeholders. This session will describe outcomes related to training and collaboration, opportunities to further scale this initiative, and strategies for cross-agency collaboration that could be replicated elsewhere.
Brian Leaf, National Network of Libraries of Medicine, South Central Region	Sara Fortin-Miller, MS, Department of Nutritional Sciences, College of Allied Health, University of Oklahoma Health Sciences Center	Valerie Jauregui, MPA, Project Manager, Texas A&M CDC 1809 HOB Grant for Working on Wellness Environments in four Texas Counties, Texas A&M AgriLife Extension	Rochelle Plummer, MS, RD/LD, CLC, Oklahoma City Indian Clinic; Lori LeClaire, B.S., Oklahoma City Indian Clinic	Angie Cradock, ScD, Harvard T.H. Chan School of Public Health	Carissa Beatty, MPH, CHES, Emory Centers for Training & Technical Assistance at Emory University

<b>Nutrition Education, Healthcare, and Local Agriculture: Cross-Sectoral Partnerships for Improving Health Outcomes</b>	<b>Innovation in Early Childhood Nutrition</b>	<b>The Food Desert Status of Early Care and Education Environments in Oklahoma: Foundations for Future Obesity Intervention</b>	<b>Understanding Eating Disorders</b>	<b>Preemption and Health: The Latest in Southern States</b>	<b>Effecting Change Through Collaboration</b>
<p>Open Hand Atlanta collaborates with healthcare providers in Atlanta to implement Cooking Matters for Healthcare Partners (formerly known as Fruit and Vegetable Prescription Program). This program provides nutrition and cooking education and produce prescription vouchers to be redeemed at local farmers markets by individuals screening positive for chronic disease and food insecurity. Participants also receive ongoing support and health education through their healthcare provider. Open Hand collaborates with Grady Healthcare and Wholesome Wave Georgia to bolster a multi-sectoral system of health and nutrition supports that aim to mitigate the effects of chronic disease and food insecurity in low-income populations.</p>	<p>To move the needle on childhood obesity, it is critical to start early, work together and also take some risks and innovate. Since 2015, Georgia has implemented farm to early care with a simple recipe: invest in pilot programs, address racial equity, support local farmers, and identify tools that work for early care programs. One innovative tool is the implementation of the Taste Test Box created to expose children to and increase preference for fruits and vegetables, increase teacher self-efficacy to integrate nutrition with early care lessons, and support farmers of color and women farmers.</p>	<p>Background: Food environment is associated with weight status. Sixty-one percent of children attend early care and education (ECE) programs. ECE food environment likely shapes the child’s intake through both the ECE and family. Studies have not previously analyzed the food environment status of ECEs. Purpose: To determine the prevalence of ECEs located within food deserts in Oklahoma. Methods: Utilized Geographic Information Systems (GIS) to integrate and analyze the locations of ECEs and food retailers in Oklahoma. Results: The ECE distribution was: 31% [n=832] in food deserts, 68% [n=1818] in non-deserts, and 1% [n=22] in areas without any food retailers. The distance to the nearest grocer was longer in food deserts regardless of other factors.</p>	<p>Understanding Eating Disorders is a presentation that is offered to all school districts in the state of Arkansas. The Community Health Promotion Specialist and the Community Health Nurse Specialist are responsible for providing technical assistance, education and policy guidance to school district personnel, school nutrition and health committees, and community health coalitions. We maintain current knowledge of child health issues such as eating disorders and coordinate and facilitate training for school personnel and communities.</p>	<p>Advancements in public health have relied upon a thriving and engaged democratic process that supports innovative policy making at the local level. Broader social justice movements – including those focused on achieving equity – also often start locally. Local policy-making is currently under threat by an onslaught of policies that stop, limit, or discourage local communities from enacting policy solutions. Referred to as preemption, these are policies in which a higher level of government limits a lower form of government from taking action on an issue. Preemption is becoming an increasingly common state legislative tactic across the country, but particularly in the South, and is extending to a greater number of policy issue areas. In many cases, pro-preemption lawmakers are acting as agents of special interests often more intent on protecting corporate profits and power than improving community health or wellness. These harmful preemption actions can perpetuate disparities, prohibit policy action.</p>	<p>By bringing together the community, school district leadership and parents, Action for Healthy Kids, partnering with University of Texas El Paso and Paso del Norte Health Foundation as part of the Healthy Eating/Active Living (HEAL) project has been able to effect school policies and build stronger relationships between community members and schools. Within the first year we were able to increase parent involvement in health related issues, support new policies on recess, convene school and community members around school nutrition, and facilitate the development of a new Safe Routes to School initiative. This model has helped schools identify weak policy areas and gain parent and community support to effect change.</p>
<p>Courtney Bursuc, MPH, Open Hand Atlanta</p>	<p>Erin Croom, M.S., Small Bites Adventure Club</p>	<p>Catherine Grantham, MS, University of Oklahoma Heath Sciences Center</p>	<p>Sarah Brisco, Bachelor of Science in Education in Health Science, Arkansas Department of Health</p>	<p>Christine Compton, Voices for Healthy Kids, American Heart Association</p>	<p>Michelle Smith, Action for Healthy Kids</p>
<b>Health Educators are Catalyst to Obesity Prevention in Schools</b>		<b>Creating An Equitable Food System in A Rural Community</b>	<b>How Social Media Impacts Individual Physiology</b>		<b>Wellness Team Leaders Creating Change</b>
<p>The EatMoveGrow (EMG) school-based obesity prevention project has utilized grassroots Health Educators to build healthier school environments resulting in healthier BMIs. EMG has modeled the paramount role of community health workers in improving primary health in low income communities with non-clinical Health Educators building cultures of health in low-resource elementary schools. Their work includes educating on the benefits of healthy lifestyles, promoting activity and nutrition, and linking schools to funding and program opportunities. In addition to BMI movement in the healthy direction, the positive impact of the program has been documented in classrooms, physical education, cafeterias, and recess</p>		<p>Systems building requires multiple partners to commit time and resources before long-term, sustainable health improvements can be realized. At the same time, people are in need now, and programs and services must be in place to help them. This session will explore how community organizations can balance addressing immediate needs while working on longer term, sustainable change with multiple partners. Walker County, Alabama will share their experience building an equitable food system even as they are meeting the needs of food insecure residents. We will share a tool that can be used to build a foundation for systems change.</p>	<p>My session will focus on how social media affects individual physiology, specifically in teenagers. I will be working with by co-contributor Alison Zhang to discuss the full implications. I would like to start off by explaining how social media works, then discuss how these sites show individuals images that could negatively affect their mental health and attitudes towards healthy or unhealthy behaviors. My partner, Alison, will describe how these attitudes and ideas will impact their behaviors.</p>		<p>This session will review the expectations of the Wellness Team Leader (WTL) and outcomes that have occurred by staffing a wellness team leader for each local education agency in a district servicing 64,000 students. Expectations for the WTL include: attend the BOY district WTL training, address the faculty at the BOY, conduct at least two wellness meetings per semester, complete the school health index, complete an action plan, disseminate health vignette information &amp; brain booster content, conduct one initiative aligned with the CSPAP, and complete a wellness team leader form assigning a parent to attend the school health advisory council.</p>
<p>Donna Newton, Masters of Exercise Science, Certified Exercise Physiologist, Executive Director, The Health Enrichment Network</p>		<p>Ericka Burroughs-Girardi, MA, MPH, County Health Rankings &amp; Roadmaps; Paul Kennedy, Walker Area Community Foundation</p>	<p>Zoe Price, The Oliver Foundation Teen Advisory Board</p>		<p>Javier Carrasco, PhD</p>

Tuesday, October 29, 2019: 3:45-5:00: Breakout Sessions Three					
3.1	3.2	3.3	3.4.	3.5	3.6
Food Systems and Healthy Eating	Food Systems and Healthy Eating	Environment and Active Living	Social Forces and Individual Psychology	Local Ecological Systems	Systems Approaches
<b>Farm to Early Care and Education (FTECE) and Obesity Prevention: Outcomes and lessons learned in Georgia's W.K. Kellogg-funded FTECE Initiative</b>	<b>Quick Steps to Adopt Sustainable and Healthy Nutrition &amp; Fitness Habits for Children and Families</b>	<b>The Daily Mile</b>	<b>An Innovative Approach to Childhood Obesity Prevention: A Positive Deviance Perspective</b>	<b>Healthy Schools Incentive Program: An Innovative Approach to Incentivize Schools to Implement Best Practice Obesity Prevention Policies</b>	<b>Complementary Resources to Enhance Child Care Centers Across Tennessee</b>
This session will review system changes and challenges, partnership lessons learned, racial equity progress, and outcomes achieved in the W.K. Kellogg-funded Georgia Farm to Early Care and Education (GFTECE) project. Five unique, GFTECE partners collaborated from 2017 to 2019 to increase the number of young children accessing, learning about, and eating fresh, nutritious local food regardless of income or zip code; increase the capacity of early childcare and education providers to integrate FTECE strategies in their facilities, and advance quality and awareness of nutrition, physical activity and obesity prevention strategies in early childcare and education settings.	I've created customized meal & fitness plans for corporate clients, in addition to children & families by focusing on macros and not calories. Using creative ways I educate children on healthy habits through my company "The Food Talk". Methods include coming to clients' homes and finding healthy alternatives to common foods, cooking with families in their homes utilizing creative recipes that get children involved in the cooking process and addressing the issue of sugar addiction by recommending sugar alternatives, implementing a detox program to get kids and families off of sugar. Lastly, suggest fun exercises to get kids and families active.	The Daily Mile is simple and free. We want to get children fit for life and fit for learning by encouraging them to run or jog for 15 minutes every day in their schools or preschools. It is a physical activity which promotes social, emotional and mental health and wellbeing, as well as fitness. It takes place outside in the fresh air during the school day at a time of the teacher's choosing. Children run in their school clothes and no special equipment is required.	Children gain more weight during the 3-month summer than during the entire 9-month school year. The Positive Deviance (PD) framework suggests that within any population, there are those who manage to engage in health-promoting behaviors despite experiencing similar obstacles as those who do not. The PD framework can help identify unique intervention strategies to address accelerated weight gain over the summer. The presentation will discuss the application of PD to childhood obesity using both quantitative and qualitative methodology. The PD framework offers a new perspective for public health interventions that may elucidate innovative pathways to health behaviors.	Incentivized 159 school districts and schools to adopt and implement between 10 and 70 best and promising practice obesity prevention policies that impacted 239,382 students. The amount awarded was based on the number of policies implemented and the size of student enrollment. Provided technical assistance during policy adoption and implementation which promoted local control of obesity prevention policies while taking into consideration grantees' capacity and needs. Ensured all policies implemented were consistent with national recommendations. The total amount of incentive awards was \$766,750 which funded projects that promoted student safety and health such as playground improvements and greenhouse equipment.	Established July 2018, the Tennessee State Nutrition Action Council (SNAC) engaged 10 state agencies to address obesity prevention strategies using a systems approach. TN SNAC quickly prioritized the 0-5 population and spearheaded the revamp of the ABC123 Healthy Tennessee resource hub. This allowed trainers to support child care center personnel from across the state to incorporate physical activity and nutrition education in childcare centers. The ABC123 resource is a 12-week program that provides teachers with simple materials to incorporate into daily activities, while enhancing and complementing the Gold Sneaker Initiative. Pilot programs will be implemented September 2019, outcomes to follow.
Debra Kibbe, MS, Senior Research Associate, Georgia Health Policy Center, Georgia State University	Sanjay Raja, The Food Talk LLC	William Russell, The Daily Mile	Roddrick Dugger, MPH, University of South Carolina- Arnold Childhood Obesity Initiative	Sharon Howard, BSN, MA, TSET; Noelle Kleszynski, MPH	MarLea Finch, MS, RD, LDN, Tennessee-State Nutrition Action Coalition
<b>Food Banks as Leaders for Community-wide Obesity Prevention for Children and Families</b>	<b>Nutrition Education with Kids in the Kitchen</b>	<b>Comprehensive School Physical Activity Program: An Introduction and Overview</b>	<b>CHOICES (Childhood Obesity Intervention Cost Effectiveness Study) - Oklahoma WIC Screen time intervention.</b>	<b>Oklahoma's Systemic Approach to School Health</b>	<b>Innovation in Obesity Education - Project ECHO Model</b>
This presentation will highlight a project called Thriving Communities, Thriving Children II (TCTC2) that is funded by the W.K. Kellogg Foundation, led by the Mississippi Food Network (MFN) and uses an easy-to-replicate, community-wide model for nutrition and health education. Dr. Lombardo will provide an overview and discuss a unique element of TCTC2 - the successful Backpack Program and 'School Pantry Night' that addressed children who experience chronic hunger and families in need of access to fruits, vegetables, and staple food items. Learn how Food Banks are ideal organizations to implement both of these strategies.	Participants in this session will learn about Georgia 4-H Nutrition and Healthy Lifestyles Curriculum and one or more activities developed to teach young students about portion sizes and demonstrate the principles of nutrition in a fun, interactive kitchen experience. She also helps as a state content supervisor for the Georgia 4-H Egg preparation and Demonstration Content and has served as an ambassador at the national contest which allows 4-H members to demonstrate their culinary skills and food safety skills to judges and observers. She has also coached a national winner in this competition	This session will discuss the importance of implementing a Comprehensive School Physical Activity Program and include the latest research on the link between increased physical health and academic achievement.	Modeling & Implementation of the Incorporation of Screen Time Counseling into the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) in Oklahoma.	Through strong partnerships among state agencies that support and guide school health, Oklahoma is striving to implement a systematic approach to helping students adopt life-long healthy habits. In 2010, Oklahoma passed the "Certified Healthy Schools Act" that created a pathway for schools to receive recognition and guidance for providing a healthy environment for students and employees rooted in evidence-based health and wellness principles. Building on this work, Oklahoma is currently implementing a new Champions of Excellence Program as a companion to the existing school accountability system that supports schools in better leveraging federal funds for the whole school, whole community and whole child (WSCC) approach.	Oklahoma has 77 counties that are within the bounties of our state. Some of those regions are easily accessible for medical, education and industry, while others are limited based on their location or economic development that have lacked the progress of other regions within the state. Within the past two years, OSU Project ECHO has reached urban inner city regions in the state, tribal nations within the jurisdiction of their authority, federally qualified healthcare centers, residency programs and individual practitioner clinics in some of the furthest most corners of the state. OSU Project ECHO has advanced the knowledge of specialty care though the state of Oklahoma in medicine and education.
Michelle Lombardo, Doctor of Chiropractic, The OrganWise Guys	Lynn Davis, Public Service Associate of the University Of Georgia, Turner County 4-H with the University of Georgia College of Agricultural and Environmental Sciences	Savannah Owen, M.Ed., Sport Administration, Educational Leadership Assistant Principal, Edmond Public Schools	Christina Windrix, RDN, LD, Oklahoma State Department of Health - WIC Service	Julie Dearing, MS, Oklahoma State Department of Health	Sara Coffey, D.O., Oklahoma State University Center for Health Sciences
<b>Building Farmers Market Capacity to Improve Access to Quality Food</b>		<b>Creating a School of Wellness</b>	<b>Using County-Specific Data to Drive a Localized Approach to Obesity</b>	<b>Oklahoma's Systemic Approach to School Health</b>	<b>SNAP, Collaborate &amp; Listen</b>

<p>Following formative evaluation of the utilization of Farmers Markets among SNAP recipients, ONIE focused efforts on building capacity of markets &amp; increasing markets accepting SNAP, to improve access to quality produce. Most markets had no training &amp; had little budget for development. In order to provide tools to help build capacity several challenges needed to be addressed. ONIE created the OKFMAC with collaborating partners. This is free to attend &amp; welcomes hundreds of growers, market managers &amp; support organizations. It provides opportunities to find resources, build relationships, develop innovative approaches, find new ideas for marketing plans, expand crop production &amp; extend seasons.</p>		<p>This session will explore the work of EatMoveGrow in establishing healthy school communities over the last 5 years that were developed specifically to address health gaps around physical activity and nutrition challenges faced by children in rural, low-resource Delta designated parishes. EMG grass roots program provides multiple forms of support to allow successful implementation of policies and built improvements that have yielded a shift to a healthy school environment.</p>	<p>Oklahoma has one of the highest childhood and adult obesity rates in the nation and is one of the most rural states in America. Shape Your Future (SYF) wanted to target rural and high obese counties in Oklahoma by providing healthy reminders to residents through signage placed in grocery stores, low-income housing communities and laundromats. SYF wanted to meet people where they were and provide tip-based handouts that would allow people to continue what they were already doing, but possibly make a healthy choice in conjunction. This session will review the planning, execution and impact of this approach.</p>	<p>Through strong partnerships among state agencies that support and guide school health, Oklahoma is striving to implement a systematic approach to helping students adopt life-long healthy habits. In 2010, Oklahoma passed the "Certified Healthy Schools Act" that created a pathway for schools to receive recognition and guidance for providing a healthy environment for students and employees rooted in evidence-based health and wellness principles. Building on this work, Oklahoma is currently implementing a new Champions of Excellence Program as a companion to the existing school accountability system that supports schools in better leveraging federal funds for the whole school, whole community and whole child (WSCC) approach.</p>	<p>Kentucky's State Nutrition Action Council (SNAC) collaborates with diverse partners to identify and implement programs to reduce obesity as a key strategy in improving the health of communities. Kentucky identified the need to create strong, effective communication among partners to enhance services for SNAP-Education clients. The SNAP, Collaborate &amp; Listen project strengthens agency-to-agency communication by providing a tool created and maintained among partners to collaborate and share information regarding outreach activities provided for clients. This tool shares detailed information about what partners are providing and allows them the opportunity to assist throughout the Commonwealth. Pilot project to begin Summer 2019.</p>
<p>Meredith Scott-Kaliki, MS, CHES, Oklahoma Nutrition Information and Education (ONIE) Project</p>		<p>Donna Newton, Master of Science, Certified Exercise Physiologist, The Health Enrichment Network</p>	<p>Ann E. Freeman, Marketing Coordinator, VI Marketing and Branding, Tobacco Settlement Endowment Trust (TSET)</p>	<p>Levi Patrick, Assistant Executive Director of Curriculum and Instruction, Oklahoma State Department of Education</p>	<p>Christina Marraccini, Dept. Community Based Services Kentucky SNAP ED</p>
<b>Wednesday, October 30, 2019: 10:45-12:00: Breakout Sessions Four</b>					
4.1	4.2	4.3	4.4	4.5	4.6
Food Systems and Healthy Eating	Food Systems and Healthy Eating	Food Systems and Healthy Eating	Local Ecological Systems	Local Ecological Systems	Food Systems and Healthy Eating
<p><b>Addressing Food Access in Rural Communities.</b></p>	<p><b>Blending Nutrition and Education in Schools</b></p>	<p><b>Cross-Sectoral Collaboration Catalyzing Community Food Security Improvement Strategies for Atlanta's Hispanic Community</b></p>	<p><b>Association of provider race/ethnicity, perception of food program impact and paperwork barriers on CACFP best practice compliance.</b></p>	<p><b>Process and Impact of Developing a Wellness Workforce within Oklahoma's Department of Mental Health and Substance Abuse Services</b></p>	<p><b>Local Wellness Policy: Putting It Into Action to Make It Count</b></p>
<p>A rural food retail business addresses food access by purchasing a mobile grocery store to reach underserved communities. Strategies include identifying areas of need, working with area task forces to provide or increase access to healthy food, affordability and sustainability.</p>	<p>The city-county health department is partnering with public school districts to deliver nutrition education. Prior to this program, there was minimal formal nutrition education offered. Childhood obesity and low consumption of produce is a state-wide public health concern. School health program staff go to schools, holding classes that feature the use of a blender bike. Staff teach nutrition concepts and provide nutrition education, focusing on label reading, food groups, healthy drinks and strategies to incorporate produce into diets. Students complete two post-session assessments, checking for knowledge and gaging the likelihood of behavior changes.</p>	<p>Through extensive cross-sectoral collaboration with Hispanic community serving non-profits, local healthcare providers, and local municipalities, Open Hand is catalyzing the development of a more equitable food system for the metro-Atlanta area's under served and marginalized Hispanic community. Collaboration with partners whom previously worked independently to address public health concerns through independent strategies has substantially increased the scope, resources, and impact for food security improvement strategies. Potential partners were identified and recruited over a twelve month period. Utilizing influence mapping as a tool to understand stakeholder values significantly contributed to successful pitches to potential partners and deepened Open Hand's research and implementation program.</p>	<p>The purpose of this study was to determine the associations between FCCH provider race/ethnicity and perceptions of the CACFP on lunchtime and menu best practice compliance scores. Data was collected in Oklahoma FCCHs serving children aged 2- to 5-years old from October 2017 to November 2018. The study was cross-sectional with provider-reported demographics, perception of food program impact and paperwork barriers. CACFP best practice implementation was determined based on lunchtime observation from two in-home visits and a current five-day program menu. Descriptive statistics, t-tests and Chi-square analyses were performed.</p>	<p>In 2015, the Oklahoma State Department of Mental Health and Substance Abuse Services (ODMHSAS) designed and implemented a Wellness Coach Training and Certification Program. This program aimed to develop a workforce capable of addressing the wellness needs of ODMHSAS consumers. Through this program, Peer Recovery Support Specialists and other mental health professionals were equipped to deliver wellness skills, including physical activity and nutrition support to consumers. Certification was obtained after completing training and passing a certification test. From 2016-2018 the program expanded to a Wellness Coach Credential, requiring annual CEUs. ODMHSAS also requires Wellness Coaches on each consumer's treatment team.</p>	<p>Come join this interactive session that will provide hands-on skills and resources to support improving Local Wellness Policies (LWP). This will include LWP implementation, monitoring and reporting requirements as well as guidelines for competitive foods and beverages, food and beverage marketing and turnkey resources for nutrition education and promotion. Participants will; 1) Discuss the key components of the USDA local wellness policy requirements to ensure district policies are compliant. 2) Identify strategies and resources to support the implementation, monitoring and reporting requirements for district wellness policies. 3) Identify how districts can support school-level implementation of and compliance with district wellness policies. 4) Identify strategies to determine if foods and beverages sold and served on campus meet the Smart Snacks in School nutrition standards. 5) Identify resources to support healthy marketing messages that promote good nutrition across the school campus and ensure all foods and beverages advertised meet the Smart Snacks in School Standards. 6) Discuss ways to implement nutrition education opportunities</p>

					throughout the school day. 7) Create an action plan for reviewing and updating their district wellness policy.
Johnny Sandmann, Co-owner Sonny's Market, Coalgate Oklahoma Entrepreneur and Attorney of Law, Sonny's Market of Coalgate	Melissa Horn-Speck, MS, RDN, LDN, It's All About Kids Program, Tulsa Health Department; Charley Daniel, CHES, It's All About Kids Program, Tulsa Health Department	Evan Daily, MAI, Cooking Matters Spanish Coordinator, Open Hand	Bethany Williams, MSH, University of Oklahoma Health Sciences Center	Jae Jackson McConnell, MS, CTTS, Oklahoma State Department of Mental Health and Substance Abuse Services	Stephanie Roberts MPH, RD, National Nutrition Advisor, Alliance for a Healthier Generation
<b>Addressing Food Access in Rural Communities</b>	<b>The Impact of Brighter Bites on Systemic Changes in Houston Area Schools</b>	<b>Hunger on College and University Campuses</b>	<b>The Impact of a Preschool Obesity Prevention Project</b>	<b>Live Well Waco: Healthy Worksite Recognition Program</b>	
A rural food retail business addresses food access by purchasing a mobile grocery store to reach underserved communities. Strategies include identifying areas of need, working with area task forces to provide or increase access to healthy food, affordability and sustainability.	Brighter Bites is an evidence-based, multi-component school program that increases access to fresh fruits/vegetables combined with nutrition education for obesity prevention. For sixteen weeks during the school year, Brighter Bites procures primarily donated fruits/vegetables by partnering with food growers, distributors, and food banks, and then channels this produce along with hands-on nutrition education at no cost to low-income families in the form of a school-based food co-op. Once a week, parents and their children pick up 20-25 lbs of a variety of fruits/vegetables, receive recipes and nutrition education, and a healthy recipe tasting.	Hunger on college and university campuses has many cogs in the wheel of success as obesity prevention. Some of the cogs are the same, but some are very different because there are two distinct segments of people we are discussing. Food insecurity is a growing issue on campuses across the United States. Entering into the second year of a grant period, we will reveal what we have learned about college and university hunger, programs and practices that have been implemented on campuses and our plans to move forward in this area.	This study aimed to answer the question, "Can positive behavioral intervention support training modify the mother/caregiver feeding style, leading to more favorable child weight-related outcomes?" In this study, we have contributed to this knowledge base by utilizing a modified Parent Child Interaction Therapy approach in partnership with Hip Hop 2 Health, Jr, an evidence-based curriculum for the classroom. The expectation is that the two interventions coupled together will have a larger impact on obesity prevention in low-income, preschool age children than the curriculum alone. This was a community-based participatory research project conducted in 10 Head Start Centers across Mississippi.	The Live Well Waco Healthy Worksite Recognition Program is an initiative of the Live Well Waco Coalition and the Waco-McLennan County Public Health District. The program identifies and recognizes local businesses for their efforts to create a work environment that supports and encourages a healthy lifestyle for employees. Business within McLennan County will have the opportunity to submit an electronic application, in which their work-site wellness efforts are objectively scored and then receive a recognition level award by City Council based on assessment results.	
Sarah Shores, M.S. Occupational Safety and Health, GSP (Graduate Safety Practitioner), TSET Healthy Living Program; Wanda Keeton, Atoka/Coal TSET HLP Wellness Coordinator II, The University of Oklahoma	Emily Kelley, MA, Brighter Bites	Sandra Shelson, The Partnership for a Healthy Mississippi	Caroline Newkirk, MPH, CPH, CHES, Mississippi State Department of Health	Ashley Williams, DrPH(c), MEd, Waco-McLennan County Public Health District	
			<b>Improving the Culture of Health in Early Childhood Education</b>	<b>Faith that Moves Pounds</b>	
			Establishing healthy habits is important during early years for obesity prevention. The Improving the Culture of Health in Early Childhood Education Program explores how The Partnership for a Healthy Mississippi (The Partnership) implemented the NAP SACC model in low-income early childhood education (ECE) settings throughout Mississippi. This session will identify how The Partnership worked with center directors, parents, food service staff, teachers, and community members to develop ECE wellness councils. This session will also explore how collaboration improved healthier eating practices and physical activity opportunities, reduced screen time, developed school gardens and wellness policies; and enhanced family engagement and community involvement programs.	The Southeast Diabetes Faith Initiative (SDFI), a program of The Balm in Gilead Inc., partners with African American churches across five southern states to increase prediabetes awareness and reduce the incidence of diabetes. SDFI equips faith leaders with knowledge and skills to serve as community health educators who advocate for healthy living in mind, body, and spirit. In extending the health ministry of selected churches, SDFI targets community members at risk for developing diabetes. With the implementation of a CDC-endorsed lifestyle change program, SDFI's goal is to facilitate weight loss and the adoption of a healthy life style.	
			Laciana McIntyre, M.S., The Partnership for a Healthy Mississippi	Pamela Price, RN, The Balm in Gilead, Inc.	