



HEALTHY EATING ACTIVE LIVING CITY RESOLUTION

PURPOSE AND INTRODUCTION

Cities and their residents face increased health care costs and diminished quality of life due to the epidemic of obesity and overweight. City leaders across California are addressing the crisis by implementing land use and employee policies which encourage physical activity and nutritious eating.

League of California Cities led the way with a resolution in 2004 which encouraged cities to embrace policies that promote safe and healthier cities. Two years later, the League adopted a resolution to work together with the Institute for Local Government, and the Cities Counties and Schools Partnership to develop a clearinghouse of information that cities can use to promote wellness policies and healthier cities. The League's resolution encouraged cities to embrace policies that facilitate activities to promote healthier lifestyles and communities, including diet and nutrition and adoption of city design and planning principles that enable citizens of all ages and abilities to undertake exercise. The Healthy Eating Active Living Cities Campaign grew out of these resolutions and is a partnership of Public Health Advocates and the League of California Cities. On November 18th, 2011, the League of CA Cities Board of Directors unanimously voted to encourage 100% board participation in the HEAL Cities & Towns Campaign.

The HEAL Cities & Towns Campaign aims to reduce and prevent obesity by engaging municipal leaders to champion healthy eating and active living in their communities through adoption of policy and promotion of opportunities for residents and municipal employees. The Campaign provides coaching and technical assistance to support this process.

The first step in joining the Campaign is to pass a resolution. Municipalities are encouraged to modify the resolution based on local conditions and political actions suitable for their city/town at this time. The following documents provide instructions, menus and drafts for creating your HEAL resolution.

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EAGER ACTIVE FIT HEAL CITIES CAMPAIGN DESIGNATIONS

EAGER ACTIVE FIT Cities:

The HEAL Cities Campaign focuses on three policy-related areas: employee wellness, access to healthy foods, and land use. The Campaign recognizes cities that adopt varied healthy eating and active living policies with three designations; EAGER, ACTIVE or FIT. Cities become EAGER Cities when they join the HEAL Cities Campaign with an area of policy focus. To be designated ACTIVE or FIT, cities must submit their qualifying policies along with the resolution or policy by which they are joining the Campaign.

- I. **EAGER CITIES** join the campaign by deciding to focus on a HEAL Cities Campaign area or a policy related to a campaign area.



- II. **ACTIVE CITIES** have already adopted and implemented two policies in at least one campaign area. ACTIVE CITIES join the campaign by adopting a HEAL Cities Campaign Resolution that includes at least two commitments for further policy development. OR by adopting an additional policy in one of the campaign areas they have not yet addressed.



- III. **FIT CITIES** have already adopted and implemented at least one policy in each of the three campaign areas. FIT CITIES join the campaign by adopting a HEAL Cities Campaign Resolution that includes at least two commitments for further policy development OR by adopting an additional policy in one of the campaign areas.



HOW TO USE THIS DRAFT RESOLUTION

This draft resolution provides a menu of policies that advance healthy eating and active living. Modify the resolution to the policy actions suitable for your locality at this time. Please choose two to three policy goals that your city, town, or county can reasonably work on. The Policy goals that your municipality sets in this resolution are those that the HEAL Cities & Town Campaign will support you to adopt. HEAL Campaign Staff is available to assist you with this or review your draft.

COMPLETE RESOLUTIONS WILL CONTAIN THE FOLLOWING:

- Preamble/Whereas statements that contain “findings” of fact that support the need for the municipality to pass the resolution
- Policy goals that provide resolution to the “findings”
- Implementation Plan to enact policy goals when funding and political will allows

All California cities which adopt policies encouraging physical activity and good nutrition are eligible to be a Healthy Eating Active Living City and upon review and approval, become eligible for public relations and marketing resources including use of the HEAL Cities logo.

Please contact the campaign and share your adopted resolution and supporting policies.

www.healcitiescampaign.org



**RESOLUTION NO. ___ SETTING FORTH [MUNICIPALITY]'S
COMMITMENT TO OBESITY PREVENTION**

PREAMBLE/WHEREAS CLAUSES

A draft resolution based on this model should include a preamble that contains "findings" of fact that support the need for the city to pass the resolution.

The preamble contains information supporting the need for the resolution – in this case documenting the need for obesity and diabetes prevention strategies.

Some possible findings are listed as "Whereas" clauses below. Cities may have others. Modify these clauses to fit your municipality. Feel free to change language, delete clauses, and add clauses with pertinent local data.

WHERE AS, over sixty percent of obese adults have type 2 diabetes, high blood cholesterol, high blood pressure, and/or other related conditions⁶; and

WHEREAS, one in four youth between the ages of 9 and 16 in California is overweight⁶; <Enter local data available at <http://www.publichealthadvocacy.org/growingepidemic.html>> and

WHEREAS, more children are being diagnosed with diseases linked to overweight and obesity previously seen only in adults, such as Type 2 diabetes and heart disease²; and

WHEREAS, childhood obesity has more than doubled in children and quadrupled in adolescents in the past 30 years; in 2012, more than one-third of children and adolescents were overweight or obese^{7,8}; and

WHEREAS, children who are overweight are more likely to be obese as adults and adult obesity is associated with a variety of health problems^{5, 9, 12, 13}; and

WHEREAS, the current generation of children are expected to have shorter lives than their parents due to the consequences of obesity¹; and

WHEREAS, diabetes and obesity continue to disproportionately affect children as well as low income communities and communities of color^{10, 11, 12}; and

WHEREAS, teens and adults who consume one or more sodas or sugar sweetened beverages per day are more likely to be overweight or obese ⁵; and

WHEREAS, drinking one or two sugar-sweetened beverages a day increases the risk of developing type 2 diabetes by 26 percent ⁴; and

WHEREAS, high rates of costly chronic disease among both children and adults are correlated to environments with few or no options for healthy eating and active living ³; and

¹**WHEREAS**, the annual cost to California—in medical bills, workers compensation and lost productivity—for overweight, obesity, and physical inactivity exceeds \$41 billion ¹⁴; and

WHEREAS, by supporting the health of residents and the local workforce would decrease chronic disease and health care costs and increase productivity ¹⁴; and

WHEREAS, <add pertinent local conditions and/or current efforts to address the obesity epidemic>;

References:

1. Olshansky SJ, Passaro DJ, Hershow RC, Layden J, Carnes BA, Brody J, Hayflick L, Butler RN, Allison DB, and Ludwig DS, “A Potential Decline in Life Expectancy in the United States in the 21st Century,” *New England Journal of Medicine*, 352:11, pp. 1138-1145.
2. Rosenbloom, AL. *Increasing incidence of type 2 diabetes in children and adolescents: treatment considerations*. *Pediatric Drugs*. 2002;4(4)209-21.
3. Sallis JF, Glanz K. *Physical activity and food environments: solutions to the obesity epidemic*. *Milbank Q*. 2009;87:123-54.
4. Malik VS, Popkin BM, Bray GA, Despres JP, Willett WC, Hu FB. Sugar-sweetened beverages and risk of metabolic syndrome and type 2 diabetes: a meta-analysis. *Diabetes Care*. 2010;33(11):2477-2483
5. Morenga LT, Mallard S, Mann J. Dietary sugars and body weight: systematic review and meta-analyses of randomized controlled trials and cohort studies. *Brit Med J*. Jan 15 2013;346.
6. Trust for America’s Health and Robert Wood Johnson Foundation. *F as in Fat: How Obesity Threatens America’s Future-Fast Facts: Obesity and Health*. 2013. Accessed January 15, 2014 at <http://fasinfat.org/facts-on-obesity-and-health>
7. Ogden CL, Carroll MD, Kit BK, Flegal KM. Prevalence of childhood and adult diabetes in the United States, 2011-2012. *Journal of the American Medical Association* 2014;311(8):806-814
8. National Center for Health Statistics. *Health, United States, 2011: With Special Features on Socioeconomic Status and Health*. Hyattsville, MD; U.S. Department of Health and Human Services; 2012.
9. Centers for Disease Control and Prevention, *Childhood Obesity Facts*, www.cdc.gov/healthyyouth/obesity/facts.htm
10. Wang Y and Bedoun MA. “The Obesity Epidemic in the United States—Gender, Age, Socioeconomic, Racial/Ethnic, and Geographic Characteristics: A Systematic Review and Meta-Regression Analysis.” *Epidemiologic Reviews* 29(1):6-28, 2007. Available at: <http://epirev.oxfordjournals.org/content/29/1/6.full.pdf+html>
11. Braveman PA, Cubbin C, Egerter S, et al. “Socioeconomic Disparities in Health in the United States: What the Patterns Tell Us.” *American Journal of Public Health* 100(S1):S186-S196, 2010. Available at: <http://ajph.aphapublications.org/doi/pdf/10.2105/AJPH.2009.166082>
12. Babey SH, Jones M, Yu H, Goldstein H. *Bubbling Over: Soda Consumption and its Link to Obesity in California*. UCLA Center for Policy Research and California Center for Public Health Advocacy, 2009.
13. *Liquid Candy: How soft drinks are harming America’s health*. Center for Science in the Public Interest. 2005. Available at: <http://cspinet.org/new/pdf/liquidcandyfinalwnewsupplement.pdf>
14. *The Economic Costs of Overweight, Obesity, and Physical Inactivity among California Adults-2006 (July 2009)* The California Center for Public Health Advocacy.

NOW, THEREFORE, LET IT BE RESOLVED that the City Council hereby recognized that obesity is a serious public health threat to the health and wellbeing of adults, children and families in [name of city]. While individual lifestyle changes are necessary, individual effort alone is insufficient to combat obesity's rising tide. Significant societal and environmental changes are needed to support individual efforts to make healthier choices. To that end, [name of city] adopts this Healthy Eating Active Living resolution:

I. Built Environment

BE IT FURTHER RESOLVED that [name of city] planners, engineers, park and recreation department, community economic and redevelopment personnel responsible for the design and construction of parks, neighborhoods, streets, and business areas should make every effort to:

People want to be healthy, but need physical environments that enable them to make healthy choices safely, conveniently, and affordably. The way communities are designed can either help or hinder resident's ability to make healthy choices. Consider some of the following policy options that make it easier for your residents and municipal employees to be physically active as part of their day to day routines. In addition, people want to make healthy choices about what they eat, but sometimes that is not a viable option. Oftentimes nutritious foods are unavailable close to home or priced outside of food budgets. There are a number of strategies municipalities can employ to ensure that residents have a shot at making healthy choices about nutrition. See the Built Environment section of the HEAL Cities Policy Menu.

**Select your city's specific policy goals from among the HEAL Cities Policy Menu.
Work with the HEAL staff to determine your stated goals:**

BE IT FURTHER RESOLVED that [name of city] city manager, planners, community economic personnel responsible for the creation and updating of [name of city]'s comprehensive/general plan should make every effort to practice good governance and consider health in all policies contained comprehensive/general plan by use of the following strategies:

Cities have a unique role to play in determining the health of residents and municipal employees. It is the role of the local government to practice good governance and consider health in all policies contained in general, specific and comprehensive plans. See this section of the policy menu for strategies to include in future updates.

**Select your city's specific policy goals from among the HEAL Cities Policy Menu.
Work with the HEAL staff to determine your stated goals:**

II. Healthy Food Access

BE IT FURTHER RESOLVED that [name of city] planners, community economic personnel responsible for the design of parks, neighborhoods, streets, and business areas, should make every effort to:

People want to make healthy choices about what they eat, but sometimes that is not a viable option. Oftentimes nutritious foods are unavailable close to home or priced outside our food budgets. There are a number of strategies municipalities can employ to ensure that residents have a shot at making healthy choices about nutrition.

**Select your city’s specific policy goals from among the HEAL Cities Policy Menu.
Work with the HEAL staff to determine your stated goals:**

III. Equity

BE IT FURTHER RESOLVED that [name of city] planners, community services, park and recreation, economic development personnel responsible for the design of parks, neighborhoods, streets, and business areas, should make every effort to address the conditions that create and perpetuate inequities in health status among low income communities and communities of color, and to:

**Select your city’s specific policy goals from among the HEAL Cities Policy Menu.
Work with the HEAL staff to determine your stated goals:**

IV. Workplace Wellness

BE IT FURTHER RESOLVED that in order to promote wellness within [name of city], and to set an example for other businesses, [name of city] pledges to adopt and implement a workplace wellness policy that will:

Trying to make healthy decisions in the workplace can be a challenge when you're up against the candy bowl, vending machine, and breakroom donuts. In addition to all of that temptation, it's hard to be physically active at work when your job requires sitting in front of your computer for eight hours and the elevator is the easiest way to get to your office. These are strategies that municipalities can adopt that make healthy eating and being physically active at work easier to do. These strategies have a positive impact on soaring health care premiums, attraction and retention of quality employees, and quality of life at work. See the Workplace Wellness section of the HEAL Cities Policy Menu.

**Select your city's specific policy goals from among the HEAL Cities Policy Menu.
Work with the HEAL staff to determine your stated goals:**

V. Implementation

BE IT FURTHER RESOLVED that the head of each affected agency or department should report back to the City Council annually regarding steps taken to implement the Resolution, additional steps planned, and any desired actions that would need to be taken by the council.

Note: cities are encouraged to tailor this clause to delegate specific implementation tasks and deadlines as appropriate. HEAL Cities Campaign Staff can assist you to develop an Implementation Plan.

How will you implement the policy goals you've selected? Create an Implementation Plan to enact as funding and political will allows. Consider which departments need to be involved in reporting back to the City Council regarding steps taken to implement the resolution, additional steps planned and any desired actions that would need to be taken by the City Council.

HEAL CITIES POLICY MENU

Select your city's specific policy goals from among the following menu. Work with HEAL staff to determine your stated goals:

<u>Built Environment</u>
<i>Planning</i>
1. Include separate health element in general plan.
2. Include health goals and policies related to physical activity in the general plan, specific area plans and master plans
3. Include health goals and policies related to access to healthy food in the general plan update;
4. Build incentives for development project proposals to demonstrate favorable impact on resident and employee physical activity, including a health impact assessment;
5. Health in All Policies
<i>Zoning</i>
6. Adopt and implement form based code;
7. Include zoning for farmer's market and community gardens in public spaces;
8. Expand community access to indoor and outdoor public facilities through joint use agreements with schools and/or other partners;
9. Low-Impact development policy
<i>Streets</i>
10. Address walking and biking connectivity between residential neighborhoods and schools, parks and recreational resources and retail;

11. Address pedestrian and bicycle safety at crossings, along corridors, on routes between residential areas and schools, and in other transportation projects (Safe Routes to School);
12. Complete Streets Policy
13. Safe Routes to School Policy
14. Prioritize capital improvement projects to increase the opportunities for physical activity and active transportation;
15. Green streets policies to create beauty, foster environmental sustainability and address climate change.
<p>Parks</p> <p><i>Assess the community’s existing parks and recreational facilities for all the elements of a Complete Parks System.</i></p>
16. Increase access to areas for physical activity by [exploring/entering into] shared use policies with schools and faith-based organizations
17. Assess the amenities and programming in existing park facilities to ensure that they meet current community needs
18. Assess the design, maintenance, lighting, and other features of the community’s parks to identify potential safety concerns
19. Adopt a tobacco-free parks policy
20. Replace water-intensive landscaping with drought resistant vegetation wherever feasible
21. Ensure that every neighborhood has walking access to a park or recreational area through adoption of an open streets, play streets, or parklet policy
22. Adopt a Tree Canopy Policy to plant and maintain a complete and sustainable tree canopy
23. Adopt and implement a Greenways Policy to protect the community’s natural and recreational resources
24. Adopt a Public art policy to increase the amount of original artwork in parks and other public spaces in the community
25. Require developers to include a park or usable space for physical activity and recreation, or to pay a fee, as a condition for all new development
26. Play Streets Policy that temporarily close streets to provide “pop up” playgrounds and rec centers.

27. Open Streets Policy that temporarily close streets for physical activity and cultural celebrations
<u>Healthy Food Access</u>
28. Revise general plan, specific plans, comprehensive plans, zoning ordinances and any other planning tool to increase opportunities for access to healthy foods whenever and whenever possible, including prioritizing healthy food retail in compact, mixed-use and transit-oriented development;
29. Site healthy food retail near transit
30. Adopt ordinances to create and support healthier food and beverage environments for children (e.g. healthy default beverages in kids’ meals, restrictions on sugary beverage advertising on government property, incentives for healthy corner stores, markets, and vendors);
31. Use existing incentives to attract retailers that offer fresh fruits and vegetables and wholesome staple items at reasonable prices;
32. Facilitate the siting of new grocery stores, community gardens, mobile markets and farmer’s markets in underserved communities to increase access to healthy food, including fresh fruits and vegetables;
33. Set nutrition standards aligned with HEAL nutrition standards policy for food offered at city events, sponsored meetings, served at city facilities, concessions, city programs and parks;
34. Set healthy vending nutrition standards aligned with HEAL healthy nutrition standards for all vending machines located in city facilities and parks;
35. Make water the standard beverage option at all city events, sponsored meetings and city programs;
36. Ensure that free and appealing water is readily available in municipally owned buildings, including parks;
<u>Equity</u>
37. Examine racial, ethnic and socio-economic disparities in access to physical activity facilities or resources and adopt strategies to remedy these inequities;

38. Examine racial, ethnic and socio-economic disparities to healthy, affordable, foods and adopt strategies to remedy these inequities;
39. Prioritize funding for projects, programs and incentives for development to target areas identified as having the fewest options, and/or where obesity rates are highest.
40. Prioritize implementation of plans (general plan, master plans and specific area plans) in underserved neighborhoods;
41. Engage and collaborate with organizations that represent underserved neighborhoods, low income communities and communities of color;
42. Collaborate with LHD or organizations to support programs and activities related to obesity and diabetes prevention;
<u>Workplace Wellness</u>
<i>Wellness Committee and Assessment</i>
43. Establish and convene a Workplace Wellness Committee;
44. Require a self-assessment of wellness practices in each municipal workplace;
<i>Nutrition</i>
45. Set nutrition standards aligned with HEAL nutrition standards policy for food offered at city events, sponsored meetings, served at city facilities, concessions, city programs and parks;
46. Set healthy vending nutrition standards aligned with HEAL healthy nutrition standards for all vending machines located in city facilities and parks;
47. Make water the standard beverage option at all city events, sponsored meetings and city programs;
48. Ensure that free and appealing water is readily available in municipally owned buildings, including parks;
<i>Breastfeeding</i>
49. Accommodate breastfeeding employees upon their return to work;
50. Designate lactation space within each municipally owned/ operated building for breastfeeding mothers to reduce barriers to breastfeeding in municipal workplace;

<i>Physical Activity</i>
51. Establish walking meetings and use of stairways;
52. Establish scheduled physical activity breaks throughout the workday;
53. Establish physical activity breaks for meetings over one hour in length;
54. Offer employees healthy incentives for healthy eating and physical activity;
<u>Implementation</u>
55. Convene cross department workgroup, committee, or taskforce to prioritize and oversee implementation of the HEAL Resolution
56. Choose 2-3 policy goals most suitable for your city
57. Create implementation plan for when funding becomes available
58. Create a report on progress twice per year