

TABLE OF NUTRITION AND PHYSICAL ACTIVITY STRATEGIES PROMOTED BY RECOGNIZED EXPERT ORGANIZATIONS

This table was created to try and summarize findings from key organizations of the strategies and interventions they recommend and/or found to be effective based on their research. The list is grouped by settings (childcare, community, healthcare, etc.) and highlights strategies that were listed by at least 3 sources in yellow. The wording of each strategy was taken from the first source where it appeared and additional listings for that strategy were placed there because they closely matched the same strategy, although the wording may have differed. It is possible that some of the sources made their recommendations based on the findings of one of the other sources because we did not look at the reference list or methodology to that level of detail. Nevertheless, a listing by several sources does lend additional credibility to the strategy.

The letter **T** in the header row refers to the type of strategy: **E** = Environmental change, **P**= Policy change, and **I** = Individual Behavior change. Some strategies could be listed as more than one type (ex. many environmental changes need a policy in place to make the change), but this listing just designates them as one type, using the primary type. The initials in the header row are abbreviations for the source of the strategies. The full reference for each document can be found on the last page.

ORGANIZATION (see endnotes for full reference) (# of recommendations)	T	CDC (62)	CG (16)	RCS (24)	TAH (20)	HEAL (50)	UW (41)	MAPPS (31)	NC (73)	RWJ (22)	IOM (58)
SETTING / STRATEGIES	Yellow highlighted text indicates listing is in 3 or more sources										
GENERAL											
Participate in community coalitions or partnerships to address obesity	E			24*		8					
Develop social support interventions to increase physical activity	I	X	X								
Use behavioral interventions to decrease screen time	I		X								
Limit marketing of unhealthy behaviors	P					9		X			
Promote state and local Food Policy Councils	P	X									
Physical Activity	-										
Safety And Crime Prevention	-										
Keep Communities Safe and Free from Crime to Encourage Outdoor Activity.	E			22	X		X	X		X	X
Enhance traffic safety in areas where persons are or could be active.	E			23	X			X			X
Healthy Eating	-										
Make water available and promote consumption	I	X					X				X
Adopt building codes to require access to and maintenance of fresh drinking water fountains (e.g., public restroom codes).	P										X
Provide taste-testing opportunities to introduce new fruits and vegetables	I						X				
Teach food preparation skills	I						X				X
Breastfeeding	-										
Increase support for breastfeeding.	E			11		6	X	X			
CHILDCARE											
Provide comprehensive, center-based early childhood development programs (Head Start)	E						X				
Physical Activity	-										
Adopt nutrition and physical activity standards for childcare licensing	P	X				10					X

ORGANIZATION (see endnotes for full reference)		CDC	CG	RCS	TAH	HEAL	UW	MAPPS	NC	RWJ	IOM
Limit the use of TV and video games	E					10		X			X
Offer moderate activities daily for 60 minutes (or more)	E					10		X			
Healthy Eating	-										
Promote Farm – to – Childcare for local produce	E	X				10		X			
Provide healthy foods and beverages	E	X				10		X			X
Provide comprehensive nutrition programs	E	X							X		
Increase availability of a variety of healthy foods	E								X		
Ensure that child care and after-school program licensing agencies encourage utilization of the nutrition assistance programs and increase nutrition program enrollment	P	X									X
COMMUNITY											
Physical Activity	-										
Conduct community-wide physical activity campaigns	E	X	X				X		X		
Use individually-adapted health behavior change strategies	I		X						X		
Provide point-of-decision prompts & access and appeal to increase stair use	E	X	X					X	X		X
Increase social support for increasing physical activity	I	X	X						X		
Develop media campaigns, utilizing multiple channels (print, radio, internet, television, other promotional materials) to promote physical activity using consistent messages.	E	X						X			X
Improve access to bicycles, helmets, and related equipment for lower-income families, for example, through subsidies or repair programs.	E										X
Design a media campaign that establishes physical activity as a health equity issue and reframes obesity as a consequence of environmental inequities and not just the result of poor personal choices.	E										X
Develop counter-advertising media approaches against sedentary activity to reach youth as has been done in the tobacco and alcohol prevention fields.	E										X
Active Transportation	-										
Improve Safety for Bicyclists and Pedestrians	E							X		X	X
Expand Trails, Bicycle Lanes and Connections	E	X		17,18		1		X		X	X
Improve access to public transportation.	E	X		20			X	X	X		X
Encourage the use of transportation funds for mass transit and highway alternatives (Complete Streets)	P	X			X	1		X	X		X
Create incentives for remote parking and drop-off zones and/or disincentives for nearby parking and drop-off zones at schools, public facilities, shopping malls, and other destinations.	E	X						X			X
Promote increased transit use through reduced fares for children, families, and students, and improved service to schools, parks, recreation centers, and other family destinations.	P							X			X
Provide signs to neighborhood destinations (library, parks, shops, etc.)	E							X			
Provide signs for public transit, bike lanes, etc.)	E							X			
Land Use For Active Living	-										

ORGANIZATION (see endnotes for full reference)		CDC	CG	RCS	TAH	HEAL	UW	MAPPS	NC	RWJ	IOM
Re-Evaluate Urban Design and Comprehensive Land Use Plans to Improve Active Living	P	X	X	21	X	1	X	X	X	X	X
Improve Community Design Features to Encourage Physical Activity	E		X			1	X	X	X	X	X
Open Spaces, Parks And Recreation	-										
Increase Access to Recreation Facilities and Open Spaces, including Parks and Community Gardens	E	X	X	16	X		X	X	X	X	X
Ensure access to recreational opportunities in underserved areas	E					1		X			X
Provide recreational leagues for adults and children	E						X	X			X
Subsidize or reduce prices for recreational facilities and park use								X			
Healthy Eating	-										
Increase access to and availability of a variety of healthy foods	E	X							X		X
Conduct community-wide campaigns for healthy eating	E								X		
Conduct a mass media campaign for healthy eating	E								X		X
Design a media campaign that establishes community access to healthy foods as a health equity issue and reframes obesity as a consequence of environmental inequities and not just the result of poor personal choices.	E										X
Develop counter-advertising media approaches against unhealthy products to reach youth as has been used in the tobacco and alcohol prevention fields.	E							X			X
Provide comprehensive (multi-component) nutrition programs	E								X		
Use competitive pricing: price non-nutritious foods at a higher cost	P							X	X		
Enhance accessibility to grocery stores through public safety efforts, such as better outdoor lighting and police patrolling.	E										X
Realign bus routes or provide other transportation, such as mobile community vans or shuttles to ensure that residents can access supermarkets or grocery stores easily and affordably through public transportation	P	X									X
Implement a tax strategy to discourage consumption of foods and beverages that have minimal nutritional value, such as sugar-sweetened beverages.	P										X
Adopt land use and zoning policies that restrict fast food establishments or mobile vending near schools, public playgrounds and residential communities.	P							X			X
Create incentive and recognition programs to encourage grocery stores and convenience stores to reduce point-of-sale marketing of calorie-dense, nutrient-poor foods (i.e., promote “candy-free” check out aisles and spaces).	E							X			X
Provide point-of-decision labeling for healthy eating	E							X	X		
Increase social support for healthy eating	I								X		
Provide personal counseling for healthy eating	I								X		
Put policies in place that require government-run and -regulated agencies responsible for administering nutrition assistance programs to collaborate across agencies and programs to increase enrollment and participation	P	X									X
Eliminate transfat through labeling initiatives and restaurant standards	P							X			
Reduce sodium through labeling initiatives and restaurant standards	P							X			
Supermarkets And Healthy Food Vendors	-										
Attract Grocery Stores that Provide High-Quality, Healthy Affordable Foods to Lower-Income Neighborhoods	E	X		3	X	2				X	X
Encourage Convenience Stores and Bodegas to Offer Healthier Food	E	X								X	X

ORGANIZATION (see endnotes for full reference)		CDC	CG	RCS	TAH	HEAL	UW	MAPPS	NC	RWJ	IOM
Provide incentives to food retailers to locate in or offer healthier food and beverage choices in underserved areas.	P	X		4	X	2		X			X
Establish Healthy Mobile Markets	E									X	
Promote healthier food options by prompts and placement in store	E					3	X	X			
Farm-Fresh Local Foods	-										
Support Farmers' Markets	E	X		5			X			X	X
Accept SNAP & WIC coupons at farmer's markets	P				X	2	X				X
Support Community Gardens	E	X								X	X
Provide incentives for the production, distribution, and procurement of foods from local farms.	P			6		2	X				
Increase food stamp benefits to improve healthy food purchase	P					2					
Improve funding for outreach, education, and transportation to encourage use of farmers markets and farm stands by residents of lower-income neighborhoods, and by WIC and SNAP recipients.	P	X									X
Support the Procurement of Locally Grown Food	E					2				X	
Increase access to community supported agriculture	E	X									
Support investment in new and existing local farms	P					2					
Restaurants	-										
Promote restaurant programs that offer healthy options such as reasonably sized portions and low-fat and low-calorie menus	E	X				3		X		X	
Encourage (or require) restaurant menu labeling	E	X			X	3	X	X		X	X
Offer incentives (e.g., recognition or endorsement) for restaurants that promote healthier options (for example, by increasing the offerings of healthier foods, serving age-appropriate portion sizes, allowing healthy substitutes)	E							X			X
Promote in-season foods that are locally grown	E					3		X			
Food And Beverage Marketing	-										
Regulate the Marketing of Unhealthy Food in or near Schools and Other Youth Facilities	P					3		X		X	
Convince food and beverage companies to promote healthy choices	E				X						
Public Venues	-										
Increase and improve availability of healthier food and beverage choices in public service venues. Restrict less healthy foods and beverages	E			1,2,7	X		X				X
Evaluate current snack taxes	E				X		X				
Institute smaller portion size options in public service venues.	E			8							
Breastfeeding	-										
Offer comprehensive breastfeeding programs	E	X							X		X
Encourage breastfeeding support in the workplace	E	X						X	X		
Use mass media campaigns to improve breastfeeding outcomes	E	X							X		
Provide peer support to improve breastfeeding outcomes	I	X							X		
HEALTHCARE											
Implement ICSI "Guidelines for Prevention and Management of Obesity" and "Primary Prevention of Chronic Disease Risk Factors"	P	X									

ORGANIZATION (see endnotes for full reference)		CDC	CG	RCS	TAH	HEAL	UW	MAPPS	NC	RWJ	IOM
Include screening & counseling about sugar sweetened beverage consumption to routine medical care. Expand skills of medical staff to implement.	I	X									
Provide follow-up / multiple contacts & reinforcement	I								X		
Provide goal setting plans	I								X		
Provide specific guidelines and strategies to follow	I								X		
Do a lifestyle assessment	I								X		
Perform motivational interviewing	I								X		
Provide a self-monitoring tool	I								X		
Physical Activity	-										
Use individually-adapted health behavior change strategies	I								X		
Promote TV and video game turnoff activities	I							X	X		
Healthy Eating	-										
Set up Farm-to-Hospital initiatives	E	X				7		X			
Provide comprehensive breastfeeding programs	E	X						X	X		X
Set maternity care practices that increase support for breastfeeding	P	X						X	X		
Provide nutrition info in clinic waiting rooms	I						X				
Provide patients with nutrition "Prescriptions" and tools for self-assessment and recording	I						X				
Adopt worksite practices that promote healthy eating and active living	E					7					
Provide healthy food and beverage options	E					7					
Screen for BMI and provide counseling & interventions for patients	P					7					
Education and promote initiation and continuation of breastfeeding.	I	X				7		X			
Build partnerships to facilitate active referral of patients to local resources that increase access to high-quality nutritious foods	I										
Provide personal counseling for healthy eating	I								X		
Increase social support for healthy eating	I								X		
Use individually-adapted health behavior change strategies	I								X		
Provide comprehensive (multi-component) nutrition programs	E										
Educate mothers about breastfeeding	I	X							X		
Provide peer support for breastfeeding outcomes	I	X							X		
Direct professional support for breastfeeding	I	X							X		
INDIVIDUAL (Counseling and Education)											
Individually-adapted health behavior change programs to increase physical activity	I	X	X								
Provide follow-up/multiple contacts & reinforcement	I								X		
Provide goal setting plans	I								X		
Provide specific guidelines and strategies to follow	I								X		
Do a lifestyle assessment	I								X		
Perform motivational interviewing	I								X		
Provide a self-monitoring tool	I								X		
Provide skill-building activities to assist development of good health behaviors	I								X		
Use social support for health behavior change	I								X		

ORGANIZATION (see endnotes for full reference)		CDC	CG	RCS	TAH	HEAL	UW	MAPPS	NC	RWJ	IOM
Provide tailored feedback to reinforce good health behaviors	I								X		
Physical Activity	-										
Use individually-adapted health behavior change strategies	I								X		
Use social support for increasing physical activity (through various groups)	I							X	X		
Healthy Eating	-										
Provide personal counseling for healthy eating	I								X		
Increase social support for healthy eating	I								X		
SCHOOLS											
Physical Activity											
Offer at least 30 minutes of quality physical activity daily	P				X	5				X	
Require physical education in schools. 150/225 mins/week (or daily PE)	P	X	X	12			X	X	X		
Increase the amount of physical activity (>50%) in PE programs in schools.	E	X	X	13				X			
Consider requiring standards-based physical education classes taught by certified PE teachers	P		X				X	X		X	
Facilitate joint-use agreements to allow public access to school facilities	P	X		14		5	X		X	X	X
Support walk to school and Safe Routes to School (SR2S) programs	E	X				5	X	X	X	X	X
Provide extracurricular sports/ after-school activities for school children	P						X		X		
Reduce screen time in public service venues, schools and childcare.	P			15	X	5					
Institute regulatory policies mandating minimum play space, physical equipment, & duration of play in preschool, afterschool & child-care programs.	P										X
Support locating schools within easy walking distance of residential areas.	P			19		1		X			X
Use individually-adapted health behavior change strategies	I								X		
Participate in TV and video game turnoff activities	I								X		
Healthy Eating	-										
Implement strong wellness policies, including nutrition standards for competitive foods and school nutrition programs	P					4	X				
Ensure that students have appealing, healthy food and beverage choices	E	X			X	4	X	X	X	X	
Increase availability of a variety of healthy foods	E	X						X	X		
Support farm-to-school and school garden programs	E	X				4		X		X	
Use competitive pricing in schools: price non-nutritious foods at a higher cost	P	X					X	X	X		
Limit (or eliminate) advertisements of less healthy foods and beverages.	P	X		9				X			X
Discourage consumption of sugar-sweetened beverages.	I	X		10			X				
Implement a standards-based health education program taught by teachers certified in health education	E									X	
Provide comprehensive (multi-component) nutrition programs	E								X		
Provide free fruit and vegetable snacks in schools	E	X				4					
Provide point-of-decision labeling for healthy eating	E							X	X		
Restrict access or availability of non-healthy foods	E	X						X	X		
Substitute low-energy-dense foods for high-energy-dense foods	E	X									
Decrease the portion size of high-energy-dense foods	E	X									
Increase social support for healthy eating	I								X		
WORKSITES											

ORGANIZATION (see endnotes for full reference)		CDC	CG	RCS	TAH	HEAL	UW	MAPPS	NC	RWJ	IOM
Provide Assessment of Health Risks with feedback (AHRF) to change behavior combined with health education with or without other interventions	I		X								
Use informational and educational strategies aim to increase knowledge about a healthy diet and physical activity	I		X								
Select behavioral and social strategies that target the thoughts (e.g. awareness, self-efficacy) and social factors that effect behavior changes	E		X								
Use policy & environmental approaches to make healthy choices easier and target the entire workforce by changing physical or organizational structures.	E		X					X			
Use policy strategies that change rules and procedures for employees such as health insurance benefits or costs or money for health club membership.	P		X								
Use worksite weight control strategies that occur separately or as part of a comprehensive worksite wellness program that addresses several health issues (e.g., smoking cessation, stress management, cholesterol reduction).	E		X								
Physical Activity	-										
Provide physical activity breaks at work to allow promote activity as part of the daily routine	E				X	6					X
Provide access to facilities that promote physical activity	E					6		X	X		
Provide point-of-decision prompts for increasing stair use	E		X					X	X		X
Provide wellness programs and preventive benefits	P				X		X				
Insurers should make preventives benefits available to companies	P				X		X				
Provide workplace incentives for physical activity	P						X				
Promote alternative transportation commuting	P					6		X			
Increase social support for increasing physical activity	I								X		
Provide counseling and individualized services	I				X						
Use individually-adapted health behavior change strategies	I								X		
Healthy Eating	-										
Provide healthy food and beverage options in cafeterias, vending & meetings	E	X				6	X	X	X		
Provide Point-of-Decision labeling for healthy eating	E	X						X	X		
Provide private rooms and flexible scheduling for breast milk pumping and refrigerated storage	E	X						X	X		
Establish Farm-to-Workplace programs	E	X						X			
Provide comprehensive (multi-component) nutrition programs	E								X		
Provide healthy eating reminders and prompts to employees via multiple means (i.e. email. Posters, payroll stuffers, etc.)	E						X	X			
Increase access to community supported agriculture	E	X									
Substitute low-energy-dense foods for high-energy-dense foods	E	X									
Decrease the portion size of high-energy-dense foods	E	X									
Increase social support for healthy eating	I								X		
Provide personal counseling for healthy eating	I								X		

* Numbers in a strategy box refer to the number in the source document, when numbering was used.

SOURCES:

CDC = Centers for Disease Control and Prevention *Strategies Guides 2010*

http://www.cdc.gov/obesity/downloads/TA_Manual_1_31_08.pdf

CG = Community Guide to Preventive Services

<http://www.thecommunityguide.org/index.html>

RCS = Recommended Community Strategies and Measurements to Prevent Obesity in the United States, *MMWR Recommendations and Reports*, July 24, 2009

<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5807a1.htm>

TAH = Trust for America's Health: *F as in Fat Report 2009*

<http://healthyamericans.org/reports/obesity2009>

HEAL = Healthy Eating Active Living Convergence Partnership: Prevention Institute *Promising Strategies for Creating Healthy Eating & Active Living Environments*

2008 <http://preventioninstitute.org/component/jlibrary/article/id-59/127.html>

UW = UW-Madison School of Medicine and Public Health: *What Works? Policies and Programs to Improve Wisconsin's Health*, July 2009

<http://uwphi.pophealth.wisc.edu/pha/healthiestState/whatWorks.pdf> (January 2009 draft is linked, final July 2009 will be substituted when it's posted)

MAPPS = Media, Access, Promotion, Price and Social Support intervention strategies for Communities Putting Prevention to Work (ARRA grants)

<http://www.cdc.gov/chronicdisease/recovery/state.htm>

NC = North Carolina Center of Excellence for Training and Research Translation

http://www.center-trt.org/index.cfm?fa=resources.s_searchresults

RWJ = Leadership for Healthy Communities: *Advancing Policies to Support Healthy Eating and Active Living – Action Strategies Toolkit*

<http://www.rwjf.org/pr/product.jsp?id=42514>

IOM = Institute of Medicine: *Local Government Actions to Prevent Childhood Obesity. Report Brief*, September 2009

<http://www.iom.edu/Reports/2009/ChildhoodObesityPreventionLocalGovernments.aspx>

Wisconsin Nutrition, Physical Activity and Obesity Program
May 2010