

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) | T | CDC | CG | RCS | TAH | HEAL | UW | MN | NC | RWJ | IOM |
|--|---|------|------|------|------|------|------|--------|------|------|------|
| (# of recommendations) | | (26) | (16) | (24) | (20) | (50) | (41) | (18) | (73) | (22) | (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 | | | | | | | | |
| Individually-adapted health behavior change programs to increase physical activity | I | X | X | | | | | | | | |
| Use behavioral interventions to decrease screen time | I | X | X | | | | | | | | |
| Limit marketing of unhealthy behaviors | P | | | | | 9 | | | | | |
| Physical Activity | - | | | | | | | | | | |
| Safety And Crime Prevention | - | | | | | | | | | | |
| Keep Communities Safe and Free from Crime to Encourage Outdoor Activity. | E | | | 22 | X | | X | | | X | X |
| Enhance traffic safety in areas where persons are or could be physically active. | E | | | 23 | X | | | | | | X |
| Healthy Eating | - | | | | | | | | | | |
| Make water available and promote consumption | I | | | | | | 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 | | | | |
| CHILDCARE | | | | | | | | | | | |
| Provide comprehensive, center-based early childhood development programs (Head Start) | E | | | | | | X | | | | |
| Physical Activity | - | | | | | | | | | | |

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|---|---|------------|-----------|------------|------------|-------------|-----------|-----------|-----------|------------|------------|
| Adopt nutrition and physical activity standards for childcare licensing | P | | | | | 10 | | X | | | X |
| Offer moderate activities daily for 60 minutes | E | | | | | 10 | | | | | |
| Limit the use of TV and video games | E | | | | | 10 | | | | | X |
| Healthy Eating | - | | | | | | | | | | |
| Promote Farm – to – Childcare for local produce | E | | | | | 10 | | | | | |
| Provide comprehensive nutrition programs | E | | | | | | | | X | | |
| Increase availability of a variety of healthy foods | E | | | | | | | | X | | |
| Provide healthy foods and beverages | E | | | | | 10 | | | | | 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 |
| COMMUNITY | | | | | | | | | | | |
| Physical Activity | - | | | | | | | | | | |
| Conduct community-wide physical activity campaigns | E | X | X | | | | X | | X | | |
| Use individually-adapted health behavior change strategies | I | X | X | | | | | | X | | |
| Provide point-of-decision prompts or increase access and appeal to increasing stair use | E | X | X | | | | | X | X | | X |
| Increase social support for increasing physical activity | I | X | X | | | | | | X | | |
| Improve access to bicycles, helmets, and related equipment for lower-income families, for example, through subsidies or repair programs. | E | | | | | | | | | | X |
| Develop media campaigns, utilizing multiple channels (print, radio, internet, television, other promotional materials) to promote physical activity using consistent messages. | 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 |
| Expand Trails, Bicycle Lanes and Connections | E | | | 17,18 | | 1 | | X | | X | X |
| Improve access to public transportation. | E | | | 20 | | | X | | X | | X |
| Encourage the use of transportation funds for mass transit and highway alternatives (Complete Streets) | P | | | | X | 1 | | 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 |
| 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 |
| Land Use For Active Living | - | | | | | | | | | | |
| Re-Evaluate Urban Design and Comprehensive Land Use Plans to Improve | P | X | X | 21 | X | 1 | X | | X | X | X |

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| Active Living | | | | | | | | | | | |
| Improve Community Design Features to Encourage Physical Activity | E | X | X | | | 1 | 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 |
| Provide recreational leagues for adults and children | E | | | | | | X | | | | X |
| Healthy Eating | - | | | | | | | | | | |
| 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 |
| Use competitive pricing in schools: price non-nutritious foods at a higher cost | P | X | | | | | | | X | | X |
| Provide comprehensive (multi-component) nutrition programs | E | X | | | | | | | X | | |
| Increase access to healthy foods | E | X | | | | | | X | X | | |
| Increase availability of a variety of healthy foods | E | X | | | | | | | 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 |
| 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 near school grounds and public playgrounds. | P | | | | | | | | | | X |
| Implement local ordinances to restrict mobile vending of calorie-dense, nutrient-poor foods near schools and public playgrounds. | P | | | | | | | | | | X |
| Implement zoning designed to limit the density of fast food establishments in residential communities. | P | | | | | | | | | | 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 |
| Provide point-of-decision labeling for healthy eating | E | | | | | | | | 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 in these programs | P | | | | | | | | | | X |
| Supermarkets And Healthy Food Vendors | - | | | | | | | | | | |
| Attract Grocery Stores that Provide High-Quality, Healthy Affordable Foods to | E | | | 3 | X | 2 | | | | X | X |

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| Lower-Income Neighborhoods | | | | | | | | | | | |
| Encourage Convenience Stores and Bodegas to Offer Healthier Food | E | | | | | | | X | | X | X |
| Establish Healthy Mobile Markets | E | | | | | | | | | X | |
| Provide incentives to food retailers to locate in or offer healthier food and beverage choices in underserved areas. | P | | | 4 | X | 2 | | | | | X |
| Promote healthier food options by prompts and placement in store | E | | | | | 3 | X | | | | |
| Farm-Fresh Local Foods | - | | | | | | | | | | |
| Support Farmers' Markets | E | | | 5 | | | X | X | | X | X |
| Accept SNAP & WIC coupons at farmer's markets | P | | | | X | 2 | X | | | | 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 |
| Support Community Gardens | E | | | | | | | X | | X | X |
| Support the Procurement of Locally Grown Food | E | | | | | 2 | | | | X | |
| Set up Farm-to-School initiatives | E | | | | X | | X | | | | |
| Provide incentives for the production, distribution, and procurement of foods from local farms. | P | | | 6 | | 2 | X | | | | |
| Support investment in new and existing local farms | P | | | | | 2 | | | | | |
| Restaurants | - | | | | | | | | | | |
| Encourage (or require) restaurants to offer reasonably sized portions and low-fat and low-calorie menus | E | | | | | 3 | | | | X | |
| Encourage (or require) restaurant menu labeling | E | | | | 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 |
| Promote in-season foods that are locally grown | E | | | | | 3 | | | | | |
| Food And Beverage Marketing | - | | | | | | | | | | |
| Regulate the Marketing of Unhealthy Food in or near Schools and Other Youth Facilities | P | | | | | 3 | | | | X | |
| Convince food and beverage companies to promote healthy choices | E | | | | X | | | | | | |
| Public Venues | - | | | | | | | | | | |
| Increase availability of healthier food and beverage choices in public service venues. | E | | | 1 | X | | X | | | | X |
| Improve availability of affordable healthier food and beverage choices in public service venues. | E | | | 2 | | | X | | | | |
| Restrict availability of less healthy foods and beverages in public service venues. | P | | | 7 | | | | | | | 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 |
| Use mass media campaigns to improve breastfeeding outcomes | E | X | | | | | | | X | | |
| Provide peer support to improve breastfeeding outcomes | I | X | | | | | | | X | | |

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| Encourage breastfeeding support in the workplace | E | X | | | | | | | X | | |
| HEALTHCARE | | | | | | | | | | | |
| Implement ICSI “Guidelines for Prevention and Management of Obesity” and “Primary Prevention of Chronic Disease Risk Factors” | P | | | | | | | 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 | | |
| Implement patient self-management support strategies | I | | | | | | | X | | | |
| Physical Activity | - | | | | | | | | | | |
| Build partnerships to facilitate active referral of patients to local resources that increase access to opportunities for physical activity | E | | | | | | | X | | | |
| Use individually-adapted health behavior change strategies | I | | | | | | | | X | | |
| Promote TV and video game turnoff activities | I | | | | | | | | X | | |
| Healthy Eating | - | | | | | | | | | | |
| 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 | | | | | 7 | | X | | | |
| Set up Farm-to-Hospital initiatives | E | | | | | 7 | | | | | |
| Build partnerships to facilitate active referral of patients to local resources that increase access to high-quality nutritious foods | I | | | | | | | X | | | |
| 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 | X | | | | | | | | | |
| Provide comprehensive breastfeeding programs | E | | | | | | | | X | | X |
| Educate mothers about breastfeeding | I | X | | | | | | | X | | |
| Set maternity care practices that increase support for breastfeeding | P | X | | | | | | X | X | | |
| Provide peer support for breastfeeding outcomes | I | | | | | | | | X | | |
| Direct professional support for breastfeeding | I | X | | | | | | X | X | | |
| INDIVIDUAL (Counseling and Education) | | | | | | | | | | | |
| 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 | | |

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| Provide skill-building activities to assist development of good health behaviors | I | | | | | | | | X | | |
| Use social support for health behavior change | I | | | | | | | | X | | |
| 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 | I | | | | | | | | 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 | P | X | X | 12 | | | X | | X | | |
| Increase the amount of physical activity (>50%) in PE programs in schools. | E | X | X | 13 | | | | | | | |
| Consider requiring standards-based physical education classes taught by certified PE teachers | P | X | X | | | | X | X | | X | |
| Institute regulatory policies mandating minimum play space, physical equipment, and duration of play in preschool, after-school, and child-care programs. | P | | | | | | | | | | X |
| Facilitate joint-use agreements to allow public access to school facilities | P | | | 14 | | 5 | X | X | X | X | X |
| Support walk to school and Safe Routes to School (SR2S) programs | E | X | | | | 5 | X | X | X | X | X |
| Support locating schools within easy walking distance of residential areas. | P | | | 19 | | 1 | | | | | X |
| Provide extracurricular sports/ after-school activities for school children | P | | | | | | X | X | X | | |
| Use individually-adapted health behavior change strategies | I | | | | | | | | X | | |
| Reduce screen time in public service venues, schools and childcare. | P | | | 15 | X | 5 | | | | | |
| 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 | X | | | |
| Ensure that students have appealing, healthy food and beverage choices | E | X | | | X | 4 | X | X | X | 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 | | | | | | | X | | |
| Increase availability of a variety of healthy foods | E | X | | | | | | | X | | |
| Provide free fruit and vegetable snacks in schools | E | | | | | 4 | | | | | |
| Support farm-to-school and school garden programs | E | | | | | 4 | | X | | X | |
| Use competitive pricing in schools: price non-nutritious foods at a higher cost | P | X | | | | | X | | X | | |
| Provide point-of-decision labeling for healthy eating | E | | | | | | | | X | | |
| Restrict access or availability of non-healthy foods | E | X | | | | | | | X | | |
| Limit (or eliminate) advertisements of less healthy foods and beverages. | P | | | 9 | | | | | | | X |
| Discourage consumption of sugar-sweetened beverages. | I | | | 10 | | | X | | | | |
| Substitute low-energy-dense foods for high-energy-dense foods | E | X | | | | | | | | | |
| Decrease the portion size of high-energy-dense foods | E | X | | | | | | | | | |

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| Increase social support for healthy eating | I | | | | | | | | X | | |
| Implement policies to support breastfeeding in schools for student mothers | P | | | | | | | X | | | |
| WORKSITES | | | | | | | | | | | |
| Provide Assessment of Health Risks with feedback (AHRF) to change behavior combined with health education with or without other interventions | I | | X | | | | | 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 and environmental approaches to make healthy choices easier and target the entire workforce by changing physical or organizational structures. | E | | 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 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 | | | | |
| Provide physical activity breaks at work to allow promote activity as part of the daily routine | E | | | | X | 6 | | | | | X |
| Promote alternative transportation commuting | P | | | | | 6 | | X | | | |
| Provide access to facilities that promote physical activity | E | | | | | 6 | | | X | | |
| Increase social support for increasing physical activity | I | | | | | | | | X | | |
| Provide counseling and individualized services | I | | | | X | | | X | | | |
| Use individually-adapted health behavior change strategies | I | | | | | | | | X | | |
| Provide point-of-decision prompts for increasing stair use | E | | X | | | | | | X | | X |
| Healthy Eating | - | | | | | | | | | | |
| Provide healthy food and beverage options in cafeterias and vending | E | X | | | | 6 | X | X | X | | |
| Provide comprehensive (multi-component) nutrition programs | E | X | | | | | | | X | | |
| Provide healthy eating reminders and prompts to employees via multiple means (i.e. email. Posters, payroll stuffers, etc.) | E | | | | | | X | | | | |
| Increase access to community supported agriculture | E | | | | | | | X | | | |
| Provide Point-of-Decision labeling for healthy eating | E | | | | | | | | X | | |
| Use competitive pricing in schools: price non-nutritious foods at a higher cost | P | 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 | | |
| Provide personal counseling for healthy eating | I | | | | | | | X | X | | |
| Provide private rooms for breast milk pumping and refrigerated storage | E | | | | | | | X | X | | |

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

SOURCES:

CDC = State Nutrition, Physical Activity and Obesity (NPAO) Program Technical Assistance Manual, January 2008 *Interventions and Strategies*

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/NPApubs.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)

MN SHIP = Minnesota State Health Improvement Plan, *Menu of Interventions*

http://www.health.state.mn.us/healthreform/ship/SHIPRFP_Section3.pdf

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/CMS/3788/59845/72798/72800.aspx>

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| Wisconsin Nutrition, Physical Activity and Obesity Program September 2009 |
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