## nutrition, physical activity and obesity state plan strategies strength of evidence table

## **Determining the Strength of Evidence for State Plan Strategies**

The target audience for the State Plan is partners throughout the state working on improving nutrition, increasing physical activity and obesity prevention. The State Plan encourages partners to assess the needs in their community, organization or group as an initial intervention planning step. After the assessment, partners can choose a strategy or multiple strategies for implementation. One criterion to be considered is level of evidence for a strategy. However, it is important to recognize that obesity prevention is still relatively new and in many cases the scientific literature is lagging. Strategies that are emerging/promising or expert opinion merit consideration and by doing so can contribute to the field through practice-based evidence. Since many of these partners may not have a public health background it is helpful to provide a level of evidence for each strategy in the State Plan. The level of evidence will be determined using the following guidelines:

## Strength of Evidence Rating Scale and Criteria – adapted from the County Health Rankings, What Works for Health

Rating	Evidence Criteria	Quality of Evidence
Scientifically Supported	1 or more systematic review(s), or 3 experimental or quasi-experimental studies, or 6 descriptive studies	Studies have strong design, statistically significant positive finding(s), large magnitude of effect(s).
Some Evidence	1 or more review(s), or 2 experimental or quasi-experimental studies, or 3-5 descriptive studies	Compared to "scientifically supported," studies have less rigorous design, smaller magnitude of effect(s), effects may fade over time, statistically significant positive finding(s), overall evidence trends positive.
Limited Evidence, Supported by Expert Opinion	Varies, generally less than 3 studies of any type	Body of evidence less than "some evidence", recommendation supported by logic, limited study, methods supporting recommendation unclear.Expert Opinion:Recommended by credible groups; research evidence limited. Credible groups are recognized for their impartial expertise in an area of interest. Further study may be warranted.
Insufficient Evidence	1 experimental or quasi-experimental study, or 2 or fewer descriptive studies	Varies, generally lower quality studies.
Mixed Evidence	Two or more studies of any type	Body of evidence inconclusive, body of evidence leaning negative.
Evidence of Ineffectiveness	1 or more systematic review(s), or 3 experimental or quasi-experimental studies, or 6 descriptive studies	Studies have strong design, significant negative finding(s), or strong evidence of harm.

**NOTE:** Expected Outcomes – the evidence and strength of evidence will be presented by the behavior the strategy impacts (such as breastfeeding, physical activity, nutrition, TV viewing, etc.) and by the health outcome (obesity). There will be one row for each strategy.

## nutrition, physical activity and obesity state plan strategy evidence table

Strategy	Expected Outcome	Source	Evidence Strength
<b>EC 1 -</b> Increase supportive nutrition and physical activity environments in regulated care through state-level policy change.	Improved nutrition, increased physical activity	<ol> <li>U.S. Department of Health and Human Services. <i>The Surgeon General's Vision for a Healthy and Fit Nation.</i> Rockville, MD: U.S. Department of Health and Human Services, Office of the Surgeon General, January 2010.</li> <li>Benjamin, Sara E, et al. <i>Obesity prevention in child care: A review of U.S. state regulations.</i> BMC Public Health. 2008. <u>http://www.biomedcentral.com/1471-2458/8/188</u></li> </ol>	Limited Evidence; Supported by Expert Opinion
	Obesity prevention	<ol> <li>Story, et. al. The Role of Child Care Settings in Obesity Prevention. The Future of Children, Volume 16, Number 1, Spring 2006 pp. 143-168. <u>http://muse.jhu.edu/journals/foc/summary/v016/16.1story02.html</u></li> </ol>	Limited Evidence; Supported by Expert Opinion
EC 2 – Improve the nutritional quality of meals and snacks served in regulated care settings	Improved nutrition	<ol> <li>American Academy of Pediatrics, American Public Health Association, and National Resource Center for Health and Safety in Child Care and Early Education. 2010. Preventing Childhood Obesity in Early Care and Education: Selected Standards from Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs, 3rd Edition. <u>http://nrckids.org/CFOC3/PDFVersion/preventing_obesity.pdf</u> pp 11-25</li> <li>U.S. Department of Health and Human Services. The Surgeon General's Vision for a Healthy and Fit Nation. Rockville, MD: U.S. Department of Health and Human Services, Office of the Surgeon General, January 2010.</li> <li>Institute of Medicine (IOM). 2011. Early Childhood Obesity Prevention Policies. Washington, DC: The National Academies Press. pp.85-118.</li> <li>Comprehensive Nutrition Programs in a Single Setting. Center for Training and Research Translation (Center TRT). http://www.centertrt.org/?p=strategy&amp;id=1117</li> </ol>	Some evidence
		<ol> <li>Story, et. al. The Role of Child Care Settings in Obesity Prevention. The Future of Children, Volume 16, Number 1, Spring 2006 pp. 143-168. <u>http://muse.jhu.edu/journals/foc/summary/v016/16.1story02.html</u></li> </ol>	Limited Evidence, Supported by Expert Opinion
EC 3 – Increase physical activity levels of children in regulated care	Increased physical activity	<ol> <li>American Academy of Pediatrics, American Public Health Association, and National Resource Center for Health and Safety in Child Care and Early Education. 2010. Preventing Childhood Obesity in Early Care and Education: Selected Standards from Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs, 3rd Edition. <u>http://nrckids.org/CFOC3/PDFVersion/preventing_obesity.pdf</u> pp 51-57</li> <li>Bower, et. al. The Childcare Environment and Children's Physical Activity. American Journal of Preventive Medicine, Volume 34, Issue 1, Pages 23-29, January 2008. http://www.ajpmonline.org/article/S0749-3797(07)00616-2/abstract</li> </ol>	Some Evidence

Strategy	Expected Outcome	Source	Evidence Strength
		<ol> <li>Centers for Disease Control and Prevention. Strategies to Prevent Obesity and Other Chronic Diseases: The CDC Guide to Strategies to Increase Physical Activity in the Community. Atlanta: U.S. Department of Health and Human Services; 2011. <u>http://www.cdc.gov/obesity/downloads/PA_2011_WEB.pdf</u> Benefits on P.3, and pages 17-20.</li> <li>President's Council on Fitness, Sports, &amp; Nutrition. Physical Activity Guidelines for Americans Mid-Course Report: Strategies to Increase Physical Activity Among Youth. (Unpublished). <u>http://www.health.gov/PAguidelines/midcourse/PAG_Mid-course_Report.pdf</u> P.6</li> <li>Institute of Medicine (IOM). 2011. Early Childhood Obesity Prevention Policies.</li> </ol>	
	Obesity prevention	<ul> <li>Washington, DC: The National Academies Press. P.59-84.</li> <li>Story, et. al. <i>The Role of Child Care Settings in Obesity Prevention</i>. The Future of Children, Volume 16, Number 1, Spring 2006 pp. 143-168. <u>http://muse.jhu.edu/journals/foc/summary/v016/16.1story02.html</u></li> <li>Jago, et. al. <i>BMI from 3–6 y of age is predicted by TV viewing and physical activity, not diet. International Journal of Obesity</i> (2005) 29, 557–565. <u>http://www.nature.com/ijo/journal/v29/n6/abs/0802969a.html</u></li> </ul>	Limited Evidence, Supported by Expert Opinion
<b>EC 4</b> - Promote and sustain breastfeeding of infants in regulated care	Increased breastfeeding rates and duration at the Early Childhood Education site	<ol> <li>University of Wisconsin Population Health Institute. Breastfeeding Promotion Programs. County Health Rankings 2012. 2012.</li> <li><u>http://www.countyhealthrankings.org/program/breastfeeding-promotion-programs</u></li> </ol>	Scientifically Supported
	Obesity prevention (reduced obesity rates later in life)	<ol> <li>Owen et. al. Effect of Infant Feeding on the Risk of Obesity Across the Life Course: A Quantitative Review of Published Evidence. Pediatrics Vol. 115 No. 5 May 1, 2005 pp. 1367-1377. http://www.pediatricsdigest.mobi/content/115/5/1367.full</li> <li>Agency for Healthcare Quality. Breastfeeding, Maternal &amp; Infant Health Outcomes. http://archive.ahrq.gov/clinic/tp/brfouttp.htm</li> <li>CDC Fact Sheet with reference list: Research to Practice Series, No. 4, July 2007. Does breastfeeding reduce the risk of pediatric obesity. http://www.cdc.gov/nccdphp/dnpa/nutrition/pdf/breastfeeding_r2p.pdf</li> <li>Ip S, Chung M, Raman G, Chew P, Magula N, DeVine D, et al. Breastfeeding and maternal and infant health outcomes in developed countries: evidence report/ technology assessment no. 153. Rockville, MD: Agency for Healthcare Research and Quality; 2007. AHRQ Publication No. 07-E007.</li> <li>Arenz S, Ruckerl R, Koletzko B, von Kries R. Breast-feeding and childhood obesity—a systematic review. Int J Obes Relat Metab Disord 2004;28:1247– 1256. http://www.nature.com/ijo/journal/v28/n10/abs/0802758a.html</li> </ol>	Scientifically Supported
<b>S 1 -</b> Increase the number of Wisconsin schools implementing environment and policy	Improved nutrition, increased physical activity	<ol> <li>Story, et. al. Schools and Obesity Prevention: Creating School Environments and Policies to Promote Healthy Eating and Physical Activity. The Milbank Quarterly, March 2009. <u>http://onlinelibrary.wiley.com/doi/10.1111/j.1468-</u>0009.2009.00548.x/full</li> </ol>	Scientifically Supported

Strategy	Expected Outcome	Source	Evidence Strength
change strategies to support healthy eating and physical activity		<ol> <li>Matson-Koffman, et. al. A Site-specific Literature Review of Policy and Environmental Interventions that Promote Physical Activity and Nutrition for Cardiovascular Health: What Works? American Journal of Health Promotion; January/February 2005. <u>http://ajhpcontents.org/doi/abs/10.4278/0890-1171- 19.3.167?journalCode=hepr</u></li> <li>Sallis, et. al, Environmental Interventions for Eating and Physical Activity - A Randomized Controlled Trial in Middle Schools. Am J Prev Med 2003;24(3) <u>http://www.aahf.info/pdf/youth_articles/PIIS0749379702006463.pdf</u></li> <li>Making Healthy Places, Designing and Building for Health, Well-being and Sustainability. Danneburg, et.a al.; 2011. <u>http://books.google.com/books?hl=en&amp;lr=&amp;id=_VVUF8zYoSEC&amp;oi=fnd&amp;pg=P</u> <u>A32&amp;dq=school+policy+changes+physical+activity+and+nutrition&amp;ots=LdM5K- gxoz&amp;sig=O2VxR7Zu9YtelHitBy1izRYZMyo#v=onepage&amp;q=school%20policy</u> %20changes%20physical%20activity%20and%20nutrition&amp;f=false</li> </ol>	
	Decreased obesity	<ol> <li>Story, et. al. Schools and Obesity Prevention: Creating School Environments and Policies to Promote Healthy Eating and Physical Activity - Section on Impact of Competitive Foods on Child Nutrition The Milbank Quarterly, March 2009. http://onlinelibrary.wiley.com/doi/10.1111/j.1468-0009.2009.00548.x/full</li> <li>A Policy-Based School Intervention to Prevent Overweight and Obesity. Gary D. Foster, Sandy Sherman, Kelley E. Borradaile, Karen M. Grundy, Stephanie S. Vander Veur, Joan Nachmani, Allison Karpyn, Shiriki Kumanyika and Justine Shults Pediatrics 2008;121;e794 http://pediatrics.aappublications.org/content/121/4/e794.full</li> </ol>	Some evidence
<b>S 2 -</b> Increase standards based nutrition education in grades K-12	Improved nutrition	<ol> <li>University of Wisconsin Population Health Institute. School-Based Nutrition Education Programs. <i>County Health Rankings 2012</i>. 2012. http://www.countyhealthrankings.org/program/school-based-nutrition- education-programs</li> <li>Howerton et. al. <i>School-based Nutrition Programs Produced a Moderate Increase in Fruit and Vegetable Consumption: Meta and Pooling Analyses from 7 Studies</i>. Journal of Nutrition Education and Behavior Volume 39, Issue 4, Pages 186-196, July 2007 <u>http://www.jneb.org/article/S1499-4046%2807%2900098-X/abstract</u></li> <li>Knai et. al. <i>Getting children to eat more fruit and vegetables: A systematic review</i>. Preventive Medicine Volume 42, Issue 2, February 2006, Pages 85– 95. <u>http://www.sciencedirect.com/science/article/pii/S0091743505002215</u></li> <li><i>A Policy-Based School Intervention to Prevent Overweight and Obesity</i>. Gary D. Foster, Sandy Sherman, Kelley E. Borradaile, Karen M. Grundy, Stephanie S. Vander Veur, Joan Nachmani, Allison Karpyn, Shiriki Kumanyika and Justine Shults <i>Pediatrics</i> 2008;121;e794 http://pediatrics.aappublications.org/content/121/4/e794.full</li> </ol>	Some Evidence
	Obesity prevention and	1. School-Based Obesity Prevention Strategies for State Policymakers. <i>Strategy</i>	Limited

Strategy	Expected Outcome	Source	Evidence Strength
	weight management	<ul> <li>7: Set nutrition standards for foods and beverages offered in schools. CDC. http://www.cdc.gov/healthyyouth/policy/pdf/obesity_prevention_strategies.pdf</li> <li>2. Accelerating Progress in Obesity Prevention: Solving the Weight of the Nation (Strategy 5-3: Ensure Strong Nutritional Standards for All Foods and Beverages Sold or Provided Through Schools). Institute of Medicine 2012 publication. http://www.iom.edu/Reports/2012/Accelerating-Progress-in- Obesity-Prevention.aspx</li> </ul>	Evidence, Supported by Expert Opinion
<b>S 3 -</b> Increase access to fresh fruits and vegetables for school-age children	Improved nutrition	<ol> <li>University of Wisconsin Population Health Institute. School Fruit and Vegetable Gardens. County Health Rankings 2012. 2012. http://www.countyhealthrankings.org/program/school-fruit-vegetable-gardens</li> <li>SM Palmer et. al. School gardens: an experiential learning approach for a nutrition education program to increase fruit and vegetable knowledge, preference, and consumption among second-grade students. J Nutr Educ Behavior 2009 May-Jun;41(3):212-7 http://www.ncbi.nlm.nih.gov/pubmed/19411056</li> <li>McAleese and Rankin. Garden-based nutrition education affects fruit and vegetable consumption in sixth-grade adolescents. Journal of the American Dietetic Association [2007, 107(4):662-665]. http://europepmc.org/abstract/MED/17383272</li> <li>Alexandra Evans et. al. Exposure to Multiple Components of a Garden-Based Intervention for Middle School Students Increases Fruit and Vegetable Consumption. Health Promot Pract September 2012 vol. 13 no. 5 608-616. http://hpp.sagepub.com/content/13/5/608.abstract</li> </ol>	Scientifically Supported
	Obesity prevention	<ol> <li>School-Based Obesity Prevention Strategies for State Policymakers. Strategy 10: Support opportunities for students to engage in physical activity and consume healthier foods. CDC. http://www.cdc.gov/healthyyouth/policy/pdf/obesity_prevention_strategies.pdf</li> </ol>	Limited Evidence, Supported by Expert Opinion
<b>S 4 -</b> Increase the nutritional quality of Wisconsin school meal programs (school breakfast, lunch, summer feeding, and after school)	Improved nutrition	<ol> <li>University of Wisconsin Population Health Institute. Nutrition Standards for Food Sold in Schools. <i>County Health Rankings 2012</i>. 2012. <u>http://www.countyhealthrankings.org/program/nutrition-standards-food-sold- schools</u></li> <li>Patricia Constante Jaime. <i>Do school based food and nutrition policies improve</i> <i>diet and reduce obesity</i>? Preventive Medicine, Volume 48, Issue 1, January 2009, Pages 45–53. <u>http://www.sciencedirect.com/science/article/pii/S0091743508005720</u></li> <li>Snelling and Kennard. <i>The Impact of Nutrition Standards on Competitive Food</i> <i>Offerings and Purchasing Behaviors of High School Students</i>. Journal of School Health, Volume 79, Issue 11, pages 541–546, November 2009. <u>http://onlinelibrary.wiley.com/doi/10.1111/j.1746-1561.2009.00446.x/abstract</u></li> </ol>	Some Evidence
	Obesity prevention and weight management	<ol> <li>School-Based Obesity Prevention Strategies for State Policymakers. Strategy 7: Set nutrition standards for foods and beverages offered in schools. CDC. http://www.cdc.gov/healthyyouth/policy/pdf/obesity_prevention_strategies.pdf</li> </ol>	Limited Evidence, Supported by

Strategy	Expected Outcome	Source	Evidence Strength
		2. Accelerating Progress in Obesity Prevention: Solving the Weight of the Nation (Strategy 5-2: Ensure Strong Nutritional Standards for All Foods and Beverages Sold or Provided Through Schools). Institute of Medicine 2012 publication. <u>http://www.iom.edu/Reports/2012/Accelerating-Progress-in-</u> Obesity-Prevention.aspx	Expert Opinion
<b>S 5 -</b> Decrease access to energy dense foods and beverages in schools	Improved nutrition	<ol> <li>Patricia Constante Jaime. Do school based food and nutrition policies improve diet and reduce obesity? Preventive Medicine, Volume 48, Issue 1, January 2009, Pages 45–53. http://www.sciencedirect.com/science/article/pii/S0091743508005720</li> </ol>	Some Evidence
		<ol> <li>Gonzalez, W., Jones, S.J., and Frongillo, E.A., Restricting Snacks in U.S. Elementary Schools is Associated with Higher Frequency of Fruit and Vegetable Consumption. The Journal of Nutrition, January 2009 vol. 139 no. 1 142-144. <u>http://jn.nutrition.org/content/139/1/142.full</u></li> </ol>	
		<ol> <li>University of Wisconsin Population Health Institute. Nutrition Standards for Food Sold in Schools. County Health Rankings 2012. 2012. <u>http://www.countyhealthrankings.org/program/nutrition-standards-food-sold-schools</u></li> </ol>	
		4. University of Wisconsin Population Health Institute. Limit Access to Competitive Foods in Schools. <i>County Health Rankings 2012</i> . 2012. <u>http://www.countyhealthrankings.org/program/limit-access-competitive-food-</u> schools	
		5. University of Wisconsin Population Health Institute. Competitive Pricing in Schools. <i>County Health Rankings 2012</i> . 2012. http://www.countyhealthrankings.org/program/competitive-pricing-schools	
	Obesity prevention and weight management	<ol> <li>Fox MK, Dodd AH, Wilson A, Gleason PM. Association between school food environment and practices and body mass index of U.S. public school children. Journal of the American Dietetic Association. 2009;109(2 Suppl):S108-S117. <u>http://www.journals.elsevierhealth.com/periodicals/yjada/article/S0002- 8223%2808%2902058-0/abstract</u></li> </ol>	Some evidence
		<ol> <li>Sanchez-Vaznaugh, E.V., Sanchez, B.N., Baek, J., and Crawford, P.B., Competitive Food and Beverage Policies: Are They Influencing Childhood Overweight Trends? Health Aff March 2010 29:3436-446;</li> <li>Malik Et al. Inteles of surger superstanced beverages and unsight asim.</li> </ol>	
		<ol> <li>Malik, Et. al. Intake of sugar-sweetened beverages and weight gain: a systematic review. Am J Clin Nutr. 2006 August; 84(2): 274–288. <u>http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3210834/</u></li> <li>Ludwig, et. al. Relation between consumption of sugar-sweetened drinks and beidebacity a prophetic potential and prophetics. The Lapart 4 Vol 257.</li> </ol>	
		<ul> <li>childhood obesity: a prospective, observational analysis. The Lancet • Vol 357</li> <li>• February 17, 2001. <u>http://www.ncbi.nlm.nih.gov/pubmed/11229668</u></li> <li>5. De Ruyter et. al. A trial of sugar-free or sugar-sweetened beverages and body weight in children. N Engl J Med. 2012 Oct 11;367(15):1397-406. http://www.ncbi.nlm.nih.gov/pubmed/22998340</li> </ul>	

Strategy	Expected Outcome	Source	Evidence Strength
		<ol> <li>Does Drinking Beverages with Added Sugars Increase the Risk of Overweight? CDC Research to Practice Series, No. 3 - September 2006. <a href="http://www.cdc.gov/nccdphp/dnpa/nutrition/pdf/r2p_sweetend_beverages.pdf">http://www.cdc.gov/nccdphp/dnpa/nutrition/pdf/r2p_sweetend_beverages.pdf</a></li> </ol>	
<b>S 6 -</b> Increase standards based teaching in Physical Education in grades K-12	Increased physical activity	<ol> <li>Centers for Disease Control and Prevention. Strategies to Prevent Obesity and Other Chronic Diseases: The CDC Guide to Strategies to Increase Physical Activity in the Community. Atlanta: U.S. Department of Health and Human Services; 2011. <u>http://www.cdc.gov/obesity/downloads/PA_2011_WEB.pdf</u> P. 17-18</li> </ol>	Scientifically Supported
		<ol> <li>President's Council on Fitness, Sports, &amp; Nutrition. Physical Activity Guidelines for Americans Mid-Course Report: Strategies to Increase Physical Activity Among Youth. (Unpublished). <u>http://www.health.gov/PAguidelines/midcourse/PAG_Mid-course_Report.pdf</u> P. 2, 5, 17-21</li> </ol>	
		<ol> <li>Dobbins, et. al. School-based physical activity programs for promoting physical activity and fitness in children and adolescents aged 6-18. The Cochrane Library July 8, 2009. <u>http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD007651/abstract</u></li> </ol>	
	Obesity prevention and weight management	<ol> <li>School-Based Obesity Prevention Strategies for State Policymakers. Strategy 8: Promote high quality health education and physical education. CDC. http://www.cdc.gov/healthyyouth/policy/pdf/obesity_prevention_strategies.pdf</li> </ol>	Limited Evidence, Supported by
		<ol> <li>Accelerating Progress in Obesity Prevention: Solving the Weight of the Nation (Strategy 5-1: Require Quality Physical Education and Opportunities for Physical Activity in Schools). Institute of Medicine 2012 publication. http://www.iom.edu/Reports/2012/Accelerating-Progress-in-Obesity- Prevention.aspx</li> </ol>	Expert Opinion
<b>S 7</b> - Provide opportunities for at least 60 minutes of physical	Increased physical activity	<ol> <li>Yolanda Demetriou. Physical activity interventions in the school setting: A systematic review. Psychology of Sport and Exercise, Volume 13, Issue 2, March 2012, Pages 186–196.</li> </ol>	Scientifically Supported
activity per day for all school-age children		<ul> <li><u>http://www.sciencedirect.com/science/article/pii/S1469029211001592</u></li> <li>Physical Activity Guidelines Advisory Committee. Physical Activity Guidelines Advisory Committee Report, 2008. Washington, DC: U.S. Department of Health and Human Services, 2008.</li> </ul>	
		3. Center for Disease Control and Prevention. <i>Youth Physical Activity: The Role of Schools</i> . Atlanta: U.S. Department of Health and Human Services; 2009.	
		<ol> <li>President's Council on Fitness, Sports, &amp; Nutrition. Physical Activity Guidelines for Americans Mid-Course Report: Strategies to Increase Physical Activity Among Youth. (Unpublished). <u>http://www.health.gov/PAguidelines/midcourse/PAG_Mid-course_Report.pdf</u> P. 5</li> </ol>	
		<ol> <li>Aaron Carrel, et. al. Improvement of Fitness, Body Composition, and Insulin Sensitivity in Overweight Children in a School-Based Exercise Program: A Randomized, Controlled Study. Arch Pediatr Adolesc Med. 2005;159(10):963-</li> </ol>	

Strategy	Expected Outcome	Source	Evidence Strength
	Obesity prevention and weight management	<ul> <li>968. doi:10.1001/archpedi.159.10.963 <u>http://archpedi.jamanetwork.com/article.aspx?articleid=486133</u></li> <li>1. Aaron Carrel, et. al. <i>Improvement of Fitness, Body Composition, and Insulin Sensitivity in Overweight Children in a School-Based Exercise Program: A Randomized, Controlled Study.</i> Arch Pediatr Adolesc Med. 2005;159(10):963-968. doi:10.1001/archpedi.159.10.963</li> </ul>	Some Evidence
		<ul> <li>http://archpedi.jamanetwork.com/article.aspx?articleid=486133</li> <li>Kriemler, S., Zahner, L., Schindler, C., et. al. Effect of school-based physical activity programme on fitness and adiposity in primary school children: cluster randomized controlled trial. BMJ. 2010; 340: c785. http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2827713/</li> </ul>	
<b>S 8</b> - Use an evidence- based fitness test to assess the endurance capacity of the student population in grades 4-12	Increased physical activity and fitness	<ol> <li>National Association for Sport and Physical Education. <i>Appropriate Uses of Fitness Testing</i>. Position Statement. Reston, Virginia; 2010. <u>http://www.aahperd.org/naspe/standards/upload/Appropriate-Uses-of-Fitness-Measurement.pdf</u></li> <li>Frederick County Public Schools. <i>Fitness Testing</i>. Frederick, Maryland; 2012. Accessed online 8/27/12. <u>http://physed.sites.fcps.org/node/570</u></li> </ol>	Limited Evidence, Supported by Expert Opinion
	Obesity prevention and weight management	<ol> <li>Barbara A. Dennison, et. al. Childhood Physical Fitness Tests: Predictor of Adult Physical Activity Levels? Pediatrics 2008. <u>http://pediatrics.aappublications.org/content/82/3/324.short</u></li> </ol>	Limited Evidence, Supported by Expert Opinion
<b>CA 1-</b> Develop local community master plans that include incorporation of strategies that promote physical activity	Increased physical activity and fitness	<ol> <li>University of Wisconsin Population Health Institute. Access to Places for Physical Activity. <i>County Health Rankings 2012</i>. 2012. <u>http://www.countyhealthrankings.org/program/access-places-physical-activity</u></li> <li>World Health Organization. <i>A healthy city is an active city: a physical activity planning guide</i>. 2012. <u>http://www.euro.who.int/en/what-we-do/health-topics/environment-and-health/urban-health/publications/2008/healthy-city-is-</u></li> </ol>	Scientifically Supported
		<ol> <li>an-active-city-a-a-physical-activity-planning-guide</li> <li>Centers for Disease Control and Prevention. Strategies to Prevent Obesity and Other Chronic Diseases: The CDC Guide to Strategies to Increase Physical Activity in the Community. Atlanta: U.S. Department of Health and Human Services; 2011. <u>http://www.cdc.gov/obesity/downloads/PA_2011_WEB.pdf</u></li> <li>Khan et. al. Recommended Community Strategies and Measurements to</li> </ol>	
		<ul> <li>Prevent Obesity in the United States. CDC MMWR July 24, 2009 / 58(RR07);1-26 <u>http://www.cdc.jgov/mmwr/preview/mmwrhtml/rr5807a1.htm</u></li> <li>5. Heath GW, Brownson RC, Kruger J, et al. The effectiveness of urban design and land use and transport policies and practices to increase physical activity: a systematic review. J Phys Act Health. 2006;3(Suppl 1):S55-76</li> </ul>	
	Decreased obesity	<ol> <li>Mia A. Papas, et. al. The Built Environment and Obesity. Epidemiol Rev 2007;29:129–143. <u>http://www.ncbi.nlm.nih.gov/pubmed/17533172</u></li> <li>Penny Gordon-Larsen, et. al. Inequality in the Built Environment Underlies Key Health Disparities in Physical Activity and Obesity. Pediatrics Vol. 117 No. 2</li> </ol>	Scientifically Supported

Strategy	Expected Outcome	Source	Evidence Strength
		February 1, 2006 pp. 417 -424 (doi: 10.1542/peds.2005-0058). http://www.pediatricsdigest.mobi/content/117/2/417.full	
<b>CA 2</b> – Develop and implement active transportation options such as safe routes to school plans and bike to work options in communities	Increased physical activity	<ol> <li>University of Wisconsin Population Health Institute. Access to Places for Physical Activity. <i>County Health Rankings 2012</i>. 2012. <u>http://www.countyhealthrankings.org/program/access-places-physical-activity</u></li> <li>CDC. Youth Physical Activity Guidelines. <u>CDC Physical Activity 2011</u></li> <li>University of Wisconsin Population Health Institute. Safe Routes to Schools (SRTS). <i>County Health Rankings 2012</i>. 2012. <u>http://www.countyhealthrankings.org/program/safe-routes-schools-srts</u></li> </ol>	Scientifically Supported
	Decreased obesity	<ol> <li>Frank, et. al. Obesity relationships with community design, physical activity, and time spent in cars. American Journal of Preventive Medicine, Volume 27, Issue 2, August 2004, Pages 87–96. http://www.sciencedirect.com/science/article/pii/S074937970400087X</li> </ol>	Some Evidence
<b>CA 3</b> - Increase access to public or community facilities for physical activity	Increased physical activity and fitness	<ol> <li>University of Wisconsin Population Health Institute. Access to Places for Physical Activity. <i>County Health Rankings 2012</i>. 2012. <u>http://www.countyhealthrankings.org/program/access-places-physical-activity</u></li> <li>Brownson et. al. <i>SHAPING THE CONTEXT OF HEALTH: A Review of</i> <i>Environmental and Policy Approaches in the Prevention of Chronic Diseases.</i> Annual Review of Public Health, Vol. 27: 341-370 (Volume publication date April 2006). <u>http://www.annualreviews.org/doi/abs/10.1146/annurev.publhealth.27.021405.</u> <u>102137</u></li> </ol>	Scientifically Supported
	Decreased obesity	<ol> <li>Wolch et. al. Childhood obesity and proximity to urban parks and recreational resources: A longitudinal cohort study. Health &amp; Place, Volume 17, Issue 1, January 2011, Pages 207–214. <u>http://www.sciencedirect.com/science/article/pii/S1353829210001528</u></li> <li>Dunton et. al. Physical environmental correlates of childhood obesity: a systematic review. Obesity Reviews Volume 10, Issue 4, pages 393–402, July 2009 <u>http://onlinelibrary.wiley.com/doi/10.1111/j.1467-789X.2009.00572.x/full</u></li> </ol>	Limited Evidence, Supported by Expert Opinion
<b>FS 1</b> – Increase access to and affordability of fruits and vegetables	Improved nutrition	<ol> <li>University of Wisconsin Population Health Institute. Increase Fruit and Vegetable Availability. <i>County Health Rankings 2012</i>. 2012. <u>http://www.countyhealthrankings.org/program/increase-fruit-vegetable-availability</u></li> <li>University of Wisconsin Population Health Institute. WIC and Senior Farmers Market Nutrition Programs. <i>County Health Rankings 2012</i>. 2012. <u>http://www.countyhealthrankings.org/program/wic-and-senior-farmers-market-nutrition-programs</u></li> <li>Herman DR, Harrison GG, Afifi AA, Jenks E. Effect of a targeted subsidy on intake of fruits and vegetables among low-income women in the Special Supplemental Nutrition Program for Women, Infants, and Children. <i>Am J Public Health</i>. 2008;98(1):98-105. <u>http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2156076/</u></li> </ol>	Some Evidence

Strategy	Expected Outcome	Source	Evidence Strength
		<ol> <li>Alaimo K, Packnett E, Miles R, Kruger D. Fruit and vegetable intake among urban community gardeners. J Nutr Educ Behav. 2008;40(2):94-101.</li> <li>Kimmons, J., et al. Developing and Implementing Health and Sustainability Guidelines for Institutional Food Service. Adv Nutr. May 2012.</li> <li>Centers for Disease Control and Prevention. Improving the Food Environment Through Nutrition Standards: A Guide for Government Procurement. U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division for Heart Disease and Stroke Prevention. February 2011.</li> <li>Changing Access and Availability to Favor Healthy Foods and Beverages. Center for Training and Research Translation (Center TRT). http://www.centertrt.org/?p=strategy&amp;id=1114&amp;section=3</li> </ol>	
	Obesity prevention/reduction	<ol> <li>Rolls BJ, Ello-Martin JA, Tohill BC. What can intervention studies tell us about the relationship between fruit and vegetable consumption and weight management? Nutr Rev. Jan 2004;62(1):1-17.</li> <li>Lin and Morrison. <i>Higher Fruit Consumption Linked with Lower Body Mass</i> <i>Index</i>. FoodReview USDA-ERS. 2002. <u>http://webarchives.cdlib.org/wayback.public/UERS_ag_1/20120110085300/</u> <u>http://connection.ebscohost.com/c/articles/9071366/higher-fruit-consumption- linked-lower-body-mass-index</u></li> </ol>	Limited Evidence, Supported by Expert Opinion
FS 2 - Increase access to and promotion of healthy foods in restaurants, food stores, and vending	Improved nutrition	<ol> <li>Bodor JN, Rose D, Farley TA, Swalm C, Scott SK. Neighbourhood fruit and vegetable availability and consumption: the role of small food stores in an urban environment. <i>Public Health Nutri</i>. 2008;11(4):413-420. http://journals.cambridge.org/abstract_S1368980007000493</li> <li>Matson-Koffman DM, Brownstein JN, Neiner JA, Greaney ML. A site-specific literature review of policy and environmental interventions that promote physical activity and nutrition for cardiovascular health: what works? <i>Am J Health Promot</i>. 2005;19(3):167-193.</li> <li>Story M, Kaphingst KM, Robinson-O'Brien R, Glanz K. Creating Healthy Food and Eating Environments: Policy and Environmental Approaches. <i>Annu Rev Public Health</i>. 2008;29(1):253-272. http://www.med.upenn.edu/chbr/documents/2008-Story- <u>CreatingHealthyFoodEatingEnviro.pdf</u></li> <li>Glanz, K. and D. Hoelscher, <i>Increasing fruit and vegetable intake by changing environments, policy and pricing: restaurant-based research, strategies, and recommendations</i>. Prev Med, 2004. 39 Suppl 2: p. S88-93.</li> <li>University of Wisconsin Population Health Institute. Label Nutrition Information at Restaurants. <i>County Health Rankings</i> 2012. 2012. http://www.countyhealthrankings.org/program/label-nutrition-information- restaurants</li> <li>University of Wisconsin Population Health Institute. Point-of-Decision Prompts: Healthy Food Choices. <i>County Health Rankings</i> 2012. 2012.</li> </ol>	Scientifically Supported

Strategy	Expected Outcome	Source	Evidence Strength
		<ul> <li><u>http://www.countyhealthrankings.org/program/point-decision-prompts-healthy-food-choices</u></li> <li>7. Escaron, A. et al. <i>Food Store Based Interventions to Promote Healthy Food Choices and Eating Practices: A Systematic Review</i>. Preventing Chronic Disease (under review). 2012.</li> </ul>	
	Obesity prevention/reduction	<ol> <li>Powell, L.M., et al., Associations between access to food stores and adolescent body mass index. Am J Prev Med, 2007. 33(4 Suppl): p. S301-7. http://www.impacteen.org/journal_pub/pub_PDFs/AJPM_Supplement_2007/AJ PM2007_S301_powell.pdf</li> <li>Jay Maddock (2004) The Relationship Between Obesity and the Prevalence of Fast Food Restaurants: State-Level Analysis. American Journal of Health Promotion: November/December 2004, Vol. 19, No. 2, pp. 137-143.</li> <li>Davis and Carpenter. Proximity of Fast-Food Restaurants to Schools and Adolescent Obesity. American Journal of Public Health. March 2009. http://www.ncbi.nlm.nih.gov/pubmed/19106421</li> </ol>	Some Evidence
FS 3 – Promote access to and consumption of healthy beverages	Improved nutrition	<ol> <li>University of Wisconsin Population Health Institute. Point-of-Decision Prompts: Healthy Food Choices. <i>County Health Rankings 2012</i>. 2012. <u>http://www.countyhealthrankings.org/program/point-decision-prompts-healthy-food-choices</u></li> <li>University of Wisconsin Population Health Institute. Make Water Available and Promote Consumption. <i>County Health Rankings 2012</i>. 2012. <u>http://www.countyhealthrankings.org/program/make-water-available-and-promote-consumption</u></li> <li>Changing Access and Availability to Favor Healthy Foods and Beverages. Center for Training and Research Translation (Center TRT). http://www.centertrt.org/?p=strategy&amp;id=1114&amp;section=3</li> <li>Food and Beverage Marketing to Favor Healthy Foods and Beverages. Center for Training and Research Translation (Center TRT). http://www.centertrt.org/?p=strategy&amp;id=1120</li> </ol>	Some Evidence
	Obesity prevention / reduction	<ol> <li>Vartanian LR, Schwartz MB, Brownell KD. Effects of Soft Drink Consumption on Nutrition and Health: A Systematic Review and Meta-Analysis. <i>Am J Public Health</i>. 2007;97(4):667-675. http://www.yaleruddcenter.org/resources/upload/docs/what/food- obesity/SoftDrinkMetaAnalysis AJPH 4.07.pdf</li> <li>Malik, Et. al. Intake of sugar-sweetened beverages and weight gain: a systematic review. Am J Clin Nutr. 2006 August; 84(2): 274–288. http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3210834/</li> <li>Ludwig, et. al. Relation between consumption of sugar-sweetened drinks and childhood obesity: a prospective, observational analysis. The Lancet • Vol 357</li> <li>• February 17, 2001. http://www.ncbi.nlm.nih.gov/pubmed/11229668</li> <li>Does Drinking Beverages with Added Sugars Increase the Risk of Overweight? CDC.</li> </ol>	Some Evidence

Strategy	Expected Outcome	Source	Evidence Strength
		http://www.cdc.gov/nccdphp/dnpa/nutrition/pdf/r2p_sweetend_beverages.pdf	
FS 4 – Increase access to education and programs that support breastfeeding initiation, exclusivity, and duration	Increased breastfeeding initiation and short term exclusivity (1); increased duration of breastfeeding,	<ol> <li>Centers for Disease Control and Prevention. <i>The CDC Guide to Breastfeeding Interventions: Educating Mothers</i>. Atlanta: U.S. Department of Health and Human Services; 2005. <u>http://www.cdc.gov/breastfeeding/pdf/BF_guide_4.pdf</u></li> <li>Centers for Disease Control and Prevention. <i>The CDC Guide to Breastfeeding Interventions: Support for Breastfeeding in the Workplace</i>. Atlanta: U.S. Department of Health and Human Services; 2005. <u>http://www.cdc.gov/breastfeeding/pdf/BF_guide_2.pdf</u></li> <li>Sikorski J, Renfrew MJ, Pindoria S, Wade A. Support for breastfeeding mothers: a systematic review. Paediatr Perinat Epidemiol 2003;17(4):407–417.</li> <li>Mitra AK, Khoury AJ, Hinton AW, Carothers C. Predictors of breastfeeding intention among low-income women. Matern Child Health J 2004;8:65–70.</li> <li>Arlotti JP, Cottrell BH, Lee SH, Curtin JJ. Breastfeeding among low-income women with and without peer support. J Community Health Nurs 1998;15:163–178.</li> <li>Yun S, Liu Q, Mertzlufft K, Kruse C, White M, Fuller P, et al. Evaluation of the Missouri WIC (Special Supplemental Nutrition Program for Women, Infants, and Children) breast-feeding peer counselling programme. Public Health Nutr 2010;13:229–237.</li> <li>Dennis CL, Kingston D. A systematic review of telephone support for women during pregnancy and the early postpartum period. J Obstet Gynecol Neonatal Nurs 2008;37:301–314.</li> </ol>	Scientifically Supported
	Obesity prevention/reduction	<ol> <li>Owen et. al. Effect of Infant Feeding on the Risk of Obesity Across the Life Course: A Quantitative Review of Published Evidence. Pediatrics Vol. 115 No. 5 May 1, 2005 pp. 1367-1377. http://www.pediatricsdigest.mobi/content/115/5/1367.full</li> <li>Agency for Healthcare Research and Quality. Breastfeeding, Maternal &amp; Infant Health Outcomes. http://archive.ahrq.gov/clinic/tp/brfouttp.htm</li> <li>CDC Fact Sheet with reference list: Research to Practice Series, No. 4, July 2007. Does breastfeeding reduce the risk of pediatric obesity. http://www.cdc.gov/nccdphp/dnpa/nutrition/pdf/breastfeeding_r2p.pdf</li> <li>Ip S, Chung M, Raman G, Chew P, Magula N, DeVine D, et al. Breastfeeding and maternal and infant health outcomes in developed countries: evidence report/ technology assessment no. 153. Rockville, MD: Agency for Healthcare Research and Quality; 2007. AHRQ Publication No. 07-E007.</li> <li>Arenz S, Ruckerl R, Koletzko B, von Kries R. Breast-feeding and childhood obesity—a systematic review. Int J Obes Relat Metab Disord 2004;28:1247– 1256. http://www.nature.com/ijo/journal/v28/n10/abs/0802758a.html</li> </ol>	Scientifically Supported
H1 – Implement	Increased breastfeeding	1. The CDC Guide to Breastfeeding Interventions; pg. 2	Scientifically
evidence-based guidelines for quality	rates, increased breastfeeding duration,	2. The Surgeon General's Call to Action to Support Breastfeeding 2011; pg.24, 25, 44	Supported
maternity care practices	improved motherly	<ol> <li>23, 44</li> <li>University of Wisconsin Population Health Institute. Breastfeeding Promotion</li> </ol>	

Strategy	Expected Outcome	Source	Evidence Strength
that are fully supporting of breastfeeding initiation, duration and exclusivity	attitude towards breastfeeding	<ul> <li>Programs. County Health Rankings 2012. 2012. http://www.countyhealthrankings.org/program/breastfeeding-promotion-programs</li> <li>4. Murray EK, Ricketts S, Dellaport J. Hospital practices that increase breastfeeding duration: results from a population-based study. Birth 2007;34:202–211.</li> </ul>	
	Obesity prevention/reduction	<ol> <li>Owen et. al. Effect of Infant Feeding on the Risk of Obesity Across the Life Course: A Quantitative Review of Published Evidence. Pediatrics Vol. 115 No. 5 May 1, 2005 pp. 1367-1377. http://www.pediatricsdigest.mobi/content/115/5/1367.full</li> <li>Agency for Healthcare Research and Quality. Breastfeeding, Maternal &amp; Infant Health Outcomes. http://archive.ahrq.gov/clinic/tp/brfouttp.htm</li> <li>CDC Fact Sheet with reference list: Research to Practice Series, No. 4, July 2007. Does breastfeeding reduce the risk of pediatric obesity. http://www.cdc.gov/nccdphp/dnpa/nutrition/pdf/breastfeeding_r2p.pdf</li> <li>Ip S, Chung M, Raman G, Chew P, Magula N, DeVine D, et al. Breastfeeding and maternal and infant health outcomes in developed countries: evidence report/technology assessment no. 153. Rockville, MD: Agency for Healthcare Research and Quality; 2007. AHRQ Publication No. 07-E007.</li> <li>Arenz S, Ruckerl R, Koletzko B, von Kries R. Breast-feeding and childhood obesity—a systematic review. Int J Obes Relat Metab Disord 2004;28:1247– 1256. http://www.nature.com/ijo/journal/v28/n10/abs/0802758a.html</li> </ol>	Scientifically Supported
H 2 – Routinely screen and counsel patients on BMI status following evidence-based practice guidelines	Obesity prevention/reduction	<ol> <li>U.S. Preventive Services Task Force. Screening for Obesity in Adults: Recommendations and Rationale – B rating. Adults: June 2012, Children and Teens: January 2010 <u>http://www.uspreventiveservicestaskforce.org/3rduspstf/obesity/obesrr.htm</u></li> <li>McTigue et. al. Screening and Interventions for Overweight and Obesity in Adults Systematic Evidence Reviews, No. 21 <u>http://www.ncbi.nlm.nih.gov/books/NBK42795/</u></li> <li>Dansinger et. al. Meta-analysis: The Effect of Dietary Counseling for Weight Loss.Ann Intern Med. 3 July 2007;147(1):41-50 <u>http://annals.org/article.aspx?articleid=735254</u></li> </ol>	Some Evidence
<b>H 3</b> – Develop and implement a systems approach to identify and follow-up with at-risk, overweight and obese patients, including nutrition and physical activity counseling	Obesity prevention/reduction	<ol> <li>U.S. Preventive Services Task Force. Screening for Obesity in Adults: Recommendations and Rationale – B rating. Adults: June 2012, Children and Teens: January 2010 <u>http://www.uspreventiveservicestaskforce.org/3rduspstf/obesity/obesrr.htm</u></li> <li>University of Wisconsin Population Health Institute. Individually-Adapted Behavior Change. County Health Rankings 2012. 2012. <u>http://www.countyhealthrankings.org/program/individually-adapted-health- behavior-change</u></li> <li>McTigue et. al. Screening and Interventions for Overweight and Obesity in Adults Systematic Evidence Reviews, No. 21</li> </ol>	Scientifically Supported

Strategy	Expected Outcome	Source	Evidence Strength
<b>H 4</b> – Participate in healthcare-community partnerships to facilitate the active referral of	Improved nutrition, Increased PA	<ul> <li>http://www.ncbi.nlm.nih.gov/books/NBK42795/</li> <li>Dansinger et. al. Meta-analysis: The Effect of Dietary Counseling for Weight Loss.Ann Intern Med. 3 July 2007;147(1):41-50 http://annals.org/article.aspx?articleid=735254</li> <li>Centers for Disease Control and Prevention. 10 Essential Public Health Services. Atlanta: U.S. Department of Health and Human Services; 2010. http://www.cdc.gov/nphpsp/essentialservices.html</li> <li>Accelerating Progress in Obesity Prevention: Solving the Weight of the Nation</li> </ul>	Limited Evidence, Supported by Expert Opinion
the active referral of patients to community resources that increase access to opportunities for physical activity and high quality nutritious foods and beverages		<ol> <li>Accelerating Progress in Obesity Prevention: Coving the Weight of the Nation (Strategy 4-1: Provide standardized care and advocate for healthy community environments). Institute of Medicine 2012 publication. <u>http://www.iom.edu/Reports/2012/Accelerating-Progress-in-Obesity-Prevention.aspx</u></li> <li><u>Krebs NF</u>, Jacobson MS. Prevention of pediatric overweight and obesity. American Academy of Pediatrics Committee on Nutrition. Pediatrics. 2003 Aug;112(2):424-30. <u>http://www.ncbi.nlm.nih.gov/pubmed/12897303</u></li> </ol>	
	Obesity prevention/reduction	<ol> <li>U.S. Preventive Services Task Force. Screening for Obesity in Adults: Recommendations and Rationale – B rating. Adults: June 2012, Children and Teens: January 2010 http://www.uspreventiveservicestaskforce.org/3rduspstf/obesity/obesrr.htm</li> </ol>	Limited Evidence, Supported by Expert Opinion
W 1 – Implement comprehensive worksite wellness programs using evidence-based strategies	Obesity prevention/reduction	<ol> <li>The Health and Cost Benefits of Worksite Health-Promotion Programs, Ron Z. Goetzel and Ronald J. Ozminkowski, Annual Review of Public Health, Volume 29, 2008. <u>http://www.ncbi.nlm.nih.gov/pubmed/18173386</u></li> <li>Baicker, et. al. <i>Workplace Wellness Programs Can Generate Savings</i>. Health Aff February 2010 vol. 29 no. 2 304-311. <u>http://content.healthaffairs.org/content/29/2/304.abstract</u></li> <li>University of Wisconsin Population Health Institute. Worksite Obesity Prevention Interventions. <i>County Health Rankings 2012</i>. 2012. <u>http://www.countyhealthrankings.org/program/worksite-obesity-prevention- interventions</u></li> <li>Anderson et. al. <i>The Effectiveness of Worksite Nutrition and Physical Activity Interventions for Controlling Employee Overweight and Obesity - A Systematic Review</i>. Am J Prev Med 2009;37(4). <u>http://www.thecommunityguide.org/obesity/EffectivenessWorksiteNutritionPhys</u> icalActivityInterventionsControllingEmployeeOverweightObesitySystematicRevi ew.pdf</li> </ol>	Scientifically Supported
W 2 – Promote, support and develop more worksite wellness efforts that are statewide, regional or city-wide	Obesity prevention/reduction	<ol> <li>The Health and Cost Benefits of Work Site Health-Promotion Programs, Ron Z. Goetzel and Ronald J. Ozminkowski, Annual Review of Public Health, Volume 29, 2008. <u>http://www.ncbi.nlm.nih.gov/pubmed/18173386</u></li> <li>University of Wisconsin Population Health Institute. Worksite Obesity Prevention Interventions. <i>County Health Rankings 2012</i>. 2012.</li> </ol>	Some Evidence

Strategy	Expected Outcome	Source	Evidence Strength
worksite wellness initiatives such as Well City® initiatives		http://www.countyhealthrankings.org/program/worksite-obesity-prevention- interventions         3. Anderson et.al. The Effectiveness of Worksite Nutrition and Physical Activity Interventions for Controlling Employee Overweight and Obesity - A Systematic Review. Am J Prev Med 2009;37(4). http://www.thecommunityguide.org/obesity/EffectivenessWorksiteNutritionPhys icalActivityInterventionsControllingEmployeeOverweightObesitySystematicRevi ew.pdf	
<b>W 3 -</b> Establish a network that encourages professional development and sharing of ideas and information on worksite wellness (i.e., networking, learning circles, etc.)		<ol> <li>Building a Stronger Evidence Base For Employee Wellness Programs (p. 15 on recommendations). NIHCM Foundation May 2011. <u>http://www.nihcm.org/pdf/Wellness%20FINAL%20electonic%20version.pdf</u></li> </ol>	Insufficient Evidence