Forsyth County Department of Public Health
Promoting Health, Improving Lives

NCPH North Carolina Public Health

Forsyth County Community Health Action Plan 2011

Designed to address Community Health Assessment priorities

County: Forsyth **Partnership:** Healthy Community Coalition **Period Covered:** 2012-2015

LOCAL PRIORITY ISSUE

- Priority issue: Nutrition
- Was this issue identified as a priority in your county's most recent CHA? X Yes __ No

LOCAL COMMUNITY OBJECTIVE Please check one: X New __ Ongoing (was addressed in previous Action Plan)

- By (year): 2015
- Objective: Increase the percentage of adults who consume five or more servings of fruits and vegetables per day to 29.3%
- Original Baseline: 24.7% of the Forsyth County Adults reported eating five or more servings of fruits and vegetables per day
- Date and source of original baseline data: 2009 BRFSS Survey Results-Forsyth County
- Updated information (For continuing objective only): N/A
- Date and source of updated information: N/A

POPULATION(S)

- Describe the local population(s) experiencing disparities related to this local community objective:
  Fruit and vegetable consumption among adults: Increasing education and income are both positively associated with fruit and vegetable intake. Individuals with a high school diploma are 1.5 times less likely to eat five fruits and vegetables daily than college graduates. Similarly, individuals earning less than $15,000 are 1.5 times less likely to eat five or more fruits and vegetables a day than those earning more than $75,000 (2009).
- Total number of persons in the local disparity population(s): 147,281 adults with ≥ high school diploma or GED;
  38, 574 Families Living below the Poverty Level (11% of total population)
- Number you plan to reach with the interventions in this action plan: 500

HEALTHY NC 2020 FOCUS AREA ADDRESSED

__ Tobacco Use
X Physical Activity and Nutrition
__ Substance Abuse
__ STDs/Unintended Pregnancy
__ Environmental Health

__ Social Determinants of Health (Poverty, Education, Housing)
__ Maternal and Infant Health
__ Injury
__ Mental Health
__ Oral Health

__ Infectious Diseases/ Food-Borne Illness
__ Chronic Disease (Diabetes, Colorectal Cancer, Cardiovascular Disease)
__ Cross-cutting (Life Expectancy, Uninsured, Adult Obesity)

- Check **one** Healthy NC 2020 focus area: (Which objective below most closely aligns with your local community objective?)
- **List HEALTHY NC 2020 Objective**: (Detailed information can be found at http://publichealth.nc.gov/hnc2020/ website) Objective 3: Increase the percentage of adults who report they consume fruits and vegetables five or more times per day.

RESEARCH RE. WHAT HAS WORKED ELSEWHERE*

List the 3-5 evidence-based interventions (proven to effectively address this priority issue) that seem the most suitable for your community and/or target group. **Training and information are available from DPH. Contact your regional consultant about how to access them.*

Intervention	Describe the evidence of effectiveness (type of evaluation, outcomes)	Source
Cleveland's Steps Program	• The 31 new community gardens engaged 1085 new gardeners in physical activity and increased access to fresh produce for hundreds of families. • Thousands of pounds of fresh fruits and vegetables have been donated to area food pantries. • A new farmers' market was created in Cleveland's Central Neighborhood. Six young people are employed to sell the fresh produce they grow at a local Steps community garden through a program sponsored by St. Vincent's Charity Hospital. This new program is sustained through sales at the market, as well as grants and donations from the Greater Cleveland community. • Local foundations and businesses supported an additional seven gardens through grants totaling more than $30,000 for infrastructure improvements and the creation of garden-related programs.	http://www.cdc.gov/steps/success_stories/pdf/cleveland.pdf
Strategies to Prevent Obesity and Other Chronic Diseases: *The CDC Guide to Strategies to Increase the Consumption of Fruits and Vegetables*. Centers for Disease Control and Prevention. Atlanta: U.S. Department of Health and Human Services; 2011.	An evaluation of a large urban gardening project found that gardeners reported a higher consumption of specific vegetables and a lower consumption of milk, citrus, and sweet foods and drinks than non-gardeners. Focus groups conducted with inner-city youth revealed that those involved in garden programs reported more willingness to eat healthy food and try unfamiliar food than those not involved in a program. Other studies have found an association between gardening and fruit and vegetable consumption, even when the gardening activity occurred in the past.	http://www.cdc.gov/obesity/downloads/FandV_2011_WEB_TAG508.pdf

Communities Succeed at Creating Healthier Environments	CDC's Healthy Communities Program has a successful history of investing in communities' health and quality of life by supporting evidence - and practice-based interventions that reduce the burden of chronic disease. Through the Healthy Communities Program, coalitions collaborate with partners to educate local leaders on the importance of creating healthy places for people to live, work, learn, and play. These successes illustrate the exemplary work communities undertake. • Nine community and school gardens and five farmers' markets were established in the **Grand Rapids, Michigan**, low-income areas to increase access to fruits and vegetables. • Residents in rural **Montgomery County, Alabama**, have increased their access to fruits and vegetables through nine community gardens located in parks and schools. • More than 7,200 children in the Enlarged City School District of Middletown located in **Orange County, New York**, have increased access to fruits and vegetables through a farm-to-school program. • YMCA after-school programs in **Pittsburgh, Pennsylvania**, improved access to fresh fruits and vegetables to under-resourced communities. • Persons with developmental disabilities in **Schenectady County, New York**, have improved access and consumption of fresh produce by constructing wheelchair accessible raised-planting beds and creating a garden-based nutrition curriculum. • More than 136,000 residents in in **Tacoma-Pierce County, Washington**, have access to fruits and vegetables through community gardens in MetroParks. • Children and adults living in a 111 unit public housing complex in **Alexandria, Virginia**, are provided with access to healthy foods and opportunities for physical activity by weeding, watering, and picking produce from a garden.	http://www.cdc.gov/healthycommunitiesprogram/evaluation-innovation/successes.htm

WHAT INTERVENTIONS ARE ALREADY ADDRESSING THIS ISSUE IN YOUR COMMUNITY?

Are any interventions/organizations currently addressing this issue? Yes X No___ If so, please list below.

Intervention	Lead Agency	Progress to Date
Community Gardening Program	Forsyth County Cooperative Extension	Currently there are 20 community gardens supported by Cooperative Extension. Extension also facilitates a community garden advisory council.
Research Studies	Wake Forest University/ Wake Health/ Translational Sciences	Studying food insecurities. Food deserts, location of full service groceries, fruit and vegetable access, etc. These institutions have released 4 studies/ papers to the community about their findings and recommendations

WHAT RELEVANT COMMUNITY STRENGTHS AND ASSETS MIGHT HELP ADDRESS THIS PRIORITY ISSUE?

Community, neighborhood, and/or demographic group	Individual, civic group, organization, business, facility, etc. connected to this group	How this asset might help
Forsyth County Department of Public Health	Novant Health, Wake Health, City of Winston-Salem, Wake Forest University, Forsyth Futures, Pioneering Healthy Communities, Webster's, Forsyth County Cooperative Extension, Winston Salem State University	Lead agency for bringing different groups together to collaborate and support one another on the issues of nutrition, food access and healthy eating.
Forsyth Futures	Novant Health, Wake Health, City of Winston-Salem, Wake Forest University, Forsyth County Dept. of Public Health, Pioneering Healthy Communities, Webster's, Forsyth County Cooperative Extension, Winston Salem State University	Lead agency for collecting community data; serving as a clearinghouse; and bringing different groups together to collaborate and support one another on the different data collection efforts/issues.

INTERVENTIONS: SETTING, & TIMEFRAME	COMMUNITY PARTNERS' Roles and Responsibilities	PLAN HOW YOU WILL EVALUATE EFFECTIVENESS
INTERVENTIONS SPECIFICALLY TARGETING HEALTH DISPARITIES		
Intervention: Expanding the community garden program and the distribution of produce grown Intervention: X new __ ongoing __ completed Setting: Forsyth County Start Date – End Date: June 2012- Dec. 2015 Level of Intervention - change in: X Individuals __ Policy &/or Environment	Lead Agency: Forsyth County Cooperative Extension Role: Coordinating the community program; convening community talks, lectures, etc.; facilitating meeting between agencies, community garden managers and other parties as appropriate Community gardens will be marketed through partner agencies, churches, CBOs, hospitals, and others	**1. Quantify what you will do** • Number of community gardens • Number of pounds distributed in the community **2. Expected outcomes:** • Increase accessibility to fresh fruits and vegetables • Increase in consumption of fresh fruits and vegetables • Improves the quality of life for people in the garden • Provides a catalyst for neighborhood and community development • Stimulates and fosters Social Interaction • Beautifies Neighborhoods • Reduces Family Food Budgets • Creates opportunity for recreation, exercise, therapy, and education • Creates income opportunities and economic development • Provides opportunities for

		intergenerational and cross-cultural connections
INDIVIDUAL CHANGE INTERVENTIONS		
Intervention: Increase community collaboration and cross-promotion of programs related to nutrition, food access, local foods and food security. Intervention: X new __ ongoing __ completed Setting: Community- based organizations Start Date – End Date (mm/yy): June 2012- December 2015	List of partnering agencies and what they plan to do: FCDPH; Forsyth Medical Center WFBH;Cooperative Extension Service; WSFCS;YMCA;YWCA TSI/PCEI Other agencies/ programs are to be determined	**1. Quantify what you will do** • Number of agencies working together on this project • Number of new agencies/ collaborations established **2. Expected outcomes:** • Increase produce donations • Increase produce consumption • Increase health outcomes
POLICY OR ENVIRONMENTAL CHANGE INTERVENTIONS		
Intervention: Increase the number of Farmers' Markets in low wealth communities in Winston-Salem. Intervention: _X_ new __ ongoing __ completed Setting: Forsyth County Start Date – End Date (mm/yy): July 2013-June 2015	The lead agency is the Behealthy Coalition Partnering agencies include: Local congregations Farmers Cooperative Extension Service Include how you're marketing the intervention: • Through faith-based institutions in close proximity to new market • Employers in close proximity to the new market. • Local Neighborhood Associations. • Articles in local newspapers. • Press release.	**1. Quantify what you will do:** • Add at least one Farmers Market in a low wealth neighborhood in Winston Salem. **2. Expected outcomes:** • Improve food access in low wealth communities • Increase in consumption of fruits and vegetables • Increase in revenue for participating farmers
Intervention: Increase participation in SNAP (EBT) and WIC Farmers Market Nutrition Program at Farmers Markets in Forsyth County. **Intervention:** **_X_ new __ ongoing __ completed** **Setting: Forsyth County** **Start Date – End Date (mm/yy): July 2013-June 2015**	The lead agency is the Be Healthy Coalition Partnering agencies include: Local Farmers Markets Farmers Include how you're marketing the intervention: • Press release • Articles in local newspapers • Promote Farmers Markets that accept EBT and/or WIC Farmers Market Program with clients in health department and DSS •	**1. Quantify what you will do:** • Add SNAP/EBT and WIC Farmers Market Nutrition Program as payment method options in local Farmers Markets. **2. Expected outcomes:** • Improve food access in low wealth communities • Increase in consumption of fruits and vegetables • Increase in revenue for participating farmers