

REPORT 6:

Status Report on Efforts to

Promote Healthy Eating and Active Living

Profiles of Environmental Changes, Policies,
Programs and Research Designed to Reduce
Childhood and Family Obesity

October 2012



COMMON TABLE

This **Take Charge for Better Health™** report highlights the current healthy eating and active living (HEAL) landscape in Memphis and Shelby County. The report uses data and information on the various environmental changes, policies, programs and research activities that are available in the public domain as well as expert panel knowledge and interviews of organization representatives. This report is not intended to be a comprehensive listing of all environmental changes, policies, programs and research designed to address childhood and family obesity in the community. Yet, it does provide the reader significant point in time information.

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Healthy Memphis Common Table would like to acknowledge the hard work and dedication of the following contributors of this report:

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The HMCT would like to acknowledge the contributions of the individuals and organizations profiled in this report. Your writing contributions, photos and feedback helped to make this report a true representation of the community in which we live, work and play. Thank you.

We also appreciate the support of the Healthy Memphis Common Table Board of Directors, Advisory Committee, Million Calorie Reduction Match Advisory Committee and the Let's CHANGE Executive Workgroup.

**Aligning Forces
for Quality** | Improving Health & Health Care in
Communities Across Greater Memphis

An initiative of the Healthy Memphis Common Table and the Robert Wood Johnson Foundation.

Copies of this report are available at:
www.healthymemphis.org

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Jay Cohen, MD, FAACP, FACE, CEC

Endocrinologist and Medical Director

The Endocrine Clinic, PC

As a practicing pediatrician and adult endocrinologist, each day I see children and adults struggling with obesity and type 2 diabetes. Through service on the Board of Directors of the Healthy Memphis Common Table (HMCT) for the past six years, there are continued lessons learned on how this “obesity epidemic” impacts areas in addition to a person’s health. Obesity affects our workforce, increases health care cost and can hurt a family’s stability. Also through HMCT, I’ve been able to witness the positive strides that can be made when a group of professionals and concerned citizens work together to address serious issues that plague our community.

There is a long standing history of framing health related issues in Memphis and Shelby County. HMCT and its partners often work in collaboration with researchers at The University of Memphis and The University of Tennessee Health Sciences Center. I am grateful for the efforts of our research community and their never-ending quest to discover and assist in the implementation of new ideas and approaches. This collaboration helps to compile the complete package needed to encourage a Healthy Eating and Active Living (HEAL) community.

I commend Dr. James Bailey for the leadership and the foresight he exhibited in 2003 with the release of HMCT’s first local reports and the ones that followed. He was assisted by team leaders Denise Bollheimer, Dr. Art Sutherland, Marion Levy, DrPH, RD, Dr. Marion Hare and others who supported these efforts, helped frame the obesity conversation, and rolled up their sleeves to create a common agenda.

Thanks also to Shelby County Mayor Mark Luttrell, Jr. and City of Memphis Mayor A C Wharton, Jr. for taking a leadership role in environmental and policy changes. HMCT is also indebted to the Community of Foundation for Greater Memphis for making obesity a priority in their funding awards. The community projects they have assisted continue to provide the hands-on, grassroot efforts that address individual behavior changes.

One of the most important lessons I’ve learned as a physician is that a disease can be cured in many ways. Yet, the most effective way is redesigning or eliminating what is causing the problem and creating a way to sustain the results! Memphis and Shelby County have an alarmingly high obesity rate, and the enclosed profiles have convinced me that we require a comprehensive approach to address the real causes of the problem. Education is the first step in creating an informed population. This Healthy Eating and Active Living Report is an important opportunity to share the profile of today’s countless efforts to ensure Memphis and Shelby County take the desired path of advancing healthier choices as easier choices. Appendix one and two share the findings of the latest “F as in Fat” report, which outlines how the entire country must choose a new path towards reducing obesity rates. We are on the right path. Our collective efforts and shared responsibility are what is driving our community to fight obesity and create our new future. Healthy eating and active living is the real cure. This HEAL report provides the details of the prescribed treatment.

The Healthy Memphis Common Table is a non-profit, 501(c)(3) Regional Health Improvement Collaborative that addresses both the health of everyone in the community and the health care delivery system. HMCT's vision is to support Memphis in becoming one of America's healthiest cities by mobilizing people to achieve excellent health for all. Our commitment to the community includes:

IMPROVE the quality of primary care

EMPOWER patients and caregivers

FIGHT childhood and family obesity

REDUCE diabetes, heart disease and pediatric asthma

ELIMINATE food deserts in low income neighborhoods.



Thomas Feeney, MBA, CPA
Chair, Board of Directors
Healthy Memphis Common Table

The Healthy Memphis Common Table (HMCT) is the Mid-South's only Regional Health Improvement Collaborative (RHIC). There are approximately 50 RHICs in the country that have been developed to address a multi-stakeholder organization committed to improving the health and the health care of the entire community. The first RHIC was founded in 1995. The HMCT was organized in 2003 as a combined effort of various organizations to align and create a common table. The HMCT has been certified by the Department of Health and Human Services as Tennessee's only Chartered Value Exchange, and is seen as a national model of innovation and collaboration.

Currently HMCT operates seven projects which focus on the five areas noted above and has expanded its management capacity to lead specific community-wide efforts. These efforts involve over 50 partner organizations, 200 organizations that are collaborators, and 25-30 steering committees and work groups. This represents over 500 individuals who serve on these various committees and work groups representing a cross section of the community to include patients and families, hospital executives, business leaders, consumers, nurse practitioners, physicians, health plan executives, educators, faith-based leaders and health department officials. The key is the collective impact these individuals are making in framing the work of HMCT and the actions associated with improving the health and health care provided in our community.

The role of HMCT is threefold: serve as a multi-stakeholder neutral convener, produce community level performance reports, and execute on small scale projects which can expand community-wide. The work of HMCT is done through partnership and collaboration and the model of the RHIC has created a new era of change and innovation. The key to the work of HMCT is the alignment of resources and agendas. This is so important to the Memphis region and HMCT is honored to serve in this significant role.



Reneé S. Frazier,
MSHA, FACHE
CEO

**Healthy Memphis
Common Table**

Healthy Memphis Common Table (HMCT) is pleased to share our 6th *Take Charge for Better Health Report™*. This report profiles the various efforts to reduce childhood and family obesity in Memphis and Shelby County. The report is designed to provide a snap shot of the broad-based efforts focusing on environmental changes, projects, policies, programs and research activities. The 2012 “F as in Fat,” a report funded by the Robert Wood Johnson Foundation and written by the Trust for America’s Health, predicts that by 2030, Tennessee will have an obesity prevalence rate of 63.4%, placing us as one of the most obese states in the county! The financial consequence of this rate of prevalence results in an annual additional medical cost of \$3.6 billion¹ for Tennessee.

We in Memphis and Shelby County have not ignored the magnitude of the impact obesity has on our children and entire families. The cost of obesity is not only financial. It creates a long list of negative quality of life and health outcome indicators such as heart disease, diabetes, hypertension, reduced mobility and other factors which have deleterious effects on one’s overall social, economic and emotional wellbeing. The public and private leadership of Memphis and Shelby County has banded together to create multiple channels of interventions to address the current epidemic of overweight and obesity in children and adults in our community and the broader region.

It is time to turn the corner and leverage the collective engagement of government, business, communities, and individuals to create a new culture whose norm is *eat less and move more*. Though a very simple approach, it is an idea that has been hard to put into action. This report showcases the efforts of many organizations in Memphis and Shelby County that advance efforts to embrace a culture of health living.

The report is divided into six sections.

1. Shelby County and the City of Memphis as leaders in healthy eating and active living efforts in the community;
2. Partnerships as mechanisms paving the way for implementation of healthy eating and active living efforts in the community;
3. Environmental changes or projects that change the food/beverage and physical activity environments;
4. Policy advocacy organizations and recommended policies that make the *healthy choice the easy choice!* The policy recommendations are gaining momentum in the workplace, school, faith and community venues;
5. Broad-based community programs that yield results; a number of them began during HMCT’s initial push to reduce obesity in 2004;
6. Research activities focusing on various interventions in schools, primary care settings and other community-based approaches.

This report will not include every project, policy, program or research activity in our community, but it will highlight the magnitude of the current efforts to reduce our high prevalence of obesity. Thus, helping the reader grasp the collective impact that a collaborative effort can achieve. It is important to note the importance of the leadership demonstrated by the Tennessee Obesity Task Force in framing the issue statewide and in creating a comprehensive *Eat Well Play More Plan*. The *Eat Well Play More* plan has framed much of what is being done in Memphis and Shelby County and HMCT’s commitment to mobilize our community in developing and implementing a community road map to success. Many organizations in Memphis and Shelby County are using this road map to continue the journey and these profiles provide the many opportunities for calling on more organizations to leverage existing resources to ensure our collective success.

It is important to note a small victory. Tennessee has dropped from the 3rd most obese state in 2009 to 8th in 2010 and to 15th in 2011. This is a promising and positive trend. Let’s keep the momentum going!

¹Trogdon, JG, Finkelstein, EA, Feagan, CW, Cohen JW. *State-and payer-specific estimates of annual medical expenditures attributable to obesity. Obesity (Silver Spring). Jan 2012.*



Honorable Mark H. Luttrell, Jr.
Mayor, Shelby County

“Providing an effective public health program is one of my top priorities. It makes good sense for Shelby County Government to promote a healthier lifestyle for our employees and visitors,” said Mayor Mark Luttrell on September 28, 2012 when he announced that Shelby County had adopted a new vending machine policy. This new vending machine policy supports the Healthy Shelby awareness campaign launched earlier this year.

Mayor Luttrell signed an Executive Order redesigning the vending machine food and beverage offerings in 172 vending machines in 17 buildings operated by Shelby County. The vending machines will be stocked such that 50% of the offerings will be products meeting the “Fit Pick” standards of the American Heart Association. Based on Healthy Memphis Common Table’s estimates, the policy change will eliminate 500,000 calories per food vending machine each year!



Honorable A C Wharton, Jr.
Mayor, City of Memphis

In June 2011, the City of Memphis officially kicked off its Let’s Move! program. Mayor A C Wharton, Jr. was joined by 170 students as they all showed their support for First Lady Michelle Obama’s Let’s Move! Initiative. The celebration and announcement event was held at Hickory Hill Community Center. Scholars at Power Center Academy began the program with a rousing rendition of the Let’s Move! flash workout by the

performer Beyoncé. This served as a fitting background for the unveiling of Memphis’ SAFE (Shared Areas for Fitness and Exercise) Zones.

SAFE Zones are parks and other neighborhood fitness areas that have been identified as experiencing high levels of physical activity before and after work hours. The proposed 25 SAFE Zones will receive redirected police patrols during peak workout hours to provide residents with a more visible police presence, thereby increasing the community’s resources for physical activity. This will help make these areas safer and friendlier for those who seek to utilize them.

This project is a partnership between the City of Memphis’ Division of Park Services and the Memphis Police Department.

The Healthy Memphis Common Table would like to recognize the leadership that Shelby County Mayor Mark Luttrell, Jr. and City of Memphis Mayor, A C Wharton, Jr. have demonstrated by implementing policies and projects that make the healthy choice the easy choice. Government leadership will catalyze our collective efforts to improve the health of our residents. On behalf of the residents of Memphis and Shelby County, we celebrate both of our mayors for their leadership and energy!



Coalition Building



Cynthia Nunnally
Administrator
Health & Planning Promotion
Shelby County Health
Department

LET'S CHANGE In 2010, The Shelby County Health Department (SCHD) and Healthy Memphis Common Table (HMCT) kicked off the *Let's CHANGE* Initiative: **Let's Commit to Healthy Activity and Nutrition Goals Every day!** They assembled more than 50 organizations to reach adults, children, employers, governments, planners, advocacy groups and charities. All are working together to build greater capacity for more comprehensive, coordinated ways to make healthy choices the easier choices in Shelby County.

The Let's CHANGE group now collaborates to reach health improve-

ment goals. Partners pledged to make the healthy choice the easy choice as easy as ABC*.

Access: Provide **access** to healthy foods, snacks, and meaningful physical activity

Behaviors: Motivate and incentivize **behaviors** that promote healthy eating and active living

Choices: Support policies and changes in the environment that make **healthy choices the easy choices**.

Systems: Commit organizational resources to change **systems** to support healthy activity and nutrition.

In July 2011, the Memphis Business Group on Health supported Let's CHANGE in convening a summit called "Believe in a Healthy Memphis" which resulted in the development of a community plan outlining a set of strategies in six domains that would be implemented over two years.

Many programs and projects highlighted in this HEAL Report are the fruit of the collaboration of members and supporters of the Let's CHANGE initiative. Let's CHANGE has allowed various organizations to identify common goals and to begin explorations for collaborative approaches to addressing obesity in the community.

***ABC's author:** Dr. Kenneth Robinson, Senior Public Health Advisor
Shelby County Government



Funding Support



CONVERGENCE PARTNERSHIP In 2009, Memphis was chosen as one of 15 communities in the U.S. to receive a grant from a group of national funders that came together three years earlier with a goal of making communities healthier places to live. These funders created the Innovation Fund and invited organizations to apply for matching funds.

The Community Foundation (CF) saw an opportunity to bring new money and to strengthen the ties among local funders in Memphis. The resulting Healthy Eating Active Living (HEAL) project would increase access to nutritious food and encourage active lifestyles. As HEAL's leader, the CF brought together The Assisi Foundation, the Plough Foundation and the United Way of the Mid-South, and the group collectively invested \$70,000 and obtained a \$35,000 match from the Innovation Fund. The national initiative required that funded projects be located in underserved neighborhoods. They should also demonstrate innovative approaches for achieving health and equity outcomes through policy and environmental change.

In 2010, the group invested the \$105,000 in two organizations that have already made a difference in Memphis. These organizations were GrowMemphis and Livable Memphis. In 2012, additional funds were awarded to GrowMemphis, Livable Memphis, The Green Machine and its fiscal agent, HMCT, and the City of Memphis School System's Farm to School Program. These projects and programs are featured in this HEAL report.

The CF is emerging as a lead community convener for fostering partnerships and facilitating policy and environmental change around healthy eating. In October, the Community Foundation and the Hyde Family Foundations brought together other local funders to create the Healthy Eating Active Living Affinity Group of the Memphis Grantmakers Forum.



A Greenprint and Sustainability Plan for the Region



John Zeenah
Coordinator
Shelby County Office of
Sustainability

MID-SOUTH REGIONAL GREENPRINT & SUSTAINABILITY PLAN

In 2010, the Memphis & Shelby County Division of Planning and Development's Office of Sustainability, supported by a group of stakeholders, applied to the US Department of Housing and Urban Development (HUD) for a Sustainable Communities Regional Planning Grant. The grant program was designed to support multi-jurisdictional planning integrating housing, transportation, land use,

economic development, workforce development and infrastructure investment. The grant challenged jurisdictions to consider the interrelatedness of (1) economic competitiveness and revitalization; (2) social equity, inclusion and access to opportunity; (3) energy use and climate change; and (4) public health and environmental impact.

In November 2011, Shelby County Government was awarded a \$2.6 million HUD Regional Planning Grant to develop the Mid-South Regional Greenprint & Sustainability Plan (MRGSP). The MRGSP seeks to enhance regional livability and sustainability through a unified vision for a region-wide network of greenspaces. This serves to address connectivity, accessibility, housing, environmental protection, community health, transportation alternatives, economic development and citizen engagement in the Greater Memphis Area. The plan will also create a framework for regional collaboration for future planning activities. The boundaries of the Memphis Metropolitan Planning Organization (MPO) and West Memphis MPO constitute the geographic area of the plan.

The planning process has begun and eight working groups are being established: Parks & Greenways Planning, Data Mapping and Evaluation, Community Health and Wellness, Alternative Transportation and Fuels, Resource Conservation and Environmental Protection, Workforce Development and Regional Employment, Social Equity and Housing and Neighborhood Land Use.



Walking and Biking Trails: A System Emerges



Kyle Wagenschutz
Bicycle Pedestrian
Coordinator
City of Memphis

MAKING BICYCLING AND WALKING SAFER & EASIER

In 2007, Memphis did not have a single mile of bike lanes nor extensive public walking paths outside of parks. Now cyclists can enjoy over 60 miles of city streets for on-road, shared roadway bike routes and over 50 miles of walking trails.

In 2010, Memphis hired a Bicycle/ Pedestrian Coordinator through funding from the Metropolitan Planning Organization. By October 2010, the City and County, in collaboration with the Greater Memphis Greenline, Inc., the Shelby Farms Conservancy and other supporting organizations, built the 6.5 mile Shelby Farms Greenline (SFG), which now ties into the Wolf River Greenway. The City plans to connect the Shelby Farms Greenline to Midtown's Overton Park along 1.5 miles of a two-way protected bike path. This project was instrumental in getting Memphis, Tennessee named one of six cities participating in the Green Lane Project in 2012. The efforts of the Mississippi River Corridor-Tennessee, Inc. has provided Shelby County a new 38-mile bicycle/ pedestrian trail serving as the mid-section for the more than 3,000 mile trail that connects the headwaters of the Mississippi River in Minnesota to the Gulf of Mexico. By 2015, downtown Memphis will be connected to West Memphis, Arkansas by protected bike lanes across a bridge through a federal grant and private funding.

To make sure that cyclists know the proper way to use these developments, bike safety clinics and lectures are conducted in various locations of the County. Many miles of bike lanes, walking trails and paths have provided safer venues for active citizens. They have boosted enthusiasm for walking and biking in the community and the SFG has stimulated demand for the neighborhoods and homes along the paths. The City's efforts have generated additional funds through grant awards as well as positive recognition for the Memphis area.



Underserved Communities: A Case for Grocery Stores and Mobile Markets



Renee S. Frazier
CEO
*Healthy Memphis
Common Table*

Despite the increase in community gardens and farmers markets, health challenges are still profound in underserved Memphis neighborhoods without grocery stores and produce markets.

Healthy Memphis Common Table (HMCT) promotes food security in some of the city's poorest neighborhoods through additional creative solutions that integrate economic development, neighborhood revitalization and access to fresh, affordable foods. Locating full service grocery stores in underserved communities ensures

that residents have access to fresh, affordable foods. Mobile produce markets are low-cost simple solutions with the potential for high impact in specific neighborhoods because they free residents from purchasing most of their groceries from local convenience stores or from traveling long distances to stores or markets outside the community.

To educate our citizens on how other communities have succeeded in placing grocery stores in underserved communities, Jeff Brown, founder of Brown Super Stores, Inc. and Uplift Solutions was selected as HMCT's keynote speaker at its 2012 Annual Meeting. Uplift Solutions is a non-profit organization that provides financing and technical assistance to food firms, government and non-profits to locate full service supermarkets in underserved areas.

In addition to trying to eliminate food deserts in Shelby County, HCMT is also a member of the Tennessee Food Financing Task Force which was established by the Food Trust to evaluate various economic development initiatives and financing mechanisms that are known to enhance the economic viability of grocery stores in underserved communities throughout the state of Tennessee. HMCT also serves as fiscal agent for The Green Machine, a mobile farmers market project of the St. Patrick Church's Outreach, Inc. It is scheduled to begin bringing fresh, healthy foods to people in Spring 2013.



Farmers Markets

Fresh, unprocessed fruits and vegetables are usually more nutritious than canned and processed foods. They also provide needed fiber in our diets. Fortunately, vegetables, fresh fruits, and some prepared items are available throughout the Memphis region through a growing number of farmers markets.

Memphis and Shelby County is reported to have more farmers markets than any other county in Tennessee.

Many of the region's farmers markets are located in areas where access to local, fresh fruits and vegetables are scarce. They can be found in the urban core of Memphis and in the surrounding communities of Whitehaven, Germantown, the Agricenter, Arlington, Millington, Covington, Somerville, Hernando, MS and West Memphis, Arkansas. The public is encouraged to patronize them.



Community Gardens

GROWMEMPHIS



Chris Peterson
Director
GrowMemphis

GrowMemphis was founded as a project of the Mid-South Peace and Justice Center in 2007 to foster the creation of robust community food resources that eliminate hunger, promote health and further social justice. In January 2012, GrowMemphis became an independent 501 (c)(3) non-profit in an effort to keep pace with the rapid growth and interest in community gardening and the expanded need for a food policy council. GrowMemphis turns vacant lots into thriving gardens as centers of community activities.

GrowMemphis is now associated with as many as 27 member garden projects. They also provided garden project grants in 2012, helped to secure favorable zoning regulations for community gardening and urban agriculture and simplified the approval process for new farmers markets in August of 2010. GrowMemphis also received funding from Wholesome Wave to participate in the double coupon program. The double coupon program provides recipients of the Supplemental Nutrition Assistance Program (SNAP) and the senior farmers market voucher program the opportunity to double the amount of fruits and vegetables they purchase from participating farmers markets.

GrowMemphis is a small organization with a big task and through their efforts community residents in 27 communities now have affordable quality food, gardening skills and neighborhood pride. Progressive government policies and zoning changes have resulted in a stronger and more effective collaboration between GrowMemphis and local government officials, who are now better educated on the importance of providing residents access to fresh fruit and vegetables as a pathway to ensuring the public's health.



Parks and Recreation Facilities

CITY OF MEMPHIS SAFE ZONES



Kyle Wagenschutz
Bicycle Pedestrian
Coordinator
City of Memphis

Active living is vital to battling obesity. Memphis is fortunate to have Shelby Farms, the largest urban park in the United States. Although more than 160 city parks and 23 community centers are within one mile of almost any home in Memphis, many are greatly underused. A 2010 Memphis survey showed that the lack of safety and security - real and perceived -- kept people from walking and exercising away from home.

The Shared Areas for Fitness and Exercise (SAFE) Zones program was kicked off by Mayor A C Wharton, Jr. in 2011. The program makes selected parks, schools and community centers safer and more accessible for exercise during peak exercise times by providing a more visible police presence. The SAFE Zone program supports the First Lady Michelle Obama's "Let's Move!" program.

To date, the SAFE Zones are: Hickory Hill Community Center, Frayser Park, Alcy Samuels Park near the airport, Southside Park in South Memphis and several parks in Whitehaven. Prizes and promotional materials are provided by local corporate sponsors such as Nike.

Communications and synergy among the Parks Division, Memphis Police Department, neighborhood associations, community development corporations, advocacy groups and local wellness providers has improved, and many neighborhood residents are more aware of the newly established SAFE Zones. Memphis' image was enhanced nationally when the Memphis SAFE Zones program was recognized as a 2nd round finalist for the 2012 City Livability Award, bestowed by The Conference of Mayors City Livability Program.

A Food Advisory Council is Formed

FOOD ADVISORY COUNCIL



Chris Peterson
Director
GrowMemphis

Seeking to couple its grassroots work with policy advocacy, GrowMemphis received grants in 2010 and 2012 from the Community Foundation of Greater Memphis to establish and operate a Food Advisory Council (FAC) for Memphis and Shelby County under the fiscal sponsorship of GrowMemphis, which currently serves as staff.

The Council has had an immediate impact on the food policy landscape for Memphis and Shelby County. The Council worked with the Memphis and Shelby County

Division of Planning and Development to incorporate relevant provisions on farmers markets and urban agriculture in the Unified Development Code. Working with the Shelby County Health Department (SCHD), it advocated for permitting sampling and chef demonstrations at farmers markets in Shelby County. The Council completed a published a report entitled “Good Food For All.” The Council also recently adopted bylaws and membership structure and is working on a strategic plan.

The Council is currently: (1) Assisting the SCHD to complete revisions to the Memphis Food Ordinance Handbook; (2) Guiding efforts to improve the Double Value Coupon program for SNAP benefits at farmers markets and the TN State Senior Farmers Market Nutrition Program; (3) Reviewing Memphis and Shelby County programs to transfer public-owned land to individuals and non-profits for the purpose of healthy food production; and (4) Identifying opportunities to conduct a community food security assessment and publish findings and policy suggestions.

The establishment of a Food Advisory Council ensures that concerns about access to healthy food for all residents of the community are heard. Food security for the community is enhanced because advocacy for a system is assured.



Advocacy for a Bikable and Walkable Memphis

LIVABLE MEMPHIS



Sarah Newstok
Program Manager
Livable Memphis

Livable Memphis (LM), created in 2005, is an initiative of the Community Development Council of Greater Memphis (CD Council). The program arose from a desire of multiple stakeholders to build a mechanism for citizens to advocate for public policies that strengthen Memphis neighborhoods. LM is a distinct program of the CD Council and it is a coalition of active citizens, neighborhood groups, educational institutions, non-profit and faith-based community groups, private and community developers, business partners, governmental officials and departmental staff.

In 2010, LM received a Healthy Eating and Active Living Grant from the Community Foundation of Greater Memphis to support public policy work - specifically to advocate for more and better facilities for walking and biking in Memphis and Shelby County. The support contributed directly to a number of policy wins: Mayor Wharton’s 2010 Bicycle Plan for 55 miles; revisions to the City of Memphis Vehicle and Traffic ordinance to make the streets safer for cyclists and pedestrians; input sessions for MATA’s Short Range Transit Plan and the Metropolitan Planning Organization’s Long Range Transportation Plan; and the kick off of the Complete Streets initiative in a workshop “Laying the Foundation for Complete Streets.”

Livable Memphis provides a voice for over 125 community organizations in the on-going community conversation about development trends and challenges for neighborhood revitalization. As a result of the LM’s advocacy, new miles of bike lanes are installed and new bicycle and pedestrian laws reflecting best practices are in implementation. “Complete Streets” is gaining a following in the community. The Overton Broad Connector remains Memphis’ premier example of using innovative bike facilities to strengthen existing parks and grow a network of biking and walking trails.

Statewide Healthy Eating and Active Living Plan and Campaign



Joan Randall
Director
Tennessee Obesity
Task Force

In September 2010, the Tennessee Obesity Taskforce (TOT) launched its comprehensive and cohesive state plan called *Eat Well Play More Tennessee* to reduce obesity and its related chronic diseases. The Healthy Memphis Common Table has been integral to the creation and implementation of this plan.

TOT has 11 Action Teams and over 700 partners focusing on policy, systems and environmental strategies. Policy areas include breast-feeding, built environment and

transportation, early childcare, food systems, health systems, parks and recreation, schools, vulnerable populations and work-site wellness. TOT has achieved a very high level of connectivity and collaboration in all of these areas.

Why Policy? Public policy (local, state or federal) can help the greatest number of people make positive changes. Rather than focusing on individual programs and projects which are often not sustainable, effective public policy makes positive changes in the environments in which we live.

National partners seek the TOT because of its successes in Tennessee. The TOT has received multiple requests to participate in national conferences and policy efforts with the following organizations: Centers for Disease Control and Prevention, American Heart Association, Academy of Nutrition and Dietetics, American Diabetes Association, YMCA, Robert Wood Johnson Foundation, Save the Children, Food Trust, Rudd Center, Alliance for a Healthier Generation, Transportation for America and the National Center for Bicycling and Walking.

One of the successes of TOT was advocating for legislation allowing mothers to breastfeed a child beyond the current 12-month age limit in public without being prosecuted for public indecency. Governor Bill Haslam signed the legislation in April 2011, and it became law on July 1, 2011.



Improved Food, Beverage and Physical Activity Environments

MILLION CALORIE REDUCTION MATCH



Connie S. Binkowitz
Program Manager
Healthy Memphis
Common Table

Million Calorie Reduction Match (MCRM) addresses the obesity epidemic in Shelby County by improving the nutrition habits and physical activity of local citizens. The project seeks to transform the food, beverage and physical activity environments within organizations and community venues through policy change.

MCRM has developed three policies as follows: (1) Healthy meeting/events; (2) Healthy vending and (3) Healthy physical activity. These policies aim to:

- (a) Reduce the caloric value of food and beverage offerings at meetings and events as well as in vending machines;
- (b) Provide education on caloric value of food and beverage offerings through menu labeling; and
- (c) Increase physical activity opportunities through support mechanisms and improved environments.

The project seeks to enlist the participation of some 75 - 125 organizations that would adopt and implement the various policies. Participating organizations that do well in implementing their goals will be recognized with Certificates of Achievement. Organizations that have established a wellness committee or identified an organizational champion will be given a blue star; organizations adopting at least one policy will receive a bronze star. Those adopting two policies will receive a silver star and those adopting three policies will receive a gold star.

At least 20 organizations have indicated an interest in participating in the MCRM project and will begin helping others become healthier soon. Millions of calories eliminated from the offerings or through increased physical activity are expected to translate into improvements to the obesity rates in the community.





Healthy Vending in Schools, Public Buildings and Hospital Settings



Marian Levy, DrPH, RD
Professor
American Public Health Association

SMARTER EATING THROUGH HEALTHIER VENDING

A number of years ago, Marian Levy, DrPH, RD, and her colleagues at the Tennessee Healthy Weight Network led the three-year effort to pass legislation that successfully banned junk food from vending machines in elementary public schools in Tennessee. Vending machines, snack bars and a la carte items in elementary schools in Tennessee now contain foods of high nutrient quality. This environmental change came about as a result of a public policy campaign.

A growing number of employers and organizations have become active in ensuring that vending machines on their premises offer healthy food options. Employers are sending a message and setting an example about what foods are preferred regardless of the source. Government is included in this group. As part of Mayor Luttrell's Healthy Shelby Initiative, beginning October 1, 2012, food vending machine offerings in the 172 vending machines in 17 county-occupied buildings must meet the standard of having at least 50% of the vending food offered with no more than 35% of calories from fat, no more than 10% from saturated fat and no more than 35% of calories from sugar by weight. Additionally, the healthier options will be labeled "Fit Pick" to let patrons know that this is a better option.

Methodist Health Systems has improved options in their vending machines and so have several community organizations. Healthy vending is available at Boys & Girls Clubs, the Bartlett Recreation Center, Premier Transportation, Singleton Community Center and the Church Health Center Wellness facility. Fresh & Healthy Vending, a new firm in Memphis and a community partner of HMCT, specializes in healthy vending and has recently placed machines in area YMCAs, Ballet Memphis, Bridges and Union University's Germantown campus.

Breastfeeding Friendly Hospitals and Workplaces

SHELBY COUNTY BREASTFEEDING COALITION



Julie Ware, MD, MPH
Chair
Shelby County Breastfeeding Coalition

Breastfeeding is recognized as the normative standard for infant nutrition and the Shelby County Breastfeeding Coalition (SCBC) wants everyone to know it—especially expecting mothers. Research has shown that breastfeeding reduces the risk for obesity in both children and adults. Breastfeeding provides the perfect nutrition for infants, it discourages overeating by infants and excess weight gain for both moms and babies. It is also linked to a lower risk of type 2 diabetes for mothers and babies. The American

Academy of Pediatrics states that infant feeding is no longer a lifestyle choice, but a public health issue. The Surgeon General has issued a Call to Action to support breastfeeding for our entire nation.

The SCBC began in 2003 as a countywide collaborative to reach the Healthy People 2010 goals for breastfeeding. Goals include education of doctors and health care providers, community outreach and education and Baby-Friendly practices in all birth hospitals. By improving the low Shelby County breastfeeding rates, childhood obesity can be reduced as well as many other health problems for mother and baby, including infant mortality.

SCBC has helped to recruit five area birth hospitals to encourage breastfeeding as part of the Tennessee Initiative for Perinatal Care Breastfeeding Project. Breastfeeding is now a part of pediatric, obstetrics and family practice residency programs. Outreach has been wide spread through the Early Success Coalition and various churches, including a special mentoring program at St. Andrew AME Church called "The Right Start." An upcoming media campaign with billboard and transit signs will further educate the community on the importance of breastfeeding.

Community leaders recognize the importance of breastfeeding to obesity prevention and general wellness. Mayors Wharton and Luttrell have declared the first week of August to be World Breastfeeding Week in Memphis and Shelby County, with an emphasis on the importance of breastfeeding to maternal and infant health.



Healthy Schools, Healthy Students

MEMPHIS CITY SCHOOLS COORDINATED SCHOOL HEALTH PROGRAM



E. Jean Massey
Coordinator
Memphis City Schools,
Coordinated School Health

Unhealthy behaviors can cause overweight children to become unhealthy, obese adults. Body Mass Index (BMI) data for Memphis City Schools (MCS) students showed more than a third of students are at risk or are overweight. The 2011 Youth Risk Behavior Survey showed 18% of MCS high school students were obese. Poor nutrition and inactivity were factors.

Health and successful academics are closely tied. MCS works hard to improve student health, eating habits and activity levels by emphasizing eight key areas:

nutrition, physical education (PE), health education, healthy school environments, health services, family and staff involvement and counseling and social services.

The Coordinated School Health Program integrates nutrition, academic lessons, health services, PE and engagement of staff and families to reduce childhood obesity and improve health in the region. Nutrition Services strives to prepare healthy breakfast and lunch meals and special diets for students. The school system is one of the largest food service providers in Memphis affecting the nutrition of 110,000 students.

A \$3.15 million grant from the U.S. Department of Agriculture for the 2011-12 year provided fresh, unprocessed fruits and vegetables to 33 city schools and two Shelby County schools for kids under the 9th grade.

Tony Geraci of Nutrition Services has expanded the Farm to School program with urban school farms being built in food deserts. Mr. Geraci estimates that about \$200 million annually will be pumped back into the local economy as a result of purchasing fresh food from local farmers.

PE is now integrated into a planned, sequential K-12 curriculum providing learning experiences through activities such as basic movement skills; physical fitness; rhythm and dance; games; sports; tumbling and gymnastics; and aquatics.



SHELBY COUNTY SCHOOLS COORDINATED SCHOOL HEALTH PROGRAM



Shunji Brown-Woods
Director
Shelby County School
Coordinated School Health

A big part of each student's life is spent in school and learned habits can be carried into adulthood. Thus, changes have been made in Shelby County Schools to enhance nutrition and encourage physical activity.

In 2008, Shelby County Schools launched the "Virtual Cafe," allowing parents and students to see nutrition information and make better school meal choices. Then, the S.C. Coordinated School Health Program attacked the obesity and diabetes epidemics head on. BMI data was collected

and analyzed for the 2009-10 and 2010-11 school years, revealing childhood obesity in specific schools. County schools greatly expanded partnerships to address childhood obesity and other health problems. Specific interventions include better textbooks and facilitators for wellness, nutrition and obesity curriculums; Take 10! for grades K-5; teacher-directed PE programs; the Michigan Model; health education facilitators for middle school health; BlueCross BlueShield's Walking Works program; Walk Across TN; Jammin' Minute; before/after school running club programs; and Health and Fitness Parent Nights. There are also newsletters including Nutrition Nuggets, and Teen, Food and Fitness.

In the 2010-11 year, 17,647 students were screened for body mass index, and 3,870 or 21% were referred for additional help with weight problems. Students were also screened for blood pressure and those found to have abnormal readings were referred for further care.



Worksite Wellness

MEMPHIS BUSINESS GROUP ON HEALTH AND THE CDC'S NATIONAL HEALTHY WORKSITE INITIATIVE



Cristie Travis
CEO
Memphis Business Group on Health



Mary Cay Oyler
Project Director
Shelby County National Healthy Worksite Initiative

Several progressive employers in Memphis recognize that since workers spend at least 50% of their waking hours at work, worksite wellness should be a priority. Employers must take deliberate steps to create a culture of health by adopting and implementing policies and providing environmental and social supports to promote and support employee health.

Memphis Business Group on Health (MBGH) is a coalition of member employers sharing solutions and providing tools to manage the cost and quality of health benefits in an ever-changing environment. MBGH provided funding for the "Believe in a Healthy Memphis: 2011 Let's CHANGE Health Summit." It was organized by MBGH in collaboration with the Healthy Memphis Common Table and the Shelby County Health Department. The Summit identified two key strategies for 2012-2013: (1) Recruit employers to map out and promote the use of walking routes at the worksite; and (2) Recruit employers to offer healthy (or healthier) options in their cafeterias and vending machines. MBGH provides its members with tools and resources on healthy eating, active living and reduction of tobacco use.

The Center for Disease Control's (CDC) National Healthy Worksite Program selected Shelby County as one of eight locations across the country to assist employers of all sizes in building comprehensive workplace wellness programs. The program is designed to promote sustainable workplace health initiatives and organizational practices. An additional goal of the program is to promote peer to peer business mentoring as we help reduce the risk of chronic disease and improve overall health status.

The National Healthy Worksite Program is new to the community and welcomes all employers who are interested in improving the health of their employees.



Worksite Wellness Certification Programs

AHA START! FIT-FRIENDLY COMPANIES



Angela Royston
Manager
American Heart Association

Heart disease is the #1 killer in the U.S., and physical inactivity doubles the risk of heart disease. Through the American Heart Association (AHA) Start! Fit-Friendly Worksite program, employers and employees can lower the risk of heart disease at their companies. Studies suggest that with such a worksite physical activity program and promoting a culture of activity, an employer can increase productivity, reduce absenteeism, lower turnover and reduce health care costs.

Fit-Friendly Worksites can include:

- Walking routes for employees
- Promotion of walking programs and tracking tools
- Allowing staff to wear athletic shoes on designated "sneaker days"
- Healthy food options in cafeterias and vending machines.

To help companies get started, the AHA provides Fit-Friendly tools such as a Worksite Wellness Walking Program Kit which includes a coordinator's guide, window decal that promotes a company's participation, health message posters, walking route icons that direct employees along paths, mileage tracking tools, participant milestone and walking program promotional posters.

Several companies have already seen the value of this program. Fit Friendly companies in Shelby County include: Memphis Light, Gas & Water, Methodist Le Bonheur Healthcare, City of Germantown, General Electric Advanced Services Inc., City of Memphis, Pinnacle Airlines Corp., UT Health Science Center, Ring Container Technologies and Church Health Center and Baptist Memorial Hospital-Memphis.

Faith-Based Approaches

CHURCH HEALTH CENTER WELLNESS



Lisa Carson
Assistant Director
Church Health Center

The Church Health Center Wellness' Health Education - 4 Weeks to Wellness is its core program for those who want to lose weight or simply learn to take better care of their bodies. Participants are offered health-education classes, nutrition counseling, exercise plans, cooking classes and group meetings for long-term support and fellowship. They also learn how to develop and implement realistic lifestyle changes. Four weeks to Wellness combines exercise, education and nutrition resources into a specialized program to help

members achieve whole-person health.

Through learned healthy behaviors, community participants can prevent and manage obesity and diabetes and their consequences – such as hypertension and heart disease. Modest fees make programs very accessible to people who want to eat right and exercise more. Costs are supplemented by private donations, grants from independent funders and the faith community. The Church Health Center provides both exercise programming and nutrition education for people from ages six months to senior citizens. Cooking demonstrations are offered on most week days for developing skills for healthier eating. The Center has also started a farmers market to make healthy foods more accessible, and will be a stop for the Green Machine once it is operational.

Church Health Center Wellness is open to the entire community as a fee-based membership facility based on income, although many programs are offered free to the community. The Center is more than a place to learn and exercise. It is a place where members feel supported by each other. It is a community.



CHRIST COMMUNITY: MEMPHIS HEALTHY CHURCHES



Patria Johnson
Program Manager
Memphis Healthy Churches

Obesity is often the precursor of diabetes. Memphis Healthy Churches (MHC) targets African-American churches with health and wellness programs to educate the community. Church congregants learn how obesity and diabetes go hand in hand and lead to many problems -- disability, strokes, hypertension, heart disease, amputations and blindness. Congregants in nearly 150 African-American Churches in Memphis, East Arkansas and Northern Mississippi now learn about the importance of healthy eating and active living through MHC.

With funding from the Robert Wood Johnson Foundation, MHC has increased the number of MHC congregants who reported healthier behaviors, diet, exercise and health screenings. This success allowed MHC and Healthy Memphis Common Table to access a \$2 million grant from the Merck Foundation's Alliance to Reduce Disparities in Diabetes (ARDD) to help people with diabetes through improved lifestyles (Healthy Eating and Active Living), self-management and prevention of complications. The Diabetes For Life Program was implemented in 2009 and will run until 2014. It aims to impact some 500 African-American diabetics in Memphis.

As of 2012, Diabetes for Life has also helped 441 patients who receive coaching about healthy eating, active living, self-care and medical needs from their assigned medical practices and churches. DFL conducts quarterly learning collaboratives for providers to help them better treat their patients and shares best-practices information from other Merck ARDD participants to help find effective ways to tackle obesity and diabetes in underserved communities in Shelby County.



Community-Based Approaches

“WALKING IN MEMPHIS”



Tekeela Green
Public Health Coordinator
Shelby County Health
Department

As a part of the Tennessee Statewide Nutrition and Physical Activity Plan, members of the Let’s CHANGE Coalition were charged with creating and implementing an activity focusing on “Where We Play.” This group decided to use the built environment, in the form of parks and trails, to promote opportunities for physical activity.

Walking in Memphis is a community-wide walking activity for all residents of Memphis and Shelby County, which began with a kick-off Saturday, April 14, 2012 at 10 am.

The event took place at six City of Memphis community centers (Ed Rice, Glenview, Hickory Hill, Bert Ferguson, Douglass, and Westwood) and all participating YMCA’s. About 150 individuals attended the kick-off event.

This was a free and fun way to meet up with friends, family and neighbors and exercise. Walking in Memphis was designed to encourage and motivate residents to walk Saturday mornings or whenever convenient for them. Efforts to encourage the use of community centers, parks and trails as free opportunities for physical activity are consistently pursued.

Walking is a low-cost, convenient exercise. By encouraging residents to walk and providing the supportive environments like SAFE Zones, improved sidewalk infrastructure and emphasis on designing walkable neighborhoods, “Walking in Memphis” can become a success and make walking in Memphis the norm.



YMCA’S 5-2-1-0 INITIATIVE



Cynthia Magallon-Puljic
Vice President
YMCA of the Mid-South

Healthy eating is essential for a healthy life. Developed in 2003, the 5-2-1-0 healthy habits goals were recommended by the American Academy of Pediatricians and adopted by wellness programs across the U.S. The YMCA of Memphis & the Mid-South with many local partners now recommends

“5-2-1-0” every day:

- 5** servings of fruits and vegetables
- 2** hours or less of recreational screen time
- 1** hour or more of physical activity
- 0** sugary drinks, more water and low-fat milk

YMCA of the USA Pioneering Healthier Communities Initiatives is advancing the 5-2-1-0 messaging. The YMCA in Memphis has been a purveyor of this message since 2006.

The YMCA 5-2-1-0 initiative is endorsed by Let’s CHANGE. The Healthy Memphis Common Table (HMCT), YMCA, the UT Health Science Center and a core group of pediatricians developed a program that would address family obesity via a pilot project consisting of: (1) pediatricians who learn about the 5-2-1-0 intervention; prescribe diet and exercise; counsel select patients and refer them to the YMCA Youth and Family initiative; (2) Using the YMCA’s 12-week Youth and Family initiative to change nutrition and exercise behaviors and convey the 5-2-1-0 message and a subsidized period of Y membership after the 12-week program; (3) using UT faculty as advisors; and (4) HMCT’s assistance for financial sustainability. The program materials have been designed and current efforts are underway to fund the project and solicit additional support.

In addition to engaging the target families in pediatrician’s offices with the proposed pilot project, the Y utilizes varied opportunities to share its healthy eating and active living 5-2-1-0 message to specific audiences that include Latinos and Hispanics, African-Americans and other minorities.



Community-Based Approaches

GRIZZLIES HEALTHY HOME COURT



Teresa Dickerson
Director
Community Investment
The Memphis Grizzlies

The Memphis Grizzlies are among the most philanthropic teams in professional sports. With the help of the Grizzlies Charitable Foundation, the Memphis Grizzlies Community Investment function creates opportunities for area youth through extensive community outreach and programs.

The Grizzlies' Healthy Home Court program promotes healthy lifestyles through healthy food and regular exercise. The program emphasizes the importance of healthy breakfasts for high school students and family activities that promote

physical fitness. Healthy Home Court is connected with the Kellogg's Food Away from Home Program.

The Grizzlies organization has been an integral part of the Memphis community since it started in Memphis in 2001. Their youth mentoring, education programs and fitness initiatives have touched many children throughout the region, in addition to their support of St. Jude Children's Research Hospital.

Over 25,000 youth are served each year through the combined efforts of the Healthy Home Court, Grizzlies TEAM UP Youth Mentoring, the Grizzlies Read to Achieve program and St. Jude projects. According to National Basketball Association sources, the Foundation has contributed over \$24 million to local non-profit organizations with a focus on mentoring since December 2001. The Grizzlies' track record of community support earned the team and the Foundation the coveted international "Sports Team of the Year for the Beyond Sport Awards 2012" in London, England. The Grizzlies programs were among almost 300 nominated projects worldwide. The Grizzlies' Healthy Home Court initiative, presented by Kellogg's, was highlighted in this year's application. In 2007, the Grizzlies Foundation was honored with the Steve Patterson Award for Excellence in Sports Philanthropy by the Robert Wood Johnson Foundation and Sports.



GAMEDAY HEALTHY KIDS FOUNDATION



Leigh Fox
President
Gameday Healthy Kids
Foundation

Gameday Healthy Kids develops partnerships and programs to improve the health of youth in the Memphis area.

Programs of the Foundation are tied to activities such as baseball, softball, basketball, fitness and nutrition education. Programs focus on promoting wellness in families and reducing the incidence of obesity and chronic disease tied to obesity. The Foundation supports maintenance and operation of a youth baseball and softball facility, offers camps, training, leagues and tournaments to youth

to further the mission of providing healthy recreational opportunities to children. It impacts 150,000 players and families annually that attend events at the complex,

Gameday Healthy Kids has been instrumental in advocating for the inclusion of healthy choices such as fruit and salad to the concession offerings at First Tennessee Fields, a national baseball competition facility in East Memphis.

Gameday provides recreational opportunities for children who might not otherwise have the opportunity to travel outside of their neighborhoods. Through learning and playing sports youngsters are introduced to the importance of physical fitness, teamwork, sportsmanship and the importance of proper nutrition for life. Gameday Healthy Kids is a member of Let's CHANGE and continues to seek collaborative opportunities with various youth focused organizations in the area. Memphis Baseball Academy, Crossfit Kids, Fellowship of Christian Athletes and Penny's Fastbreak Courts are participating programs.

Community-Based Approaches

HEALTHY KIDS & TEENS CAMP GET FIT FOUNDATION



Clintonia Simmon
CEO
*Healthy Kids & Teens/Camp
Get Fit Foundation*

Healthy Kids & Teens, Inc. and Camp Get Fit (HKT/CGF) were established to fight childhood obesity by educating, motivating and assisting children to live healthier lives.

HKT/CGF has several programs for every age. They train educators about Get Fit and Live Healthy Programs for children (ages 2-19) ABC/123 Program (toddlers and preschoolers), aftercare school prevention programs and Witty Program (We're in this Together) for homeless students. The Camp Get Fit for All is designed for adolescents and disabled children. HKT/

CGF also offers an Intervention Program for Overweight & Obese Students and a Get Fit summer day camp. The organization's 2012 summer day camp made it possible for 70 campers to shed over 200 lbs collectively in eight weeks. HKT/CGF is a recognized fitness and nutrition training program and has trained the physical education staff of Memphis City Schools, Shelby County Schools and Metro Nashville Schools. Participating school employees received continuing education credit. The CEO, Clintonia Simmon, serves as the West Tennessee Coordinator for the CDC's Racial Ethnic & Health Disparities Action Institute (REHDAI).

HKT/CGF has provided fitness and nutrition training to over 15,000 kids, teens and others since 2006. They participate in over 50 community partnerships and have a state wide partnership with United Healthcare Community Plan. They also work with schools to increase physical activity time and train physical education professionals to use the HKT/CGF curriculum. Each year, Healthy Kids & Teens leads MCS and SCS districts in the "Walking School Bus" initiative, a strategy of the national Safe Routes to School program. Other events include the annual HKT Fight For Life Race Against Childhood Obesity which brings together over 1000 kids, teens and adults to participate in a day of festive play and physical activity.



LET'S MOVE IT MEMPHIS!



Sheila Fleming-Hunter
Founder and President
*Black Rose Foundation
for Children*

In 2011, the Black Rose Foundation for Children established "Let's Move It!" to raise the consciousness of the community about the threat of childhood obesity and to raise funds for local community programs to combat obesity through programming targeted to low income children. The initiative also seeks to get the Hip-Hop generation in Memphis involved through education and awareness activities.

In 2011, 30 youth in the New Chicago area of North Memphis were provided scholarships for

the First Tee of Memphis. They participated in a four-week program which uses golf as a medium to teach physical activity, life skills, character building and healthy living. In May 2012, the Foundation supported the Memphis City Schools "Let's Move!" initiative.

Nearly 300 children in the communities surrounding Halle, Crump and Melrose stadiums participated in physical activities and learned about the importance of healthy eating. The Foundation provided healthy snacks for the activity. Capacity building services for MINC of the Mid-South assisted the proposal writing for grants for anti-obesity programs with national and local organizations. As a result, the organization received support from the Southeast Dairy Industry Association to participate in the Nickelodeon Worldwide Day of Play at Caldwell-Guthrie Elementary School in North Memphis where more than 200 children learned healthy eating habits, participated in physical activity and were motivated to see play as a means of exercise that leads to good health. The Foundation has also partnered with a local Hip-Hop group, "The Breakfast Club," to assist in a healthy eating awareness campaign for young families in the Memphis community.

The Black Rose Foundation has invested nearly \$20,000 in cash and in-kind donations for programs to combat childhood obesity for more than 500 children in Memphis.



Community-Based Approaches

GREEN LEAF LEARNING FARM

Founded in early 2011, Green Leaf Learning Farm (GLLF) is a new educational agriculture program at Knowledge Quest.



Marlon Foster
Executive Director
Knowledge Quest
Green Leaf Learning Farm

After months of best-practice research, KQ has used its experience in community gardening and its “Health Quest” initiative to creatively develop a 2/3 acre urban farm that is used as an instrument for student education, community development and food security.

Green Leaf features both an after-school component and a summer camp. These programs introduce students to issues of health, justice, community and the environment through innovative, “action-reflection” curriculum. Because Green Leaf belongs to the community in

which it exists, raised growing beds allow neighbors to grow vegetables for themselves. The farm employs several community members to manage it, and the community is actively welcomed to participate in its daily activities. The vegetables grown increase food access in several ways. They contribute to the 125 meals served each day to participating youth in after-school programs and during our summer camp. A portion of the produce is sold at the nearby South Memphis Farmers’ Market. The food is also distributed to needy households and individuals through the in-house food pantry. Green Leaf has been certified by the USDA as a an organic farm.

Green Leaf hopes to impact the community by improving the knowledge of the students on health and nutrition; increasing the consumption of fruits and vegetables among its participants; producing 3,000 - 5,000 lbs of certified organic product; and installing an annual 25-50 raised bed gardens in the community.



*Ramin Homayouni, PhD
Lisa Klesges, PhD
and Ken Ward, PhD*

FIT KIDS

Research shows that many pediatricians are not fully aware of expert guidelines to address childhood obesity. Others cite barriers such as lack of training, limited time, competing demands and lack of familiarity with community resources. Thus, many pediatricians do not provide evidence-based assessments or interventions.

Clinical Decision Support Systems (CDSSs) have shown great promise to improve the delivery of expert guidelines in the care of adults. However, decision systems have not been appropriately developed and tested for pediatric obesity management. By improving upon an existing CDSS model HeartSmartKids, Fit Kids aims to develop comprehensive modules that provide tailored recommendations based on a child and family's motivational, social and geographical characteristics. GIS (Geographical Information System) mapping will be used to identify community resources convenient to families. This information will be used to assist pediatricians in providing brief, tailored interventions. This work will lay the foundation for linking this newly developed clinical decision system with existing electronic medical record (EMR) systems. The long-term goal is to create an efficient and easy-to-use system that will allow the integration of social, behavioral and GIS data collected from the parent and child, with biomedical data from the EMR. These tools will identify obese and at-risk children and generate individualized prevention and treatment plans based on best practices.

Goals

- Develop and test a novel web-based mobile Clinical Decision Support System (CDSS) to assist pediatricians and wellness professionals in implementing childhood obesity assessments and intervention programs.
- Sample size: 10 pediatric practices that have established relationships with the University of Memphis School of Public Health.
- Outcomes collected: qualitative data (clinic burden, ease of use, quality of information provided, how the data were used, and recommendations for refinement, etc.) from the practices (pediatricians, office staff, children and parents).



*Sato Ashida, PhD
Natalie Williams, PhD*

SOCIAL NETWORKS OF FIRST-TIME AND EXPECTANT MOTHERS

Obesity is a big public health concern that affects very young children. Rapid growth before two years of age is associated with a two- to three-fold increase in the risk of being overweight late in life. Racial/ethnic minority infants with rapid weight gain are at the greatest risk for later obesity. Over 60% of the population of Memphis is African American. The prevalence of overweight and obesity among Memphis youth is much higher than the U.S. average (31.9% vs. 27.8%).

It is widely recognized that weight status tends to track from childhood through adolescence and into adulthood. Early and primary prevention of obesity is of critical importance. Aside from genetic factors, infant feeding practices (e.g., no or short breastfeeding, adding cereal in infant bottles and complementary foods prior to four months of age) may also result in steeper infant growth trajectories. Maternal feeding practices are influenced by the knowledge and attitudes of mothers' family and friends.

Previous interventions targeted family members such as grandmothers and fathers. Other people (e.g., sisters and friends) may be more important to how new mothers feed their infants. Influential members may also differ depending on cultural contexts (e.g., close friends for African-Americans, or partners for Caucasian women).

Systematic studies to evaluate the social networks surrounding infant feeding practices are needed to understand infant feeding practices among minority women in the Memphis area whose infants are at higher risk of becoming obese.

Goals

- Pilot test social network assessment tools. Evaluate social contexts surrounding infant feeding practices. Obtain preliminary information to develop network-based interventions to facilitate optimal feeding practices among new African-American mothers in Memphis. (1) Characterize the mothers' networks, (2) Identify members who play important roles in infant feeding practices, and (3) Identify network and relational factors affecting infant feeding beliefs and practices.
- Target population for enrollment: Adult mothers, between 18 and 39 years, with a child under 12 months of age and pregnant women, between 18 and 39 years, who are expecting their first child.
- Sample size: 50 first-time mothers and 50 pregnant women expecting their first child.



Gail Beeman, MD
Marion Hare, MD, MS

RECOGNIZING OVERWEIGHT AND OBESITY IN A RESIDENT PRIMARY CARE CLINIC

Rates of childhood overweight and obesity continue to increase despite the health community's and public's acknowledgement of the problem. Five years ago, a similar study at the UT Health Science Center's pediatric resident practice clinic showed that parents, nurses and physicians underestimate childhood overweight by appearance.

This current study will replicate the former study to see if parents, nurses, and physicians are more or less likely to underestimate BMI by using only the appearance of the children and if the rates of misclassification have changed. Parents, nurses and resident physicians will fill out a short survey on paper asking them to classify each patient's BMI. Parents will also provide information regarding breastfeeding. Next, an initial routine well-child care procedure will be conducted to compare the visual assessments: charting height and weight on appropriate graphs, calculating BMI and discussing childhood issues.

Goals

- To evaluate the diagnosis of overweight and obesity based on appearance compared to overweight and obesity as defined by body mass index (BMI).
- To determine the rate of breastfeeding and how it corresponds to obesity rates.
- Target population for enrollment: children two to 18 years, their parents, clinic nurses and clinical staff residents who attend the UT Le Bonheur Pediatric Specialists (ULPS) Pediatric Primary Care Clinic.
- Sample size: about 200 children were assessed.



Marion Hare, MD, MS

TEAM PLAY (POSITIVE LIFESTYLES FOR ACTIVE YOUNGSTERS)

The Team PLAY intervention focused on behavior change that would facilitate healthy eating patterns and increases in physical activity to slow the rate of weight gain or promote weight maintenance. It was hypothesized that lifestyle changes formed during the intervention would result in a big decrease in children's BMI at two years after enrollment, as compared to changes in BMI from the usual care by primary care providers for childhood overweight and obesity.

Secondary aims included (a) Examining changes in children's fat-free mass, waist circumference, dietary intake, physical activity, body esteem, child adjustment and parental perception of health provider's support of their children's food choices and physical activity behaviors, (b) Evaluating the effect of the intervention on family functioning and parent's BMI and waist circumference and (c) Examining psychosocial measures as potential predictors, mediators, and moderators of change in the BMI, dietary and physical activity behaviors.

Goals

The Team PLAY trial was designed to determine if a six month moderately intense, family-based behavioral intervention, targeting both child and parent is superior to standard primary care in promoting healthy weight change in young overweight or obese children ages four to seven years.

- Target population/Enrollment criteria- children ages 4-7 years
- Sample size- 270 children and parent dyads
- Recruitment status- closed
- Outcomes collected- data collection completed March 2012, evaluation - pending
- A number of project-related publications have been released to date.



Barbara McClanahan, PhD, Shelly Stockton, PhD and Ken Ware, PhD

THE USE OF COMMUNITY BASED PARTICIPATORY RESEARCH TO PROMOTE ACTIVITY-FRIENDLY NEIGHBORHOODS

Several features of the built environment contribute to the epidemics of physical inactivity and obesity in the U.S. Activity-friendly environments is very important to public health.

The collaborations among public health professionals, transportation engineers and government officials is needed to understand relationships between the built environment and participation in physical activity. Officials can then offer guidelines and recommendations for policy changes which will lead to the development of activity-friendly environments

Goals

The specific aims of this project are (1) To create a working partnership among stakeholders (land developers, home builders, realtors, home buyers, policy makers and public health professionals) aimed at deepening understandings of environmental structures and land development practices as potential determinants or barriers to participation in physical activity; (2) To conduct an exploratory, qualitative assessment of local stakeholder groups using a town hall meeting model to identify variables that mediate progress toward activity-friendly building and land development (3) To define local priorities and perspectives in an action agenda focused on the creation of an activity-friendly environment; and (4) To conduct a consortium where interdisciplinary task forces will commit to work toward the realization of prioritized action-agenda items. .

This project will document challenges, barriers, and successes in order to inform other public health researchers, professionals and community leaders in efforts to build community capacity to create activity-friendly neighborhoods and healthy communities. The University of Memphis Health Sport Science investigators will encourage the building of community coalitions to promote "activity friendly" developments.



John M. Amis, PhD and Hugh Ferry, MSc

IMPLEMENTING CHILDHOOD OBESITY POLICY IN A NEW EDUCATIONAL ENVIRONMENT

This research and a June 2012 article in The Journal of Public Health resulted from the collaboration among investigators from the University of Memphis Departments of Management in the Fogelman College of Business and Health and Sports Sciences, along with the University of Auckland and Mississippi State.

The purpose was to investigate challenges in implementing three state-level, school-oriented childhood obesity policies between 2004 and 2007. Investigators discovered significant barriers to implementation of approved policies. Despite legislation, laws had little effect on the levels of PE participation, especially among older students. Among barriers were values that prioritized performance in standardized tests over physical education. Additional hurdles included resource restraints and overloading of school administrators with new policies.

Authors concluded that obesity-related policies must be tied to mainstream educational initiatives that both encourage and hold accountable all school-level officials and individuals responsible for implementation. Additionally, PE teachers must be held accountable for delivering a balanced PE curriculum that appeals and is available to a broad array of students.



F AS IN FAT: HOW OBESITY THREATENS AMERICA'S FUTURE 2012

Childhood Obesity: What's At Stake

CHILDHOOD OBESITY: WHAT'S AT STAKE

Childhood obesity rates have climbed dramatically in the past 30 years. In 1980, the obesity rate for children ages 6 to 11 was 6.5 percent. By 2008, the rate grew to 19.6 percent. And, in 1980, 5 percent of teens ages 12 to 19 were obese. That rate climbed to 17 percent (approximately 12.5 million children and teens) by 2010.¹⁰

This change is having a major impact on the health of children and youths. If we don't reverse the epidemic, the current generation of young people could be the first in U.S. history to live sicker and die younger than their parents' generation. Nearly one-third of children and teens are currently obese or overweight, which is putting them at higher risks for developing a range of diseases and developing them earlier in life.¹¹

Children who are obese are more than twice as likely to die before the age of 55 as children whose BMI is in the healthy range.¹² Around 70 percent of obese youths have at least one additional risk factor for cardiovascular disease, such as elevated total cholesterol, triglycerides, insulin or blood pressure.¹³ Overweight and obese children and teens also are at higher risk for other health conditions, including asthma and sleep-disordered breathing.^{14, 15} Children who are obese after the age of 6 are 50 percent more likely to be obese as adults, and among overweight tweens and teens ages 10 to 15, 80 percent were obese at age 25.^{16, 17}

Being obese or overweight also can have a major social and emotional impact on children and youths. For instance, studies have found that overweight and obese children and teens face a higher risk for more severe and frequent bullying, are rejected by their peers more often, are

chosen less as friends and are generally not as well-liked as healthy-weight children. Studies also have found that weight-based teasing is related to increased susceptibility to depression.^{18, 19, 20}

Reducing and preventing childhood obesity is critical to improving the future health of the country, and consequently would help to lower health care costs and improve productivity. What's more, research supports the concept that focusing on children and getting them on a healthy path early in life is one of the areas where the greatest successes can be achieved.

For instance, a recent study from the *American Journal of Preventive Medicine* found that eliminating just 41 calories a day per person could halt rising body weight trends in children and teens ages 2 to 19, and eliminating 161 calories per day per person could reduce childhood obesity to 5 percent by 2020.²¹ Researchers have created a tool to help estimate the impact of nutrition or physical activity interventions on specific populations. The tool is available at <http://caloriccalculator.org>.

Programs around the country are helping to change our culture to encourage healthier nutrition and increased physical activity. Some areas where there have been concerted efforts to prevent and reduce childhood obesity are demonstrating promising results. Initiatives ranging from Let's Move to the Alliance for a Healthier Generation to the Y are all having an impact and leading to positive change.

Reversing the childhood obesity crisis is at the core of the future health and wealth of the country. The evidence shows that the goal is achievable, but only if there is a sufficient investment in effective programs and policies.

*Excerpt from "F as in Fat" report written by the Trust for America's Health and funded by the Robert Wood Johnson Foundation. Citations can be found in the endnotes section on page 114 of the report.

F AS IN FAT REPORT 2012

Major Findings

F AS IN FAT 2012 MAJOR FINDINGS

In August 2012, the Centers for Disease Control and Prevention released the latest rates of adult obesity in the United States. In 2011:

- Twelve states had an adult obesity rate above 30 percent.
- Mississippi had the highest rate of obesity at 34.9 percent, while Colorado had the lowest rate at 20.7 percent.
- Twenty-six of the 30 states with the highest obesity rates are in the Midwest and South.
- All 10 of the states with the highest rates of type 2 diabetes and hypertension are in the South.

TWO FUTURES FOR AMERICA'S HEALTH: PROJECTIONS FOR OBESITY, DISEASES AND COSTS

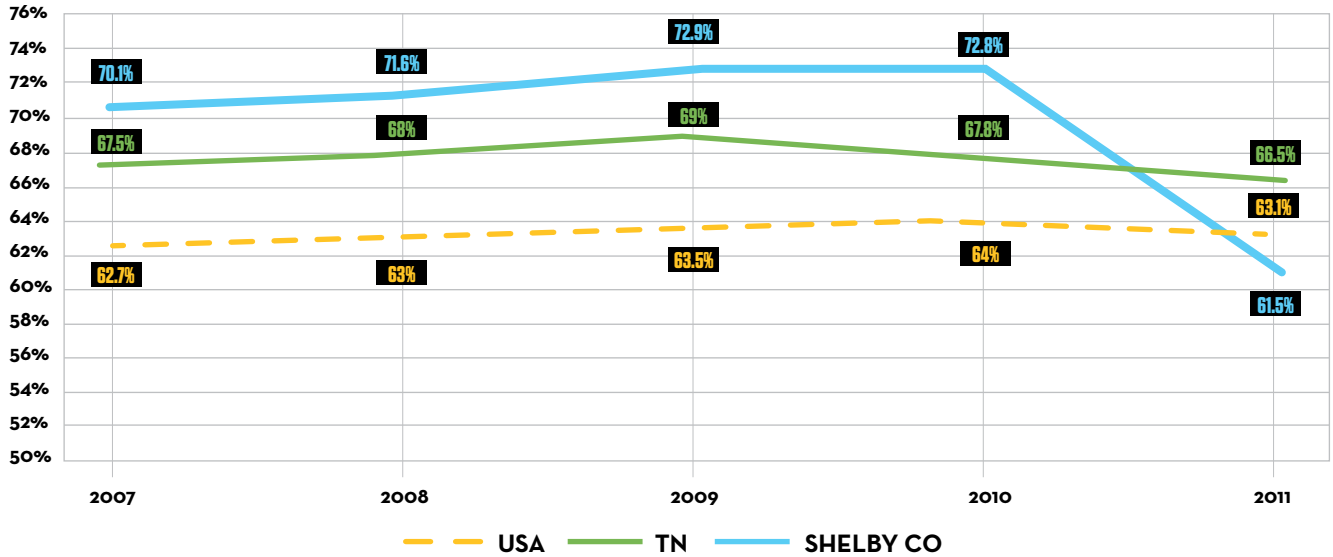
The new analysis commissioned by TFAH and RWJF, and conducted by the National Heart Forum (NHF) was based on a peer-reviewed model published in *The Lancet*. The analysis includes projections for potential rates of obesity, health problems and health care costs in the year 2030 if current trends continued, and it examined how reducing the average body mass index (BMI) in the state by 5 percent could lower obesity rates and decrease costs.²²

	2030: Obesity on Current Track	2030: BMI Reduced by 5 Percent
Obesity Rates	<ul style="list-style-type: none"> ■ More than 60 percent of people could be obese in 13 states; ■ More than half of people could be obese in 39 states; ■ In all 50 states, more than 44 percent of people could be obese. 	<ul style="list-style-type: none"> ■ No state would have an obesity rate above 60 percent; ■ More than half of people would be obese in 24 states; ■ Two states would have obesity rates under 40 percent.
Obesity-Related Disease Rates	<p>By 2030, for every 100,000 people, the number of new Americans who could develop the five top diseases associated with obesity could range from:</p> <ul style="list-style-type: none"> ■ Between 8,658 in Utah to 15,208 in West Virginia (average for all states: 12,127) for new cases of type 2 diabetes ■ Between 16,730 in Utah to 35,519 in West Virginia (average for all states: 26,573) for new cases of coronary heart disease and stroke ■ Between 17,790 in Utah to 30,508 in Maine (average for all states: 24,923) for new cases of hypertension ■ Between 12,504 in Utah to 18,725 in Maine (average for all states: 16,152) for new cases of arthritis ■ Between 2,468 in Utah to 4,897 in Maine (average for all states: 3,781) for new cases of obesity-related cancer 	<p>Thousands of cases of type 2 diabetes, coronary heart disease and stroke, hypertension and arthritis could be avoided in all states;</p> <p>More than 100 cases of obesity-related cancer per 100,000 people could be prevented in all states;</p> <p>States could avoid — per 100,000 people:</p> <ul style="list-style-type: none"> ■ Between 1,810 and 3,213 new cases of type 2 diabetes ■ Between 1,427 and 2,512 new cases of hypertension ■ Between 1,339 and 2,898 new cases of coronary heart disease and stroke ■ Between 849 and 1,382 new cases of arthritis ■ Between 101 and 277 new cases of cancer.
Obesity-Related Health Care Costs	<ul style="list-style-type: none"> ■ Nine states could see increases of more than 20 percent; ■ 16 states and Washington, D.C., could expect increases between 15-20 percent; ■ 18 states could expect increases between 10-15 percent; ■ Only seven states could have increases lower than 10 percent. 	<ul style="list-style-type: none"> ■ Every state except Florida would save between 6.5 and 7.8 percent on obesity-related health costs compared with 2030 projected costs if rates continue to increase at their current pace. (Florida would save 2.1 percent).

*Excerpt from "F as in Fat report" written by the Trust for America's Health and funded by the Robert Wood Johnson Foundation

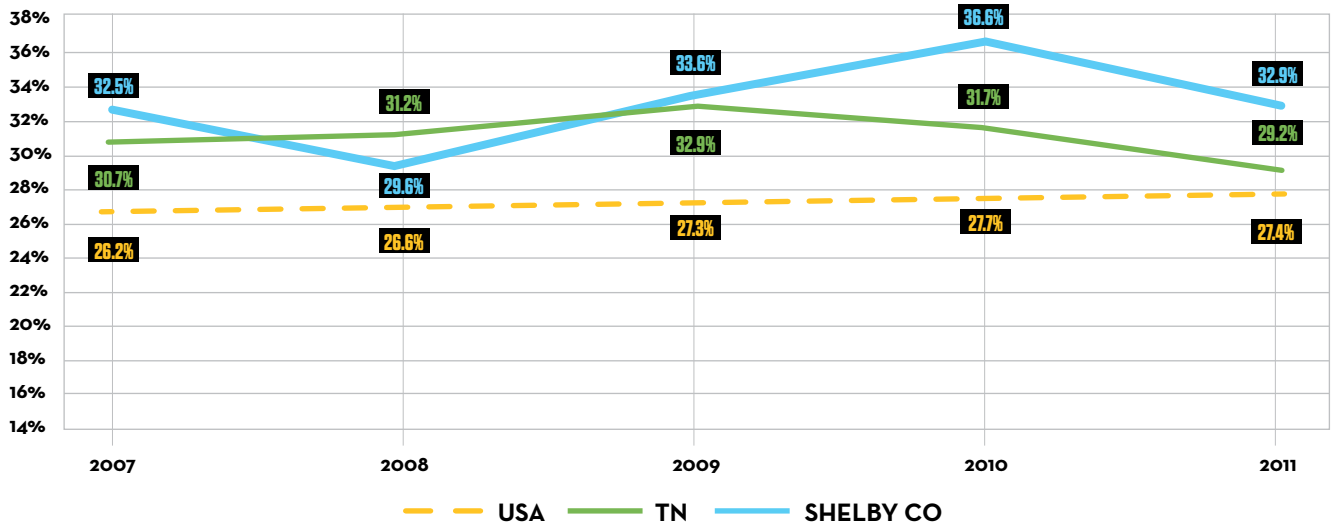
TENNESSEE OBESITY DATA

OVERWEIGHT PREVALENCE 2007-2011 • US, SHELBY COUNTY, AND TN



US AND TN OVERWEIGHT RATES DROPPED BY COMPARABLE AMOUNTS FROM 2010 AND 2011. TN IS ON STEADY DECLINE OVER PAST TWO YEARS.

OBESITY PREVALENCE 2007-2011 • US, SHELBY COUNTY, AND TN

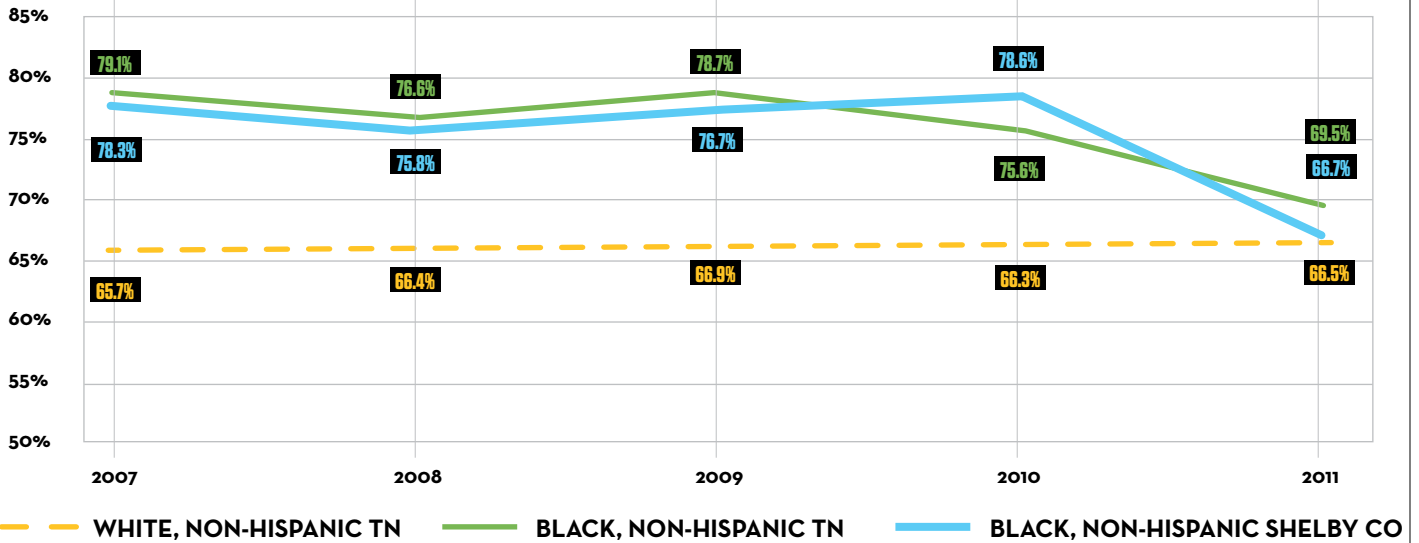


SHARP DECLINE IN TN OBESITY RATE FROM 2009 TO 2011, WHEREAS US TREND LEVELS OFF BETWEEN 2009 AND 2011. THE GAP BETWEEN US AND TN HAS NARROWED DRAMATICALLY IN LAST THREE YEARS.

*GRAPHS HAVE BEEN ALTERED FROM THEIR ORIGINAL FORM TO INCLUDE SHELBY COUNTY OVERWEIGHT PREVALENCE AND OBESITY DATA. DATA PROVIDED BY THE TENNESSEE OBESITY TASKFORCE, 1997-2011 BRFSS DATA & 2001-2011 YRBSS DATA

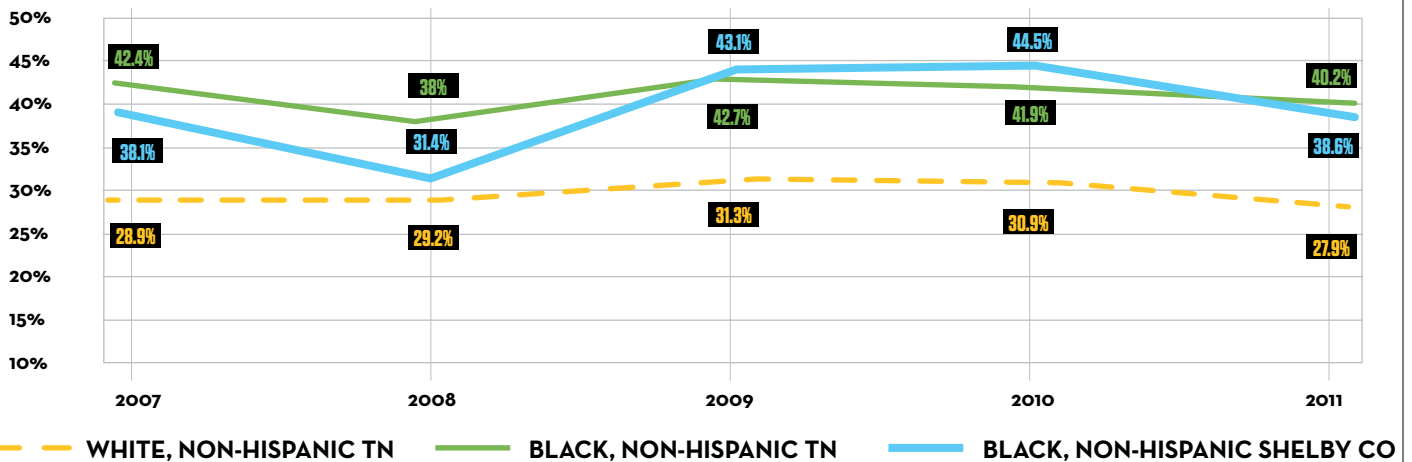
TENNESSEE OBESITY DATA

TN AND SHELBY COUNTY OVERWEIGHT PREVALENCE: RACE • 2007-2011



SHARP DECLINE IN AFRICAN AMERICAN OVERWEIGHT PREVALENCE FROM 2009 TO 2011, WHILE WHITE, NON-HISPANIC RATES HOVER AT BETWEEN 66 AND 67%. THESE ARE STILL VERY HIGH, BUT THE DOWNWARD TREND AMONG AFRICAN AMERICANS SHOWS THE GAP IS NARROWING BETWEEN TWO RACES. FROM THE HIGH OF 79% IN 2007, THE RATE OF OVERWEIGHT IN AFRICAN AMERICANS HAS GONE DOWN BY NEARLY 10%. IN SHELBY COUNTY, THERE IS SHARP DECLINE IN AFRICAN AMERICAN OVERWEIGHT PREVALENCE FROM 2009 TO 201. ALTHOUGH, THESE NUMBERS ARE STILL VERY HIGH, THE DOWNWARD TREND IS ENCOURAGING.

SHELBY COUNTY AND TN OBESITY PREVALENCE: RACE • 2007-2011



THERE STILL CONTINUES TO BE A LARGE DISPARITY ALTHOUGH THE RATES AMONG BOTH RACES HAVE STEADILY DECLINED FROM 2009 TO 2011.

*GRAPHS HAVE BEEN ALTERED FROM THEIR ORIGINAL FORM TO INCLUDE SHELBY COUNTY OVERWEIGHT PREVALENCE AND OBESITY DATA. DATA PROVIDED BY THE TENNESSEE OBESITY TASKFORCE, 1997-2011

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