

# BLUE SPRING 2010 CORNERSTONE<sup>SM</sup>

supporting health improvement in our communities

The Wellmark Foundation's goal for its philanthropy is to be a catalyst that brings groups together within a community to impact health improvement.

## 2010 Healthy Communities Grant Program

The Wellmark Foundation's funding efforts in 2010 will continue to focus on improving the health of communities in Iowa and South Dakota through prevention efforts. Specifically, our funding will strive to facilitate programs targeting childhood obesity prevention initiatives, and community-based wellness and prevention. Though all facets of prevention are important to address, we predominantly seek to support primary prevention efforts with our support.

The 2010 Healthy Communities Grant Program and Request for Proposals (RFP) will again utilize a Letter of Interest (LOI) as the first step in our application process. The LOIs are due **August 25, 2010**. The RFP will represent our sole funding opportunity for new project support in 2010.

An optional toll-free teleconference call will be offered from 10:00 a.m. to 11:30 a.m. on **Wednesday, May 26, 2010** to allow prospective grant applicants the ability to 1) learn more about our approach to project support in 2010, and 2) have direct access to ask Wellmark Foundation staff questions related to the application process in order to best position their proposed project concept(s). Specific conference call-in numbers are offered below:

**Teleconference Call-in Number: 888-831-4303**

**Participant Pass Code: 2904354**

Pre-registration is not needed to take part in the call or receive the call-in instructions. As always, potential grant applicants are also invited to contact Wellmark Foundation staff directly to ask specific questions related to individual proposal ideas.

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Please check [www.wellmark.com/foundation](http://www.wellmark.com/foundation) for all information and tools necessary to guide application development.



# Sharing the Work of Our Active Grantees

The following information highlights active grantee projects funded by The Wellmark Foundation since we adopted a philanthropic focus on childhood obesity prevention two years ago. This snapshot captures a summary of these projects, and is designed to stimulate thought on what could be done in your community through your own grant projects.

## Childhood Obesity Prevention

Organization	Primary Focus	Setting	Population/Community
<b>Trinity Health Foundation (IA)</b>	Physical activity, reducing screen viewing time, better nutrition choices, and weight loss	Schools, YMCA, and health care	Fort Dodge public and private schools - elementary and middle school students and their families
<b>Healthy Henry County Communities (IA)</b>	Community-based physical activity and nutrition programming; minority outreach	Schools, home, child care, youth service organizations, and community settings	Henry County youth and families; special outreach to Hispanic populations
<b>Des Moines Independent School District (IA)</b>	Improved physical activity and nutrition choices through fitness arcade, which is available during and after school	School	Des Moines middle school - 6th - 8th grade students
<b>Iowa Health Foundation (IA)</b>	Improved physical activity and nutrition in after-school programs via CATCH program	After-school setting	West Des Moines and Perry - elementary school after-school programs
<b>South Dakota Department of Health (SD)</b>	Training of child care providers to improve preschoolers' physical activity and nutrition	Child care	Statewide South Dakota - child care providers of preschool children and their families
<b>Iowa State University (IA)</b>	Improved nutrition and food access; assess and improve competitive foods selection in schools	Schools	6 primarily rural school districts (3 control); state nutrition policy role
<b>University of Iowa Foundation (IA)</b>	Improved nutrition through better concession stand food selections at sporting events	Schools and youth service organizations	Muscatine area



Progress To Date	Future Tools	Lessons and Impact To Date
<p>Curriculum implemented for Kindergarten, 3rd, 5th, and 7th grades. K - 22% increase in understanding of food pyramid; 5th - 13% increase in knowing ways to exercise; 7th - 20% increase in ability to ask adult to purchase fruits and vegetables.</p>	<p>Curriculum and social marketing materials.</p>	<p>Collaboration with school administration and personnel is critical. Multi-pronged initiatives are becoming part of the culture of participating schools, which should translate well to sustainability. University of Iowa College of Public Health evaluation is advancing.</p>
<p>Enhanced Pick A Better Snack and social marketing e-newsletter has 120+ subscribers. 2008 to 2009 comparison of Henry County K-8 students at risk for overweight and obesity remained level.</p>	<p>Event planning guide, curriculum, and social marketing materials.</p>	<p>Competitions interest middle school youth. Goal of sustainable healthy behavior, including embedding healthy habits early and breaking unhealthy habits early via fun/engaging activities is progressing.</p>
<p>Arcade placed and in use for daily PE, after school two nights per week, and one family night per week. Student assessments performed.</p>	<p>Amount of equipment necessary for size of student population, cardiovascular results of specific equipment. PE4life precursor.</p>	<p>Bikes and DDR machines achieve heart rate goals, XR boards do not, and Wii machines only do if active between turns. Serves role with physically disabled students. Family nights are not as well attended.</p>
<p>CATCH after-school program implemented in ten after-school sites reaching 1,100 underserved youth. Will strive to reach 1,034 additional youth next year.</p>	<p>Implementation process for other after-school programs. Verification of CATCH as a successful, national model. <a href="http://www.blankchildrens.org/allkidshealthy">www.blankchildrens.org/allkidshealthy</a>.</p>	<p>Outline for school programs to maximize use of CATCH model via a participation expectation document is emerging as a necessary/useful step. Leveraged Prairie Meadows funding to expand to additional sites in Des Moines, Perry, and Waukee.</p>
<p>Program materials updated. Distribution system implemented. 184 day care providers trained to date.</p>	<p>Program materials.</p>	<p>Strong interest in consultant training. Training protocols are a necessity for consistency in learning opportunities. Materials utilized within the project are highlighted by national Food Research and Action Center on their suggested resources for effective child care food programs.</p>
<p>Assessment of availability of competitive foods completed. Social marketing messaging implemented. Initial best practice competitive foods list generated.</p>	<p>List of best practice competitive foods, social marketing messages. Abstract accepted for 2009 Food and Nutrition Conference and Exhibition of the American Dietetic Association.</p>	<p>Webinar on Healthy Kids Act nutrition standards and list of 1,200 items was analyzed for food meeting 'best practices' nutrition guidelines to assist Healthy Kids Act nutrition advisory panel in development of state nutrition standards. Health literacy messages for competitive food venues developed for nine months and have been provided to intervention schools. Very transferable to other school settings after evaluation.</p>
<p>Student and parent preferences surveyed. Ten new food items that were added to the concession stand, including pretzels, chicken, pickles, string cheese, and carrots, sell and compete well. Items are being evaluated for fall sports season success.</p>	<p>Graphic designers built advertising materials in a template format. How-to guide is being built.</p>	<p>Distributors are unlikely to know nutrition information. Distribution channels are difficult to maneuver. Foods must be easy to prepare by volunteers. Project invited to share poster/findings at Iowa Governor's Conference on Public Health in 4/10.</p>

## Childhood Obesity Prevention

Organization	Primary Focus	Setting	Population/Community	Progress To Date
<b>Iowa Department of Public Health (IA)</b>	BMI surveillance of 3rd grade students	Schools	Statewide Iowa - 3rd graders in 24 pilot schools (12 urban, 12 rural)	I-Smile Coordinators and schools were recruited. I-Smile Coordinator training was planned and equipment was purchased.
<b>Youth &amp; Family Services, Inc. (SD)</b>	I Am Moving, I Am Learning (IMIL) tool with youth service organizational settings	Youth service organizations	Western South Dakota - 2,000 children enrolled in YFS's direct service programs	Staff training on the I Am Moving, I Am Learning philosophy/curricula has reached 116 persons from Rapid City Prenatal to Five Head Start, Girls Incorporated, Health Connections, and Rural Prenatal to Five Head Start.
<b>Burgess Foundation (IA)</b>	Promoting lifelong physical activity and healthy daily habits among children	Schools, youth service organizations, and community coalition	Monona County area - West Monona School District and community coalition	All school districts involved with the grant are advancing the resources to help support the academic and health goals of students. Promotion of new equipment highlighted in the <i>Sioux City Journal</i> .
<b>Iowa Department of Education (IA)</b>	Promoting training, model policy, and capacity-building activities around the Healthy Kids Act (HKA)	Schools and school infrastructure organizations throughout Iowa	Statewide Iowa	More than 1,300 school officials are being trained around nutritional components of HKA through combination of a series of six face-to-face regional trainings in 2/10, and an ICN training session in 12/09.
<b>Lee County Health Department (IA)</b>	Improved physical activity and nutrition in school settings by spread of CATCH model	School districts, partnering service organizations, and local public health/coalition	Lee County - multiple school districts	Each participating school principal had different ideas on how Lee County Health Department could meet and train their K-5 elementary teachers to begin CATCH implementation. The project is progressing well on multiple fronts.
<b>Education Resource Center of South Dakota (SD)</b>	K-3 multi media approaches in science, math, and language arts; <a href="http://www.healthedventure.org">www.healthedventure.org</a>	K-3 grade classes throughout South Dakota; to reach 4,000 kids	Statewide South Dakota	Project is embedded in 186 classrooms, with 70 schools and 3,955 students participating.
<b>Buchanan County Health Trust (IA)</b>	Educate preschool children and adult role models to adopt healthy habits for life	Preschools - teachers, students, and parents	Buchanan County	105 preschoolers are actively engaged in determining fruit and vegetable recognition and demonstrate specific physical activity knowledge.



## Task Force Recommends Obesity Screening of Children

Based on new evidence that children can be effectively treated for obesity, the U.S. Preventive Services Task Force recommends that clinicians screen children ages 6 to 18 years for obesity and refer them to programs to improve their weight status. The recommendations are explained in the special article, "Screening for Obesity in Children and Adolescents: U.S. Preventive Services Task Force Recommendation Statement," which appeared in the February issue of **Pediatrics** (online January 18, 2010). The task force reviewed 20 clinical trials of behavioral and pharmacologic interventions for obesity and found comprehensive, intense programs are effective at helping children improve their body mass index (BMI).

Internet Citation: *Screening for Obesity in Children and Adolescents, Topic Page.* January 2010. U.S. Preventive Services Task Force. Agency for Healthcare Research and Quality, Rockville, MD. <http://www.ahrq.gov/clinic/uspstf/uspstfobes.htm>.

### Future Tools

BMI surveillance process and training is critical. Integrating with existing (oral) health staff in school settings is necessary.

Increased physical activity and family nutrition. Modified YFS policies. Curriculum use in South Dakota.

Planned expansion to other Monona County school districts.

Our role in assisting another organizations with needed technical assistance around the successful adoption of state policy is an exciting effort. This training and capacity building may not be happening without this grant support.

Role of local public health department (rural) can assist schools to adopt health promotion practices around nutrition and physical activity enhancement.

There are many tools at [www.healthyedventure.org](http://www.healthyedventure.org) that could be spread and used by others.

Model for a rural, community intervention around preschool and family engagement.

### Lessons and Impact To Date

Strong interest from I-Smile Coordinators and use of these coordinators as an important link in future health projects. Seamless engagement of school nurses is also emerging as a component of project sustainability after the grant.

Project is confirming the IMIL approach and applicability in Head Start environments. Goal in upcoming year is to identify and target 3-year-old children with elevated BMIs and strategically apply IMIL approach at YFS and in family and home settings. Community engagement with Pioneering Healthier Communities in the Rapid City area around a community plan for creating a community that is physically active, nutrition minded, and wellness focused.

Community partnership has expanded into areas beyond the initial Got 2 Move project and serves as a catalyst to bring community groups together across other health planning and program implementation. Onawa Chamber of Commerce and Women's Club engagement is positive from a community health planning perspective.

Iowa State University created an on-line nutrition calculator to assist schools assess nutritional values. Model school wellness policy language for school districts to adopt in compliance with HKA is a needed tool.

Full adoption of CATCH in a school setting takes more than 12-months/one academic year.

Earlier school engagement and delivery going into the academic year will make for better uptake and adoption of programming.

The work is progressing ahead of schedule. Young children begin to put trust in adult role models very quickly. After spending nearly every week with the preschoolers for six months, a strong rapport has been developed.

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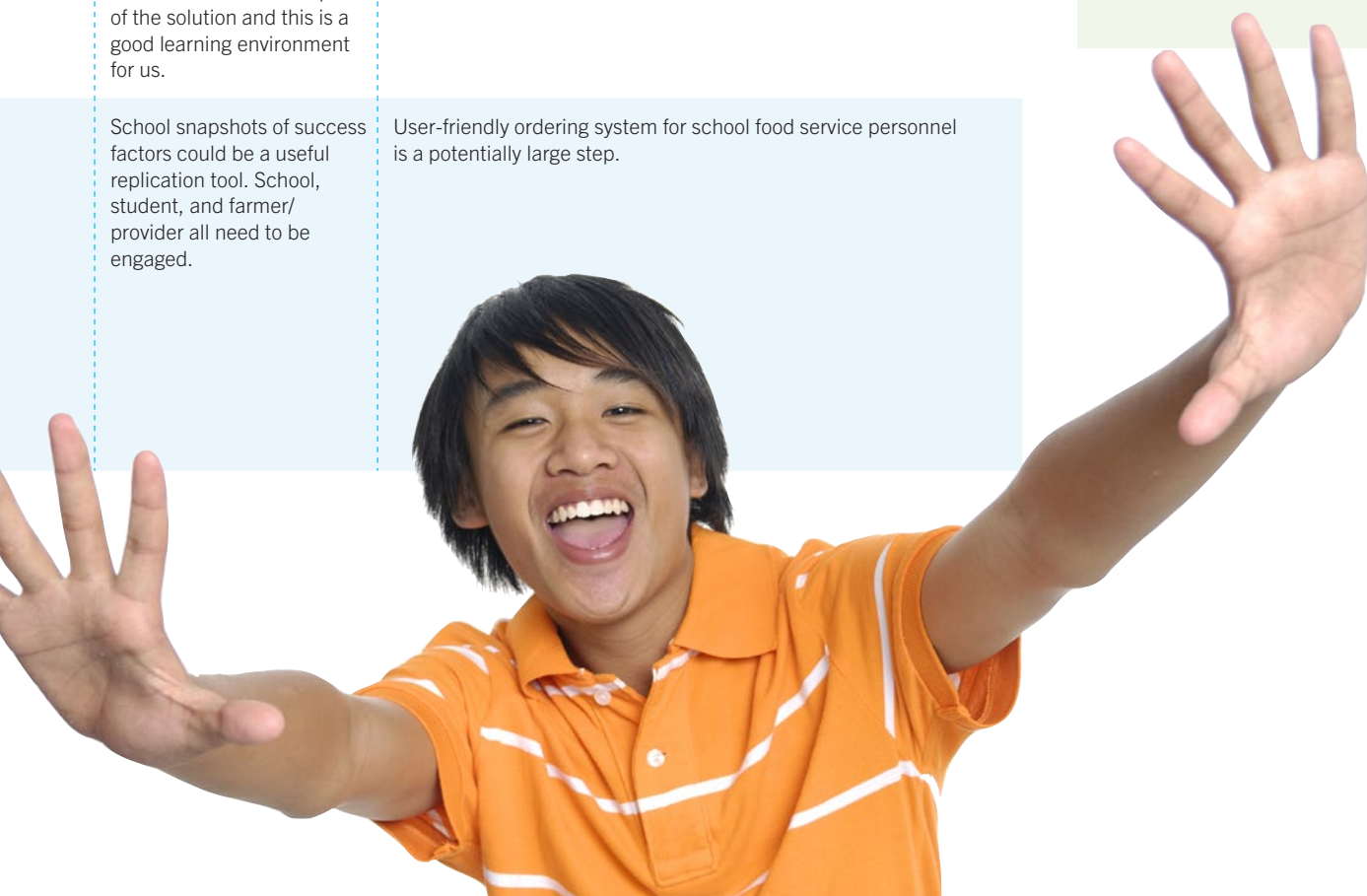
## Childhood Obesity Prevention

Organization	Primary Focus	Setting	Population/Community	Progress To Date
<b>Iowa State University Extension - Union County (IA)</b>	Nutrition social marketing effort focused on child care providers	Day care providers, community nutrition coalition, and extension	Primarily Union County	Child and Adult Care Food Program participants are good targets for children nutrition interventions.
<b>South Dakota State University (SD)</b>	Food security and healthy eating behaviors of elementary children in extremely low income families	Schools, state-wide extension, and community coalition	Statewide South Dakota	Project successful in addressing food insecurity over the weekend in rural, remote, low-income American Indian populations. Strategies of home food preparation are also successful.
<b>Cerro Gordo County Department of Public Health (IA)</b>	Promoting lifelong physical activity and healthy daily habits among children	Preschools - teachers, students, and parents	Cerro Gordo County area preschools (3)	Animal Trackers curriculum incorporates an average of 10 more minutes per day of physical activity in the child care setting and 12 more minutes at home. The program also encourages gross motor skill development.
<b>Clinton Community School District (IA)</b>	Promoting lifelong physical activity and healthy habits of children via individual, family, and community approaches	Schools, youth service organizations, community coalition	Clinton community-wide approach to healthy community	Participating students are working towards the goals and objectives as listed in the grant. Project leaders are also very pleased about their enthusiasm and decrease in negative behaviors as secondary benefits not originally anticipated.
<b>Pathfinders Resource Conservation and Development, Inc. (IA)</b>	Youth acceptance and demand for locally sourced foods; farm-to-school market development for healthier foods	Schools (6), farmer/producers, and youth consumers	Six counties - southeast Iowa regional focus	Fairfield, Fremont, Harmony, North Mahaska, Tri-County, and Van Buren School Districts are participating.
<b>University of Northern Iowa Foundation (IA)</b>	Youth acceptance and demand for locally sourced foods; farm-to-school market development for healthier foods	Schools (3), farmer/producers, and youth consumers	Northeast Iowa regional focus	Project has a strong foundation to grow a web of relationships among food service staff, school administrators, nutrition professionals, and local farms. Students are making wise choices within healthy food environments in participating schools and inspiring other like entities to initiate similar work. All three participating schools have increased the amount of locally sourced foods in their cafeterias. The most extreme change at one school is that every meal features local milk and the majority of their meat and produce is sourced locally (season permitting).

Future Tools	Lessons and Impact To Date
Learning tools have potential for use beyond this project.	Providers are seeking this type of assistance around nutrition guidance. Extension consolidation has staffing/capacity impacts.
Procedural manual is an explicit part of project plan to help share replication plan and lessons learned.	School screening participation criteria are being refined to better judge readiness for the intervention.
Role of child care settings in early efforts to reverse and avoid childhood obesity is a venue of promise.	Parental cooperation is recognized as a key attribute in project success.
School district nurses have been tapped to teach nutritional lessons after WIC and Extension staff have experienced cuts.	Community engagement of multiple stakeholders is effective in after-school programming models.
Farm to school - locally sourced foods continues to be a national theme as part of the solution and this is a good learning environment for us.	Engagement of farmers, school food personnel, and children to know where food is coming from, are all important.
School snapshots of success factors could be a useful replication tool. School, student, and farmer/provider all need to be engaged.	User-friendly ordering system for school food service personnel is a potentially large step.

## Save the Date – South Dakota Public Health Association

Mark your calendars for this summer’s premier educational health event. The South Dakota Public Health Conference will be held on **June 10-11, 2010**. The educational offering will be held at the Holiday Inn City Centre in downtown Sioux Falls. For more conference and registration information please contact the South Dakota Public Health Association at 605-370-5070 or [office@sdpublichealth.org](mailto:office@sdpublichealth.org), or visit [www.sdpublichealth.org](http://www.sdpublichealth.org).





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# How Healthy is Your County?

Community Health Rankings, which was launched by the University of Wisconsin's Population Health Institute and the Robert Wood Johnson Foundation, is a set of reports to rank the overall health of every county in all 50 states. Each county is ranked on how healthy people are and how long they live. Key factors include smoking, obesity, binge drinking, access to primary care providers, rates of high school graduation, air pollution levels, liquor store density, unemployment rates, and number of children living in poverty. State specific reports are available at [www.countyhealthrankings.org](http://www.countyhealthrankings.org).

