Massachusetts Obesity Prevention Efforts (2008-2013)

Background
The Centers for Disease Control and Prevention’s (CDC) Division of Nutrition, Physical Activity, and Obesity (DNPAO) provided support (training, technical assistance, data, funds) to the Massachusetts Department of Public Health to prevent and control obesity and other chronic diseases through healthful eating and physical activity. Massachusetts successfully implemented initiatives and activities in multiple settings (community, schools, healthcare, childcare, and worksites) to address all six target areas delineated in cooperative agreement 805:

1. Increase physical activity.
2. Increase the consumption of fruits and vegetables.
3. Decrease the consumption of sugar sweetened beverages.
4. Increase breastfeeding initiation, duration and exclusivity.
5. Reduce the consumption of high energy dense foods.
6. Decrease television viewing.

Activities and Partnerships

• In January 2009, the Massachusetts Department of Public Health launched Mass in Motion (MiM) to promote wellness and to prevent overweight and obesity in Massachusetts – with a focus on the importance of healthy eating and physical activity. MiM reached 2,173,886 individuals in 52 communities.
• The Working on Wellness (WOW) Program provided employees with increased on-site opportunities for physical activity, increased access to fruits and vegetables, decreased access to sugar sweetened beverages and high energy dense foods, and support for breastfeeding. The WOW program has reached an estimated 60,000 employees in 48 public and private worksites.
• Massachusetts adopted statewide guidelines which require water to be readily available during the school day at no cost and fresh fruits/non-fried vegetables be available wherever food is sold (except vending machines).
• The Massachusetts Department of Public Health, the Department of Early Education and Care and the Department of Early and Secondary Education partnered to create Massachusetts Children at Play, a free program that helps child care providers incorporate active movement and healthy food options into child care settings.
• The Massachusetts Department of Health and the Massachusetts Breast Feeding Collaborative worked together to plan and implement the Massachusetts “Baby Friendly Hospital Initiative.” Through this partnership, four regional training sessions were conducted, with seventy-five percent of birthing hospitals across the Commonwealth attending.

Leveraged Funds
During cooperative agreement 805, the Massachusetts Department of Health generated $5.2M in leveraged funds* to support obesity prevention work.

* State grantees leveraged funds from multiple stakeholders and sectors to support obesity prevention work. Funds leveraged include sources of funding outside DNPAO cooperative agreement 805, such as federal organizations, state programs, foundations, private businesses, and other sources. States were not required, but encouraged to leverage funds.
• The Massachusetts Department of Public Health School Nutrition Work Group collaborated with the Massachusetts Department of Elementary and Secondary Education, the Harvard School of Public Health, the Boston Public Health Commission, the John C. Stalker Institute of Food and Nutrition at Framingham State College, School Nurses and the School Nutrition Association to develop and approve *Healthy Students, Healthy Schools -- Guidelines for Implementing the Massachusetts School Nutrition Standards for Foods and Beverages.*

**Lessons Learned**

• Ensure that all of the appropriate individuals are “at the table.”

  » The unique partnership between the Massachusetts Department of Public Health, Department of Early Education and Care (EEC), and Department of Elementary and Secondary Education (ESE) was vital to the development and success of Massachusetts Children at Play Initiative. The use of ESE and EEC staff, resources and networks expanded the program’s reach.

  » The Massachusetts Children at Play Program recruited mentors with knowledge of the child care environment, excellent organizational and communication skills, and the ability to help support the centers and providers in carrying out goals to improve their practice.

“*It’s never too early to start. Kids learn habits when they’re very young. Teaching them to eat better and move more early on helps them live a healthy lifestyle now and later as adults.*”

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