Community, Equity, and Collaboration for Policy Advocacy in Nutrition Education

Lesli Biediger-Friedman, PhD, MPH, RD
Associate Professor of Nutrition and Foods, Texas State University
ACPP Chair
# ACPP Committee Members

<table>
<thead>
<tr>
<th>Committee members:</th>
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<tbody>
<tr>
<td>Lesli Biediger-Friedman, PhD, MPH, RD, Chair</td>
<td>Amy DeLisio MPH, RD</td>
<td>Sheila Fleischhaker PhD, JD Board Liaison</td>
<td>Jenn Folliard MPH, RDN, Chair-Elect</td>
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<tr>
<td>Matthew Landry, PhD</td>
<td>Stephany Parker PhD</td>
<td>Rickelle Richards PhD, RD, MPH, Secretary</td>
<td>Chris McCullum-Gomez, PhD, RDN</td>
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<tr>
<td>Kavitha Sankavaram PhD</td>
<td>Marcia Scott PhD, RD</td>
<td>Stacey Snelling PhD, RD</td>
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<td><strong>Tom Joseph, Paragon Lobbying</strong></td>
<td>Rachel Daeger, CAE SNEB Executive Director</td>
<td>Evan Hoffmeyer, SNEB Senior Communications Coordinator</td>
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<tr>
<td><strong>Division Point People:</strong></td>
<td>Rylee Ahnen</td>
<td>Toyin Babatunde, PhD, MPH, RD</td>
<td>Christen Cooper, EdD</td>
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<td>Healthy Aging</td>
<td>Research</td>
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<tr>
<td>Dan Dychtwald</td>
<td>Karen Ensle, EdD, RDN, FAND, CFCS</td>
<td>Victoria Hunter Gibney</td>
<td>Julia McCarthy, JD</td>
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<td>Weight Realities</td>
<td>FNEE</td>
<td>DSFS</td>
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<tr>
<td>Ana Mitchell</td>
<td>Robert C. Post, PhD, MEd, MSc</td>
<td>Sonal Sathe</td>
<td>Miriam Seidel, MS, RD</td>
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<td>NEWI</td>
<td>Student</td>
<td>DSFS</td>
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<tr>
<td>Jennifer Walsh, PhD, RD, LD</td>
<td>Song Xiong, RD, LD</td>
<td>Jen L. Zuercher, PhD, RD</td>
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<td>Children</td>
<td>Communications</td>
<td>Higher Education</td>
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To make recommendations on member-identified public policy issues to Congress, the White House and government agencies.

**Key activities include:**

- Public Policy Priority Survey;
- Develop legislative and regulatory positions based on SNEB’s priority issues;
- Develop work plan for SNEB’s priority issues;
- Draft written communications such as outlines, timelines, position paper, testimony, letters, and backgrounders that support SNEB’s priority issues;
- Bring forth opportunities such as endorsing coalition letters, testifying before Congress and agencies concerning SNEB priority issues; and,
- Cooperate with representatives of other nutrition education associations on issues of mutual interest.
Goal 3: Be leaders in comprehensive nutrition education research, practice, and advocacy at individual, community, food system and policy levels. (Leadership)

Activity: Communicate value and effectiveness of nutrition education through policy.

Includes webinar series on key policy topics in partnership with the SNEB Divisions.
Community, Equity, and Collaboration for Policy Advocacy in Nutrition Education

SNEB Policy Contributions & Opportunities

Sheila Fleischhacker, PhD, JD
Adjunct Professor of Law, Georgetown University
SNEB Board of Directors – ACPP Liaison
The SNEB Advisory Committee on Public Policy (ACPP) is a very active committee that focuses their efforts on the established public policy priority issues of the Society. ACPP holds regular telephone conference calls to provide input on a variety of matters relating to SNEB's public policy priorities. ACPP is advisory to the SNEB Board of Directors on public policy issues in which SNEB should participate on some level.

The purpose of SNEB’s ACPP is to:

1. Advise and recommend policies to the SNEB Board concerning nutrition education related public policy matters on which SNEB should have a voice;

2. Develop SNEB’s Public Policy Survey, in conjunction with SNEB’s Public Policy Consultant. [The survey is sent bi-annually to the entire SNEB membership to determine the society’s public policy priority issues.]

Policy Archives

- Policies SNEB has written in support of
- Positions and Resolutions
Protecting SNAP Participants

USDA restriction on states’ SNAP administration weakens national safety net

INDIANAPOLIS (Dec. 5, 2019) – Leadership for the Society for Nutrition Education and Behavior (SNEB) denounces this week’s final rule from the USDA that will cut their SNAP benefits, in direct contradiction of congressional intent.

An estimated 1.2 million fewer adults would receive SNAP benefits, issued Wednesday, largely because of stricter mandatory work requirements for Able-Bodied Adults without Dependents (ABAWDs). This rapid loss of SNAP benefits is among ABAWDs when they are navigating uncertain job prospects also impose financial hardship on states enforcing these stricter rules, respond to deteriorating economic conditions, and cost retail food.

*Actively involved in nutrition education and health promotion, as well as the tremendous administrative, food security and health benefits of food assistance programs, the SNEB leadership strongly disagrees.*

Congress had intense deliberations leading up to the 2018 Farm Bill requirements imposed on ABAWDs unable to find work, and ultimately rejected such a controversial change by a historic vote of 87-13 in the Senate and 359-47 in the House of Representatives. Therefore, any final rule

Hunger or Deportation: Implications of the Trump Administration’s Proposed Public Charge Rule

Sara N. Bleich, PhD¹; Sheila Heischhacker, PhD, JD²

ABSTRACT

Until recently, lawfully present noncitizens participating in the US Department of Agriculture Supplemental Nutrition Assistance Program (formerly Food Stamps) faced no immigration consequences. However, in September, 2018, the Trump Administration proposed a more expansive public charge rule in the Federal Register that would deny lawfully present noncitizens a path to citizenship if they had participated in certain federal safety net programs, including Supplemental Nutrition Assistance Program. This perspective discusses the proposed rule’s implications, particularly for those with professional interests in promoting effective nutrition education and healthy behavior through research, policy, and practice among individuals who will potentially be affected.

Key Words: immigration, public charge, SNAP, hunger

Accepted January 23, 2019.
The Honorable Sonny Perdue
Secretary of Agriculture
U.S. Department of Agriculture
1400 Independence Avenue, SW
Washington, DC 20250

Dear Secretary Perdue:

We write in strong opposition to the U.S. Department of Agriculture’s (USDA) “Simplifying Meal Service and Monitoring Requirements in the National School Lunch and School Breakfast Programs” proposed rule (85 FR 4094). This rule would jeopardize the progress schools are making to provide healthier food to vulnerable children and decrease the overall healthfulness of school meals. The changes would decrease school meal participation by encouraging a la carte purchases, which is both a fiscal risk to school meal programs and an equity concern. Moreover, the proposal would allow less fruit and less variety of vegetables, which likely would result in replacing them with starchier vegetables, such as potatoes, which children already overconsume. For example, the combined changes would allow children to consume foods that are higher in sodium, saturated fat, and refined grains, and consume an additional eight cups of hash browns, tater tots, french fries or other potatoes in place of fruit in breakfast and other vegetables in lunch per child per week (five cups at breakfast and three additional cups at lunch in high school).

This is not USDA’s first weakening of school nutrition. In 2018, USDA implemented a final rule (Child Nutrition Programs: Flexibilities for Milk, Whole Grains, and Sodium Requirements, 83 Fed. Reg. 63775 [Dec. 12, 2018]) that delayed the next levels of sodium reduction by seven years and eliminated sodium-reduction Target 3; weakened the whole grain-rich standard from 100 to 50 percent; and allowed flavored 1 percent milk to be sold without a calorie (and/or added sugar) limit. Despite 99 percent of public comments submitted opposing these rollbacks, USDA moved forward and finalized a rule even more devastating to child health than what was proposed in the interim final rule.

These proposed changes would jeopardize children’s health. The 2012 school nutrition standards are based on sound science and reflect the 2010-2015 Dietary Guidelines for Americans,1 which are further confirmed by the 2015-2020 DGA2 and the National Academies of Science, Engineering, and Medicine (formerly, Institute of Medicine) 2009 report School Meals: Building Blocks for Healthy Children.3 The Harvard University T.H. Chan School of Public Health concluded that the 2012 update to school meal standards and the 2013 update to competitive foods is, “one of the most important national obesity prevention policy achievements in recent decades.”4 Researchers estimate that these improvements could prevent more than two million excess childhood obesity cases over the first 10 years.5

Under the new nutrition standards, school lunches have:

- Less unhealthy fat
- Less salt
- Fewer calories
- Low and non-fat dairy
- Double fruits and veggies
- More whole grains

Visit www.schoolfoods.org/back2school for more information.

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Ensuring Evidence-Based Dietary Guidelines

- Strengthen the process for establishing the *Dietary Guidelines for Americans*
- Recommend a Federal Government nutrition research agenda to address research needs for establishing the *Dietary Guidelines for Americans*
- Provide evidence-based recommendations on the best ways to translate the science into culturally and contextually-relevant messages for *all* Americans
Ensuring Evidence-Based Dietary Guidelines

Position of the Society for Nutrition Education and Behavior: The Importance of Including Environmental Sustainability in Dietary Guidance

Donald Rose, PhD; Martin C. Heller, PhD; Christina A. Roberto, PhD

ABSTRACT
It is the position of the Society for Nutrition Education and Behavior that environmental sustainability should be a priority in dietary guidance, as it is a long-term solution for addressing the needs of our planet.

Key Words: sustainability, environmental, dietary guidance

INTRODUCTION
The importance of environmental sustainability in dietary guidance has been highlighted by recent scientific studies, as well as by organizations such as the World Health Organization. In order to ensure the long-term health of our planet, it is crucial that we adopt dietary practices that are sustainable and environmentally friendly.

March 4, 2020

The Honorable Sonny Perdue
Secretary
Department of Agriculture
1400 Independence Avenue SW
Washington, DC 20250

The Honorable Alex M. Azar, II
Secretary
Department of Health and Human Services
200 Independence Avenue SW
Washington, DC 20201

Dear Secretary Perdue and Secretary Azar,

Thank you for the opportunity to present this position paper to the United States Department of Agriculture (USDA) and Department of Health and Human Services (HHS) on the importance of including environmental sustainability in dietary guidance.

The Dietary Guidelines for Americans 2020-2025 emphasize the importance of incorporating healthy eating practices into our daily lives. However, it is equally important to consider the environmental impact of our dietary choices. As we work towards a more sustainable future, it is essential that we prioritize dietary guidance that takes into account the environmental consequences of our food choices.

The undersigned organizations are deeply committed to protecting the health of the nation and future generations. As you consider recommendations from the 2020 Dietary Guidelines Advisory Committee, we urge you to acknowledge and incorporate the body of scientific literature linking dietary patterns, sustainability, and food security in the 2020-2025 Dietary Guidelines.

Research has long established linkages between healthy diets and reduced risk of chronic diseases such as cancer, type 2 diabetes, and heart disease. However, a rapidly expanding body of research shows that the average US diet contributes to environmental impacts such as biodiversity loss, climate change, deforestation, and water pollution that threaten the availability of a healthy food supply in the future. Further, healthy dietary choices can lead to reductions in greenhouse gas emissions.

The National Nutrition Monitoring and Related Research Act of 1990 requires that the Dietary Guidelines be updated every five years “based on the preponderance of the scientific and medical knowledge which is current at the time the report is prepared.” The 2010 Dietary Guidelines was updated in 2015.

We urge the Department of Agriculture and the Department of Health and Human Services to consider the environmental impacts of our dietary choices when updating the Dietary Guidelines for Americans 2020-2025.

Sincerely,

[Signatures]

[End of letter]
Ensuring Evidence-Based Dietary Guidelines

We, the undersigned organizations, encourage your support of a letter led by Representatives Marshall (R-KS) and Pingree (D-ME) requesting that the U.S. Department of Agriculture (USDA) and the U.S. Department of Health and Human Services (HHS) undertake the necessary steps to add a symbol for water to the MyPlate dietary guidance graphic.

Water—whether tap, bottled, or filtered—is essential to life. Consuming water helps Americans achieve optimal nutritional health, particularly when substituted for sugar-sweetened beverages (SSBs). When water is substituted for SSBs it reduces risks of developing chronic diseases, including obesity and diabetes, while positively impacting health care costs.

Public health experts widely recognize water as a preferred source of hydration contributing to good health. Scientific research shows that drinking water positively influences a number of healthy bodily functions. In addition, the Centers for Disease Control and Prevention (CDC) points out that, “Drinking enough water every day is good for overall health. As plain drinking water has zero calories, it can also help with managing body weight and reducing caloric intake when substituted for drinks with calories.” The CDC recommends that adults and youth should consume water every day, and consistently throughout the day.

Recommendations from leading national experts convened by the Robert Wood Johnson Foundation highlight the importance of drinking water from a young age. Their September 2019 report recommends children between 6 and 12 months begin drinking water once solid foods are introduced, and children ages 12 months to five years should primarily drink water and milk.

In addition, those ages 60 and older are among the most vulnerable to dehydration. An April 2016 report by the National Center for Health Statistics noted that older Americans are more susceptible to dehydration due primarily to a decrease in thirst, a fear of incontinence, slowed kidney function, as well as an increased prevalence of chronic diseases and the use of multiple medications.

The MyPlate graphic – based on the Dietary Guidelines for Americans – is the primary tool used to educate Americans about nutrition. This tool currently consists of the following groups: fruits, vegetables, grains, protein, and dairy. Therefore, adding drinking water to MyPlate would be a key strategy to improve Americans’ nutrition and help reduce SSB consumption.

Strengthening Federal Nutrition Research

Forthcoming report aims to evaluate key issues relevant to federal nutrition research, including:

1) The mounting diet-related health burdens and corresponding economic, health equity, national security, and sustainability implications;

2) The current diverse federal nutrition research landscape and existing mechanisms for its coordination;

3) The opportunities for new nutrition-related discoveries in fundamental, clinical, public health, food and agricultural, and translational scientific research; and,

4) The best strategies to further strengthen and coordinate federal nutrition research, including advantages, disadvantages, and potential paths forward.
Options for Strengthening National Nutrition Research

Defined and reviewed in detail in this report –

1) A new authority for robust cross-governmental coordination of nutrition research and other nutrition-related policy; and

2) To strengthen authority and investment for nutrition research within the NIH

While not considered in detail within this white paper –

3) The need for strengthened investment and coordination in food and agricultural research, education, extension, and economics
President Donald J. Trump
The White House
1600 Pennsylvania Ave, NW
Washington D.C. 20500

RE: Strengthen SNAP in the Next Federal COVID-19 Relief Package to Lift Up Vulnerable Families and the Economy

Dear President Trump:

We, the undersigned organizations, urge you to support the inclusion of SNAP in the next Federal COVID-19 relief package. SNAP is a vital program that provides food assistance to millions of vulnerable families across the United States. As the unprecedented disruptions caused by the COVID-19 pandemic continue, SNAP serves as a lifeline, helping to meet the needs of those who are struggling.

The CARES Act included a temporary increase in SNAP benefits, which has been critical in helping to ensure that families can access the food they need. However, with the current rate of unemployment and the ongoing healthcare crisis, the need for SNAP benefits remains high.

The increase in SNAP benefits has provided much-needed assistance to those affected by the pandemic. However, we estimate that the benefits provided under the CARES Act will only cover approximately $32 million in benefits as outlined above to help maintain local job creation and food security initiatives.

Sincerely,

[Signatures of organizations and representatives]
Addressing Racial Injustice
Community, Equity, and Collaboration for Policy Advocacy in Nutrition Education

SNEB Policy Contributions & Opportunities

Lesli, SNEB ACPP Chair - lbfnutrition@gmail.com
Jenn, SNEB ACPP Chair Elect – jenn.folliard@gmail.com
Sheila, SNEB ACPP Board Liaison - sheilafly9@gmail.com
How to Use Food Systems Policy to Achieve Health Equity

Kimberly Libman PhD, MPH
July 21, 2020
Society for Nutrition Education and Behavior
Advisory Council on Public Policy
Healthier communities for all through equitable laws & policies
Disclaimer

The information provided in this discussion is for informational purposes only, and does not constitute legal advice. ChangeLab Solutions does not enter into attorney-client relationships.

ChangeLab Solutions is a non-partisan, nonprofit organization that educates and informs the public through objective, non-partisan analysis, study, and/or research. The primary purpose of this discussion is to address legal and/or policy options to improve public health. There is no intent to reflect a view on specific legislation.

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Overview

- What is policy?
- Policy change is an important strategy to achieve health equity
- Elements of a strong equitable policy
- Understanding the policy process
- Tools and resources
What is policy?
A policy is:
A statement in writing
Binding
Setting out a general approach to be applied broadly
Types of policy

- Local ordinances
- Zoning language
- Resolutions
- Standards
- School/agency policy language
- Contracts/agreements
- State/federal laws
- Organization/company policies
Where does your work fall?

- Learn about interventions
- Pilot an idea and get feedback
- Expand the pilot to a full-scale program
- Learn about policy options
- Design a policy
- Adopt a policy
- Implement and evaluate policy

Program  |  Policy
**Example: Zoning for Neighborhood Agriculture**

<table>
<thead>
<tr>
<th><strong>Problem identification</strong></th>
<th>Residents prohibited from growing food in residential areas</th>
</tr>
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<tbody>
<tr>
<td><strong>Desired outcome</strong></td>
<td>Expand the areas in the community where food can be grown</td>
</tr>
<tr>
<td><strong>Type of policy</strong></td>
<td>Zoning code</td>
</tr>
</tbody>
</table>
Policy change is an important strategy to achieve health equity
The Fundamental Drivers of Health Inequity

- Structural discrimination
- Income inequality and poverty
- Disparities in opportunity
- Disparities in political power
- Governance that limits meaningful participation
Policies can...

- Express values against bias, unfairness, and injustice.
- Influence the distribution and use of money, opportunity, and power.
- Undo historical policy-driven harms.
- Initiate widespread change.
- Focus attention on structural problems, not individuals.
- Enable and guide other activities.
- Sustain change over the long term.
### Example: Addressing Structural Racism

<table>
<thead>
<tr>
<th>Problem identification</th>
<th>Local government is not doing enough to acknowledge the role of systemic racism in contributing to health inequities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Desired outcome</td>
<td>Encourage local government to prioritize racial equity in its decisionmaking</td>
</tr>
</tbody>
</table>
| Type of policy         | - Ordinance → create new departments within government  
                        | - Resolution                                                                                               |

- Lightfoot Activates Rapid Response Team to Stem ‘Unacceptable’ Racial Disparity in COVID-19 Deaths
- Officials in the largest county in Ohio say racism is a public health crisis
- San Francisco Board Unanimously Approves ‘Office of Racial Equity’
Key Concepts for Developing Strong and Equitable Policies
Targets upstream drivers of inequity

Ambitious, yet feasible

Data-driven and grounded in community

Directly addresses health inequities

Implementation and enforcement are designed with equity in mind

Legally feasible

Financially feasible

One piece of a larger puzzle

Changes the conversation

Elements of a strong equitable policy
**Preemption:** When the law of a higher level of government invalidates the law of a lower level of government.
People-centered policy
What is equitable enforcement?

The process of ensuring compliance with law and policy that considers and minimizes harms to communities.
## Example: LHD and CBO Partnership

<table>
<thead>
<tr>
<th><strong>Problem identification</strong></th>
<th>Health department with inadequate community engagement expertise and capacity</th>
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<tr>
<td><strong>Desired outcome</strong></td>
<td>Formalize a partnership with an existing organization that has deep community connections</td>
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<tr>
<td><strong>Type of policy</strong></td>
<td>MOU</td>
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Why focus on local policy specifically?
What is the outcome you hope to achieve?

Who has the power to bring about this outcome? What is the most appropriate type of policy to make this change?

**Example: Breastfeeding**

<table>
<thead>
<tr>
<th>Problem identification</th>
<th>Racial inequities in access to maternity care practices and other resources that support breastfeeding.</th>
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<tbody>
<tr>
<td>Desired outcome</td>
<td>Adopt Baby-Friendly hospital practices</td>
</tr>
<tr>
<td>Type of policy</td>
<td>Organizational (hospital) policy</td>
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**Example:** Food Worker Protections

<table>
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<tr>
<th>Problem identification</th>
<th>Essential workers with inadequate workplace supports during a pandemic</th>
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<tbody>
<tr>
<td>Desired outcome</td>
<td>Flexible work schedules for grocery and food delivery companies</td>
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<tr>
<td>Type of policy</td>
<td>Ordinance</td>
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What is lobbying?

Any activity or material to influence federal, state, or local officials to pass or sign legislation or to influence the outcomes of an election, referendum, or initiative.
Non-lobbying activities include (but are not limited to)...

- Coalition building
- Educational campaigns that explain the advantages & disadvantages of public policies
- Sharing best practices and success stories with the public or government officials
- Broadly sharing evidence-based policy approaches
- Conducting nonpartisan analysis, study, or research
- Presentation or testimony in response to written technical assistance request
Equitable Enforcement to Achieve Health Equity
An Introductory Guide for Policymakers and Practitioners

A Blueprint for Changemakers
Achieving Health Equity Through Law & Policy
Thank you!

klibman@changelabsolutions.org