



Food & Nutrition: Cultivating Healthy Communities

2014

Challenges

Meet future demand for food

Conserve and enhance water, soil, and habitat

Improve nutrition and public health

Strengthen farms and communities to improve livelihoods

Many American communities are striving to become healthier. They are using food and nutrition initiatives to reduce healthcare costs, increase educational success, and achieve the quality of life that attracts businesses and creates jobs. With support from federal and state programs, foundations, companies, and their own resources, communities are opening farmers markets to promote fresh fruit and vegetable consumption, working with retailers to make healthy foods more accessible to people of all income levels, adjusting school food offerings, building nutrition awareness, and promoting exercise and active lifestyles with new infrastructure and programs.

But we have a long way to go. Alarming percentages of the U.S. population, and increasingly the global population, are overweight or obese. People in the U.S. and abroad do not follow recommended dietary guidelines for optimal health. This failure to eat well has significant implications for human health and wellbeing, given the connection between diet, weight, and chronic disease. And, while we have made progress combating hunger, millions in the U.S. and hundreds of millions globally are still food insecure.

AGree has identified seven recommendations that will improve health through food and nutrition by supporting American¹ community initiatives; strengthening and better coordinating federal, state, and local programs; and catalyzing private sector and civil society action. AGree's recommendations are a call to action that transcends political parties and business interests at all levels. To address this urgent problem we need to expand existing partnerships and create new alliances among those working to combat hunger and to improve nutrition and health. We must understand what is working and expand those efforts to reach people where they work, study, shop, worship, play, receive healthcare, etc. And we need to connect those working at the community level to policymakers and private sector decision makers to ensure that their policies and actions support healthy individuals, families, and communities.

AGree's Approach to Transformative Change

AGree, established to *drive positive change in the food and agriculture system by connecting and challenging leaders from diverse communities to catalyze action and elevate food and agriculture as a national priority*, has reached out to hundreds of individuals and stakeholder groups to cultivate

opportunities and break down obstacles to transformative change. These individuals and groups have affirmed the need for systematic approaches that are grounded in research and connect the diverse efforts that are already underway. From this dialogue and debate, AGree proposes the following recommendations for immediate action.

Initiatives

Food & Nutrition

Immigration Reform

International Development

Local Food

Next Generation

Research & Innovation

Risk Management

Working Landscapes

AGree's Recommendations

1. We must fundamentally change how we think about health and its relationship to food and nutrition. The food and agriculture, anti-hunger, nutrition, education, and health communities at all levels must join together to reduce obesity and food insecurity and guide the country toward a healthier future.

- **Food manufacturers, wholesalers, institutional foodservice companies, and retailers should encourage, reward and reinforce healthy diets** through marketing, incentives and other strategies, including product formulation, placement, packaging, and portion size. There are important roles that all industries can play such as providing workplace incentives and healthier food options in cafeterias and linking healthy food purchasing behaviors to other healthcare interventions (see Box 1). In addition to voluntary private sector initiatives, science-based regulations related to food safety and product information (e.g., nutrition labeling) are important in providing consumers with the information they need to maintain healthy diets. Building on the work of the National Academies and the Federal Trade Commission, a national conference on marketing practices and food behavior research should be organized in 2015 that amplifies existing efforts and encourages greater commitment and coordination.

Box 1. Wal-Mart and HumanaVitality Partnership

As a result of a partnership launched in 2012, HumanaVitality members who shop at Wal-Mart and purchase foods labeled "Great for You" (fruits, vegetables, low-fat dairy products) earn rebates of five to ten percent that can be applied to future Wal-Mart purchases. HumanaVitality has also established a "frequent flyer"-inspired programs that provides members shopping rewards for their adoption of certain healthy behaviors – wearing a pedometer, completing a health assessment, getting a flu shot.

- **Healthcare providers and insurance companies (see Box 2) should promote the benefits of good nutrition and reward healthy eating as an integral part of doing business.** Patient- and family-centered care should include nutrition education and information about food- and nutrition-related programs and available community support. This includes screening patients for food insecurity and making referrals to appropriate community-based agencies and charitable organizations.

Box 2. Healthcare Support for Healthy Places

The "Blue Zones" concept has attracted support from a number of healthcare providers and community leaders in California, Iowa, and Minnesota. In Albert Lea, MN, residents wove the Blue Zones principles into their daily lives, losing weight, cutting healthcare costs, and improving their life expectancy and quality of life. Wellmark Blue Cross and Blue Shield have partnered with [Blue Zones](#) to support the communities to establish community gardens, increase "walkability" and exercise, and change eating behaviors in schools.

- **Current and future federal, state, and local administrations should align the wide array of programs that support food and nutrition.** Specifically, the U.S. Departments of Agriculture (USDA), Health and Human Services (HHS), and Defense (DOD) (see Box 3) should better coordinate and integrate their respective initiatives with each other and with state initiatives to support bottom-up, community driven efforts to improve health and well-being.

Box 3. U.S. Department of Defense Initiatives

The DOD Healthy Base Initiative and Operation Live Well are examples of federal programs that should be leveraged for lessons about creating supportive food environments and changing social norms.

- 2. As a nation, we must commit to a long-term, high-profile effort to improve children's health.** This requires partnerships across the entire food and agriculture system, including but not limited to partnerships with public health and education. Such an effort should be coordinated by the White House with strong participation by the private sector and civil society. The U.S. government has committed to strengthen child nutrition in developing countries in the first 1,000 days (pregnancy to age 2); we should make the same commitment domestically, incorporating the appropriate interventions. Further, the U.S. government, states, the private sector, schools and families should support the full implementation and enforcement of the Healthy, Hunger-Free Kids Act of 2010 and work together to increase participation by eligible children. And the reauthorization of the Child Nutrition Act should include the full suite of programs that support family nutrition, health, and food security—both public and private—including mechanisms for providing year-round nutrition assistance to children, including summer and after school.

3. **Federal, state, and local governments should encourage the inclusion of food access, availability, and nutrition indicators as part of community health needs assessments** required for non-profit hospitals under the Affordable Care Act (ACA). These indicators will reinforce the connection between community health and food and nutrition interventions.
4. **The National Academy of Sciences should review all federal dietary recommendations** to ensure Americans are receiving consistent, appropriate dietary information. Current guidelines include the Dietary Guidelines for Americans; the Women, Infants, and Children (WIC) program; guidelines covering food served or available in schools and childcare settings; nutritional guidelines for elderly Americans; the U.S. Agency for International Development/Feed the Future's guidelines for the first 1,000 days of a child's life; and the National Institutes of Health's "Go, Slow, Whoa" campaign. Clear and consistent messages can help Americans understand and adopt positive nutritional behaviors.
5. **The Secretary of Agriculture should strengthen the "N" (Nutrition) in SNAP and other federal food and nutrition programs.**
 - AGree supports adequate funding for the Supplemental Nutrition Assistance Program (SNAP) and protecting the program from harmful structural changes.
 - USDA should work with states and local communities to identify opportunities to encourage healthier choices by program participants, using the full suite of strategies available including behavior-based research, social marketing best practices, incentives, and restrictions. We need to identify effective approaches that can be scaled in diverse communities across the country. USDA should support integrated, community-based strategies to improve health and nutrition when it implements incentive-based programs in the Agriculture Act of 2014.
 - USDA should test innovative upgrades to SNAP-Education (SNAP-Ed) to ensure that participants have practical and flexible strategies to incorporate healthier food choices. SNAP-Ed should be integrated into USDA's food assistance programs as well as private sector and civil society nutrition education efforts.
6. **Government agencies including but not limited to USDA, HHS, and DOD, companies, and foundations need to invest in basic and behavioral research** to support the evidence base for practices that encourage more nutritious diets and ultimately improved health. This research needs to take into consideration the intersection of food security, nutrition, and health and inform the development of approaches to make healthy choices the easy choice for individuals and families.
7. **Building on innovative actions taking place across the country, we need to bring those working to improve health and wellbeing in communities together with federal and state policymakers and private sector leaders in food, agriculture, nutrition, and health.** These diverse stakeholders should identify best practices, determine how to align existing programs to better meet the needs of communities, and create a roadmap for policy change.

Understanding the Challenges Facing Community Health and Nutrition

Today, more than one third of U.S. adults and 17 percent of U.S. children are obese and therefore highly vulnerable to early-onset chronic disease.¹ Four of the leading causes of death in the United States—heart disease, stroke, cancer, and diabetes—are diet-related.³ More than 50 million Americans suffer from food insecurity, including more than 8 million children,⁴ and there is growing evidence that food insecurity increases the likelihood of and complicates the management of chronic disease.

Strengthening Food and Agriculture Development in Developing Countries

AGree has developed principles and recommendations to strengthen and support long-term U.S. commitments to food and agriculture globally. AGree sees great opportunity for better alignment within U.S. policy and programs, coupled with private sector and civil society investment and action, to bolster country-led efforts, strengthen local capacity, and integrate agricultural development, nutrition, and health to improve food security, reduce poverty, and support vibrant rural and urban economies.

Source: AGree's International Development Initiative: Promoting Development through Food and Agriculture, November 2014.

Globally, the picture is magnified—almost 1.4 billion people are obese or overweight worldwide according to the World Health Organization (2013 data) and 842 million people suffer from chronic hunger.⁵ The causes and impacts of poor nutrition are complex, but there is clear evidence that healthcare costs related to chronic disease are rising.⁶ We have an opportunity to stimulate innovation by bringing those working to improve health and wellbeing within communities together with policymakers, but it will require coordination, collaboration, and flexibility.

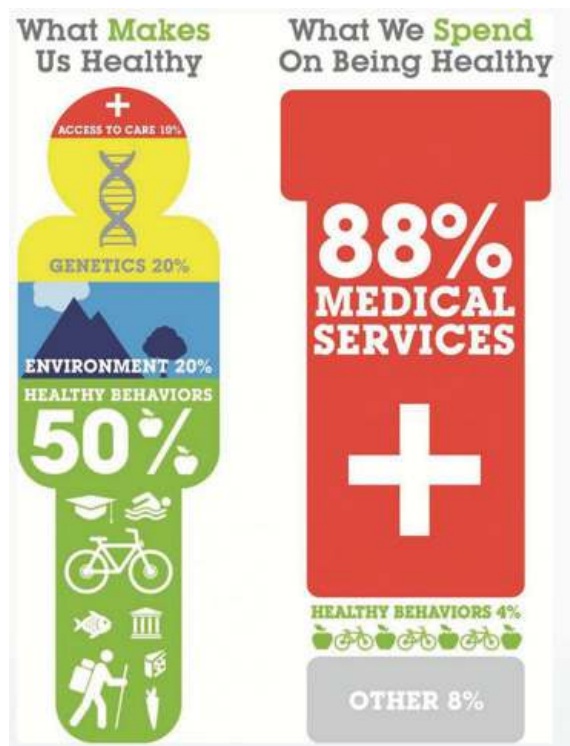


Figure 1. Source: Bipartisan Policy Center, derived from information from the Boston Foundation (June 2007).

Current Tensions and Debates

While most agree that nutrition and health outcomes are related, there is not a clear consensus about the best approach to improve the health outcomes of the U.S. population. As the Bipartisan Policy Center's *Lots to Lose: How America's Health and Obesity Crisis Threatens our Economic Future* infographic depicts (Figure 1), even though we know that the community environment and our behaviors are important determinants of health, most of our public and private investment goes to medical services.⁷ We have a chronic disease epidemic that spans the population; yet we have failed to act decisively

despite clear evidence that behavior change and supportive food environments can ameliorate the problem. According to the Harvard School of Public Health, in 2012 we spent \$8,086 per capita on healthcare in the U.S. and only \$251 per capita on preventive care.⁸ Opinions differ on whether doctors should be trained in nutrition, whether certain food products should be taxed to discourage consumption, whether there should be mandatory restrictions on food marketing to children and on the types of foods that should be permitted in schools. In addition, we are bombarded by mixed messages about what is healthy and what isn't, such as 'natural' sugars, fats, and proteins.

We also have tense debates about domestic nutrition assistance programs. Advocates for federal safety net programs are concerned that attempts to alter these programs may result in their being defunded or dramatically changed by Congress. Opinions differ on whether and how to align nutrition programs with other programs that serve the same clients, how much flexibility state or local officials should have to implement programs, whether nutrition programs should be state programs rather than federal, and whether food assistance programs such as the Supplemental Nutrition Assistance Program (SNAP) should restrict the purchase of certain food products such as high calorie beverages or be formulated like the Women, Infants, and Children Program (WIC) which has more stringent nutritional standards.

Community-Level Challenges

Food insecurity and diet-related disease coexist in communities, households, and sometimes within the same individuals. The problems families face in meeting their food, nutrition, and health needs are multi-dimensional, requiring solutions that are similarly multifaceted. Many low-income community residents struggle with food insecurity and are also at high risk for diet-related disease, yet initiatives that target diet-related disease often do not adequately take into account food insecurity challenges. Similarly, efforts to overcome food insecurity often overlook the need to address factors associated with diet-related disease. And while much attention is paid to federal safety net programs, many vulnerable food insecure families are not eligible for them, have difficulty accessing them, or choose not to enroll in them. Furthermore, federal safety net programs often do not meet the full nutrition and health needs of these vulnerable families. Charitable community-based organizations and the private sector play a key role in filling the gap.

AGree wants to build on collaborative interventions that integrate hunger, nutrition and health programs at the community level. Many organizations have developed recommendations to encourage the creation of healthy families and communities and have forged creative partnerships with the private sector to address the childhood obesity crisis through strategies such as healthy food marketing, product innovation, and community-based platforms for chronic disease prevention and treatment. Healthcare providers and anti-hunger initiatives are beginning to collaborate on hunger and health interventions, such as embedding a food security and nutrition lens into medical professional training and screening for food insecurity among high risk patient populations. And foundations have made major investments in building vibrant community-owned food systems that contribute to the access, availability, and affordability of culturally-appropriate nutritious food.

Supporting Robust Local and Regional Food Systems

Local and regional food systems help to create jobs, diversify production, and increase food options for communities. AGree's Local Food Initiative addresses the important roles local and regional food systems play in ensuring the availability and affordability of nutritious food and makes recommendations for how government, the private sector, and civil society can support food systems that deliver nutritious food and important community benefits.

Source: AGree's Local Food Initiative: Revitalizing Community-based Food Systems, forthcoming.

Multi-Dimensional Problems Require Multi-Faceted Solutions

There is no single solution that will successfully improve food security, nutrition, and health for everyone. AGree supports comprehensive approaches that address the availability and affordability of healthy food and also acknowledge the social and cultural factors that drive behavior around food choice and physical activity. Implementing successful programs that build healthier communities requires the political will to take on the contentious issues noted earlier; consistent messaging about

what constitutes healthy food; policy collaboration and innovation at the federal, state, and local levels; and the integration of public and private interests in food, nutrition, and health. AGree believes it is important to bring these controversial issues to the table.

Box 4. Healthy Communities

A healthy community is “one that continuously creates and improves both its physical and social environments, helping people to support one another in aspects of daily life and to develop to their fullest potential. Healthy places are those designed and built to improve the quality of life for all people who live, work, worship, learn, and play within their borders –where every person is free to make choices amid a variety of healthy, available, accessible, and affordable options.”⁹

Next Steps

To begin implementing the broad recommendations described above, AGree will bring the “bottom up” and “top down” together, connecting local “healthy community” initiatives with federal and state policymakers and private sector leaders to discuss different policy and program options and alignments that better meet the needs of communities and distill lessons learned and best practices. AGree will advocate for the federal and state policy changes and civil society and private sector actions that emerge from this dialogue and explore mechanisms to share the lessons more broadly.

AGree believes that:

- The federal government must provide policy leadership, strategic guidance, and supportive funding for state and local efforts to cultivate healthy communities through food and nutrition interventions. Current levels of collaboration across agencies and programs are insufficient, however, to ensure effective delivery and impact.
- The private sector (both for-profit and not-for-profit) must continue to expand its strategies for creating safe and nutritious products that are accessible and affordable for all consumers.
- With encouragement, individuals and families can make more nutritious dietary choices that will improve their health.



Figure 2. Setting the Table for Healthy Families and Communities

Going forward, AGree will:

- **Facilitate national-level dialogue between community stakeholders, policymakers, and the private sector** to identify gaps in current approaches to creating healthy communities and to determine which effective food- and nutrition-related strategies can be scaled. This will “set the table” for collaborative problem solving to achieve healthier dietary habits and health outcomes (Figure 2).
- **Advocate for federal policy change in the food, nutrition, health, education, and community development arenas.** AGree will identify opportunities to improve practice through administrative initiatives and flexibility as well as opportunities for policy change. If appropriate, we will encourage community partners to work with federal agencies to tap available resources, e.g., USDA’s Healthy Food Finance Initiative, the Food Insecurity Nutrition Initiative (a fruit and vegetable incentive program for SNAP participants), and the Affordable Care Act’s programs for prevention and public health initiatives.
- **Serve as an information portal for community and organizational partners.** AGree will distill lessons and explore the development of resources such as a playbook that can support community adaptation of lessons and strategies to their own unique circumstances.

- ¹ AGree's work also has implications for health and well-being globally. See box titled Strengthening Food and Agriculture Development in Developing Countries on page 3.
- ² U.S. Department of Health and Human Services and Centers for Disease Control and Prevention. 2011. U.S. Obesity Trends. Atlanta, GA: Centers for Disease Control and Prevention. Available at: <http://www.cdc.gov/obesity/data/trends.html>.
- ³ U.S. Department of Agriculture and U.S. Department of Health and Human Services. 2010. Dietary Guidelines for Americans. Washington, DC: U.S. Government Printing Office. Available at: <http://health.gov/dietaryguidelines/2010.asp>.
- ⁴ Economic Research Service, U.S Department of Agriculture. 2012. Food Security in the U.S.: Key Statistics and Graphs. Washington, DC: U.S. Government Printing Office. Available at: <http://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-us/key-statistics-graphics.aspx#insecure>.
- ⁵ Food and Agriculture Organization of the United Nations. 2013. The State of Food Insecurity in the World 2013. Available at: <http://www.fao.org/docrep/018/i3434e/i3434e00.htm>.
- ⁶ Bipartisan Policy Center. 2012. Lots to Lose: How America's Health and Obesity Crisis Threatens Our Economic Future. Available at: http://bipartisanpolicy.org/sites/default/files/5023_BPC_NutritionReport_FNL_Web.pdf.
- ⁷ Ibid.
- ⁸ Harvard School of Public Health. 2012. The Dollars and Sense of Chronic Disease. Available at: <http://www.hsph.harvard.edu/news/files/2012/09/hphinfographic10162012.pdf>.
- ⁹ Centers for Disease Control and Prevention. 2010. Healthy People 2010 Report. Atlanta, GA: Centers for Disease Control and Prevention. Available at: <http://www.cdc.gov/healthyplaces/about.htm>.

Although all the individuals formally affiliated with AGree may not agree completely with every statement noted, they are committed to working together to find solutions to the challenges facing food and agriculture. AGree Advisors participated as individuals, not as official representatives of their organization.

About AGree

AGree seeks to drive positive change in the food and agriculture system by connecting and challenging leaders from diverse communities to catalyze action and elevate food and agriculture policy as a national priority. AGree recognizes the interconnected nature of food and agriculture systems globally and seeks to break down barriers and work across issue areas.

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AGree is a collaborative initiative of nine of the world's leading foundations, including the Ford Foundation, Bill & Melinda Gates Foundation, The David and Lucile Packard Foundation, W.K. Kellogg Foundation, The McKnight Foundation, Robert Wood Johnson Foundation, Rockefeller Foundation, Surdna Foundation, and The Walton Family Foundation.