Eastern Shore Healthy Communities, Eastern Shore Health District, Accomac, VA

Project Overview:

Our project intervention focuses on increasing access to healthier foods to reduce chronic illnesses in our community. To accomplish this goal, we assembled a variety of representatives from organizations including the Foodbank, the public school system, and WIC to develop an action-based strategy to increase the uptake of existing resources, expand upon existing programs, and to adopt best practices from other communities. In addition to hosting a Food Summit, we also expanded the Healthy Options restaurant program and implemented a breastfeeding policy at our local health department.

Objectives:

- Increase the number of people in Eastern Shore of Virginia with improved access to environment with healthy food and beverage options from 23,000 to 28,400 by the end of the project period.
  - Increase the number of restaurants with new “healthy” menu options from 13-15 by the end of the project period.
    - Two additional restaurants have partnered in our Healthy Options Restaurant program. Unfortunately, two existing partners closed due to economic challenges.
  - Increase the number of healthy menu items at active Healthy Options Restaurants from 2 to 4 by the end of the project period.
    - We surpassed this goal. Eight of our Healthy Options restaurants have increased the number of menu items offered by up to +15 healthy menu items.
  - Increase the number of new tools or resources to create awareness of how to access healthy food options in the community from 0 to 1
    - This goal was accomplished by hosting a Food Summit on 3/30/2016. Food Insecurity Fact Sheets as well as a Solutions Sheet were compiled and distributed and Handout of Eastern Shore Community Resources was developed. These new guides will be posted on the coalition website.

- Increase the number of people in Eastern Shore of Virginia with improved access to opportunities for chronic disease prevention, risk reduction, or management through community and clinical linkages from 15,000 to 22,185 by the end of the project period.
  - Increase the number of monthly participants enrolled in WIC program from 1250 to 1260 by the end of the project period
  - Increase the number of providers and other community partners that refer to WIC from 0 to 2
    - We made this goal on average as our enrollment spikes in summer months with the migrant populations. We sought to meet this objective by conducting in-person surveys with WIC-clients to gain an understanding on current enrollment barriers. We learned that clients were experiencing difficulty at the local grocery stores and with transportation. This increase in WIC participation was a result of outreach to several Head Start and Migrant Head Start locations to sign up new participants as we held clinics. We also partnered with The Planning Council where we met with Day Care Providers and families.
- Increase the number of policies that support breastfeeding in the target community from 1 to 3 by the end of the project period
  - The Eastern Shore Health District implemented a breastfeeding policy. We also developed a Business Case for Breastfeeding Policy included in the Wellness Toolkit implemented by the Wellness Work Group within the Eastern Shore Healthy Communities coalition. This wellness policy is being presented to over 40 businesses and organizations for adoption. We expect many more policies in the future.

- Increase the number of settings that implement policies that support breastfeeding in the target community from 1 to 3 by the end of the project period
  - This goal was accomplished by implementing breastfeeding policies at the Accomack and Northampton Health Departments (under the Eastern Shore Health District)

- Increase the number of public and partner messages showcasing CPHMC project efforts and achievements related to improving access to environments with healthy food and beverage options and improving opportunities for chronic disease prevention, risk reduction or management through community and clinical linkages from 0 to 200 by the end of the project period.

- Over the course of the year, public messages included television advertisements supporting WIC enrollment, newspaper article on breastfeeding, a campaign promoting Healthy Options and healthy eating on Billboards, radio and newspaper ads, PSA’s and collateral print resources, and a Facebook page. Most of these print resources are also on the coalition website to be shared. Partner messages include monthly newsletters that are shared with over 200 members, and on Facebook, and potentially our partners sharing to their listserv. Often times, personal networking and reaching out to speak to community stakeholders and small groups and organizations was a most effective way to get our message heard in the community.

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