

# LOCAL WELLNESS POLICY EVALUATION

The Wisconsin Obesity Prevention Initiative

## ABOUT THIS REPORT

The LOCAL WELLNESS POLICY EVALUATION reviews Local Wellness Policies from public districts and charter schools that participate in federally sponsored nutrition programs. The overall goal is to inform policy decisions at the district and school level by providing evaluation data and tools for success. This project is part of the Wisconsin Obesity Prevention Initiative, a statewide research and outreach movement to promote health and prevent childhood obesity.



## WHY LOCAL WELLNESS POLICIES?

A Local Wellness Policy is a set of policies and procedures that govern nutrition and physical activity for students at school. At the district level, Local Wellness Policies are created by a local wellness committee comprised of staff, administrators, parents, and community members.

Research suggests that high quality Local Wellness Policies are associated with positive school practices and outcomes for students. These include healthier food options, increased physical activity, increased fruit and vegetable intake, and lower risk of student obesity.

## Making the Case for Policy Improvement

Research shows that high-quality Local Wellness Policies are related to these positive outcomes



Healthier Food Options at School



More Physical Activity at School

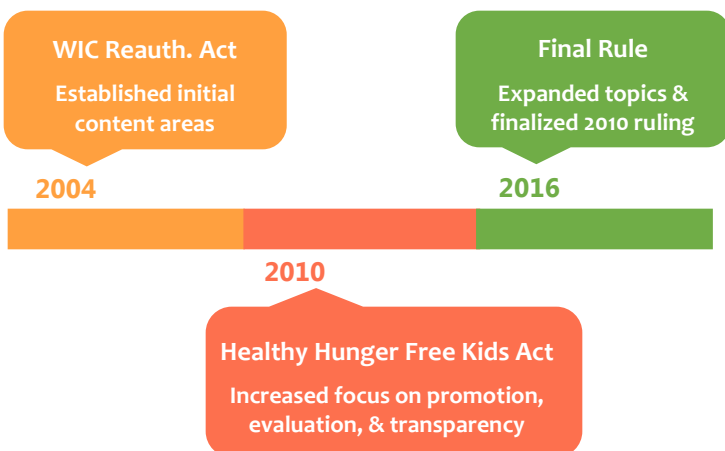


Increased Veggie & Fruit Intake at School



Lower Risk of Student Obesity

## Legislative Timeline



## FEDERALLY-MANDATED POLICIES

A series of legislative acts have mandated that public districts, charters and private schools participating in federally sponsored nutrition programs enact Local Wellness Policies. The 2016 Final Rule requires that the following topics be included in Local Wellness Policies by June 30, 2017:

- Nutrition Education & Promotion
- Physical Activity
- Nutrition Standards for all Foods Available in School
- Food and Beverage Marketing
- Public Involvement & Leadership
- Evaluation and Updates to Wellness Policy



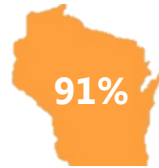
## WISCONSIN LOCAL WELLNESS POLICY EVALUATION

In 2016, we began evaluating Local Wellness Policies from all Wisconsin public districts and independently-authorized charter schools that participate in federally sponsored nutrition programs. We evaluated policies for:

1. Language addressing the 2004 and 2010 federal mandates (**this page**)
2. The presence of best practices to promote child health (**next page**)

### 2004 AND 2010 FEDERAL MANDATES

The picture graph below represents the percentage of public districts and charter schools that partially or fully addressed each 2004 & 2010 mandate. Your individual district results are below under LOCAL DATA FOR ACTION.



#### Statewide Coverage

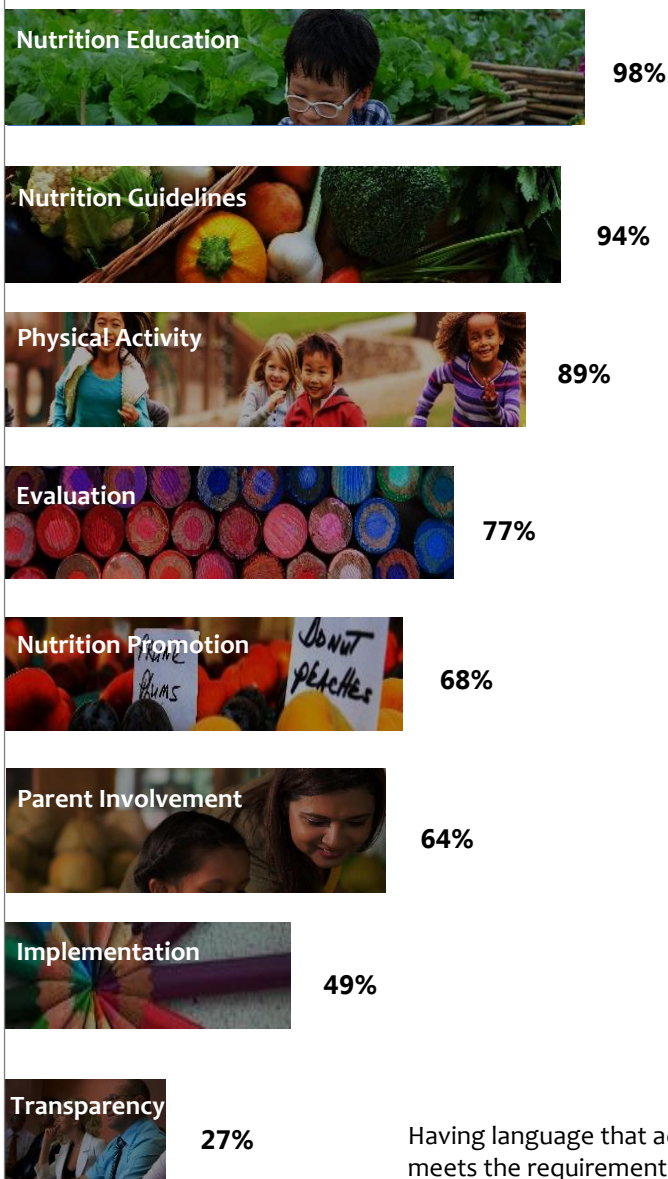
We evaluated 401 of the 440 public districts and independently-authorized charter schools



#### Updates after 2010 Rule

2012 was the average year of most recent policy revision statewide

### STATEWIDE SNAPSHOT



### LOCAL DATA FOR ACTION

#### DEFOREST AREA SCHOOL DISTRICT

Does your policy include language that partially or fully addresses the 2004 & 2010 mandates?

	Not Addressed	Partially or Fully Addressed	
		<input checked="" type="checkbox"/>	Nutrition Education
		<input checked="" type="checkbox"/>	Nutrition Guidelines
		<input checked="" type="checkbox"/>	Physical Activity
		<input checked="" type="checkbox"/>	Evaluation
		<input checked="" type="checkbox"/>	Nutrition Promotion
		<input checked="" type="checkbox"/>	Parent Involvement
		<input checked="" type="checkbox"/>	Implementation
		<input checked="" type="checkbox"/>	Transparency

Your district's Local Wellness Policy was last revised in year **2012**

Having language that addresses a 2004 or 2010 mandate does not mean your policy meets the requirements of the 2016 final rule. To ensure your policy is 2016 compliant, visit: <https://dpi.wi.gov/school-nutrition/wellness-policy>



## RESEARCH-BASED BEST PRACTICES: BEYOND THE MANDATES

In addition to the federal mandates, we evaluated policies for research-based best practices that support child health. Far more comprehensive than the federal mandates, the best practices are intended to acquaint districts with other ways they can supplement and enhance existing policies and procedures. We evaluated policies for breadth and strength of language (defined below) used to address 74 best practices categorized into 6 content areas.



Content Areas	Examples of Best Practices ( <a href="#">complete list on our website</a> )
<b>Nutrition Education</b>	Mandate nutrition education at each grade level and link to the school food environment (field trips, taste tests, etc.)
<b>School Meals</b>	Comply with federal nutrition meal programs and USDA guidelines, address cafeteria climate, and include FRP meal guidance for families
<b>Competitive Foods</b>	Implement standards for foods sold and served outside school meals (including class celebrations, fundraising, vending)
<b>Physical Education &amp; Activity</b>	Require physical education at each grade level, build physical activity into other curricula, and include families in school-based events and activities
<b>Wellness Promotion</b>	Promote nutritious food and physical activity, limit marketing to USDA guidelines, and encourage staff to model healthy behaviors
<b>Implementation</b>	Have an active and well-rounded wellness committee, evaluate the policy, and involve the community, including families and students

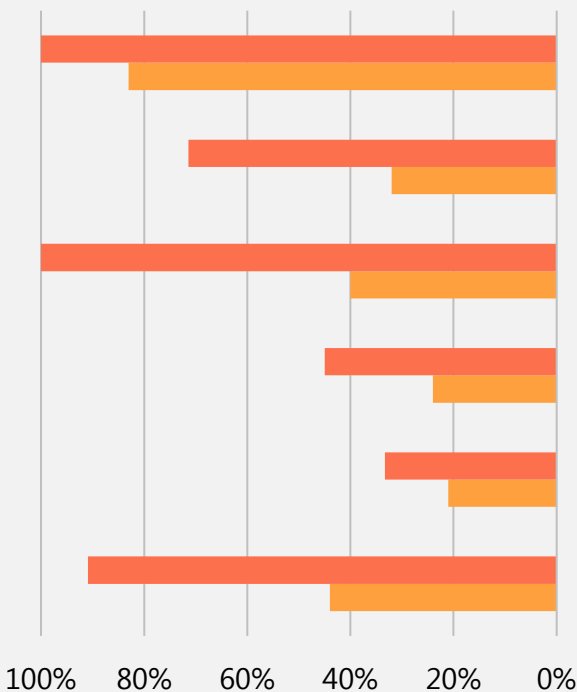
## LOCAL DATA FOR ACTION

Comparison of DeForest Area School District with all Wisconsin Districts and Independently-Authorized Charters

### BREADTH

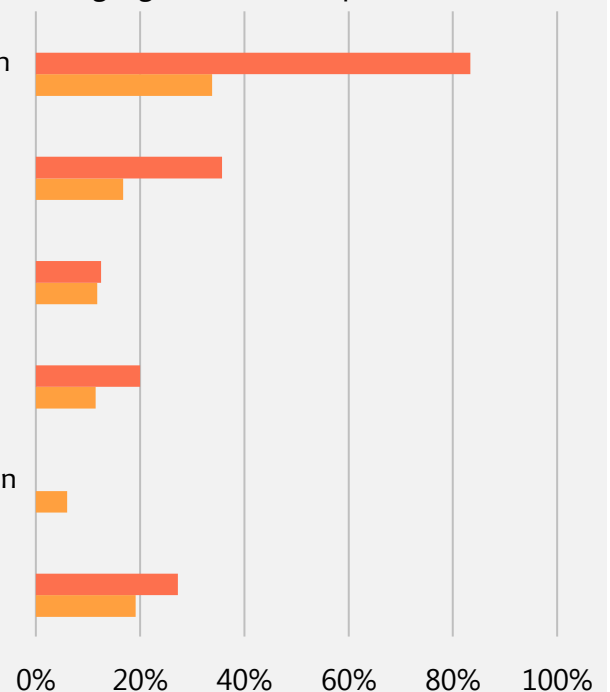
Represents the percent of best practices addressed in a content area. Higher scores reflect more comprehensive policies.

■ District  
■ Statewide



### STRENGTH

Represents the percent of best practices that are required. Higher scores reflect language that is more specific and direct.



## The Wisconsin Obesity Prevention Initiative (OPI)

The Wisconsin Obesity Prevention Initiative (OPI) works to build healthier communities for children and prevent childhood obesity. We aim to improve childhood health because it is foundational to academic achievement, socioemotional development, and lifelong health. Together with local and statewide partners, we offer coalition support, health data for action ([WI Health Atlas](#)), a menu of evidence-based health promotion strategies ([Mobilize for Health](#)), and connections to a statewide network of partners committed to action ([healthTIDE](#)). As part of ongoing health-related policy surveillance, we continuously evaluate Local Wellness Policies and other policies related to child well-being. OPI is funded by the Wisconsin Partnership Program at the UW School of Medicine and Public Health.

### Visit us online for more data and action resources!

To see more results, including graphs and charts you can use in your districts and schools, please visit our website: [wihealthatlas.org/lwp](http://wihealthatlas.org/lwp)

#### What you'll find:

- Data to spur action in your district
- Model language from WI policies
- Resources to enhance your policy
- Descriptions of all federal mandates and 74 Best Practices



**Next steps** We are currently evaluating wellness policies from all private schools that participate in federally sponsored nutrition programs. Beginning in September 2017, we will evaluate policies that have been updated to comply with the 2016 final rule.

### Thank you!

To all the districts and charter schools that shared their policies with us; WI Team Nutrition at the Department of Public Instruction; and the student researchers of the Obesity Prevention Initiative.

Without your support, this work would not have been possible.

### Our methodology

Interested in how we made evaluation decisions about federal mandates and best practices? Visit us online to read details of our evaluation, including the criteria we used for computing scores.

### Limitations of our evaluation

Every evaluation has limitations. Although we tried to capture a wide breadth of language, to ensure reliability of coding and efficiency among our researchers, we reviewed the written local wellness policies for specific, previously established content. We did not review other written policies or procedures, which means that scores may not reflect all the healthy things a district may be doing outside of their local wellness policy. So, the scores for your district, and statewide, may be conservative.