



Strategic Planning with Tyler Norris  
Monday, September 10, 2007  
Thompson Alumni Center on the campus of UNO  
Activate Omaha Kids  
Synopsis

Executive Committee Members Present: Mary Balluff, Cristina Fernandez, David Filipi, Magda Peck, Kerri Peterson, Adi Pour, Marty Shukert, Jeffry Strohmeyer, Lori Swirzinski, Amy Gibson (for Tom Tonniges), Jennifer White

Executive Committee Members Not Present: Larry Brown, David Finken, Nancy Nielsen

Staff Present: Mikki Frost, Molly O'Dell and Diane Roberts

Guests: Beth Llewellyn and Kayte Tranel

### Welcome and Introduction

Molly O'Dell briefly summarized the work of the ACTIVATE OMAHA KIDS Executive Committee to date and introduced Tyler Norris to the group.

### **1. Objectives for the day**

When discussing the days' objectives, Tyler, responding to Molly's opening reflection from the correspondence of Martin Luther King, helped the group reflect on the differences between a program or project and a movement. It was agreed that a movement involves "distributive leadership and ownership." A movement supports sustained change by people taking aligned action in all the settings where they are in the course of their daily work – not just via the planned work of a collaborative partnership. This is our hope... that Activate Omaha Kids was destined to become a movement, with distributed ownership. The desired outcomes for our mornings' work were to:

- ❖ Codify the work to date of Activate Omaha Kids in order to advance the work of the committees
- ❖ Challenge ourselves, our current thinking and our approach to the problem of childhood obesity
- ❖ Move ACTIVATE OMAHA KIDS to the next level, concentrating on areas of focus that will make the most difference
- ❖ Engage more partners
- ❖ Refine/enhance ACTIVATE OMAHA KIDS' structure – develop a resource plan
- ❖ Engage the community through report out at 12:30 today

## 2. Revisiting the vision from the Decision Accelerator

*In 2011 Omaha is nationally recognized as a collaborative model achieving measurable improvement in fitness and nutrition of children.*

- ❖ 2011 – 5 years out
- ❖ Nationally recognized –
- ❖ Measurable – clarity through metrics
- ❖ Fitness – increase physical activity, healthy outcomes versus weight
- ❖ Nutrition

The group agreed that the vision should be revisited to tell the story of where we hope to go by 2011.

*Tyler asked if Omaha is wildly successful in this initiative, what would be the outcomes. For example, real policies, real changes, real changes to the environment.*

Visions – On the first day of school, Ray and his sisters meet up with friends on the sidewalk and walk to school aided by lights, pedestrian walks and cross guards that wrap their passage. Each completes a self fitness screen and plan before days' end that is ready for entry into the e-health record repository. A new lunch room program has been launched through nutrition reform. 30 minutes of physical activity were integrated into the day to impact health curricula design. Recess was a welcome break with new trails and activity park land. Moms and dads joined to participate in healthy family time.

- A family flies into the airport and immediately notices how everyone is so active and how many healthy eating places are available.
- Activate Omaha Kids would be a commonplace term in every home as a reliable resource.

**How does a society who created a problem (childhood obesity) now come up with a pill (panacea) to fix the problem? We have a need to return to a point in time when there was no problem.**

In 2011, the vision for Omaha should include:

Clinically:

- ❖ BMI measured and charted in every primary care office
- ❖ Physical protocols are in place for prevention and treatment of weight issues
- ❖ Diagnosis of obesity is reimbursable
- ❖ Prevention policies are in place
- ❖ Pediatricians, family physicians and non-physicians form a collaborative team, creating a clear, uniform path to treatment (one stop shop)
- ❖ Breastfeeding is supported
- ❖ Providing curricula in medical schools, colleges, nursing schools and allied health that addresses obesity prevention, health promotion
- ❖ Access to healthcare is easy and affordable
- ❖ Return to predisease state

Public Policy:

- ❖ Decisions made, first and foremost, for the good of children, i.e. child impact studies

- ❖ Ask leading questions – engage Omaha’s community leaders to ask for policy change
- ❖ Resource allocation – money dedicated to health, specifically to increased physical activity and nutrition

#### Environment:

- ❖ Most children would walk to school
- ❖ Trails would connect to each home, libraries, shopping and desirable destinations
- ❖ Parks will be full of children – informal places to play
- ❖ Neighborhood centers have increased activities for kids and parents
- ❖ Physical activity is the norm
- ❖ Many destinations – parks, centers neighborhood spaces
- ❖ Transportation connecting to destinations
- ❖ Bike racks
- ❖ Wide range of foods available, fruits and vegetables affordable

#### Schools:

- ❖ Physical activity every day for every child at schools
- ❖ Recess or free play every day
- ❖ Wellness plans exist at every school for staff
- ❖ All kids playing – not only elite athletes
- ❖ After school curricula and wholesome snacks are the norm for after school programming
- ❖ Healthy meal options exist at every school
- ❖ Integration of nutrition and physical activity into the curricula

#### Ethos:

- ❖ Kids walking has doubled, and the activity has spread to parents
- ❖ Physical activity is the norm
- ❖ Visiting families want to emulate Omaha activity
- ❖ Safety is not an issue
- ❖ No health disparities
- ❖ Everyone can dine well

#### Media:

- ❖ Omaha is highly ranked in the Youth Risk Behavior Surveillance System
- ❖ Activate Omaha Kids, Building Bright Futures and Healthy Omaha are featured stories found in the New York Times on community collaboratives
- ❖ Local leaders can demonstrate the ROI to the business community
- ❖ ACTIVATE OMAHA KIDS is household word

#### Neighborhoods:

- ❖ Healthy food options exist in every neighborhood, restaurants included
- ❖ Community gardens are increasing
- ❖ Farmers’ Markets abound

#### Immigrants/Minorities:

- ❖ Involvement with leaders in immigrant communities
- ❖ Disproportionate resources are shared to help immigrants
- ❖ Yellow bikes/accessible low cost transportation
- ❖ No disparities in health among minorities
- ❖ Perception of communities change – North and South Omaha considered safe
- ❖ Foster care and kids with disabilities included

#### Faith communities:

- ❖ People are walking to church
- ❖ Consistent messages about wellness are heard at church
- ❖ Tri-faith – effort, know, respect
- ❖ Health ministries

#### Workplaces:

- ❖ Wellness programs at work
- ❖ Business community engaged and support work initiatives

#### Information Systems

- ❖ YRBSS in all schools
- ❖ Surveillance systems in place
- ❖ Technology used to support physical activity

### **3. Identifying Our Assets**

We need to identify those strengths in our community upon which we can build: assets, resources, groups, initiatives. We need to identify individuals that can become involved and committed. ACTIVATE OMAHA KIDS would benefit from further considering how we can engage them to join us. Our community has in its midst – high profile, significant players who possess the power to leverage other community leaders. This senior leadership hub revolves around Healthy Omaha. The ministerial alliance, which includes the African American Empowerment Network, is also important. We may seek, in time, work with a lobbyist. The group came up with many assets within the Omaha community. Among them are:

- ❖ Family – BoysTown, Childrens Family Foundation, Nebraska Family Voice
- ❖ Business /Workplace – Healthy Omaha, Welcom, UP, Chamber of Commerce, strong business community w/ worldwide influence
- ❖ Clinical – Existing weight management programs, i.e. Healthy Families, Children’s Methodist, strong physician organizations, i.e. NeAAP, NeAAFP, 2 medical schools, many schools of nursing, Omaha Healthy Start, Nebraska Nurses Association
- ❖ Neighborhoods – Chamber of Commerce, Neighborhood Alliance, YWCA, YMCA, Girls, Inc.

- ❖ Built Environment – Parks & Recreation Dept., Destination Midtown, Omaha by Design, North Omaha Development Organization, Papio Resource, w/o mountains and oceans, attributes of the area need to be enhanced
- ❖ Food Environment – Community gardens, ConAgra, Restaurant Association, food distribution/Grocer’s association, strong agricultural presence
- ❖ Public Policy – CEOs, Mayor, Medicaid w/ educational programs, Building Bright Futures, Nebraska Children & Family Fund
- ❖ Minority/Immigrant Population – Building Bright Futures, African-American Empowerment Network, UNMC Minority Outreach Office
- ❖ Transportation – Public Works, MAPA, MAT, trails (Park Department and NRD)
- ❖ Media – Cable TV sponsors, kid specific websites, healthy news tips, billboards w/ clever lines, like Kermit, Hollywood star, Readers Magazine
- ❖ Information Systems – Douglas County Health Department, College of Public Health, Simply Well

#### 4. Plank Presentations – Where Are We?

##### *Nutrition*

4 goals

- ❖ Increase by 10% the number of children and families who know and understand the principles of healthy eating
  - **Objective** – increase the number of nutrition interventions/educational curriculum that are adapted to meet the needs of children and families and are reflective of the local cultures
  - **Strategies** –
    - Food preparation education for low income families
    - Club Possible expansion
  - **Measures of Success** – to be determined
  - **Resource Needs**
    - Curriculum
  - **Social Marketing Message** – to be determined
- ❖ Increase by 5% the environmental and community supports available for eating healthy foods, including breastfeeding support, healthy foods available at events, etc.
  - **Objective (2a)**– Increase the number of healthy foods available at community events and in community resources
    - **Strategies**
      - Access to affordable fruits and vegetables
      - Summer free-lunch programs
      - Full service grocery stores available in all neighborhoods

- o **Objective (2b)** – Implement a social marketing campaign with awareness c culturally appropriate messages designed to educate and motivate children and their families to eat healthy
    - **Strategies**
      - o Social marketing about nutritious foods
      - o Social marketing about the value of breastfeeding
      - o Social marketing within grocery stores
  - o **Objective (2c):** In supports for new mothers to begin and to continue to breastfeed
    - **Strategies** – to be determined
    - **Measures of Success** – to be determined
    - **Resource Needs** – to be determined
    - **Social Marketing Message** – to be determined
- ❖ 100% of all metro schools and childcare centers will have wellness policies and programs that support healthy eating
- o **Objective (3a):** Increase the number of schools implementing age appropriate curricula and opportunities designed to promote lifelong health eating
    - **Strategies**
      - o Using the cafeteria as a learning lab
      - o Integrating nutrition education into the classroom
  - o **Objective (3b):** Increase the number of policies for healthy food choices in schools, after school programs and childcare
    - **Strategies**
      - o Club Possible expansion guidelines
      - o Policies in place for sweetened beverages
    - **Measures of Success** – to be determined
    - **Resource Needs** - to be determined
    - **Social Marketing Message** - to be determined
- ❖ All healthcare systems and providers will support healthy eating for children and families
- o **Objective (4a):** Increase the number of health care systems and providers who support and promote healthy eating
    - **Strategies**
      - o Address mental health component of childhood obesity
      - o BMI in doctors’ offices
      - o Breast feeding promotion
      - o Team based education and referrals to improve knowledge and behavior re: portion size, sweetened beverages and choices
  - **Objective (4b):** Increase the supports for new mothers for the initiation and duration of breastfeeding
    - **Strategies** – to be determined
    - **Measures of success** – to be determined
    - **Resource needs** – to be determined
    - **Social Marketing Message** – to be determined

### *Physical Activity*

3 goals

- ❖ Launch a social marketing campaign to increase awareness for the need and value of physical activity throughout the community
  - **Objectives**
    1. By September 2007 the PAP will have a list of all possible resources needed and potential partners/funders that could help provide those needs
    2. By October 2007 the PAP will have narrowed down the list based upon feedback from the PAP and the Executive Committee
    3. By October 2007 the PAP will have a potential grant to submit for funding for the launch.
    4. By November 2007 the PAP will begin discussion with potential partners about participating in our social marketing campaign (give/get).
    5. By November 2007 the PAP will identify baseline group (for outcome measurement).
    6. By December 2007 a simple questionnaire will be developed to establish baseline data from registration forms.
    7. By December 2007 the PAP will have a final resource/needs list and a final partner list with committed partners.
    8. By December 2007 the PAP will have subcommittees for the launch.
    9. By February 2008 the marketing campaign to increase awareness will be visible.
    10. By June 2008 the photo contest will be launched in Omaha area after school programs.
  - **Strategies**
    - Subcommittees
  - **Measures of Success**
    1. By December 2008 there will be at least a 30% increase in awareness of the need and value of physical activity in the baseline group.
  - **Resource Needs**
    1. Disposable cameras & development of film
    2. Community facilities to display submissions
    3. Linking contest with physical activity events occurring in early spring or late spring or early summer
    4. Prizes for winners
    5. Advertisement – news and radio
    6. Print materials
    7. Food
    8. Display materials
    9. Funding
  - **Social Marketing Message**
- ❖ Goal 2 – Increase physical activity in established community programs
  - **Objectives**
    1. By September 2007 representatives of the PAP will offer inservices to at least 2 directors of after school programs.
    2. By November 2007 a simple questionnaire will be developed to establish baseline data from Millard and OPS after school programs.
    3. By November 2007 a preliminary calendar will be established for potential dates and topics to provide education to staff
    4. By December 2007 the PAP will have a preliminary give/get plan for Millard and OPS after school programs.

5. By January/February 2008 the PAP will begin meeting the needs of the Millard and OPS after school programs – staff education through monthly presentations & resources for parents
  6. By June 2008 there will be at least a 30% increase in the number of minutes of PA offered at these community programs
- **Strategies**
  - **Measures of Success** – By June 2008 there will be at least 39% increase in the number of minutes of PA offered at community programs
  - **Resource Needs**
    1. Potential speakers
    2. Gathered existing resources
  - **Social Marketing Message**
- ❖ Goal 3 – Increase the number of children who participate in hour of physical activity each day
- **Objectives**
    1. By November 2007 the PAP will have a baseline activity level established
    2. By January 2008 the PAP will develop a PA recording instrument (booklet, journal, etc.).
    3. By March 2008 the PAP will offer a Kickoff event in combination with the announcement of the photo contest winner.
    4. By March 2008 the PAP will introduce the developed recording instrument.
    5. By November 2008 there will be at least a 25% increase in the number of children who participate in one hour of physical activity every day.
  - **Strategies** – the PAP has decided to wait to work on Goal #3 until Goals #1 and #2 are better established and progress has been made on both.
  - **Measures of Success**
  - **Resource Needs**
  - **Social Marketing Message**

### *Physical Environment*

Overriding goal – Omaha’s physical environment should provide children and their families with settings that encourage physical activity and restore daily activities that were once engaged in routinely.

- ❖ **Objective 1** - Omaha should create environments that encourage children and their families to participate in physical activity on a regular basis.
- ❖ **Objective 2** – Omaha should remove obstacles/barriers that prevent or discourage routine physical activity.
- ❖ **Objective 3** – Omaha should create a community ethos that supports an environment that encourages physical activity.

### *Social Marketing*

The **mission** of the Social Marketing Plank is to create an engagement and awareness of the initiative including branding, marketing, and public relations both internally within the collaboration and externally to engage the community in eating healthier and increasing daily activity.

### **Target population**

- a. Parents, teachers
  - b. Community at large
  - c. Populations with limited resources
  - d. Day care providers
  - e. Physicians
- ❖ Goal 1. By 2011, create a solid, recognizable brand for ACTIVATE OMAHA KIDS (Collaboration)
    - Objective 1: Create a logo, tagline, and website branded with ACTIVATE OMAHA KIDS
    - Objective 2: Create an internal message/information system to inform stakeholders of progress
      - Continue newsletter once a month
      - Develop speakers bureau
    - Objective 3: Build out a marketing plan for methods to effectively reach target audiences.
    - Objective 4: Support of the planks' social marketing needs
  - ❖ Goal 2: By 2011, create a solid messaging campaign around physical activity, nutrition, and physical environment (Planks)
    - Objective 1: Obtain 2-3 core messages from the physical activity, nutrition, and physical environment planks
    - *Objective 2: Conduct an environmental scan of existing efforts to promote healthier eating and increased physical activities*
    - Objective 3: Coordinate and implement a social marketing campaign with awareness culturally appropriate messages designed to educate and motivate children and their families to eat healthy and be active
      - social marketing about nutritious foods
      - social marketing about the value of breastfeeding
      - social marketing within grocery stores
      - social marketing about increased physical activity levels in children and families
      - social marketing about places to be physically active
      - focus on prevention

### ***Evaluation***

- ❖ **Goal:** To work collaboratively with the Executive Committee, the Planks, and the Omaha area community to assure effective evaluation as an integral part of the ACTIVATE OMAHA KIDS initiative
  - **Objectives**

- To champion evaluation as an up front and continuous part of this initiative that fosters accountability and maximizes impact
- To encourage the design of sound, effective and participatory approaches to evaluation
- To oversee the timely execution of reliable and robust evaluation methods
- To promote the dissemination and utilization of evaluation results by the fullest range of stakeholders
- **Strategies**
  - Structure the work to connect evaluation “ambassadors ” from each plank, work iteratively with the Executive Committee
  - Generate core evaluation questions for future design(Draft 1 Qs)
  - Work responsively to assist the initiative with research and community expertise: 2007 Summer Inventory, “White Paper”
  - Frame boundaries and parameters of the overall evaluation (Draft Matrix)
    - Theory of Change, Logic Model: how does it work?
    - Levels – within each plank, cross-plank, overall ACTIVATE OMAHA KIDS, larger community
    - Stages (of Logic Model): input/process, output/outcomes/results, impact/attribution difference
- **Initial Measures of Success**
  - Organizational design/membership/staffing which integrate evaluation into each plank and the Executive Committee from the start and throughout
  - Comprehensive, cohesive set of evaluation questions generated to guide the design and implementation
  - Early and active engagement and participation of stakeholders in evaluation design, interpretation of findings to assure maximum use of results
  - Procurement of seasoned, valued research entity to conduct timely, effective evaluation, in partnership with the initiative
- **Resource Needs**
  - Too early to determine, depending upon scope and breadth
  - Will require dedicated dollars, not volunteer effort, to get best results
  - Recommend investment in local assets, talents when possible

## ***Resource***

3 goals

- ❖ Goal 1 – Serve as a resource to funders in identifying appropriate funding opportunities related to childhood obesity

- Objective – Develop criteria for funders to apply in evaluating funding opportunities for childhood related programs/activities/environments
- Strategies – Create “good housekeeping seal of approval” from ACTIVATE OMAHA KIDS
- Measures of success
  - ACTIVATE OMAHA KIDS seen as credible resource for funders in evaluating funding opportunities
  - ACTIVATE OMAHA KIDS assist in matching funders with programs
- Resources Needs
  - Leadership
  - Expertise on committee
  - Volunteers
- Social Marketing Message
- ❖ Goal 2 – Serve as a resource to planks and ACTIVATE OMAHA KIDS in meeting resource needs
  - Objectives
    - Develop a funding strategy to meet the resource needs of the planks
    - Develop a strategy to attract new funding partners for sustainability of ACTIVATE OMAHA KIDS
  - Strategies
    - To be determined
  - Measures of success
    - The funding strategy is implemented by planks in meeting their resource needs
    - Sufficient funding sources committed for sustainability
  - Resource Needs
    - Leadership
    - Expertise
    - Volunteers
- ❖ Goal 3 – Serve as resource to childhood obesity related community programs seeking funding
  - Objectives
    - Develop prerequisites for programs seeking funding
  - Strategies
    - Inservice for programs on grant writing, fiscal accountability
    - Perform an environmental scan of funding opportunities for childhood obesity, identifying requirements and focus of funders
    - Referral of funding opportunities to appropriate program
  - Measures of Success
    - ACTIVATE OMAHA KIDS seen as a credible resource for programs seeking funding for childhood obesity related activities
  - Resource Needs
    - Leadership
    - Expertise
    - Volunteers

## 5. Plank Chair’s AHA’s at the end of Discussion

## **Nutrition**

More people, more diversity of thought may be helpful.

In order to create more diversity of thought, it would be advantageous for members to come from different community sectors, i.e. business, clinical, schools, government, etc.

If we have physical activity team complemented by a built environment, do we not need to have the nutrition team completed by a focus on the food environment?

**Tyler response: Should the food environment piece be addressed by the nutrition plank or as a subset of physical environment, or separately?**

## **Physical Activity**

There are no clinical settings targeted within any of these goals.

In order to build on current resources, it will be important to recognize the necessity of a social marketing message.

It will be necessary to add other schools to our Goal #2.

When we are addressing the lack of physical activity in schools, it will be important to address the obesity of teachers (as role models) and the entire curricula.

What policy (ies) need to change in order to increase physical activity in existing programs.

**Tyler response: Address the crafting of messages through a social marketing focus.**

## **Physical Environment**

Many of the current members of this committee are individuals involved in public works. We could benefit from city leaders and community health leaders.

Are there wildly successful global lessons that could be brought to the city? What are some long term goals and policy changes that could be implemented in Omaha?

Marty Shukert is a valued asset for this committee given his expertise and passion.

Placemaking (creating places where people enjoy meeting) leads to increased social interactivity and conviviality.

Are there features of technology that could place food and physical activity into the physical/built environment through geographical mapping? For example, Kaiser Permanente is using local farmers/food providers in their own lunchrooms.

## **Social Marketing**

How do we create consistent messaging to energize the targeted population in a cost-effective way?

We have no “so what” message. How can we create relevance and positive reinforcement and link it to prevention?

### **Evaluation**

How well did we collaborate?

What did not work or how did we fail?

What can we learn and share?

**Tyler response: The key is participatory evaluation. Look into Photovoice.**

### **Resource**

The committee is in a current state of transition, lacking a chair.

Beth Llewellyn explained how the catalyst fund at Alegent is aligned to fund some the initiatives which will bubble out of the planks.

There have only been 2 meetings.

It may be important to link with a social marketing message as to why funding is important.

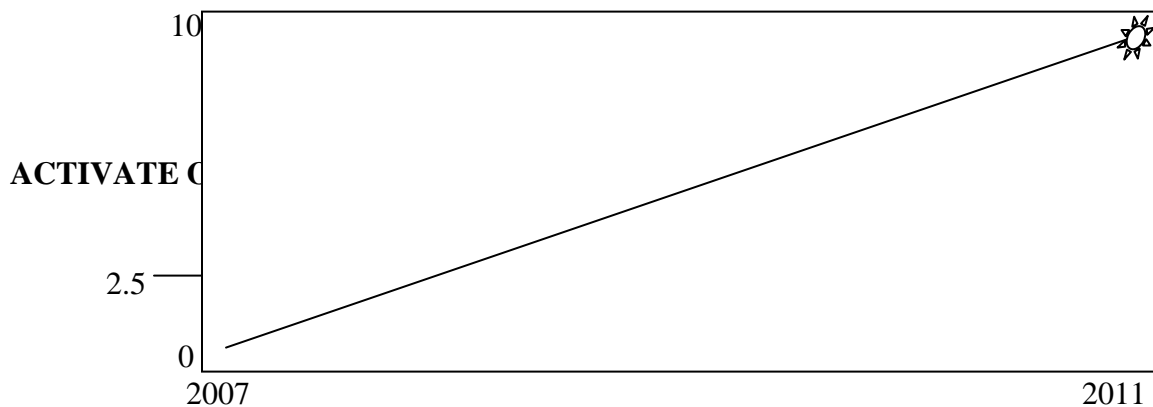
Can we survive without fundraising?

Alegent is primarily serving as a champion for the cause.

**TN: Without leadership, we lack efficacy. Consider re-adding “funding” to committee name or develop capacity within the organizational structure. There are 2 groups present: funders and those looking for funding.**

## **6. Building a Strategic Plan Identifying Areas of Focus**

Tyler illustrated where we need to “go” with the following graph. Ten is the desired outcome of our vision in 2011. The things that we do to address the problem and those that could disproportionately affect our results, he described as “trendbenders.”



As a group, we decided we were at a 2.5 toward realizing our vision.

Tyler asked the group to describe what would be needed it take to get to a 10.

What can we do that is really profound and leveraged?

Could we realize our vision if we went home and did nothing? (All said “no”)

What can Activate Omaha Kids do to be a “trendbender”?

What are our trendbenders? In the next 6 months, what should be our focus? The participants were asked to identify 2 areas that if we directed a disproportionate amount of resources would bend the trend. The answers were then grouped into 3 areas:

A. Develop political will

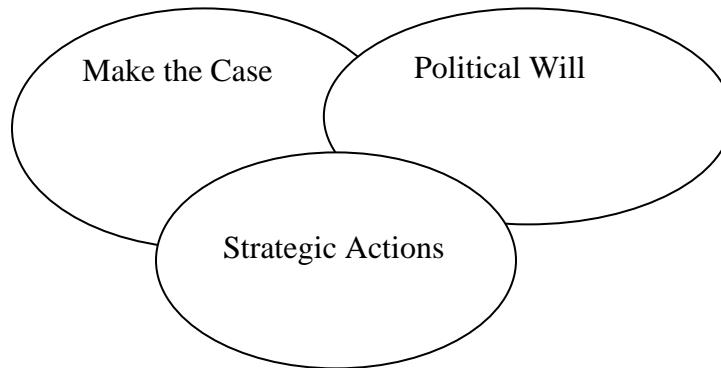
1. CEOs desire to decrease insurance costs, increase community attractiveness and focus legislation
2. Engage CEO's from Healthy Omaha to enhance the work of ACTIVATE OMAHA KIDS to leverage influence and funding
3. Resources/\$/Incentives
4. Getting funding to develop great ideas to present to local government to make real policy change
5. Leverage proven/current assets into unified school praxis, public policy, faith community and family wellness
6. Expand leadership to CEOs and movers of Omaha

B. Engage in strategic activity

1. Expansion of Club Possible
2. Breastfeeding becomes the norm
3. The media creates the message that all demographical groups admire increased physical activity.
4. The built environment fosters physical activity, and provides for the well-being of children.

C. Build the case

1. Make a strong case through a knowledge base, political will and social strategy to persuade and push an agenda surrounding issues of childhood obesity.
2. Conduct a comprehensive evaluation to determine full scope of the problem in Omaha along with the findings of what families perceive as the information/resources they would need to “bend the trend” followed by a social marketing campaign to disseminate this information to the public at large.



All areas must be integrated.

Response:

1. Make the Case: How is childhood obesity affecting our community? Why should we care?
2. Strategic Actions: What can we do about it? Are we as a community strategically addressing the problem? Are our efforts coordinated? Do they impact all levels of the ecological model? How can we keep the community engaged? Are we seeing results?
3. Political Will: Will our community come together to provide the leadership, manpower and resources to address the problem? How can we create, leverage and sustain this political will in the short term? In the long term?

The conclusion was that we have appropriately been focused on making the case and strategic action through the planks. To move to the next level, the focus must be upon building the political will. To do this we must:

1. Broaden/diversify the plank committees
2. Address the food environment, either as a subset of Nutrition or Physical Environment or as a new committee
3. Build on the Activate Omaha/Activate Omaha Kids branding
4. Find leadership for the committee, Funding and Resources
5. Engage influential leaders; foster connection with Health Omaha; investigate **steering** committee
6. Plank committee strategic plans by December, 2007

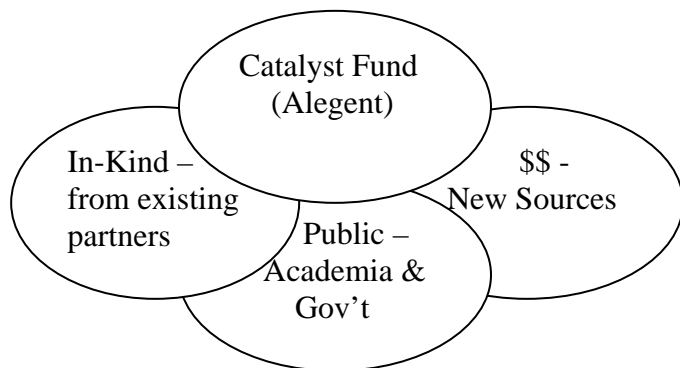
## 7. Sustainability of ACTIVATE OMAHA KIDS-Leadership and OHCP

**Background:** The Executive Committee was formed as a temporary structure, originally committing to serve six months and recently recommitting to serve an additional six months. Their members consist of several Omaha physicians, committee chairs, a Millard Public School nurse and staff provided by Alegent Health. The “steering committee” has not been created. Alegent Health made a multi-year commitment to the issue of childhood obesity primarily through 2 vehicles – the 3-member staff and the catalyst fund. The catalyst fund will support the efforts of ACTIVATE OMAHA KIDS, but other funders will be needed to meet the resource needs of the planks.

**Umbrella:** Our Healthy Community Partnership has reaffirmed its position in the Omaha community as being a catalyst. With the development of Healthy Omaha – Top Five in Five initiative – a joint effort of community leaders to address the wellness of the Greater Omaha area, another powerful player is identified. Activate Omaha is a RWJF funded entity in the 4<sup>th</sup> year of a 5 year grant addressing the increase of physical activity in the built environment. Activate Omaha Kids was formed to address childhood obesity.

**Strategy:** Potentially 3 steps

1. Resolve issues to bring ACTIVATE OMAHA KIDS under OHCP formally; staffing; capacity of OHCP
2. Recognize the value of in kind partnerships, volunteerism (not all from Alegent).
3. Pursue additional funders (in addition to Alegent) to finance the ACTIVATE OMAHA KIDS strategic plans.
4. Pursue other partners (academia and government)



There may be 2 other players within the Omaha community who could play a large part in the leadership equation: Academia: 2 large medical schools – UNMC, CUMC, CU, UNO, and other universities and Government (although possibly fiscally limited). The key element here may be the addition of the Healthy Omaha – Top Five in Five initiative.



## Report Out Summary

**The intent of the Report Out to the community and plank members was to communicate the essence of the morning's work with Tyler Norris.**

After lunch, invited plank members attended to hear what progress had been made during the strategic planning session. They were welcomed and introductions were made. Tyler provided a brief synopsis of our morning's work. One of the first questions asked was if ACTIVATE OMAHA KIDS was a program, a movement or an organization? Although the group agreed that perhaps we were not yet a movement that was our direction. Tyler described Activate Omaha Kids as a seminal movement and as such, helped specify requirements for moving it to the next level, with the intention of building distributive ownership of healthy living as an expectation for everyone in the living of their daily lives.

Tyler described the four areas of emphasis during the strategic planning session:

- Visioning/assets
- Committee Learning
- Trendbenders/Focus Areas
- Governance/Finance

Mikki reported on the vision and assets activities: The elements of the vision in 2011 include: Visitors would see kids walking to school, where it is safe to walk or ride their bicycles. Physical activity and nutrition are integrated into the curriculum. After school programs build upon physical activity and healthy eating. Parents participate with their children in physical activity. The ethos of the community is that it is cool to be physically active. Trails, sidewalks and public transportation are interconnected and lead to shopping and other desirable destinations. Visits to the medical home include BMIs along with messages to parents about prevention. Informal play is prevalent and parents join in play with their children. Governments consider the well being of children in their laws and legislation. The workplace provides education for parents. Fruits and vegetables are available and affordable. Community gardens abound. The faith community is supportive and involved. The disparities in health care availability for minorities no longer exist.

The committee chairs reported on what they learned from the morning on behalf of their planks:

- ❖ Place more focused attention on the “food environment”
- ❖ Spontaneous physical activity is hard to come by
- ❖ It is alright to mimic an existing program and improve upon it
- ❖ When trying to create a movement, it is alright to use different messages for different groups
- ❖ Must align the vision with a business plan
- ❖ We need to build upon existing community assets and talents
- ❖ Courage is needed to say that something is not going well

- ❖ “Funding” should again be added to the committee currently known as Resources or become a self supporting function
- ❖ Revisit our mission/vision

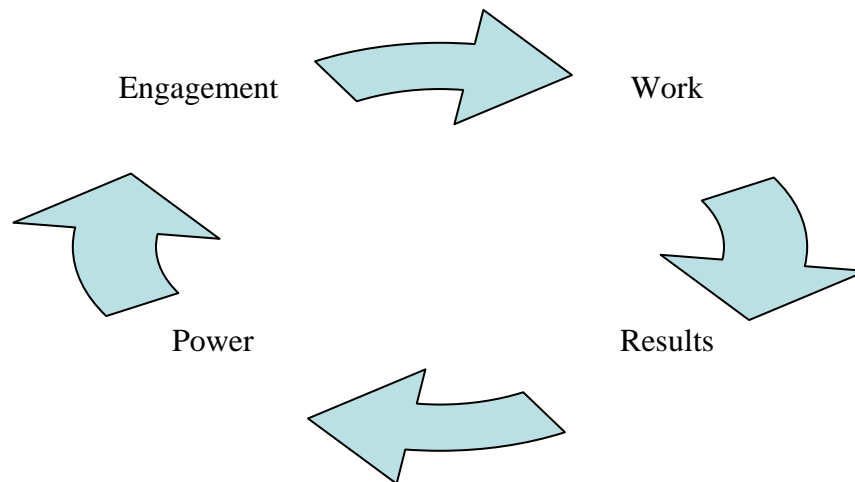
Trendbenders – Tyler defined “Trendbenders” as those actions which can actually create movement toward the desired goal.

- ❖ Recognize the importance of “doing something” – with visible results
  - As more information about the problem becomes available – make the case to the public
  - Know what needs to be done
  - Find the resources
  - Focus on acknowledging and work toward eliminating health disparities
- ❖ Political will is important to creating movement
  - Connect with leaders to move policy change
  - Omaha’s political action comes from 2 levels
    - Bottom-up – the voters can show muscles in action with programs – leaders are held accountable
    - Top-down – devoting money to be used for childhood obesity/health and fitness issues
  - ACTIVATE OMAHA KIDS should initiate an agenda, sell it to leaders and hold leaders accountable
- ❖ Celebrate the first big wins
- ❖ To be sustainable, ACTIVATE OMAHA KIDS needs to be a community effort
  - Re-invigorate the membership which was drawn from the Decision Accelerator
  - Be ready to ask community leaders to lead
  - Recognize the importance of the physical environment

What has worked in other communities and how do we implement those things that have been proved successful? (Visit the CDC sponsored website: [www.thecommunityguide.org/obese](http://www.thecommunityguide.org/obese) to follow progress of specific programs)

3 things that have absolutely worked:

1. Linking physical activity to the built environment and healthy eating to the food environment
2. 5 P’s as valid forces in movement toward community change:
  1. Partnerships – collaborative partnerships make for distributive ownership
  2. Promotions – Strategically marketing our message
  3. Programming – Some programs really work, like the Walking School Bus. Another CDC source for programming: Racial and Ethnic Approaches to Community Health (**REACH**) 2010
  4. Policy – Policy must change on four levels, neighborhood, school, medical home and worksite, plus legislation
  5. Physical Projects – connecting built and food environments
3. Community Engagement: When you have worked hard, you produce results, which in turn, will build power.



Ensure that Activate Omaha Kids is a power building organization.

Question 1. Are we on the right track? Answer: Tyler has said emphatically: YES!!!

Question 2. Where does Omaha stand in relationship to other community collaboratives?

Answer: Omaha is on a par with other communities and ahead of many. Experts are looking to Omaha.

To date, the plank activities have been primarily focused on building the case and identifying their strategic activities. By December, 2007 each committee will build upon the work of the Decision Accelerator to develop a strategic plan, with goals, strategies, timelines, measures of success and resource needs. As we move forward, the plank committees will continue to need administrative, research, communication, technical, evaluation and facilitation support. Alegent's commitment is a huge blessing and potential source of partial funding for plank activities.

Building "political will" will be necessary to fund and implement the strategic plans. Although the Executive Committee has recommitted to serve another six months, permanent leadership and infrastructure of Activate Omaha Kids will be necessary for sustainability. Negotiations with OHCP will continue to explore permanent organizations options.

Leadership and staff will need to continue to build relationships with key community and business leaders, as well as to work to align Activate Omaha Kids with other emerging initiatives in the community. Partnerships with government and business partners with committed resources will be necessary to build on these initial efforts.

The 3 broad areas for this movement's growth lie in:

1. Building the case: How is childhood obesity impacting Omaha's kids? Why should we care?
2. Strategic actions: What can we do about it? How are we addressing the problem? Are our efforts coordinated? Do they impact all levels of the ecological model? Can we keep the community engaged? Are we seeing results?

3. Political will: Will our community come together to provide the leadership, manpower and resources to address the problem? How can we create, leverage and sustain this political will in the short term? In the long term?

Attachments:

1. Tyler's resume
2. Questions to be answered with the "white paper"
3. Matrices