

Sullivan County Building Healthy Communities Needs Assessment

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Prepared for:
Sullivan County Public Health Services

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Staff Team

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I. INTRODUCTION

County Overview

Sullivan County is a rural county in Southern New York State, located southeast of Binghamton and southwest of Albany. The County borders Delaware County to the North, Ulster and Orange counties to the east, and the Commonwealth of Pennsylvania to the West.

According to the Census Bureau, Sullivan County had a population of 75,828 in 2009.¹ As estimated by the Census Bureau, the median income in 2006-2008 was \$48,873.² The population density in 2006 was about 79 residents per square mile, compared to 236 residents per square mile across the State.³

Demographics⁴

Age	
under 20	25.4%
20-34	19.0%
35-44	27.3%
45-59	21.9%
60 and older	19.6%
<i>Median age</i>	<i>39.7 years</i>

Race/Ethnicity	
White	83.5%
Black/African American	8.5%
Asian	1.3%
Native American	0.6%
Some other race	3.4%
Two or more races	2.7%
Hispanic (of any race)	11.6%

¹ U.S. Census Bureau, American Fact Finder. <http://factfinder.census.gov>

² Ibid.

³ NYS Dept. of Health.

http://www.health.state.ny.us/nysdoh/vital_statistics/2006/table02.htm

⁴ U.S. Census Bureau, American Fact Finder.

http://factfinder.census.gov/servlet/ADPTable?_bm=y&-qr_name=ACS_2008_3YR_G00_DP3YR5&-geo_id=05000US36105&-ds_name=&-_lang=en&-redoLog=true

Health Status⁵

According to the New York State Behavioral Risk Factor Surveillance System (BRFSS), about 65% of people in Sullivan County were either overweight or obese in 2008-2009, compared to about 60% statewide. In terms of healthy behaviors, the same survey found that about 29% of adults did not get physical activity in their leisure time, compared to only about 24% across the state. About 28% of adults in Sullivan consumed 5 or more servings of fruit or vegetable per day, compared with 29% across New York State.

BRFSS data on chronic disease reveals that about 11% of adults were diagnosed with diabetes in 2008-2009, compared with about 9% of adults in New York State. The percentages for cardiovascular disease were about 9% for Sullivan and about 8% for New York State.

Sullivan was ranked 61st out of 62 counties in the health outcomes category and 58th in the health factors category by County Health Rankings, an initiative of the Robert Wood Johnson Foundation.⁶ The health outcomes category is based on measures of the length and quality of life, including mortality and morbidity. The health factors category is based on a combination of four major factors that influence health outcomes: behaviors, clinical care, social/economic factors and the physical environment.

Public Health Priority Area

Physical activity and nutrition is one of ten priority areas in the Prevention Agenda. According to the New York State Department of Health,

“Major causes of morbidity and mortality in the United States are related to poor diet and physical inactivity. By maintaining a healthy diet and being physically active, individuals can achieve a healthy weight and reduce their risk of chronic diseases such as diabetes, heart disease and some forms of cancer; strengthen bones and reduce the risk of osteoporosis. Cardiovascular diseases are the leading causes of death in New York State, killing almost 59,000 residents each year. Diabetes is the most rapidly growing chronic disease, affecting one out of every 12 adult New Yorkers.

⁵ New York State Behavioral Risk Factor Surveillance System. Final Report, December 2009.

⁶ County Health Rankings. <http://www.countyhealthrankings.org/new-york/overall-rankings>

Obesity, which may be addressed through proper nutrition and physical activity, is a major risk factor for many chronic diseases, and has reached epidemic proportions both in New York and across the nation. The percentage of obese adults in New York State more than doubled from 10% in 1997 to 25% in 2008 and, nationally, obesity among children and adolescents has tripled over the past three decades. In fact, obesity costs New York State more than \$6 billion annually in direct medical expenditures for treatment of related diseases, as well as indirect costs such as lost productivity. Physical inactivity, poor nutrition, consumption of sugar-sweetened beverages and television viewing can contribute to excess weight gain in children and adults.”⁷

Specifically, DOH has identified the following objectives related to physical activity and nutrition:

- By the year 2013, increase the percentage of adult New Yorkers who engage in some type of leisure time physical activity to at least 80%; and
- By the year 2013, increase the percentage of adult New Yorkers who consume fruits and vegetables five or more times per day to at least 33.0%.⁸

II. NEEDS ASSESSMENT

In 2010 the Sullivan County Department of Public Health Services (PHS) engaged the Center for Governmental Research (CGR) to complete a needs assessment as part of a larger project funded by the New York State Department of Health (DOH). This funding was aimed at assisting counties across the State in developing a local action plan for policy and environmental changes related to the physical activity and nutrition priority area in the State’s Prevention Agenda Towards the Healthiest State.

CGR’s needs assessment used several methods to evaluate existing resources, unmet needs, barriers and stakeholder perceptions regarding physical activity and nutrition in Sullivan County. In addition to reviewing existing data, CGR conducted twenty-three interviews with key stakeholders, collected 14 completed online surveys from employers and 15 completed surveys from school nurses. Please see Appendix A for a list of individuals who participated in interviews.

⁷ New York State Department of Health (2009). Prevention Agenda Toward the Healthiest State.
http://www.health.state.ny.us/prevention/prevention_agenda/physical_activity_and_nutrition/index.htm

⁸ Ibid.

Study Participants

Phone Interviews	
<i>Representatives or Staff from:</i>	
County Agencies	6
Non-Profit/Community Organizations	3
Educational Institutions	4
Health Care Organizations	2
Municipalities	8
<i>Total</i>	<i>23</i>
Surveys (Completed)	
School Nurses	15
Employers	14

Survey of School Nurses

Overview

A survey was distributed to 28 school nurses, and completed in full by fifteen. The survey addressed opportunities for physical activity, policies addressing nutrition, unmet needs, and changes that could have the most impact on students. See Appendix B for the complete survey instrument and Appendix C for a complete transcript of open-ended responses.

Findings

Physical Activity

The majority of nurses indicated that their school is meeting State requirements for physical education⁹. Nine of fifteen respondents indicated that the amount of physical education that students engage in has not changed in the last five years. Of the remaining six, four indicated that the amount has increased.

Does your school meet the State-mandated requirements for physical education?

Yes	13	87%
No	1	7%
Unsure	1	7%
	15	100%

⁹ In 2008, the New York State Education Department reported that 19 of 20 audited school districts in the State (none were in Sullivan County) did not meet the minimum requirements for physical education.
http://www.osc.state.ny.us/localgov/audits/swr/2008/physical_ed/physical_edfinal.pdf

Fifteen schools provide opportunities for physical education outside of physical education classes. These opportunities include recess or playground time (10 of 15 schools), team sports and or intramurals (3 of 15), and access to weight rooms or other additional exercise (5 of 15).

No consistent pattern emerged with respect to the time allotted for recess. Six nurses indicated that the amount of time for recess has changed, while five said it has not. Of the six that indicated a change, four further described the change, with one noting that grades 7-12 now have recess, and one describing a change in policy that allows students 20 minutes of recess instead of a full 40 minutes for lunch. Another nurse said that the time had decreased due to “more time spent on learning,” and another noted that grades 7-12 no longer have any recess.

Little consensus emerged in terms of unmet need for physical activity for students. Four nurses noted that the schools need more space for physical activity, and four noted that expanded choices in the types of activities are needed.

Nurses responded that additional staff and facilities would be needed to meet unmet needs in relation to physical activity. A set time for recess and changes to students' schedules, as well as additional funding were also listed. Barriers to these changes included funding (5 of 9 nurses), cooperation (1), space (1), time, (i.e. 'the need to fit in academics') and motivation (1).

Only six nurses answered a question regarding the type of policy that would have the most impact on students' ability to be physically active. Three of these related to physical education; one nurse listed providing PE for the full school year, while another suggested that policies regarding being excused from PE be stricter and a third suggested that PE should not affect grade point averages.

In terms of characteristics of the school environment that has positive impact on students' ability to be physically active, three nurses described comprehensive promotion of healthy eating and physical activity, including opportunities for extra activity. A lack of space for recess was cited by two nurses as having a negative impact on physical activity.

Additional facilities and space again emerged as suggestions for needed environmental change to promote physical activity. One nurse noted that the home environment needs to change in order for healthy behaviors to be sustained.

Nine school nurses said that their school makes its facilities available to the public. Five said their schools do not, and one respondent did not know. However, four of the five nurses who said facilities were not

accessible described some level of availability of school facilities to the public. In total, six respondents said outdoor facilities (tracks, fields) are available for use by the public and four said the gym or an additional facility is available. One indicated that the building itself is open for walking.

Nutrition

Respondents were asked to describe the types of policies that exist in their schools that promote healthy eating. Six of the thirteen that responded noted that their school has guidelines regarding soft drinks being sold in vending machines; one mentioned guidelines relating to fundraisers, and two noted guidelines related to the school store/cafe.

Nurses were asked to describe the most critical unmet needs for their students in terms of healthy eating. Most school nurses responding to this question noted some aspect of the availability of healthy foods (10 of 13), including a lack of availability in school and at home.

When asked to describe changes that would need to take place to address critical unmet needs, five nurses mentioned increased availability of healthy foods, on menus or in schools during the day. Two indicated that more education about nutrition is needed, and one noted that visual prompts in the cafeteria can be helpful. Affordability was also mentioned - two school nurses noted that healthy foods need to be less expensive if students are going to consume them. Two nurses also noted that regardless of offerings during the school day, healthy eating habits are not necessarily present in students' homes.

Nine nurses cited some kind of financial issues as the major barrier to meeting needs, including the ability of families to afford healthy foods, the cost to schools of changing menus, and poverty in general. Individual respondents also mentioned an unwillingness of people to change their habits, a lack of education, and school or State regulations that hinder change.

Nurses were asked to describe the type of policy that would have the most impact on student's ability to eat a nutritious diet. Specific aspects of food policies that nurses cited include: eliminating fried or breaded foods, eliminating junk food at birthday and holiday celebrations, increasing the availability of healthy foods, and prohibiting unhealthy beverages and snacks from being sold in school or brought from home.

In terms of environmental changes, nurses noted that a community garden could help students be more involved in what they eat. Others mentioned having locally grown foods or, in general more fresh produce and healthy snacks available.

Survey of Employers

Overview

CGR distributed a survey to employers through the Sullivan County Chamber of Commerce, focusing on current policies and environments, and perceptions about worksite wellness. Fourteen employers (owners or managers) completed the survey. Please see Appendix D for the full survey instrument and Appendix E for open-ended responses. Half of respondents represented organizations with fewer than 10 employees; the other half represented organizations with 100 or more employees. Respondents' primary industries were construction, finance, insurance or real estate, health care, non-profit, retail or wholesale, and services.

How many employees are in your organization?

Fewer than 10	7	50%
100 or more	7	50%
	14	100%

What is the principal industry of your organization?

Construction	1	7%
Finance, Insurance, Real Estate	3	21%
Health Care	3	21%
Nonprofit	3	21%
Retail, Wholesale	1	7%
Services	3	21%
	14	100%

Findings

Health status of employees

Of those respondents answering a question about the health status of their employees, half rated the health status as good (5 of 10), with the remainder choosing "fair" (2 of 10) or "excellent" (2 of 10).



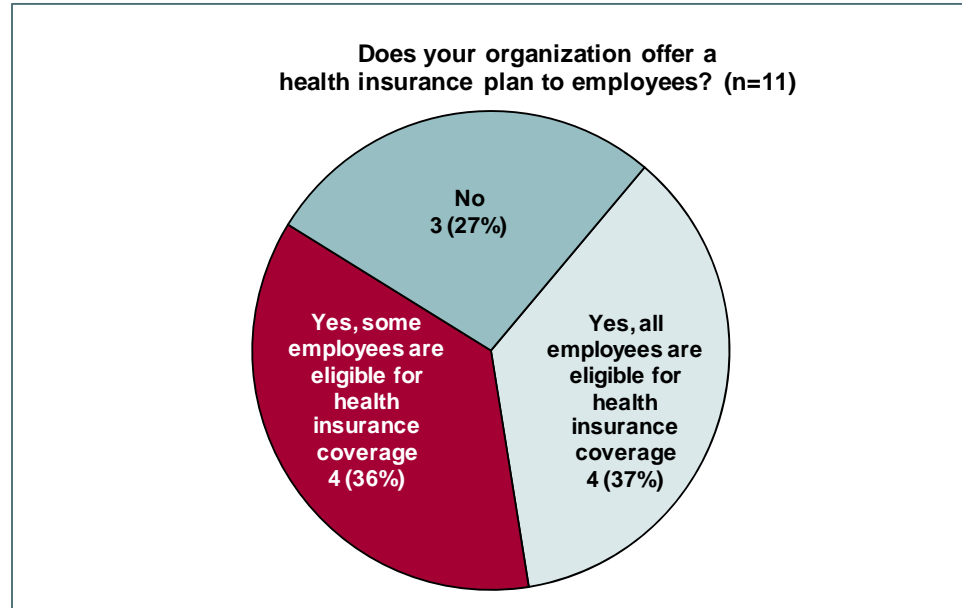
Please indicate the extent to which you agree or disagree with the following statements:

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
Employees in my organization get an adequate amount of physical activity (both inside and outside of the workplace) (n=11)	0	4	1	5	1
Employees in my organization are able to eat a healthy diet (both inside and outside of the workplace) (n=9)	1	7	1	0	0
Obesity is a problem among employees in my organization (n=11)	0	3	3	3	2
Chronic diseases (e.g. diabetes, cardiovascular disease) are a problem among employees in my organization (n=10)	1	3	1	5	0

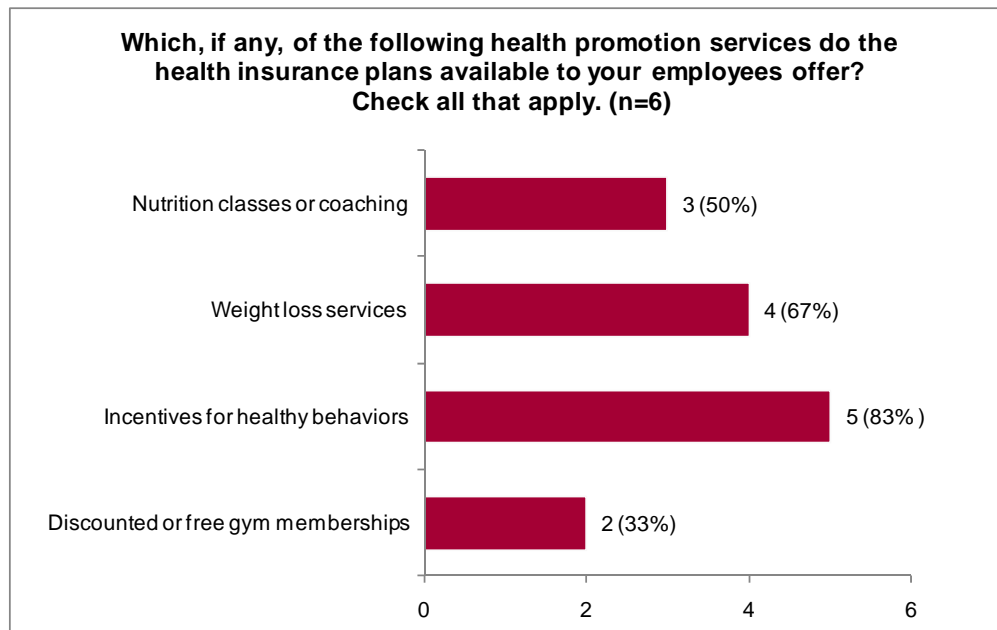
More than half of respondents disagreed or strongly disagreed that employees get an adequate amount of physical activity (6 of 11). Five of eleven employers agreed or strongly agreed that chronic diseases are a problem, while 5 of the 11 disagreed or strongly disagreed with this statement. In terms of obesity, 3 of 11 employees agreed or strongly agreed that it is a problem among employees, compared to 5 of 11 who disagreed or strongly disagreed. Most (8 of 9) agreed that employees are able to eat a healthy diet.

Insurance

Three employers surveyed do not offer a health insurance plan to employees. The remaining eight indicated that either some or all of their employees are eligible for health insurance coverage.



Six of the employers who offer health insurance responded to a question about wellness initiatives included in their insurance plans. Five reported that their plans included incentives for healthy behaviors, four reported that plans offered weight loss services, three reported that nutrition classes or coaching were available, and two said that the plans offered free or discounted gym memberships.

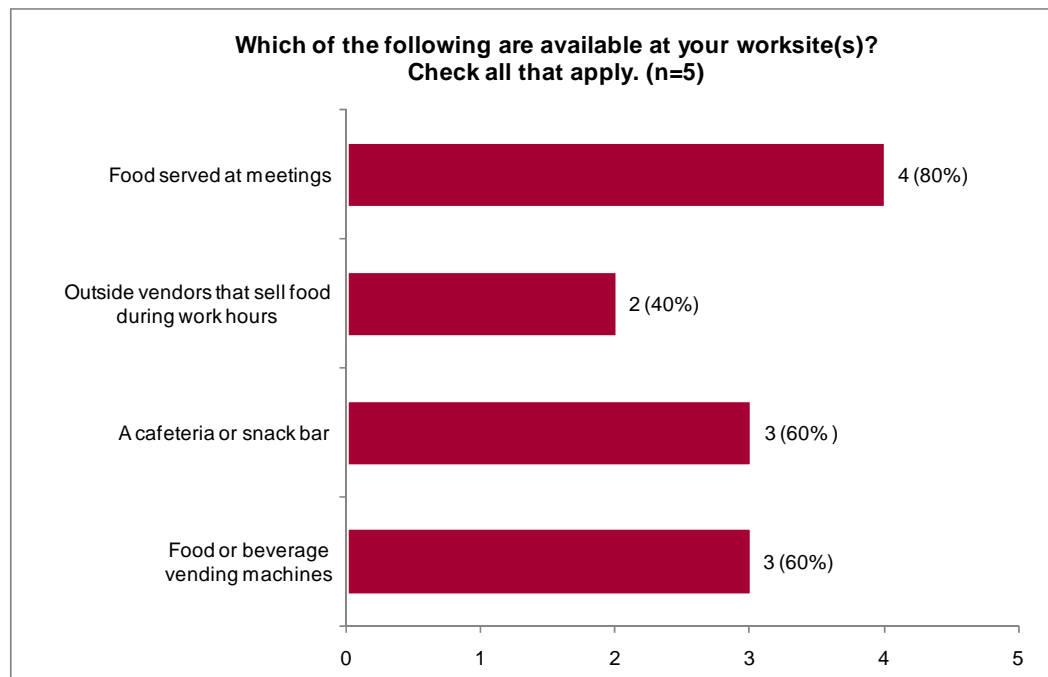


Work environment and policies

None of the employers completing the survey have a worksite wellness committee. One has either a wellness coordinator or a person responsible for health promotion activities.

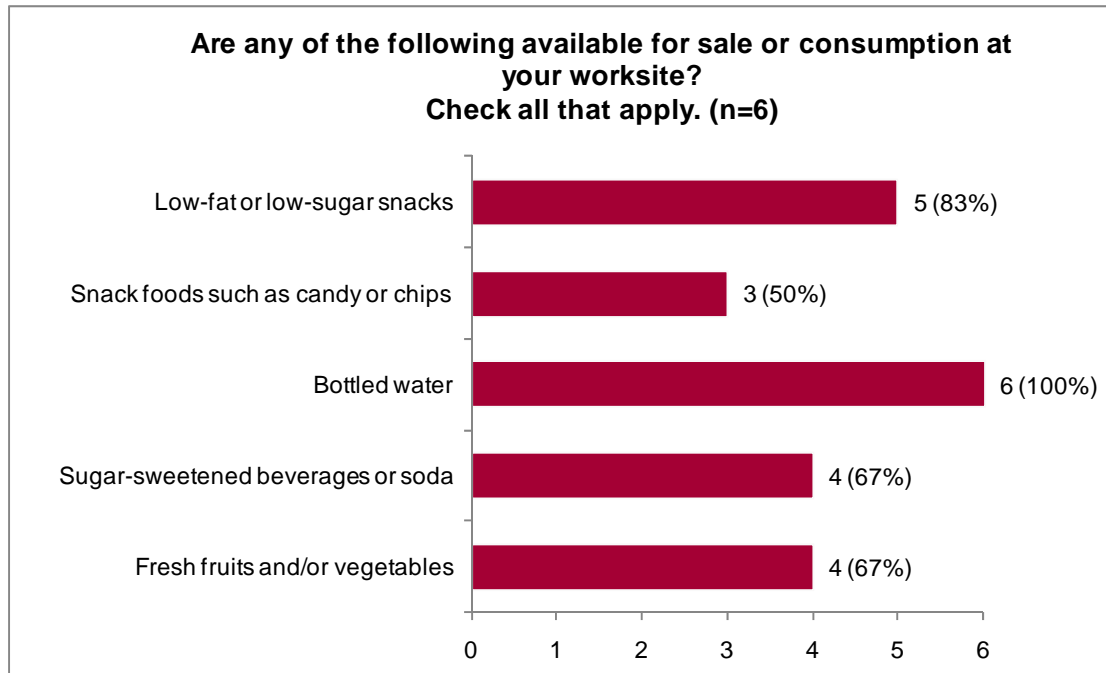
Weight loss programs, education about healthy cooking, incentives for healthy behaviors and educational events are each offered by one of the respondents. Three offer flexible schedules or breaks to allow employees to engage in physical activity, two offer help with managing a chronic condition and two offer awareness building initiatives.

Six employers described the food-related environment at their worksites. Four have food served at meetings, three have a cafeteria or snack bar, three have vending machines, and two have outside vendors that serve food during work hours.



Items for sale include bottled water (all 6 of employers responding to the question), low-fat or low-sugar snacks (5 of 6), fresh fruits and vegetables (4 of 6), sugar sweetened beverages or soda (4 of 6) and snack foods like soda or chips (3 of 6).

Most employers who answered a question about the work environment in regard to physical activity reported that they have outdoor areas where employees can be active, and clean and well-lit stairwells (4 of 5). Two have indoor spaces for physical activity, and one offers fitness equipment.



Benefits of worksite wellness initiatives

Please indicate the extent to which you agree or disagree with the following statements:

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
Worksite wellness programs can improve morale (n=11)	0	9	1	1	0
Worksite wellness programs can reduce absenteeism (n=11)	0	8	3	0	0
Worksite wellness programs can increase productivity (n=11)	0	8	3	0	0
Worksite wellness programs can reduce employer health care costs (n=11)	2	6	3	0	0

The majority of employers agreed or strongly agreed that worksite wellness programs can improve morale, reduce absenteeism, increase productivity, and reduce employer health care costs.

One respondent, representing an organization with both indoor and outdoor facilities for physical activity, commented "It has been my experience that worksite wellness programs are dramatically underutilized. Those that use the facility seem to be happier and more productive but too few use the facility to make an organizational improvement."

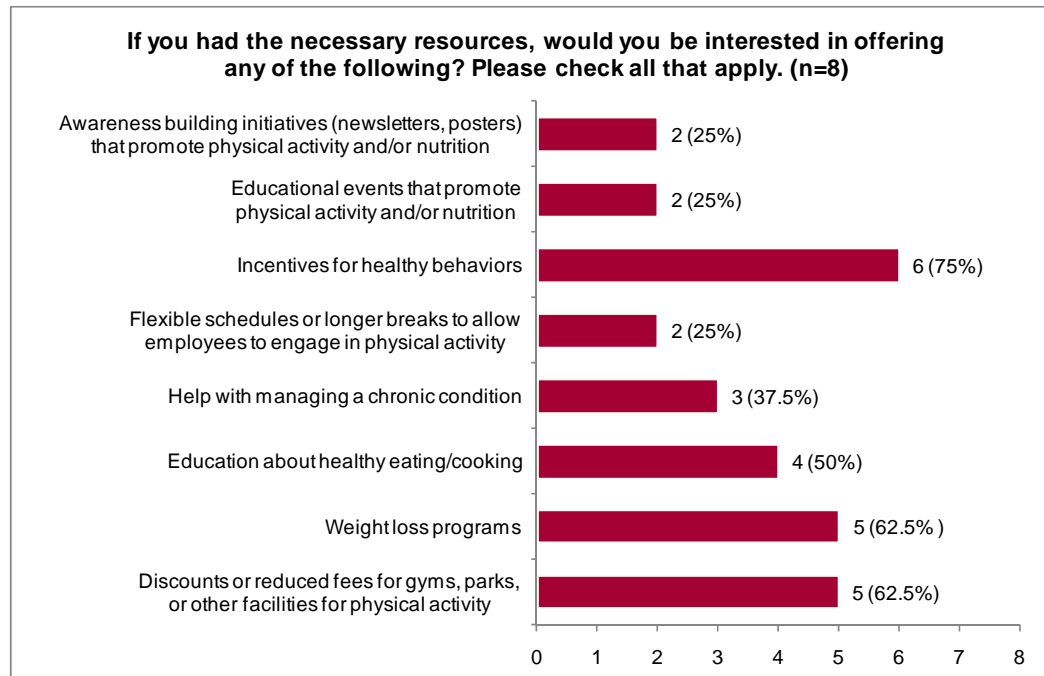
Role of employers

Please indicate the extent to which you agree or disagree with the following statements:

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
Employers have a role in helping employees live a healthy lifestyle (n=11)	0	6	3	2	0
Helping employees to be more physically active is beneficial to both employees and employers (n=11)	3	7	1	0	0
I am interested in implementing policies or other changes to my worksite(s) to enable employees to be more physically active (n=11)	0	4	6	1	0
I am interested in implementing policies or other changes to my worksite(s) to enable employees to eat a healthier diet (n=11)	1	5	4	1	0
I feel that I have adequate knowledge of how to implement changes to my worksite(s) to enable employees to be more physically active (n=11)	0	8	2	0	1
I feel that I have adequate knowledge of how to implement changes to my worksite(s) to enable employees to eat a healthier diet (n=11)	1	9	0	0	1
I would be interested in more information about how to implement such changes (n=8)	0	2	4	2	0

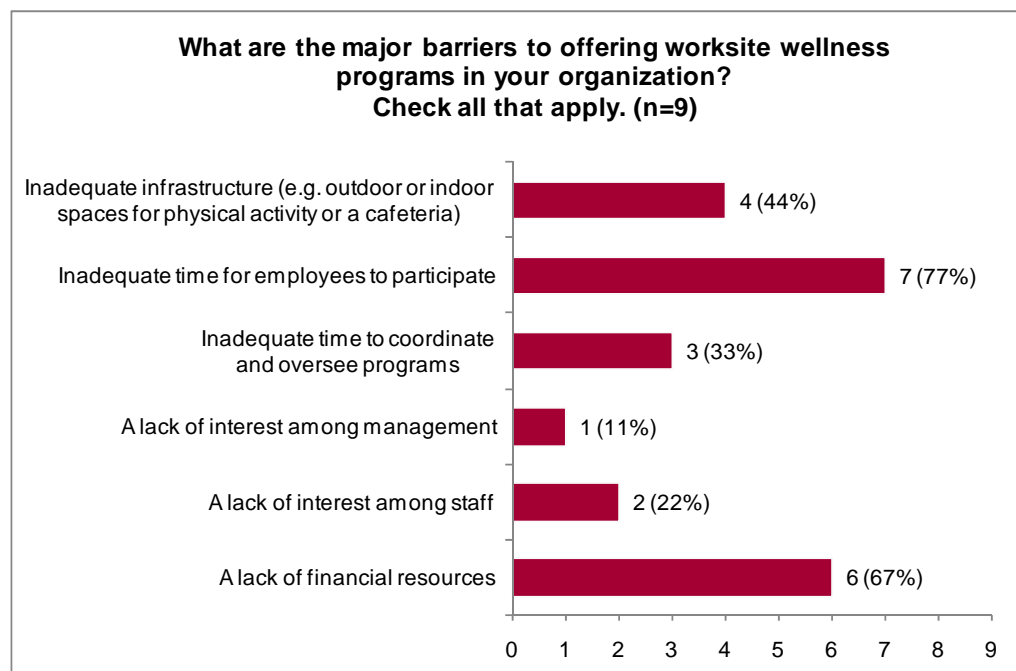
The majority of respondents agreed or strongly agreed that they have adequate knowledge of how to implement changes in the workplace to enable employees to eat a healthier diet (10 of 11 respondents) and be more physically active (8 of 11 respondents). In addition, 10 of 11 respondents agreed or strongly agreed that helping employees to be more physically active is beneficial to both employees and employers.

A smaller majority (6 of 11) agreed that employers have a role in helping employees live a healthy lifestyle.



Six of eight employers would be interested in offering incentives for healthy behaviors if they had the necessary resources. Five would offer discounts or reduced fees for facilities, or weight loss programs. Four or fewer would offer education about healthy cooking, help with managing a chronic condition, flexible schedules, educational events or awareness building initiatives.

Barriers



Inadequate time for employees to participate and a lack of financial resources were the most frequently cited barriers to offering worksite wellness programs (7 of 8 and 6 of 8 respondents, respectively). Four or fewer respondents cited inadequate infrastructure, inadequate time for oversight or coordination, or a lack of interest among management or staff.

Stakeholder Interviews

Overview

CGR interviewed twenty-three stakeholders, including town supervisors, school nurses, and representatives from non-profit organizations, county agencies, and major employers. Interviews focused on unmet needs, existing resources, barriers, and potential strategies and solutions.

Findings

Needs

Several respondents noted that obesity is a major problem in Sullivan County, reflecting a need for better nutrition and more physical activity. Children and seniors were specifically noted as having unmet needs in these areas. The issue of transportation is addressed in more detail below; primarily, it is characterized by an inability to get from home to places where one can be active. This is an issue especially for both children whose parents are not home after school to transport them, and for seniors who no longer drive. Respondents also indicated that the low-income population, across age groups, has unmet needs in terms of physical activity and nutrition. This will be discussed in greater detail below.

In general, respondents felt that County residents do not get an adequate amount of physical activity, noting that an increasingly sedentary lifestyle and a lack of infrastructure such as sidewalks or other places to walk or exercise are contributing factors. Several people noted a change in children's behavior and lifestyles, and that children are spending more time indoors and engaged in sedentary activities than in the past.

Resources

Individuals interviewed described several assets and resources throughout the County that allow residents to be physically active and eat a healthy diet. We described these here, and in the Barriers section below we will describe some of the ways in which these resources may be underutilized or unavailable to certain populations.

Nutrition

To some extent, the rural nature of the County, and its natural resources, is seen as an asset, although some rural characteristics were overwhelmingly

perceived as barriers (see below). In terms of nutrition, stakeholders appreciate the relationship between local growers and the community as seen in farmers' markets, and see additional potential in this relationship. Stakeholders indicated that grocery stores have a good selection of fresh produce, often from local farms. One individual noted that some convenience stores are starting to offer healthier choices as well. Farmers' markets are available in several communities. These are popular among residents and access is increased by the fact that products can be purchased using food stamps.

The Office for the Aging (OFA) was noted several times as a resource for seniors through its congregate meal sites and homebound meal delivery service. Some respondents indicated that these programs serve purposes above and beyond providing meals, (e.g. socialization and the opportunity for homebound seniors to interact with and be monitored by OFA staff).

Schools are perceived as an important resource to positively impact the health of children who may not have access to nutritious food at home. While few stakeholders not directly involved in schools were aware of any detailed changes, most generally perceive schools to be moving in the right direction towards more nutritious offerings at meals and in vending machines.

Organizations like Cornell Cooperative Extension (CCE) and the Child Care Council also provide nutrition resources. CCE administers a nutrition education program and partners with other organizations on a number of grants and projects. The Child Care Council administers the State Nutrition Program; participating day-care providers receive a reimbursement for offering meals that meet nutrition guidelines.

Physical Activity

The individuals we interviewed described an array of parks, sports fields, trails and other spaces for physical activity. Municipalities in the County offer recreational programs including sports and summer camps, as does the Youth Bureau, which includes physical activity as a component in about half of its twenty-five free programs. Organizations like the YMCA and the Boys and Girls Club are also seen as assets that provide opportunities for residents, particularly children, to be physically active, although these resources reach only some residents.

While few employers that we surveyed or spoke to are providing worksite wellness policies or programs, some are beginning to adopt practices to encourage physical activity. For example, Catskill Regional Medical Center has mapped out a 'trail' that includes indoor and outdoor spaces for employees to walk. Cornell Cooperative Extension has walking trails that employees can use. Some stakeholders reported that they have observed some County Government employees using breaks to walk, both indoors

and outdoors. It is not clear to what extent employees take advantage of this opportunity, although one individual interviewed noted that many County employees do not have schedules or work responsibilities that make this activity possible. The Center for Discovery, which integrates physical activity into treatment plans for their residents, also encourages employees to be active and offers an array of classes.

Perceived Barriers

Economic and Financial

Most respondents noted that Sullivan has a high proportion of low income residents and that the County as a whole is currently economically depressed. This affects the ability of residents to be active and eat healthy foods in several ways. A large proportion of individuals interviewed felt that for county and local governments, employers and residents, economic and financial concerns take precedence over promoting health and wellness and avoiding poor health outcomes.

One respondent described an attitude among employers that wellness initiatives are a ‘luxury,’ and that they would require more staff and financial resources than are available.

At the local and county levels, respondents noted that the economy is given priority and the need to create jobs and attract business to the County hinders leadership at both levels from focusing on issues related to the health of residents. Likewise, respondents expressed the perception that many residents are focused on ‘survival,’ and that jobs are needed before efforts to increase physical activity and nutrition can be addressed. In addition, according to respondents, funding is limited for infrastructure projects such as creating sidewalks or other community features that could encourage more frequent walking. One respondent noted that financial concerns may also contribute to inadequate upkeep of resources such as trails.

At the individual level, a lack of adequate income is perceived to be a barrier to accessing healthier foods. Fresh fruits and vegetables, and organic or ‘health foods,’ are perceived as more expensive, resulting in individuals choosing less healthy foods.

Rural Environment

Sullivan County was described by respondents as mostly rural, hilly, and geographically widespread. Few residents live within walking distance of restaurants, grocery stores or facilities and spaces where they can be physically active. Respondents noted that in spite of the County’s ‘natural beauty’ and the presence of parks and trails, many residents are unable to take advantage of these characteristics.

The rural communities in Sullivan County are also generally not ‘walkable.’ They do not have the infrastructure, i.e. safe shoulders, sidewalks or lighting, nor the proximity to grocery stores and other businesses that would allow residents to walk as a means of transportation.

Transportation

Transportation dovetails with both of the above issues. In many rural areas, the infrastructure for public transportation rarely exists, and creating one is generally not economically feasible. The villages of Liberty and Monticello both have commercial bus services, and there is some limited service in other parts of the County. Additionally, the County Government provides limited transportation for seniors for medical appointments and grocery shopping. However, the population at large is not served by public transportation. Most programs or facilities do not offer transportation, although individuals interviewed did note that two of the locations of the Boys’ and Girls’ Club offers transportation to participants, and that transportation is available to some congregate meal sites for seniors.

The lack of transportation affects access to both nutritious food and physical activity. As mentioned above, respondents noted that many residents are unable to take advantage of existing resources such as parks and trails because of a lack of transportation. Farmers’ markets, which were noted by many as an asset to the County, may also be underutilized as a result of the absence of transportation options.

Attitudes, Knowledge and Behavior

Several individuals who were interviewed felt that there is a lack of knowledge among residents about the importance of nutrition and physical activity, and also of how to implement healthy behaviors. In particular this is seen as having a negative impact on children, who may access to healthy foods in school but whose parents may not be in the habit of preparing healthy meals. Nutrition choices are dictated by both cultural and financial factors, according to respondents. In other words, families that have engaged in unhealthy behaviors over time continue to teach those unhealthy behaviors, and many are forced to choose low cost over high nutrition when purchasing food.¹⁰

Some cited motivation as a problem. People ‘know what to do,’ but there is a gap between this knowledge and implementation. There is a frustration on the part of some service providers because of a lack of

¹⁰ This is cited as a concern related to food security, not just the nutritional value of available foods. Some school representatives reported that for some students school breakfasts, lunches and snacks may be their only source of calories for the day, and worry about food availability for students on weekends and during school breaks.

interest in participation. Others feel that it is an individual's responsibility to change behaviors, not the responsibility of others, such as schools or employers. Similarly, some feel that schools can change what they offer, but change will not be sustained without changes at the family level.

At the organizational level, a few respondents expressed opinions that may keep them from being motivated to implement or pursue program and policy changes. Others noted that they have observed such opinions in others. This includes primarily the perception that individuals are unmotivated to change their behaviors in terms of physical activity and nutrition, and that as a result, changes within organizations will not have a strong impact on personal behavior or health outcomes.

Strategies and Opportunities

Several themes emerged in terms of opportunities that would have a positive impact on County residents' abilities to be more physically active and eat a better diet. Integrated planning, more convenient opportunities for physical activity, and maximizing natural resources were all cited as key opportunities to increase healthy behaviors. While some changes have already been implemented in schools and worksites, there is also significant potential to work within these environments to impact the health of County residents. In addition, recognizing the importance of addressing health and wellness, and understanding ways to do so that are aligned with existing resources and priorities, is a critical step in promoting behavior change throughout Sullivan County.

Integrated Planning and Sharing of Resources

Respondents described a certain amount of insularity among towns, organizations, and other entities located in the County, and felt that there are opportunities for more collaboration, coordination and pooling of resources. For example, there is a perceived lack of communication and awareness of resources among towns, schools, and entities and organizations that have knowledge and expertise about physical activity and nutrition. Town representatives did not seem to have extensive knowledge of school policies and environments. One respondent noted that residents in particular towns are not aware of resources in neighboring towns or elsewhere in the County. These respondents noted that greater sharing of information could benefit residents throughout the County.

Others noted that integrated planning around these issues at the County government level would be beneficial, and that County agencies and representatives should take a leadership role in such activities. A broad view of barriers and resources can help policy leaders identify efficiencies and prioritize needs as well as play a role in increasing awareness of available resources and promoting a shared message.

Several valuable partnerships do exist in Sullivan County that can be built upon and expanded. For example, Public Health Services, Cornell Cooperative Extension, the Chamber of Commerce, Catskill Regional Medical Center and the Child Care Council are all involved in partnerships to address physical activity and/or nutrition. Public Health Services is part of a strong Wellness Committee that is working towards shared goals. Partnerships like this have the potential to have a strong positive impact in the County and are a resource that can be built upon. Coordinating activities to reduce duplication of efforts and work towards shared goals and objectives will continue to expand the efficiency and effectiveness of these partnerships.

Within County government there are also opportunities to partner around these issues. The expertise of Public Health Services staff can be shared to help departments understand the benefits of changing policies and environments for employees, and to implement feasible and simple changes. Coordinating with departments that impact large portions of the population such as Family Services, Aging and the Youth Bureau and those that impact the built environment, such as Planning and Public Works can offer opportunities to work towards shared goals, disseminate a shared message, and maximize resources and efficiencies.

Access to Physical Activity

Respondents listed development of parks and trails, especially in closer proximity to where people live, transportation to facilities and spaces where people can be active and greater awareness of these resources as key opportunities for the County as a whole.

As noted above, development of new facilities and transportation are both strongly hampered by financial concerns. However, in the long-term, there are multiple benefits involved in expanding these resources. Greater development of trails and parks affects tourism as well as the health of County residents; transportation helps residents access not only physical activity and better nutrition, but health care and other services, as well as jobs. Organizations directly involved in promoting health and wellness, as well as those that indirectly affect residents' ability to engage in a healthy lifestyle (such as transportation vendors, community development organizations, or tourism) should review best practices adopted in other rural places and look for solutions that are feasible given the existing economic conditions. Stakeholders that are knowledgeable in best practices should pursue ways of sharing these with partners. This may be a project to be pursued through a partnership of groups interested in these particular issues – an example of such a project is the white paper being prepared on worksite wellness by CRMC in partnership with the Chamber of Commerce.

Agricultural Resources

According to respondents, there is a need to further explore ways to maximize the relationship between local farmers and residents – through schools, restaurants, stores and farmers’ markets. Demonstration farms and gardens in schools and expanding farmers’ markets (both in terms of locations and hours) are two ways to help get local products to consumers. An initial step is to identify where these kinds of activities have been successful and take advantage of the expertise involved. For example, towns that don’t currently have farmers’ markets may need assistance in exploring the feasibility of having them – towns that already do, and the market organizers are potential resources for educating others about implementing a new market. Several organizations are currently involved in this issue, making this a good opportunity to build on existing efforts, knowledge and other resources. For example, Sullivan Renaissance, a community development program, recently awarded several grants for community gardening, school gardens and education programs.

A theme that emerged several times was ‘bringing resources to them,’ i.e. residents. Two respondents mentioned the concept of mobile health services as a potential model for bringing nutritious foods to residents of rural communities. Such a ‘mobile farmers’ market’ could also offer education or health screenings. Existing nutrition programs for seniors may also offer opportunities to ‘reach people where they are.’ Possible partners for the Office for the Aging should be identified to explore how OFA can maximize the nutritional value of congregate and home-delivered meals, as well as integrating opportunities for physical activity at meal sites.

Schools and Worksites

Schools and worksites are widely recognized as ideal places to address physical activity and nutrition because they are two of the environments where people spend a great proportion of their time, where they consume meals and where they may already engage in physical activity. Best practices have been implemented in schools and worksites across the country, and a great deal of information is available about implementing policy and environmental change to promote better nutrition and more physical activity.

Schools are making changes, both in response to State mandates regarding time for physical education and the development of wellness policies and as a result of internal action. Exploring best practices, learning more about what types of changes students and staff would be most interested in, and partnering with outside organizations (e.g. other schools, farm-to-school initiatives, towns) may be ways to begin expanding on changes that have already been implemented.

Though the sample in our employer survey was small, there was some indication that the employers who responded are aware of the benefits of worksite wellness programs and have an interest in initiating change. There is a wide variety of ways that employers can create healthier environments and policies, and many of them are low-cost. Education, assistance and capacity building to help employers adopt policies and environmental changes to promote healthy behaviors may be an appropriate focus for stakeholders.

Conclusion

This needs assessment reached a cross-section of Sullivan County residents and stakeholders. The major findings across these groups included:

- 1) Greater awareness is needed, both at the individual level, of what healthy behaviors are and how to implement them, and at the organizational level, of the ability of organizations to impact individual behaviors and health outcomes and of the importance of prioritizing these issues.
- 2) A rural environment offers both advantages and disadvantages. The County is described as simultaneously beautiful, with many natural resources, and as a place with not enough access to physical activity and nutrition. Low population density hinders residents' access to available resources including opportunities for physical activity and places where fresh local foods are sold.
- 3) Economic and financial realities are perceived as barriers. Initiatives that address the current economic situation are prioritized over initiatives aimed at health promotion and improving health outcomes, and many feel that solutions are cost-prohibitive. Organizations interested in affecting health outcomes may want to explore ways to educate stakeholders about the positive effects for the County as a whole of improving the health of residents, and about ways to do so that are not resource-intensive and will complement other priorities rather than detract from them.
- 4) Some changes are occurring in schools and there is a shared recognition that the school environment can have a positive impact on student and employee health.
- 5) There is less consensus around the ability of worksites to affect employee health, although there is growing interest and some changes underway.
- 6) Stakeholders should collaborate more effectively and build on existing capacity to address these priority areas. Existing and future partnerships

and information sharing have the potential to change attitudes, assist in implementing changes in school and worksite wellness, and remind policy makers of opportunities to integrate public health issues into their decision making. In pursuing strategies to address physical activity and nutrition the involvement of multiple types of stakeholders (for example, creating awareness among municipal leaders about school initiatives) creates greater opportunities for comprehensive messaging, pooling of resources, and creating efficiencies.

7) There is an interest among stakeholders in addressing physical activity and nutrition. Given strong perceptions about barriers, groups working on this issue should identify those areas where feasibility is highest, and where stakeholder interest is concentrated. For example, while the employer survey captured a small sample, those that did respond were more interested in certain initiatives than others. Partners can use this information to identify where more education is needed and where employers may be most willing to collaborate to create change.

The County has many resources and opportunities to call on in addressing its priority areas related to public health. By building on the resources identified by stakeholders, finding feasible strategies to target barriers, and continuing to collaborate across organizations and stakeholder groups, stakeholders and partners in Sullivan County can continue to improve health outcomes for all residents.

APPENDIX A: INDIVIDUALS PARTICIPATING IN INTERVIEWS

Deborah Allen, Associate Director
Sullivan County Office for the Aging

Harold Baird, Supervisor
Town of Mamakating

Tom Bose, Supervisor
Town of Callicoon

Daniel Briggs, County Clerk
Sullivan County

Anthony Cellini, Supervisor
Town of Thompson

Karen Cooke, Executive Director
Sullivan County Child Care Council

Laurie Doscher, Educator
Cornell Cooperative Extension

Monica Farquar Brennan, Director
Sullivan County Department of Risk
Management and Insurance

Patricia Hawker, Nurse
Sullivan West Secondary School

Carolyn Hill, Personnel Officer
Sullivan County Personnel Department

Heather Jacksy, Associate Planner
Sullivan County Department of Planning
and Environmental Management

Bonnie Lewis, Educator
Cornell Cooperative Extension

Regina Olasin, Medical Director
Center for Discovery

Michelle Penchansky, School Nurse
Sullivan County Community College

Nadia Rasjz, Supervisor
Town of Lumberland

Steven Ruwoldt, CEO
Catskill Regional Medical Center

Brian Scardefield, Director
Town of Liberty Parks and Recreation

James Scheutzow, Supervisor
Town of Delaware

John Schmidt, Supervisor
Town of Liberty

Lesia Snihura, Director
Sullivan County Youth Bureau

Phyllis Thomas-Moore, Nurse Teacher
Sullivan County BOCES

Steven Vegliante, Supervisor
Town of Fallsburg

Terri Ward, President and CEO
Sullivan County Chamber of Commerce

APPENDIX B: SCHOOL NURSE SURVEY

Thank you for accessing the Sullivan County Building Healthy Communities Needs Assessment Survey.

This survey consists of questions designed to help us understand the policies and environmental factors that affect the ability of students in your school to be physically active and eat a nutritious diet.

Your input is critical and will help inform further work in this area. If you have any questions while completing this survey please contact Maria Ayoob at mayoob@cgr.org.

What are policy and environmental changes?

A policy is a written statement by a public, non-profit or private entity that defines values, behavior, and/or resource allocation decisions. A law, rule, or regulation.

Policy change occurs when policies are implemented and enforced and result in institutional or individual behavior change.

Example 1: A school district implements a policy prohibiting food from being used as a reward in the classroom.

Example 2: An employer changes its policies to allow employees to flex their schedules in order to engage in physical activity before or after work or during lunchtime.

Environment is the social, physical or economic structures that affect an individual's health.

Environmental change occurs when an improvement or enhancement to the environment is made that promotes behavioral change.

Example 1: A City creates walking paths that offer safe and accessible alternatives to driving and promote recreational activity.

Example 2: A school replaces high-fat snacks with fruit in vending machines.

Survey Page 1

1. Which school do you work in?
2. What grade levels does your school serve?

Survey Page 2

1. Does your school meet the State-mandated requirements for physical education?
2. Does your school provide opportunities for physical activity outside of physical education classes? (Please describe)

3. Does your school make its facilities accessible to the public (e.g. buildings, fields are open in the evening for walking or sports)?
4. Please describe any policies that currently exist in your school that promote healthy eating (e.g. prohibiting sugar-sweetened soft drinks in vending machines; guidelines for food sold as part of fundraisers).
5. Please describe any characteristics of the school environment that affect students' ability to be physically active and/or eat a healthy diet (e.g. vending machines only stock low-fat snacks, gym facilities are inadequate).

Survey Page 3

1. Please describe the most critical unmet needs that exist for students in your school in regard to healthy eating.
2. What would need to happen in order to meet these needs?
3. What barriers are there to meeting these needs?

Survey Page 4

1. Please describe the most critical unmet needs that exist for students in your school in regard to physical activity.
2. What would need to happen in order to meet these needs?
3. What barriers are there to meeting these needs?

Survey Page 5

1. What type of policy would have the greatest impact on your students' ability to eat a nutritious diet?
2. What type of policy would have the greatest impact on your students' ability to be physically active?
3. What environmental change would have the greatest impact on your students' ability to have a nutritious diet?
4. What environmental change would have the greatest impact on your students' ability to be physically active?

Survey Page 6

If you would be willing to share your Wellness Policy with us, please email it as an attachment to Maria Ayoob at mayoob@cgr.org.

Thank you for taking the time to complete this survey. If you have anything else to share with us, please do so in the space below. Please contact Maria Ayoob at mayoob@cgr.org with any questions.

1. Would you like to share anything else with us?

APPENDIX C: SCHOOL NURSE SURVEY – OPEN ENDED RESPONSES

Does your school meet the State-mandated requirements for physical education?

- *This is under the purview of the Athletic Director.*
- *I think so but at this level we don't have an adaptive PE class*
- *Students in grades K-6 have PE everyday for 42 minutes with a certified Physical Educator. Students in grades 7-12 meet every other day for 42 minutes, also with a certified Physical Educator.*
- *Unsure*
- *We add 1/2 hour exercise daily to the 2xweekly gym classes*

Does your school provide opportunities for physical activity outside of physical education classes? (Please describe)

- *Team sports, intramurals, recess*
- *Sports and weight room after school.*
- *If the weather is nice they go outside for recess*
- *Playtime on playground in good weather*
- *Recess at lunch time*
- *Special Olympics, weight room during free time, Wii can be used in classroom*
- *We offer dance classes as part of our fine arts program. Students are permitted to go outside during their 40 minute lunch period. We also have YMCA facility within our building that students may access after school.*
- *Recess*
- *Evening exercise classes; weekend programs at school*
- *Daily recess*
- *Our school provides sports program and recess activities*
- *Daily outdoor recess*
- *Outside walks (individual classes), playground time/recess, additional gym time allowed, when possible*
- *Recess and extra exercise*

In the past five years has the amount of physical education (i.e. gym classes) that children participate in changed?

- *Do not know, have not been here 5 years*
- *[NO] However, in the past, some PE classes met for 84 minutes every 4 days (ABCD schedule). Now PE classes meet every other day*
- *Increased the times during the week*

- *Per mandates and more opportunities available to the students*
- *Increased*
- *In the past, students had class every other day, now it is every day*

In the past five years has the amount of time allotted for recess changed?

- *All grades now get 20 minutes of recess instead of 40 minutes of lunch.*
- *We do not have recess at this level*
- *Do not know, have not been here 5 years*
- *They get less time, due to more time spent on learning.*
- *[Yes] put in place. Prior to that, grades 7-12 were not allowed to go out*
- *We do not have "recess" at the HS level.*
- *Students in grades 7-12 no longer have any recess. Younger students are allowed recess every day, if the weather permits (as they go outside for recess). However, if students need to remain inside (ie during the winter) they may only have recess every other day or for a limited time - space is limited.*

Does your school make its facilities accessible to the public (e.g. buildings, fields are open in the evening for walking or sports)?

- *Sometimes there are intramurals, the community can walk outside on the fields*
- *If the areas are not in us the public may use them*
- *Do not know*
- *The outdoor facilities are available to the public. Select groups are allowed to use the gymnasium such as police basketball league and the SYDA foundation. Also club wrestling.*
- *Not sure*
- *Track at elementary school is available to the community for walking*
- *Gym is used for adult volleyball*
- *We have a YMCA facility in the building that the public may access after school hours. Little league/AYSO soccer and other organized sport teams use the fields for practice/games.*
- *Bldg open in the am for walking; classes in the evening; weight room available with supervision certain days/times of the week*
- *Fields are accessible but buildings are not open for public use*
- *Our school has an Adult Education Program, together with a Weight/Cardio Fitness Room that is open to the residents of the school district. District residents are also able to use the track facilities.*

Please describe any policies that currently exist in your school that promote healthy eating (e.g. prohibiting sugar-sweetened soft drinks in vending machines; guidelines for food sold as part of fundraisers).

- *The district Wellness Policy indicates guidelines for school lunch, beverages, and snacks sold at school, such as vending machines cannot sell soft drinks containing caloric sweeteners and drinks that contain less than 35% real fruit juice. Portion sizes of snacks are limited.*
- *Wellness committee has policies that promote healthy eating but the administration is afraid of upsetting parents so they are not always enforced. Fundraisers are not regulated yet.*
- *Water machine in cafeteria*
- *No soda in vending machine. No candy vending. Concessions at events must include alternate choices to soda, ie water.*
- *Wellness Policy limits fundraisers, vending machine products have to meet policy guidelines, school store as well*
- *Cafeteria follows govt guidelines*
- *No soda or sugar-sweetened drinks/foods sold in school vending machines by classes for any fundraising; healthy alternatives sold at games, etc. Wellness policy being revisited.*
- *Vending machines have been removed from the school*
- *Our school no longer offers soda in the vending machines for our students, only in the faculty rooms. Drinks that our sold in the cafeteria and vending machines tend to have lower counts of sugar and fat. Fund raisers now have to display the nutritional facts of the items that they are selling. Our food service department no longer serves any food that is fried. All of the food is baked.*
- *n/a at the elementary level as these have not been a problem.*
- *Wellness Policy*
- *We limit sweets in the cafe and working on a new menu*

Please describe any characteristics of the school environment that affect students' ability to be physically active and/or eat a healthy diet (e.g. vending machines only stock low-fat snacks, gym facilities are inadequate).

- *The recess area is not blacktop and gets very muddy.*
- *No recess students must remain inside at lunch time. No adaptive PE program*
- *Swipe card in cafeteria allows parents to review student's purchases. Juice and water options in vending machine. Students can sign up for weight room training during PE teachers' free periods*
- *Gym facilities are small, PE teachers are assigned to other duties besides teaching*
- *Our physical education department offers a variety of physical activities each marking period for PE credit. Those students who are not necessarily athletically inclined have many opportunities to become fit. Students have access to the YMCA machines, including treadmills, stationary bikes, rowing machines, free weights and weight machines. Students may sign up for one of three activities each marking period ranging from traditional sports to ballroom dancing, archery, aerobics, bowling, frisbee, inline skating, mountain biking, snow shoeing, wall climbing and a "sports wall" activity. Eating a healthy diet is impacted by scheduling and enrollment. The cafeteria staff*

"prepackage" many menued items to include as many components as possible to help move students through the service line. Some HS students do not have a scheduled lunch period as they opt to take classes. Those students are permitted to eat in class.

- *Vending machine only sells water*
- *None that I can think of...*
- *Lack of space for recess during the school day when the weather is not conducive to being outside.*
- *We promote healthy eating, exercise, and living a healthy lifestyle*

Please describe the most critical unmet needs that exist for students in your school in regard to healthy eating.

- *Students often eat "prepared foods" and "fast foods" at home because many families have inadequate cooking facilities or parents are working in the evening and so not have time to prepare healthy meals. Many students do not eat breakfast at home or in school.*
- *Students don't know what to eat and many of them do not have money to buy food. Students are skipping meals and participating in sports without eating, family eating habits.*
- *Well balanced meals daily*
- *Lack of opportunity*
- *Availability of fresh fruits and vegetables*
- *Cafeteria food choices do not appear to be healthy every day. Strange combinations are sometimes given.*
- *Marketing and education directed at the students in the cafeteria.*
- *Students are generally lazy and uninterested*
- *Inconsistent messaging by staff*
- *Even though our food service department has improved the menu, (no fried foods, lower fat content foods, lower sugar content foods) there are still concerns regarding the amount of processed foods being served, as schools purchase most of the food items as processed foods/preserved foods, which has a higher sodium content.*
- *Easily accessible low cost unprocessed foods.*
- *In school itself, more whole grains, fresh fruits and vegetables would be beneficial rather than prepared foods. More importantly - the lack of healthy eating that occurs at home has more impact on our students than the meals served here.*
- *Menu having to use foods supplied by the state*

What would need to happen in order to meet these needs?

- *I don't know. Nutrition is part of the health program, and whenever possible students are encouraged to eat healthy fruits and vegetables and breakfast. This does not translate into healthy eating habits in the home.*
- *Changes in lunch menu, teaching healthy eating to students and parents, Make healthy foods less expensive*

- *Better availability of fresh fruits and vegetables*
- *More choices*
- *Menu changes*
- *More healthier choices every day, salad bar, whole grain breads, fresh fruit snacks or granola bars in the afternoon*
- *Because we have limited time with each student in the cafeteria, visual prompts would be helpful, according to the director of food services.*
- *Increase motivation*
- *Education and more education*
- *Schools need to serve more fresh items, fresh fruits, veggies, meats. The message also needs to come from HOME - making good food choices - the school to home connection is not always the same.*
- *Local markets walking distance to homes that would sell fresh veg and fruit at a reasonable cost.*
- *More money would be needed to meet the high cost of these healthier foods*
- *A committee is working on this*

What barriers are there to meeting these needs?

- *Lack money for community programs. Lack of parental involvement in students' lives and school life, poverty.*
- *Poverty, single parent homes, generations of obesity*
- *Money*
- *Not sure*
- *Cost*
- *Cost, cafeteria has to make money, using the surplus food*
- *Funds to purchase "visual aids". It is possible that the people responsible are not aware of this request. It seems that the Art department may be able to design visual aids for this purpose.*
- *More education*
- *People who are unwilling or reluctant to change their routines/habits*
- *Money. Also families eat more processed/fast foods at home, as it is cheaper to purchase a "Value Meal" than it is to purchase fresh fruits, veggies, etc for a family. Society needs to make purchasing healthier foods cheaper than buying a "Value Meal".*
- *Business*
- *Financial constraints*
- *Regulations from the school or state*

Please describe the most critical unmet needs that exist for students in your school in regard to physical activity.

- *Better and larger recess area, more choices in physical education activities*

- *Need a program that meets the needs of all students. More individual sports or a choice of sports each class*
- *More physical activity in school and at home*
- *None*
- *Space availability for both during school hours and after school for sports or intramural. Transportation. Limited choice options for PE classes*
- *I am not aware of any unmet needs, however, many HS students choose not to participate in PE.*
- *We have increased the gym periods and have walking campaigns*
- *Office MD's need to be better about stating what the child CAN do after an injury occurs.*
- *Lack of space for recess activities; large physical education classes.*
- *I believe we have a strong program for meeting students' physical activity needs in the Elementary School. The physical education teacher is very involved in creating an environment that is healthy and fun for our students. More indoor space for physical activity would always be helpful.*

What would need to happen in order to meet these needs?

- *More funding, more staff*
- *More PE staff and more gym facilities*
- *Set time for recess daily*
- *Create more sports fields, recruit more coaches Poll students for possible options*
- *Since students have a variety of options, I don't know how to entice them to participate. I believe that some students are embarrassed about their level of fitness and don't want to change in front of other students.*
- *Continue the positive energy*
- *A meeting by a representative (of all school nurses) with the local physicians.*
- *Changes in students' schedules; another area/station for physical education class/teaching.*
- *Money available for building changes/additions.*

What barriers are there to meeting these needs?

- *Budgetary constraints*
- *Budget cuts, decrease in state aid*
- *Need to fit in academics*
- *Cost, space*
- *Students do have the option of changing in the bathroom area of the locker room. I don't know what else the school can do to offer more privacy.*
- *Keeping motivated*
- *Cooperation*
- *Money/costs/staffing.*

- *Financial constraints*

What type of policy would have the greatest impact on your students' ability to eat a nutritious diet?

- *No sugary foods, snacks, or beverages and no energy drinks allowed at school (sold at school or brought from home)*
- *Do away with having junk foods for birthday and holiday parties*
- *Changes in food offerings and education to go with them*
- *Provide more nutritious meals by eliminating fried or highly breaded foods (such as chicken nuggets) as options at lunch*
- *Following our Wellness plan and not allowing ice cream/candy to be sold in school at all.*
- *Continue only to offer the low fat items*
- *One that continues to reinforce the governmental guidelines re: government foods and %'s allowed.*
- *Requirements to increase certain types of foods served, i.e. whole grains, fresh fruits and produce.*

What type of policy would have the greatest impact on your students' ability to be physically active?

- *Strict policies regarding students being excused from PE*
- *Provide PE full year*
- *Possibly changing PE to Pass/Fail instead of graded classes that impact GPA.*
- *Continue the motivation*
- *Winter outdoor weather policy*
- *Requirements for daily physical activity/movement.*

What environmental change would have the greatest impact on your students' ability to have a nutritious diet?

- *More fresh vegetables, more flexibility in lunch choices*
- *Home!*
- *Not sure*
- *Possibly using locally grown foods in the cafeteria.*
- *Maybe more vending machines*
- *A community garden offering students the chance to invest themselves into this cause.*
- *In the school setting, having snacks/treats available that are nutritious.*

What environmental change would have the greatest impact on your students' ability to be physically active?

- *More facilities (exercise room, dance studio, indoor track) all of which involve more funding and more staff.*

- *Home!*
- *Providing more space indoor as well as outdoor for activities*
- *I really don't know. These students truly have such varied types of activity, I can't imagine what else could be done! They participate both in the building and outside.*
- *More time for gym*
- *Unsure*

Would you like to share anything else with us?

- *At this time many teachers and staff are being excessed due to the state budget deficit and reduced school funding, including our school. This will result in larger class sizes, reduced funding for "non-essential programs, and increased unemployment. First and foremost, people need to retain their jobs. Expanding facilities and programs needs to be secondary at this time.*
- *I am the school nurse teacher and am not on the wellness committee. As far as I know, there are no Nurses on the committee.*
- *Good Luck with this endeavor*
- *The primary place where good nutrition starts is in the home. The socio-economic factor for families to buy healthy foods cannot be underestimated.*

APPENDIX D: EMPLOYER SURVEY

Thank you for taking the time to complete this survey for the Sullivan County Department of Health. This survey is part of a larger needs assessment designed to help the Department understand the available resources, unmet needs, barriers and opportunities related to physical activity and nutrition in the County.

Employers can play a significant role in the ability of their employees to lead a healthy lifestyle. As an employer, your input into our project is very valuable, and we hope you will take the time to answer these questions as thoroughly and thoughtfully as possible. If you have any questions about this survey, please contact Maria Ayooob at the Center for Governmental Research, by phone at 518-432-8741, or by email at mayoob@cgr.org.

Survey Page 1

1. How many employees are in your organization?

- Fewer than 10
- 11-24
- 25-49
- 50-99
- 100 or more

2. What is the principal industry of your organization?

- Agriculture, Mining
- Construction
- Finance, Insurance, Real Estate
- Government
- Health Care
- Internet
- Manufacturing
- Retail, Wholesale
- Services
- Transportation
- Communications, Utilities
- Nonprofit
- Other (please specify)

Survey Page 2

1. Overall, the health of my employees is:

- Poor
- Fair
- Good
- Excellent
- I Don't Know

Please enter any comments below.

2. Please indicate the extent to which you agree or disagree with the following statements (Strongly Agree, Agree, Neither Agree nor Disagree, Disagree, Strongly Disagree. I Don't Know):

- a. Employees in my organization get an adequate amount of physical activity (both inside and outside of the workplace)
- b. Employees in my organization are able to eat a healthy diet (both inside and outside of the workplace)
- c. Obesity is a problem among employees in my organization
- d. Chronic diseases (e.g. diabetes, cardiovascular disease) are a problem among employees in my organization

3. Please indicate the extent to which you agree or disagree with the following statements (Strongly Agree, Agree, Neither Agree nor Disagree, Disagree, Strongly Disagree. I Don't Know):

- a. Employers have a role in helping employees live a healthy lifestyle
- b. Helping employees to be more physically active is beneficial to both employees and employers
- c. I am interested in implementing policies or other changes to my worksite(s) to enable employees to be more physically active
- d. I am interested in implementing policies or other changes to my worksite(s) to enable employees to eat a healthier diet
- e. I feel that I have adequate knowledge of how to implement changes to my worksite(s) to enable employees to be more physically active
- f. I feel that I have adequate knowledge of how to implement changes to my worksite(s) to enable employees to eat a healthier diet
- g. I would be interested in more information about how to implement such changes

Please enter any comments below.

4. Please indicate the extent to which you agree or disagree with the following statements (Strongly Agree, Agree, Neither Agree nor Disagree, Disagree, Strongly Disagree. I Don't Know):

- a. Worksite wellness programs can improve morale
- b. Worksite wellness programs can reduce absenteeism
- c. Worksite wellness programs can increase productivity
- d. Worksite wellness programs can reduce employer health care costs

Please enter any comments below.

Survey Page 3

1. Does your organization have a wellness committee?

2. If yes, please describe.

3. Does your organization have a wellness coordinator or a person responsible for health promotion activities?

4. If yes, please describe.
5. Does your organization offer a health insurance plan to employees?
 - a. Yes, all employees are eligible for health insurance coverage
 - b. Yes, some employees are eligible for health insurance coverage
 - c. No
6. Which, if any, of the following health promotion services do the health insurance plans available to your employees offer? (Please check all that apply)
 - a. Discounted or free gym memberships
 - b. Incentives for healthy behaviors
 - c. Weight loss services
 - d. Nutrition classes or coaching
 - e. Other (please specify)

Survey Page 5

1. Which of the following are available to employees at your worksite(s)? (Please check all that apply)
 - a. Food or beverage vending machines
 - b. A cafeteria or snack bar
 - c. Outside vendors that sell food during work hours
 - d. Food served at meetings
 - e. Other (please specify)
2. Does your organization have any policies related to the types of foods that are available at your worksite(s)? (For example, vendors supplying food for meetings offer only water, not soda; vending machines must have low-fat options)
3. If you answered yes to the above question, please describe these policies.
4. Are any of the following available for sale or consumption at your worksite(s)? (Please check all that apply)
 - a. Fresh fruits and/or vegetables
 - b. Sugar-sweetened beverages or soda
 - c. Bottled water
 - d. Snack foods such as candy or chips
 - e. Low-fat or low-sugar snacks
5. Are any of the following available at your worksite(s)? (Please check all that apply)
 - a. Outdoor areas where employees can be physically active
 - b. Indoor areas where employees can be physically active
 - c. Fitness equipment
 - d. Clean and well-lit stairwells
 - e. Other

6. Does your organization offer any of the following?
- a. Discounts or reduced fees for gyms, parks, or other facilities for physical activity
 - b. Weight loss programs
 - c. Education about healthy eating/cooking
 - d. Help with managing a chronic condition
 - e. Flexible schedules or longer breaks to allow employees to engage in physical activity
 - f. Incentives for healthy behaviors
 - g. Educational events that promote physical activity and/or nutrition
 - h. Awareness building initiatives (newsletters, posters) that promote physical activity and/or nutrition

Survey Page 6

1. In your opinion, what are the greatest unmet needs for your employees in terms of their ability to be physically active?
2. In your opinion, what are the greatest unmet needs for your employees in terms of their ability to eat a healthy diet?
3. Are there any potential benefits to worksite wellness programs that are not mentioned in the question above?
4. What are the major barriers to offering worksite wellness programs in your organization? (Please check all that apply)
 - a. A lack of financial resources
 - b. A lack of interest among staff
 - c. A lack of interest among management
 - d. Inadequate time to coordinate and oversee programs
 - e. Inadequate time for employees to participate
 - f. Inadequate infrastructure (e.g. outdoor or indoor spaces for physical activity or a cafeteria)
 - g. Other (please specify)
5. What policies or other changes in your organization would have the greatest impact on your employees' ability to be physically active and/or eat a healthy diet?
6. If you had the necessary resources would you be interested in offering employees any of the following (Please check all that apply):
 - a. Discounts or reduced fees for gyms, parks, or other facilities for physical activity
 - b. Weight loss programs
 - c. Education about healthy eating/cooking
 - d. Help with managing a chronic condition
 - e. Flexible schedules or longer breaks to allow employees to engage in physical activity

- f. Incentives for healthy behaviors
- g. Educational events that promote physical activity and/or nutrition
- h. Awareness building initiatives (newsletters, posters) that promote physical activity and/or nutrition
- i. Other (please specify)

Survey Page 7

1. Is there anything else you would like to tell us about this issue?

Thank you for completing our survey! We appreciate the time and effort in assisting in understanding the ability of Sullivan County residents to be physically active and have a healthy diet. If you have any questions please contact Maria Ayoob at 518-432-8741.

APPENDIX E: EMPLOYER SURVEY – OPEN ENDED RESPONSES

Survey Page 1

2. Please indicate the extent to which you agree or disagree with the following statements:

- a. Employees in my organization get an adequate amount of physical activity (both inside and outside of the workplace)
- b. Employees in my organization are able to eat a healthy diet (both inside and outside of the workplace)
- c. Obesity is a problem among employees in my organization
- d. Chronic diseases (e.g. diabetes, cardiovascular disease) are a problem among employees in my organization

Please enter any comments below.

- ◆ *Rheumatoid arthritis; hashimoto's thyroiditis... autoimmune diseases*
- ◆ *Only have 1 employee with a weight issue*

3. Please indicate the extent to which you agree or disagree with the following statements:

- a. Employers have a role in helping employees live a healthy lifestyle
- b. Helping employees to be more physically active is beneficial to both employees and employers
- c. I am interested in implementing policies or other changes to my worksite(s) to enable employees to be more physically active
- d. I am interested in implementing policies or other changes to my worksite(s) to enable employees to eat a healthier diet
- e. I feel that I have adequate knowledge of how to implement changes to my worksite(s) to enable employees to be more physically active
- f. I feel that I have adequate knowledge of how to implement changes to my worksite(s) to enable employees to eat a healthier diet
- g. I would be interested in more information about how to implement such changes

Please enter any comments below.

- ◆ *Changing policies is the easy part. How do you actually get the employees to chose healthy foods and be physically active?*

4. Please indicate the extent to which you agree or disagree with the following statements:

- a. Worksite wellness programs can improve morale
- b. Worksite wellness programs can reduce absenteeism
- c. Worksite wellness programs can increase productivity
- d. Worksite wellness programs can reduce employer health care costs

Please enter any comments below.

- ◆ *It has been my experience that worksite wellness programs are dramatically underutilized. Those that use the facility seem to be happier and more productive but too few use the facility to make an organizational improvement.*
- ◆ *I don't know how the health care premiums would be lowered but it would be great if they did get reduced.*

Survey Page 3

1. Does your organization have a wellness committee?

2. If yes, please describe.

- *One person company*

3. Does your organization have a wellness coordinator or a person responsible for health promotion activities?

4. If yes, please describe.

- *One person company*

5. Does your organization offer a health insurance plan to employees?

Other (please specify)

- *Only one person company*
- *They are covered under their retirement from other jobs*

6. Which, if any, of the following health promotion services do the health insurance plans available to your employees offer? (Please check all that apply)

- a. Discounted or free gym memberships
- b. Incentives for healthy behaviors
- c. Weight loss services
- d. Nutrition classes or coaching
- e. Other (please specify)**
 - ◆ *Full medical*
 - ◆ *I happen to be a Weight Watchers leader, so if employees ask me for assistance I do help.*

Survey Page 5

1. Which of the following are available to employees at your worksite(s)?

(Please check all that apply)

- a. Food or beverage vending machines
- b. A cafeteria or snack bar
- c. Outside vendors that sell food during work hours
- d. Food served at meetings
- e. Other (please specify)**
 - ◆ *One person home office*
 - ◆ *None- water cooler they bring their own lunch*

- ◆ Refrigerator, microwave, toaster oven, coffee maker, water cooler
- ◆ We have a small kitchen.
- ◆ I provide morning breakfast food. Such as home made blue berry, banana, corn bread. Everyday I provide breakfast foods.

5. Are any of the following available at your worksite(s)? (Please check all that apply)

- a. Outdoor areas where employees can be physically active
- b. Indoor areas where employees can be physically active
- c. Fitness equipment
- d. Clean and well-lit stairwells
- e. Other**
 - ◆ Yoga, weight loss programs, diabetes education
 - ◆ As a construction company our employees are active on the job site

Survey Page 6

1. In your opinion, what are the greatest unmet needs for your employees in terms of their ability to be physically active?

- Limited break time. Due to the nature of the work and the demands on time/presence staff break times follow the State requirements
- Schedules are tight.
- Longer break times and/or lunch breaks
- Time
- Job is "desk" related i.e. computer, phone
- Individual Responsibility...even organizations that provide benefits...only those motivated will do so
- Only that there may not be enough choices of fitness facilities.
- None my employees are very active

2. In your opinion, what are the greatest unmet needs for your employees in terms of their ability to eat a healthy diet?

- In general healthier diets are more expensive and take more time to prepare.
- None
- None that I can think of. Employees can bring in/prepare their own healthy foods if they choose .
- Once again, their desire to eat well. A business can promote, speak and ask for healthy diets by their employees...it's up to them to do it.
- Sometimes work pressures and deadlines contribute to grabbing fast, on the go food, which USUALLY is not the healthiest choice.
- Choices made by the individual

3. Are there any potential benefits to worksite wellness programs that are not mentioned in the question above?

- *No*
- *Not sure*
- *No*

4. What are the major barriers to offering worksite wellness programs in your organization? (Please check all that apply)

- a. A lack of financial resources
- b. A lack of interest among staff
- c. A lack of interest among management
- d. Inadequate time to coordinate and oversee programs
- e. Inadequate time for employees to participate
- f. Inadequate infrastructure (e.g. outdoor or indoor spaces for physical activity or a cafeteria)
- g. Other (please specify)**
 - ◆ *Inadequate incentives/disincentives for employees to live a healthier lifestyle*
 - ◆ *One person home office*

5. What policies or other changes in your organization would have the greatest impact on your employees' ability to be physically active and/or eat a healthy diet?

- *Schedule set time blocks to run in place or go outside and walk 10 minutes, etc.*
- *We promote healthy eating choices, but it is not my responsibility to tell them what to eat or how to live. I can make suggestions only*

Survey Page 7

1. Is there anything else you would like to tell us about this issue?

- *We feel business should not be responsible for their employees to be healthy. The issue returns to personal accountability and desire. This all starts at home. If a business hires healthy people, they take the risk of being sued for discrimination if they do not hire an obese person....then if they do they are responsible to change their "life-long" eating habits. I think this is not the responsibility of businesses to control and the government must stay out of it. Incentives, tax breaks or grants for healthy exercise/gym options for business have some value...but again...only if employees take advantage of it...if not...it's more wasted government money.*
- *In the workforce today you are limited as to what you can say to an employee, without the risk of being sued*

APPENDIX F: ONGOING ACTIVITIES

Prior to, and during the grant period, PHS has engaged in several activities related to physical activity and nutrition objectives in Sullivan County.

Community Wellness Committee



In 2007, the Sullivan County Rural Health Network created a Community Wellness Committee dedicated to promoting physical activity and nutrition. The Committee is composed of health educators, school nurses, parents, public health professionals, physical education teachers and County residents. PHS and the Committee have created a social marketing campaign called “Eat Healthy Move More,” aimed at increasing physical activity and nutrition initiatives in schools and worksites.

In 2008, PHS held a poster contest for seventh-graders, awarding prizes for posters depicting strategies for staying active and eating well during the summer. Student-designed posters and pins promoting the Eat Healthy Move More message have been distributed throughout the school system and the wider community.

PHS is also working with the wellness committees at two school districts in the County, Fallsburg and Monticello, to assist in maintaining their wellness policies and with year-long projects. In addition, PHS is working with Cornell Cooperative Extension (CCE) to incorporate its EAT HEALTHY NY program into school health education curricula. PHS and CCE are also collaborating to bring nutrition education to Head Start programs.

Currently, the Wellness Committee is exploring a Farm-to-School program, assisting schools with creating healthier meals, and finding ways to increase participation in Farmer’s Markets.

Rural Health Network

The Rural Health Network (RHN) is a State-funded collaborative of agencies across Sullivan County that work to improve the health status of County residents. One of the RHN's ten objectives for 2010-2011 relates to childhood obesity and workplace wellness: Decrease child obesity and promote school and workplace wellness by promoting sustainable policy and environmental changes that change organizational cultures in support of wellness initiatives. Create menu and policy change in schools to reduce childhood obesity.

In 2009, PHS, RHN and Sullivan County BOCES sponsored a presentation to School Food Service Directors on two nutrition programs, the Farm to School program and the Give Me 5 Fruits & Vegetables program.

Action Institute

In February 2010, The New York State Department of Health sponsored an Action Institute for Counties participating in the Building Healthy Communities grant. This event was designed to assist Counties in identifying and describing strategies that can be completed by August 30, 2010. Representatives from Sullivan County BOCES, Public Health Services, and Cornell Cooperative Extension participated in the Action Institute and identified the following strategies:

- Improve the quality of school lunch menus.
- Increase awareness of local Farmer's markets and the services available, for seniors and low-income families.
- Increase the number of community gardens and help make them sustainable.