

Comments of the National Association of County and City Health Officials

On the Report of the Dietary Guidelines Advisory Committee on Dietary Guidelines for Americans, 2010

July 12, 2010

The National Association of County and City Health Officials (NACCHO) is pleased to submit the following comments on the Report of the Dietary Guidelines Advisory Committee (DGAC) on the Dietary Guidelines for Americans, 2010.

NACCHO is the national organization representing the nation's 2800 local health departments and its vision is health, equity, and well-being for all people in their communities through public health policies and service. NACCHO's mission is to be a leader, partner, catalyst, and voice for local health departments in order to ensure the conditions that promote health and equity, combat disease, and improve the quality and length of all lives. Local health departments are committed to improving the public's health through reducing chronic diseases that can be caused and exacerbated by obesity.

NACCHO agrees with the Dietary Guidelines Advisory Committee that addressing the obesity crisis requires “a coordinated system-wide, multi-sectoral approach” that engages “those in education, government, healthcare, agriculture, business, advocacy and the community” with a rigorous emphasis on primary prevention. For the first time, this report recognizes that changes in policy and the food environment are needed to help people follow the dietary guidelines in order to be healthy.

NACCHO commends DGAC on their approach and urges the Departments of Health and Human Services and Agriculture to utilize the DGAC recommendations to address the multi-faceted and systemic barriers that hinder individuals in their pursuit of healthy lifestyles. Addressing obesity prevention and reducing chronic diseases requires a comprehensive approach involving: policy and legislation, systems-based reform, changes to the built and physical environment, nutritional equity and funding¹ in a manner that engages the community. As recommended by DGAC, a national strategic plan could be instrumental in identifying the steps needed to implement, achieve, and sustain the recommended changes in American diets and levels of physical activity. However, an actionable plan is needed.

The DGAC report strongly recommends that HHS and USDA convene the appropriate committees to produce a strategic plan to implement the DGAC recommendations. However, convening these committees would take time which cannot be spared in the midst of an epidemic of chronic disease. In addition, evidence-based recommendations already exist and should be utilized in the development of an actionable, strategic plan. NACCHO recommends using documents such as the *Centers for Disease Control and Prevention Recommended Community Strategies and Measurements to Prevent Obesity*², *Institute of Medicine Local Government Actions to Prevent Obesity*³, *The Leadership for Healthy Communities Action Strategies Toolkit*⁴, and the White House Task Force on Childhood Obesity Report to the President, *Solving the Problem of Childhood Obesity Within a Generation*⁵ to develop this plan. What is needed at this time is an action plan with



clear goals, measureable and feasible objectives and adequate resources to ensure the Dietary Guidelines can be implemented at both the systems and individual level.

NACCHO concurs with the conclusion in the report that “mere repetition of advice will not effectively help Americans achieve these evidence-based and often-repeated goals for a healthy diet.” The sound recommendations of DGAC will be in vain if the system around the recommendations does not change.

Successful strategies for obesity prevention include elements of: community partnerships, education, policy and legislation, and systems change. Strong community partnerships utilize shared missions and visions at the community level to approach a problem and can address inequities in health. These approaches typically impact not just obesity but also other related health conditions. Successful strategies are driven by policy and legislation; these impact the larger social environment and achieve changes that set the groundwork for further interventions. Systems level changes are unique in that they can impact multiple health-related problems at once and can create sustainable changes. Without changing the system, competing priorities and siloed funding persist.

NACCHO also appreciates the report’s consideration of individuals at all ages and supports incorporation of the lifecourse perspective in the development of DGAC’s strategic plan. The lifecourse perspective provides a comprehensive approach to protecting and promoting the life of individuals at all ages. For example, focusing on the dietary and physical activity needs of women of reproductive age can impact their life as an adult as well as that of their future children. At each stage of life, all individuals face unique barriers and circumstances that may influence their risk of obesity. A lifecourse approach is necessary to achieving success in prevention efforts at the population level.

The evidence is unanimous that obesity is the largest health threat to Americans and that swift and comprehensive actions must be taken. In conclusion, NACCHO is pleased to support the DGAC’s recommendations of a policy and systems-based approach to ensure that individuals have the opportunities and self efficacy to make healthy choices throughout their lifespan. NACCHO urges that the recommendations be incorporated into an implementation plan for the Dietary Guidelines 2010 that is focused on obesity prevention.

Thank you for the opportunity to comment on this influential report.

¹ NACCHO Policy Statement 10-01 Comprehensive Obesity Prevention.

² Keener, D., Goodman, K., Lowry, A., Zaro, S., & Kettel Khan, L. (2009). *Recommended community strategies and measurements to prevent obesity in the United States: Implementation and measurement guide*. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention. Retrieved July 8, 2010 from http://www.cdc.gov/obesity/downloads/community_strategies_guide.pdf.

³ Institute of Medicine and National Research Council. (2009). *Local Government Actions to Prevent Childhood Obesity*. Washington, DC: The National Academies Press. Retrieved July 8, 2010 from <http://www.iom.edu/reports/2009/childhoodobesitypreventionlocalgovernments.aspx>.

⁴ Leadership for Healthy Communities. (2009). *Action Strategies Toolkit*. Robert Wood Johnson Foundation. Retrieved July 8, 2010 from http://www.leadershipforhealthycommunities.org/images/stories/toolkit/lhc_action_strategies_toolkit_0900504final.pdf.

⁵ White House Task Force on Childhood Obesity (2010). *Solving the Problem of Childhood Obesity within a Generation*. Retrieved July 8, 2010 from http://www.letsmove.gov/tfco_fullreport_may2010.pdf.