Community Strategic Plan

February 28, 2011

New Jersey Partnership for Healthy Kids—Camden Communities Making a Difference to Prevent Childhood Obesity

Acknowledgments

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I. Community Focus

In Camden, obesity is a significant health risk to its 76,000 residents. A higher percentage of public school children are overweight or obese compared to the national average. In fact, 35% of children in the youngest age category are overweight compared to 21% nationally. Higher rates exist among Camden's Hispanic children in both the youngest and oldest ages compared to national averages. Further, two of Camden's neighborhoods, Parkside and North Camden, have the highest percentages of public school children who are overweight (35-45% and 45-50% respectively).

Almost ½ of Camden residents do not eat fruits and vegetables daily and only 12% eat vegetables 3 times daily. Nearly ¼ of households with children 3-18 years old are food insecure and this rate increases for Hispanic households. Only 42% of children aged 3-18 meet national activity guidelines and 1/3 of children spend more than 2 hours daily watching television or playing video games during the week. This fact increases to 60% on the weekends. Compounding this issue, 20% of parents in Camden report living in a neighborhood with no park and nearly 40% report their children do not use parks for physical activity. Ironically, the majority of parents in Camden do not think that their children are overweight.

The Parkside neighborhood has 4,790 residents; with 32% of its population under 18 years of age. The median household income is \$33,396 and roughly 33% of families are living with incomes that are less than 150 percent of the federal poverty level. The declining condition of residential properties and increasing number of vacancies has contributed to Parkside's problems. Cleanliness and safety are two

quality of life issues plaguing Parkside residents. Loitering in Parkside indicate locations of high drug activity.

Parkside is home to five schools, two of which are the Partnership's Pilot Sites: Early Childhood Development Center (ECDC) (500 students, pre-K-K) and Forest Hill School (1,339 students, 9th-12th). ECDC and Forest Hill Elementary School have 41.5% and 30.7% of its students overweight or obese respectively.

With 17 acres of open space per 1,000 residents (and 22% of total land area), Parkside has a high potential for taking advantage of its land resources. The two largest parks are New Camden Park and Farnharm Park. Camden High School's Athletic Fields also offer opportunities for recreational use, although there are lighting, and structural concerns, as well as unsafe bleachers to be addressed. New Camden Park (24 acres) includes open fields for sports, a playground for younger children, and a bike path that connects with the Camden Greenways Project. Farnham Park (71 acres), also located in Parkside, is the largest park in the City of Camden. As part of the Camden Greenways Project, Cooper's Ferry and Camden City are redeveloping the upper portion of the park to mitigate erosion issues, that currently limit resident utilization of the park.

The food environment in Parkside is heavily defined by Haddon Avenue which has 7 corner stores and 8 limited service restaurants. There are no grocery stores in Parkside. Cousin's Supermarket is 1.4 miles away. There are an additional 12 corner stores close to or located within this neighborhood.

The neighborhood of North Camden, which is divided into Cooper's Poynt and Pyne Poynt sections, has 8,636 residents and 29% of its population under 18 years of

age. The median household income is approximately \$22,390 and roughly 57% of families are living with incomes that are less than 150 percent of the federal poverty level. North Camden is home to 5 schools, 2 of which are the Partnership's Pilot Sites: Cooper's Poynt Elementary School (541 students, Pre-K-8th) and Holy Name School (160 students, Pre-K-8th).

North Camden faces a different set of problems than Parkside in respect to creating abundant open space that is accessible to neighborhood residents. Cooper's Poynt has limited amounts of open space with only 2% of total acreage (1.5 acres per 1,000 residents) dedicated as open space. Pyne Poynt is slightly better off with 7% dedicated as open space (3.7 acres per 1,000 residents). Unlike Parkside, North Camden has a number of smaller parcels of open space scattered across the neighborhood, offering residents a higher likelihood of living within close walking distance to a park or green space.

Pyne Poynt Park (13 acres), the largest park in North Camden, is a county park located along the Delaware River. The park has baseball and soccer fields, a swimming pool and basketball court. Adjacent to the park are two community centers containing a boxing gym and indoor basketball courts. Both the community centers and the park have become slightly worn down with problems of poor lighting, dumping of garbage and waste, frequent flooding and illegal ATV riding. Through Delaware River Port Authority funding, an improvement plan has been developed for the park and is set to begin in 2011.

Northgate Park features a basketball and tennis courts, a playground, an amphitheatre, and a projection wall for community events. Many of these facilities have

fallen into disrepair. Loitering and drug activity in the park has led to decreased access as the park is locked for lengths of time.

The food environment in North Camden includes 19 corner stores and 2 limitedservice restaurants. There are no grocery stores or healthy food outlets within the boundaries of North Camden. Further, Cousin's Supermarket is 1.8 miles away.

II. Community Partnership & Planning

The NJ Partnership for Healthy Kids-Camden is co-directed by the YMCA of Burlington and Camden Counties (Y) and United Way of Camden County (UWCC). Both have significant experience operating and funding health and human service programs in low-income communities. Additionally, the Co-Directors have expertise in mobilizing communities to come together to ameliorate social service problems.

The mission of the Y is to build strong kids, families and communities through programs committed to improving an individual's spirit, mind and body. The Y supports after school and summer programs that provide fun, safe environments for children. Further, the Y is the inventor of basketball, racquetball, volleyball and the first organized summer camps; the nation's largest provider of child care; the largest youth sports organization; and America's leading swim instructor. The Co-Director from the Y has over 18 years of experience in the Y system.

The mission of UWCC is to mobilize the caring power of the Camden County community. Known for bringing people together—government, business, faith groups, nonprofits, the labor movement, ordinary citizens—to solve problems, UWCC has demonstrated expertise in tackling tough issues such as childhood obesity. UWCC is already funding many community-based organizations making a difference in the health

of the city's children. The Co-Director from UWCC has over 25 years of experience in the system.

Working under the leadership of the Y and United Way, the Partnership's Core
Planning Team consists of nearly 20 practitioners and experts representing 10
organizations in the areas of health, wellness, nutrition, and physical fitness. Members
represent: Rutgers University-Camden, Camden Coalition of Healthcare Providers,
Campbell Soup Company, Cooper University Hospital, University of Medicine and
Dentistry, and Woodland Community Development Corporation.

This team includes front-line primary care health providers with expertise in health planning, obesity treatment, nutrition counseling and physical education. There are team members fluent in Spanish and proficient in data analysis, program design, and project implementation. This team also has linkages to obesity-related resources at area hospitals, as well as direct connections to local schools, child-care agencies and other organizations. Beyond the Core Planning Team are Discipline Specific Advisory Teams representing healthcare providers, parents and teachers, nutritionists, public health advocates, community-based non-profits, faith-based leaders, government, and business leadership.

The Core Planning Team's mission is to mobilize the Camden City community to reverse childhood obesity. The vision is to be a key change agent significantly improving the health and wellness of the Camden City community. The Core Planning Team meets on a biweekly basis for a minimum of 2 hours to determine outreach and marketing approaches to inform the community about this obesity reduction initiative and its progress. They organized a network of advocates to help achieve policy and

physical environment goals while engaging stakeholders to ensure ownership of the goals and action plans developed for and by the Partnership's designated neighborhoods and Pilot Sites. The overall goals of the planning phase were to:

- Engage residents, enroll organizations and build citywide leadership to influence policy and environmental issues on obesity
- Educate Pilot Site families and staff on causes and treatments of obesity
- Administer the CHLI and discuss the results with all stakeholders
- Engage issue experts who can help develop policy and physical environment change needed to reverse the childhood obesity trend
- Utilize all relevant data from RWJF initiatives to inform the planning phase
 The Partnership in Camden will focus its obesity reduction efforts in schools,
 childcare organizations and faith-based organizations—serving children aged 3-11. In
 the fall of 2010, a request was sent to various organizations interested in collaborating
 with the Partnership on reducing obesity in their organizations and neighborhoods. The
 Partnership required that applicants demonstrate their ability to serve a Camden City

population with high BMI rates; prior successes in collaborative strategies; and

organizational capacity, commitment and responsiveness.

Six sites were chosen to be Pilot Sites and those sites fell in the neighborhoods of North Camden and Parkside. The sites are Respond Inc, Holy Name Elementary School, Cooper's Poynt Elementary School, Forest Hill Elementary School, Parkside United Methodist Church, and Early Childhood Development Center.

The Project Coordinator promptly met with each site to build trust and rapport between the Partnership and the site team, as well as ensure that the appropriate site individuals and neighborhood stakeholders were a part of their team. Each site was encouraged to recruit 10 individuals including: nurse, food service employee, physical

education employee, director, teacher, Board member, parent/family members, local recreation/parks employee, faith-based leader, neighbors, local business owner and local corner store owner. After these initial meetings, the CHLI assessments were administered with each site team. This engaged the site teams in a two-way dialogue and began building the leadership capacity of the sites, as well as city residents and other stakeholders.

Over 120 people participated in 3 community engagement sessions including the six Pilot Sites, North Camden and Parkside neighborhood residents, and other stakeholder organizations. Major strategies were reviewed including: making healthy foods available, increasing physical activity, providing safe places for unstructured play, limiting advertising of unhealthy foods, limiting screen time, and making healthy foods affordable. Each site reported on their CHLI results, supplying the foundation for specific plans, reviewed best practices, brainstormed and then prioritized their desired activities according to an Impact/Likeliness Hi-Low matrix. Attendees began to identify the assets, challenges and resources needed to implement their prioritized plans. Prior to the last 2 neighborhood based community engagement sessions, a resident provided a tour of the neighborhood, outlining assets and challenges, for Core Planning Team members, Co-Directors, and the Project Coordinator.

The Core Planning Team reviewed the results from these sessions and over the next three months anticipates presenting these plans to the larger neighborhood constituency at neighborhood meetings. The Partnership is confident the community will make commitments to help execute these plans.

III. Data & Assessment

A. Summary of Data

In addition to the CHLI assessment, the Partnership utilized data from Rutgers Center for State Health Policy and *The New Jersey Childhood Obesity Study* to accurately describe the current health and wellness condition of Camden. Plus, the Partnership referred to recommendations from the President's Childhood Obesity Taskforce, Institute of Medicine, CDC, and Shaping NJ.

B. Community Healthy Living Index and Other Assessments

From December 2010 through January 2011, 6-8 Pilot Site team members participated in their Site's CHLI assessment lasting 1 ½ hours. Members of the Core Planning Team participated in these assessments, which continued to build rapport and establish credibility with site teams.

The CHLIs showed most of the schools have health education around healthy eating habits, but all lack funding for health education. There is a wide range in student physical education time per week: K-5 grades range from 0-120 minutes and 6-8th between 45-180 minutes. One school stated their health curriculum does not have a nutrition component.

Physical education programs are generally taught by credentialed PE teachers, promote participation in many activity options, and use appropriate and acceptable practices. Overall, schools lack sufficient funds to support their PE programs. Children at 2 of the 3 schools are not being assessed on individual progress. Schools rarely provide extra-curricular activities.

The neighborhood's transportation infrastructure is not sufficient or safe for students to walk or bike to school. Students at 2 of the 3 schools rarely walk or bike to school. All schools cited traffic hazards, lack of sidewalks, concerns about safety and drug activity as difficulties that impede walking. None of the schools are working on addressing walking/biking accessibility concerns.

Each of the schools has a breakfast program that meets USDA standards, offers a variety of healthy foods, allows time for eating, employs a qualified food service manager, uses healthy purchase and preparation procedures, and prohibits the use of food as a reward or punishment. Schools generally have sufficient funding to support healthy eating opportunities; however, 2 of the 3 schools do not meet budget without relying on vending sales. None of the schools have policies that limit the sale of foods of low nutritional quality and none require that food brought in from outside sources be healthy. Staff rarely model healthy eating. Kids frequent corner stores both before and after school to purchase junk food. Candy is used as a reward at some of the schools.

All three public schools collect BMI data and share information with parents in writing to indicate if a student needs to see a health care provider. Some parents indicated that they have not received BMI related information.

At the child care centers, there is a range in the amount of daily moderate physical opportunities. Only sometimes is vigorous activity offered three times per week and staff does not model positive behavior by participating in physical activities with the children. Facilities and equipment do tend to be well maintained.

The child care centers follow the state guidelines for healthy eating. Both offer more whole-grain than non-whole grain options and more non-fat and low-fat dairy

products. Respond, Inc. always offers water as its primary beverage option while ECDC rarely/never does. Staff at Respond, Inc. model healthy behaviors by eating healthy meals/snacks in front of the children. Respond, Inc. also has on-site farmers markets/educational gardens while ECDC does not. All meals and snacks at Respond, inc. are prepared in house and fruits/vegetables/whole grains are given to children regularly. ECDC does not have fresh fruits and noted that salads are "drowned" in dressing.

At Respond, Inc. children do not play outside because of safety concerns, specifically street lighting and drug activity. At ECDC, staff resist going outside despite the Principal's encouragements. ECDC would like to be able to use the adjacent county park (New Camden Park). All staff members have received training to instruct children on healthy living. They also have health and wellness programs in place for families.

The Parkside neighborhood has some walkable sidewalks that are free from obstructions, well maintained and level; however, there are very limited operable bike paths and traffic calming measures. Although many community members walk to local destinations, they cite air and noise pollution, litter, and physical disorder as common on roads and in parks. Residents tend to only take their children to local parks when they can be supervised due to safety concerns and a lack in funding for upkeep and maintenance has further threatened the safety of parks and playgrounds.

Local corner stores are expensive and have limited amounts of fruits and vegetables. Some residents purchase their food at local stores, though most must travel outside of the city for greater selection of healthy options. The local stores that residents do frequent tend not to offer price incentives or promotional displays that encourage the

purchase of healthy options. Vegetables are infrequently available from alternative, nongrocery store locations, such as farmers markets and community gardens.

IV. Strategies and Impact

Despite these CHLI results, Camden residents do envision healthy living for themselves-lower BMI and less obesity-related diseases in children, families consuming the FDA recommendation of fresh fruits and vegetables, and safety in neighborhood recreation areas. They also foresee the availability of fresh food through farmer's markers, community gardens, and corner stores, as well as recreational programming in the neighborhood parks. Lastly, they predict greater neighborhood capacity to sustain policy and environmental changes supporting health and wellness.

The following outlines the plans in each of the four main strategies:

Increase Healthy Foods and Beverages in Pilot Sites

The Pilot Sites will create policy similar to or enforce the NJ School

Nutrition/Wellness Policy, restrict the availability of unhealthy foods in fundraisers and as classroom rewards, monitor food and beverages brought into schools from outside, develop policies on healthy snacking and set nutritional guidelines for food at church food pantries. To reach compliance in public schools, each school needs to determine the guidelines they are in compliance with and those they are not. For those they are not, they will identify the barriers preventing compliance and ways to overcome them.

Teams will work over the summer, alongside their food service provider and site administration, to put in place the necessary tactics to reach compliance in the fall 2011.

For those sites without a formal nutrition/wellness policy, they will work with their food service provider or kitchen staff, and site administration to develop guidelines similar to

the NJ Nutrition/Wellness Policy.

Additional ideas brainstormed by the sites include: working with the Foodbank of SJ to provide calorie contact labels on donated food, recruiting healthy food donations for the Church's food pantry, teaching children that healthy snacks are appetizing, increasing the salad bar option at lunch, and partnering with farmer's markets/corner stores to introduce a healthy option in schools/child care centers once weekly.

ARAMARK, the food service provider for the public school district, recently announced it will be rolling out breakfast in the classrooms and/or "grab and go" foods for the students. The Partnership also plans on joining with the District Council Collaborative Boards (DCCB's) to enforce the daytime curfew by working with local eateries and corner stores to prohibit service to minors during the day when children should be in school.

Increase Availability & Affordability of Healthy Foods in Designated Neighborhoods

Both neighborhoods seek to increase the number of farmers markets and days available in their neighborhoods. A corner store initiative will be developed to offer incentives and assistance on storage and display of fresh produce. The Grow Lab Program, as well as community gardens, will be expanded in schools/child care centers in designated neighborhoods. The stakeholders also suggest offering farmer's market selections once a week for students to learn about, taste, and take home to share with families.

The Partnership has already launched a relationship with Rutgers Camden's North Camden Civic Engagement project, which has identified 25 abandoned lots to be greened and convert one of these sites into an urban farm. The Camden Children's Garden is invested in expanding the Grow Labs and community gardens in the

designated neighborhoods.

Increase Physical Activity in Pilot Sites

The Partnership will help the school district comply with the NJ Comprehensive Health & Physical Education Policy and ensure students K-12 are physically moving for at least 50% of the mandated time set in the policy. Residents need facility access during non-school hours for sports teams, clubs, and programs involving physical activity. To this end, the Partnership plans to explore a use agreement with the public school district. The Partnership will also encourage developing a walking school bus program for students in the pilot schools/child care centers.

In order to reach compliance with the NJ Policy on Health & PE in the school district, each school will determine where their compliance is lacking. Staff and parents will identify barriers and ways to overcome them. The sites will then work through the fall 2011 to install the necessary tactics to overcome these barriers and be prepared to reach compliance by spring 2011.

Holy Name and Parkside United Methodist Church are without a policy and will work with PE staff and site administration to develop guidelines that mirror the NJ Health & Physical Education Policy.

Increase Opportunities for Unstructured Play in Safe Areas in Designated Neighborhoods

The Partnership will catalogue parks, open spaces, playgrounds, recreational sites, public pools in Parkside and North Camden to determine their hours of operation, security and maintenance, programming, safety, frequency of use, and gaps in infrastructure. Post assessment, there will be an action plan developed to increase use, security, maintenance, and/or programming. This will be done in partnership with DCCBs, local neighborhood groups, block captain systems, Camden City government -

including the Police, and County Parks officials.

The Partnership plans on improving the physical conditions of at least two parks in the designated neighborhoods, and enact adopt-a-park policy whereby neighborhood residents maintain and offer programs in the parks. Efforts will be made to increase awareness of parks not requiring major refurbishment but currently underutilized. The Partnership will also integrate trail/bike path/greenway along Delaware and Cooper Rivers into neighborhood activity plans.

V. Feasibility and Sustainability

The Partnership has a full-time Coordinator working closely with the six Pilot Sites, the Core Planning Team, and the Disciplinary Specific Advisory Teams to assure that the goals stay top-of-mind with all partners and progress is continuous.

Moving to implementation phase, the Partnership plans on further developing the Disciplinary Specific Advisory Teams by securing leadership, determining roles, and populating teams with additional experts and practitioners. The Co-Directors have had discussions with local & state elected officials and the public school district about the Partnership and its efforts to combat childhood obesity in Camden City.

The Partnership has identified additional interested partners to ensure success including Camden Area Health Education Center, Camden City Children's Garden, Cooper's Ferry Development Corporation/Greater Camden Partnership, Camden Greenways, New Jersey Tree Foundation, Parkside Community and Business in Partnership, Concerned Citizens of North Camden, and the District Council Collaborative Boards. These organizations will form the Citywide Partnership, which will meet quarterly for updates on site and neighborhood plans, as well as inform on other

related efforts occurring in Camden. Additionally, this Citywide Partnership will include a representative from each Pilot Site.

The Core Planning Team will transition from planning to implementation and will be renamed the Partnership Advisory Board. Some additional recruitment will include pivotal partners such as the Civic Engagement Director of Rutgers University-Camden and the Public Health Director of Our Lady of Lourdes Medical Center. The Partnership Advisory Board will define its implementation phase role, including specific responsibilities with assigned Pilot Sites. Group members came to the Partnership with a passion for obesity reduction and have demonstrated their commitment over the past year through the heavily attended bi-monthly meeting schedule.

To increase collaboration, at least two members of the Core Planning Team have been assigned to each Pilot Site and will attend site meetings, as well as maintaining recurring communications with the site teams. Additionally, each site team has been charged with hosting frequent neighborhood meetings to ensure the participation and ownership of residents and small businesses. Camden has a history of new initiatives sweeping into the City, only to exit a short time later unsuccessfully. This history has residents wary of new efforts. Since much of the obesity-reduction efforts require behavioral changes, gaining the trust of the residents cannot be minimized.

The main barrier the Partnership anticipates deal with the staffing and budget constraints of municipal government and the public school district. Camden City government faces many urgent issues at this time, including major staff and budget reductions, police department restructuring and layoffs, and the redevelopment of the City in order to attract ratebles. The Mayor, however, has indicated that one of her

priorities is Youth Development, including the overall health of the city's youngsters. The Partnership will leverage UWCC's existing relationship with county government and county elected officials to move our action plans forward.

A unique component of the Partnership is the support and involvement of the Campbell Soup Company through their corporate foundation contribution to UWCC and their complementary \$10 million, 10-year plan to reduce childhood obesity and hunger by 50% among Camden's 23,000 children.

Campbell's, along with the Partnership and state partners, plans on increasing access to affordable, healthy food, supporting the development of a major, centrally located supermarket in Camden; expanding the availability of fresh produce in corner stores by enacting a program whereby corner store owners will receive equipment, technical assistance and training to help sell fresh produce profitably; increasing the number of community vegetable gardens by working with the city and the Camden Children's Garden to convert abandoned urban lots into productive urban gardens; funding in and after school activities like the Y's CATCH program; and teaching families how to make healthy and budget-wise food choices. Lastly, Campbell's North America Foodservice business supplies school systems nationwide with lunch products and Campbell's chefs and dieticians will help coordinate classroom activities, including nutrition lessons, student-run fruit smoothie markets to teach students about healthy snacking, parent workshops and field trips to local farms. Campbell's plans on concentrating these efforts in the six Pilot Sites of the Partnership and then gradually expanding throughout Camden City.

To further support these efforts, the Partnership plans to contract a consultant to facilitate the implementation of policy and environmental change strategies. This consultant will work closely with the project coordinator and each neighborhood to engage city-wide partners in activities identified in the strategic plan as well as encourage community engagement within the neighborhood Pilot Sites.

VI. Monitoring and Quality

The Partnership has several monitoring opportunities in order to assess progress on action plans and viability of accomplishing outputs. This feedback system will allow the Partnership to modify direction to achieve the outcomes noted in our logic model.

The Pilot Sites will attend the quarterly Citywide Advisory Partnership meetings to present progress toward reducing childhood obesity rates. Core Planning Team members assigned to the sites will observe the processes used to realize change—whether in policy or physical environment—and provide ongoing, real-time feedback to the overall Partnership, along with suggestions for corrective action.

The most effective method for long-term sustainability of obesity reduction is to change eating behaviors and increase physical activity. Besides measuring certain concrete outcomes, such as BMI and incidences of obesity-related diseases, the Partnership will measure the knowledge, attitudes, behaviors, and beliefs of youth and families exposed to the Partnership's efforts. Prior to June 2011, a survey will be administered to the targeted youth and their parent/guardian capturing baseline data on eating and physical activity habits. This survey will be repeated annually to measure changes in attitude and behavior.

A survey of corner store owners will measure perceptions around storing and selling fresh produce. This survey will be repeated with those who participate in the corner store initiative. A satisfaction survey will also be given to customers measuring their willingness to purchase healthy foods and their satisfaction with healthy options.

To measure concrete outcomes, the Partnership has downloaded the BMI data from the public schools to serve as a baseline. By June 2011, the Partnership will collect BMI data at its private school/child care sites. The Partnership will analyze the BMI data on a yearly basis in order to evaluate progress. The CHLI assessment will be conducted annually to measure changes in perceptions, behaviors, and practice within the sites and neighborhoods.

A potential measure of the community's capacity to sustain policy and environmental changes can be tracked through attendance at Partnership events including: community engagement sessions, educational/training programs, and specific programs associated with this initiative, such as programming at neighborhood parks and playgrounds. This can also be tracked through the number of organizations and members who join the Citywide Advisory Board and the Disciplinary Specific Advisory Teams.

The Partnership will contract a consultant to conduct a process and outcome evaluation of its obesity reduction efforts in Camden. Specifically, the consultant will design and administer all evaluation instruments, collect the BMI data in the private schools and child care centers. Lastly, they would help the Partnership determine the most effective and efficient methods for collecting measurement data, as well as synthesizing and presenting the collected data to our Partnership Advisory Group.