

HEALTHY RETAIL

COLLABORATION WORKBOOK



Forming partnerships among tobacco control, nutrition, and excessive alcohol use prevention agencies



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Introduction

The retail environment has a significant impact on the health of communities.

In many places, residents lack access to fruits and vegetables, but can find tobacco and alcohol all too easily. This has serious health consequences. In the United States, tobacco use, poor nutrition, and excessive alcohol use are among the leading causes of preventable deadly illness, including heart disease, cancer, and chronic lower respiratory diseases.¹ People of color and those with lower incomes are at very high risk for these conditions.^{2,3}

The ideal retail environment makes fruits, vegetables, water, and other nutritious products more accessible, and tobacco, sugary drinks, non-nutritious foods, and alcohol less accessible.

Public health practitioners in tobacco control, nutrition, and excessive alcohol use prevention are already working toward this vision, together with store owners, community members, elected officials, and other stakeholders. They are changing the mix of foods, beverages, and tobacco products offered in stores, as well as where items are placed, how they are promoted, and how much they cost. Practitioners are also working to limit the number, location, and density of stores that sell tobacco products, alcohol, or both in states and localities.

But more often than not, these public health practitioners work separately from each other. As a result, they may be missing out on opportunities to collaborate. And at times, agencies may even impede each other's progress by burdening store owners or community partners with overlapping requirements and requests. The retail environment represents an opportunity for practitioners to collaborate and strengthen their effectiveness.

Healthy Retail Companion Pieces

This workbook is a step-by-step guide to forming a partnership among tobacco control, nutrition, and excessive alcohol use prevention programs. It includes case studies and examples of states and localities that have launched a comprehensive approach, as well as sample activities, scripts, and worksheets. See the following resources to learn more about the importance of healthy retail and to begin developing a comprehensive approach to the retail environment.



HEALTHY RETAIL PLAYBOOK

This resource presents innovative strategies in tobacco control, nutrition, and excessive alcohol use prevention in order to create a retail environment where it is easier to make healthy choices than unhealthy ones.



CONVERSATION STARTERS

This set of four one-pagers introduces the rationale behind and benefits of a comprehensive approach to the retail environment. They include sample talking points to make the case for collaboration to potential partners.

Workbook overview

What does it do?

This action-oriented workbook guides government staff working in tobacco control, nutrition, and excessive alcohol use prevention through the formation of a healthy retail partnership. It answers the fundamental question: *Where do we start?* It also provides tools – such as worksheet templates and discussion prompts – to guide practitioners through the process. The goal of this workbook is to help public health practitioners establish a partnership that can serve as a springboard for collaborative action in the retail environment.

What doesn't it do?

There is no one-size-fits-all approach that will apply to every location. This workbook is not designed to prescribe what a partnership should look like or what actions a group should pursue. The specific goals and actions a partnership agrees upon will vary depending on the interests and capacities of those involved.

This workbook is also not a Healthy Retail 101 guide. It focuses on the process of collaboration, rather than specific tactics to improve the retail environment. For resources on how the retail environment affects health and examples of policies to improve the retail environment, see ChangeLab Solutions' [Health on the Shelf: A Guide to Healthy Small Food Retailer Certification Programs](#), [Conversation Starters](#), and [Healthy Retail Playbook](#).

Who is it for?

The primary intended audience is public health nutrition staff with experience working on a healthy food retail initiative and interest in strengthening this work through partnerships with tobacco control and excessive alcohol use prevention colleagues. Although this workbook was written with nutrition staff in mind, it can be used by staff from other programmatic areas. The key strategies outlined are applicable to public health practitioners working at both the state and local levels.



What's inside?

A framework for collaboration

This workbook describes six key strategies for forming a healthy retail partnership. These strategies draw on the experiences of state and local health departments that are putting this kind of collaboration into action. They are intended to build on one another.

Strategy 1. Identify potential partners

Strategy 2. Start a conversation

Strategy 3. Learn about each other's retail-related work

Strategy 4. Brainstorm a shared vision

Strategy 5. Identify opportunities for action

Strategy 6. Continue to meet, plan, and act

Information was gathered through key informant interviews with state and local health department staff across the country. Rather than provide a citation to every example obtained through these interviews, we have listed the key informants on page 2. Unless otherwise noted, program examples come from these interviews.

Activities

Each strategy includes an activity template or worksheet that practitioners can implement. [Contact ChangeLab Solutions](#) for editable versions of the worksheets included in this workbook.

Examples

Although this workbook presents an innovative approach to improving the retail environment, this kind of collaboration is not without precedent. A few pioneering states and localities are already forming healthy retail partnerships, and their experiences are woven throughout this workbook.

Keep in mind

- The strategies in this workbook represent a set of ideas to inspire action, not a strict prescription. Practitioners are encouraged to adapt ideas and activities in a way that works best for their partnership.
- A strong collaborative effort is not characterized by a one-time event, but an ongoing relationship. It is expected that the strategies and activities described in this workbook will occur over multiple meetings, and that the learning and planning process will be ongoing.
- Building and maintaining a successful partnership requires time and effort. The assumption throughout this workbook is that there will be at least one individual championing this idea, bringing together potential partners, facilitating meetings, and keeping the group engaged and informed. Over time, participating members can agree to share this responsibility.

EXAMPLE

Los Angeles County convenes a Healthy Retail Environment Workgroup that meets monthly and includes partners from its tobacco control, nutrition, and excessive alcohol use prevention programs. Although the workgroup was initiated by the Tobacco Control and Prevention Program, this partnership has since become a priority for all programs. The partners have developed a shared sense of ownership over the workgroup's functioning, and share responsibilities by developing meeting agendas together and taking turns facilitating meetings.



Identify Potential Partners

A variety of state and local government agencies interact with retailers. State health departments may operate healthy corner store programs; local agencies may conduct compliance checks to ensure retailers are not selling tobacco and alcohol to underage people. The first step in forming a partnership between tobacco control, nutrition, and excessive alcohol use prevention practitioners is identifying these potential partners.

In some places, identifying these partners will be easy. Nutrition program staff may work across the hall from their tobacco control colleagues, and may have existing relationships. In others, tobacco control, nutrition, and excessive alcohol use prevention staff may work in entirely separate departments and may rarely, if ever, come into contact with one another.

This section provides examples of potential government partners to include in a healthy retail collaboration and links to resources to help you identify equivalent partners in your community. These partners are separated into two broad categories:

- **Health Partners** refer to tobacco control, nutrition, and excessive alcohol use prevention programs housed within health services, public health, and substance abuse departments. These partners bring a health promotion, chronic disease prevention, or injury prevention lens to their work with retailers. We recommend reaching out to and seeking buy-in from public health partners first.
- **Regulatory and Business Assistance Partners** refer to other agencies that interact with retailers for reasons such as issuing licenses to sell certain products, ensuring compliance with existing regulations, and providing general business assistance support. While they may not have an explicit health focus, these partners may influence, or have an interest in, where and how tobacco, food, and alcohol products are sold in the retail environment. We recommend reaching out to these agencies after a core group of health partners has formed an initial partnership.

GOALS

- Understand who else is working on tobacco control, nutrition, and excessive alcohol use prevention issues in the retail environment
- Develop a list of agencies and individuals that may be interested in collaborating

NOTE

We have separated partners into these two general categories based on their primary roles, but overlaps may exist. For example, in some localities, the health department is the entity responsible for issuing local tobacco retailer licenses. Keep in mind that state and local governments vary widely in their structure. This section is intended to be a starting point for identifying potential partners, but specific agency names, functions, and responsibilities will be different in different locations.

Health partners

Who's involved at the STATE level?



State tobacco control programs, often housed within health or public health departments, work on tobacco retail activities such as reducing illegal sales of tobacco to minors and restricting the amount and location of tobacco product displays near cash registers. See the [Campaign for Tobacco-Free Kids website](#) to look up the tobacco control program in your state.



Some state public health departments administer healthy food retail programs and initiatives. These programs come in many shapes and sizes, but the common objective is to increase access to nutritious foods in retail stores. Several federal grant programs fund these activities. See the Centers for Disease Control and Prevention's (CDC) [Division of Nutrition, Physical Activity, and Obesity website](#) for information about CDC-funded programs and a list of grantees. Looking up these programs' awardees can help you identify potential partners in your state.



State agencies administer the federal Supplemental Nutrition Assistance Program (SNAP) and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC). These programs provide eligible individuals with money or vouchers to purchase food and require participating retailers to meet specific food-stocking requirements. Staff at these agencies can provide guidance on program requirements and benefits. The SNAP-Ed program, also administered by states, funds nutrition education activities. See the U.S. Department of Agriculture's (USDA) website for a list of [SNAP-Ed](#) and [WIC](#) contacts.



Some state public health departments have staff that focus on reducing excessive alcohol consumption and evaluating population-based strategies to prevent it. As of this writing, two states – New Mexico and Michigan – have full-time alcohol epidemiologists within the public health department who study issues such as alcohol store density and policy options to reduce excessive alcohol use.* Contact your state public health department to ask if it has staff who work on the prevention of alcohol-related harms, and if they include excessive drinking in their monitoring and surveillance efforts. More often, states' alcohol-related efforts focus on substance abuse and treatment, and these programs are typically part of a state's mental health or substance abuse agency. See the National Association of [State Alcohol and Drug Abuse Directors' website](#) for a directory of state agencies that work on substance abuse prevention.

*CDC plans to fund Alcohol Epidemiologists in five additional state health departments in 2017.

Who's involved at the LOCAL level?



Local health departments may have tobacco control programs and may participate in local tobacco control coalitions. Some local health departments have been involved in policy activities focused on reducing sales of tobacco to minors, reducing exposure to tobacco advertising, and raising cigarette taxes. See the [Campaign for Tobacco-Free Kids' directory](#) of state tobacco control programs; many state websites list local partners as well.



Some local health departments operate healthy food retail programs. Local health department staff may work directly with store owners, or they may fund other organizations to carry out the program's activities, such as training store owners on stocking and promoting nutritious foods and beverages, developing health-promoting marketing materials, and changing the store layout to make nutritious items more prominent. Several federal grant programs fund these activities. See the CDC's [Division of Nutrition, Physical Activity, and Obesity website](#) and [Division of Community Health website](#) for information about CDC-funded programs and awardees. Looking up these programs' awardees can help you identify potential partners in your state.



While the USDA's SNAP-Education funds are awarded to states, states typically sub-grant to local implementing agencies to carry out nutrition education activities. Local WIC agencies also offer nutrition education services and direct WIC program participants to WIC-authorized retailers. Some healthy retail programs have brought SNAP-Education and WIC nutrition educators into participating stores to lead cooking demonstrations and share recipe ideas. See the [USDA's SNAP-Education website](#), and click on an individual state name to identify the local implementing agency. Your state's [WIC contacts](#) can direct you to local WIC offices.



Local health departments may work on excessive alcohol use prevention and may participate in local substance abuse coalitions. Some local health departments have been involved in implementing strategies to prevent excessive alcohol use, including policy efforts to reduce youth exposure to alcohol advertising. A small percentage have been involved in efforts to raise alcohol taxes.⁴ Ask your local health department if it has staff who work on the prevention of alcohol-related harms, and if someone can connect you to local substance abuse coalitions.

Identifying health partners

Use this worksheet to make a list of potential partners within tobacco control, nutrition, and excessive alcohol use prevention agencies.

	Agency Name	Role (e.g., leads Healthy Corner Store Program, WIC Agency)	Contact Name and Title	Contact Phone and E-mail
Tobacco Control				
Nutrition				
Excessive Alcohol Use Prevention				

NOTE

While this workbook focuses on increasing collaboration within government, community partnerships are equally important. Many coalitions, organizations, and individuals in the community have a vested interest in community health and well-being. Nonprofit organizations, hospitals, faith institutions, substance abuse and tobacco coalitions, health promotoras, registered dietitians, schools and universities, food policy councils, local farmers, and small business associations are just some entities with unique expertise that can strengthen a healthy retail collaboration.

Regulatory and business assistance partners

While we recommend first reaching out to and seeking buy-in from the key health partners highlighted in the previous section, it's important to note that there are many other agencies at both the state and local levels that affect the retail environment. Once key health partners have bought into the idea of collaboration, they may find that including regulatory and business assistance partners can strengthen their efforts. Coordinating with these agencies can ensure that all groups working to improve the retail environment are doing so in ways that complement, rather than hinder, one another.

Who's involved at the STATE level?

In many states, retailers must obtain a special permit or license in order to sell tobacco, food, and/or alcohol products. It can be helpful to identify the agency responsible for issuing these licenses.



More than 40 states and territories require tobacco retailers to obtain a state license.⁵ This database identifies [state agencies responsible for issuing tobacco retailer licenses](#). In addition, the U.S. Food and Drug Administration issues contracts to most state agencies to assist with compliance check inspections of stores. This [list of agencies](#) that receive this funding is available for review.



Each state issues regulations, referred to as the Food Code, that set health and sanitation standards for food establishments. This [guide to the state agencies](#) that issue these regulations is a helpful overview. Note that enforcement typically happens at the local level.



Each state has an Alcoholic Beverage Control (ABC) Board with the authority to regulate the production, sale, and distribution of alcohol within its borders, and to set licensing requirements and enforcement mechanisms. This directory describes the [ABC boards](#) in each state.

Identifying state regulatory partners

Use this worksheet to make a list of state regulatory agencies (if applicable).

	Agency Name	Contact Name and Title	Contact Phone and E-mail
Tobacco Control			
Nutrition			
Excessive Alcohol Use Prevention			

Who's involved at the LOCAL level?

A variety of other local agencies – while not specifically dedicated to tobacco control, nutrition, or excessive alcohol use prevention – interact with retailers. Some examples are below, but note that these agencies may have different names and be responsible for different functions in different localities.

Licensing agencies



Some localities require retailers to obtain a local license to sell tobacco, food, and/or alcohol. The agency responsible for issuing the license varies by location, and may include a business license and permit department or a health department. Note that some states limit localities from passing laws that require local licensing of tobacco and/or alcohol retailers.

Law enforcement



Law enforcement officers often work in partnership with tobacco and alcohol programs to conduct compliance checks to ensure retailers do not sell tobacco and alcohol products to underage people. In many areas, liquor laws are enforced by specialized, independent liquor law enforcement agencies.

Planning department



Planning departments are often involved in both long-range planning (such as planning for where, and under what conditions, retailers can locate) and short-range planning (such as approving permits).

Economic development



Economic development departments offer services to support small businesses and strengthen economic vitality. Some operate façade improvement programs, which provide financial assistance to business owners to improve their store exteriors, making them more inviting to the community.

Other inspections



Fire, code enforcement, environmental health, and building safety departments conduct periodic inspections to ensure retailers comply with all health and safety codes.

Start a Conversation

Now that you've identified potential partners, it's time to start a conversation. Reaching out to all potential partners at this stage can be overwhelming. Instead, focus on engaging a core group of public health partners to gauge their interest and get initial buy-in. Once this initial partnership has formed, the group can determine how and when to bring in additional partners.



GOALS

- Introduce yourself and initiate a relationship
- Gather preliminary information about each program's work in the retail environment
- Gauge each program's interest in continuing the conversation at an in-person meeting

"Get to know other programs and potential collaborators from alcohol or tobacco, and get to know a little bit more about what they do. Have informal conversations. Begin to look for individual partners and key informants, and build relationships. Identify similar program needs and talk through ideas for addressing issues you have in common."

— State Health Department Staff, CA
(Tobacco Control)⁶

Sample introductory script

Contact potential partners individually to have a one-on-one meeting or phone call. Keep the initial conversation brief and high-level. This script includes five key topics to cover:

1. Introduce yourself:

My name is [name] and I work in the [program and department name].

2. Identify the common thread in your work:

I'm reaching out because I'd like to learn more about the work you're doing in the retail environment. My program has been working on [describe retail-specific work], and I've noticed some common threads between our programs. The retail environment plays a role in both our issue areas, and we're both working to create healthier communities.

3. Learn more about their work:

Can you tell me a little more about how your program interacts with retailers and the activities you're working on in the retail environment?

Probe for whether their department is involved in:

- Collecting data about where retailers are located and the kinds of products they make available
- Implementing programs or policies to change the retail environment (for instance, where certain products are placed and advertised or how they're priced)
- Licensing tobacco, food, and/or alcohol retailers
- Conducting compliance checks to enforce existing policies in tobacco, food, and/or alcohol retail stores
- Offering incentives, such as funding, business development, legal services, or other technical assistance to retailers
- Funding other organizations to implement any of the above activities

Ground this introduction in a real-world example, if possible. In California, the state tobacco control program funded local health departments to survey the retail environment. Some local contacts noticed that nutrition colleagues were also doing similar surveys, and that advertisements for non-nutritious foods and beverages were as prevalent as those for tobacco. Highlight these on-the-ground experiences and observations in your initial conversation.

Consider asking this question in person. If the partner has a standing meeting where they discuss retail work, ask if you can join for five minutes to introduce yourself, and this idea, to their team.

4. Invite them to continue the conversation:

I'm interested in bringing together programs that work on tobacco control, nutrition, and excessive alcohol use prevention to start a discussion about our retail efforts. The purpose is to learn more about each other's work, identify areas of overlap, and see if there are ways we can tap each other's expertise to advance common goals. Would you or someone else from your department be interested in participating?

5. Commit to following up:

Thank you for your time. I'll send an email with more information and potential meeting dates.

Government agencies are hierarchical organizations, and getting buy-in from leadership is an important factor in success. Your initial conversations may be with a staff member who does not have the authority to approve this kind of collaborative effort. While this may be the best place to start, it's important to include someone from the program's leadership in the conversation. Make sure the right leaders understand the rationale for making connections with other programs and, if possible, are involved themselves. Identifying a champion outside of an individual program, such as an elected official or agency director, can also help secure programmatic buy-in. See [Conversation Starters](#) for talking points to help get leaders on board.

Learn About Each Other's Retail-Related Work

Once you've reached out to potential partners one-on-one, convene an in-person meeting to continue the conversation. Meeting face to face is more effective than a phone call in helping to build a relationship and establish trust within a group. Don't feel stuck if you cannot get representatives from all three program areas to the table for the first meeting. Meeting with just one is still an important step toward building this partnership.

This section contains three tools to facilitate sharing and learning at this stage:

Activity 3.1: Facilitator's agenda

Sample agenda for structuring an initial in-person meeting

Activity 3.2: Sharing program goals

Sample interactive activity to spark learning and discussion

Activity 3.3: Diving into the details

Sample worksheet to collect more detailed information about each program's activities, goals, and funding considerations

Keep in mind: The process of learning, sharing, and building relationships with partners from distinct program areas is an iterative process. It is expected that this will take place over multiple meetings and an extended period of time.



GOALS

- Introduce partners working on tobacco control, nutrition, and excessive alcohol use prevention to one another
- Begin to develop a shared understanding of what each program does in the retail environment and how it approaches this work
- Begin to build relationships with partners from each program area

"I would say don't commit up front. It's similar to shopping for a new house. Don't go out that first day prepared to buy until you've gathered enough information. Have that initial meeting with new partners and be very open. Share where you're all coming from. Some natural overlaps and opportunities might arise, or it might take a little bit of going back to your programs and thinking about it."

— State Health Department Staff, CA (Nutrition)⁷

Facilitator's agenda

Use this sample agenda to kick off an initial in-person meeting.

1. Meeting opening

a. Highlight the purpose of the meeting

- "I've brought this group together because each of our programs is working to improve the retail environment."
- "The purpose of this meeting is for us to meet, share, and learn. While we all have different approaches to working in the retail environment, there may be opportunities to strengthen our individual efforts through increased communication and coordination. We might be working in the same stores, asking the same community partners for assistance, or even doing similar work like store assessments. We may have resources that you don't. You may have knowledge that we don't."

b. Set expectations

- "This meeting is the start of a conversation."
- "It is not expected that this group will come to any agreement or make any decision about collaborative efforts or goals by the end of this meeting."

2. Introductions

a. Go around the room and ask each attendee to answer the following questions:

- "What is your name?"
- "What department do you work in, and what is your position?"
- "How long have you worked in that department?"
- "What is one thing your program has accomplished in the past year that you're most proud of?" OR "What is one thing your program is currently working on that you're most excited about?" (Note: These responses do not have to be specific to retail. The goal is to get people warmed up by having them share a piece of their work that motivates and excites them.)

3. Activity and discussion

a. See the sample Activity 3.2 template on the following page

4. Wrap up

a. Before closing the meeting, gauge the group's interest in continuing the conversation with the following prompts:

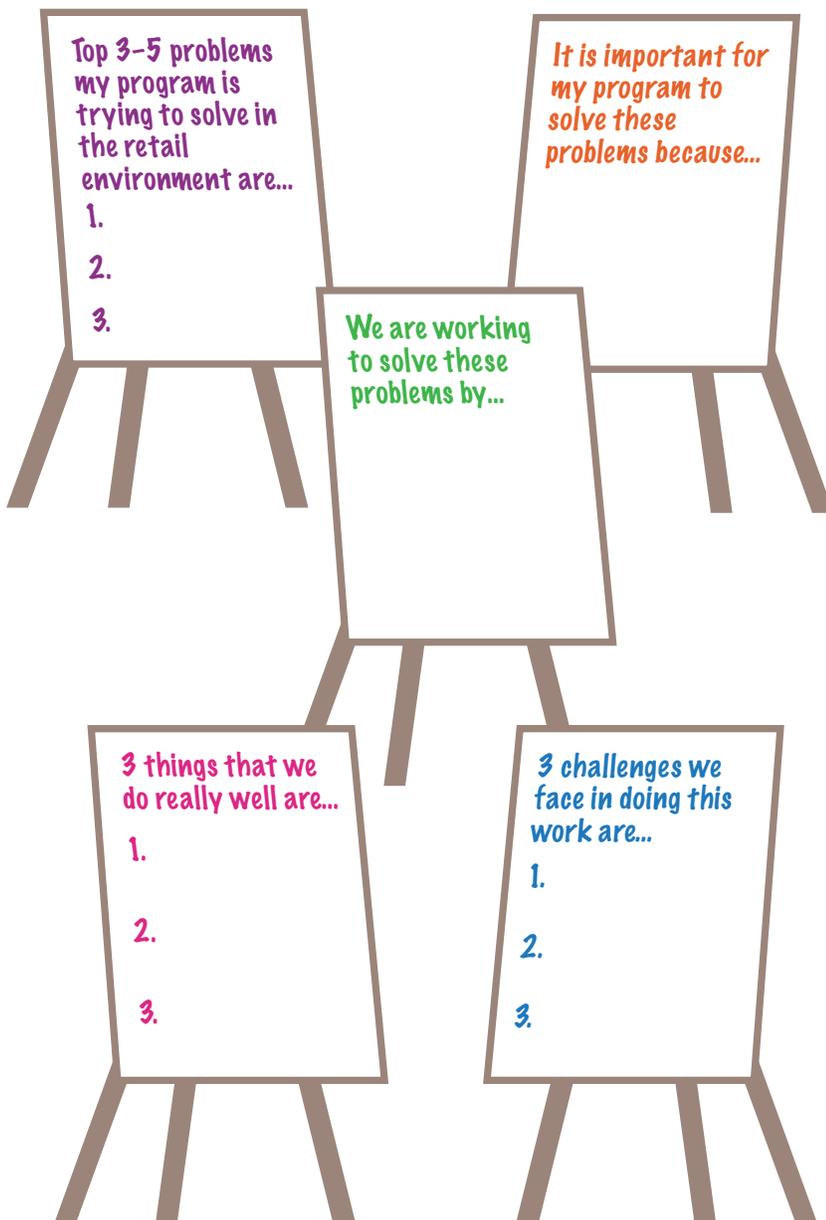
- "Use one word to describe how you're feeling about the possibility of working collaboratively to improve the retail environment."
- "Based on what we've shared and learned today, is this group interested in meeting again to continue this dialogue? Are there other departments that you feel are critical to include at this stage?"

Sharing program goals

This interactive activity allows individual programs to share information about their goals and approaches to working in the retail environment. A group may choose to do this activity in the first meeting or wait until a subsequent meeting.

Set-up

Before the meeting begins, write the following prompts on large, self-stick chart paper. Each set of five questions represents a station. There should be a separate station for each distinct program that attends the meeting. Set up each station in a different part of the room.



FACILITATOR'S NOTE

This activity is designed to help programs share a lot of new information in a short amount of time. Writing and displaying responses on charts, rather than individual worksheets, supports group thinking and strengthens participation. Charting helps all group members track and reference information they have heard.⁸

Instructions



Separate attendees into small groups based on their respective program areas, and direct each small group to a station.



Give the small groups 15 minutes to respond to the prompts and record their answers directly on the chart paper. Small group members should respond from the perspective of their programs.



When 15 minutes are up, select one small group to present first. Invite participants from all the groups to gather around that small group's station. Give the selected small group five minutes (approximately one minute per prompt) to summarize their responses to all five prompts.



After the report-out, open the floor for a ten-minute discussion about what was presented. Invite all participants to ask follow-up questions and probe for more details.



At the end of ten minutes, rotate to a new station and repeat the process until all small groups have had a chance to report out and answer questions.



After each small group has presented, have all participants debrief about what they heard, using the discussion questions below.

FACILITATOR'S NOTE

Use the timing cues provided as a general guideline. The facilitator may modify the amount of time allotted to each step depending on the number of participants and the length of the meeting.

Discussion questions

- What themes did you notice?
- What are some similarities you noticed between your program's work and that of another program? What are some differences?
- Did you notice any opportunities in which one program's identified strength could offset a challenge another program faces?
- Did you notice any potential opportunities to share information or resources or work together?
- Did you notice any potential barriers to sharing information or resources or working together?

Diving into the details

Programs that focus on three different issue areas will likely be operating under different funding streams, program mandates, and timelines. These differences affect if, how, and when they might be able to work together. While it may not be possible to remove any constraints immediately, the group can benefit from understanding them. Putting this information on the table can help the group see both barriers to and opportunities for coordination.

The worksheet on the following page builds on the information shared in the previous activity. It is intended to be used after a group has met (perhaps multiple times), established buy-in for the idea of collaboration, and expressed interest in exploring opportunities in greater detail.

Note that this worksheet provides a template for the kind of information that is beneficial to share at this stage. The specific questions can be adapted as needed, and groups may decide to collect this information in different ways. Here are some ideas:

- Distribute a paper or electronic version of this worksheet to partners, and ask each partner to fill it out before the group meets again.
- Use these questions to guide a discussion at an in-person meeting, and assign a note-taker to capture each program's response in real time. Be sure to distribute these questions to all participants in advance, so they can be prepared to share responses.

"I think your initial meetings should be really open. Discussions should just be about information sharing and brainstorming, without any preconceived notions of what you're actually going to do together. And when you have that first meeting, you should bring some basic information about your grants, your funding, your scope of work, what you can and can't do...just be really up front with partners about your capacity and what you're able to do, and share your program's goals. You're coming from three different perspectives (or more). Our branch has different goals than other branches, but if we share our goals and our deliverables or objectives, there's probably some overlap."

– State Health Department Staff, CA (Nutrition)⁷

General Program Information

Program Name

What is your program's mission statement?

What general health outcomes are you working toward?

What retail-specific outcomes are you working toward?

What retail-oriented coalitions or workgroups do you participate in?

Does your program collect data about the retail environment? If so, what kind of information do you collect, and how is it used?

Are you working on retail-related policies? If so, please specify.

Funding Information

How is your retail-related work funded?

What is the timeline for this work?

When will you apply for a new round of funding (if applicable)?

What retail-related activities are included in your workplan?

Who carries out these activities? (e.g., in-house staff or other entities who receive sub-grant funds)

Are there any requirements or restrictions that your retail-related activities are subject to?

Is your retail-related work focused on certain populations and/or geographic regions? If so, please specify.

If you fund other entities (e.g., health departments, community-based organizations) to carry out activities, please list grantees.

Please list additional organizations with whom you frequently partner.

Brainstorm a Shared Vision

Now that the group has developed a shared understanding of each partner's goals and efforts, it can start identifying where these goals overlap, and begin brainstorming a shared vision. Schedule a subsequent in-person meeting to conduct this brainstorm as a group.

To jump-start this brainstorm, this section includes an activity to guide the group through a joint assessment of the retail environment. There are two variations of this activity: 4.1 and 4.2. They reach the same outcome. The group should choose the version that would be most feasible for them to implement.

Activity 4.1: Conducting a virtual retail assessment

Analyze a set of photos of a store environment

Activity 4.2: Conducting an in-person retail assessment

Coordinate a group visit to a nearby store

This joint assessment – whether through photos or an in-person store visit – enables the group to see the retail environment through each partner's eyes, and to discuss similarities and differences in what each partner notices. The discussion questions use these concrete observations (“where are we now?”) as a starting point to discuss a shared vision for a healthy retail environment (“where would we like to go?”).

GOALS

- Engage in a collaborative exercise to see the retail environment from each program's perspective
- Begin to articulate the areas of overlap between each program's goals

“And maybe give yourself another time to come back and explore some of those opportunities for getting into the brass tacks of, ‘Well, this is an area we all work in. Could we have shared or collaborative activities? Here’s some capacity based on our grant...’ and start to be more concrete after you’ve had that initial sharing and contemplation.”

– State Health Department Staff, CA (Nutrition)⁷

Conducting a virtual retail assessment

Part 1. Store observations

Assess a set of photos that depict a typical retail environment, and use these observations as the basis for the discussion below. [Contact ChangeLab Solutions](#) for a downloadable set of photos that can be used for this exercise. Photos can be printed and displayed at the meeting, or presented in a slideshow format.

Part 2. Discussion

Use the questions below to guide a discussion.

Share observations

- What types of things stood out to each participant?
- What are some characteristics about the store that each program was pleased to see? What was concerning? Why?
- Did you notice any similarities in how tobacco, food, and alcohol products were packaged, displayed, and advertised?
- What is something another program mentioned that you would not have noticed? Are there other common issues your program faces in the retail environment that did not come up during this activity?

Imagine an ideal healthy retail environment

- What would the exterior look like?
- What would the interior look like?
- What kinds of interactions would each program have with the store owner?

Define success

- By working together, what would we be able to achieve that we couldn't do individually?
- What do we want to change about how our individual programs communicate and work with each other?
- What do we want to change about how our individual programs communicate and work with retailers?
- What positive changes do we want community members to notice?
- What positive changes do we want retailers to notice?



Conducting an in-person retail assessment

Part 1. Store observations

Spend 15 to 30 minutes visiting a nearby store that sells tobacco, food, and alcohol, and make note of what you observe.



Describe the outside of the store:

What does it look like? _____

Is there a sign for the store name? _____

Are there advertisements or product signs in the window? If yes, what is being advertised? _____

Describe the inside of the store:

What's the first thing you notice when walking into the store? _____

What types of products are sold at this store (e.g., tobacco, snack food, fresh/frozen fruits or vegetables, alcohol, other beverages, etc.)? _____

Where are those products placed (e.g., behind counter at the point-of-sale, at the end caps of aisles)? _____

Are there prices or signs on the products? _____

Are there advertisements inside the store? If yes, what is being advertised? _____

Does the store accept EBT? _____

Does the store participate in WIC? _____

What is the overall condition of the store, and how inviting does it feel? _____

Part 2. Discussion

Use the questions below to guide a discussion.

Share observations

- What types of things stood out to each participant?
- What are some characteristics about the store that each program was pleased to see? What was concerning? Why?
- Did you notice any similarities in how tobacco, food, and alcohol products were packaged, displayed, and advertised?
- What is something another program mentioned that you would not have noticed? Are there other common issues your program faces in the retail environment that did not come up during this store tour?

Imagine an ideal healthy retail environment

- What would the exterior look like?
- What would the interior look like?
- What kinds of interactions would each program have with the store owner?

Define success

- By working together, what would we be able to achieve that we couldn't do individually?
- What do we want to change about how our individual programs communicate and work with each other?
- What do we want to change about how our individual programs communicate and work with retailers?
- What positive changes do we want community members to notice?
- What positive changes do we want retailers to notice?

This store observation is intended to jump-start a conversation. It is not a comprehensive store assessment or audit. For more information about conducting a store assessment, see page 70 of ChangeLab Solutions' [Health on the Shelf: A Guide to Healthy Small Food Retailer Certification Programs](#). The Centers for Disease Control and Prevention's [Healthier Food Retail Guide](#) is also a useful resource.

Identify Opportunities for Action

By this stage, partners will have met – perhaps multiple times – to discuss their current work in the retail environment. Throughout the learning process, groups may notice overlaps the following:

- WHAT programs work on: Are multiple programs working with youth coalitions to conduct retail assessments?
- WHO programs fund or partner with: Are multiple programs working with the same organizations or coalitions?
- WHERE programs focus their efforts: Are multiple programs doing place-based work in the same geographic locations?

As a group, think about how these overlaps represent opportunities for action, and whether individual efforts can be strengthened by coordinating with partners. In addition, consider the unique capacities each partner brings to the table that may benefit the partnership as a whole. For example, if one program is restricted in doing policy work, another may be able to take the lead.

This section includes examples of how programs across the country have found opportunities to collaborate.

Use the worksheet at the end of this section to document ideas for collaboration.

GOAL

- Use the information gathered in the learning and visioning phase to identify opportunities to work together

“The nutrition program has a wonderful history of successfully working with retailers.... They’ve been able to do store events and create places where fresh produce can be sold, and they help financially with making some of the changes in the store environment. On the tobacco side we’re usually going in and doing stings or citing retailers who violate the law.... So they don’t like us very much. But what we’re good at is policy. We’re excellent at figuring out how to use policy as a solution to solve community problems, and how to move local policies forward. By collaborating we can get retailer buy-in, bring them into the picture in a good way with a certain level of trust, and try to work together to come to some sort of policy solution that can work for everybody. Tobacco probably wouldn’t be able to do that without the loop-in from the nutrition people. So ideally that’s the sort of joint work we’d like to see, building on each other’s strengths.”

– State Health Department Staff, CA
(Tobacco Control)⁶

Examples

Share resources

Pennsylvania's Healthy Corner Store Initiative

In Pennsylvania, the Department of Health's Division of Nutrition and Physical Activity coordinates a statewide Healthy Corner Store Initiative. But due to the state's public health infrastructure, the health department's county and municipal units only reach about 40 percent of the state's population.⁹ As a result, the healthy corner store initiative has limited reach into many communities where corner stores are prevalent. Meanwhile, the Division of Tobacco Prevention and Control funds six Regional Primary Contractors (RPCs) to spearhead tobacco control efforts throughout the state. With one RPC in each of the state's six regions, RPCs have a statewide reach, strong relationships with local coalitions, and familiarity with the retail environment. The Division of Nutrition and Physical Activity realized that, by collaborating with the tobacco division, they could tap into this extensive RPC network and expand the reach of their healthy corner store program. RPCs now receive training and technical assistance on nutrition topics (as well as tobacco), and they work with community partners to conduct store assessments and help to make nutrition-related changes in stores.



"We need to collaborate and use partners to expand our reach. The Division of Tobacco Prevention and Control is not just a partner in name. They actually afford us some of their staff time. That's extremely beneficial given the limited resources that we have in this department."

– State Health Department Staff, PA (Nutrition)⁹

"Our local health departments are all pretty excited about the opportunity to work together because they're on the ground; they'll be the staff going into a store. And even if they're just assessing the nutrition environment, they can't help but see other unhealthy or potentially illegal practices, or the outside placement of alcohol or tobacco advertising. The staff at the local level believe they're being more efficient, getting more work done, and respecting the retailer if they're able to look at the store environment through multiple different lenses instead of just one per visit."

– State Health Department Staff, CA (Nutrition)⁷

Work together to design a healthy retail program

Sonoma County's Healthy Retail Project

In 2009, the Community Activity and Nutrition Coalition in Sonoma County, California, inaugurated the Healthy Food Outlet Project (HFOP). HFOP established health-promoting standards – such as selling a variety of fresh fruits and vegetables and removing advertisements promoting foods high in fat and sugar – for participating small markets and grocery stores to meet. A few years later, a county-level collaborative team called ANTS (Alcohol, Nutrition, and Tobacco Stakeholders) was formed. ANTS realized they could join forces with HFOP by finding ways to integrate alcohol and tobacco marketing, placement, and law compliance into HFOP standards. Today, this project recognizes stores that meet standards connected to tobacco control, nutrition, and excessive alcohol use prevention. To reflect this comprehensive focus, the founders of HFOP changed the name of the project to the Healthy Retail Project: Making Healthy Changes for a Healthier Community to make it more inclusive of tobacco control and excessive alcohol use prevention partners.

Vermont's Healthy Retailer Initiative

When the Physical Activity and Nutrition program in Vermont decided to work in the food retail environment, program staff realized there was an opportunity to work with the state's Tobacco Control and Alcohol and Drug Abuse Prevention (ADAP) programs, both of which had a history of funding local coalitions to work with retailers. These programs, along with the Office of Local Health and some external partners, formed a Healthy Retail Advisory Committee to explore what could be done. Sixteen local coalitions received funding to survey community members about their support for changes in the retail environment; conduct store audits that assessed tobacco, food, and alcohol availability; and use data from the store audits to implement healthy changes, such as raising the height of tobacco and alcohol signage above kids' eye level. The state programs collaboratively developed the [Healthy Retailers Guidebook](#), which outlined the evidence base for working with retailers and provided guidance on assessment, capacity building, planning, implementation, and evaluation of healthy retail efforts. The state brought coalitions together for a day-long training, developed collateral materials – including posters, door clings, and counter tent cards – to encourage shoppers to make healthier choices, and created sample press releases and social media posts that coalitions could tailor to promote participating retailers.

“The HFOP is very retailer-centered: the retailers decided what healthy changes they would like to make for their stores, rather than have HFOP staff telling them what changes they should make. However, my alcohol and tobacco colleagues often say that they view us as regulators and enforcers in their work with retailers. By integrating alcohol and tobacco prevention into the HFOP, our approach with retailers has been redefined, allowing tobacco and alcohol prevention an entrance into this work with retailers, which was a challenge for them for many years.”

– Local Health Department Staff,
Sonoma County, CA¹⁰

“We started thinking about how we're all working with the same coalitions, and we all have a similar goal: improving the retail environment. Why don't we think about creating a combined intervention that's addressing the whole retail environment in terms of all three of these program areas? The community coalitions already had some of these contacts with retailers. So it became our role to start creating resources that would allow them to approach retailers in a comprehensive way and provide tools and resources for the coalitions to look at the whole retail environment for the different aspects we were all interested in.”

– State Health Department Staff, VT (Nutrition)¹¹

Massachusetts' Mass in Motion Healthy Market Program

Massachusetts' program works with convenience store owners to make healthy, affordable food and beverage options available to customers. The directors of the state's tobacco control, nutrition, and excessive alcohol use prevention programs recognized that tobacco and alcohol availability and advertising should also be considered in the definition of a healthy market. As a result, the directors formed a joint Healthy Retail Task Force. At their monthly meetings, the Task Force developed a healthy retail ranking sheet, a tool that sets tobacco, nutrition, and alcohol-related standards for stores. A store can earn a bronze-, silver-, or gold-level rating, depending on the number of standards it meets. Several communities have been selected to pilot this tool in stores, and to work with store owners on meeting the standards. The Task Force continues to meet as needed.



Include other partners in existing retail work

Following Vermont's Healthy Retailer Initiative mentioned on page 31, the tobacco control program funded local coalitions to assess the advertisement, placement, and availability of tobacco products in stores through conducting observational audits of the retail environment. Tobacco control program staff invited their nutrition and excessive alcohol use prevention colleagues to add food and alcohol items to the audit tool. Combining tobacco, nutrition, and alcohol questions in a single tool maintained the state's integrated focus on the retail environment and benefited the programs by enabling them to collect data more efficiently.

"When we put these rankings and recommendations together, we spent a lot of time thinking how it really should be from a public health standpoint. What would be an almost ideal corner store that every child should walk into, and adults too for that matter? What's practical? We spent a lot of time trying to find that balance. We had staff from the Massachusetts Tobacco Cessation and Prevention Programs and the Bureau of Substance Abuse Services teaming up, and sharing ideas with people who are working in the retail field. We asked, 'In your experience, could we get a store owner to do this or are we just reaching too high?'"

— State Health Department Staff, MA (Nutrition)¹²

"... this auditing is done, and now, for every single tobacco outlet in the state, we have not just data on tobacco, but also answers to some nutrition questions and information about alcohol products. Each program can do our own data analysis. For example, the nutrition program can look at whether the stores carry lowfat or nonfat dairy products, and if the dairy products are cheaper or more expensive than soda... So the tobacco staff just did it. They had this contract and they said it would be easy enough, at no cost to us, to add some questions, and that we [the nutrition program] could use the data however we wanted... So there continue to be opportunities that come up, in venues of interest to nutrition, tobacco, and alcohol prevention, like retail, to collaborate."

— State Health Department Staff, VT (Nutrition)¹¹

Ideas for action

Three ideas for incorporating tobacco control, nutrition, and/or excessive alcohol use prevention considerations into my program's existing retail efforts are...

1. _____

2. _____

3. _____

EXAMPLE

"Update retail assessment tool to include survey questions about tobacco and alcohol."

Three things I learned from my tobacco control, nutrition, and/or excessive alcohol use prevention colleagues that are applicable to my work are...

1. _____

2. _____

3. _____

EXAMPLE

"The tobacco control program was talking to the store owner on Grand Ave. about the new local tobacco retailer licensing law. They brought up healthy food during the conversation, and the store owner mentioned he'd like more information about selling nutritious foods."

Three follow-up questions I have for tobacco control, nutrition, and/or excessive alcohol use prevention are...

1. _____

2. _____

3. _____

EXAMPLE

"Ask the excessive alcohol use prevention program which community champions were involved in the recent ordinance restricting alcohol retailers from locating near schools."

Continue to Meet, Plan, and Act

A strong collaborative effort is not characterized by a one-time event, but an ongoing relationship. Priorities, activities, and needs change over time. Regular meetings ensure that new information that may affect the partnership is communicated to all partners in a timely manner.

There is value in tobacco control, nutrition, and excessive alcohol use prevention programs staying in communication about their retail efforts, even if there are no immediate opportunities to work together. By building and maintaining relationships over time, state and local health departments can be better positioned to seize new opportunities, and to find opportunities for collaborative action in places they would have previously overlooked. An existing partnership with a shared vision for change in the retail environment can attract funders that are interested in collaborative efforts and are looking for grantees who can hit the ground running.

Form a task force or workgroup

Schedule regular meetings to keep all partners engaged and informed about retail efforts. Standing agenda items can include:

- Updates on new activities
- Common retail-related technical assistance questions or needs that are emerging from the field
- Collaborative troubleshooting or problem solving in response to specific retail-related challenges that partners have faced
- Coalition meetings/events/webinars that other partners can join
- Potential funding opportunities
- Opportunities for collaborative action

Join each other's coalitions

Ask if your partners have coalitions that you can join, and invite them to join yours. Get to know their community partners, hear their successes and concerns, and share your program's efforts when appropriate.

GOALS

- Maintain and strengthen the partnership through continued communication
- Continue to identify opportunities for collaboration

EXAMPLE

Sonoma County, California, has formed a county-level collaborative team called ANTS (Alcohol, Nutrition, and Tobacco Stakeholders). These partners are working on a comprehensive healthy retail certification policy, and have been able to leverage this collaborative work to attract additional funders.

“Being on the healthy retailer designation workgroup is really instructive. [You] see how the different members of that workgroup think and handle a problem and how they approach a solution.”

— Local Health Department Staff,
San Diego County, CA (Tobacco)¹³

Find opportunities to present a united front and promote each other's work

If a representative from one program is presenting retail-related policies at a community meeting, attend the meeting to show your support for healthy changes to the retail environment. These opportunities allow the public, decisionmakers, and other potential partners to connect the dots between individual program efforts, and help to promote the idea of a comprehensive approach to improving the retail environment.

Write collaborative activities into workplans

One barrier to collaboration is the practical limitations of what groups are funded to do. Staying in regular communication allows groups to plan together proactively. Lay the groundwork for future collaborative work by writing collaborative activities into workplans and grant proposals as funding opportunities arise.

Fund collaborative activities

Health departments – particularly state health departments – aren't just the recipients of grant funds. They are often major funders themselves, and as a result, they shape how this work unfolds at the local level. When designing grant programs and developing requests for proposals, health departments can do the following:

- Expand the scope of a program's acceptable or required retail-related activities to include tobacco control, nutrition, and excessive alcohol use prevention considerations
- Encourage or require grantees to partner with tobacco control, nutrition, and excessive alcohol use prevention programs in their funded activities

EXAMPLE

In 2015, representatives from California's state-level healthy retail workgroup co-presented on their collaborative retail efforts at the annual California Conference of Local Directors of Health Education.

EXAMPLE

In 2015, Ohio updated the Request for Proposal for its Creating Healthy Communities grant program. For the first time, local health department applicants had the option to work on discouraging tobacco sales in small stores, in addition to working on nutrition interventions in the retail environment.

EXAMPLE

In Vermont, the state tobacco control, nutrition, and excessive alcohol use prevention programs worked together to fund healthy retail efforts in communities. They worked out an arrangement in which community coalitions receiving funding from the tobacco control, nutrition, or excessive alcohol use prevention programs to work on these issues were also required to work on healthy retail activities. The nutrition program funded the healthy retail component of community coalitions' work.

"Consistent open communication needs to occur with partners, not only to build trust, assure mutual objectives, and create common motivation...but to change habits of staying in our siloed fields, because that really needs to change for this collaboration to work. This does not come easily and there must be an ongoing effort at first until it becomes routine."

– Local Health Department Staff,
Sonoma County, CA¹⁰

Case Study: Putting It All Together

This comprehensive approach to working in the retail environment is new and innovative, but a few pioneering states and localities have been testing the waters. One of the most ambitious efforts is the Healthy Stores for a Healthy Community campaign in California. This case study, developed through key informant interviews with health department staff in California, highlights how state leadership, combined with local involvement, can build momentum for healthy changes in the retail environment.

Background

The California Tobacco Control Program (CTCP) has a long history of initiating campaigns to reduce the availability and promotion of tobacco products in the retail environment. In 1994, they launched the Operation Storefront Campaign, which brought statewide attention to in-store and exterior advertising of tobacco products in locations where it was likely to be seen by youth. The 2002 STORE (Strategic Tobacco Retail Effort) Campaign addressed tobacco marketing in the retail environment and helped build momentum for local tobacco retailer licensing ordinances and policies banning self-service displays.

Through these experiences, CTCP began noticing parallels between the marketing and promotion of tobacco products and the marketing and promotion of non-nutritious foods and alcohol. Many local health departments funded by CTCP noted these parallels as well. CTCP began to explore the idea of surveying the retail environment across the state and capturing data about all three issue areas.

Identify potential partners

CTCP reached out to the following partners to assess their interest:

- Nutrition Education and Obesity Prevention Branch (NEOPB), California Department of Public Health
- Safe and Active Communities Branch, California Department of Public Health
- Policy and Prevention Services Branch, California Department of Health Care Services (formerly the Department of Alcohol and Drug Programs)



“And when we all went out and started looking around in our own communities and thinking about the retail environment as a venue and what we could do that would have an effect, we started noticing that there are a lot of similarities in how tobacco, food, and alcohol products are manufactured, advertised, discounted, labeled, and sold in stores. And our local projects were telling us, “Hey we’re going out and doing this survey in our retail environment and we’re running into our nutrition folks. They’re doing a survey on the same stores.”

— State Health Department Staff, CA
(Tobacco Control)⁶

Start a conversation

In 2012, CTCP coordinated a two-day conference to introduce the idea of the data collection campaign, Healthy Stores for a Healthy Community. They invited staff from the state's nutrition and excessive alcohol use prevention programs to participate. This event marked the first time partners across tobacco control, nutrition, and excessive alcohol use prevention came together in a formal way to talk about their work in the retail environment. After the conference, staff from each of these programs formed a workgroup to continue the dialogue and discuss opportunities to collaborate.

Brainstorm a shared vision

The workgroup that had emerged from the conference held regular meetings and calls, and decided on an integrated campaign goal: to improve the health of Californians through changes to the retail environment. Each partner identified program-specific goals aligned with this vision, and the group assessed areas of overlap among programs.

Identify opportunities for action

In 2013, CTCP funded 61 local lead agencies (LLAs) (primarily local health departments) across the state to survey the retail environment. LLAs assessed tobacco, food, and alcohol. The Healthy Stores for a Healthy Community campaign yielded baseline data that LLAs used to inform their tobacco control workplans, and that could be used to help engage other partners.

CTCP and its partners supported LLAs in implementing the campaign by doing the following:

- Funding LLAs to conduct store surveys, in partnership with community-based organizations and youth coalitions.
 - More than 7,300 stores in all of the state's 58 counties were surveyed.
- Providing the tools, training, and technical assistance for LLAs and their local partners to complete the store assessments.
 - CTCP tasked the Stanford Prevention Research Center (SPRC) with designing a survey that could be completed using a mobile device. The survey included questions about the availability, accessibility, and promotion of tobacco, food, and alcohol products, and the questions were developed with input from nutrition and excessive alcohol use prevention partners.

"We thought there must be a better way to coordinate efforts and think about how to do some of this work collaboratively, rather than everybody trying to approach the same city council with three different policies that have to do with the retail environment. Then we started having conversations here at the state level with our sister programs and saying, 'Would you be interested in trying to figure out some ways we could collaborate and work together? And given the fact that we all have different funding streams and different requirements, would you be willing to explore what could be done?'"

— State Health Department Staff, CA
(Tobacco Control)⁶

- In May 2013, more than 200 individuals participated in an in-person training in Sacramento, where they learned how to operate the mobile survey tool as well as how to carry out broader strategies for conducting the store assessments. Nutrition and excessive alcohol use prevention partners participated on speaking panels and funded their local implementing agencies to attend.
- Follow-up webinars, in-person trainings, and written materials were provided to LLA staff members, who were able to relay this information to local partners. In addition, the Tobacco Control Evaluation Center, an evaluation project run out of the University of California, Davis, assisted with data collection and analysis, proactively monitored the incoming data, and set up a hotline to field technical assistance calls from LLAs on demand.
- Analyzing the data and creating outreach tools.
 - Store data collected through the mobile application was automatically transferred to the survey database, and CTCP collaborated with nutrition and excessive alcohol use prevention partners to conduct local, regional, and state-level analyses.
 - CTCP summarized local data into customized data fact sheets and maps for each LLA jurisdiction.
 - Customizable media outreach templates, which each county could tailor to highlight their own particular data and problem areas, were created.
- Spreading the word.
 - Local health departments released the results of this survey to the public through a series of 14 coordinated press events throughout the state. Media outlets across the state ran a total of 260 local news stories on the survey results, drawing particular attention to tobacco products being placed next to candy, the availability of low-cost and candy-flavored tobacco products, and the proximity of tobacco, non-nutritious food, and alcohol retailers to schools and other youth-sensitive areas.
 - Nutrition and excessive alcohol use prevention partners did outreach to their local entities to connect the healthy retail campaign to their funded retail work.

The baseline data collected through the survey prompted several LLAs to collaborate with nutrition and excessive alcohol use prevention partners to achieve the retail objectives in their workplans. This data was also shared with nutrition and excessive alcohol use prevention colleagues, many of whom are incorporating collaborative retail activities into their workplans.



had exterior advertising for non-nutritious products, while only 12% had exterior advertising for nutritious products

65%

sold tobacco products, sugary drinks, or alcohol near candy at the checkout

75%

of stores that sold flavored tobacco products at the checkout were near schools

55%

of stores that sold sugary drinks at the checkout were near schools

36%

had alcohol ads near candy or toys or below three feet

Additional survey information – including regional and county-level data – is available at the [Healthy Stores for a Healthy Community website](https://www.healthystoresforahealthycommunity.org). The website provides policymakers, public health practitioners, and community members quick and easy access to data that can inform their retail education and policy efforts.¹⁴

Continue to meet, plan, and act

CTCP continues to convene a workgroup of state-level programs, and the partnership has expanded to include the Sexually Transmitted Diseases (STD) Control Branch. The STD Control Branch is interested in increasing access to condoms in stores, an important strategy for reducing the transmission of sexually transmitted diseases.

CTCP also convenes a larger workgroup of key partners, including some locally funded tobacco control projects. State-level partners from nutrition, excessive alcohol use prevention, and sexual health participate in these regular phone calls.

State partners continue to support this work at the local level. For example, CTCP coordinated a series of webinars to deepen local health departments' understanding of the connections between tobacco, food, and alcohol in the retail environment. In these webinars, state nutrition and excessive alcohol use prevention programs were invited to share their missions, historical mandates, funding streams, cultures, and subject matter expertise. In addition, several counties that had already formed collaborative partnerships with tobacco control, nutrition, and excessive alcohol use prevention colleagues shared their experiences and lessons learned.

The Nutrition Education and Obesity Prevention Branch holds an annual forum for its local implementing agencies, which includes a retail-focused session. The branch is creating a fact sheet to support their locally funded grantees.

A significant outcome of this statewide effort is the local action that it sparked. Several local health departments now have active partnerships that focus on healthy retail changes in their communities:

- Los Angeles County hosted a regional healthy retail forum, and convenes a Healthy Retail Environment Workgroup that meets monthly. The group created a catalog of existing retail projects in all three issue areas, and was surprised to see how much overlap there was. They are currently creating a GIS map to see which stores each program is targeting.
- Sonoma County's partnership is called ANTS (Alcohol, Nutrition, and Tobacco Stakeholders). The team is exploring a healthy retailer certification policy, which would require participating food retailers to maintain minimum health-promoting standards and practices that relate to tobacco, nutrition, and alcohol. The policy would also provide incentives to qualifying retailers.

As this work moves forward, the state-level workgroup is pulling together leadership at the state health department to come up with a joint policy platform. The platform will articulate each program's policy goals and define how these programs can work together.

“Despite there being some areas where we knew there was overlap, especially in the retail environment, we still were operating pretty much in our own silos based on funding streams, political difficulty in combining efforts in the policy realm, etc. We knew that we all held pieces of the retail puzzle, and so we slowly started dipping our toes into the world of collaborative effort, but in all honesty, we were not putting too much time into making that a reality – until the CA State Tobacco Control Program initiated their Healthy Stores for a Healthy Community retail campaign. That provided the jump-start we needed, while at the same time allowing full administrative support for our combined efforts.”

– Local Health Department,
Sonoma County, CA¹⁰

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