## Maternal, Child and Adolescent Health Division: Nutrition and Physical Activity Logic Model

<table>
<thead>
<tr>
<th>SITUATION</th>
<th>INPUTS</th>
<th>OUTPUTS</th>
<th>OUTCOMES</th>
<th>EXTERNAL FACTORS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ASSESSMENT</strong></td>
<td><strong>INVESTMENTS</strong></td>
<td><strong>WHAT WE DO</strong></td>
<td><strong>WHO WE REACH</strong></td>
<td><strong>SHORT TERM</strong></td>
</tr>
<tr>
<td>• 23.1% of California children (5 to &lt;20 years of age) were ≥95% for weight/height (2009 PedNSS)</td>
<td>• Funding: Federal Title V MCAH Block Grant</td>
<td>• Provide leadership to make optimal nutrition and physical activity the norm by promoting evidence-based interventions</td>
<td>• Women of reproductive age, pregnant and parenting mothers</td>
<td>• Increase awareness of optimum nutrition and physical activity</td>
</tr>
<tr>
<td>• 14% of California children (&gt;5 years of age) had a low hgb/hct (2009 PedNSS)</td>
<td>• MCAH Programs and local MCAH staff</td>
<td>• Promulgate data on obesity, nutrient deficiencies, poor nutrition, and physical activity to decision makers</td>
<td>• Infants, children and adolescents</td>
<td>• Community assessment of nutrition and physical activity resources</td>
</tr>
<tr>
<td>• 42.4% of California women before pregnancy were overweight or obese (&gt;24.9 BMI) (2009 MIHA)</td>
<td>• Children’s Medical Services (CMS)</td>
<td>• Raise public awareness about the importance of optimum nutrition and physical activity</td>
<td>• Health care administrators, providers and community health workers</td>
<td>• Develop policies &amp; environments supporting optimum nutrition and physical activity</td>
</tr>
<tr>
<td>• 32.9% of Californians (≥18 years of age) participated in vigorous physical activity at least 3 times per week (2009 BRFSS)</td>
<td>• Working Group for Interagency School Health (WISH)</td>
<td>• Foster relationships and partnerships such as ASTPHND, Center Nutrition Coordination Group, the Inter agency physical activity group, to collaborate on developing and implementing interventions.</td>
<td>• Community leaders</td>
<td>• Implement a monitoring plan for MCAH programs and initiatives.</td>
</tr>
<tr>
<td>• 41.3% of California women (ages 18-44) did not take a supplement containing folic acid (2010 CWHS)</td>
<td>• The Women, Infants and Children (WIC) Nutrition Program</td>
<td>• Participate in Obesity Prevention Group (OPG) to enact the California Obesity Prevention Plan</td>
<td>• Local Health Jurisdictions and MCAH Programs (i.e. Home Visiting, Preconception, BIH, AFLP, RPPC, etc.)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• California Obesity Program (OPG)</td>
<td></td>
<td>• Employers, employees and child care</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Priorities
- Develop interventions to promote and support optimum nutrition and physical activity

### Investments
- Funding: Federal Title V MCAH Block Grant
- MCAH Programs and local MCAH staff
- Children’s Medical Services (CMS)
- Working Group for Interagency School Health (WISH)
- The Women, Infants and Children (WIC) Nutrition Program
- California Obesity Program (OPG)

### What We Do
- Provide leadership to make optimal nutrition and physical activity the norm by promoting evidence-based interventions
- Promulgate data on obesity, nutrient deficiencies, poor nutrition, and physical activity to decision makers
- Raise public awareness about the importance of optimum nutrition and physical activity
- Foster relationships and partnerships such as ASTPHND, Center Nutrition Coordination Group, the Inter agency physical activity group, to collaborate on developing and implementing interventions.
- Participate in Obesity Prevention Group (OPG) to enact the California Obesity Prevention Plan

### Who We Reach
- Women of reproductive age, pregnant and parenting mothers
- Infants, children and adolescents
- Health care administrators, providers and community health workers
- Community leaders
- Local Health Jurisdictions and MCAH Programs (i.e. Home Visiting, Preconception, BIH, AFLP, RPPC, etc.)
- Employers, employees and child care

### Short Term
- Increase awareness of optimum nutrition and physical activity
- Community assessment of nutrition and physical activity resources
- Develop policies & environments supporting optimum nutrition and physical activity
- Implement a monitoring plan for MCAH programs and initiatives.

### Medium Term
- Meet or exceed the Healthy People 2020 nutrition and physical activity goals for women of childbearing age and children.
- Increase the proportion of MCAH funded programs and other employers that have worksite wellness policies
- Decreased food insecurity
- Improve access to early interventions for overweight and obesity in the healthcare system
- Build healthy communities designed to promote optimal nutrition and physical activity

### Long Term
- Reduced overweight and obesity
- Reduced or controlled diabetes
- Reduced cancer
- Reduced heart disease
- Reduced maternal morbidity and mortality
- Reduced birth defects
- Increased optimal birth weight babies
- Improved school readiness
- Healthcare cost savings for California

### Ultimate Goal
- Optimum nutrition and physical activity is the cultural norm

### Evaluation
- Collect data
- Analyze and interpret
- Report