WHERE HISTORY & PROGRESS MEET

## PUBLIC AFFAIRS COMMITTEE

Tuesday August 11, 2015 6:00 P.M. - Committee Room (A)

#### **AGENDA**

- 1. Call to Order, Roll Call, and Establishment of a Quorum
- 2. Approval of Minutes
  - A. Public Affairs Committee of June 22, 2015
- 3. Public Participation/Presentations
  - A. Final Railroad Days Report from the Western DuPage Chamber of Commerce
- 4. Items for Discussion
  - A. Healthy West Chicago Initiative
  - B. 2016 Railroad Days<sup>1</sup>
- 5. Items for Consent
  - A. Halloween Parade City Museum
  - B. Fall Fling Races ABD Cycle Club
  - C. Amendments to the 2015 Mexican Independence Day Event/Funding Agreement
  - D. ABD Cycle Club Bicycle Training Criteriums
- 6. Unfinished Business
- 7. New Business
- 8. Reports from Staff
  - A. Traffic Management Report
- 9. Adjournment

<sup>&</sup>lt;sup>1</sup> There is no material in the packet for this agenda item.

#### DRAFT

#### **MINUTES**

#### PUBLIC AFFAIRS COMMITTEE

Monday June 22, 2015, 7:00 P.M.

1. Call to Order, Roll Call, and Establishment of a Quorum.

Chairman Chassee called the meeting to order at 7:00pm. Roll Call found Earley, Banas, Hallett, Edwalds and Birch.

Alderman Meissner was not present.

Also in attendance were Krista Coltrin, Assistant Marketing Coordinator; Valeria Lopez, Public Information Officer; John Said, Director of Community Development; John Fincham, Assistant Community Development Director; Sara Phalen, Museum Director/Curator; Fernando Ramirez, President of the Mexican Cultural Center.

2. Selection of Chairman and Vice Chairman.

Alderman Hallett nominated Alderman Chassee as the Chairman of the Public Affairs Committee, seconded by Alderman Birch and the vote was unanimous for approval.

Chairman Chassee nominated Alderman Edwalds as the Vice Chairman of the Public Affairs Committee, seconded by Alderman Hallett and the vote was unanimous for approval.

- 3. Approval of Minutes.
  - A. Public Affairs Committee of March 23, 2015. Alderman Birch made a motion, seconded by Alderman Hallett to approve the minutes of the Public Affairs Committee meeting with no changes. Voting Aye: Chairman Chassee, Alderman Earley, Banas, Hallett, Edwalds and Birch. Voting Nay: 0. Motion carried.
- 4. Public Participation / Presentations.
- 5. Items for Consent.
  - A. Ordinance No. 15-O-0006 Amend Chapter 17 Article X, Regulating Size and Weight of Vehicles. Alderman Banas made a motion, seconded by Alderman Edwalds to direct this item to City Council for approval. Voting Aye: Chairman Chassee, Alderman Earley, Banas, Hallett, Edwalds and Birch. Voting Nay: 0. Motion carried.
  - B. Ordinance No. 15-O-0017 An Ordinance Modifying Chapter 4, Article I, Building Code & Chapter 7, Article II, Housing Code. Alderman Banas made a motion, seconded by Alderman Edwalds to direct this item to City Council for approval. Voting Aye: Chairman Chassee, Alderman Earley, Banas, Hallett, Edwalds and Birch. Voting Nay: 0. Motion carried.

- C. Resolution No. 15-R-0022 Funding Agreement for the 2015 Mexican Independence Day Event. Alderman Banas made a motion, seconded by Alderman Edwalds to direct this item to City Council for approval. Voting Aye: Chairman Chassee, Alderman Earley, Banas, Hallett, Edwalds and Birch. Voting Nay: 0. Motion carried.
- D. West Chicago Community High School. Alderman Banas made a motion, seconded by Alderman Edwalds to direct this item to City Council for approval. Voting Aye: Chairman Chassee, Alderman Earley, Banas, Hallett, Edwalds and Birch. Voting Nay: 0. Motion carried.
- E. Wheaton Academy Homecoming Fireworks. Alderman Banas made a motion, seconded by Alderman Edwalds to direct this item to City Council for approval. Voting Aye: Chairman Chassee, Alderman Earley, Banas, Hallett, Edwalds and Birch. Voting Nay: 0. Motion carried.
- F. Race Time Inc. Frosty Fest 5K. Alderman Banas made a motion, seconded by Alderman Edwalds to direct this item to City Council for approval. Voting Aye: Chairman Chassee, Alderman Earley, Banas, Hallett, Edwalds and Birch. Voting Nay: 0. Motion carried.
- 6. Items for Discussion.

Chairmen Chassee asked the Committee if they would vote on having the Public Affairs meeting at 6:00PM for the months of July, August and September.

The Public Affairs unanimously agreed on meeting at 6:00PM for the months of July, August and September 2015.

- 7. Unfinished Business.
- 8. New Business.
- 9. Reports from Staff.
  - A. Traffic Management Reports.
- **10. Adjournment.** Alderman Earley made a motion to adjourn, seconded by Alderman Birch. The motion was approved by voice vote, and the meeting adjourned at approximately 7:20pm.

Respectfully submitted,

Yahaira Sautista
Yahaira Bautista
Administrative Assistant
West Chicago Police Department

Agenda Hem 3A



PREMIER MEMBERS

**Cadence Health** 

City of West Chicago

Jackson Vandiver AAMS® Wealth Advisor

> SBI West Chicago

West Chicago Family Chiropractic

West Chicago Park District

# Western DuPage Chamber of Commerce

"Doing Business Right! Doing Right for Business!"

## 2015 West Chicago Railroad Days Event Report – July 17, 2015

The 2015 Railroad Days consisted of a fireworks display on Saturday July 11<sup>th</sup> and a parade on Sunday July 12<sup>th</sup>. In general both the activities were well attended given the limited exposure but overall attendance was down from previous years.

The Fire Protection District reported no issues, as did the Park District and the Police Department had two lost children (same family) and both were located prior to the fireworks display ending. No issues were reported during the parade and everyone seemed to have a great time.

Lighting was added to the park during the fireworks show and with the help of visiting Emergency Services Organizations the lighting was turned off and back on making the show as spectacular as possible. ESDA and Police handled the traffic, although it was not very congested because of light rain and reduced marketing. It was however a very nice show and we received positive feedback before the night ended.

The parade had roughly 60 separate units/organizations, began on time 1:01 PM and no incidents to report.

The Western DuPage Chamber of Commerce respectfully submits this final report. Fire Marshall Joe Buenrostro, Police Commander Chris Woodill, Park District Director Gary Major contributed to this report by providing their observations to me, Chamber President David Sabathne.

David J. Sabathne, President

Chamber Office & Training Center 306 Main Street West Chicago, IL 60185



PREMIER MEMBERS

Cadence Health

City of West Chicago

ackson Vandiver AAMS® Wealth Advisor

SBI West Chicago

West Chicago Family Chiropractic

West Chicago Park District Western DuPage Chamber of Commerce

"Doing Business Right! Doing Right for Business!"

Bill To	
City of West Chicago	
Rosemary Mackey	
475 Main St.	
West Chicago, IL 60185	

Invoice

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Date	invoice #	Terms
7/13/2015	4597	Due on receipt

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	ntributions or gifts to the Western DuPage Chamber of Commerce are not ble as charitable contributions for Federal Income Tax purposes, they may	Total	\$13,833.5

CP ber Office ling Center 306 Main Street West Chicago, IL 60185

P: 630-231-3003 F: 630-231-3009 at #011030 4680

be tax deductible under other provisions of the Internal Revenue Code."

team@westerndupagechamber.com www.westerndupagechamber.com

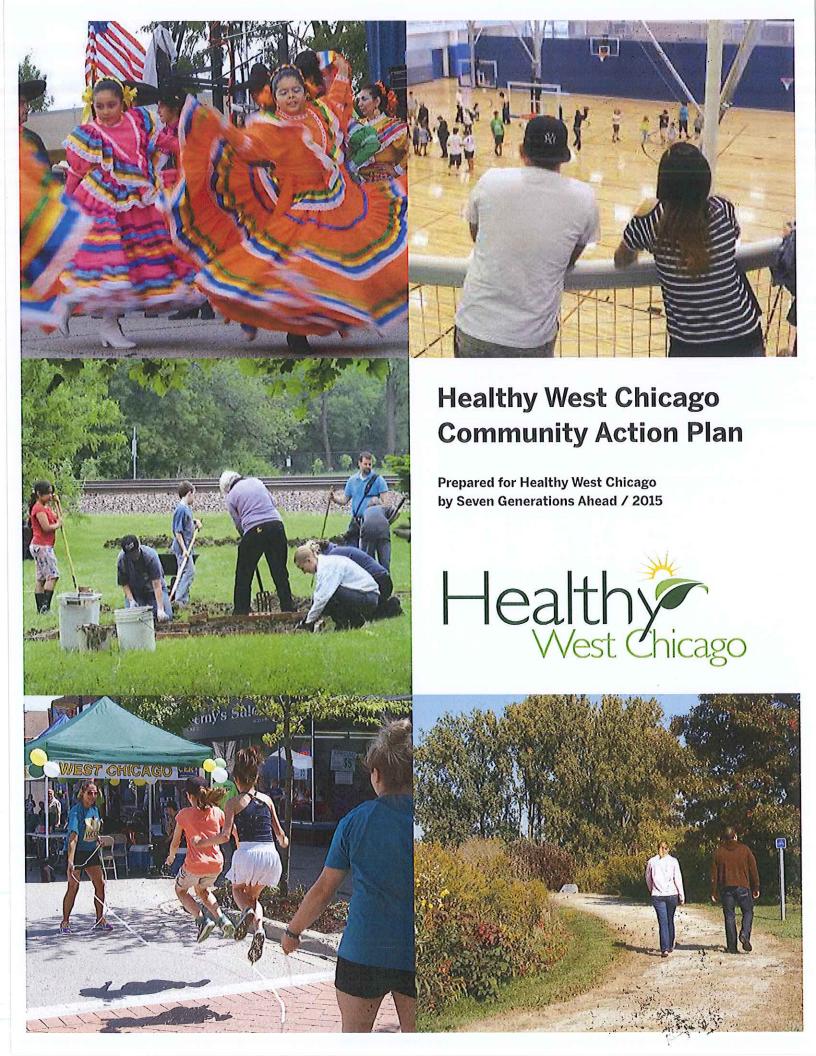
9:53 AM 07/13/15 Accrual Basis

# Western DuPage Chamber of Commerce Account QuickReport January 1 through July 13, 2015

Date	Name	Memo	Алюпт
Railroad Days			
Farade	- - - - -	4-11-07-00	400.00
07/10/2015	DuPage Shrine Club	Parage Unit	00.004
07/10/2015	Medinah Black Horse	Parade Unit	600.00
07/10/2015	Medinah Antique and Special Car Club	Parade Unit	500.00
07/10/2015	Medinah Clown Unit	Parade Unit	500.00
07/10/2015	Medinah Motor Corp.	Parade Unit	1,000.00
07/10/2015	Medinah Shriners Fire Unit	Parade Unit	400.00
07/10/2015	Medinah Shriners Mini Choopers	Parade Unit	500,00
07/10/2015	Waterloo German Band	Parade Unit	800.00
07/10/2015-	West Suburban Home School Band	Parade Unit	500.00
07/10/2015	West Suhirhan Shine Club Roading 57s	Parade Unit	500.00
07/10/2015	Slam Duke Productions Homets Drumline	VOID Drumline was a NO-SHOW	0.00
07/10/2015	WCCHS Band	Parade Unit	200.00
Total Bamde			6,200.00
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Total Railroad Days	ys		6,200.00
TOTAL			6,200.00

## CITY OF WEST CHICAGO

PUBLIC AFFAIRS COMMITTEE AGENDA ITEM SUMMARY				
ITEM TITLE: Healthy West Chicago	AGENDA ITEM NUMBER:  FILE NUMBER:  COMMITTEE AGENDA DATE: August 11, 2015 COUNCIL AGENDA DATE:			
STAFF REVIEW: Rosemary Mackey	SIGNATURE			
APPROVED BY CITY ADMINISTRATOR:	SIGNATURE			
At the Public Affairs Committee meeting of August 26, 2013, City staff vinitiative, Healthy West Chicago (HWC), which emphasizes healthy living regularly with other community members and an outside consultant, strategies in the areas of nutrition and physical activity to be incorporated. Plan for the next 10 years. The HWC Action Plan (attached) was funded includes the recommendation that a full-time facilitator be hired to coorday focus on fundraising opportunities (e.g. grants, endowments, corporation).	ng choices. Since that time, staff and elected have met Seven Generations Ahead, on identifying goals and ed in a formal document that would serve as an Action ed through Cadence Health/Northwestern Medicine and dinate and manage implementation of the Plan, as well			
ACTIONS PROPOSED:  Staff is seeking direction from the Committee on:  the continued investment of staff time attending meetings, mark the possibility of the City of West Chicago financially contributing				
COMMITTEE RECOMMENDATION:				





Our goal is to increase healthy eating and physical activity in the City of West Chicago to make West Chicago one of the healthiest communities in the region.

# **Healthy West Chicago Community Action Plan**

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## I. Introduction

Healthy West Chicago is a collaboration of community leaders in local government, education, healthcare, social services, faith-based congregations, businesses, and non-profit organizations who have organized to increase nutrition and physical activity in the City of West Chicago. Healthy West Chicago is committed to making permanent changes by enacting policy, systems and environmental changes to allow the healthy choice to be the easy choice. This Healthy West Chicago Community Action Plan addresses a number of community health and wellness topics including environmental quality, healthy food systems, public safety, sustainable transportation, parks and recreation, healthy urban design, and education about the importance of good nutrition and physical activity.

Healthy West Chicago was formalized in 2014 through funding from a grant from Northwestern Medicine (formerly Cadence Health) and supplemental support from WeGo Together for Kids through their partnership with the United Way of DuPage/West Cook. The Core Team (see Appendix A for a list of Core Team members) contracted with Seven Generations Ahead, a local healthy and sustainable communities non-profit organization, to develop the Healthy West Chicago Community Action Plan. The plan development process incorporated broad-based community outreach including: a) regular Healthy West Chicago Core Team and Task Force meetings (see Appendix B for a list of Task Force members); b) a citywide community survey; and c) a variety of forums with specific sector groups, organizations, technical experts, and the community at-large to develop the plan's core strategies. The team mapped and analyzed existing health conditions, assessing policies, programs and initiatives that support a healthy West Chicago. The culmination of these efforts is the Healthy West Chicago Community Action Plan - a plan that will serve as a road map with realistic, innovative, and clear policies and strategies to support West Chicago's goal of becoming a healthy community.

For an Executive Summary of the recommendations of the Healthy West Chicago Community Action Plan, please see Appendix C.

## II. Why a Plan?

Changes to the design of communities, healthy food access, built environments, and the prevalence of cheap, processed foods have altered the American lifestyle and the picture of health within our country. As a result, we are now a nation of people who are less physically active and who eat less nutritious foods. The City of West Chicago is no exception to these changes. Healthy West Chicago seeks to reverse these trends and make West Chicago one of the healthiest communities in the region. This shift will require changes in the way people live, work and play in West Chicago, and community-wide collaboration to make the healthy choice the easy choice.

## A. State of the Nation

## THE PROBLEM

As a nation, the United States is faced with rising incidences of preventable diseases - including obesity and diabetes in both youth and adult populations. When compared to other countries,



Americans generally tend to be less healthy due in part to a lack of both physical activity and proper nutrition. Advancements in technology and transportation, increased length of the average workweek, and the adoption of a fast-paced, convenience-centered mindset have impacted every aspect of life for the American people. The rise of fast-food restaurants, pre-made meals, and grab-and-go food items has altered American eating habits and made the population less healthy.

Americans today are less active than in previous generations. The built environment caters to automobile transportation and discourages physical activity through walking and biking. Sedentary jobs have increased 83% since 1950, with physically active jobs making up less than 20% of our workforce.6 In addition, schools have scaled back on engaging children in physical activity. Currently, less than half (48%) of all American adults meet the physical activity recommendations provided by the Center for Disease Control (CDC), and less than 3 in 10 high school aged students engage in at least 60 minutes of physical activity every day.7 In 2006, only 2.1% of high schools, 7.9% of middle schools and 3.8% of elementary schools provided daily physical education or its equivalent (225 minutes per week for middle and high schools and 150 minutes per week for elementary schools) to all students for the full school year.8 At the same time, youth have become more sedentary during their out-of-school hours. On a typical school day, 35.4% of adolescents in grades 9-12 spend three hours or more watching television.9

Lack of physical activity has been linked to increased prevalence of chronic illnesses

with immediate and long-term effects on

the health and well-being of those affected, including obesity, diabetes, and heart disease. The CDC reports that the number of Americans with diagnosed diabetes has more than tripled in the period from 1980 to 2011, growing from 5.6 million Americans to 20.9 million. Statistics from 2014 support this trend. Currently, a reported 29.1 million Americans have diabetes, and over 86 million American adults – more than 1 out of 3 – are pre-diabetic.11

Furthermore, across all age groups, the prevalence of obesity has been steadily increasing. Over 69% of adults age 20 years and older are overweight, with roughly 35% of the American population categorized as obese. 12 Additionally, obesity has more than doubled in children and quadrupled in adolescents in the past 30 years.13

## - FAST FACTS -**AMERICA'S EATING HABITS**

(CHANGES TO AMERICAN EATING)

### Consume More Calories

Americans' average daily caloric intake increased from 1,955 in 1975 to 2,195 in 2010 1

## **Larger Portion Sizes**

Overall increase evidenced in portion sizes of food items sold at restaurants, fast-food shops, and grocery stores<sup>2</sup>

### Consume More Sugar

American sugar consumption is nearly two times the USDA recommended intake3

**Increased Frequency of Eating Out** 63% of children age 1-12 years old ate at a restaurant 1 to 3 times per week  $(2002)^{4,5}$ 



Between 1988–1994 and 2009–2012, the Percentage of Adults Aged 20 and Over with:

Grade 1 obesity

[a body mass index (BMI) of 30.0–34.9] <u>increased from 14.8% to 20.4%</u>

Grade 2 obesity

(BMI of 35.0-39.9) <u>rose from</u> 5.2% to 8.6%

Grade 3 or higher obesity

(BMI of 40 or higher) doubled, from 3.0% to 6.3%<sup>14</sup>

Although obesity affects people of all demographics, the prevalence rates are most alarming for certain racial and ethnic minorities and lower-income families in the United States. Hispanic children are more likely to be obese or overweight than non-Hispanic White or non-Hispanic Black children. Among Hispanic children and adolescents ages 2 to 19, 38.2% are obese or overweight, compared with 35.9% of non-Hispanic Black and 29.3% of non-Hispanic White children and adolescents. 15 Moreover, 22% of children ages 10 to 17 from families below the poverty line are overweight or obese, compared with 9% of children in families making four times that amount.16 Although there are many reasons that these disparities exist, a major factor is that lower-income populations, which include many minority or rural communities, lack adequate opportunities for safe physical activity and access to nutritious foods.

Today, obesity is the leading medical reason why applicants fail to qualify for military service. As 27% of young people aged 17 to 24 are too heavy to serve in the armed forces and because overweight employees

reduce workplace productivity, obesity is quickly becoming a significant national security concern. Of particular worry is the rapidly rising rates of obesity among children -- the future leaders and workers of the nation. The prevalence of this epidemic demands action before obesity further erodes American competitiveness and our national security. First Lady Michelle Obama said in prepared remarks: "Military leaders tell us that when more than one in four young people are unqualified for military service because of their weight, childhood obesity isn't just a public health threat, it's not just an economic threat, it's a national security threat as well."<sup>17</sup>

The impact of lack of physical activity and poor nutrition are far-reaching and affect the entire nation. The price of inactivity is costly, not only physically, but financially. As a nation, America spends 86% of its health care dollars on the treatment of chronic diseases, many of which are preventable. In 2011, the CDC estimated that healthcare costs exceeded \$8,600 annually per capita, and that medical spending attributable to obesity was estimated to be more than \$1,400 higher than for normal weight individuals. Obesity in the United States continues to rise, and the problem does not appear to be getting any better. According to the Centers for Disease Control and Prevention, the national obesity rate rose again in 2013 to 28.3% of the adult population. The growing epidemic is placing an increasingly greater burden on our health care system, and according to a 2013 study, the annual obesity-related health care costs are estimated to be as high as \$210 billion.

#### THE SOLUTION

The consequences and problems that stem from America's ill health demand attention at all levels. Where we live impacts our quality of life. Given that lower income communities are prone to more incidences of obesity, diabetes, and other preventable diseases, reversing this trend will require policy action at all levels of government. Policy actions are necessary to eliminate the barriers to



physical activity and healthy eating, and provide more opportunities for children and families to engage in healthy behaviors. The National Prevention Strategy is a comprehensive plan created by the National Prevention, Health Promotion, and Public Health Council in consultation with the public and an Advisory Group of outside experts. It recognizes that good health comes from stopping disease before it starts, from safe outdoor spaces for physical activity, healthy foods, violence-free environments and healthy homes. The National Prevention Strategy includes actions that public and private partners can take to help Americans stay healthy and fit.

## NATIONAL PREVENTION STRATEGY

\_ \_ \_

"Prevention should be woven into all aspects of our lives, including where and how we live, learn, work and play. Everyone—government, businesses, educators, health care institutions, communities and every single American—has a role in creating a healthier nation." <sup>21</sup>

There is significant evidence which indicates that many children do not have opportunities to be physically active or have access to healthy foods on a daily basis. Moreover, the environmental barriers to healthy behaviors are even larger in lower-income areas. Communities with high levels of poverty are significantly less likely to have places where people can be physically active, such as parks, green spaces, and bicycle paths and lanes.<sup>22</sup> And although easy access to supermarkets that offer fresh fruits and vegetables is associated with lower body mass index, many neighborhoods in racial and ethnic minority, lower-income and rural areas tend to be affected by inequitable access to food stores and affordably priced healthy foods.<sup>23</sup>

Communities have the ability to support residents who choose to exercise and eat right by making changes on the system and policy level. Improving the state of the nation's health requires us to build an environment in which the healthy choice is the easy choice, and to have that be reflected in all parts of the country.



## **B. Local Regional Context**

The City of West Chicago faces the same preventable health challenges being faced across the country. An examination of the demographic and chronic disease data for DuPage County and West Chicago gives a picture of where we are today and helps set some direction as we work to make West Chicago a healthier community. There are a number of county-wide and regional organizations already working to support improved nutrition and increased physical activity in communities and this section provides a brief overview of a couple of these initiatives to paint a regional picture of the work being done in this area.



West Chicago Train Station

## **DEMOGRAPHIC INFORMATION**

West Chicago is located in DuPage County, the second most populous county in Illinois with 918,608 people, 33 municipalities, and 42 school districts spanning 327 square miles. West Chicago's population was 27,086 at the 2010 census. The population was 67.6% White, 2.5% Black, 0.6% Native American, 5.9% Asian, 0.1% Pacific Islan der, and 2.7% from two or more races. 51.1% of the population was Hispanic or Latino of any race.

A population's demographic characteristics can impact the community health needs. Genetics, culture and age influence health

needs. Socioeconomic indicators also affect the volume and type of health needs in the community. These include income, education, English language literacy, employment, insurance, and immigration status. DuPage County has seen big changes in demographic and socioeconomic trends in the past two decades.

**AGE:** By 2030 the number of DuPage residents age 60 or over will have increased 133% from 2000, according to estimates by the U.S. Census Bureau.<sup>25</sup>

**RACE AND ETHNICITY:** Between 2000 and 2010, the number of White persons decreased by 65,836 (-8.3%), and the number of Hispanic residents grew by 40,140 people (+4.3%). About 26% of DuPage County's residents speak a language other than English at home and 10% do not speak English very well.<sup>26</sup>

TABLE 1: RACE AND ETHNICITY DATA

	White	Hispanic/Latino (any race)	African American	Asian	Other
DuPage County	70.3%	13.3%	4.4%	10.2%	1.8%
West Chicago	39.8%	51.1%	2.5%	5.9%	0.7%

Source: American Community Survey, 2010, 2012



In comparison with other DuPage County municipalities, West Chicago has the highest percentage of Latino or Hispanic residents (51.1%). West Chicago has a 15.1% poverty level (2<sup>nd</sup> highest in DuPage County), with 79% of its students receiving free/reduced lunch. In 2010, the median income for a household in the city was \$63,424, and the median income for a family was \$65,744. Males had a median income of \$39,723 versus \$27,285 for females. The per capita income for the city was \$19,287, the lowest in DuPage County.<sup>27</sup>

## CHRONIC DISEASE DATA

Blood pressure, cardiovascular disease, diabetes, cancer, eye disease, and other genetically linked conditions vary significantly among different racial and ethnic groups. DuPage County is experiencing demographic changes that call for examination of how the region and individual communities can support healthy choices and meet the healthcare needs of the people who live here. The rapid aging of the population will bring with it increased rates of chronic conditions and diseases. These include obesity, diabetes, arthritis, heart disease, cancer, and degenerative neurological conditions. In addition, acute conditions including heart attack, pneumonia, and stroke will increase. This will create a need for a range of services from wellness and prevention to management of chronic conditions to acute care. The growing diversity of the population will bring with it a need for greater diversity in the healthcare workforce and inclusive approaches to delivering services that are sensitive to cultural needs. In particular, more resources will be needed to serve foreign-born populations that may not speak English and have different health and wellness traditions. <sup>29</sup>

TABLE 2: DUPAGE COUNTY - PREVALENCE OF KEY ADULT CHRONIC DISEASE CONDITIONS (2012 DATA)

	Obesity	Diabetes	High Blood Pressure	High Cholesterol
DuPage County	24.7%	10%	27%	29.2%
Minority (Non-White)	33%	13.9%	Not Available	Not Available
Low Income	36.7%	19.2%	Not Available	Not Available

Source: Community Health Needs Assessment, Central DuPage Hospital, 2013

"Latinos have among the highest rates of obesity, overweight, and type 2 diabetes.

The health of our communities and the future of our nation depend on policy-makers' ability to create a healthier, livable environment for our children."

#### **ARTURO VARGAS**

Executive Director, National Association of Latino Elected and Appointed Officials Educational Fund As indicated by Table 2, the priority populations in DuPage County are low-income and Hispanic/Latino residents due to higher rates of chronic disease. These populations require targeted strategies due to the existence of linguistic and cultural barriers that may hinder access to and use of preventive resources.

In 2013-2014, DuPage County had a child and adolescent obesity rate of 14.4%. The Northwest Region of the

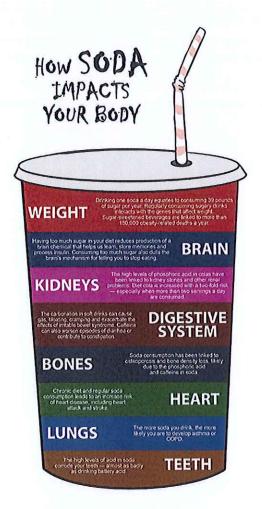


county, where West Chicago is located, had an obesity rate of 15.8%, nearly 10% higher than the county and nearly 40% higher than the region with the lowest obesity rate. 30

For more information on Body Mass Index reporting in DuPage County, please see Appendix D: DuPage FORWARD 2013-2014 Body Mass Index Surveillance Report.

## **USING DATA TO GUIDE HEALTHY CHOICES**

As was noted earlier, communities have the ability to support residents who choose to exercise and eat right by making changes on the system and policy level. When faced with unhealthy options that are easily accessible and affordable, it becomes harder to make healthy choices. An example of this can be seen with local soda consumption. The links between soda consumption and chronic diseases have been well established.



Credit: www.ksl.com

Soft drinks are the beverage of choice for millions of Americans, but sugary drinks increase the risk of type 2 diabetes, heart disease, and other chronic conditions.

- People who consume sugary drinks regularly—1 to 2 cans a day or more—have a 26% greater risk of developing type 2 diabetes than people who rarely have such drinks.<sup>31</sup>
- A study that followed 40,000 men for two decades found that those who averaged one can of a sugary beverage per day had a 20% higher risk of having a heart attack or dying from a heart attack than men who rarely consumed sugary drinks.<sup>32</sup> A related study found a similar link between sugary beverage consumption and heart disease.<sup>33</sup>
- A 22-year-long study of 80,000 women found that those who consumed a can a day of sugary drink had a 75% higher risk of gout than women who rarely had such drinks. 49 Researchers found a similarly-elevated risk in men.<sup>34</sup>
- Dr. Frank Hu, Professor of Nutrition and Epidemiology at Harvard School of Public Health, recently made a strong case that there is sufficient scientific evidence that decreasing sugar-sweetened beverage consumption will reduce the prevalence of obesity and obesity-related diseases.<sup>35</sup>

Image 1 shows regional soda expenditures as a percent of total expenditures. This image shows that West Chicago is in the 60<sup>th</sup> – 80<sup>th</sup> % for expenditures, an incredibly high percent.

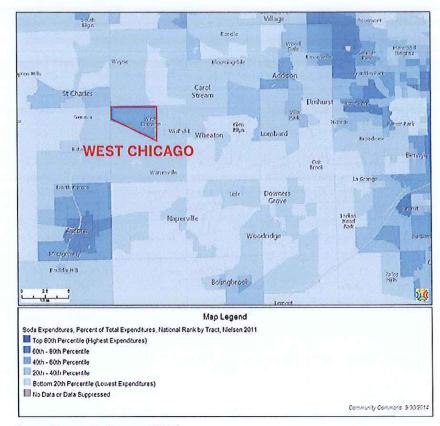
We know that soda consumption is unhealthy. We know that lots of soda is being purchased in West Chicago. And now, we need a plan for helping to educate residents about the importance of making healthy choices and a plan to make these healthier choices easy and accessible.

# DUPAGE FORWARD STRATEGIC PLAN

FORWARD (Fighting Obesity Reaching healthy Weight Among Residents of DuPage) is a coalition of partners dedicated to reversing the obesity trend

## **IMAGE 1 - REGIONAL SODA EXPENDITURES**

Soda Expenditures at the Census Tract Level



Source: Community Commons (2014)

in DuPage County by educating children and families about the importance of eating healthy and being physically active. FORWARD's mission is to lead DuPage County, through a broad based community coalition, in promoting effective and sustainable policy, system, and environmental strategies for children and families to achieve a healthy lifestyle. FORWARD supports the promotion of evidence-based strategies that have been shown to have an impact on improving health, lowering chronic diseases caused by obesity, and reducing obesity rates. They include:

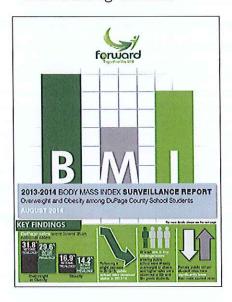
## Physical Activity/movement

- Improved biking/walkability
- · Bike racks, bike safety
- Safe Routes to School programming
- Walking School Bus
- Safe vehicular vs. pedestrian design (Complete Streets)
- · Trail design and use signage
- Improved physical activity



## Walking/jogging paths

- Brain Breaks throughout the school/work day
- Play/exercise equipment/curriculum available in schools and workplaces and in communities
- · Physical activity policies--all engaged/curriculum and policy
- · Shared use agreements



## Nutrition/Wellness

- Increased healthier breakfast and lunch choices in schools and workplaces
- Increased school/community gardens/edible gardens
- · Increased farmers' markets
- · Improved access to nutritional programming
- Extend nutrition curriculum in grocery stores, schools, worksites
- Cooking/recipe workshops-kitchen design and equipment
- Improved wellness policies
- Vending policies
- · Competitive food policies
- · Increased access to fresh drinking water
- · Re-fill stations
- · Water bottle policies

FORWARD will use its network of partners and resources to help communities make the healthy the choice the easy choice. The guiding principles will enable FORWARD Coalition members to carry out work over the next five years in the following strategic areas: Schools, Municipalities, Healthcare, Early Childhood, and Worksites. FORWARD's 2020 roadmap will involve key partnerships with a variety of sectors to inspire change throughout DuPage County.

FORWARD works closely with DuPage schools to monitor and report ongoing changes in BMI and blood pressure rates in kindergarten, sixth, and ninth grades, which allows FORWARD to focus its efforts in specific communities. By coordinating local technical assistance, tools, and other resources, FORWARD Coalition members mobilize community leaders, organizations, stakeholders, and individuals who have influence, passion, and expertise in building healthy communities through policy, system and environmental changes. FORWARD equips its members with data and knowledge regarding best practices to inform and educate local and state policymakers and advocacy groups. FORWARD's extensive network of partners provides unique opportunities to identify and secure resources to support and sustain obesity prevention efforts in DuPage County. Through multi-sectoral partnerships, FORWARD is able to creatively and collectively impact nutrition, physical activity, and the built environment. FORWARD maximizes communication opportunities to disseminate best practices and lessons learned through the FORWARD website, social media, FORWARD task forces, and coalition and advisory board meetings. In addition, FORWARD supports ongoing, consistent messaging using 5-4-3-2-1 Go!® to promote healthy lifestyles county-wide.

## **GO TO 2040**

The Chicago Metropolitan Agency for Planning (CMAP) facilitated a comprehensive Chicago metro area community engagement process to develop the GO TO 2040 comprehensive regional plan. To address anticipated population growth of more than 2 million new residents, GO TO 2040 establishes coordinated strategies that help the region's 284 communities address transportation, housing, economic development, open space, the environment, local food, transportation, and other quality-of-life issues.

GO TO 2040 addresses key strategies on a regional level that will impact the health of West Chicago residents and stakeholders. Some of the key components of GO TO 2040 that are aligned with the *Healthy West Chicago Community Action Plan* include:

#### **Food Access**

In most of our region, residents can buy food in large full-service groceries, smaller specialty shops, or even corner fruit stands. Increasingly prevalent neighborhood farmers' markets are becoming social gathering spots where consumers can meet the people who grow their food. Yet in parts of our seven counties, too many people lack access to nutritious food, putting them at increased risk for obesity, diabetes, and other nutrition-related



Credit: www.bloominthyme.com

conditions. Nine percent of our region's residents live in food deserts without a nearby grocery store. Instead of eating fresh, affordable food, they may depend on the closest convenience store where prices are high and nutrition is low. <sup>36</sup> Distance to the nearest grocer has been correlated to increases in cancer, cardiovascular disease, diabetes, and liver disease, especially in African American communities. <sup>37</sup> The region should pursue strategies that increase access to fresh food and that build public awareness of good nutrition, especially in food deserts. For example, expanding arrangements between local food producers and food banks would make fresh products more accessible to low-income people. So would permitting farmers' markets, community-supported agriculture, and nontraditional retail food outlets to accept hunger assistance benefits.

## **Local Food Production**

Urban agriculture, converting under-used urban land to food production including community gardens, should be pursued in developed areas across the region. From commercial farms to community co-ops and even backyard gardens, emphasizing local food production and access can help to preserve farmland in traditionally agricultural communities or to revitalize neighborhoods by bringing agriculture to vacant, unused parcels in urban settings where it is usually absent. By promoting local food in federal agricultural policy and establishing procurement processes at the state level that favor local food, we can provide additional institutional support to local production.



## More Options for Transportation

By providing residents with safe, reliable, and economical transportation choices, more people will be able to walk, bike, and use public transit to get around — making driving a choice rather than a necessity. Having transportation options allows older residents to stay in their homes (called "aging in place"), improves mobility for disabled residents, and leads to better health overall. Without easy access to transportation, many of these individuals require assisted living facilities when they might otherwise live independently.

## **Provide Green Connections**

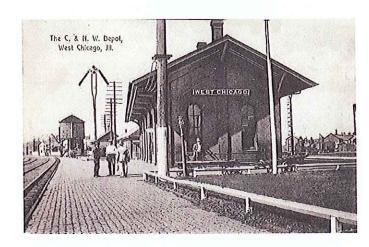
One way of establishing connections between parks and preserves is a greenway trail. The region has been very successful in developing off-street trails over the past two decades, and GO TO 2040 envisions organizations in the region continuing to use the Greenways and Trails Plan to establish connections between preserves and parks, as well as to support walking and bicycling alternatives. The plan recommends that the region should double existing greenway trail mileage by 2040.<sup>38</sup>

In conclusion, the City of West Chicago faces the same preventable health challenges being faced across the country. An examination of the demographic and chronic disease data for DuPage County and West Chicago gives a picture of where we are today and helps set some direction as we work to make West Chicago a healthier community. Communities can and should support residents who choose to exercise and eat right. Improving the health of West Chicago requires us to build an environment in which the healthy choice is the easy choice, and to have that be reflected in all parts of the city and county.

## C. West Chicago History and Culture

West Chicago was formerly named Junction and later Turner, after its founder, John B. Turner, president of the Galena and Chicago Union Railroad (G&CU) in 1855. The city was initially established around the first junction of railroad lines in Illinois and today is still served by the Union Pacific West Metra service via West Chicago station. According to the 2010 census, the city has a total area of 15.14 square miles.<sup>39</sup>

As part of the effort to attract industry, the community changed its name in 1896 to the Village of West Chicago. Area business-



Credit: chuckmanchicagonostalgia.wordpress.com

men reasoned that the new name sounded more cosmopolitan, and would help draw prospective factory owners. The original settlers were primarily English and Irish, with Germans arriving in the 1860s and Mexican immigrants by the 1910s.

