

Healthy Eating in Connecticut

The Connecticut Department of Public Health partners with the Connecticut Bureau of Education and Services for the Blind to improve nutrition quality in vending facilities operated by blind vendors. ASTHO interviewed a nutrition consultant for the health department to learn more about this partnership.

From July 2016 to June 2017, ASTHO ran the [Advancing Sodium and Sugar Reduction Through Partnerships](#) virtual learning community, a project focused on increasing the uptake of sodium and sugar reduction strategies among the food service sector, state governmental leaders, and state and territorial public health practitioners. The primary objective of this learning community was to explore how state health agencies might improve the nutritional quality of foods and beverages served and sold by food industry partners (including food service management companies and blind vendors) through successful and effective partnerships.

As part of this project, ASTHO hosted a webinar to show how states are partnering with the food industry to accelerate sodium and sugar reduction efforts. Marcia Pessolano, RDN, CD-N, a nutrition consultant for the Connecticut Department of Public Health, discussed the state's current efforts and work in collaboration with the Connecticut Bureau of Education and Services for the Blind. Below is an interview with Pessolano highlighting her work with the bureau.

1. The [Randolph-Sheppard Act](#) became federal law in 1936 under President Franklin Roosevelt and gives priority to legally blind individuals to operate vending facilities. Can you explain how this law has affected your work and your role with the Connecticut Department of Public Health?

I work on the CDC-funded cooperative agreement, State Public Health Actions (DP13-1305). One of the grant strategies for which I am responsible includes improving the nutrition environment on state properties. Because the Randolph-Sheppard Act gives blind vendors priority for vending facilities, I am required to work with the blind vendors that operate vending facilities in many state-run buildings in order to make changes to the types of foods served. Vending facilities include vending machines, cafeterias, and snack bars, and in this case, it applies to those on federal and state properties. I am currently focused on working with blind vendors operating cafeterias on state property.

Under the Randolph-Sheppard Program, state rehabilitation agencies recruit, train, license and place individuals who are blind as operators of vending facilities located on federal and other properties. In FY 2014, 2,108 blind vendors [operated](#) 2,389 vending facilities. The program generated \$693.6 million, and vendors earned \$59,012 on average.

2. The health department has worked with blind vendors for several years to improve the nutritional quality of food offered on government-owned properties. What was the impetus for enhancing the focus on nutrition and promoting healthier food options?

In 2012, I joined the Connecticut Food Advisory Board, a procurement group for state agencies focused on increasing the agencies' purchasing power by purchasing food together. Members of the advisory board include the department of corrections, the state technical high school system, the department of veterans affairs and other agencies that are required to purchase and serve food.

The advisory board invited the Connecticut Department of Health (CDPH) and the Connecticut chapter of the American Heart Association (AHA) to participate to help educate and inform the group on how to offer healthier options in state facilities. As part of this effort, AHA was working towards a legislative proposal to require certain nutrition standards for all foods sold and served on state properties. CDPH partnered with AHA to promote the nutrition standards and educate stakeholders about the benefits of statewide legislation. This partnership prompted CDPH and AHA to have conversations with the Connecticut Bureau of Education and Services for the Blind (BESB), as legislation would affect them and the blind vendors they support.

While the legislation did not pass, the conversations and collaborations led to continued efforts to improve healthy food offerings. Ultimately, BESB was unable to support statewide legislation requiring nutrition standards, but has been very interested in voluntarily implementing a healthy cafeteria and healthy vending program with assistance from CDPH. BESB's dedication to improving healthy food options has gone hand-in-hand with consumer demand.

The [Bureau of Education and Services for the Blind](#) provides resources, comprehensive low vision services, specialized education services, life skills training, case management, and vocational services to individuals of all ages who are legally blind and to children who are visually impaired.

3. What nutrition criteria does BESB now use for its vending facilities in Connecticut?

BESB is using the [Fit Pick](#) nutrition standards in its vending machines. These standards come out of the National Automatic Merchandisers Association, an organization representing vending, cafeteria, kiosk, and other similar types of operators. BESB has been in the process of rolling out these standards; currently, 30 percent of the items offered across all vending meet Fit Pick guidelines. We are continuing to think of ways to strengthen the standards used for a subset of vending products. Vending generates all of BESB's revenue so product sales are critically important.

4. Are you also working with BESB on cafeteria offerings?

We have always looked at cafeterias as a place to make changes, but have encountered several obstacles which have slowed down progress in these settings. There is frequent staff turnover in the cafeteria setting, so we are hoping to identify an existing—or create a new—tool that BESB can pilot test. Such a tool would include recipes and various types of marketing materials. We would like to implement a ready-made program rather than reinvent the wheel. We are considering many options as we move forward, including Kentucky's [Better Bites](#) nutrition standards, and are open to learning about other tools and resources.

To date, we have conducted an initial assessment and consumer survey, which provided us with critical information and a solid foundation to build upon. During this initial phase, we learned from cafeteria consumers that they want healthier options, including salad bars and more vegetarian and vegan options.

BESB has been a full partner in this effort and we remain optimistic about moving forward in the cafeteria setting. After an initial pilot, our goal is to improve cafeteria offerings statewide. The pilot will take place at the Capital Avenue Complex, where I work and which houses multiple state agencies and employs about 1,000 people.

5. What are your primary challenges in offering foods with less sodium and added sugar?

I've discussed with BESB some of the challenges related to finding products that meet Fit Pick standards and appeal to customers. It is difficult to find a wide variety of products; sometimes we end up with six types of granola bars. We are continuing to work with BESB on the importance of offering a variety of healthy food options. In cafeterias, we expect to face some challenges around staff cooking skills and adherence to recipes. Many cafeteria items are made onsite from scratch, making it critically important to find recipes that meet nutrition standards and that consumers find appealing. We also recognize the need to strengthen and enhance our marketing and signage to drive consumer interest.

6. Do you have any suggestions for other public health departments partnering with blind vendors?

It's critical to position your efforts not just around the public health benefits, but also the economic incentives. We have learned several lessons, including:

- Highlight the economic benefits of providing and promoting healthier options. Make the case for healthier options through the business lens.
- Underscore consumer demand for healthier items, and talk about the customer base and gaining the upper hand in the market.
- Stress the need to meet increasing consumer interests in gluten-free, vegan, and vegetarian items. For example, quinoa and whole grains are more popular now than ever, so point to these trends.
- Bring consumer and economic data to the table when working with blind vendors, noting that these changes are a win-win.

BESB recognizes that offering what consumers want is in its best interest, in that providing healthier items entices individuals to stay in the cafeteria, versus going off the property to another restaurant, food truck, or elsewhere.

It's important to be relatable, compromise, and work together. Start with simple changes or a small pilot to roll out. Consider presenting on your efforts and vending machine nutrition at national conferences.

7. Where can state public health agencies go to learn more about the Capital Avenue Complex pilot and your nutrition initiatives?

Email me (Marcia.Pessolano@ct.gov) for more information. Additional information about CDPH's Nutrition, Physical Activity and Obesity Prevention Program is available [here](#).

8. Are there any resources, toolkits, experts, or other advice you would like to share with other states hoping to work collaboratively with blind vendors?

There are several resources that I found helpful when I started working on this project that others may find useful.

ASTHO

- National Webinar: [Sodium and Sugar Reduction Through Partnerships with the Food Industry](#) (May 17, 2017)
- Senior Deputy interviews: Key Recommendations (coming soon)

Information About Nutrition Standards

- Center for Science in the Public Interest: [Healthier Food Choices for Public Places](#)
- American Heart Association: [Healthy Workplace Food and Beverage Toolkit](#)
- [Better Bites Program Offers Kentucky Employees Healthier Food Options](#)
- GSA: [Concessions and Cafeterias: Healthy Food in the Federal Workplace](#)

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