

were given free samples of calcium-rich and calcium-fortified products including soy milk, snack bars, nuts, cheeses, bread, and juices. We changed the approach with a new name, "Counting on Calcium," and have had success with college-age females with an online Web page titled "Counting on Calcium." This activity was recommended for personal health students and includes a risk assessment activity, knowledge quiz, and online survey.

Evaluation Approach

Qualitative approaches to determining the program's success included anecdotal information acquired from program participants and nonparticipants. Quantitative approaches included attendance rates for college-age students and men, compared with the older-age women. Furthermore, the information gleaned from the survey served as important formative evaluation for future program development. The number of hits on the Web site and responses to the online survey are also being tabulated.

Implications for Practitioners

The college-age population is a difficult population to reach, yet an important one in terms of osteoporosis risk and preventive strategies. Peak bone mass is not acquired until the age of 25 and even beyond, and the eating patterns of most

college-age females decline substantially when adjusting to a new environment and living independently. In addition to genetic risk factors, irregular menstrual periods, smoking, binge drinking, excessive consumption of carbonated beverages, and excessive protein intake increase the risk even further. It is important to find innovative ways to reach younger populations who may resist seeking information on their own but who may benefit the most from preventive nutritional practices. It is notable that the use of the Web site appeared to be the most successful approach to attract young women. Furthermore, its reach extended beyond the target group, college-age females, to include older women as well as college-age males. This approach on a college campus was able to reach young women in a "nontraditional" format because it removed the stigma of brittle bone disease among older women and because it was accessible at any time. We also learned that although programs are targeted for women, men are very interested in learning more about women's health issues. We recommend a decreased emphasis on disease prevention and more emphasis on proper nutrition.

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Program: Winner's Circle Healthy Dining Program

Sponsor: North Carolina Prevention Partners, Institute of Public Health, University of North Carolina at Chapel Hill

Objective

The Winner's Circle Healthy Dining Program is a community-based environmental change initiative creating healthy

eating environments across North Carolina for consumers eating away from home. Winner's Circle (WC) is a partnership between NC Prevention Partners, a non-profit organization, the Cardiovascular

Health Program and the Physical Activity and Nutrition Unit of the Division of Public Health, NC Department of Health and Human Resources, and local partner organizations. The program empowers local community coalitions, public health agencies, hospitals, Cooperative Extension agencies, and other partners to offer technical assistance to restaurants to identify and promote healthy menu items. The WC icon promotes menu items meeting the program's nutritional criteria.

Assessment of Needs

One-third of North Carolinians are overweight, and poor nutrition costs the state more than \$1.8 billion. Because people frequently dine at eating establishments within their communities, this is an ideal environment to reach the population. Nutritional guidance is rarely provided at eating venues, and making healthy choices is challenging.

Program Strategy

Counties throughout North Carolina can participate in the WC program. Each participating county creates a coalition to support WC. They receive training on the implementation process and are provided marketing tools and tips. The first step is to conduct intercept interviews with members of the target population to identify popular dining venues. Once identified, WC team members recruit these restaurants to participate in the program. Free nutritional analysis is provided for the restaurants to determine which menu items meet WC nutritional guidelines. After items are identified, the restaurant receives marketing tools, such as menu stickers and door slicks (two-sided stickers to be placed on doors featuring the WC name and logo for consumers to be able to identify participating restaurants). Local WC team members promote the program through earned

media (press coverage that does not require advertising dollars, such as newspaper articles or TV/radio news stories that result from pitching ideas to reporters, or writing letters to the editor and/or opinion editorials to the newspaper), posters, and billboards in their communities.

Evaluation Approach

Local WC teams turn in reporting forms on a regular basis. These include (1) the Intercept Summary Form to identify where consumers dine out, (2) the Menu Analysis Form that summarizes which menu items meet the nutritional criteria, and (3) the Media and Promotions Log that tracks local promotional efforts. Regular phone and e-mail contact is maintained with all participating counties for process evaluation and to provide technical assistance. Interviews have been conducted with local coalitions and participating restaurants to provide qualitative feedback to the program.

Implications for Practitioners

Within 2 years of development, 60 out of 100 counties in North Carolina have been trained for WC. Their efforts have resulted in 75 local and regional restaurants participating including the NC Legislative cafeteria. Chain restaurants including Subway; Wendy's; and Red, Hot and Blue are joining the WC. In addition, some counties have worked with convenient marts, ballparks, vending machines, and work site cafeterias. Any eating-out venue that has at least one item meeting WC guidelines may participate at no cost to the business. There is a pilot project in three counties for a Winner's Circle in Schools program. Local WC team members are actively pursuing marketing opportunities, and a statewide public relations campaign will soon promote public awareness of the

program. The majority of health departments throughout North Carolina are implementing the program without additional funding, as it is a low-cost strategy to enact environmental change. Local nutrition and health partners are working together to create healthy eating-out environments to address widespread overweight and chronic diseases. This collaboration is critical as WC requires multiple organizations investing time and talent and

using a simple low-cost kit that they tailor to local needs.

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**Program: Energize Your Life!
A Social Marketing Campaign to
Increase Fruit Consumption Among
Community College Students**

**Sponsor: California Department of Health
Services, California Project LEAN, Epidemiology
and Health Promotion Section, Contract 00-90996.**

Objectives

The objectives of the Energize Your Life! campaign were (1) to determine what messages and institutional changes may motivate community college students to improve their diets and decrease their chronic disease risk and (2) to incorporate this information in the development of materials for use in a social marketing intervention aimed at increasing their fruit consumption.

Assessment of Needs

Fast food that is high in fat and sodium is the foundation of many students' diets, and one study reported that 69% of college students did not eat any fruit once a day, and 43% ate vegetables less than once daily.¹ California State University, Chico, conducted a needs assessment of female Extended Opportunity Program and Services (EOPS) community college students;

one-third of the women surveyed reported eating fewer than the recommended two daily servings of fruit. EOPS is a student support program for educationally and economically disadvantaged students. Although low-quality diets are not restricted to individuals with low socioeconomic status, ethnic minority and low-income populations may be at increased risk for chronic health problems related to poor nutrition and thus were chosen as our target population for the campaign.

Program Strategy

Social marketing approaches are used to promote behavioral change in many public health programs. This approach applies commercial marketing approaches to attain social goals using the traditional commercial mix of promotion, publicity, advertising, and personal sales and adds institutional change, consumer empower-