

PRESIDENT'S COUNCIL ON SPORTS, FITNESS & NUTRITION

Annual Meeting

**Tuesday, June 27, 2023
1:30 to 5:00 p.m.**

**Hubert H. Humphrey Building, Great Hall
200 Independence Avenue S.W.
Washington, DC 20201**

Agenda
Tuesday, June 27, 2023

Time	Agenda Item	Page #	Presenter
1:45 pm	Call to Order and Welcome	pg 6	Rachel Fisher, <i>President’s Council on Sports, Fitness & Nutrition (PCSFN) Designated Federal Official and Acting Executive Director</i>
1:48 pm	Welcome and Launch of Physical Activity Guidelines for Americans Midcourse Report: Implementation Strategies for Older Adults	pg 7	ADM Rachel Levine, <i>Assistant Secretary for Health</i>
1:54 pm	Executive Director Update	pg 8	Rachel Fisher, <i>PCSFN Acting Executive Director</i>
2:01 pm	Federal Leadership Panel: How the PCSFN Can Amplify Nutrition and Physical Activity Efforts Across the Federal Government	pg 9	Moderator: RDML Paul Reed, <i>Director of the Office of Disease Prevention and Health Promotion, U.S. Department of Health and Human Services (HHS)</i> Panelists: Karen Hacker, <i>Director of the Centers for Disease Control and Prevention’s National Center for Chronic Disease Prevention and Health Promotion, HHS</i> Emily Schweninger, <i>Senior Policy Advisor in the Office of the Secretary, U.S. Department of Transportation</i> Cindy Long, <i>Administrator of the Food and Nutrition Service, U.S. Department of Agriculture</i> Lauren Imgrund, <i>Associate Director for Partnerships and Civic Engagement, National Park Service</i>
2:45 pm	National Fitness Foundation Update	pg 15	Shari Ciapka, <i>Interim Executive Director of the National Fitness Foundation</i>
3:00 pm	Break	pg16	
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3:45 pm	Council Member Deliberation	pg 20	
4:53 pm	Closing Remarks	pg 27	José Andrés, <i>PCSFN Co-Chair</i> Rachel Fisher, <i>PCSFN Acting Executive Director</i>
4:58 pm	Adjourn	pg 27	

President's Council on Sports, Fitness & Nutrition

Co-Chairs

[José Andrés](#)

Chef, Humanitarian, and Culinary Innovator

[Elena Delle Donne](#)

WNBA Player, Olympic Gold Medalist, and Author

Members

[Maribel Campos Rivera, MD](#)

Physician, Researcher, and Professor

[Tamika Catchings](#)

Olympic Gold Medalist, Former WNBA Player, and Sports Analyst

[Ayesha Curry](#)

Chef, Restaurateur and Nonprofit Founder

[Stephen Curry](#)

NBA Player, Nonprofit Founder, and Lifestyle Brand Founder

[Jon Feinman, MBA](#)

CEO of a Social Justice Organization

[Tina Flourney, JD](#)

Attorney and Former Political Advisor

[Jose Garces](#)

Chef and Entrepreneur

[J. Nadine Gracia, MD, MSCE](#)

Public Health Leader and Physician

[Meg Ham](#)

Food Retailer and Executive

[Kahina Haynes, MS](#)

Executive, Educator, and Arts Activist

[Ryan Howard](#)

Former MLB Player, Author, and Philanthropist

[Martin E. Ingelsby](#)

College Basketball Coach

Barbie Izquierdo

Social Justice Advocate, Food Insecurity Expert, and Public Speaker

Ben Jacobs

Chef and Restaurateur

Chloe Kim

Snowboarder and Olympic Gold Medalist

Chaunte Lowe

Olympic Bronze Medalist, Author, and Motivational Speaker

Viviana Martinez-Bianchi, MD, FAAFP

Physician, Professor, and Latinx Health Advisor

Elana Meyers Taylor

American Bobsledder and Olympic Silver Medalist

Dariush Mozaffarian, MD, DrPH

Cardiologist, Professor, and Researcher

Kim Ng

MLB Executive

Allison O'Toole, JD

Nonprofit Executive and Anti-hunger Champion

Oluwaferanmi Oyedeji Okanlami, MD, MS

Physician, Professor, and Adaptive Sport Advocate

Laura Ricketts, JD

MLB Franchise Owner, LGBTQ Advocate, and Attorney

Stefany Shaheen, MBA, MPA

Nutrition Advocate, Business Leader, and Author

Billy Shore, JD

Nonprofit Founder, Anti-hunger Leader, and Former Political Advisor

Michael Solomonov

Chef, Restaurateur, and Author

Melissa Stockwell

Veteran, Paralympian, and Motivational Speaker

Designated Federal Official

Rachel Fisher, MPH, MS, RD

PCSFN Designated Federal Official and Acting Executive Director

Presenters

[Paul Reed, MD](#)

RDML, U.S. Public Health Service

Director, Office of Disease Prevention and Health Promotion

U.S. Department of Health and Human Services (HHS)

[Rachel Levine, MD](#)

ADM, U.S. Public Health Service

Assistant Secretary for Health

HHS

[Karen Hacker, MD, MPH](#)

Director, National Center for Chronic Disease Prevention and Health Promotion

Centers for Disease Control and Prevention

HHS

[Emily Schweninger, MPH](#)

Senior Policy Advisor, Office of the Secretary

U.S. Department of Transportation

[Cindy Long, MPA](#)

Administrator, Food and Nutrition Service

U.S. Department of Agriculture

[Lauren Imgrund, MA](#)

Associate Director, Partnerships and Civic Engagement, National Park Service

[Shari Ciapka, MBA](#)

Executive Director, National Fitness Foundation

The following document contains highlights of the President's Council on Sports, Fitness & Nutrition (PCSFN) Annual Meeting held on Tuesday, June 27, 2023.

Call to Order and Welcome

Rachel Fisher, PCSFN Designated Federal Official and Acting Executive Director

- Welcomed President's Council members, federal colleagues, and audience to the meeting.
- Explained that the Council is a federal advisory committee whose members are appointed by the President of the United States to engage, educate, and empower all Americans to adopt a healthy lifestyle that includes regular physical activity and good nutrition.
- Noted that 22 out of the 29 new Council members were attending the meeting.

Ms. Fisher called the meeting to order.

Council members present:

José Andrés
Maribel Campos Rivera
Tamika Catchings
Jon Feinman
Tina Fournoy
Jose Garces
J. Nadine Gracia
Meg Ham
Kahina Haynes
Ryan Howard
Martin E. Ingelsby
Barbie Izquierdo
Ben Jacobs
Viviana Martinez-Bianchi
Elana Meyers Taylor
Dariush Mozaffarian
Kim Ng
Allison O'Toole
Oluwaferanmi Oyedeji Okanlami
Stefany Shaheen
Billy Shore
Melissa Stockwell

Council members absent:

Elena Delle Donne
Ayesha Curry
Stephen Curry

Chloe Kim
Chaunte Lowe
Laura Ricketts
Michael Solomonov

Ms. Fisher introduced ADM Levine, the 17th Assistant Secretary for Health.

Launch of Physical Activity Guidelines for Americans Midcourse Report: Implementation Strategies for Older Adults

ADM Rachel Levine, Assistant Secretary for Health

ADM Levine noted that this is the first President's Council meeting under the Biden-Harris Administration and that Council members represent a diversity of change makers across industries — including sports, fitness, food access, business, and health — who all have a common goal to improve access to healthy foods and opportunities for physical fitness.

ADM Levine then offered the following remarks:

- After the COVID-19 pandemic, there's remaining work to be done around improving the nation's health and achieving health equity.
- Chronic disease and mental health — particularly for youth — in the U.S. are priority, pressing health issues.
 - 6 in 10 Americans live with at least 1 chronic disease.
 - More than 1 in 3 U.S. high school students experienced poor mental health during the pandemic, and nearly half of students felt persistently sad or hopeless.
- Access to physical activity and good nutrition can prevent and manage chronic diseases and mental health issues.
- Yet too many Americans lack access to safe places to be physically active and face disparities in access to other services and supports that foster food security, healthy eating, and physical activity.
- The Biden-Harris Administration is doing work to address disparities through activities such as the White House Conference on Hunger, Nutrition, and Health and releasing the [National Strategy on Hunger, Nutrition, and Health](#), which provides a whole-government vision for ending hunger and increasing healthy eating and physical activity by 2030.
- Achieving this goal will take more than the effort of the federal government, and the White House issued a call to action for the public and private sector to commit to supporting this work.
- The Council will also play a key role in executing the National Strategy on Hunger, Nutrition, and Health by building partnerships and educating the public on physical activity and healthy eating. The Council will also be supported by the Office of Disease Prevention and Health Promotion.

ADM Levine released the Physical Activity Guidelines for Americans Midcourse Report: Implementation Strategies for Older Adults:

- By 2030, 1 in 5 Americans will be age 65 or older — and older Americans are currently the least physically active of any age group.
- The midcourse report was called for under Pillar 4 in the National Strategy on Hunger, Nutrition, and Health: “Support physical activity for all” and contains actionable, evidence-based strategies that can help older adults increase physical activity and further the vision of healthy people, healthy communities, and a healthy nation for all.
- The midcourse report is designed for policymakers; exercise and health professionals; clinicians; gerontologists; built environment professionals; local, state, territorial, and Tribal leaders, and others who work with older adults, and provides guidance on how to implement individual and community level strategies to increase physical activity and healthy food choice.

ADM Levine thanked attendees for their service.

Executive Director Update

Rachel Fisher, PCSFN Designated Federal Official and Acting Executive Director

Ms. Fisher gave a historical overview of the origin and evolution of the President’s Council:

- The Council was established in 1956 in response to a study that showed American children were less fit than their European counterparts. The primary objective of the Council was to create public awareness about the importance of physical fitness, especially for youth.
- The Kennedy Administration expanded the scope of the Council to encompass all age groups. The Council created a national publicity campaign on physical fitness and a curriculum to improve fitness in schools.
- The Johnson Administration further expanded the scope of the Council to incorporate sports (including changing the name of the Council) and established the Presidential Physical Fitness Awards Program, which created goals and incentives for youth in schools.
- The Nixon Administration modified the Council to include appointed members, inclusive of celebrities and famous athletes. This shift was strongly supported by physical educators, health and fitness organizations, and sports professionals.
- The Obama Administration expanded the Council to incorporate nutrition (including changing the name of the Council) and focus on healthy eating and active lifestyles.

At that time, the Council advised the President about opportunities to develop accessible, affordable, and sustainable physical activity, fitness, sports, and nutrition programs.

- The Trump Administration renewed the focus on youth sports, and the Council moved into the Office of Disease Prevention and Health Promotion (ODPHP). ODPHP and the Council released the National Youth Sports Strategy (NYSS), which aimed to unite U.S. youth sports culture around a vision that all youth will have the opportunity, motivation, and access to play sports.

Ms. Fisher then provided details on the Council today:

- The Council is authorized through an Executive Order that comes out every 2 years.
- The September 2021 Executive Order highlights the following priorities:
 - Increase awareness of the benefits of participation in sports, regular physical activity, and good nutrition.
 - Promote private- and public-sector strategies to increase participation in sports, encourage regular physical activity, and improve nutrition.
 - Expand national awareness of the importance of mental health as it relates to physical fitness and nutrition.
- In 2022, the White House Conference on Hunger, Nutrition, and Health released a national strategy that includes [5 pillars](#) to end hunger and increase healthy eating and physical activity by 2030 to reduce diet-related diseases. The 5 pillars are:
 1. Improve food access and affordability
 2. Integrate nutrition and health
 3. Empower all consumers to make and have access to healthy choices
 4. Support physical activity for all
 5. Enhance nutrition and food security research

Ms. Fisher then summarized the responsibilities and parameters of the Council, which are to promote healthy eating and physical activity for everyone, everywhere.

Ms. Fisher invited the moderator and panelists for the Federal Leadership Panel to the stage. RDML Reed introduced the panelists.

Federal Leadership Panel: How the PCSFN Can Amplify Nutrition and Physical Activity Efforts Across the Federal Government

Moderator: RDML Paul Reed, Director of the Office of Disease Prevention and Health Promotion, U.S. Department of Health and Human Services (HHS)

Panelists:

Karen Hacker, Director of the Centers for Disease Control and Prevention's National Center for Chronic Disease Prevention and Health Promotion, HHS

Emily Schwening, Senior Policy Advisor in the Office of the Secretary, U.S. Department of Transportation

Cindy Long, Administrator of the Food and Nutrition Service, U.S. Department of Agriculture

Lauren Imgrund, Associate Director for Partnerships and Civic Engagement, National Park Service

RDML Reed moderated the panel discussion through a Q&A format.

Q: Please share a bit of your professional background, and how the Council can be leveraged to support the physical activity and nutrition-related activities that your respective departments are involved with?

Dr. Hacker:

- Physical activity and nutrition are critical to work happening at CDC's National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP).
- NCCDPHP has divisions focused on diabetes, heart disease, and cancer, as well as nutrition, obesity, and physical activity — which are critical areas to prevention of the other major diseases.
- NCCDPHP has given out over \$800 billion in grants, mostly to state and local health departments, to provide resources to prevent chronic conditions — some grants also have a focus on physical activity or built environment.
- Recently, NCCDPHP has focused on the social determinants of health, including built environment and food environment — which are 2 areas that need to be addressed to reach health equity.
- The Council needs to support and amplify messages being put out to communities around physical activity and nutrition.
- Physical activity is supported by all sides of politics but is not always priority. The question is, how do we get physical activity to always be a priority? The Council can help create interest and keep focus on physical activity and nutrition programs, like Active People, Healthy Nation.

Ms. Schweninger:

- The Department of Transportation (DOT) focuses on infrastructure. Social determinants of health, like built environment, are critical to address physical activity and nutrition issues. Disparities in some communities are based on how communities have been built — and some solutions lie within the community, too.
- As we make investments through the Bipartisan Infrastructure Law, we're thinking critically about where disproportionate impacts are happening — whether these impacts are around safety, physical activity, or health outcomes — and how we can make more opportunities for active transportation.
- This focus will help build opportunities for all to be physically active. This includes thinking of physical activity as all the ways we are moving in the day, like walking, biking, and rolling to everyday destinations — it's more than 30 minutes in the gym.
- There's opportunity for the Council to support cross-sector collaboration — like coordinating across the agencies at the federal level and working with stakeholders (including those from private industry) to make sure everybody sees themselves as part of the conversation.

Ms. Long:

- The Department of Agriculture (USDA) Food and Nutrition Service (FNS) operates all domestic nutrition assistance programs, like SNAP (the Supplemental Nutrition Assistance Program), the National School Lunch Program and School Breakfast Program, and WIC (the Special Supplemental Nutrition Program for Women, Infants, and Children). These programs have historically focused on combating hunger and food insecurity in the U.S.
- Under the Biden-Harris Administration, these programs are expanding to include nutrition security — every American should have the ability to obtain healthy, safe, and affordable food to support a diet that will support optimal health and well-being.
- There are a number of opportunities for the Council to help amplify, build, support, and lift up these nutrition programs, including:
 - **Providing healthy school meals for all**, where schools across the U.S. were able to provide meals for students without concern for applications or concerns about payment. This approach was tested during the COVID-19 pandemic. This approach reduces stigma for children needing the program as well as administrative burden for families and schools, and research shows this approach benefits academic achievement, health, and well-being. Congress opted not to continue the program nationwide, but several states have continued it on their own. There is an opportunity for the Council to lift up this approach.
 - **Improving the nutritional quality of nutrition assistance programs.** For example, USDA has proposed updates to the standards of school lunch — most recently, to reduce added sugars and continuing progress around sodium, fruit, and vegetable consumption. USDA is also making updates to the WIC food package that expands the amounts of fruits and vegetables that WIC families can receive.
 - **Feeding kids in the summer.** Many kids have traditionally not been reached with nutrition assistance in the summer — about 20 percent of children who receive free and reduced-price meals during the school year obtain summer meals. This year, Congress has given 2 tools to address this issue: allowed for EBT (Electronic Benefits Transfer) cards for families who have kids who receive free and reduced-price meals, and an expansion to the existing Summer Food Service Program that allows meals to be delivered to homes.
- USDA looks forward to working with the Council and understanding how the Council can support these nutrition programs.

Ms. Imgrund:

- The National Park Service (NPS) plays a key role in topics discussed today, in promoting health and wellness to all people. NPS has diverse parks, ranging from thousands of acres to small community parks. NPS also has strong partnerships with colleagues in the federal government and communities. When we think about national parks, we might think about people taking a hike or connecting with nature — but parks also provide places for people to have fun and find mental, physical, and spiritual health and well-being.
- Parkland creation in the United States is rooted in public health through actions like the City Beautiful movement, when people were seeking clean air and water and

safe spaces for respite from the stressors of city living. In 2021, NPS celebrated our 100th anniversary of partnership with the U.S. Public Health Service (USPHS). NPS has been working hand in hand with organizations on issues of physical activity and nutrition.

- NPS has also been adapting to focus on current challenges, like the effects of climate change, health disparities, and chronic disease prevention. We know there is a connection with our health and access to outdoors and green space.
- NPS is using a “One Health” approach to improving the health of all the things we work with — including humans, animals, and our environment.
- The NPS program Healthy Parks, Healthy People aims to grow the evidence base and promote national parks as a resource for all people’s physical, mental, and social well-being. NPS is also part of the White House National Strategy on Hunger, Nutrition, and Health, which has identified the importance of investing in parks as a way to increase equitable access to the outdoors and connect people with physical outdoor opportunities.
- NPS is excited to work with the Council and would like the Council to think about adding nature and health as an important priority.
- NPS is more than just physical national parks. NPS invests in communities and can help the Council make connections. The Council can also help NPS make new connections with organizations who want to hear the message of the importance of outdoor recreation, nature-based play, and nature-based connections for physical and mental health.

Q: How does CDC collaborate with other federal partners to support the National Strategy on Hunger, Nutrition, and Health, particularly to make spaces easier and safer for physical activity?

Dr. Hacker:

- The work of all agencies is important to get to the direction we want to go. CDC collaborates with a lot of different agencies, including the U.S. Department of Housing and Urban Development (HUD), the Centers for Medicare and Medicaid Services (CMS), the Health Resources and Services Administration (HRSA), and DOT.
- One thing that happens is blending and braiding — or getting the work done with more than 1 grant. You’re always aware of what the next opportunity is. One example is the state of Louisiana worked with DOT, such that 15 predominantly Black counties were able to apply for transportation dollars. That may seem relatively simple — but is not the typical thing in the health, housing, or transportation sector. You don’t always know what’s going on in other grants or who to partner with to bring resources in and use them collaboratively. One of the most exciting things is to see coalitions at the neighborhood and community levels pull together and bring the force of collective action to get work done.
- We’ve recently funded a variety of planning grants focused on social determinants of health, like built environment and food access — there’s a lot of interest. But a health department can’t do it by themselves. They need local transportation folks, economic development people, local hospitals, businesses, and the private sector to come together and focus their attention on this agenda. The Council can support

that.

Q: What do you see as the greatest opportunity within the DOT to influence the way environments are benefiting physical activity?

Ms. Schweningen:

- One major focus of DOT is safety across different modes of transportation and, as it relates to this conversation, an enormous focus on roadway safety. Over the last several years, we've been seeing a terrible increase in serious injuries and fatalities on roadways. For that reason, we developed the National Roadway Safety Strategy and the vision of zero roadway fatalities. We're using the safe system approach to build out redundancies and safety protective measures. When roadways aren't safe, people will not send their kids to school down the sidewalk or walk across the road to get groceries — these are critical issues for us at DOT to address as a starting point for making communities more walkable, bikeable, and rollable.
- Through the Bipartisan Infrastructure Law, there is support and investment in safety, including Safe Streets and Roads for All — which has a lot of comprehensive safety action planning, including stakeholder engagement and committee planning at the local level. We want to create and support this coordination.
- We have other programs that are invested in building infrastructure out and using criteria around what places should get resources and support first, like places that are disproportionately impacted by the safety crisis, have historically carried a larger portion of the burden, or where fatality rates are higher — which tend to be Black and Brown communities, rural communities, and people who are walking, biking, or rolling.
- We're being strategic, designing programs and policies like the Bipartisan Infrastructure Law with those considerations in mind so we can support with further investment active transportation and a mode shift that will benefit all of us in many ways — like environmental impacts, economic benefits, or health benefits.
- We're clear on coordination across agencies. We're looking at ways we can support local governments and communities. And not just DOT — but to coordinate across different programs, like providing technical assistance to help communities better understand how to access available funds, how to combine those funds, and how transportation projects may result in benefits to physical activity or nutrition goals.
- It's really thinking clearly about the importance of coordination at the local, regional, and state levels and facilitating those conversations. I would emphasize the need to be intentional around how we use and develop land.

Q: Can you elaborate on how the Council can help reach schools and communities to expand on the benefit and strategic advantage that school meals play?

Ms. Long:

- The Council can first help spread the word that school meals are healthy and delicious. People don't necessarily have that image of school lunch. It's important to help people understand things have changed since their youth. For example, when visiting a school, posting a picture of the lunch and how kids are enjoying it, lifting up innovative things schools are doing to make healthy connections between kids

and food, and innovative nutrition education. There's a lot of good things going on — it's important to get the word out, in whatever ways you have available.

- The Council can also lift the connection between good nutrition and fitness, particularly sports. Sports is a really big motivator for kids to focus on healthy eating.
- There are also opportunities at USDA that Council members can help spotlight. For example, USDA has made a \$100 million investment in the Healthy Meals initiative, which includes a variety of activities to support schools in serving healthy meals and having overall environments that support nutrition. USDA is making grants for small and rural schools who need help revamping their programs.
- USDA is also instituting this fall a recognition program to lift up and recognize schools that are meeting high standards or who have come through barriers and are achieving progress. USDA is investing in projects to support the school meals marketplace, and make sure that schools who are looking for healthy foods can find them.
- USDA is also planning summits and events to lift up all this work.
- All this work provides opportunities or places where Council members might have opportunities to engage and help recognize important changes to the nutrition landscape.

Q: Can you elaborate on what the National Park Service's greatest strength is in executing on the goals outlined in the National Strategy on Hunger, Nutrition, and Health and how the Council can play to that?

Ms. Imgrund:

- NPS has a strong history of promoting, improving, and protecting health and well-being and is recognized for that with federal and external partners. The biggest strength NPS brings is being "America's backyard" in the investments we make in communities and the park system that reaches so many people.
- NPS has programs that extend these benefits to thousands of communities to support people in their healthy lifestyles.
- NPS staff are a treasure of people who are wonderful at delivering messages and sharing critical knowledge in curriculums, the importance of our natural environment, the importance of STEM (science, technology, engineering, and math), social science, and health and wellness.
- NPS is uniquely positioned to extend the message around healthy eating and physical activity through our work and connections with the public.
- NPS has been able to provide timely and relevant messaging and reach people where they are with detailed information, most recently related to COVID-19 issues. We can continue to do this with the Council around physical activity and the connection to the outdoors.
- NPS also works with communities in planning, design, and community capacity development and partners with DOT on helping implement designs in communities.
- NPS implements and funds, through state partners, close-to-home recreation like community parks.
- NPS is able to reach everyone. The Council can use NPS to carry messaging around physical activity and nutrition and share ways for NPS to carry the message.

RDML Reed asked if any Council members had questions for the panelists.

Ms. Shaheen asked: What are 1 to 2 issues the Council should be working on?

- **Ms. Schweninger** cited access as a critical issue — and said access is being able to safely get to what you need to have a prosperous, healthy life (like getting to school or the grocery store). She noted that transportation is part of access and said DOT is looking at how transportation projects have historically divided communities and is focusing on rebuilding, reconnecting, and creating access.
- **Dr. Hacker** said resources. She noted that those with access also need actual resources to access. She noted there are communities that don't have resources, which is related to access. She stated that CDC is focused on identifying what is needed to create an environment where health can take place.
- **Ms. Long** said awareness and noted that awareness is complementary to access. She said too many Americans are not aware of resources available from the federal government to support a healthy diet, including USDA programs.
- **Ms. Imgrund** seconded access, particularly access to parks that are convenient to people and convenient to other resources, like healthy food. She noted that walkable communities help people be more physically active and access healthy food.

RDML Reed introduced Shari Ciapka.

National Fitness Foundation Update

Shari Ciapka, Interim Executive Director, National Fitness Foundation

Ms. Ciapka shared her personal story about her experience with the Presidential Fitness Challenge program as a youth and how she came to lead a more active lifestyle later in life.

Ms. Ciapka gave a brief history and overview of the [National Fitness Foundation \(NFF\)](#), which came into being through Public Law 111-332, signed in 2010 by President Obama. NFF has 9 board members appointed by the Secretary of HHS for 6-year terms and 5 ex-officio board members. The NFF mission is dedicated to creating a healthier America, starting with our nation's most valuable asset, our youth. NFF was created by the federal government, but it is a nonpartisan 501(c)(3) entity. It collaborates with the President's Council to identify strategic priorities for furthering the purposes and functions of the Council — and to cultivate private and public partnerships that encourage investments and the achievement of strategic priorities.

Ms. Ciapka introduced the other members of the NFF board:

- Judith Brown Clarke

- Scott Goudeseune
- Elizabeth Kunz
- Boris Lushniak
- Michael McConnell
- Suzanne McCormick
- Damon Phillips
- James Siegal

Ex-officio members (based on federal position):

- ADM Rachel Levine, Assistant Secretary for Health
- Rachel Fisher, Acting Executive Director, President’s Council on Sports, Fitness & Nutrition
- Gary Gibbons, Director, National Heart, Lung, and Blood Institute, National Institutes of Health
- Karen Hacker, Director, National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention (CDC)
- Rochelle Walensky, Director, CDC

Ms. Ciapka noted that the day before this meeting, there was a stakeholder meeting focused on the reformulated Presidential Youth Fitness Program. Specifically, the program has evolved from being performance-based to a health-focused assessment. In addition to youth education and motivation, the program focuses on providing training and support to PE teachers. Over 75 organizations attended the stakeholder meeting, and the focus was on 3 key areas: accessibility, scalability, and awareness.

In closing, Ms. Ciapka emphasized that she would like to have a strong collaboration with the Council and offered to serve as the Council’s “megaphone” in relaying messages. Ms. Ciapka congratulated the Council members on their appointments.

Break

Meet the Council

President’s Council Members

Council members gave brief introductions and shared the unique perspectives that they bring to the Council.

- **Mr. Andrés** introduced himself as a cook that “feeds the few” and over his career has been trying to be a cook that feeds “the many.” His experience has been that one small company like his restaurant could, through partnerships and one small decision or action, find ways to improve communities.

- **Dr. Gracia** is President and CEO of Trust for America’s Health. She spoke to the perspective she brings to the Council, which is one of public health and how to help improve the health of communities and the population. She noted her passion for health equity, as her parents were immigrants from Haiti who immigrated for greater opportunities for the family. She sees an opportunity for the Council to accelerate and address access to resources so everyone has the opportunity to be as healthy as possible.
- **Ms. Meyers Taylor** is an Olympic medalist in bobsledding. She spoke to the perspective she brings to the Council from her experience working with the Women’s Sports Foundation for many years to promote access to sports and fitness for all women and girls. She noted that she is also the mother to 2 disabled sons and is interested in providing opportunities for accessibility, particularly around fitness and sports (including what accessibility looks like for winter sports).
- **Ms. Ham** is the President of Food Lion, a local grocer operating 1,108 stores in 10 states. She said Food Lion’s passion is nourishing customers and setting them up for success in life. She spoke about Food Lion “meet[ing] the customers where they are” — which also means knowing the struggles with understanding awareness and education around nutrition. Food Lion’s platform Food Lion Feeds works to feed people in need and provide them with ways to nourish their families.
- **Ms. O’Toole** is the CEO of Second Harvest Heartland, one of the largest food banks in the Twin Cities in Minnesota, which is part of the Feeding America network. She said Second Harvest Heartland has distributed more than 130 million pounds of food this year, invests millions of dollars in SNAP outreach and enrollment, and offers a prepared meals program called Kitchen Coalition. She said Second Harvest Heartland was one of the first food banks in its network to adopt what it calls “Moonshot,” related to the President’s goal to end hunger by 2030. Ms. O’Toole noted Minnesota has some of the worst racial disparities and said Second Harvest Heartland is committed to doing work to address disparities, including raising awareness and resources.
- **Mr. Garces** introduced himself as an entrepreneur, Iron Chef, James Beard award winner, and cook. He spoke to creating the Garces Foundation 11 years ago in Philadelphia and said the foundation serves the underserved immigrant community with 3 main programs: community health days, food pantry programs, and English classes. He noted how these programs tie in to the work the Council is doing as a whole.
- **Mr. Shore** introduced himself as the founder and Executive Chair of Share Our Strength, which runs the No Kid Hungry Campaign, a campaign that focuses on childhood hunger and nutrition. He noted that hunger and nutrition are solvable problems, as the United States has no shortage of food, healthy food, and food programs — but rather, there are many barriers that stand between these programs and the people who need them. He spoke about No Kid Hungry knocking down those barriers and helping people understand that “it takes more than food to fight

hunger,” including getting to the root causes of why families deal with hunger.

- **Mr. Feinman** is the CEO of InnerCity Weightlifting. He described his perspective as one where sports and fitness can “flip power dynamics,” “bridge social capital” and create “authentic connection.” He noted that helping people connect and understand each other can shift focus to centering another person’s truth.
- **Ms. Catchings** is a former WNBA player and gold medalist. She shared that she and her sister co-founded Catch the Stars Foundation, which focuses on underprivileged youth ages 7 to 18 years and provides programming related to fitness, literacy, and youth empowerment. She said she also owns Tea’s Me Café. She noted her passion for making sure children, especially in underrepresented areas and Black and Brown communities, have access to what they need.
- **Ms. Ng** is the General Manager for the Miami Marlins. She noted that sports and fitness can be foundational pillars to achieving a sense of self-worth, self-esteem, belonging, and accomplishment. She shared her own experience as an athlete and being able to achieve those senses. She said her unique perspective is related to seeing athletes and sports participants at elite levels and working in the Commissioner’s office with the goal of getting children to participate.
- **Dr. Okanlami** noted that people call him Dr. O for short. He said he is a physician, athlete, and disability advocate. He shared that after being an All-American, captain, and athlete at Stanford University, he experienced a spinal cord injury at Yale University that paralyzed him from the chest down while he was in his orthopedic surgery residency. He spoke about how this showed him how inaccessible the world is for people living with disabilities. He reflected on knowing “what sport had provided [him] throughout [his] life,” which is “more than just playing sport,” and how inaccessibility (particularly around sports) leads to exacerbated health disparities for the disability community. He said that as a physician, he tries to ensure the health system, and all systems, are inclusive of disability.
- **Dr. Campos Rivera** is a professor at the University of Puerto Rico and a pediatrician, neonatologist, and obesity medicine specialist. She is also the founder and Director of the Center for Community Outreach for Health Across the Lifespan, which assists communities in performing participatory research to develop service programs and currently is implementing a program that teaches health agency to students. Dr. Campos Rivera shared that she is celebrating 10 years of breast cancer treatment and is the mother of a neurodiverse child. She shared that after getting a diagnosis of cancer, her first action was to improve her physical fitness — and upon doing this through a family-based program, her child showed improved academic achievement. She hopes to promote this connection for all children.
- **Ms. Flournoy** has a background in public policy. She shared that her past experiences have given her the opportunity to focus on the power of working together and showed her that problems can be overcome if we can work together.

- **Mr. Ingelsby** is the Head Coach for the University of Delaware’s basketball team. He spoke to his experience in college athletics for 20+ years, coaching 18- to 22-year-old men. He shared his excitement in amplifying messaging with youth, including talking about nutrition and how nutrition fuels you.
- **Mr. Jacobs** is a member of the Osage Nation of Northeast Oklahoma and is the co-founder and co-owner of Tocabe, an American Indian eatery, and Tocabe Indigenous Marketplace — which focuses on Native cuisine and sharing Native culture. He shared his passion for and perspective of commitment to accessibility and supply chain development to ensure community members have access to both foods they need and those that are traditionally, culturally, and spiritually meaningful and relevant.
- **Dr. Mozaffarian** is a cardiologist, has a doctorate in public health, and has led the Tufts School of Nutrition for the past 10 years. Currently, he is launching a new Food is Medicine institute at Tufts. He shared that his work and career have focused on nutrition as one of the big solutions to metabolic health, health equity, and other issues, and he spoke to the need for systems solutions, including policy change, rather than focusing on individual blame. He spoke to food being the “biggest solution” for health, health equity, lower health care spending, and more.
- **Ms. Shaheen** is the mother of a daughter diagnosed with type 1 diabetes at age 8. She said she sees type 1 diabetes as a “diet-impacted disease” since everything her daughter eats impacts her body immediately. Shaheen said her daughter’s disease inspired her to launch Good Measures, which brings “food is medicine solutions to life” and uses technology to provide personalized and real-time nutrition decisions. She also reflected on how access is important and how mental health and physical health go together.
- **Dr. Martinez-Bianchi** introduced herself as an immigrant, a family doctor, and the Director of Health Equity at Duke University’s Department of Family Medicine and Community Health. She shared how family medicine has been her vehicle for social justice and said taking care of people of all ages has driven her to the “intersectional space between primary care and public health.” She noted her observations of patients with impacts from nutrition, physical fitness, and other intersectional and structural barriers and said she sees an approach that health care can use for multi-sector collaboration.
- **Ms. Haynes** is a behavioral and social intervention evaluator and a former ballet dancer and serves as Executive Director at the Dance Institute of Washington. She spoke about the potential of the dance industry to deliver on goals related to nutrition and physical activity. She spoke to how populations facing health disparities are actually overrepresented in the dance industry. She mentioned the recent gamification of dance on the TikTok platform and what that is doing for dance and fitness.
- **Mr. Howard** is a former Major League Baseball player with the Philadelphia Phillies.

He hopes to bring an athlete's perspective to the discussion, particularly around the important relationships between physical fitness, nutrition, and mental health.

- **Ms. Izquierdo** is the Director of Advocacy, Neighbors Engagement at Feeding America and was the 2022 Global Citizen Prize award winner for work related to demanding equity. She also noted she's a proud mom, Afro-Latina, and someone with a personal journey related to hunger that she has shared publicly to center and uplift voices of people with lived experience and expertise in poverty and food insecurity. She said her goal is to bring equity in all spaces she is part of and to represent communities with lived experience to address their social determinants of health. She shared her aim to inspire others to share their stories to impact systemic change in order to give communities power over decisions usually made for them. She said she wants to address things like nutrition, accessibility, affordability, and resources to avoid being food insecure.
- **Ms. Stockwell** introduced herself as an above-the-knee amputee, having lost her leg almost 20 years ago while serving in the military in Iraq. She also co-founded a nonprofit called Dare2tri, which brings athletes with physical disabilities into sports. She spoke to the importance and positive impact of sports. She noted she's a mom with 2 kids and emphasized the importance of knowing her kids will get a nutritious meal at school.

Council Member Deliberation

President's Council Members

Ms. Fisher moderated the deliberation through a Q&A format.

Q: How would you as Council members like to use the platform of the Council to inspire communities to create supportive environments that foster access to healthy food and physical activity?

- **Ms. Meyers Taylor** noted that the Council can contribute to awareness by taking information back to home communities and broadcasting it out through any available resources.
- **Mr. Shore** asked how much Council members should be thinking of this work as individuals with their own platforms versus as a Council that works as a group — he shared examples of group work, like issuing statements, writing op-eds, or visiting communities.
- **Ms. Fisher** confirmed there are many opportunities for Council members to work together, including using individual expertise with audiences that individual Council members reach or communities they're in. She noted that the federal government develops many programs and policies that partners, like Council members, can help amplify.
- **Mr. Andrés** emphasized the value of telling personal stories and being the voices of

people with the same stories who don't have the same reach as Council members. He reflected on joining an organization at 23 years old, visiting communities, and making food with leftovers — a lesson from his mom — as a way to share this knowledge with communities so they, too, could learn how to cook. He reiterated the importance of storytelling and amplifying the stories of others.

- **Dr. Martinez-Bianchi** said that during the pandemic, there were severe inequities and also opportunities for intersectoral collaborations. She reflected on her work as a Latina working hard to get the Latina community vaccinated and tested for COVID-19 in North Carolina and discovering the wealth of knowledge the community had about taking care of themselves and each other — like food drives and cooking for fundraisers to help those who were sick. She spoke to the opportunity of working in communities, seeing what they're doing, and looking at immigrant foods that don't normally make it into the "mainstream" but are often much healthier. She also mentioned the people who are unseen or unheard in society and concerns about whether anyone is listening to their problems — she noted a need to hear from these voices what they need instead of telling them what they need.
- **Ms. Shaheen** acknowledged the tension between wanting to embrace a collective responsibility to help people be healthy and figuring out how to practically accomplish that. She emphasized that language may be an opportunity to be bold and said adopting language that reflects what's really going on and doesn't leave people out is important for breaking down stigma and not reinforcing misinformation — for example, stigma around the word "diabetes." She added that the Council needs to model these changes — but said she is still considering what else the Council can do to "really make a difference."
- **Ms. Catchings** emphasized the importance of simplicity and building partnerships. She talked through an example of the Council developing smaller groups that take on different issues or parts of a problem depending on Council members' interests.
- **Dr. Gracia** reflected on **Dr. Martinez-Bianchi's** point of having emerged from the COVID-19 pandemic, when communities enhanced or built partnerships. She noted it's a vulnerable point in time where communities will continue these partnerships, or, due to a lack of resources and access, may not be able to. She spoke to wanting to know how the Council can help support and strengthen communities to be resilient and engage in multisector engagement — especially to plan for future health threats. She noted this is a critical moment for the Council to have a role in helping to support and address long-standing inequities that existed before the pandemic.
- **Ms. Stockwell** suggested that the Council set metrics to measure its success and outline what it means for the Council to be "successful."
- **Ms. Flournoy** acknowledged that there are many parts that contribute to the larger problem related to nutrition and physical activity that the Council wants to address.

She suggested that addressing smaller components around these issues may be effective — but also acknowledged that focusing on several smaller issues impacts energy and resources.

- **Dr. Mozaffarian** noted that he has been considering the points **Ms. Stockwell** and **Ms. Flournoy** shared. He said that though the Council has been around “in one form or another for 77 years,” physical activity and nutrition are “worse” — and said that therefore, the Council has not achieved “full success.” He suggested the Council “step back” and review what did and didn’t work over the years. He also noted an opportunity to lean into the current “moment” — and consider how to use the reality of the COVID-19 pandemic having highlighted the broken food and health systems and existing health disparities, as well as the commitment of the Biden-Harris Administration.
- **Mr. Feinman** noted that people don’t choose to be unhealthy but instead, things get in the way of being healthy. He suggested the Council seek to understand what those barriers are and find partners and resources to address them. He also noted a need to make the topics of nutrition and physical activity relevant to communities by keeping in mind what is feasible for them. He said that how the Council defines success needs to be adaptable to different communities.
- **Ms. O’Toole** reminded members that the Council has 2 years to implement ideas, which means the Council has to “hustle.” She shared the opportunity of accelerating existing initiatives instead of generating a “new body of work.”
- **Ms. Ham** agreed with **Ms. O’Toole’s** comments and reiterated the need to break complex problems (like nutrition and physical activity) into pieces, choosing the focus and building off that momentum. She also noted that amplifying existing initiatives would give the Council time and space to build on successes.
- **Dr. Campos Rivera** mentioned that the Council has been discussing “awareness” — which includes the Council being aware that not all food security programs in the United States are implemented the same way for everyone. She also noted her appreciation that dance was brought up as a type of physical activity, and she said dance also historically has been a way for communities to come together to heal and recover from disasters.
- **Mr. Jacobs** shared that communities the Council members represent — often underrepresented and disadvantaged communities — often feel unheard and like they don’t have a voice. He reflected on the need for community members to be “the voice” and Council members “the ears...and the megaphone” that project community voices, particularly around community needs, desires, and wants.
- **Dr. Okanlami** shared that “success” is dependent on how Council members work with each other and what they do together. He spoke about Council members needing to identify spaces and places to influence — and support one another with resources. He referenced analogies of a track team’s success relying on all

athletes' individual events and the collaborative approach that family physicians, like himself, and specialists have around a patient's health.

Q: How can Council members share communities' stories in a way that resonates with audiences and is impactful and meaningful?

- **Ms. Izquierdo** noted her passion for ethical engagement with communities who have been marginalized or face disparities. She shared that an important part of representing communities is relationship-building — as a way to ensure that communities trust Council members, that stories stay true to their intention, and that community members feel their input has been heard and implemented. She shared the importance of the Council showing community members that feedback has been considered and that the Council is empathetic and compassionate. She also emphasized validating community members' emotions and experiences, including acknowledging historical barriers. She spoke to a need for community members to be “cornerstones” of this work, which may inspire others in the community, too.
- **Dr. Mozaffarian** questioned the audience of the Council's work being limited to communities and the public — and said a main audience should be government, private industry leaders, nonprofit leaders, and the media, who have resources and decision-making power. He noted this isn't the Council's traditional approach and called upon the “successful model” of the President's Council of Advisors on Science and Technology, whose main task is communicating to the government. He suggested the Council consider including the above audiences.
- **Ms. Haynes** said there are many assumptions built into previous Council discussions — like people's lack of awareness about the importance of physical activity or nutrition — when there are many other factors that drive people's decisions and priorities. She suggested the Council be intentional about understanding what's driving decisions and behaviors. She noted that leveraging what matters to people and what drives their decisions in messaging can be impactful.
- **Dr. Martinez-Bianchi** noted that the Council is encountering a “polarized world” where “almost half” of the population won't do what the government says because it's the government saying it. She questioned how the government can share information or storytelling on the impact of things like nutrition rather than a “prescription.” She also noted the challenge of the government or Council “prescribing” things (like physical activity) without acknowledging how a lack of resources, like limited safe spaces, makes that difficult. She noted her appreciation for previous discussions about walkable and safe cities and said that if the government or the Council is sharing messaging around things like physical activity, the message needs to be paired with access.
- **Ms. Catchings** reflected on **Dr. Martinez-Bianchi's** point and said Council members are “on the ground” and have access to networks that can help

multiply messaging. She noted that once the Council figures out what to communicate, Council members' networks can spread and amplify the message, building on relationships that already exist.

- **Ms. Shaheen** asked **Ms. Fisher** what other assets the Council has historically been invested in (and referenced the Presidential Youth Fitness Program as an example) and what expectations or desires partners have to “push” assets that already exist.
- **Ms. Fisher** noted that members have diverse networks from being on the ground that the federal government doesn't have, as well as the ability to share messages in ways the government cannot. She noted that consistent messaging is imperative and said previous Councils have elevated messaging in different ways and that messaging has evolved — for example, social media wasn't available for all past Councils but is available now. She said the Council needs to collectively think about what message to share, how to share it, and how to use members' networks and partners to disseminate the message.
- **Dr. Gracia** noted that Council members can be messengers and work with other trusted messengers like community leaders and faith-based leaders to amplify the Council's influence and reach — and that the Council doesn't have to be “the voice.” She reflected on the importance of the Council not replacing or displacing community voices or existing assets. But she also noted that there may be times when the Council can be the voice — particularly in communities that haven't had power. She noted the need for the Council to understand its role.
- **Ms. O'Toole** asked **Ms. Fisher** if there is anything the current Council can learn from past Councils about how to organize or structure the Council.
- **Ms. Fisher** reiterated that every Council is different and said the available time and energy of Council members makes a difference. She agreed with previous points that breaking the Council into smaller groups with focus areas may be an effective approach.
- **Dr. Okanlami** spoke to the opportunity of disseminating financial resources, like grants, to communities that Council members belong to. He reflected that “it's hard to create change when you don't have finances” — and noted that communities not having money to implement and sustain programs continues to perpetuate inequities. He said the Council could potentially be a conduit between financial resources and communities, which could empower communities to do what they need. He also asked whether the Council has ever had an endowment.
- **Ms. Fisher** responded by mentioning the role of the National Fitness Foundation coming in to support the Council. She noted that past Councils have given awards to recognize individuals and communities that have done good work. She followed up with a question about how the Council can recognize

community work.

- **Mr. Andrés** noted that “[moving] the needle” requires dedicating time. He shared the example of Arnold Schwarzenegger visiting every state in the United States (when he served as Chair of the Council), which “move[d] the needle.” He said that the Council’s challenge and opportunity is to empower Americans who have no “voice.” He reflected that one role of the Council is to close the gap between what’s happening on the ground and what’s happening in Congress and the White House (in terms of policy decisions). He also offered that the Council needs to understand that “not everything is possible” but said the Council should move ahead with feasible goals. Last, he noted the need for Council members to work together and said success will be determined by how much passion, action, and connections Council members bring.

Q: How can the Council lift up or recognize communities that are doing “the work”?

- **Mr. Andrés** reflected on the need to recognize people who are forgotten or voiceless. He gave a story of having gotten help to lose weight and questioned how people without support can move forward. He said all Americans should have ways to achieve physical activity goals.
- **Ms. Izquierdo** echoed **Ms. Catchings’** idea of having Council subgroups that focus on different topics and spoke to wanting these subgroups to be connected.
- **Ms. Haynes** reflected on the importance of the Council using messaging and language that is considerate of the currency, prioritization, and perspectives of priority audiences. She also noted how discussions have mentioned people skipping physical education in school — but she noted that they are not skipping school dances. She also responded to **Dr. Okanlami’s** previous point about the need to pair awards and recognition with resources that can be used for behaviors.
- **Dr. Martinez-Bianchi** reflected on how easy it is for providers to prescribe medicine through electronic prescriptions — and shared a potential recommendation to make it just as easy for health systems to prescribe connections with community-based organizations that invest in addressing social determinants of health-related needs. She shared that current attempts to do this are “clunky” due to a lack of funding. She gave the example of being able to give an electronic prescription to visit a grocery store where patients can buy food to manage health issues (like diabetes).
- **Dr. Mozaffarian** proposed 2 actions for the Council to consider. First would be creating a subcommittee that highlights community success in private-sector entrepreneurship and innovation and connecting those successes to messaging to federal agencies or policies that can provide support. He noted that he had previously co-written a task force report for the White House conference that included this approach. Second, he mentioned an opportunity for the Council to

focus on identifying barriers and opportunities for advancing the vision behind Food is Medicine and following the “massive national trend” of Food is Medicine.

- **Ms. Meyers Taylor** noted the importance of how the Council, and the general public, defines and uses words related to physical activity and nutrition — and questioned whether people “on the ground” know what “Food is Medicine” means. She noted that even elite athletes — who have access to nutritionists and resources — don’t know what good nutrition is and said the Council cannot expect the general public to have an understanding of what good nutrition is. She also noted how cultural differences can impact understanding of good nutrition.
- **Dr. Martinez-Bianchi** pointed out how hard it is to refer patients to nutritionists because of waiting lists, incompatible insurance, or patients being uninsured.
- **Ms. Catchings** brought up **Mr. Andres’** earlier point about Arnold Schwarzenegger visiting all 50 states and asked about the feasibility of dividing the current Council members to visit each state. She suggested that a 1-day workshop could be an option.
- **Ms. O’Toole** agreed with the sentiment that there are a lot of things that Council members can do together in different areas across the United States.
- **Dr. Campos Rivera** noted that U.S. territories should also be included in any Council efforts to reach all 50 states.
- **Mr. Jacobs** reflected that giving awards and recognitions may be a feasible way to reach all 50 states. He also spoke to the Council’s increasing ability to engage with people in other ways, like social media. He mentioned previous discussions about community storytelling and how the Council can amplify stories and noted that amplification can be empowering. He also said developing and amplifying stories may be seen as an award in itself. He noted that support and empowerment of communities can create change and inspire other communities.
- **Ms. Shaheen** spoke about the Council meeting people “where they are.” She shared an example of being on social media, like TikTok or Instagram.
- **Dr. Gracia** noted a need to continue discussions about access and accessibility. She noted that the National Strategy on Hunger, Nutrition, and Health has many recommendations focused on addressing access and equity through policy and systemic changes — and said that with her organization, she hopes to inform and raise awareness among policymakers to help create conditions in communities for equitable access to safe and convenient physical activity and healthy nutrition. She noted that the Council has power to elevate the importance of access and equity by raising awareness of these being systemic issues. She posed the need to connect with community members and hold

policymakers accountable in ensuring their communities are healthy.

Closing Remarks

José Andrés, PCSFN Co-Chair

Rachel Fisher, PCSFN Designated Federal Official and Acting Executive Director

Mr. Andrés noted that the future of a nation depends on how well it feeds its people. This includes not just nutrition but also feeding “the hopes of the people.” He encouraged the President’s Council to be persistent and creative about new ideas but also to consider ideas from the past. He emphasized that Council members are the voice of the people and are able to elevate that voice to the President and other decision-makers. He thanked Ms. Fisher and the Council for their support in this effort.

Ms. Fisher expressed her gratitude for the expertise, passion, and wisdom of the Council. She acknowledged the request for working through subcommittees as a key takeaway and will work to capitalize on the momentum provided during today’s meeting.

Adjourn

Rachel Fisher, PCSFN Designated Federal Official and Acting Executive Director

Ms. Fisher adjourned the meeting.