

# Washington State SNAP-Ed Needs Assessment

Final Report

September 2019



 **SNAP-Ed**



Supplemental  
Nutrition  
Assistance  
Program

Putting Healthy Food  
Within Reach



## Public Health Centers for Excellence

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# EXECUTIVE SUMMARY

## Background and Purpose

In the fall of 2018, the Public Health Centers for Excellence (Centers for Excellence) was commissioned by the Washington State Department of Social and Health Services SNAP-Ed program to conduct a comprehensive, valid, and data-driven statewide needs assessment of the SNAP-eligible population. This needs assessment is in response to findings from the Federal Fiscal Year (FFY) 2018 Management Evaluation and commitment from the Washington State SNAP-Ed program to ensure that SNAP-Ed activities reflect the needs of the target population. The results of the needs assessment will help guide program planning and evaluation goals and activities for the FFY 2021-2023 multi-year plan.

The purpose of the Washington State SNAP-Ed Needs Assessment was to identify the nutrition, physical activity, and obesity prevention needs of the Washington State SNAP-eligible population and their barriers to accessing healthy food and physical activity. To accomplish this purpose, the Centers for Excellence sought to answer the following questions:

1. What are the socio-demographic, health and environmental characteristics of the SNAP-eligible population in Washington State?
2. What are the barriers to accessing healthy foods and physical activity for the SNAP-eligible population in Washington State?
3. What existing programs and services exist for SNAP-eligible populations in Washington State and to what extent are existing programs and services utilizing best practices?
4. What are community-based suggestions for increasing access to healthy foods and physical activity for the SNAP-eligible population in Washington State?

## METHODOLOGY

The Centers for Excellence utilized the Mobilizing for Action through Planning and Partnerships (MAPP) assessment framework for the design of the needs assessment. MAPP is a strategic planning framework developed by the National Association of County and City Health Officials (NACCHO) in partnership with the Public Health Practice Office and Centers for Disease

Control and Prevention. The assessment phase of the MAPP process is composed of four subcomponents: assessment of community status, assessment of community themes, assessment of the system, and assessment of forces of change.<sup>1</sup>

The Centers for Excellence utilized a mixed-methods approach to complete the needs assessment. This assessment utilized both quantitative and qualitative methods including secondary analysis of public health data, analysis of qualitative data from key-informant interviews, focus groups, and forces of change exercise, analysis of survey data, and geographic information system (GIS) data and mapping. The Centers for Excellence also conducted Latent Class Analysis of selected youth indicators to determine subgroups and develop a model that describes predictive factors of desired food and nutrition, physical activity, and food security outcomes. The Centers for Excellence was responsible for all primary data collection, analysis, and reporting. Primary data collection took place from December 2018 to July 2019.

## RESULTS

### Description of the SNAP-Eligible Population

The SNAP-eligible population live in diverse geographic locations throughout Washington, from densely populated urban centers to remote rural communities. In 2018, an estimated 30% of all SNAP-eligible individuals lived in rural counties, while 70% lived in urban counties. The five counties with proportions of highest eligibility were each considered rural (less than 100 persons per square mile), while the largest number of eligible individuals lived in King County, followed by Pierce and Spokane counties. Geographic locations with limited service include central Washington and the northwest peninsula.

In Washington, adults age 18-24 years old had the highest rate of eligibility (40%). Youth under 6 years of age and between 6-11 years old had high rates of eligibility compared to other age groups. Based on family structure, single mothers and female householders with no husband present had the highest rate of eligibility. American Indian and Alaska Native,

<sup>1</sup>“Mobilizing for Action through Planning and Partnerships (MAPP).” NACCHO, <https://www.naccho.org/programs/public-health-infrastructure/performance-improvement/community-health-assessment/mapp>.

other race, black, and Hispanic individuals had disproportionately higher rates of eligibility than other races or ethnicities.

Nearly one million SNAP-eligible adults in Washington could be considered overweight or obese in 2017. Adults with the highest rate of obesity included American Indian and Alaska Native, other race, Hispanic origin, and individuals with a high school education or lower. In 2018, youth populations with the highest rate of obesity included American Indian or Alaska Native, black, Hispanic origin, and youth whose mothers have lower educational attainment.

In 2017, over 600,000 SNAP-eligible adults in Washington experienced food insecurity. Adults with the highest rate of food insecurity included females, American Indian and Alaska Native, black, Hispanic origin, other race, and individuals with less than a high school education or those with some college. Youth with the highest rates of food insecurity included females, American Indian and Alaska Native, black, Hawaiian or other Pacific Islander, white, other race, and older students (grade 12).

Discussions with the SNAP-eligible community, key-informant interviews with SNAP-Ed staff, and a community partner survey revealed characteristics of the SNAP-eligible population including a high burden caused by busy schedules and conflicting priorities, a need for transportation, a lack of life skills including knowledge of cooking healthy food and shopping on a budget, diverse cultural needs and environments, and persistent financial barriers.

Through Latent Class Analysis, the Centers for Excellence identified subgroups among SNAP-eligible youth in Washington. Subgroups were characterized by a latent construct of structure in their home life and by physical activity. Structure was indicated by eating breakfast, eating dinner with the family, having limited screen time, and getting adequate sleep. The majority (65%) of SNAP-eligible youth belonged to groups with low structure. SNAP-eligible youth in subgroups with low structure had consistently higher rates of obesity and food insecurity regardless of fruit and vegetable consumption and rates of physical activity.

## Priority Intervention Topics

The goal of SNAP-Ed is to improve the likelihood that persons eligible for SNAP will make healthy food choices within a limited budget and choose physically active lifestyles consistent with the current Dietary Guidelines for Americans and the United States Department of Agriculture (USDA) food guidance.<sup>2</sup> Washington SNAP-eligible individuals experience many different food and nutrition and physical activity outcomes compared to the non-eligible populations. This needs assessment revealed several potential priority topics.

Through comparison of adult SNAP-eligible and non-eligible population rates, the assessment identified food insecurity and physical activity as areas of focus. Similarly, the assessment identified youth food insecurity, obesity, and physical activity as primary areas of concern. The Centers for Excellence also conducted a severity analysis on selected indicators that considered change in indicator, differences between the eligible and non-eligible population, demographic disparities, and overall magnitude and determined youth physical activity, youth fruit and vegetable consumption, and adult food insecurity to be topics of highest severity.

Through analysis of demographic disparities, the Centers for Excellence identified the following differences among demographic groups:

- Adult Asian, American Indian and Alaska Native, Hispanic, and adults with lower levels of educational attainment had disproportionately lower rates of physical activity.
- Adults with lower levels of educational attainment had disproportionately lower rates of fruit and vegetable consumption.
- Youth females, black, white, and youth whose mothers had lower levels of educational attainment had disproportionately lower levels of fruit and vegetable consumption.
- Youth females, American Indian and Alaska Native, Asian, black, Hispanic, older youth and youth whose mothers had lower levels of educational attainment had disproportionately lower levels of physical activity.

<sup>2</sup> FY 2019 SNAP-Ed Plan Guidance. <https://snaped.fns.usda.gov/snap/Guidance/FY2019SNAPEdPlanGuidanceFULL.pdf>.

Through Latent Class Analysis, the Centers for Excellence identified variance and patterns among behaviors of SNAP-eligible youth. Specifically:

- Based on variance in behavior, subgroups were distinguished by the latent construct of structure and by physical activity.
- Membership in high structure subgroups is highly predictive of lower rates of food insecurity.
- Membership in high structure subgroups is highly predictive of lower rates of being overweight or obese.
- Membership in high physical activity subgroups is predictive of lower rates of being overweight or obese and food insecure, but less so than membership in high structure subgroups.
- Healthy eating behaviors such as fruit and vegetable consumption or drinking less than two sweet drinks per day were not distinguishing factors in subgroups.

#### Program Process and Community-Based Themes

Through key-informant interviews, focus groups, a community partner survey, and a forces of change assessment, the following themes regarding current SNAP-Ed processes emerged:

- The Washington State SNAP-Ed program values diverse partnerships. Programming is enhanced through increased collaboration.
- SNAP-Ed staff value data and evaluation to improve and sustain high-quality programming.
- Adaptation of approved activities and curriculum is critical to the success of SNAP-Ed programming and supports equity among SNAP-Ed participants.
- SNAP-eligible populations, particularly adults, are burdened with busy schedules and competing priorities. SNAP-Ed programming should reflect these barriers.
- Political uncertainty and change must be addressed when planning SNAP-Ed activities.
- SNAP-Ed programming should reflect the changing technological, physical, and environmental realities of the SNAP-eligible population.

Through focus group discussion with over 230 participants in every SNAP-Ed region in Washington, the following community-based suggestions and themes emerged:

- Social connectivity and accountability influence participation in healthy behaviors.
- SNAP-Ed activities should reflect the needs of the community and planning should include community input.
- Improved communication of available resources will improve participation in activities and assist the SNAP-eligible community in accessing food and nutrition, physical activity, and food security services and resources available.
- Rural audiences face unique situations and programming should reflect this.

## RECOMMENDATIONS

- Where possible, SNAP-Ed program staff should target interventions in locations and among communities with disproportionate rates of poverty and adverse food and nutrition, physical activity, and food security rates. While not always possible to reach communities with disproportionate rates due to resources and geographic barriers, SNAP-Ed program staff should make efforts to understand challenges within their specific community and address needs in a culturally appropriate manner.
- SNAP-Ed program staff should account for differences in the food and nutrition, physical activity, and food security environments of rural communities and develop activities that reflect their situation. Specific concerns related to rural communities include challenges with access and transportation, as well as limited services in their communities.
- SNAP-Ed program staff should consider topics that have high rates of disproportionate outcomes among the target audience and are highly predictive of adverse outcomes such as obesity and food insecurity when developing programming. SNAP-Ed staff may need to consider creative approaches when addressing these topics and should work directly with the target population to determine culturally appropriate and relevant program activities.
- SNAP-Ed program staff should consider activities and education that focus on skill-based whole family health and healthy routine behaviors such as eating breakfast, eating dinner with the family, limiting screen time, and getting sleep. Membership in high structure subgroups is highly predictive of health for the SNAP-Ed population and programming should reflect this whenever possible. Life skills education and training such as cooking classes and physical activity demonstrations support these topics and is well-received by the SNAP-eligible population.
- While not distinguishing factors in subgroups, youth fruit and vegetable consumption rates are consistently low across all Washington youth, including both the eligible and non-eligible population. Healthy eating, including fruit and vegetable consumption for youth is considered a topic of high importance by SNAP-Ed program staff and community partners and should be reinforced through program activities and education. The consistently low rates of fruit and vegetable consumption make this a topic well-tailored to mixed populations (i.e. schools).
- SNAP-Ed program staff should engage the target audience directly in planning appropriate activities. Participatory planning will enhance the effectiveness of interventions and ensure that culturally appropriate activities and messages are being promoted.
- The Washington State SNAP-Ed program should expand program staff's ability to consistently assess and evaluate their program activities to ensure effective and adaptive local programming. Assessment and evaluation capacity at all levels (state to local) is necessary to ensure quality programming by guiding ongoing program planning and improvement based on data and will enhance outside support through communication of successes.
- SNAP-Ed program staff should continue expanding and enhancing partnerships and support collaboration among program units.
- The Washington State SNAP-Ed program should expand and enhance communication of resources and activities. Communication should be culturally appropriate and adaptive (i.e. in different languages).

# PROJECT DESCRIPTION

## Purpose

The purpose of the Washington State SNAP-Ed Needs Assessment was to identify the nutrition, physical activity, and obesity prevention needs of the Washington State SNAP-eligible population and their barriers to accessing healthy food and physical activity. To accomplish this purpose, the Public Health Centers for Excellence sought to answer the following questions:

1. What are the socio-demographic, health and environmental characteristics of the SNAP-eligible population in Washington State?
2. What are the barriers to accessing healthy foods and physical activity for the SNAP-eligible population in Washington State?
3. What existing programs and services exist for SNAP-eligible populations in Washington State and to what extent are existing programs and services utilizing best practices?
4. What are community-based suggestions for increasing access to healthy foods and physical activity for the SNAP-eligible population in Washington State?

## Assessment Framework

The Public Health Centers for Excellence utilized the Mobilizing for Action through Planning and Partnerships (MAPP) assessment framework for the design of the Needs Assessment. MAPP is a strategic planning framework developed by the National Association of County and City Health Officials (NAACHO) in partnership with the Public Health Practice Office and Centers for Disease Control and Prevention. The MAPP assessment framework emphasizes the importance of community input and ownership in planning while utilizing traditional strategic planning concepts. The assessment phase of the MAPP process is composed of four subcomponents: assessment of community status, assessment of community themes, assessment of the system, and assessment of forces of change.<sup>3</sup> More information regarding the MAPP process, including a detailed guide, can be found at [www.NAACHO.org](http://www.NAACHO.org).

## Assessment Scope

This assessment considered all SNAP-eligible populations in Washington (those residents within 185% of the Federal Poverty Level) in all five Washington State SNAP-Ed regions and 39 counties. Target populations include all age (preschool to older adults and seniors) and population (pregnant/breastfeeding, parents, homeless, and food pantry) groups outlined in the SNAP-Ed Guidance.<sup>4</sup> The assessment considered all settings where SNAP-eligible populations live, work, shop, eat, and play.

For ease of readability **key takeaways** and **assessment summaries** are highlighted in blue boxes. Tips and suggestions for usage of the findings are included at the beginning of each section in orange boxes. Where available, tables with corresponding regional supplements are noted with ∞.

<sup>3</sup>"Mobilizing for Action through Planning and Partnerships (MAPP)." NACCHO, <https://www.naccho.org/programs/public-health-infrastructure/performance-improvement/community-health-assessment/mapp>.

<sup>4</sup>FY 2019 SNAP-Ed Plan Guidance. <https://snaped.fns.usda.gov/snaped/Guidance/FY2019SNAPEdPlanGuidanceFULL.pdf>.

# NEEDS ASSESSMENT METHODOLOGY

The Centers for Excellence utilized a mixed-methods approach to complete the needs assessment. This assessment utilized both quantitative and qualitative methods including secondary analysis of public health data, analysis of qualitative data from key-informant interviews, focus groups, and forces of change exercise, analysis of survey data, and GIS data and mapping. The Centers for Excellence was responsible for all primary data collection, analysis, and reporting. Primary data collection took place from December 2018 to July 2019. Data collected and analyzed for the purpose of the assessment are described below.

## Socio-Demographic and Outcome Data

The Centers for Excellence analyzed existing (secondary) data from means-tested state and national sources including the Washington State Healthy Youth Survey (HYS), Behavioral Risk Factor Surveillance System (BRFSS), and American Community Survey (ACS). Additional sources and definitions are listed in appendices and footnotes of this report. Where available, the Centers for Excellence analyzed data at the state, Washington State SNAP-Ed regional, and county levels for comparison. Significance testing utilized chi-square and independent sample t-tests where appropriate. The following is a description of the methodology for the secondary data analysis components of the assessment.

## STATE AND REGIONAL DATA PROFILES

The Centers for Excellence created data profiles on the socio-demographic, health, and environmental characteristics of the SNAP-eligible population at the state and regional level. Data profiles include the presentation and significance analysis of 53 indicators. Where possible, comparisons were made between rates for the SNAP-eligible and non-eligible population, state and regional rates, and regional and county rates. Indicator topics include:

- Eligibility
- Demographics and social characteristics

- Food and nutrition behavior (adult and youth)
- Physical activity behavior (adult and youth)
- Quality of life outcomes and behaviors

Sources for the data profiles included the American Community Survey, Healthy Youth Survey, and Behavioral Risk Factor Surveillance System.

## LATENT CLASS ANALYSIS

To better understand the SNAP-Ed target audience, the Centers for Excellence performed Latent Class Analysis (LCA) on selected indicators to identify subgroups among the SNAP-eligible youth population. LCA is a statistical mixture model that suggests individuals can be divided into subgroups (latent classes) based on an unobserved construct. While true class membership is unknown, it can be inferred from a set of measured variables.<sup>5</sup> The Centers for Excellence utilized LCA to understand how multiple characteristics, behaviors, and risks interact with the target population to better understand profiles of risk and protection for specific behavioral outcomes.

This model can help identify a small set of underlying subgroups characterized by their behaviors (such as dietary habits and physical activity). Each subgroup may differ in their need for SNAP-Ed interventions or differ in their response to selected interventions. This model helps to better understand the target audience in terms of their characteristics (such as individual and family factors) and SNAP-Ed outcomes (such as obesity and food insecurity). SNAP-Ed program staff can use this information to target subpopulations or tailor interventions to specific subpopulations.

<sup>5</sup> Lanza, Stephanie T., and Brittany L. Rhoades. "Latent class analysis: an alternative perspective on subgroup analysis in prevention and treatment." *Prevention Science* 14.2 (2013): 157-168.

## PRIORITY INDICATOR SEVERITY SCORING

To determine priority nutrition, physical activity, and food security topics, the Centers for Excellence created a severity scoring method for selected indicators for the SNAP-eligible population. The analysis was completed at the state and SNAP-Ed region level. Comparable adult and youth indicators were assigned severity scores based on the following criteria:

- Change in indicator (getting better, worse, or staying the same)
- Comparison between eligible and non-eligible (better, worse, same)
- Disparities (differences in rates) between demographic groups
- Estimated magnitude (percent of the population experiencing the issue)

Determination of performance (getting better or worse, trend, demographic disparities) was based on chi-square tests of significance. Indicators with no significant differences were assigned scores of staying the same, same, or no difference.

## Key-Informant Interviews

The Centers for Excellence conducted key-informant interviews with representatives from the Washington State SNAP-Ed Leadership Team (implementing agencies and statewide initiative leaders) and local SNAP-Ed providers in all Washington State SNAP-Ed regions. Between December 2018 and January 2019, researchers conducted 33 interviews with representatives from all implementing agencies, the curriculum and website team, statewide evaluation team, and 33 local providers in 20 counties. Participants for the leadership team interviews were recruited through regular leadership team update discussions. Participants for local provider interviews were recruited through regional implementing agencies. All interviews were conducted over the phone and recorded. Recordings of the interviews were transcribed by a third-party transcription service (Rev.com). Interview topics included:

- Process for selecting program activities and utilizing best practices
- Populations most in need of SNAP-Ed programming
- Topics most in need of addressing with SNAP-Ed programming

- Over/underserved populations (including geography)
- Barriers and opportunities for addressing populations most in need

A complete list of participants and questions can be found in **Appendix A**.

## Community Partner Survey

The Centers for Excellence conducted an electronic survey with representatives of agencies working with or connected to SNAP-Ed programming in Washington from March to April 2019. Participants of the convenience sample survey were recruited through implementing agencies and local SNAP-Ed providers. Eighty participants representing organizations working in all SNAP-Ed settings and with all SNAP-Ed populations completed the survey. The instrument included both close and open-ended questions. A short pilot of the survey with local providers was completed in February 2019 to test the instrument. Survey topics included:

- Background on clients and types of services
- Perceived level of need for SNAP-Ed topics and populations
- Barriers and opportunities for working with the SNAP-eligible population
- Effectiveness of interventions in reaching SNAP-eligible populations

Only background participant frequency data and qualitative responses to open-ended questions were considered in this assessment. A complete list of questions can be found in **Appendix B**.

## Focus Groups

The Centers for Excellence conducted 29 focus groups in 22 counties in all Washington State SNAP-Ed regions with a total of 237 participants. Participants of the focus groups were recruited through local SNAP-Ed providers and contacts. The Centers for Excellence supported recruitment through flyers in English and Spanish. Focus groups were conducted in English, Spanish, and Vietnamese. Centers for Excellence staff conducted all English focus groups and recruited local native language speakers for the Spanish and Vietnamese language focus groups. All focus groups were recorded by the facilitator and transcribed by a third-party transcription service (Rev.com for English and The Spanish Group for Spanish and Vietnamese languages). All participants received a \$15 gift card to a grocery store of their preference to offset opportunity costs such as meals and travel. The Centers for Excellence allowed selection of the location for the gift card in order to respect local preference and need. Focus group participants were also provided a light, healthy snack (usually fruits and vegetables and water). Focus group topics included:

- Physical activity preferences, barriers, motivators
- Healthy eating preferences, barriers, motivators

A complete list of questions can be found in **Appendix C**.

## Qualitative Analysis

All qualitative data were analyzed using Grounded Theory technique. Grounded Theory can be applied when conducting studies in any discipline. Traditionally, Grounded Theory is applied in studies that are qualitative in nature. Principles of Grounded Theory applied in the needs assessment included initial (open) coding, concurrent data collection and analysis, memoing, and focused (selective) coding<sup>6</sup>. Centers for Excellence staff analyzed qualitative data at both the state and Washington State SNAP-Ed region level and identified both question-based and overarching themes. Qualitative analysis was initially conducted independently by two Centers for Excellence staff then reviewed by additional analysts for final themes.

## Geographic Information System Mapping and Analysis

The Centers for Excellence utilized geographic information system (GIS) mapping and analysis to display and analyze geographic location and concentration of the SNAP-eligible population, obesity and food insecurity rates, and SNAP-Ed and nutrition-related service provision and gaps for the SNAP-eligible population. Specific topics include:

- SNAP-eligibility
- Free and reduced lunch rates for school districts
- SNAP-Ed direct and indirect education activities (2018)
- Local services (Community Service Offices, WIC, farmers markets)
- Obesity rates
- Food insecurity rates

All maps are currently available at:

<https://srhd2.maps.arcgis.com/apps/Cascade/index.html?appid=037a54116f09492b9562b403be6f26e2>

## Gaps Assessment

Gaps assessments included the review of current services and programming (both SNAP-Ed and other organizations) and comparing this information to the SNAP-eligible population and geography. To complete the gaps assessment, the Centers for Excellence considered the following information:

- Federal Fiscal Year 2018 program activity information reported in the Program Evaluation and Reporting System (PEARS)
- Basic Food (SNAP) claims data
- GIS mapping of eligibility, services, and resources
- Other nutrition-related programs serving low-income persons

<sup>6</sup> Charmaz, Kathy, and Linda Liska Belgrave. "Grounded theory." The Blackwell encyclopedia of sociology (2007).

# ASSESSMENT OF COMMUNITY STATUS

Assessment of the community status for the Washington State SNAP-eligible population involved the systematic analysis of existing (secondary) data to describe and analyze the socio-demographic, health, and environmental characteristics of the Washington SNAP-eligible population. Sources of the data analyzed include Washington State Healthy Youth Survey (HYS), Behavioral Risk Factor Surveillance System (BRFSS), American Community Survey, and population estimates provided by the Washington State Office of Financial Management (OFM). This section of the assessment will summarize key findings and descriptions of the population from the analysis. A detailed summary of all indicators can be found in the State and Regional Data Profiles companion publication. This section of the assessment consists of three parts:

- Description of the SNAP-eligible population
- Latent class analysis of key indicators and populations
- Priority indicator severity scoring

## Key Takeaways:

- SNAP-eligible individuals live in diverse geographic areas throughout Washington State.
- 30% of all SNAP-eligible individuals live in rural counties.
- 70% of all SNAP-eligible individuals live in urban counties.
- Rural counties, on average, have higher proportions of SNAP-eligibility, but fewer total eligible individuals.

∞ Regional breakdown tables can be found in the appendices.

Information in this section and associated tables and appendices can help state, regional, and local SNAP-Ed providers:

- Determine priority topics for SNAP-Ed interventions.
- Determine priority populations for SNAP-Ed interventions.
- Locate geographic areas with the highest need for SNAP-Ed programming.
- Describe the target audience to the community, policy makers, and other current and potential stakeholders.
- Better understand the target population in terms of interrelated characteristics that can influence outcomes such as obesity and food insecurity.

## Description of the SNAP-Eligible Population

### GEOGRAPHIC LOCATIONS

Washington State is the 18<sup>th</sup> largest state by area and 13<sup>th</sup> largest by population with an estimated 7.4 million residents within 71 thousand square miles.<sup>7,8</sup> Of the 39 counties in Washington, OFM designates 30 counties as rural (less than 100 persons per square mile.)<sup>9</sup> Individuals living in rural counties account for an estimated 22% of the total population, while an estimated 29% of the total population resides in the largest county in the state (King).

<sup>7</sup> US Census Bureau. "2018 National and State Population Estimates." 2018 National and State Population Estimates, 20 Dec. 2018, <https://www.census.gov/newsroom/press-kits/2018/pop-estimates-national-state.html>.

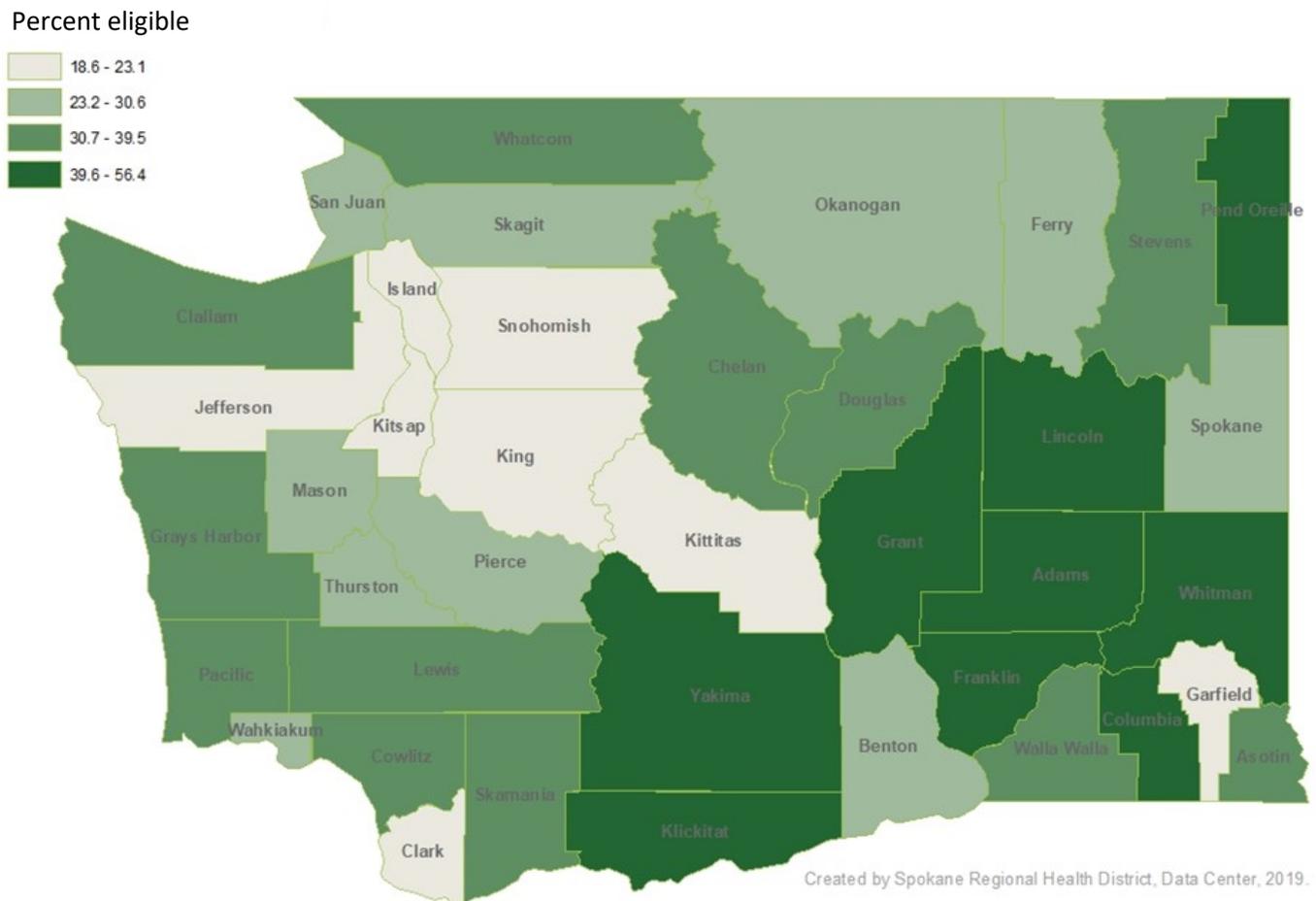
<sup>8</sup> US Census Bureau. "State Area Measurements and Internal Point Coordinates." State Area Measurements and Internal Point Coordinates, 9 Aug. 2018, <https://www.census.gov/geographies/reference-files/2010/geo/state-area.html>.

<sup>9</sup> "Population Density and Land Area Criteria Used for Rural Area." Office of Financial Management, <https://www.ofm.wa.gov/washington-data-research/population-demographics/population-estimates/population-density/population-density-and-land-area-criteria-used-rural-area-assistance-and-other-programs>.

An estimated 1.9 million individuals (26%) in Washington are eligible for SNAP-Ed (<185% FPL). SNAP-eligible individuals living in the 30 rural counties account for an estimated 30% of the Washington State SNAP-eligible population. The proportion of eligible individuals varies greatly between counties (**Figure 1**), with rural counties having, on average, a higher percent of the total population eligible. The five counties with

the highest proportion of SNAP-eligible individuals are rural while three of the five counties with the lowest proportion of SNAP-eligible individuals are urban.

**Figure 1. SNAP-Eligibility by County, ACS 2013-2017**



The Washington State SNAP-Ed Program is divided into 5 geographic regions (Figure 2) across the state that represent between 14% (Regions 2 and 3) and 33% (Region 4) of the total SNAP-eligible population. Table 1 displays state and regional total and SNAP-eligible population estimates and their rural or urban designation. Additional geographic information on the

SNAP-eligible population can be found in the systems assessment section or at:

<https://srhd2.maps.arcgis.com/apps/Cascade/index.html?appid=037a54116f09492b9562b403be6f26e2>

Figure 2. Washington State SNAP-Ed Regions



**Table 1. Population Estimates and SNAP-Eligibility by State, Region, and County and Urban or Rural Designation**

Geography	Region	Rural Status	Total Population	% Eligible	Estimate Eligible
<b>Washington State</b>	WA	N/A	7,427,570	26%	1,931,168
<b>Region 1</b>	1	N/A	864,890	34%	294,063
Adams	1	Rural	20,020	<b>47%</b>	9,409
Chelan	1	Rural	77,800	29%	22,562
Douglas	1	Rural	42,120	34%	14,321
Ferry	1	Rural	7,780	40%	3,112
Grant	1	Rural	97,350	39%	37,967
Lincoln	1	Rural	10,810	28%	3,027
Okanogan	1	Rural	42,490	<b>44%</b>	18,696
Pend Oreille	1	Rural	13,540	33%	4,468
Spokane	1	Urban	507,950	32%	<b>162,544</b>
Stevens	1	Rural	45,030	35%	15,761
<b>Region 2</b>	2	N/A	729,850	36%	262,746
Asotin	2	Rural	22,420	32%	7,174
Benton	2	Urban	197,420	28%	55,278
Columbia	2	Rural	4,150	37%	<b>1,536</b>
Franklin	2	Rural	92,540	36%	33,314
Garfield	2	Rural	2,210	31%	<b>685</b>
Kittitas	2	Rural	45,600	32%	14,592
Walla Walla	2	Rural	61,800	30%	18,540
Whitman	2	Rural	49,210	<b>44%</b>	21,652
Yakima	2	Rural	254,500	<b>44%</b>	111,980
<b>Region 3</b>	3	N/A	1,252,660	22%	275,585
Island	3	Rural	83,860	<b>22%</b>	18,449
San Juan	3	Rural	16,810	<b>23%</b>	3,866
Skagit	3	Rural	126,520	30%	37,956
Snohomish	3	Urban	805,120	<b>19%</b>	152,973
Whatcom	3	Urban	220,350	31%	68,309
<b>Region 4</b>	4	N/A	3,062,420	21%	643,108
King	4	Urban	2,190,200	<b>20%</b>	<b>438,040</b>
Pierce	4	Urban	872,220	25%	<b>218,055</b>
<b>Region 5</b>	5	N/A	1,517,750	27%	409,793
Clallam	5	Rural	75,130	34%	25,544
Clark	5	Urban	479,500	24%	115,080
Cowlitz	5	Rural	107,310	33%	35,412
Grays Harbor	5	Rural	73,610	35%	25,764
Jefferson	5	Rural	31,590	27%	8,529
Kitsap	5	Urban	267,120	<b>21%</b>	56,095
Klickitat	5	Rural	21,980	36%	7,913
Lewis	5	Rural	78,380	35%	27,433
Mason	5	Rural	64,020	33%	21,127
Pacific	5	Rural	21,420	<b>41%</b>	8,782
Skamania	5	Rural	11,890	29%	3,448
Thurston	5	Urban	281,700	24%	67,608
Wahkiakum	5	Rural	4,100	31%	<b>1,271</b>

Source: ACS 2013-2017, Office of Financial Management

## Demographic and Social Characteristics of the Target Population

### Key Takeaways:

- Adults age 18-24 years old had the highest rate among all age groups of eligibility (40%), followed by youth under 6 years of age and youth ages 6-11 years.
- Single mothers (59%), female householders with no husband present, and single fathers had the highest rates of eligibility by household type.
- American Indian and Alaska Native, other race, and Hispanic populations had higher rates of being at or below 125% FPL than all other races or ethnicities.
- Tribal populations experienced diverse rates of household incomes but on average had lower median incomes and received lower levels of SNAP benefits than non-Tribal populations.

In Washington, 40% of adults age 18 to 24 years old are eligible for SNAP, while 36% of youth under 6 years of age and 34% of youth ages 6 to 11 years meet the poverty guidelines for SNAP eligibility. Older adults have a lower rate of eligibility than children and young adults. All eligibility by age group can be seen in **Table 2**.

Differences in SNAP eligibility can be seen by household type in Washington. The highest proportion of SNAP-eligible individuals by household type are single mothers (59%), female householders with no husband present (47%), and single fathers (38%). Fewer married couple families are eligible for SNAP, with 18% of married couple families with children and 8% of married couple families without children under 18 years present qualifying. All eligibility by household type can be seen in **Table 3**.

**Table 2. Percent of the Population Living at or Below 185% of the Federal Poverty Level, by Age Groups, ACS 2013-2017**

	Under 6 years	6 to 11 years	12 to 17 years	18 to 24 years	25 to 34 years	35 to 44 years	45 to 54 years	55 to 64 years	65 to 74 years	75 years and over
WA State	36%	34%	31%	40%	26%	22%	18%	18%	18%	27%
Region 1	48%	46%	38%	49%	38%	30%	23%	23%	22%	31%
Region 2	51%	50%	45%	52%	38%	35%	24%	20%	22%	31%
Region 3	30%	29%	26%	36%	23%	19%	15%	16%	17%	27%
Region 4	28%	28%	26%	37%	21%	17%	16%	16%	17%	25%
Region 5	39%	35%	32%	38%	31%	24%	20%	19%	18%	27%

**Table 3. Percent of Population Living Below 185% of the Poverty Level, by Household Type, ACS 2013-2017**

	WA State	Region 1	Region 2	Region 3	Region 4	Region 5
<b>Married-couple family</b>	<b>12%</b>	<b>18%</b>	<b>19%</b>	<b>10%</b>	<b>10%</b>	<b>13%</b>
<i>With related children of the householder under 18 years</i>	18%	27%	30%	15%	14%	20%
<i>No related children of the householder under 18 years</i>	8%	11%	11%	7%	6%	9%
<b>Male householder, no wife present</b>	<b>31%</b>	<b>41%</b>	<b>43%</b>	<b>23%</b>	<b>26%</b>	<b>32%</b>
<i>With related children of the householder under 18 years</i>	38%	51%	51%	30%	33%	38%
<i>No related children of the householder under 18 years</i>	19%	25%	26%	14%	17%	22%
<b>Female householder, no husband present</b>	<b>47%</b>	<b>54%</b>	<b>59%</b>	<b>45%</b>	<b>41%</b>	<b>50%</b>
<i>With related children of the householder under 18 years</i>	59%	67%	70%	56%	52%	62%
<i>No related children of the householder under 18 years</i>	25%	27%	31%	25%	22%	28%

**Table 4. Basic Food Client Population by Race/ Ethnicity, DSHS 2018**

	Washington State	Region 1	Region 2	Region 3	Region 4	Region 5
<b>Ethnicity</b>						
Hispanic	22%	21%	53%	19%	15%	14%
Not Hispanic or Latino	78%	79%	47%	81%	85%	86%
<b>Race</b>						
White	62%	75%	55%	68%	46%	77%
Black or African American	10%	4%	2%	6%	23%	4%
American Indian and Alaska Native	3%	5%	5%	4%	3%	4%
Asian	7%	1%	1%	5%	9%	2%
Native Hawaiian and Other Pacific Islander	1%	2%	1%	2%	5%	2%
Other or Two or More	15%	13%	36%	15%	15%	10%
<b>Basic Food Clients</b>						
% of Total for Washington State	100%	16%	14%	14%	33%	23%
Number of Clients	1,253,209	200,384	172,809	169,835	419,006	291,175

In Washington, 72% of the population over 5 years old living below the poverty level speak only English, while 15% speak Spanish, and 6% speak Asian and Pacific Island languages. Less than 5% of the population living below the poverty level speak other Indo-European languages or other languages.<sup>10</sup>

To further understand the SNAP-eligible population, the Centers for Excellence analyzed 2018 claims data from all Basic Food (SNAP) clients in Washington. Statewide, Basic

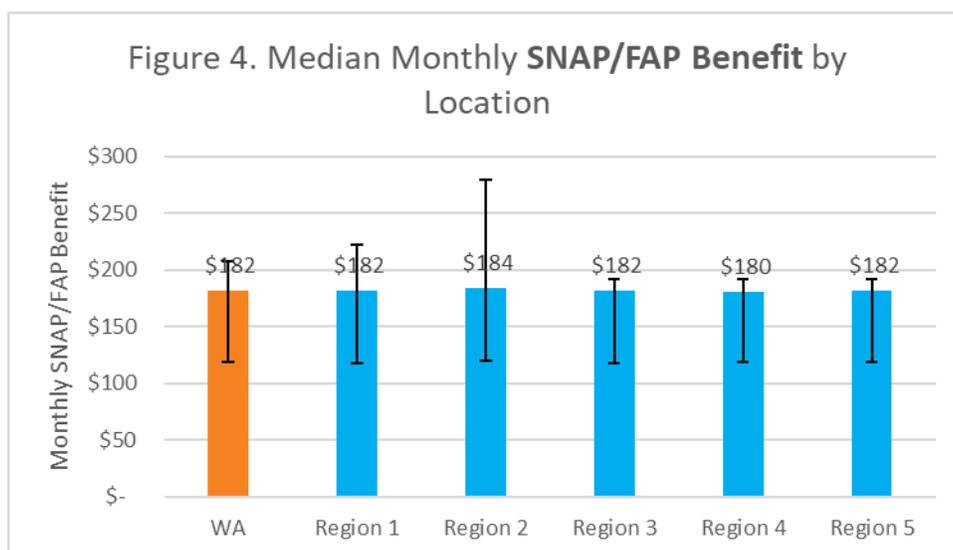
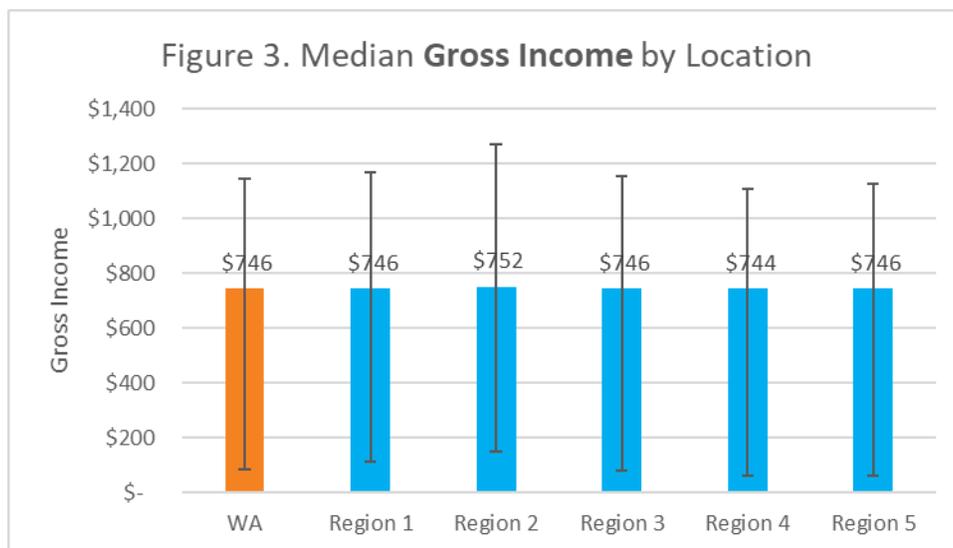
Food clients have similar financial situations. In 2018, the median household gross income (earned and unearned) of Basic Food clients was \$746 per month. Gross income for Basic Food clients ranged from \$0 to \$8,729 per month. **Figure 3** displays median gross income for Washington State and all SNAP-Ed regions. Error bars on the figure represent the upper and lower quartiles (bottom and top 25%) for all client households.

<sup>10</sup>Poverty Status in the Past 12 Months by Age by Language Spoken at Home for the Population 5 Years or Over. 2013-2017 American Community Survey 5-Year Estimates (Accessed August 2019).

All Washington State Basic Food clients received similar monthly SNAP/Food Assistance Program (FAP) benefits. In 2018, the median monthly SNAP/FAP benefit per household was \$182. Monthly benefits ranged from \$0 to \$1,833 depending on qualification and calculated need. For a description of how benefits are calculated, visit <https://www.fns.usda.gov/snap/recipient/eligibility>. **Figure 4** displays median SNAP/FAP benefit for Washington State and all SNAP-Ed regions. Error bars represent the upper and lower quartiles for all client benefits. According to the U.S. Bureau of Labor Statistics Consumer Expenditure Survey, the average

monthly expenditure for food at home in the Western Region of the United States in 2017 was about \$395.<sup>11</sup>

Additional statistics on Washington State SNAP claims data is included in the Systems Assessment portion of this report. A detailed description of selected demographic and social characteristics of the SNAP-eligible population can be found in the Washington State SNAP-Ed Data Profile companion publication.



<sup>11</sup>“Consumer Expenditures Survey (CEX).” U.S. Bureau of Labor Statistics, U.S. Bureau of Labor Statistics, 26 Apr. 2019, <https://www.bls.gov/cex/tables.htm#annual>.

**Table 5. Economic Factors of Tribal Communities in Washington State**

	Total Households	Civilian Population	Median Household Income	Families Below Poverty	All People Below Poverty	Under 18 Years Below Poverty	18 Years and Over Poverty	65 Years and Over Poverty
Chehalis Reservation and Off-Reservation	326	1,016	\$52,917	18%	23%	27%	21%	25%
Colville Reservation and Off-Reservation Trust Land	2,924	7,720	\$38,182	24%	28%	36%	25%	16%
Hoh Indian Reservation and Off-Reservation Trust Land	35	114	\$25,625	37%	41%	63%	36%	0%
Jamestown S'Klallam Reservation Trust Land	9	27	\$58,125		11%		11%	
Kalispel Reservation and Off-Reservation Trust Land	81	210	\$55,313	9%	13%	7%	15%	19%
Lower Elwha Reservation and Off-Reservation Trust Land	235	725	\$28,068	40%	43%	50%	40%	6%
Lummi Reservation	1,842	5,320	\$50,747	17%	22%	28%	20%	15%
Makah Indian Reservation	492	1,545	\$37,500	20%	24%	26%	23%	21%
Muckleshoot Reservation and Off-Reservation Trust Land	1,426	3,929	\$49,514	16%	20%	31%	17%	11%
Nisqually Reservation	226	688	\$54,250	16%	25%	33%	23%	21%
Nooksack Reservation and Off-Reservation Trust Land	308	1,132	\$43,846	23%	30%	37%	27%	14%
Port Gamble Reservation and Off-Reservation Trust Land	176	592	\$38,929	28%	30%	37%	26%	18%
Port Madison Reservation	3,172	7,574	\$63,306	8%	11%	16%	10%	6%
Puyallup Reservation and Off-Reservation Trust Land	17,949	50,588	\$70,355	11%	14%	22%	11%	10%
Quileute Reservation	130	414	\$36,250	32%	31%	29%	33%	22%
Quinalt Reservation	380	1,167	\$35,227	26%	30%	26%	32%	39%
Samish TDSA	17,329	37,397	\$63,007	7%	10%	13%	9%	6%
Sauk-Suiattle Reservation	21	67	\$58,438	14%	16%	33%	7%	0%
Shoalwater Bay Indian Reservation and Off-Reservation Trust Land	39	90	\$39,063	6%	21%	0%	30%	62%
Skokomish Reservation	218	857	\$43,125	21%	27%	30%	26%	6%
Snoqualmie Reservation								
Spokane Reservation and Off-Reservation Trust Land	784	2,145	\$34,250	25%	33%	39%	30%	13%
Suquamish Reservation and Off-Reservation Trust Land	145	573	\$42,188	23%	30%	30%	30%	9%
Stillaguamish Reservation and Off-Reservation Trust Land	10	11						
Swinomish Reservation and Off-Reservation Trust Land	1,282	2,912	\$61,570	6%	10%	13%	9%	5%
Tulalip Reservation and Off-Reservation Trust Land	3,632	9,957	\$74,839	6%	11%	14%	10%	7%
Upper Skagit Reservation	104	304	\$33,400	26%	36%	49%	30%	17%
Yakima Nation Reservation and Off-Reservation Trust Land	8,486	30,920	\$43,322	23%	28%	36%	23%	16%

\*Source: U.S. Census Bureau American Community Survey, My Tribal Area. <https://www.census.gov/tribal/>

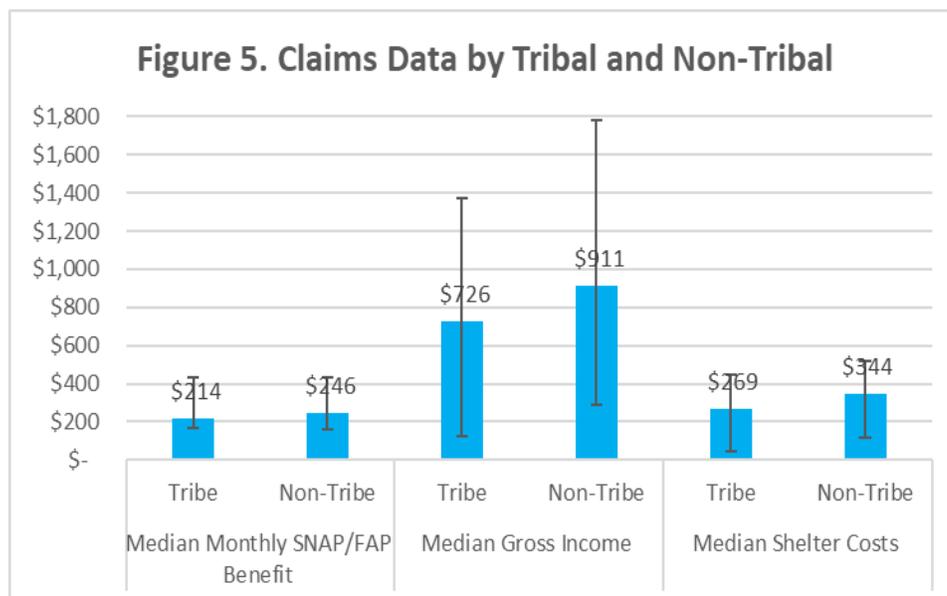
## TRIBAL FOCUS

Washington State is home to 29 Federally Recognized Tribes that live on and off 28 reservation trust lands. SNAP-Ed is required to consult with local Tribal leadership and encouraged to collaborate with Tribal communities throughout the state. **Table 5** provides an economic snapshot of Tribal members living on and off reservation trust land. Blank areas indicate data not reported by the Census Bureau.

The Centers for Excellence also reviewed Basic Foods (SNAP) claims data specific to Tribal populations. The following tables and figures provide details on claims-based data for Tribal populations.

Region	% of All Claims as Tribal Member
1	6%
2	6%
3	6%
4	4%
5	5%

Age	Tribe	Non-Tribe
0-6	12%	14%
7-11	13%	15%
12-17	11%	12%
18-24	12%	11%
25-34	19%	18%
35-44	13%	12%
45-54	10%	9%
55-64	7%	6%
65-74	2%	2%
75+	1%	1%



## ADULT FOOD AND NUTRITION, PHYSICAL ACTIVITY, AND HEALTH BEHAVIORS AND OUTCOMES

### Key Takeaways:

- SNAP-eligible adults had higher rates of food insecurity, insufficient physical activity, and poor mental health compared to non-eligible adults.
- Across all regions, SNAP-eligible adults had higher rates of food insecurity and poor mental health. In all but Region 3, SNAP-eligible adults had higher rates of insufficient physical activity.
- Among the adult SNAP-eligible population, Asian, American Indian or Alaska Native, Hispanic, and adults with lower levels of educational attainment had disproportionately lower rates of physical activity.
- Among the adult SNAP-eligible population, individuals with lower levels of educational attainment had lower rates of fruit and vegetable consumption.
- Among the adult SNAP-eligible population, American Indian and Alaska Native, other race, and adults with lower levels of education had higher rates of obesity.
- Among the adult SNAP-eligible population, females, black, American Indian and Alaska Native, Hispanic, other race, adults with less than a high school education, and adults with some college had higher rates of food insecurity.

The Centers for Excellence analyzed 18 food and nutrition, physical activity, and health behavior and outcome indicators to describe the health-related behaviors and outcomes of the adult SNAP-eligible population. Detailed tables and figures can be found in the Washington State SNAP-Ed Data Profile companion publication. **Table 8** displays a selection of indicators and comparisons of outcomes between the SNAP-eligible and non-eligible populations. Areas marked with a red square indicate that the SNAP-eligible population had significantly ( $p < 0.05$ ) worse rates, and areas marked with green indicate the SNAP-eligible population had significantly better rates. Blank areas indicate no significant difference between the eligible and non-eligible population.

Table 8. Selected Indicators and Comparison to Non-Eligible Population, BRFSS 2017										
Region	Less than 5+ Servings per Day of Fruits and Vegetables	Sometimes, Usually, Always Stressed About Having Money to Buy Nutritious Meals	Less than 150+ Moderate or 75+ Vigorous Minutes Physical Activity per Week	Muscle Strengthening Less than 2+ Days per Week	Not Physical Activity Other than Job	Overweight or Obese	14+ Days Poor Mental Health	Diabetes	High Blood Pressure	High Cholesterol
WA State Eligible										
Region 1										
Region 2										
Region 3										
Region 4										
Region 5										

■ Green = Eligible has better rates than non-eligible  
■ Red = Eligible has worse rates than non-eligible  
*Better or worse is defined as either going toward or away from the desired behavior*

SNAP-eligible adults in Washington had significantly higher rates of food insecurity (sometimes, usually, always stressed about having enough money to buy nutritious meals), lower rates of physical activity and muscle strengthening, and higher rates of poor mental health and diabetes than the non-eligible population. Higher rates of food insecurity for the SNAP-eligible population are consistent across all regions, as are higher rates of poor mental. Four out of five (excluding Region 3) regions had worse rates of physical activity. There

were no significant differences between the eligible and non-eligible populations in fruit and vegetable consumption or high cholesterol. In Washington, there was not a significant difference between the eligible and non-eligible population in obesity rates, while the Region 4 SNAP-eligible population had a significantly higher rate of obesity and the Region 3 SNAP-eligible population had a significantly lower rate of obesity than the respective non-eligible populations.

The Centers for Excellence also analyzed several indicators based on statistically different ( $p < 0.05$ ) outcomes between demographics (disparities). **Table 9** displays demographic disparities for selected indicators. Table cells marked in red indicate a significant difference between demographic classes and that the specific population had worse rates than the overall eligible population. If no cells are marked in red for a group, this indicates no significant difference among the eligible

population in that demographic category. For example, in the overweight or obese column, American Indian and Alaska Native, Hispanic, and other race rows are marked in red. This demonstrates that there is a significant difference in rates of overweight or obese adults associated with race among the SNAP-eligible population and American Indian and Alaska Native, Hispanic, and other race populations had worse rates than the overall state eligible population.

**Table 9. Selected Indicators and Comparison by Demographics, BRFSS 2017 ∞**

	Less than 5+ Servings per Day of Fruits and Vegetables	Less than 150+ Moderate or 75+ Vigorous Minutes Physical Activity	Overweight or Obese	Sometimes, Usually, Always Stressed About Having Money to Buy Nutritious Meals
All SNAP-Eligible Adults	77%	52%	64%	44%
<b>Gender</b>				
Female	75%	52%	63%	51%
Male	80%	51%	65%	35%
<b>Race</b>				
White	75%	48%	63%	41%
Black	72%	45%	60%	52%
Asian	82%	59%	36%	35%
American Indian and Alaskan Native	73%	57%	71%	59%
Hispanic	83%	59%	74%	48%
Other	70%	48%	73%	57%
<b>Education</b>				
<HS Grad	84%	59%	67%	51%
HS Grad	78%	53%	69%	40%
Some College	74%	48%	60%	45%
College Grad	72%	41%	57%	36%

 Red indicates the demographic group has significant differences and the specific population has worse rates than the overall eligible population.

## YOUTH FOOD AND NUTRITION, PHYSICAL ACTIVITY, AND HEALTH BEHAVIORS AND OUTCOMES

### Key Takeaways:

- SNAP-eligible youth had higher rates of sweet drink consumption, not eating breakfast, not eating dinner with the family, food insecurity, insufficient physical activity, screen time, and being overweight or obese than non-eligible youth.
- Across all regions, SNAP-eligible youth had higher rates of food insecurity, not eating dinner with the family, and being overweight or obese than non-eligible youth. In all but Region 3, eligible youth had higher rates of insufficient physical activity and not eating breakfast.
- Among the youth SNAP-eligible population, females, black, white, and youth whose mothers had lower levels of educational attainment had lower rates of fruit and vegetable consumption.
- Among the youth SNAP-eligible population, females, American Indian and Alaska Native, Asian, black, Hispanic, older youth (grades 10 and 12), and youth whose mothers had lower levels of educational attainment had higher rates of insufficient physical activity.
- Among the youth SNAP-eligible population, American Indian and Alaska Native, black, Hispanic, Native Hawaiian or other Pacific Islander, and youth whose mothers had lower educational attainment had higher rates of being overweight or obese.
- Among the youth SNAP-eligible population, females, American Indian and Alaska Native, Native Hawaiian or other Pacific Islander, white, other race, and older youth (grade 12) had higher rates of food insecurity.

The Centers for Excellence analyzed 24 food and nutrition, physical activity, and health behavior and outcome indicators of youth grades 8, 10 and 12 (HYS) to describe the health-related behaviors and outcomes of the youth SNAP-eligible population. Detailed tables and figures for each region can be found in the Washington State SNAP-Ed Data Profile companion publication. **Table 10** displays a selection of indicators and comparisons of outcomes between the SNAP-eligible and non-eligible populations. Areas marked with a red square indicate

that the SNAP-eligible population had significantly ( $p < 0.05$ ) worse rates and areas marked with green indicate the SNAP-eligible population had significantly better rates. Blank areas indicate no significant difference between the eligible and non-eligible population.

**Table 10. Selected Indicators and Comparison to Non-Eligible Population, HYS 2018**

Region	Consume Less than 5+ Fruits and Vegetables per Day	Consume at Least One Sweet Drink in Past 7 Days	Did Not Eat Breakfast Today	Rarely or Never Eat Dinner with Family	Skip or Cut Meals in Past 12 Months	Physically Active Less than 60+ Mins, 5+ Days	Did Not Participate in Muscle Strengthening in Past 7 Days	Watch More than 1 Hour TV per Day	Play More than 1 Hour Video Games per Day	Obese or Overweight
WA State Eligible										
Region 1										
Region 2										
Region 3										
Region 4										
Region 5										

 Green = Eligible has better\* rates than non-eligible  
 Red = Eligible has worse\* rates than non-eligible  
*Better or worse is defined as either going toward or away from the desired behavior*

SNAP-eligible youth in Washington had significantly higher rates of drinking sweet drinks, significantly lower rates of eating breakfast and eating dinner with the family, higher rates of cutting or skipping meals (food insecurity), significantly lower rates of meeting the recommended amounts of physical activity and muscle strengthening, and significantly higher rates of screen time and being obese or overweight. Across the state, SNAP-eligible youth had significantly worse rates in eating dinner with the family, food insecurity, and being obese or overweight. There were no significant

differences between SNAP-eligible and non-eligible youth in consuming the recommended amount of fruits and vegetables.

The Centers for Excellence also analyzed several indicators statistically different ( $p < 0.05$ ) outcomes between demographics (disparities). **Table 11** displays demographic disparities for selected indicators. Interpretation of Table 11 is the same as Table 9.

Table 11. Selected Youth Indicators and Comparison by Demographics, HYS 2018 ∞				
	Less than 5+ Servings per Day of Fruits and Vegetables	Physically Active Less than 60+ Mins, 5+ Days	Overweight or Obese	Skip or Cut Meals
All SNAP-Eligible Youth Grades 8-12	82%	52%	36%	23%
<b>Gender</b>				
Female	84%	59%	36%	25%
Male	79%	44%	35%	21%
<b>Race</b>				
American Indian and Alaskan Native	76%	53%	38%	27%
Asian	81%	61%	23%	11%
Black	85%	58%	41%	26%
Hispanic	81%	54%	42%	18%
Native Hawaiian or Other Pacific Islander	79%	50%	50%	34%
White	84%	49%	33%	25%
Other	79%	49%	36%	27%
<b>Grade</b>				
8	81%	48%	34%	20%
10	82%	53%	35%	23%
12	83%	54%	37%	27%
<b>Mother's education</b>				
Less than HS or HS	83%	54%	37%	26%
Some college	81%	49%	34%	24%
4 year degree or higher	78%	45%	31%	24%
 Red indicates the demographic group has significant differences and the specific population has worse rates than the overall eligible population.				

## Latent Class Analysis

To better understand the SNAP-Ed target audience, the Centers for Excellence performed Latent Class Analysis (LCA) on selected indicators to identify subgroups among the SNAP-eligible youth population. LCA is a statistical mixture model that suggests individuals can be divided into subgroups based on an unobserved (latent) construct. While true class membership is unknown, it can be inferred from a set of measured variables.<sup>12</sup> The Centers for Excellence utilized LCA to understand how multiple characteristics, behaviors, and risks co-occur within the target population to better understand profiles of risk and protection for specific behavioral outcomes.

This model can help identify a small set of underlying subgroups characterized by their behaviors (such as dietary habits and physical activity). Each subgroup may differ in their need for SNAP-Ed interventions or differ in their response to selected interventions. This model helps to better understand the target audience in terms of their characteristics (such as individual and family factors) and SNAP-Ed outcomes (such as obesity and food insecurity). SNAP-Ed program staff can use this information to target subpopulations or tailor interventions to specific subpopulations.

The LCA model was based on responses to the following variables from the Healthy Youth Survey Grades 8, 10, and 12:

- Ate less than 5+ servings of fruits/ vegetables per day
- Drank 2+ sweetened drinks per day
- Food insecure (had to skip or cut meals once in the past 12 months)
- Did not eat breakfast
- Did not eat dinner with family
- Less than 60 minutes of physical activity, 5+ days per week
- Less than 5 days muscle strengthening per week
- Watched or played TV/ video games 5+ hours per school day
- Less than 8 hours of sleep

The Centers for Excellence created a 4-class model to

describe the subpopulations. The decision to create a 4-class model was based on goodness of fit<sup>13</sup> and ability to interpret the subpopulations. **Table 12** displays the results of this analysis. For interpretation, this table displays the probability that a SNAP-eligible youth grades 8, 10, and 12 will be in a given class or group and the likelihood that individuals within the group demonstrate the given behavior. For example, in the first group described as *low physical activity, low structure*, there is a 34% probability a SNAP-eligible youth will belong to this class. Youth that belong to the low physical activity, low structure group have a 32% probability of being food insecure.

The Centers for Excellence only considered youth outcomes and behaviors for this analysis. An initial analysis of adult outcomes and behaviors from BRFSS data was completed, but the corresponding adult model did not create subgroups with high levels of fit or interpretation. For this reason, analysts decided to only include results for the youth model.

<sup>12</sup> Lanza, Stephanie T., and Brittany L. Rhoades. "Latent class analysis: an alternative perspective on subgroup analysis in prevention and treatment." *Prevention Science* 14.2 (2013): 157-168.

<sup>13</sup> Goodness of fit was determined by examining Akaike information criterion (AIC) and Bayesian information criterion (BIC) for 2 to 6 subgroup models

**Table 12. Latent Class Membership and Probability of Behavior**

	Class 1 Low PA, Low Structure	Class 2 Low PA, High Structure	Class 3 High PA, Low Structure	Class 4 High PA, High Structure
Probability of belonging to this class.	34%	20%	27%	20%
Percent of individuals belonging to this class.	37%	17%	28%	17%
<b>Probability of:</b>				
Ate less than 5+ servings of fruits/vegetables per day	89%	87%	82%	65%
Drank 2+ sweetened drinks per day	13%	0%	14%	12%
Food insecure	32%	6%	33%	12%
Did not eat breakfast	56%	26%	66%	22%
Sometimes, rarely, never eat dinner with family	65%	21%	63%	24%
Less than 60 mins physical activity, 5+ days per week	100%	62%	14%	9%
Less than 5 days muscle strengthening per week	98%	97%	50%	25%
Watched or played TV/ video games 5+ hours per school day	50%	27%	46%	32%
Less than 8 hours of sleep	78%	51%	86%	46%

The 4-class model suggests that distinguishing behaviors include physical activity and the latent construct of structure in the home indicated by eating breakfast, eating dinner with the family, limited screen time, and adequate sleep. These are factors often controlled by parents and guardians, leading analysts to call this latent characteristic *structure*. This model did not find fruit and vegetable consumption or sweet drink consumption to strongly distinguish subgroups.

This analysis suggests that the majority of SNAP-eligible youth belonged to low physical activity, low structure (37%) and high physical activity, low structure (28%) subgroups.

To further understand the subgroups the Centers for Excellence analyzed the frequency at which members in each subgroup experienced several risk factors.

Additional factors considered include:

- Homelessness
- Unstable housing
- Overweight or obese
- Suicide ideation
- Depression

By analyzing the rate of these outcomes in each subgroup, SNAP-Ed program staff can better understand subsets of the SNAP-eligible youth population and target or adapt interventions to best address populations with co-occurring risk factors. **Table 13** displays the rate of the outcomes for each subgroup. In addition to the added outcome factors, this table is different than Table 12 in that it shows the prevalence of SNAP-eligible youth experiencing this outcome or behavior as opposed to the probability a member of this group would experience the outcome or behavior.

**Table 13. Frequency of Outcomes and Behaviors by Subgroup**

	Class 1 Low PA, Low Structure	Class 2 Low PA, High Structure	Class 3 High PA, Low Structure	Class 4 High PA, High Structure
<b>Frequency of:</b>				
Homelessness	3%	1%	3%	1%
Unstable housing	14%	10%	12%	8%
<b>Overweight</b>	<b>41%</b>	<b>32%</b>	<b>35%</b>	<b>29%</b>
<b>Food insecure</b>	<b>31%</b>	<b>3%</b>	<b>33%</b>	<b>10%</b>
Ate less than 5+ servings of fruits/vegetables per day	89%	92%	84%	55%
Drank 100% Fruit Juice	34%	29%	28%	22%
Drank 2+ sweetened drinks per day	13%	0%	13%	12%
Did not eat breakfast	59%	12%	70%	14%
Sometimes, rarely, never dinner with family	65%	10%	68%	16%
Less than 60 mins physical activity, 5+ days per week	100%	59%	9%	9%
Less than 5 days muscle strengthening per week	100%	100%	49%	14%
Watched or played TV/ video games 5+ hours per school day	53%	19%	44%	31%
Less than 8 hours of sleep	81%	37%	90%	40%
Suicide ideation	28%	14%	28%	11%
Depression	51%	27%	49%	26%

The analysis of frequencies suggests several characteristics of the subgroups. Frequency of SNAP-eligible youth being overweight or obese and food insecure was highest for the two low structure groups. This was irrespective of fruit and vegetable consumption. The low physical activity-high structure group had lower levels of recommended fruit and vegetable consumption than all other groups, but the second lowest levels of being overweight and obese and lowest overall frequency of food insecurity. Physical activity rates were less predictive than structure as well, as the low physical activity high structure group had relatively low rates of exercise compared to the high physical activity groups, but lower levels of being overweight or obese or food insecure. This model suggests that **membership in lower structure subgroups is highly predictive of SNAP-eligible youth being overweight or obese or food insecure.**

**Table 14** combines both subgroup probability and frequencies and includes interpretation of risk among the groups as well as comparison of frequencies to the overall SNAP-eligible population. Risk levels are defined as follows:

- High risk (red): over 50% of youth in the subgroup experience the outcome or behavior
- Medium risk (yellow): Between 25% and 49% of youth in the subgroup experience the outcome or behavior
- Low risk (green): Less than 25% of youth in the subgroup experience the outcome or behavior

Bolded frequencies in Table 14 signify that individuals in the subgroup have lower rates than the overall statewide rate for eligible youth.

**Table 14. Combined Probability of Class and Frequency of Variables and Associated Risk**

	Class 1 Low PA, Low Structure	Class 2 Low PA, High Structure	Class 3 High PA, Low Structure	Class 4 High PA, High Structure	State
Probability of belonging to this class.	34%	20%	27%	20%	
Percent of individuals belonging to this class.	37%	17%	28%	17%	
<b>Probability of:</b>					
Ate less than 5+ servings of fruits/vegetables per day	89%	87%	82%	65%	
Drank 2+ sweetened drinks per day	13%	0%	14%	12%	
Food insecure	32%	6%	33%	12%	
Did not eat breakfast	56%	26%	66%	22%	
Sometimes, rarely, never eat dinner with family	65%	21%	63%	24%	
Less than 60 mins physical activity, 5+ days per week	100%	62%	14%	9%	
Less than 5 days muscle strengthening per week	98%	97%	50%	25%	
Watched or played TV/ video games 5+ hours per school day	50%	27%	46%	32%	
Less than 8 hours of sleep	78%	51%	86%	46%	
<b>Frequency of:</b>					
Homelessness	3%	1%	3%	1%	2%
Unstable housing	14%	10%	12%	8%	12%
Overweight	41%	32%	35%	29%	36%
Food insecure	31%	3%	33%	10%	23%
Ate less than 5+ servings of fruits/vegetables per day	89%	92%	84%	55%	82%
Drank 100% Fruit Juice	34%	29%	28%	22%	29%
Drank 2+ sweetened drinks per day	13%	0%	13%	12%	11%
Did not eat breakfast	59%	12%	70%	14%	46%
Sometimes, rarely, never eat dinner with family	65%	10%	68%	16%	48%
Less than 60 mins physical activity, 5+ days per week	100%	59%	9%	9%	52%
Less than 5 days muscle strengthening per week	100%	100%	49%	14%	71%
Watched or played TV/ video games 5+ hours per school day	53%	19%	44%	31%	41%
Less than 8 hours of sleep	81%	37%	90%	40%	69%
Suicide ideation	28%	14%	28%	11%	22%
Depression	51%	27%	49%	26%	42%
<div style="display: flex; gap: 10px;"> <div style="width: 15px; height: 15px; background-color: red; border: 1px solid black;"></div> Red = 50% or more of subgroup                 <div style="width: 15px; height: 15px; background-color: yellow; border: 1px solid black;"></div> Yellow = 25%-49% of subgroup                 <div style="width: 15px; height: 15px; background-color: green; border: 1px solid black;"></div> Green = &lt;25% of subgroup             </div>					

### Key implications of this analysis include:

- Based on variance in behavior, subgroups were distinguished by the latent construct of structure and by physical activity.
- Membership in high structure subgroups is highly predictive of lower rates of food insecurity.
- Membership in high structure subgroups is highly predictive of lower rates of being overweight or obese.
- Membership in high physical activity subgroups is predictive of lower rates of being overweight or obese and food insecure, but less so than membership in high structure subgroups.
- The majority (65%) of SNAP-eligible youth belonged to low structure subgroups.
- Healthy eating behaviors such as fruit and vegetable consumption or drinking less than two sweet drinks per day were not distinguishing factors in subgroups.

The results of this analysis can be used to better understand the target population, identify specific groups to refine the target, and tailor SNAP-Education interventions to meet the needs of or address the environment of the target population.

# Priority Indicator Severity Scoring

## Key Takeaways:

Through analysis and severity scoring based on change in indicator, differences between the eligible and non-eligible populations, demographic disparities, and overall magnitude, the Centers for Excellence determined the following topics to be of highest severity in Washington:

- Youth physical activity
- Youth fruit and vegetable consumption
- Adult food insecurity

To determine priority topics for the Washington State SNAP-Ed program, the Centers for Excellence created a scoring system for eight primary indicators (4 HYS, 4 BRFSS). The eight indicators were selected because they are consistent in definition between youth and adult and represent the primary focus of the SNAP-Ed program in general. Definitions of all indicators in this report can be found in **Appendix D**. Indicators include:

- Physical activity (adult and youth who met recommended weekly levels)
- Adult and youth rates of obesity
- Fruit and vegetable consumption (adults and youth who consumed recommended daily amounts)
- Adult and youth food insecurity

The Centers for Excellence assigned severity scores based on the following criteria:

- Change in Indicator
  - Are rates in the indicator for the SNAP-eligible population getting better or worse over time?
- Eligible to Non-Eligible
  - Is there a significant difference between rates for the SNAP-eligible and non-eligible? Are these differences better or worse?
- Demographic Disparities
  - Are there identifiable and significant differences between demographic groups within the SNAP-eligible population?
- Magnitude
  - What percent of the SNAP-eligible population is experiencing this outcome negatively (i.e. rates going in the undesired direction)?

**Table 15** displays the results of the severity scoring process. Based on the selected criteria and scoring methodology, for Washington State the indicators with the highest level of severity are **youth physical activity, youth fruit and vegetable intake, and adult food insecurity**. The indicator with the lowest severity score is adult fruit and vegetable intake. In the table, red boxes indicate areas of concern while green boxes indicate areas where the SNAP-eligible population is performing better or better than the non-eligible population.

Indicator severity scoring is not intended to determine absolute importance of topics for the Washington State SNAP-Ed program, as many other factors are important in obesity prevention, but should be considered in addition to results from all needs assessment components including the assessment of community themes and strengths and systems assessment.

Table 15. Washington State Severity Scoring for Selected Indicators, HYS 2018, BRFSS 2017 ∞						
Statewide Scoring	Change in Indicator	Eligible to Non-Eligible	Demographic Disparities	Magnitude (Estimated)	Scoring	
Physical Activity (150+ Minutes per week)- Adult	2	3	2	4	11	
Physical Activity (60 min 5+ days per week)- Youth	2	3	3	4	12	
Obesity- Adult	2	2	2	4	10	
Obesity- Youth	2	3	2	4	11	
Fruit and Vegetable Intake (5+ servings per day)- Adult	1	2	2	4	9	
Fruit and Vegetable Intake (5+ servings per day)- Youth	3	2	3	4	12	
Food Insecurity- Youth (skip or cut meals at least once in last 12 months)	2	3	3	3	11	
Food Insecurity-Adult (sometimes, usually, always stressed about having enough money to buy nutritious meals past 12 months)	2	3	3	4	12	
<b>Scoring</b>	<b>1:</b> Getting Better <b>2:</b> No Change <b>3:</b> Getting Worse	<b>1:</b> Better <b>2:</b> No Difference <b>3:</b> Worse	<b>1:</b> None <b>2:</b> 1-2 Indicators w/ Differences <b>3:</b> More than 2 Indicators with Differences	<b>0:</b> Less than .01% <b>1:</b> .01-.9% <b>2:</b> 1-9.9% <b>3:</b> 10-24.9% <b>4:</b> >25%	Percentage of SNAP-Ed Eligible Experiencing Condition	

## ASSESSMENT OF COMMUNITY STATUS SUMMARY

The assessment of the community status for the Washington State SNAP-eligible population involved the systematic analysis of existing data to describe and analyze the socio-demographic, health, and environmental characteristics of the Washington State SNAP-eligible population. Through analysis of the data, Latent Class Analysis, and indicator severity scoring, the following are presented as key findings:

- SNAP-eligible individuals live in diverse geographic locations across Washington State. On average, rural counties have higher proportions of eligibility while urban counties have higher numbers of SNAP-eligible individuals.
- Young adults (18-24), children between 0-11 years old, single mothers, female householder with no husband present, and single fathers had higher rates of SNAP-eligibility among their respective age groups and household types.
- In 2017, over 600,000 SNAP-eligible adults in Washington experienced food insecurity.
- In 2017, nearly one million (or 2/3) SNAP-eligible adults in Washington State could be considered overweight or obese.
- In 2018, only one in six SNAP-eligible youth in Washington consumed the recommended daily servings of fruits and vegetables.
- Only one in two SNAP-eligible adults and youth in Washington got enough physical activity according to recommended guidelines.
- Through the use of Latent Class Analysis, it was determined that membership in high structure subgroups (eating breakfast, eating meals with the family, limited screen time, and adequate sleep) was highly predictive of lower rates of SNAP-eligible youth being overweight or obese or food insecure.
- 65% of SNAP-eligible youth in Washington belonged to low structure subgroups.
- Based on severity scoring that includes consideration of change in indicator, comparison between the SNAP-eligible and non-eligible population, existence of demographic disparities, and magnitude, *youth fruit and vegetable intake*, *youth physical activity*, and *adult food insecurity* are the indicators of highest concern for the Washington State SNAP-eligible population.

# ASSESSMENT OF COMMUNITY THEMES AND STRENGTHS

The assessment of community themes and strengths answers the questions: “How is the healthy food and physical activity environment perceived by the SNAP-eligible population?” “What are community-identified barriers to accessing healthy foods and physical activity?” and “What are community-based suggestions for increasing access to healthy foods and physical activity?” This phase of the assessment ensured that the SNAP-eligible population was directly involved in the planning and assessment of SNAP-Ed activities. Community engagement in planning and evaluation is proven to increase efficacy of program implementation.<sup>14</sup>

The primary method of obtaining community voice was through a series of 29 focus groups in 22 counties throughout Washington State. A total of 237 SNAP-eligible individuals participated in the focus groups. The following is a summary of the themes from all focus groups. A copy of the focus group guide can be found in **Appendix C**.

## PREFERRED TYPE OF PHYSICAL ACTIVITY

Consistent physical activity is a core factor in obesity prevention.<sup>15</sup> Focus group moderators began each session by asking participants about their preferred type of physical activity. **Table 16** displays a detailed count of preferences of the focus group participants. **Statewide, the most preferred type of physical activity by all participants was walking, followed by wheeled activities such as bike riding and roller blading, cardio such as running, aerobics, and dancing, and housework or yardwork. The responses to this question reflect a preference of focus group participants for low-impact and low-cost activities.**

**Information in this section and associated tables and appendices can help state, regional, and local SNAP-Ed providers:**

- Consider community-based suggestions to increase healthy eating and physical activity behaviors and reduce food insecurity.
- Better understand the target population in terms of their perceived barriers and motivations to healthy behavior.

<sup>14</sup> Minas, Maria, Maria Teresa Ribeiro, and James P. Anglin. "Social and community program approaches to participants: Exploring best practices." *Journal of community psychology* 47.2 (2019): 398-413.

<sup>15</sup> FY 2019 SNAP-Ed Plan Guidance. <https://snaped.fns.usda.gov/snap/Guidance/FY2019SNAPEdPlanGuidanceFULL.pdf>.

**Table 16. State-wide physical activity preference**

Type	Count*	Details
<b>Walk</b>	92	Participants that said "walk"
<b>Wheeled activities</b>	29	Participants that said, "roller blading," "bike riding"
<b>Cardio</b>	27	Participants that said "running," "aerobics," "jump roping," "dancing," "stair climbing"
<b>Housework/ yardwork</b>	21	Participants that said "garden," "housework," "yardwork."
<b>Water activities</b>	17	Participants that said "swimming," "water aerobics," "kayaking," "rowing a boat"
<b>Group exercise</b>	10	Participants that said any exercise that is done in a group setting
<b>Outdoor recreation</b>	9	Participants that said, "outdoor stuff," "horseback riding," "climbing rocks," "clamming," "fishing," "hunting mushrooms"
<b>Activities with kids</b>	9	Participants that said any activity involving their children
<b>Hiking</b>	9	Participants that said "hiking"
<b>Gym</b>	7	Participants that said "gym" or named a gym
<b>Strength training</b>	7	Participants that said "lifting weights"
<b>Low-impact activities</b>	4	Participants that said "golf," "stretching," "balance," "exercising in wheelchair"
<b>Winter activities</b>	3	Participants that said "skiing"
<b>Organized sports</b>	3	Participants that said "basketball," "volleyball," "baseball"
<b>Physical therapy</b>	2	Participants that said "physical therapy"
<b>Caretaking</b>	1	Participants that said "caretaking"

*Note: Counts are approximate*

## MOTIVATIONS, BARRIERS, AND STRATEGIES TO INCREASE PHYSICAL ACTIVITY

Focus group respondents answered several questions regarding their motivations to be physically active, barriers to participating in physical activity, and suggestions to overcome any barriers to being physically active. **While responses varied greatly throughout the state, several themes emerged including the**

**importance of social supports and connectivity, improving resources for SNAP-eligible individuals to access opportunities for physical activity, and the need for adaptive exercises for different levels of physical health and ability.** Table 17 provides a summary of themes for physical activity related questions.

Table 17. Physical Activity Focus Group Themes	
<b>What motivates you to be physically active?</b>	
<ul style="list-style-type: none"> <li>• Family/ friends/ pets                             <ul style="list-style-type: none"> <li>• Social connectivity</li> <li>• Provide motivation</li> </ul> </li> <li>• Weather                             <ul style="list-style-type: none"> <li>• Nature</li> <li>• Sun</li> </ul> </li> <li>• Self-motivation                             <ul style="list-style-type: none"> <li>• Positive body image</li> </ul> </li> <li>• Music/hobbies</li> </ul>	<ul style="list-style-type: none"> <li>• Practical reasons                             <ul style="list-style-type: none"> <li>• Yardwork</li> <li>• Gardening</li> <li>• Clean house</li> <li>• Transportation</li> </ul> </li> <li>• Physical health                             <ul style="list-style-type: none"> <li>• Health/weight loss</li> <li>• More energy</li> <li>• Prevent aging</li> </ul> </li> <li>• Mental health                             <ul style="list-style-type: none"> <li>• Feel better</li> <li>• Clear mind</li> <li>• Fight depression</li> </ul> </li> </ul>
<b>What keeps you from participating in things that are physically active?</b>	
<ul style="list-style-type: none"> <li>• Bad/adverse weather</li> <li>• Lack of personal motivation</li> <li>• Embarrassment</li> <li>• Conflicting priorities/ lack of time</li> <li>• Access/resources                             <ul style="list-style-type: none"> <li>• Cost of gym membership</li> <li>• Transportation</li> <li>• Childcare</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Safety                             <ul style="list-style-type: none"> <li>• Streetlights</li> <li>• Sidewalks/traffic</li> <li>• Hunting season</li> </ul> </li> <li>• Physical health/limitations                             <ul style="list-style-type: none"> <li>• Sickness</li> <li>• Injuries</li> <li>• Pain</li> </ul> </li> <li>• Mental health                             <ul style="list-style-type: none"> <li>• Depression</li> <li>• Stress</li> <li>• Isolation</li> </ul> </li> </ul>
<b>What would help you overcome those barriers?</b>	
<ul style="list-style-type: none"> <li>• Improved weather</li> <li>• Better personal health                             <ul style="list-style-type: none"> <li>• Improved diet</li> <li>• Massage therapy</li> </ul> </li> <li>• Awareness of safety issues</li> <li>• Low impact exercises                             <ul style="list-style-type: none"> <li>• Indoor</li> <li>• Sitting in a chair</li> <li>• Walking spaces</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Education/communication about what is available                             <ul style="list-style-type: none"> <li>• Prioritize time</li> <li>• Improve access</li> </ul> </li> <li>• Childcare</li> <li>• Transportation</li> <li>• Parks/beaches</li> <li>• Free gym memberships</li> <li>• Community spaces</li> </ul>

## MOTIVATIONS, BARRIERS, AND STRATEGIES TO INCREASE HEALTHY FOOD CONSUMPTION

Focus group participants answered several questions regarding their motivations to eat healthy, barriers to selecting and cooking healthy foods, and suggestions to improve healthy eating habits. Similar to responses about physical activity, responses varied greatly throughout the state. **Emerging themes included addressing the cost of healthy food, increasing skill-**

**based education on selecting and preparing healthy food, addressing physical barriers such as transportation to food resources (grocery stores, food banks, etc.) and storing healthy food.** Table 18 provides a summary of themes for healthy food related questions.

**Table 18. Healthy Food Focus Group Themes**

### When you are hungry, what makes it harder for you to eat healthy foods?

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li>• Price of healthy foods</li> <li>• Convenience             <ul style="list-style-type: none"> <li>• Time to prepare</li> <li>• Planning</li> </ul> </li> <li>• Cooking             <ul style="list-style-type: none"> <li>• Don't want to cook</li> <li>• Lack of knowledge/skills</li> <li>• Difficult to cook for one or two people</li> </ul> </li> <li>• Availability/resources</li> </ul> | <ul style="list-style-type: none"> <li>• Medical/dietary restrictions</li> <li>• Limited options/unfamiliar options at food bank</li> <li>• School lunch policies</li> <li>• Transportation to get healthy food</li> <li>• Storage space and cooking equipment</li> </ul> |
|--|---|

### What makes it hard to eat healthy foods when you're on the go, at a restaurant, or away from home?

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>• Fast food             <ul style="list-style-type: none"> <li>• Receive coupons for fast food</li> <li>• Portion sizes are large</li> </ul> </li> <li>• Availability             <ul style="list-style-type: none"> <li>• Hard to transport perishable foods when on the go</li> <li>• Long trips to get groceries</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li>• Temptation</li> <li>• Convenience</li> <li>• Quality</li> <li>• Cost</li> </ul> |
|---|--|

### What makes it harder for you to select healthy foods from a grocery store?

- |  |  |
|--|--|
| <ul style="list-style-type: none"> <li>• Habits/temptation</li> <li>• Selection/variety             <ul style="list-style-type: none"> <li>• Limited in rural areas</li> </ul> </li> <li>• Transportation             <ul style="list-style-type: none"> <li>• Long trips (distance and time to travel)</li> <li>• Restrictions on number of bags allowed on the bus</li> </ul> </li> <li>• Storage space</li> <li>• Knowledge             <ul style="list-style-type: none"> <li>• Cooking skills</li> <li>• Willingness to try new things</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li>• Store policies             <ul style="list-style-type: none"> <li>• Store layout</li> <li>• Labeling</li> <li>• Scales</li> <li>• Accessibility</li> </ul> </li> <li>• Cost             <ul style="list-style-type: none"> <li>• Not enough money</li> <li>• Prices for healthy foods are too high</li> <li>• Shop for sales/coupons</li> </ul> </li> </ul> |
|--|--|

### What would help you eat healthier foods?

- Storage space for food
  - Freezer
  - Refrigerator
- Community programs
  - Community gardens
  - Backpack meals
  - Soup kitchens
  - Food drives
- Accountability
  - Self-discipline
- Planning
  - Budget
  - Meal plan
  - Prepare food at home
- Affordability
  - Incentives for SNAP recipients
  - Store rewards
  - Free hunting/ fishing license
  - Coupons
  - Lower prices
- Transportation
- Healthy foodbank options
- Education/ knowledge
  - Hands on skills
    - Cooking
    - Gardening
    - Canning
- Get information out about programs/opportunities
  - Nutrition guidance

### What would help you select healthy foods in a grocery store?

- Money
  - More EBT money
  - Lower prices
- Time
  - Food preparation
- Education
  - Preserve foods
  - Food sources
  - Food preparation
- Convenience
  - Delivery

### What would help you select healthy foods when on the go or in a restaurant?

- Have a plan
  - Pack foods on the go
- Choose healthy options
  - Drink water
  - Read nutrition labels

## COMMUNITY THEMES SUMMARY

The assessment of community themes and strengths revealed information about focus group participants' perception of community issues and needs for increased healthy eating and physical activity. Across all topics, the following themes emerged:

- ***Social connectivity and accountability are drivers of increased physical activity.*** Focus group participants frequently commented on the importance of having social support to motivate them to participate in exercise activities. This could include having exercise or walking groups and classes or exercising as a family or community. Social connectivity also reduces isolation and depression.
- Focus group participants frequently discussed ***the link between physical and mental health.*** Improved mental health was often mentioned as a benefit of increased physical activity. The communication of this benefit is an opportunity for SNAP-Ed programming.
- ***Physical activity and healthy eating programming and education should reflect the priorities of the community.*** Focus group participants frequently discussed the need of SNAP-Ed programming to reflect their personal situations. This includes adapting curriculum or programming to reflect the realities of SNAP-eligible adults including time, transportation, childcare and other supports, and having culturally and locally relevant topics and activities. For physical activity, programming should reflect the physical abilities of the target population. For food and nutrition programming, activities and curriculum should reflect the food and nutrition environment including what is locally available and the skills of the target audience.
- ***Improved and increased communication of available resources is desired.*** Focus group participants commented on the need for increased communication of what resources are available to them. Many stated they did not know about all the potential resources to improve their food and nutrition and physical activity behaviors.
- ***Rural audiences face unique challenges.*** Focus group participants in rural communities frequently discussed the unique challenges they face to increase physical activity and improve their diets. Challenges include long distance travel to healthy food resources such as grocery stores and associated costs and concerns (spoilage and storage), dependence on weather for travel and physical activity, and limited resources in their communities.

# ASSESSMENT OF THE SYSTEM

The assessment of the system involves a detailed analysis of the current programmatic environment SNAP-Ed operates in and seeks to identify what service providers in the community see as issues facing the SNAP-eligible population and SNAP-Ed program as well as perceived gaps and resources. Information collected and analyzed for the assessment of the system include key-informant interviews with SNAP-Ed program staff (statewide initiatives, implementing agencies, local providers), a community-partner survey, and a review of FFY2018 SNAP-Ed programming activities and other services available for the SNAP-eligible population.

## Key-Informant Interviews

The Centers for Excellence conducted 33 key-informant interviews with representatives from the Washington State SNAP-Ed Leadership Team (implementing agencies and statewide initiative leaders) and local SNAP-Ed providers in all Washington State SNAP-Ed Regions. Interview topics included:

- Process for selecting program activities and utilizing best practices
- Populations most in need of SNAP-Ed programming
- Topics most in need of addressing with SNAP-Ed programming
- Over/ underserved populations (including geography)
- Barriers and opportunities for addressing populations most in need

The following is a summary of themes from the interviews by provider group and topic.

Information in this section and associated tables and appendices can help state, regional, and local SNAP-Ed providers:

- Identify areas of improvement in the SNAP-Ed system to ensure high-quality programming.
- Identify potential partnerships and areas of opportunity for SNAP-Ed programs.
- Identify gaps in service provision for the SNAP-eligible population.
- Consider recommendations from community partners to best serve the target population.

## IMPLEMENTING AGENCY AND STATEWIDE INITIATIVE PROGRAM PROCESSES

Representatives from all SNAP-Ed implementing agencies and statewide initiatives discussed their process for selecting activities, providing guidance, and ensuring the utilization of best practices. **Table 19** provides a summary of themes from these questions.

Table 19. Implementing Agency and Statewide Initiative Program Process Themes	
<b>Can you describe the process your agency or other local agencies use for selecting program activities?</b>	
<ul style="list-style-type: none"> <li>• Conduct local needs assessment                             <ul style="list-style-type: none"> <li>• Identify gaps</li> </ul> </li> <li>• Regional focus areas/interests are considered</li> <li>• Stakeholder input                             <ul style="list-style-type: none"> <li>• Partners</li> <li>• Clients</li> <li>• Agencies</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Follow SNAP-Ed guidelines                             <ul style="list-style-type: none"> <li>• Budget</li> <li>• Implementing agency oversight and input</li> </ul> </li> <li>• Professional development                             <ul style="list-style-type: none"> <li>• Trainings</li> <li>• Collaboration</li> <li>• Evidence-based practices</li> </ul> </li> <li>• Continuously communicate                             <ul style="list-style-type: none"> <li>• Quarterly check-ins</li> <li>• Phone calls and check-ins</li> <li>• Site visits</li> </ul> </li> </ul>
<b>Do you as an implementing agency or statewide initiative guide activity selection or provide guidance for preferred or accepted activities?</b>	
<ul style="list-style-type: none"> <li>• Provide technical assistance</li> <li>• Facilitate collaboration                             <ul style="list-style-type: none"> <li>• Regional resource sharing</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Goal alignment with state, regional, local activities</li> <li>• Discourage drastic changes in programming</li> </ul>
<b>Can you describe the process your agency uses for ensuring that SNAP-Ed activities are utilizing best practices, meet requirements, and address the target population?</b>	
<ul style="list-style-type: none"> <li>• Track program performance/program monitoring and evaluation</li> <li>• Determine qualifying sites and audiences</li> <li>• Communication and reporting</li> </ul>	<ul style="list-style-type: none"> <li>• Check programming for fidelity/evidence based</li> <li>• Facilitate collaboration (peer to peer)</li> <li>• Do not have a way to evaluate programs at local level</li> </ul>

## IMPLEMENTING AGENCY AND STATEWIDE INITIATIVE PROGRAM FOCUS

Representatives from all SNAP-Ed implementing agencies and statewide initiatives provided insight about target populations, food and nutrition and physical activity topics most in need of addressing and barriers and opportunities for successful program implementation. **Emerging themes include the need to address environmental and systems factors, adapting programming to meet the needs of the community, and the value of collaboration and partnerships.** **Table 20** provides a summary of themes about these topics.

**Table 20. Implementing and Statewide Initiative Program Focus**

**In your experience, what audiences are most in need of SNAP-Ed programming?**

- Youth
- Parents
- Low-income adults
  - Hard to reach
- Older youth/teens
  - Beginning to make decisions
- Seniors
- Whoever is feeding the household

**What physical activity or obesity prevention topics are most in need of addressing?**

- Must address the environment and systems
  - Schools
  - Access
  - Food insecurity
  - Opportunities for physical activity
  - Affordability
- Increase fruit and vegetable consumption
- Healthy recipes
- Remove barriers to acting on education
  - Housing
  - Unemployment
  - Trauma
  - ACEs
- Physical activity in general
- Chronic disease prevention
- Health equity

**In your experience, are there any populations that are underserved in your area?**

- Youth
- Low-income parents
- Tribes
- Adults
- Older youth
- Seniors
- Individuals that still have need but do not qualify by guidelines
- Rural communities
- Non-English speakers

**Are there populations that are overserved?**

- Always more need than resources available
- Schools (convenience/familiar)
- Urban areas
- Young kids
- Easy to qualify sites (certain schools, food banks, etc.)

**In your opinion, what are the barriers to reaching SNAP-eligible populations most in need of programming?**

- Understanding and responding to the community/ culture
  - Takes time
  - Need to be a trusted member
  - Understand barriers
- Methodology for qualifying sites
- SNAP-Ed resources
  - Staffing
  - Turnover
  - Money
  - Time
- Personal barriers
  - Busy participant schedules
  - Lack of teeth
  - Lack of transportation
- Curriculum
  - Rigid delivery guidelines
  - Structure
  - Inability to tailor to community/ audience

**What opportunities exist to reach the SNAP-eligible populations most in need of programming?**

- Translator on staff
- Local needs assessment
- Flexibility in curriculum
- Partnerships
  - Explore new partnerships
  - Empower partners and community to do the work
  - Participatory planning
  - Leverage across strategies to expand reach
- Community health workers
- More policy, systems, and environmental (PSE) approaches
- Alternative methodology for qualifying sites

**Table 21. Local Provider Program Process Themes**

Can you describe the process your agency or other local agencies use for selecting program activities?

- Leverage partnerships
- Gather community voice
- Follow SNAP-Ed guidance
- Collaboration with implementing agencies
- Efficient use of funds and resources
- Use data to qualify eligible populations
- Receive guidance on planning, goals, and best practices from implementing agencies and statewide initiatives

Can you describe the process your agency uses for ensuring that SNAP-Ed activities are utilizing best practices, meet requirements, and address the target population?

- Follow SNAP-Ed guidelines
- Learn from others
- Implementing agency input
- Data and assessment
- Resources/ professional development external to SNAP-Ed

What resources do you utilize to ensure you are utilizing best practices?

- Implementing agency guidance
- Local evaluation
- Professional development
- SNAP-Ed guidance

### LOCAL PROVIDER PROGRAM PROCESSES

Representatives from 26 local SNAP-Ed provider agencies discussed their process for selecting activities, providing guidance, and ensuring the utilization of best practices.

Table 21 provides a summary of themes from these questions.

### LOCAL PROVIDER PROGRAM FOCUS

Representatives from local SNAP-Ed provider agencies provided insight about target populations, food and nutrition and physical activity topics most in need of

addressing, and barriers and opportunities for successful program implementation. **Emerging themes include the need to reach historically underserved populations such as homeless individuals and non-English speaking or non-native populations, the value of collaboration and partnerships, and opportunities associated with skill-based programming.** Table 22 provides a summary of themes about these topics.

**Table 22. Local Provider Program Focus Themes**

In your experience, what audiences are most in need of SNAP-Ed programming?

- Families
- Food banks
- Native American populations
- People of color
- Immigrants
- Homeless
- Youth
- Non-English speakers
- Seniors
- Rural communities
- Schools
- Those who face socioeconomic barriers

**What physical activity or obesity prevention topics are most in need of addressing?**

- Hands-on skills
- Healthy eating
- Environment and policy
- Chronic disease
- Increasing physical activity

**In your experience, are there any populations that are underserved in your area?**

- Adults
- Families
- Hispanic populations
- Homeless
- People of color
- Re-entry populations
- Rural areas
- Seniors
- Immigrants
- Low-income
- Mentally ill
- Non-English speakers
- Those who experience trauma
- Tribes/ Native Americans
- Youth in schools

**Are there populations that are overserved?**

- Most said no
- Some said there are over resourced areas
  - urban vs rural
  - areas with higher funding
  - some sites are served over and over
- Seniors
- Schools

**In your opinion, what are the barriers to reaching the SNAP-eligible populations most in need of programming?**

- Partnerships
- SNAP resources
- Participant personal motivation
- Equity
- Participant personal barriers
- Curriculum
- Rural areas

**What opportunities exist to reach the SNAP-eligible populations most in need of programming?**

- Partnerships
- Schools
- Middle schools
- Finding captive audiences (local-based, preexisting groups, etc.)
- Faith communities
- PSE approaches
- Creative approaches
- Remove barriers
- SNAP-Ed resources

## KEY-INFORMANT INTERVIEW THEMES SUMMARY

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Key-informant interviews revealed information about SNAP-Ed programmatic processes, target populations, topics most in need of addressing, and barriers and opportunities for SNAP-Ed program success. Across all topics, the following themes emerged:

- ***SNAP-Ed leadership and providers value collaboration to improve and sustain high-quality programming*** through resource sharing and professional development. Collaboration and communication between implementing agencies, statewide initiatives, and local providers ensures appropriate and evidence-based practices are happening at all levels. Professional development opportunities increase the quality of services provided. Many participants discussed the value of external partnerships as a way of leveraging resources and improving programming.
- ***SNAP-Ed program staff value data and evaluation*** to improve and sustain high-quality programming. Implementing agencies, statewide initiatives, and local providers frequently discussed the need for local and relevant data to improve programming throughout the state. There was an expressed desire for increased access to and support of local evaluation.
- ***Adaptation of programming and curriculum to meet the needs of the community are essential to successful program implementation.*** Interview participants frequently mentioned the need to have locally relevant program activities and curriculum. For some, limited flexibility in allowable activities and curriculum was described as a primary barrier to reaching the SNAP-Ed target audience. Adaptive and culturally appropriate activities and curriculum address structural inequities and enhance reach to historically underserved communities.
- ***Hands on, skill-based curriculum and activities are effective in reaching the SNAP-Ed target audience.*** Curriculum and activities that incorporate life skills tools and techniques, such as cooking classes and providing recipes, are engaging and desired by the target audience. Skill based programming also addresses many of the perceived and real barriers to increased healthy eating and physical activity behaviors.
- ***The SNAP-Ed target audience is often burdened with competing priorities and schedules and SNAP-Ed programming must consider this in planning.*** Many interview participants discussed struggles with meeting the target audience where they are, or providing activities that are accessible to a busy and under-resourced population. Several interview participants also discussed the personal motivation of SNAP-eligible audiences as a barrier to reaching individuals. SNAP-Ed programming should consider motivations when planning. Engaging the community in planning will improve the likelihood of appropriate programming that will engage the audience.

## Community Partner Survey

The Centers for Excellence conducted an electronic survey with representatives of agencies working with or connected to SNAP-Ed programming in Washington from March to April 2019. Participants of the convenience sample survey were recruited through implementing agencies and local SNAP-Ed providers. Survey topics included:

- Background on clients, types of services
- Perceived level of need for SNAP-Ed topics and populations
- Barriers and opportunities for working with the SNAP-eligible populations
- Effectiveness of interventions in reaching SNAP-eligible populations

Only background participant frequency data and qualitative responses to open-ended questions were considered in this assessment. The following is a summary of survey participant background and themes from open-ended questions.

### PARTICIPANT BACKGROUND

Eighty valid respondents from 72 different organizations completed the survey. Of the total valid respondents, 60% indicated they partnered directly with SNAP-Ed. A response was considered valid if the respondent completed over 50% of the survey with varied (not marking all answers with the same rating) responses. The majority (57%) of respondents worked in food banks or food pantries. A high proportion (44%) worked in community settings. Food pantry and community settings are common locations for SNAP-Ed programming.

**As this was a convenience sample, it should be noted that responses to questions are greatly influenced by the respondents and should not be considered representative of all partners working with the SNAP-eligible population.** Detailed tables about survey participants and a list of participating organizations can be found in **Appendix E**.

## BARRIERS TO REACHING THE SNAP-ELIGIBLE POPULATION

### Key Takeaways:

Barriers to reaching the SNAP-eligible population include:

- Motivation and time
- Transportation
- Communication and knowledge of resources
- Education and skills
- Cultural concerns such as language, appropriate lessons, and immigration status
- Available resources and equipment

Survey respondents provided responses to the question “From your experience, what are the barriers to reaching SNAP-eligible populations most in need of physical activity and healthy eating programs?” The following is a summary of themes to the responses.

### Motivation and Time

The most common answer to this question involved SNAP-eligible population not being motivated or not having enough time to attend SNAP-Ed programming. Lack of motivation stems from both intrinsic motivation or disinterest and competing priorities of the SNAP-eligible population. Lack of time was often described regarding the busy lives of SNAP-eligible adults, particularly those working multiple jobs or caring for children.

### Transportation

The second most common barrier described was lack of transportation to SNAP-Ed programming. Transportation was described as both a barrier to attending SNAP-Ed programming (classes, demonstrations, activities, etc.) and to accessing food through stores or food pantries.

### Communication and Knowledge of Resources

Another common barrier was communication of activities and programming and knowledge of resources. Many respondents stated that SNAP-eligible audiences often do not know about the resources available to them and thus don't receive programming.

### Education and Skills

Lower levels of education and poor food and nutrition, cooking, and physical activity skills were also considered barriers. Many respondents described the SNAP-eligible population as having a limited level of education and skills to access and utilize SNAP-Ed resources and programming, or to sustain lessons learned.

### Cultural Concerns

Many respondents described cultural barriers to receiving SNAP-Ed programming. These barriers included immigration status, language barriers, and culturally inappropriate or irrelevant programming.

### Available Resources and Equipment

Several respondents describe limited resources and equipment to reach SNAP-eligible populations as a barrier. Resources included incentives, curriculum, and equipment such as cooking materials.

## OPPORTUNITIES TO REACH THE SNAP-ELIGIBLE POPULATION

### Key Takeaways:

Opportunities to reach the SNAP-eligible population include:

- Provide location-based services
- Build and expand partnerships
- Provide healthy eating/cooking and physical activity demonstrations
- Expand communication and outreach
- Engage the community in planning
- Provide incentives

Survey respondents provided responses to the question "What opportunities exist to reach the SNAP-Eligible populations most in need of programming?" The following is a summary of themes to the responses.

### Provide Location-Based Services/ Bring Services to Clients

The most common response to this question involved bringing services to locations where SNAP-eligible populations live, work, learn, play, and shop. The most common specific locations included food banks or pantries, schools, senior centers and churches, and housing sites.

### Build and Expand Partnerships

A common theme involved building new or expanding current partnerships to leverage resources and improve reach. Many respondents mentioned specific partnerships with organizations that have enhanced service provision.

### Provide Healthy Eating/ Cooking and Physical Activity Demonstrations

Many respondents described healthy eating and cooking and physical activity demonstrations as an opportunity to better reach the SNAP-eligible population. This often included providing food and recipes for participants.

### Expand Communication and Outreach

Several respondents stated that expanding communication and outreach efforts is an opportunity to engage more SNAP-eligible individuals. Rural outreach is a specific under-utilized opportunity.

### Engage the Community in Planning

Several respondents stated there is an opportunity to engage the community in planning SNAP-Ed activities. Increased engagement in planning is seen as an opportunity to increase participation and ownership of the activities.

### Provide Incentives

Several respondents described the use of incentives, including Food Insecurity Nutrition Incentive (FINI) vouchers, transportation costs, and meals, as an opportunity to reach SNAP-eligible populations.

## ACTIVITIES THAT BEST INFLUENCE BEHAVIOR CHANGE

### Key Takeaways:

According to survey participants, activities that best influence behavior change include:

- Provide healthy eating/cooking and physical activity demonstrations
- Implement group and family activities
- Provide direct education in schools and other sites
- Provide incentives

Survey respondents answered the question “From your experience, what types of activities best influence healthy behavior change of the SNAP-eligible populations?” The following are summary themes from the responses.

#### Provide Healthy Eating/ Cooking and Physical Activity Demonstrations

The most common response involved providing healthy eating, cooking, and physical activity demonstrations to SNAP-eligible populations.

#### Implement Group and Family Activities

Many described the benefits of group activities, classes, and lessons, including the social benefit and improved participation.

#### Provide Direct Education in Schools and Other Sites

Many stated that direct education best influenced behavior change. This included in school settings and other structured class settings.

#### Provide Incentives

Many described the effectiveness of providing incentives to the SNAP-eligible population. Incentives are considered a way to ensure participation in activities, address food insecurity, and are an ethical way to engage the community.

## Gaps Assessment

Gaps assessments include the review of current services and programming (both SNAP-Ed and other organizations) and comparing this information to the SNAP-eligible population and geography. To complete the gaps assessment, the Centers for Excellence considered the following information:

- Federal Fiscal Year 2018 program activity information reported in the Program Evaluation and Reporting System (PEARS)
- Basic Food (SNAP) claims data
- GIS mapping of eligibility, services, and resources
- Other nutrition-related programs serving low-income persons

### FFY2018 PEARS ACTIVITY DATA

The Centers for Excellence reviewed FFY2018 PEARS activity data to understand the service-provision environment of SNAP-Ed programs. PEARS data reviewed did not include indirect activities, PSE approaches, or social marketing. While this is not a complete picture of SNAP-Ed programming, this information provides insight on the target audience, settings, topics, and intervention types as well as who received SNAP-Ed services in FFY2018. The following are highlights from this review. Detailed tables of this information for Washington State and all SNAP-Ed regions can be found in **Appendix F**.

### BASIC FOOD CLAIMS DATA

For the gaps assessment, the Centers for Excellence reviewed claims data by age, race, Hispanic origin, marital status and special status (student, veteran, etc.). Claims data were not available by gender. Analysts compared claims rates by representative demographics throughout the state to determine any potential gaps in service provision. For the purpose of the gaps assessment, claims serve as a proxy for the target audience receiving support.

## SERVICE GAPS

To identify potential gaps in service provision, the Centers for Excellence compared breakdowns of demographics for all FFY2018 SNAP-Ed direct activity participants and claims recipients based on estimates for the demographic group. **Table 23** displays this information and highlights potential under or overserved populations.

**Based on review of the data, audiences potentially underrepresented by Basic Food include white, Hispanic or Latino, and adults over age 18. Non Hispanic/Latino**

**populations are potentially overrepresented by Basic Food. SNAP-Ed direct education is fairly representative for gender, race, and urban or rural status. There is a large difference in SNAP-Ed activity participation for age. While 30% of all SNAP-eligible individuals in Washington State are under 18 years of age, 64% of all SNAP-Ed participants were under 18 years of age.**

The gaps assessment is subject to limitations in the data. Estimates for gender and race are not available for individuals living at or below 185% FPL. As such, estimates are generally lower than the true SNAP-eligible population in Washington.

**Table 23. Estimates of the Target Population, Service Provision, and Gaps**

	Total Population	Percent Total Population	Estimate Eligible	Estimate # Eligible	Percent of Eligible Population	Percent Claims	Activity Participation (Total Participants)
Total	7,037,413	100%	16%	1,125,986	100%	100%	100%
Female	3,502,836	49.8%	17%	602,488	54%	NA	55%
Male	3,534,577	50.2%	15%	523,117	46%	NA	44%
<b>Race</b>							
White	5,406,760	77%	14%	767,760	74%	62%	72%
Black or African American	251,919	4%	28%	70,285	7%	10%	13%
American Indian or Alaska Native	91,418	1%	32%	29,254	3%	4%	6%
Asian	570,724	8%	13%	75,906	7%	5%	6%
Native Hawaiian and Other Pacific Islander	45,057	1%	24%	10,724	1%	3%	3%
Some other race	288,191	4%	31%	89,916	9%	NA	NA
Hispanic or Latino	865,738	15%	29%	252,795	28%	22%	27%
Not Hispanic or Latino	4,916,673	85%	13%	634,251	72%	78%	73%
<b>Age</b>							
Under 18 years of age	1,589,742	23%	32%	534,991	30%	37%	64%
Over 18 years of age	5,447,671	77%	22%	1,277,226	70%	63%	36%
<b>Location</b>							
Rural	1,605,990	22%	34%	564,290	30%	28%	34%
Urban	5,821,580	78%	25%	1,333,981	70%	72%	66%

Population demographics represent estimates of those living at or below 125% FPL ACS 2013-2017

Urban and rural represent estimates of this living at or below 185% FPL, ACS 2013-2017

 Red = 5%+ difference under estimated population (underserved)  
 Green = 5% difference over estimated population (overserved)

## GIS Analysis

The Centers for Excellence utilized GIS mapping to analyze potential service and resource gaps in Washington State. The following geographic data were included in the maps:

- FFY2018 PEARS direct activities
- Department of Social and Health Services Community Service Office (CSO) locations
- Women, Infants, and Children (WIC) locations
- Food bank locations

To identify areas with potential resource gaps, the Centers for Excellence created a 10-mile radius around direct activities, CSOs, WIC offices, and food banks. This 10-mile radius represented the likely service area of the resource. All GIS maps can be found at

<https://srhd2.maps.arcgis.com/apps/Cascade/index.html?appid=037a54116f09492b9562b403be6f26e2>.

**For Washington, geographic areas with limited SNAP-Ed activities include rural sections of northwest Washington (eastern Skagit, Snohomish, and Whatcom counties and northwest Chelan county), south central Washington (Klickitat, Skamania, and eastern Lewis counties and the Yakima Nation Reservation), and the northwestern peninsula (Clallam and Jefferson counties). SNAP-Ed activities are highly concentrated around large urban centers and transportation routes (I-5 corridor, Spokane and Yakima).**

**For Washington, geographic areas with limited services (CSOs, WIC, food banks) include central Washington and the northwest peninsula. While service coverage is good for most of the state, services are primarily located in urban centers and near major freeways and highways.**

The maps created for this analysis should also serve as a resource when planning activities and determining the target populations and geographies.

## OTHER NUTRITION PROGRAMS SERVING LOW-INCOME PERSONS

The final component of the gaps assessment involves a brief review of other nutrition programs serving low-income persons. While not exhaustive of all potential nutrition programs working with low-income populations, the following is a list that describe several

programs in Washington. The intent of this review is help SNAP-Ed program staff determine gaps in clients served and subject matter to deliver effective, but nonredundant services.

### **Expanded Food and Nutrition Education Program (EFNEP)**

**Description:** EFNEP is a diverse low-income nutrition education program that helps promote healthy eating, saving money on food, and food safety. EFNEP is targeted to serve families.

**Target Population:** Low income families

**Locations:** Four counties; Clark, Pierce, Spokane, Yakima

### **Women, Infants, and Children Nutrition Program (WIC)**

**Description:** WIC is for pregnant women, new and breastfeeding moms, and children under 5. WIC helps improve the health of mothers and children through nutrition education, breastfeeding support, monthly checks for healthy food, and health screening and referrals.

**Target Population:** Low income families

**Locations:** 215 locations throughout Washington State

### **WIC and Senior Farmers Market Nutrition Program (SFMNP)**

**Description:** SFMNP provides fresh fruit and vegetables to lower income seniors and supports local farming by increasing the use of farmers markets, roadside stands, and community supported agriculture. Produce is also purchased directly for delivery to seniors.

**Target Population:** WIC clients (WIC) and Low-income seniors (SFMNP)

**Locations:** 56 approved farm stands and 139 farmers markets statewide. No locations in Ferry, Garfield, and Lincoln counties

### **Complete Eats (FINI)**

**Description:** Shoppers can earn Complete Eats coupons at any Safeway location in Washington (except Seattle). Shoppers using EBT earn a \$5 coupon when spending \$10 on qualifying fruits and vegetables when using their SNAP/EBT card. FINI also provides fruit and vegetable “prescriptions” through health care providers including WIC and certain community health workers, that can be redeemed at participating farmers markets and grocery stores.

**Target Population:** SNAP-eligible adults

**Locations:** 256 farmers markets and grocery stores, 16 health care systems, and public health agencies

#### **Child Nutrition Program**

**Description:** Assists school districts and other institutions in providing quality nutrition programs that promote life-long healthful living while providing nutritious meals each day that prepare children for learning. Child Nutrition Programs include: National School Lunch and Breakfast Program, Child and Adult Care Food Program, Summer Food Service Program, Special Milk Program, Food Distribution, Fresh Fruit and Vegetable Program.

**Target Population:** Low income children and adults (depending on program)

**Locations:** Statewide, depends on program

#### **Older Americans Nutrition Program (Senior Nutrition Program)**

**Description:** This program aims to reduce hunger and food insecurity, promote socialization, promote health and well-being, and delay the onset of adverse health conditions for older individuals. The program offers two services: Congregate Nutrition Services and Home-Delivered Nutrition Services. The program also provides nutrition education.

**Target Population:** Older adults, individuals with disabilities, unpaid caregivers of eligible participants

**Locations:** Statewide program

#### **Food Distribution Program on Indian Reservations (FDPIR)**

**Description:** FDPIR provides food to participating Indian Tribal Organizations and state agencies from the USDA. The food is distributed to income-eligible households residing on Indian reservations or living in designated areas near reservations. The program offers two services: delivery of food and distribution of administrative funds. The program is used as an alternative to SNAP by groups who do not have easy access to SNAP offices or locations.

**Target Population:** Colville Confederated Tribes, Lummi Indian Business Council, Makah Indian Tribe, Quileute Indian Tribe, Quinault Indian Nation, Small Tribes of Western Washington, South Puget Intertribal Planning Agency, Spokane Tribe of Indians, Yakama Indian Nation

**Locations:** 8 counties in Washington State – Okanogan, Whatcom, Clallam, Grays Harbor, Pierce, Thurston, Stevens, and Yakima

#### **Commodity Supplemental Food Program (CSFP)**

**Description:** CSFP aims to improve the health of elderly people by supplementing their diets with healthy food and educate them about nutritious foods. The Washington State Department of Agriculture (WSDA) distributes food and educational resources locally. Operational funding comes from the United States Department of Agriculture.

**Target Population:** Individuals 60 years or older

**Locations:** 27 counties in Washington state, 13 lead contractors

#### **4-H**

**Description:** 4-H provides education to youth on being healthy through decision making and lifestyle choices. There are 4 types of programming: fitness, health, nutrition and safety programs. Primary focus in these programs is on youth being active and the importance of eating right. Specifically, 4-H's Healthy Habits is disseminated by Teen Healthy Living ambassadors who deliver evidence-based programming to youth.

**Target Population:** Youth 5-18 years of age

**Location:** Statewide through the WSU Extension

#### **Future Farmers of America (FFA)**

**Description:** The organization focuses on creating a path of achievement for youth in leadership, personal growth and career success through agricultural education. Programs include school-based agricultural education, which focuses on contextual inquiry-based instruction through an interactive classroom, premier leadership, personal growth and career success through engagement in FFA and experiential, service or work-based learning through supervised agricultural experience programs.

**Target Population:** Youth and young adults 12-21 years of age

**Location:** Statewide

## Systems Assessment Summary

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The assessment of the system involved a detailed analysis of the current programmatic environment SNAP-Ed operates in to identify what service providers in the community consider issues facing the SNAP-eligible population and SNAP-Ed program. Information from key-informant interviews, a community partner survey, and review of SNAP-Ed program activities and other services revealed the following themes:

- SNAP-Ed providers and partners value collaboration to both sustain and improve high-quality programming and leverage opportunities in service gaps and resources for the SNAP-eligible community. This includes continued communication and sharing resources across programs as well as professional development opportunities. SNAP-Ed is a valued partner to many organizations and increased collaboration will expand reach and better serve the target audience.
- SNAP-Ed staff value data and evaluation to improve service and ensure evidence-based, targeted programming. Local data and evaluation capacity is desired to assist providers in evaluating their services and ensuring success. SNAP-Ed providers utilize data where available.
- SNAP-eligible populations, particularly adults, are burdened with busy schedules and competing priorities. Adaptation of programming and curriculum to meet the needs of the community are essential to successful implementation. This includes consideration for competing priorities and schedules, as well as providing culturally relevant programming.
- Service need is greater than resources. Demand is high for SNAP-Ed services for all populations across the state. Leveraging partnerships provides an opportunity to address the needs and resource gaps.
- Hands-on, skill-based curriculum and activities are effective in reaching the SNAP-Ed target audience. Curriculum and activities that incorporate life skills tools and techniques, such as cooking classes and providing recipes, are engaging and desired by the target audience, particularly older audiences (teens, adults, seniors). Direct education is seen as effective for youth.
- Policy, system, and environmental (PSE) changes are identified as a need to improve health outcomes of the SNAP-Ed population, but there is limited understanding of processes for implementation and what works. Further development of techniques and programs to address PSE changes are desired and could further clarify the meaning and value of this type of work.
- Service provision is concentrated in urban centers, but many services are available throughout the state. Geographic concentration is often unavoidable due to transportation and other barriers. SNAP-Ed providers should consider available resources when planning.

# ASSESSMENT OF FORCES OF CHANGE

Information in this section and associated tables and appendices can help state, regional, and local SNAP-Ed providers:

- Consider opportunities and threats to successful implementation of the SNAP-Ed program.
- Identify ways to leverage opportunities to overcome potential threats.

The Forces of Change Assessment ensures that the leadership and planning team honors the dynamic nature of SNAP-Ed work by assessing what could happen in a complex system. The assessment will assist the leadership team in aligning strategic issues and plans to a changing environment while acknowledging the current and past climate.

On Wednesday, July 10, 2019 the Centers for Excellence facilitated the Forces of Change Assessment as the final data collection process of the statewide needs assessment. Participants included representatives from all state implementing agencies (Department of Health, Washington State University Extension, and Spokane Regional Health District) as well as representatives from the statewide evaluation team, communications, website, and training team, and the Washington State Department of Social and Health Services SNAP-Ed Program.

While separated into implementing agency groups with statewide program teams intermixed, participants brainstormed “forces” that may impact the successful implementation of the SNAP-Ed program. Participants considered any local, regional, and national forces in the following categories: social, economic, political, technological, environmental, scientific, legal, and ethical. After thinking through potential forces, the groups described broad themes and the opportunities and threats posed by these forces. The following is a summary of the themes, opportunities, and barriers from the exercise. Additional forces for each implementing agency can be found in **Appendix G**.

## Spokane Regional Health District

**Table 24** displays themes identified by Spokane Regional Health District as well as opportunities and threats posed by these themes.

Table 24. Forces of Change Themes, Opportunities, and Threats – Spokane Regional Health District		
Theme	Opportunities	Threats
Moving toward increased client/ community involvement and representation	<ul style="list-style-type: none"> <li>• Programming can better meet community needs</li> <li>• Increase our own awareness of community needs</li> <li>• May be more cost effective</li> </ul>	<ul style="list-style-type: none"> <li>• Quality and fidelity of programming</li> <li>• May require more resources</li> <li>• Alienation (if bad experience or populations not included)</li> <li>• Tradeoffs: working for \$0 or losing benefits</li> </ul>

Drug epidemics, trauma, and ACEs	<ul style="list-style-type: none"> <li>Hot topics – lots of attention and money</li> <li>Comprehensive programs</li> <li>Referrals/ social determinants of health</li> </ul>	<ul style="list-style-type: none"> <li>Priorities of community are not healthy eating and physical activity</li> <li>Will require training and resources</li> </ul>
Farm Bill	<ul style="list-style-type: none"> <li>Educating legislature</li> <li>2020 elections</li> <li>Microscope is on us</li> <li>We can now focus on measuring impact and demonstrating success</li> </ul>	<ul style="list-style-type: none"> <li>Increased divisiveness and competition</li> <li>2020 elections</li> <li>Microscope is on us</li> <li>No more money. Funding constraints</li> </ul>
Misinformation overload	<ul style="list-style-type: none"> <li>Easy to message – lots of platforms</li> <li>People are receptive to health information and educating themselves</li> </ul>	<ul style="list-style-type: none"> <li>Our message gets lost</li> <li>Distrust of government sources</li> <li>Hard to compete with well-funded industries</li> </ul>
Collective impact opportunities	<ul style="list-style-type: none"> <li>We can do more with less</li> <li>Layering approaches – reinforce message</li> <li>We can be more successful by playing to our strengths</li> </ul>	<ul style="list-style-type: none"> <li>Funding scrutiny</li> <li>Competition</li> <li>More meetings, resources needed</li> </ul>
Urban sprawl and rural life	<ul style="list-style-type: none"> <li>Stronger relationships with tribes and rural populations</li> <li>Food systems work and local economic benefits</li> <li>Creative programming and ways to reach folks</li> </ul>	<ul style="list-style-type: none"> <li>Financial – more money</li> <li>We may not reach everyone</li> <li>Time required to build trust</li> <li>If not done right, could harm relations with tribes</li> </ul>
Needs assessment and planning	<ul style="list-style-type: none"> <li>We can work in the areas with most need</li> <li>FNS will be happy</li> <li>Strategic direction and logical based decisions (justifications)</li> <li>Integrating initiatives</li> <li>Focusing more – collective buy-in</li> </ul>	<ul style="list-style-type: none"> <li>We may lose good work and partners if too reactive</li> <li>Could increase territorialism</li> <li>Could threaten relationships and progress</li> <li>Change is hard</li> <li>Need buy-in at all levels</li> </ul>
FINI	<ul style="list-style-type: none"> <li>Increase participation (incentives)</li> <li>Collective impact opportunities</li> </ul>	<ul style="list-style-type: none"> <li>Unpredictability of availability</li> <li>Inequitable distribution</li> <li>Adds to hardships (time and travel)</li> </ul>
Territorialism and competition	<ul style="list-style-type: none"> <li>More diversity, strengths, and creativity</li> <li>More intimately connected to local needs</li> <li>Passion and drive raise the bar</li> <li>Opportunities to learn from unique local work</li> </ul>	<ul style="list-style-type: none"> <li>Siloed work – not as impactful</li> <li>Lack of collective state effort – harder to measure – ultimate failure - stagnation</li> </ul>

## Washington State University Extension

**Table 25** displays the themes identified by Washington State University Extension as well as opportunities and threats posed by these themes.

<b>Table 25. Forces of Change Themes, Opportunities, and Threats – Washington State University Extension</b>		
<b>Theme</b>	<b>Opportunities</b>	<b>Threats</b>
Political uncertainty and change	<ul style="list-style-type: none"> <li>• Opposite of threats</li> <li>• Other partners stepping up -&gt; less dependent on a single funding sources, opportunity to explore blended funding</li> </ul>	<ul style="list-style-type: none"> <li>• Defunding of SNAP</li> <li>• Changes in representation</li> <li>• Changing guidelines, guidance, laws, that are more restrictive, favorable to corporations, less favorable to local</li> <li>• Decreased services to underserved populations</li> <li>• Increased unemployment</li> <li>• Administration unsupportive of SNAP</li> </ul>
Representativeness, inclusion, diversity	<ul style="list-style-type: none"> <li>• Training staff</li> <li>• Diversity in who has skills</li> <li>• Representation in materials</li> <li>• Reviewing curriculum and service delivery for inclusion, cultural appropriateness</li> <li>• Evolving strategies to engage more communities</li> <li>• Recruit and hire those who look like those they serve</li> <li>• Allowing changes in service delivery</li> </ul>	<ul style="list-style-type: none"> <li>• Emboldened radical ideas</li> <li>• Increased disenfranchisement</li> <li>• Less trust in government</li> <li>• Increased chronic stress and trauma</li> <li>• Bias in workplace = less diverse staff</li> </ul>
Well-funded, powerful counter messages to healthy behavior	<ul style="list-style-type: none"> <li>• Social media to counter campaigns</li> <li>• PSE: make healthy environments easier</li> <li>• Policies for healthy foods</li> <li>• Using healthy foods and behaviors to increase revenue for schools</li> <li>• Leverage effective healthy campaign messages (Seahawks/ champions)</li> </ul>	<ul style="list-style-type: none"> <li>• They influence our target audience</li> <li>• Influence partners, strategies</li> <li>• Sponsoring guiding agencies and voices</li> </ul>

Increased reach of technology	<ul style="list-style-type: none"> <li>• More opportunities to share message, reach more (if they have access)</li> <li>• Online classes can increase reach</li> </ul>	<ul style="list-style-type: none"> <li>• Increased screen time and decreased physical activity</li> <li>• Conflicting messages – hard to tell good and bad</li> <li>• Increased isolation</li> <li>• Online EBT/ shopping hurting small business</li> <li>• Delivery increases waste and emissions</li> <li>• Increased wealth gap</li> </ul>
Changing physical and built environment	<ul style="list-style-type: none"> <li>• Partner with city and transportation planners</li> <li>• Undercurrent for all other factors</li> <li>• Built environment design</li> </ul>	<ul style="list-style-type: none"> <li>• Food system and water at risk and uncertainty</li> <li>• Larger cities, more depressed rural areas</li> <li>• Undercurrent to all</li> <li>• Built environment design</li> </ul>
Increased interest in engagement in sustainable practices	<ul style="list-style-type: none"> <li>• Increased opportunity to grow their own food and make money</li> <li>• Increased interest in food gardens over grass</li> <li>• Increased consciousness in reducing waste</li> <li>• Spin budget conscious to sustainable conscious</li> <li>• Sustainable policy changes and influence</li> <li>• Working with food banks</li> <li>• Bridging physical activity and healthy eating (gardening as exercise)</li> </ul>	<ul style="list-style-type: none"> <li>• SNAP-eligible populations don't have access to these resources</li> <li>• Cultural/ economic gap increases</li> <li>• Increased price in products</li> <li>• Infrastructure not in place to make accessible to low income/ SNAP (EBT system at farmers markets broken)</li> </ul>

## Washington State Department of Health

**Table 26** displays the themes identified by Washington State Department of Health as well as opportunities and threats posed by these themes.

Table 26. Forces of Change Themes, Opportunities, and Threats – Washington Department of Health		
Theme	Opportunities	Threats
Access to healthy food is a challenge	<ul style="list-style-type: none"> <li>• Farm stands growing own food – community gardens</li> <li>• Developing pathways/ avenues to capture food waste</li> <li>• Change what food is offered – food systems</li> <li>• Capitalize on community participatory approaches – help communities solve access in a way that meets their needs health</li> </ul>	<ul style="list-style-type: none"> <li>• Can't encourage healthy choice if access doesn't exist (can't change behavior without choice)</li> </ul>

<p>Insecure/ instabilities in federal government funding</p>	<ul style="list-style-type: none"> <li>• Build in sustainability measures</li> <li>• “Claim” and market success through evaluation and communication</li> <li>• Improve framing work</li> <li>• Programs building off each other</li> <li>• Work to identify efficiencies together</li> <li>• Leveraging/ building on other programs, avoid duplication of efforts</li> </ul>	<ul style="list-style-type: none"> <li>• Can/ will program survive and at what levels</li> <li>• Threatens sustainability of programs</li> </ul>
<p>Rapidly changing technology</p>	<ul style="list-style-type: none"> <li>• Can counteract misinformation by capitalizing on social media – increase visibility</li> <li>• Piloting new program delivery modes</li> <li>• Spin the “new thing” toward healthy good, prevent waste</li> </ul>	<ul style="list-style-type: none"> <li>• Hard for program to keep up with changes</li> <li>• Increases misinformation</li> <li>• Program has not been built to deliver services through technological means</li> <li>• Changing food packaging and delivery</li> </ul>
<p>Sustained culture of obesity</p>	<ul style="list-style-type: none"> <li>• Use stages of change to meet people where they are</li> <li>• Statewide concerted effort</li> <li>• Deep dive story with audience (sub-pop) long-term to see change</li> <li>• Reinforce public health best practices (multi-layered approaches/ environments)</li> <li>• Transformation</li> <li>• Concentrating programming</li> </ul>	<ul style="list-style-type: none"> <li>• If it is sustained, hard to prove program impact at population level</li> </ul>
<p>Food industry (conflicting science)</p>	<ul style="list-style-type: none"> <li>• Community empowered (their voice, work their system)</li> <li>• Advocacy like sugar tax</li> <li>• Program prioritization – maximize impacts, community participating</li> </ul>	<ul style="list-style-type: none"> <li>• Hard to compete with industry about messages</li> </ul>
<p>Shifting demographics: need to be adaptable and proactive to maintain relevance</p>	<ul style="list-style-type: none"> <li>• Groundwork being laid to increase communication within the leadership team</li> <li>• DEI goals, training and resources</li> <li>• More time flexibility in grant cycle</li> <li>• Build in flexibility in 3-year plan</li> <li>• Need to build in time for reflection and planning – refresh plans for relevancy</li> <li>• Structural organization to map what we do</li> <li>• Enhanced marketing</li> </ul>	<ul style="list-style-type: none"> <li>• Hard to forecast need</li> <li>• Makes communicating and planning challenging</li> <li>• Continued or lack of communication</li> <li>• Can’t be a resource for a community if we can’t adapt</li> </ul>

## Forces of Change Summary

**Several dominant themes emerged from the forces of change assessment. Those themes mentioned across all groups performing the exercise include:**

- Adaptation and inclusion of the community and diverse clients in the face of changing demographics.
- Planning in the face of political uncertainty and change.
- Addressing conflicting, often counter messaging, from the food industry, political and social lobbies, and scientific community.
- Adapting to and addressing changing technology.
- Addressing the physical and built environment and challenges to access to healthy food and resources.

# SYNTHESIS AND CONCLUSIONS

The four components of the needs assessment revealed detailed information about SNAP-Ed target population, priority content and focus of SNAP-Ed interventions, and suggestions for successful implementation of SNAP-Ed programming. The following sections describe the synthesized themes for these topics as well as recommendations based on the findings. While the Centers for Excellence provided recommendations, implementing agencies, local providers, and all SNAP-Ed staff are encouraged to consider the results of the needs assessment holistically and make programmatic decisions that fit the SNAP-Ed community and environment.

## Population Findings and Recommendations

### GEOGRAPHIC LOCATIONS

The SNAP-eligible population live in diverse geographic locations throughout the state from densely populated urban centers to remote rural communities. In 2018, an estimated 30% of all SNAP-eligible individuals lived in rural counties, while 70% lived in urban counties. The five counties with the highest rate of SNAP-eligibility are rural. These estimates may not be completely accurate, as many SNAP-eligible individuals live in rural parts of urban counties, for instance rural communities outside of Seattle, Tacoma, and Spokane.

Services for SNAP-eligible populations tend to concentrate in urban centers and along main transportation routes. Based on GIS mapping analysis, areas with limited service include rural northwest and central Washington, south and east central Washington, and the northwest peninsula. Locations with limited service often include areas with high concentrations of public or park land or are located far from high traffic transportation routes.

### POPULATIONS WITH HIGH ELIGIBILITY AND NEED

Throughout Washington State, the SNAP-eligible population faced higher rates of obesity and food insecurity than the non-eligible population. In 2017, over 600,000 SNAP-eligible adults in Washington State experienced food insecurity, and nearly one million SNAP-eligible adults could be considered overweight. Differences in eligibility, food and nutrition, physical activity, and food security rates existed between demographic groups throughout Washington. Specifically:

- 18-24-year-old adults had the highest rate (40%) of eligibility among all age groups in Washington. Youth under 6 and ages 6-11 also had high rates of eligibility compared to other age groups (36% and 34% respectively).
- Based on family structure, single mothers (59%) and female householders with no husband present (47%) had the highest rate of eligibility.
- American Indian and Alaska Native, other race, black, and Hispanic populations had disproportionately higher rates of SNAP-eligibility than other races and ethnicities.
- Adult American Indian and Alaska Native, other race, Hispanic, and individuals with a high school education or lower experienced disproportionate rates of being overweight or obese.
- Youth American Indian or Alaska Native, black, Hispanic, and youth whose mothers have lower educational attainment experienced disproportionate rates of being overweight or obese.
- Adult females, American Indian or Alaska Native, black, Hispanic, other race, and individuals with less than a high school education or some college experienced disproportionate rates of food insecurity.
- Youth females, American Indian or Alaska Native, black, Hawaiian or other Pacific Islander, white, other race, and older students (grade 12) experienced disproportionate rates of food insecurity.

The Centers for Excellence conducted Latent Class Analysis to identify subgroups among the Washington State youth SNAP-eligible population, as well as discover patterns in groups with similar outcomes and behaviors. Based on this analysis, the Centers for Excellence identified the following:

- The majority (65%) of SNAP-eligible youth belonged to low structure subgroups. Low structure is defined as lower rates of eating breakfast and eating dinner with the family, high rates of screen time, and lower rates of adequate sleep.
- SNAP-eligible youth in the high structure subgroups had consistently lower rates of being overweight and obese, food insecurity, suicide ideation, and depression.

Through focus groups with the SNAP-eligible population, key-informant interviews with SNAP-Ed staff, and a community partner survey, the following barriers to healthy behaviors were identified:

- The SNAP-Ed population is burdened with busy schedules and conflicting priorities. These barriers greatly impact motivation and availability to participate in SNAP-Ed activities.
- Transportation is consistently a barrier to accessing healthy resources. This is true for both urban and rural populations.
- Life skills such as cooking, shopping on a budget, and participating in appropriate and adaptive physical activity are lacking for many community members, preventing them from participating in healthy behaviors.
- Cultural concerns such as appropriate topics and interventions, language barriers, and concerns about immigration status are consistently a barrier to reaching the SNAP-eligible population.
- Financial barriers persist and often overshadow knowledge and skills when addressing healthy food and nutrition and physical activity behaviors.

## RECOMMENDATIONS

- Where possible, SNAP-Ed program staff should target interventions in locations and among communities with disproportionate rates of poverty and adverse food and nutrition, physical activity, and food security rates. Specifically, young adults, single parents, American Indian or Alaska Native, black, and Hispanic populations had consistently disproportionate rates of poverty, obesity, and food insecurity. While not always possible to reach communities with disproportionate rates due to resources and geographic barriers, SNAP-Ed program staff should make efforts to understand challenges within their specific community and address needs in a culturally appropriate manner.<sup>17</sup>
- SNAP-Ed program staff should account for differences in the food and nutrition, physical activity, and food security environments of rural communities and develop activities that reflect their situation.<sup>18</sup> Specific concerns related to rural communities include challenges with access and transportation, as well as limited services in their communities.

<sup>17</sup>Glanz, Karen, Barbara K. Rimer, and Kasisomayajula Viswanath, eds. Health behavior and health education: theory, research, and practice. John Wiley & Sons, 2008.

<sup>18</sup>Dean, Wesley R., and Joseph R. Sharkey. "Rural and urban differences in the associations between characteristics of the community food environment and fruit and vegetable intake." *Journal of nutrition education and behavior* 43.6 (2011): 426-433.

## Content Findings and Recommendations

### PRIORITY TOPICS

The goal of SNAP-Ed is “to improve the likelihood that persons eligible for SNAP will make healthy food choices within a limited budget and choose physically active lifestyles consistent with the current DGA and the USDA food guidance.”<sup>19</sup> Washington State SNAP-eligible individuals often experience different rates of food and nutrition and physical activity outcomes than the non-eligible populations. The needs assessment revealed several potential priority topics. Through comparison among SNAP-eligible and non-eligible rates, the needs assessment identified the following adult food and nutrition and physical activity topics where the SNAP-eligible population consistently performed lower than the non-eligible population:

- Food insecurity
- Physical activity

Similar to adult populations, the needs assessment identified the following youth food and nutrition and physical activity topics where the SNAP-eligible population consistently performed lower than the non-eligible population:

- Food insecurity
- Obesity
- Physical activity

Demographic disparities related to food and nutrition and physical activity behaviors also exist among SNAP-eligible adults and youth. These disparities include:

- Adult Asian, American Indian and Alaska Native, Hispanic, and adults with lower levels of educational attainment had disproportionately lower rates of physical activity.
- Adults with lower levels of educational attainment had disproportionately lower rates of fruit and vegetable consumption.
- Youth females, black, white, and youth whose mothers had lower levels of educational attainment had disproportionately lower levels of fruit and vegetable consumption.

- Youth females, American Indian and Alaska Native, Asian, black, Hispanic, older youth and youth whose mothers had lower levels of educational attainment have disproportionately lower levels of physical activity.

The Centers for Excellence conducted Latent Class Analysis to identify subgroups among the Washington State youth SNAP-eligible population, as well as discover patterns in groups with similar outcomes and behaviors. Based on this analysis, the Centers for Excellence determined the following topical information:

- Based on variance in behavior, subgroups were distinguished by the latent construct of structure and by physical activity.
- Membership in high structure subgroups is highly predictive of lower rates of food insecurity.
- Membership in high structure subgroups is highly predictive of lower rates of being overweight or obese.
- Membership in high physical activity subgroups is predictive of lower rates of being overweight or obese and food insecure, but less so than membership in high structure subgroups.
- Healthy eating behaviors such as fruit and vegetable consumption or drinking less than two sweet drinks per day were not distinguishing factors in subgroups.

Through analysis and severity scoring based on change in indicator, differences between the eligible and non-eligible population, demographic disparities, and overall magnitude, the Centers for Excellence determined the following topics to be of highest severity in Washington:

- Youth physical activity
- Youth fruit and vegetable consumption
- Adult food insecurity

SNAP-Ed program staff, the community, and community partners also provided insight into priority topics for the SNAP-eligible population. Results regarding priority topics from community themes include:

- Life skills and practical education are important factors in the health of the SNAP-eligible population.
- Topics of importance depend greatly on the physical and social environment of the SNAP-eligible population.

<sup>19</sup> FY 2019 SNAP-Ed Plan Guidance. <https://snaped.fns.usda.gov/snap/Guidance/FY2019SNAPedPlanGuidanceFULL.pdf>.

## RECOMMENDATIONS

- SNAP-Ed program staff should consider topics that have high rates of disproportionate outcomes among the target audience such as physical activity and food security and are highly predictive of adverse outcomes (obesity and food insecurity) when developing programming including increasing structure and consistent habits such as eating breakfast, eating dinner with the family, reducing screen time and getting adequate sleep. SNAP-Ed staff may need to consider creative approaches when addressing these topics and should work directly with the target population to determine culturally appropriate and relevant program activities.
- Where appropriate, SNAP-Ed program staff should consider activities and education that focus on skill-based whole family health and healthy routine behaviors such as eating breakfast, eating dinner with the family, limiting screen time, and getting sleep. Membership in high structure subgroups is highly predictive of health for the youth SNAP-Ed population, and programming should reflect this whenever possible. Life skills education and training such as cooking classes and physical activity demonstrations support these topics and is well-received by the SNAP-eligible population.<sup>20</sup>
- While not as predictive of obesity and food insecurity, youth fruit and vegetable consumption rates are consistently low across all Washington youth, including both the eligible and non-eligible population. Healthy eating, including fruit and vegetable consumption for youth, is considered a topic of high importance by SNAP-Ed program staff and community partners and should be reinforced effectively through SNAP-Ed activities and education.<sup>21</sup> The consistently low rates of fruit and vegetable consumption make this a topic well-tailored to mixed populations (i.e. schools).

## SNAP-Ed Program Process Findings and Recommendations

### COMMUNITY-BASED SUGGESTIONS

Through focus group discussions with over 230 participants in every SNAP-Ed region in Washington State, the following themes emerged:

- Social connectivity and accountability influence participation in healthy behaviors.
- SNAP-Ed activities should reflect the needs of the community and planning should include community input.
- Improved communication of available resources will improve participation in activities and assist the SNAP-eligible community in accessing food and nutrition, physical activity, and food security services and resources available to them.
- Rural audiences face unique situations and programming should reflect this.
- Financial barriers are drivers for healthy behaviors and programming and activities that address these are effective.

<sup>20</sup> Ciliska, Donna, et al. "Effectiveness of community-based interventions to increase fruit and vegetable consumption." *Journal of Nutrition Education* 32.6 (2000): 341-352.

<sup>21</sup> Wall, Denise E., et al. "Nutrition education intervention improves vegetable-related attitude, self-efficacy, preference, and knowledge of fourth-grade students." *Journal of School Health* 82.1 (2012): 37-43.

## SNAP-ED PROCESSES

Through key-informant interviews, focus groups, a community partner survey, and a forces of change assessment, the following themes regarding current SNAP-Ed processes emerged:

- The Washington State SNAP-Ed program values diverse partnerships. Programming is enhanced through increased collaboration.
- SNAP-Ed staff value data and evaluation to improve and sustain high-quality programming.
- Adaptation of approved activities and curriculum is critical to the success of SNAP-Ed programming and supports equity among SNAP-Ed participants.
- SNAP-eligible populations, particularly adults, are burdened with busy schedules and competing priorities. SNAP-Ed programming should reflect these barriers.
- Political uncertainty and change must be addressed when planning SNAP-Ed activities.
- SNAP-Ed programming should reflect the changing technological, physical, and environmental realities of the SNAP-eligible population.
- The Washington State SNAP-Ed program should expand program staff's ability to consistently assess and evaluate their program activities to ensure effective and adaptive programming. Assessment and evaluation capacity at all levels (state to local) is necessary to ensure quality programming and will enhance outside support through communication of successes.
- SNAP-Ed program staff should continue expanding and enhancing partnerships and support collaboration among program units.
- The Washington State SNAP-Ed program should expand and enhance communication of resources and activities. Communication should be culturally appropriate and adaptive (i.e. in different languages).

## OPPORTUNITIES

Several additional opportunities for successful implementation of SNAP-Ed programming were identified through the assessment. Specifically:

- Improving partnerships to leverage resources
- Providing location-based services to reach SNAP-eligible populations where they live, learn, eat, work, play, and shop
- Utilizing hands-on, skill-based programming to engage SNAP-eligible populations and improve healthy behaviors
- Providing incentives such as FINI to increase participation and support the SNAP-eligible community

## RECOMMENDATIONS

- SNAP-Ed program staff should engage the target audience directly in planning appropriate SNAP-Ed activities. Participatory planning will enhance the effectiveness of interventions and ensure that culturally appropriate activities and messages are being promoted.<sup>22, 23</sup>

<sup>22</sup> Kok, Gerjo. "A practical guide to effective behavior change: How to apply theory-and evidence-based behavior change methods in an intervention." (2018).

<sup>23</sup> Glanz, Karen, Barbara K. Rimer, and Kasisomayajula Viswanath, eds. Health behavior and health education: theory, research, and practice. John Wiley & Sons, 2008.

# APPENDIX A: KEY-INFORMANT INTERVIEW GUIDE AND PARTICIPANTS

## SNAP-Ed Needs Assessment Key-Informant Interview Guide

### Local Providers

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#### **Introduction:**

Good morning/ afternoon. Thank you for taking the time to speak with me today. My name is [NAME] and I work in the Data Center at Spokane Regional Health District. Our program has partnered with The Washington State SNAP-Ed program to conduct a statewide needs assessment. The goal of the assessment is to determine the physical activity and obesity prevention needs of the Washington SNAP-eligible population as well as evaluate the use of best practice interventions and any barriers to implementation.

Today, we would like to talk with you about your experience with the SNAP-Ed program and your perspective on the physical activity and obesity prevention needs of the SNAP-eligible population in your area. The information you provide today will help guide program planning and evaluation goals and activities for the upcoming multi-year SNAP-Ed plans.

As we go through our discussion, I would like you to remember that there are no right or wrong answers to any of these questions. We are just interested in learning about program operations and your opinion on the needs of the SNAP-eligible population. The information collected today is not related to any formal management evaluation by the funder or your implementing agency. Reporting of the information will be aggregated across all programs in Washington State and your responses will not be directly attributed to yourself or your organization. We will be taking notes from today's conversation.

We greatly appreciate your help with this assessment. This interview will take approximately 25-30 minutes. Do you have any questions before we begin?

#### **Interview Questions:**

1. Can you briefly describe the process your program uses to select SNAP-Ed activities, audiences, and locations?
  - a. Do you receive guidance from your implementing agency on types of activities, audiences, and locations?
2. How does your program ensure you are utilizing best practices?
  - a. What resources do you utilize to ensure you are utilizing best practices?
3. In your experience, what audience (age, sex, education, etc.) is most in need of SNAP-Ed programming in your area?  
Why do you think this?
4. What physical activity or obesity prevention topics are most in need of addressing?
5. In your experience, are there any populations that are underserved in your area? This can include specific groups or geographies.
  - a. Are there populations that are overserved?
6. In your opinion, what are the barriers to reaching the SNAP-eligible populations most in need of programming?
7. What opportunities exist to reach the SNAP-eligible populations most in need of programming?

#### **Transition:**

The next phase of our interviews involves reaching out to community partners.

8. Are you willing/ able to provide contact information of community partners in your region that can participate in an interview?
9. Do you have any final comments or questions?

#### **Conclusion:**

Thank you for taking the time to talk with us. We will be providing regular updates on the progress of the assessment and any results as they become available.

## Participants

### REGION 1:

Bridget Rohner, WSU Extension Lincoln-Adams counties  
Christine Knoefler, WSU Extension Pend Oreille County  
Jesse Hansen, Catholic Charities of Spokane  
Margaret Viebrock, WSU Extension Chelan, Douglas, Okanogan counties  
Mindy Wallis, Second Harvest

### REGION 2:

Brittany Gonzalez, Yakima Valley Farm Workers Clinic  
Chelsey Loeffers, Kittitas County Public Health  
Katie Smith, Yakima Neighborhood Health Services  
Mindy Wallis, Second Harvest

### REGION 3:

Amber Noskoff, WSU Extension Whatcom County  
Carrie Parker, Snohomish Health District  
Jen Hey, WSU Extension  
Jessica Moerman & Laura Plaut, Common Threads Farm  
Laura Luginbill, Island County Public Health  
Talea Price, WSU Extension Skagit County  
Tori Sorenson, WSU Extension Snohomish County

### REGION 4:

Anna Kitchin, WSU Extension King County  
Chelsea Lindahl & Erica Lewis & Hope Roberts,  
Elizabeth Kimball, Seattle and King County Public Health  
Linda Matthews, WSU Extension Pierce County  
Stephanie Wood, Tacoma Pierce County Health District

### REGION 5:

Dana Bierman, Kitsap Public Health  
Eileen Grigsby, Thurston County Food Bank  
Elizabeth Stratton, WSU Extension  
Karlana Brailey & Kristine Perry, WSU Extension Clark County  
Rachel Uberman, Hands On Personal Empowerment

## APPENDIX B: COMMUNITY PARTNER SURVEY

Thank you for your participation. The Washington State SNAP-Ed program is conducting a statewide needs assessment to determine the nutrition, physical activity, and obesity prevention needs of the SNAP-eligible population, and identify barriers to accessing healthy food and engaging in physical activity. You have been identified by SNAP-Ed providers as a partner or someone supporting the work of SNAP-Ed. Please take a few minutes to complete this survey.

1. Organization name:
2. Which county does your organization primarily work in?
3. Please tell us which of the following options best describes the type of organization you represent.
  - Agriculture organization (including farmers markets)
  - Chefs/ culinary institutes
  - City and regional planning groups
  - Early care and education facilities (includes child care centers and day care homes as well as Head Start, preschool, and pre-kindergarten programs)
  - Faith-based groups
  - Food banks/ food pantries
  - Food stores (convenience stores, grocery stores, supermarkets, etc.)
  - Foundations/ philanthropy organizations/ nonprofits
  - Hospitals/ healthcare organizations (includes health insurance companies)
  - Hospitals/ healthcare organizations (includes health insurance companies)
  - Indian Tribal organizations
  - Labor/ workforce development groups
  - Media/ advertising groups
  - Parks and recreation centers
  - Public health organizations
  - Restaurants
  - Schools (preschool, K-12, elementary, middle school, high school)
  - Transportation groups
  - Worksites
  - Other (please describe)
4. Please identify the type of clients you primarily serve (Select all that apply)
  - Preschool students or age youth
  - Elementary school students or age youth
  - Middle school students or age youth
  - High school students or age youth
  - Pregnant/ breastfeeding women
  - Parents/ mothers/ fathers
  - Adults aged 65 and older/ seniors
  - Homeless
  - Food bank/ food pantry clients
  - Other (please describe)
5. In which type of setting does your organization work? (Select all that apply)
  - Community gardens
  - Farmers markets
  - School gardens
  - Child care Community

- Faith-based community
- Health care
- Retail (shop/eat)
- School
- Worksite
- Other (please describe)

6. What type of service does your organization provide? (Select all that apply)

- Direct education to children or adults
- Resource provision (vouchers, incentives, financial, food, etc.)
- Emergency services (heating assistance, emergency housing assistance, advocacy for victims)
- Housing services
- Transportation services
- Employment services (employment and training services)
- Health services (health insurance, health care, health management)
- Child care services
- Other (please describe)

7. Do you currently work with individuals or organizations that provide SNAP-Ed services?

- Yes
- No
- Don't know

The intent of the SNAP-Ed statewide needs assessment is to determine the nutrition and physical needs and barriers to accessing resources of the SNAP-eligible population. Please complete the following section about your experience with your clients. The following question will ask you to rate what you perceive is the level of need of various populations as it relates to the identified issue.

Q8 In my community, for the identified sub-population, **HEALTHY EATING** is of:

	High or Severe Need	Moderate/ Substantial Need	Low/ Somewhat of a Need	No Need	Don't Know/ Not Applicable
Preschool age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elementary age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Middle school age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High school age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parents of preschool age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parents of elementary age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parents of middle school age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parents of high school age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pregnant/ breastfeeding women	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Adults	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Older adults/ seniors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Homeless	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Food pantry clients	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q9 In my community, for the identified sub-population, **FOOD RESOURCE MANAGEMENT** is of:

	High or Severe Need	Moderate/ Substantial Need	Low/ Somewhat of a Need	No Need	Don't Know/ Not Applicable
Preschool age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elementary age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Middle school age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High school age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parents of preschool age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parents of elementary age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parents of middle school age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parents of high school age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pregnant/ breastfeeding women	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Adults	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Older adults/ seniors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Homeless	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Food pantry clients	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q10 In my community, for the identified sub-population, **PHYSICAL ACTIVITY and REDUCED SEDENTARY BEHAVIOR** is of:

	High or Severe Need	Moderate/ Substantial Need	Low/ Somewhat of a Need	No Need	Don't Know/ Not Applicable
Preschool age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elementary age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Middle school age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High school age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parents of preschool age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parents of elementary age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parents of middle school age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parents of high school age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pregnant/ breastfeeding women	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Adults	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Older adults/ seniors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Homeless	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Food pantry clients	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q11 In my community, for the identified sub-population, **FOOD SAFETY** is of:

	High or Severe Need	Moderate/ Substantial Need	Low/ Somewhat of a Need	No Need	Don't Know/ Not Applicable
Preschool age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elementary age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Middle school age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High school age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parents of preschool age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parents of elementary age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parents of middle school age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parents of high school age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pregnant/ breastfeeding women	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Adults	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Older adults/ seniors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Homeless	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Food pantry clients	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

12. From your experience, what are the barriers to reaching SNAP-eligible populations most in need of physical activity and healthy eating programs?

13. What opportunities exist to reach the SNAP-eligible populations most in need of programming?

Q14 In reaching the identified sub-population, I believe that **DIRECT EDUCATION** (classroom or training education using established curriculum) is:

	Very effective	Moderately effective	Somewhat effective	Slightly effective	Not effective	Don't Know/ Not Applicable
Preschool age youth	<input type="radio"/>					
Elementary age youth	<input type="radio"/>					
Middle school age youth	<input type="radio"/>					
High school age youth	<input type="radio"/>					
Parents of preschool age youth	<input type="radio"/>					
Parents of elementary age youth	<input type="radio"/>					
Parents of middle school age youth	<input type="radio"/>					
Parents of high school age youth	<input type="radio"/>					
Pregnant/ breastfeeding women	<input type="radio"/>					
Adults	<input type="radio"/>					
Older adults/ seniors	<input type="radio"/>					
Homeless	<input type="radio"/>					
Food pantry clients	<input type="radio"/>					

Q15 In reaching the identified sub-population, I believe that **SOCIAL MARKETING/ ADVERTISING** is:

	Very effective	Moderately effective	Somewhat effective	Slightly effective	Not effective	Don't Know/ Not Applicable
Preschool age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elementary age youth	<input checked="" type="radio"/>	<input type="radio"/>				
Middle school age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High school age youth	<input checked="" type="radio"/>	<input type="radio"/>				
Parents of preschool age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parents of elementary age youth	<input checked="" type="radio"/>	<input type="radio"/>				
Parents of middle school age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parents of high school age youth	<input checked="" type="radio"/>	<input type="radio"/>				
Pregnant/ breastfeeding women	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Adults	<input checked="" type="radio"/>	<input type="radio"/>				
Older adults/ seniors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Homeless	<input checked="" type="radio"/>	<input type="radio"/>				
Food pantry clients	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q16 In reaching the identified sub-population, I believe that **POLICY, SYSTEMS and ENVIRONMENTAL (PSE) CHANGES** are:

	Very effective	Moderately effective	Somewhat effective	Slightly effective	Not effective	Don't Know/ Not Applicable
Preschool age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elementary age youth	<input checked="" type="radio"/>	<input type="radio"/>				
Middle school age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High school age youth	<input checked="" type="radio"/>	<input type="radio"/>				
Parents of preschool age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parents of elementary age youth	<input checked="" type="radio"/>	<input type="radio"/>				
Parents of middle school age youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parents of high school age youth	<input checked="" type="radio"/>	<input type="radio"/>				
Pregnant/ breastfeeding women	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Adults	<input checked="" type="radio"/>	<input type="radio"/>				
Older adults/ seniors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Homeless	<input checked="" type="radio"/>	<input type="radio"/>				
Food pantry clients	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Q17** In reaching the identified sub-population, **HEALTHY EATING/ COOKING AND PHYSICAL ACTIVITY DEMONSTRATIONS** are:

	Very effective	Moderately effective	Somewhat effective	Slightly effective	Not effective	Don't Know/ Not Applicable
Preschool age youth	<input type="radio"/>					
Elementary age youth	<input type="radio"/>					
Middle school age youth	<input type="radio"/>					
High school age youth	<input type="radio"/>					
Parents of preschool age youth	<input type="radio"/>					
Parents of elementary age youth	<input type="radio"/>					
Parents of middle school age youth	<input type="radio"/>					
Parents of high school age youth	<input type="radio"/>					
Pregnant/ breastfeeding women	<input type="radio"/>					
Adults	<input type="radio"/>					
Older adults/ seniors	<input type="radio"/>					
Homeless	<input type="radio"/>					
Food pantry clients	<input type="radio"/>					

18. From your experience, what types of activities best influence healthy behavior change of SNAP-eligible populations? Please provide any specific examples.

19. Please provide any additional comments or information you would like us to know.

# APPENDIX C: FOCUS GROUP GUIDE AND LOCATIONS

## Focus Group Discussion Guide

### **Opening remarks/ground rules:**

“Welcome. My name is [NAME] and I work for the Centers for Excellence. We have been asked to do an evaluation of the SNAP-ED program, and to gather your feedback about healthy eating and physical activity to guide program planning and evaluation efforts for the state and region. I will be the moderator for today’s discussion. Thanks for taking the time to be here today. Our discussion will last about one hour as a token of our appreciation we will provide a \$15 gift certificate to a grocery store which will be mailed to you in the next couple of weeks.”

“The purpose of today’s discussion is to get information from you about your physical activity and healthy eating behaviors as well as discuss any barriers to being active or eating healthy. You were invited to this discussion because of your connection to this community and engagement with local programs.”

“There are no right or wrong answers to the questions I am about to ask. Please feel free to share your point of view even if it’s different from what others have said. To show our respect to the group I ask that we be mindful to not interrupt each other, please make sure that you cell phones are on vibrate, and if you need to take emergency-calls, feel free to leave the room.

“We’re interested in hearing from all of you. So, if you’ve shared already, please give others a chance to speak first. If you aren’t saying much, I may call on you. We just want to make sure we hear from all of you. Feel free to get up to get refreshments or use the bathroom. The bathrooms are [LOCATION]”

“Are there any questions before we begin?”

(Adapted from Rennekamp Univ of Kentucky, following Krueger and Casey, 2000)

### **Opening Questions/ Ice Breaker**

1. Please tell us your first name, and your favorite fruit or vegetable or favorite way to get physical activity?

### **Transition**

“Being active is an important part of a healthy lifestyle. According to the Physical Activity Guidelines established by the United States Department of Health and Human Services, adults should move more and sit less throughout the day, with substantial health benefits coming from two and a half to five hours of moderate-intensity aerobic physical activity per week.”

“There are several reasons **IF RECORDING CONVERSATION:**

“We are recording the conversation today because we don’t want to miss any of your comments. People often say very helpful things in these discussions and we can’t write fast enough to get them all down. We will be on a first name basis tonight, and we won’t use any names in our reports. Transcripts of this conversation will only be seen by data analysts for the SNAP-Ed Program. What you share will be confidential and your participation in this group will not affect your participation in SNAP-Ed or from receiving any services.

why adults and children do not get enough physical activity. Today, we would like to discuss the types of physical activity you participate in and any challenges you experience in getting enough physical activity. For today’s discussion, physical activity can include anything from walking and gardening to exercising in a gym or at home.”

### **Physical Activity Questions**

2. What type of physical activity do you prefer to do?
3. What motivates you to be physically active?
4. What keeps you from participating in things that are physically active?
5. What would help you overcome those barriers (physical activity)?

### Transition

“Now we would like to discuss healthy eating. When we are hungry, it is sometimes hard to select healthy options over less healthy options that are available to us.”

### Healthy Eating Questions

6. When you're hungry, what makes it harder for you to eat healthy foods?
  - a. Probe: What makes it hard to eat healthy foods when you're on the go, at a restaurant, or away from home?
  - b. Probe: What makes it harder for you to select healthy foods from a grocery store?
7. What would help you eat healthier foods?
  - a. Probe: When on the go or in a restaurant? When selecting health food in a grocery store?

### Closing

“You've shared a lot today about physical activity and healthy eating behaviors and barriers to improving our health. Thank you for your participation today. Please make sure to fill out the sheet with your contact information in order to get your gift card as a token of our appreciation. We will not be sharing this information with anyone. This information will not be connected with transcripts of this conversation.”

## Locations

Region	City	Location
Region 1	Davenport	Lincoln Hospitable Board Room
Region 1	Spokane (x2)	Spokane Regional Health District
Region 1	Deer Park	Chamber of Conference
Region 1	Omak	Food Bank
Region 1	Mattawa	Community Medical Center
Region 1	Colville	Church of the Nazarene
Region 1	Wenatchee	YWCA
Region 2	Pullman	Community Action Center
Region 2	Walla Walla	Food Bank
Region 2	Yakima	DSHS office
Region 2	Ellensburg	James Crouse Conference Room
Region 3	Mt Vernon	Goodwill
Region 3	Oak Harbor	Crescent Harbor Elementary School
Region 3	College Place	College Place Elementary
Region 3	Bellingham	Mercy Housing
Region 3	Bellingham	Goodwill
Region 4	Renton	Compass Housing
Region 4	Kent	Mercy Housing
Region 4	Tacoma	Mercy Housing
Region 4	Tacoma	Catalina Apartments
Region 5	Olympia	Food Bank
Region 5	Chehalis	Chehalis Community Services Office.
Region 5	Forks	Catherine of Sienna Church
Region 5	Longview	Highlands Neighborhood Association
Region 5	Port Angeles	Food Bank
Region 5	Port Townsend	Food Bank
Region 5	Sequim	Food Bank
Region 5	Vancouver	Elementary School

## APPENDIX D: INDICATORS AND DEFINITIONS

Adult Indicators	
Diabetes	Percent of adults who have been diagnosed with diabetes.
Food insecure	Percent of adults who sometimes, usually, or always are stressed about having enough money to buy nutritious meals in the last year.
Fruit and vegetable intake	Percent of adults who ate 5+ servings per day of fruits and vegetables.
High blood pressure	Percent of adults who have been told by a doctor, nurse, or other health professional they have high blood pressure.
High cholesterol	Percent of adults who have been told by a doctor, nurse, or other health professional that their blood cholesterol is high.
Muscle strengthening	Percent of adults who did physical activities or exercises to strengthen their muscles 2+ times per week.
Overweight or obese	Percent of adults who are overweight or obese (BMI > 25) calculated variable.
Physical activity	Percent of adults who did 150+ minutes of moderate or 75+ minutes of vigorous physical activity per week.
Poor mental health	Percent of adults who self-reported that their mental health was not good on 14 or more days in the last 30 days.

Youth Indicators	
Breakfast	Percent of youth who ate breakfast today
Dinner with family	Percent of youth who always or most of the time eat dinner with family.
Food insecure	Percent of youth who had to skip or cut meals least once in the last year because there wasn't enough money for food.
Fruit and vegetable intake	Percent of youth who ate 5+ fruits and vegetables per day.
Muscle strengthening	Percent of youth who did muscle strengthening in the last 7 days.
Physical activity	Percent of youth who were physically active for at least 60 minutes for five days or more in the last 7 days.
Screen time	Percent of youth who on average watch TV or play video games 5+ hours per school day.
Sweet drinks (week)	Percent of youth who drank regular soda, sports drinks, and other flavored sweetened drinks at least once in the past 7 days.
Sweet drinks (day)	Percent of youth who drank 2+ sweetened drinks per day such as regular soda, sports drinks, and other sweetened drinks in the past 7 days.
TV	Percent of youth who on average watch TV shows or movies or stream videos on any electronic device for more than 1 hour per school day.
Video games	Percent of youth who on average play video or computer games or use a computer for something that is not school work for more than 1 hour per school day.

## APPENDIX E: COMMUNITY SURVEY PARTICIPANT INFORMATION

Primary Work Setting of Survey Respondents	
Primary Work Setting	Percent
Food bank/ food pantry	57%
Community	44%
School	17%
Homeless shelter	14%
Faith-based community	12%
Housing facility	12%
Community gardens	8%
Health care	8%
School gardens	5%
Childcare	5%
Worksite	5%

Clients Primarily Served by Survey Respondents	
Clients Primarily Served	Percent
Food bank/ food pantry clients	61%
Adults	54%
Parents/ mothers/ fathers	53%
Older adults/ seniors	50%
Homeless	46%
Elementary school students or age youth	44%
Middle school students or age youth	34%
High school students or age youth	34%
Pregnant/ breastfeeding women	34%
Preschool students or age youth	30%

Types of Services Provided by Survey Respondents	
Types of Services Provided	Percent
Resource provision (vouchers, incentives, financial, food, etc.)	58%
Emergency services (heating assistance, emergency housing assistance, advocacy for victims)	31%
Direct education to children or adults	28%
Housing services	21%
Transportation services	12%
Employment services (employment and training)	13%
Health services (health insurance, health care, health)	7%
Childcare services	6%

## Participating Organizations:

- Addy Rescue Mission
- Albion Food Pantry
- Caritas Outreach Ministries
- Christian Aid Center
- Communities In Schools of Spokane County
- Community Action Center
- Community Minded SWCC ECEAP
- Crescent Harbor Elementary
- Cusick Community Development Association
- Entiat Valley Community Services Food Bank
- Feed Cheney
- FISH Community Food Bank
- Food Lifeline
- Ford Food Pantry
- Global to Local
- Granite Falls Community Coalition
- Harrington Community Food Bank
- Hope Vineyard Reach Out Food Program
- HopeSource
- House of Charity
- HRC Ministries
- Hudesman House Senior Apartments
- Isabella House
- LHD3
- Lincoln County WIC
- Lynnwood Food Bank
- Mercy Housing Northwest
- New Hope Ranch
- Next Generation Zone
- North County Food Pantry
- North Palouse Community Food Bank
- Northport School District #211
- Nourish Pierce County
- Odessa Food Bank, Lincoln County
- OIC of Washington
- Olympic View Elementary school
- Open Heart Baptist Church
- Orting Food Bank
- Othello Food Bank
- Otis Orchards Food Bank
- Palouse Food Pantry

- Pullman Child Welfare sponsors of Pullman Food Bank
- Reardan-Edwall School District
- Rosalia Food Pantry
- Royal City Food Bank
- Rural Resources Community Action
- Rural Resources Community Action Transportation
- Rural Resources Victim Services
- Rural Resources/ Early Childhood
- SAGE
- Serve Wenatchee Valley
- Society of St Vincent de Paul, St Patrick's Conference
- South King County Food Coalition
- South King County Food Coalition
- SPEAR
- Spokane Christian Center Pantry
- Springdale Food Pantry
- St Vincet de Paul, St Joseph Conference
- St. Joseph Food Bank
- St. Vincent De Paul Society of Walla Walla
- Sunrise Outreach Center
- Tacoma Schools
- TEEN CHALLENGE (Pacific Northwest Adult & Teen Challenge Spokane Men's Center)
- The Campus Kitchen at Gonzaga University
- The GreenHouse Community Center
- The Women's Hearth
- Toppenish Community Chest
- Transitions
- Tulalip SNAP-Ed
- United Way of Pierce County - Hunger-Free Pierce County
- Vadis
- Volunteers of America-Permanent Supportive Housing
- Washington State Department of Health
- WA State Department of Health (FINI Program)
- Washington State University- Expanded Food and Nutrition Education Program (EFNEP)
- WithinReach
- Yakima Rotary Food Bank

# APPENDIX F: PEARS SURVEY ACTIVITY DATA

PEARS Activity Estimates 2018												
Target Audience of Activity	Region 1	%	Region 2	%	Region 3	%	Region 4	%	Region 5	%	WA Total	%
Total	444	100%	303		91		398		598		1834	
Pre-K - 2nd Grade	134	30%	32	11%	31	34%	46	12%	94	16%	337	18.4%
Adults	73	16%	78	26%	17	19%	102	26%	44	7%	314	17.1%
3rd - 5th Graders	73	16%	51	17%	30	33%	59	15%	155	26%	368	20.1%
Older adults and seniors 60 or more	60	14%	46	15%	3	3%	38	10%	34	6%	181	9.9%
Families and mixed age groups	58	13%	62	20%	1	1%	100	25%	170	28%	391	21.3%
6th - 12th grade teens	40	9%	22	7%	0	0%	38	10%	55	9%	155	8.5%
Pregnant teens	0	0%	2	1%	2	2%	2	1%	0	0%	6	0.3%
Teen parents	0	0%	2	1%	3	3%	2	1%	1	0%	8	0.4%
Caregivers of parents or guardians	0	0%	0	0%	0	0%	0	0%	1	0%	1	0.1%
Parents or guardians of older children	0	0%	0	0%	0	0%	1	0%	1	0%	2	0.1%
Parents or guardians of young children	6	1%	8	3%	4	4%	10	3%	42	7%	70	3.8%
Adults with developmental disabilities	0	0%	0	0%	0	0%	0	0%	1	0%	1	0.1%

Total Participants												
Total	9196		5434		1916		12121		17920		46587	
By Sex												
Male	4022	44%	1512	28%	839	44%	4794	40%	7929	44%	19096	41%
Female	5069	55%	2816	52%	1077	56%	6260	52%	9651	54%	24873	53%
Unknown	105	1%	1106	20%	0	0%	1067	9%	340	2%	2618	6%
By Age												
Less than 5 years of age	16	0.2%	333	6%	0	0%	11	0%	406	2%	766	2%
5-17 years of age	6655	72.4%	2144	39%	1553	81%	5746	47%	12988	72%	29086	62%
18-59 years of age	1828	19.9%	2115	39%	308	16%	5157	43%	3705	21%	13113	28%
60 years or older	697	7.6%	842	15%	55	3%	1210	10%	821	5%	3625	8%
By Sex and Age												
Less than 5 years of age male	2	0%	46	1%	0	0%	5	0%	183	1%	236	1%
Less than 5 years of age female	14	0%	67	1%	0	0%	6	0%	223	1%	310	1%
Less than 5 years did not report sex	0	0%	220	4%	0	0%	0	0%	0	0%	220	0%
5-17 years of age male	3365	37%	846	16%	759	40%	2556	21%	6395	36%	13921	30%
5-17 years of age female	3265	36%	892	16%	794	41%	2591	21%	6421	36%	13963	30%
5-17 years of age did not report sex	25	0%	406	7%	0	0%	599	5%	172	1%	1202	3%
18-59 years of age male	526	6%	400	7%	69	4%	1819	15%	1082	6%	3896	8%
18-59 years of age female	1242	14%	1280	24%	239	12%	2886	24%	2500	14%	8147	17%
18-59 years of age did not report sex	60	1%	435	8%	0	0%	452	4%	123	1%	1070	2%
60 years or older male	129	1%	846	16%	11	1%	417	3%	269	2%	1672	4%
60 years or older female	548	6%	577	11%	44	2%	777	6%	507	3%	2453	5%
60 years or older did not report sex	20	0%	45	1%	0	0%	16	0%	45	0%	126	0%
By Race/Ethnicity												
Hispanic/Latino	1822	30%	1698	58%	583	35%	2013	19%	3904	25%	10020	27%
Non-Hispanic/ Latino	4178	70%	1208	42%	1085	65%	8662	81%	11595	75%	26728	73%
American Indian or Alaskan Native	953	11%	90	4%	161	11%	269	2%	709	5%	2182	6%
Asian	137	2%	27	1%	40	3%	1444	13%	706	5%	2354	6%
Black or African American	343	4%	83	4%	84	6%	3752	33%	762	6%	5024	13%
Native Hawaiian/ Other Pacific Islander	112	1%	16	1%	16	1%	503	4%	423	3%	1070	3%
White	7277	82%	1920	90%	1209	80%	5323	47%	11226	81%	26955	72%

Priority Indicator												
Total	850		456		212		815		1056		3389	
Healthy eating behavior	419	49%	223	49%	96	45%	343	42%	557	53%	1638	48%
Physical activity and reduced sedentary behavior	196	23%	93	20%	86	41%	137	17%	258	24%	770	23%
Food resource management	138	16%	80	18%	29	14%	234	29%	120	11%	601	18%
Nutrition support	76	9%	29	6%	0	0%	76	9%	30	3%	211	6%
Organizational partnerships	8	1%	15	3%	0	0%	2	0%	51	5%	76	2%
Physical activity and reduced sedentary behavior supports	6	1%	15	3%	0	0%	17	2%	10	1%	48	1%
Readiness and need	6	1%	0	0%	0	0%	5	1%	18	2%	29	1%
Multi sector partnerships and planning	0	0%	1	0%	1	0%	0	0%	0	0%	2	0%
Champions	1	0%	0	0%	0	0%	1	0%	12	1%	14	0%

Intervention Type												
Total	1975		1017		874		3085		3139		10090	
Fruits and vegetables	322	16%	191	19%	92	11%	318	10%	525	17%	1448	14%
MyPlate food groups and portions for a healthy eating pattern	286	14%	88	9%	84	10%	288	9%	271	9%	1017	10%
Whole grains	199	10%	104	10%	82	9%	189	6%	281	9%	855	8%
Fiber-rich foods	136	7%	44	4%	74	8%	140	5%	265	8%	659	7%
Water	123	6%	55	5%	45	5%	133	4%	220	7%	576	6%
Food preparation/ cooking and food safety	121	6%	96	9%	63	7%	275	9%	196	6%	751	7%
Limiting added sugars	121	6%	79	8%	54	6%	251	8%	193	6%	698	7%
Reducing sedentary activities and screen time	113	6%	37	4%	50	6%	139	5%	156	5%	495	5%
Dairy	108	5%	42	4%	81	9%	144	5%	237	8%	612	6%
Food shopping and resource management	86	4%	62	6%	30	3%	228	7%	142	5%	548	5%
Protein foods	82	4%	39	4%	65	7%	126	4%	259	8%	571	6%
Healthy fats and oils	81	4%	31	3%	38	4%	170	6%	78	2%	398	4%
Limiting sodium	74	4%	41	4%	37	4%	177	6%	70	2%	399	4%
Limiting saturated fats	69	3%	22	2%	34	4%	178	6%	98	3%	401	4%
Promoting and maintaining a healthy weight	19	1%	22	2%	16	2%	141	5%	40	1%	238	2%
Other individual knowledge and skills	14	1%	13	1%	2	0%	8	0%	34	1%	71	1%
Other engagement in physical activity	8	0%	9	1%	3	0%	8	0%	0	0%	28	0%
Active commuting	7	0%	24	2%	7	1%	23	1%	22	1%	83	1%
Prevention of obesity, diabetes, and other chronic diseases	4	0%	16	2%	13	1%	76	2%	39	1%	148	1%
Participation in sports and recreational activities	2	0%	2	0%	4	0%	73	2%	13	0%	94	1%

Total Sites												
Total	431		231		96		346		572		1676	
Schools (K-12, elementary, middle, and high)	214	50%	79	34%	66	69%	122	35%	325	57%	806	48%
Other places people go to "learn"	46	11%	0	0%	1	1%	17	5%	0	0%	64	4%
Community and recreation centers	36	8%	0	0%	0	0%	2	1%	2	0%	40	2%
Extension offices	24	6%	0	0%	0	0%	1	0%	4	1%	29	2%
Food assistance sites, food banks, and food pantries	22	5%	40	17%	0	0%	114	33%	169	30%	345	21%
Individual homes or public housing sites	22	5%	3	1%	10	10%	23	7%	3	1%	61	4%
Before and after school programs	21	5%	10	4%	7	7%	3	1%	2	0%	43	3%
Adult education, job training, TANF, and veteran services	13	3%	1	0%	2	2%	0	0%	1	0%	17	1%
Health care clinics and hospitals	11	3%	33	14%	3	3%	8	2%	2	0%	57	3%
Family resource centers	5	1%	0	0%	0	0%	4	1%	0	0%	9	1%
Other neighborhood settings where people "live" or nearby	4	1%	1	0%	0	0%	7	2%	0	0%	12	1%
Parks and open spaces	4	1%	1	0%	0	0%	0	0%	0	0%	5	0%
Farmers markets	3	1%	0	0%	0	0%	7	2%	13	2%	23	1%
Congregate meal sites	2	0%	9	4%	0	0%	0	0%	4	1%	15	1%
Schools (colleges and universities)	2	0%	0	0%	0	0%	0	0%	6	1%	8	0%
Cafeterias (not school, childcare, congregate meal site, worksite or restaurant)	1	0%	0	0%	0	0%	1	0%	0	0%	2	0%
Group living arrangements	1	0%	11	5%	2	2%	0	0%	0	0%	14	1%
SNAP offices	0	0%	23	10%	0	0%	0	0%	0	0%	23	1%
Emergency shelters and temporary housing sites	0	0%	20	9%	3	3%	4	1%	3	1%	30	2%
Indian reservations	0	0%	0	0%	2	2%	0	0%	0	0%	2	0%
Youth organizations	0	0%	0	0%	0	0%	16	5%	0	0%	16	1%
Gardens	0	0%	0	0%	0	0%	7	2%	3	1%	10	1%
Community organizations	0	0%	0	0%	0	0%	3	1%	5	1%	8	0%
Other places where people go to "work"	0	0%	0	0%	0	0%	3	1%	0	0%	3	0%
Large food stores and retailers	0	0%	0	0%	0	0%	2	1%	2	0%	4	0%
Early care and education facilities	0	0%	0	0%	0	0%	1	0%	0	0%	1	0%
Libraries	0	0%	0	0%	0	0%	1	0%	2	0%	3	0%
Residential treatment centers	0	0%	0	0%	0	0%	0	0%	6	1%	6	0%
Faith based centers/ places of worship	0	0%	0	0%	0	0%	0	0%	16	3%	16	1%
Mobile education sites	0	0%	0	0%	0	0%	0	0%	2	0%	2	0%
Other places people go to "eat" outside the home	0	0%	0	0%	0	0%	0	0%	1	0%	1	0%
USDA Summer Meal sites	0	0%	0	0%	0	0%	0	0%	1	0%	1	0%

# APPENDIX G: FORCES OF CHANGE

## Spokane Regional Health District

<b>Social Forces of Change</b>
Stigma/ fear
Changing demographics
Peer-led approaches
Staff = community
Authentic engagement
Growing homeless population
Opioid epidemic and meth
ACEs and trauma
<b>Economic Forces</b>
Recession
Employment
Decreased caseloads
Fruit and vegetable incentives at state
Decrease in federal funding
<b>Political Forces</b>
Current administration
Farm Bill and rulemaking
FNS/ Hiring
Staff change
Tribal relations
<b>Technological Forces</b>
Online groceries and delivery
Tech-based referral system
Wearable technology
Smart phone access
Internet = misinformation overload
Farming advancements
GMOs/ GEOs
<b>Environmental Forces</b>
Community gardens
Food access in rural areas
Collective impact opportunities
Urban vs rural (urban sprawl)
Climate change
Advertisements and marketing

<b>Scientific Forces</b>
Social sciences – framing messages
Needs assessment and planning
Fad diets
ACEs and trauma
Smoothie craze
Evidence-base
Science of programs and interventions
Learnings from implementational
<b>Legal Forces</b>
Breakfast after the bell
F2S
HIPPA
Immigration
<b>Ethical Forces</b>
Territorialism
Physical education in schools
Competing demands for time
Competition for resources/ funding partners/ locals
Language and cultural
Needs of community vs resources and agency priority

## Washington State University Extension

<b>Social Forces</b>
Representativeness of staff (not current)
In fluence of marketing
ASNNA increased communications
Increase in social media
Fear/ distrust of government (immigrant populations)
Language diversity
Increased interest in agriculture and local growth
New leaders and relationships
<b>Economic Forces</b>
Funding
Economy
Cost of living/ housing
State increase in wages
Eligibility definition
Wealth gap growing

<b>Political Forces</b>
Reluctance to change
2020 election
State wage/ minimum wage
Prevention Fund/ FINI
Lobbying efforts
FNS guidance and variability
Unstable funding
Farm Bill and Guidance/ Dietary Guidelines
Community Transformation Grants
Fear of government (immigrants)
<b>Technological Forces</b>
Farm Bill mandate for online reporting
EBT online pilot
Direct and indirect education online
PEARS
Smart phones
EBT online pilot
Website/ online programs
Farmers Market EBT company financial bankruptcy
<b>Environmental Forces</b>
Urban farming
Food safety
Disaster response
Global warming/ climate change
Weather
Transportation
PCC Farmland Trust
Focused work against health messages
Sustainability
Local production
Natural resource education
Waste reduction
Changing crops
<b>Scientific Forces</b>
New and engaging technology and literature
Nutrition science shifts
Program evaluation and results

<b>Legal Forces</b>
Election results
Eligibility definition
School policies on food (no outside food, etc.)
Food permitting
Tribal recognition
Child Nutrition Act
Zoning laws
Advertising laws
FNS Guidance
<b>Ethical Forces</b>
Following guidelines when don't agree
Do no harm
Social media monitoring
Efficient spending
Teaching bad habits
Staff ethical behaviors and knowledge and training
Service in other languages
Inclusion, race and equity training
Tribal relationships
Cultural appropriateness

## Washington State Department of Health

<b>Social Forces</b>
Changing demographics
Soda tax messaging and potential positive implications
Shifting housing demographics
Refugee resettlement WA by location could increase
Potential climate or fear from potential SNAP clients
Stigma for clients "FRL categorization"
Level of knowledge of healthy eating
Tribal cultural elements
More people communicating through social media
Opioid epidemic
Family structure (multigenerational)
SNAP to skills (stringent requirements for getting benefits)

## Economic Forces

Could be money coming for preventing food waste

Funding for breakfast after the bell passed

Funding for food security initiatives passed

Potential for another economic downturn – could increase clients

Food banks getting food

Trade restrictions – food costs

Increased divide between rich and poor, disparities

Increased student loan debt

Housing costs

## Political Forces

“Public change” path to citizenship

Trump

SNAP under microscope/ scrutiny

NO FNS representative for region – disconnected

Potential federal changes to income guidelines

Gov. Inslee anticipated to leave – new Secretary of Health

Federal, state, local all have different health priorities

## Technological and Scientific Forces

Online SNAP shopping pilot

WIC EBT

ASNNA emphasis/ intent to share nutrition education through online means

E-health

Online delivery methods

Online technical reporting

People getting more nutrition information online (good and bad)

Too much screen time

No centralized point of sale – EBT looks different in different outlets (farmers markets)

Food as medicine

More attention on link between nutrition and chronic disease

<b>Environmental Forces</b>
Some SNAP champions
Obesogenic environment
Silos
Westernized diet
Food access
Global warming shifting norms and affecting transportation
Acceptance of eating poorly
School environment – reduced recess and fast food in schools
State grant climate has a complicated organizational structure
Disappearing agricultural space
Food sovereignty
Proximity to healthy food
Gentrification in certain areas
Urban/ rural equity and distributions of resources
Changing agricultural environment
<b>Legal Forces</b>
Immigration and citizenship changes
Income qualification changes
Challenging contracting
Fiscal allowability
Supplantation – can't replace funding activities creates barriers to partnering
<b>Ethical Forces</b>
Gentrification
Top down – we know best
Food swamps
Need more toward participatory approach
Hiring practices
Access

## APPENDIX H: REGION 1 SUPPLEMENTAL TABLES

Table 9s. Selected Indicators and Comparison by Demographics Region 1, BRFSS 2017				
	5+ Servings per Day of Fruits and Vegetables	150+ Moderate or 75+ Vigorous Physical Activity	Overweight or Obese	Rarely or Never Stressed About Having Money to Buy Nutritious Meals
All SNAP-Eligible Adults	24%	49%	64%	63%
<b>Gender</b>				
Female	27%	48%	67%	54%
Male	22%	49%	60%	74%
<b>Race</b>				
White	25%	51%	65%	62%
Black	0%	43%	55%	100%
Asian	0%	28%	19%	92%
American Indian and Alaskan Native	13%	70%	78%	51%
Hispanic	32%	35%	62%	72%
Other	12%	64%	70%	28%
<b>Education</b>				
<HS Grad	29%	40%	55%	64%
HS Grad	19%	45%	67%	62%
Some College	27%	55%	64%	63%
College Grad	22%	52%	68%	66%
 Red indicates the demographic group has significant differences and the specific population has worse rates than the overall eligible population.				

Table 11s. Selected Youth Indicators and Comparison by Demographics Region 1. HYS 2018				
	5+ Servings per Day of Fruits and Vegetables	150+ Moderate or 75+ Vigorous Physical Activity	Overweight or Obese	Skip or Cut Meals
All SNAP-Eligible Youth Grades 8-12	18%	53%	35%	23%
<b>Gender</b>				
Female	16%	45%	35%	26%
Male	20%	61%	36%	20%
<b>Race</b>				
American Indian and Alaskan Native	20%	49%	32%	26%
Asian	27%	55%	21%	8%
Black	15%	53%	43%	26%
Hispanic	18%	49%	41%	17%
Native Hawaiian or Other Pacific Islander	30%	55%	43%	38%
White	15%	53%	32%	25%
Other	21%	56%	37%	24%
<b>Grade</b>				
8	18%	57%	36%	19%
10	19%	53%	35%	24%
12	15%	46%	35%	28%
<b>Mother's education</b>				
Less than HS or HS	15%	50%	36%	26%
Some college	20%	58%	34%	24%
4 year degree or higher	21%	58%	31%	23%
<span style="color: red;">■</span> Red indicates the demographic group has significant differences and the specific population has worse rates than the overall eligible population.				

**Table 15s. Washington State Severity Scoring for Selected Indicators Region 1**

Region 1 Scoring	Change in Indicator	Eligible to Non-Eligible	Region 1 Compared to WA State	Demographic Disparities	Magnitude	Score
Physical Activity (150+ Minutes per week)- Adult	2	3	2	1	4	12
Physical Activity (60 min 5+ days per week)- Youth	2	3	1	3	4	13
Obesity- Adult	2	2	2	1	4	11
Obesity- Youth	2	3	2	2	4	13
Fruit and Vegetable Intake (5+ servings per day)- Adult	1	2	2	1	4	10
Fruit and Vegetable Intake (5+ servings per day)- Youth	3	2	2	1	4	12
Food Insecurity- Youth	2	3	2	3	3	13
Food Insecurity-Adult	2	3	1	2	4	12
<b>Scoring</b>	<b>1:</b> Getting Better <b>2:</b> No Change <b>3:</b> Getting Worse	<b>1:</b> Better <b>2:</b> No Difference <b>3:</b> Worse	<b>1:</b> Better <b>2:</b> No Difference <b>3:</b> Worse	<b>1:</b> None <b>2:</b> 1-2 Indicators w/ Differences <b>3:</b> More than 2 Indicators with Differences	<b>0:</b> Less than .01% <b>1:</b> .01-.9% <b>2:</b> 1-9.9% <b>3:</b> 10-24.9% <b>4:</b> >25%	Percentage of SNAP-Ed Eligible Experiencing Condition

## APPENDIX I: REGION 2 SUPPLEMENTAL TABLES

Table 9s. Selected Indicators and Comparison by Demographics Region 2, BRFSS 2017

	5+ Servings per Day of Fruits and Vegetables	150+ Moderate or 75+ Vigorous Physical Activity	Overweight or Obese	Rarely or Never Stressed About Having Money to Buy Nutritious Meals
All SNAP-Eligible Adults	20%	42%	70%	45%
<b>Gender</b>				
Female	18%	40%	68%	52%
Male	21%	44%	72%	35%
<b>Race</b>				
White	22%	46%	62%	41%
Black	5%	25%	59%	36%
Asian	16%	11%	59%	0%
American Indian and Alaskan Native	2%	24%	68%	60%
Hispanic	18%	42%	80%	50%
Other	25%	14%	59%	27%
<b>Education</b>				
<HS Grad	19%	32%	80%	53%
HS Grad	20%	36%	68%	44%
Some College	15%	53%	63%	39%
College Grad	38%	72%	50%	21%

 Red indicates the demographic group has significant differences and the specific population has worse rates than the overall eligible population.

## APPENDIX I: REGION 2 SUPPLEMENTAL TABLES

Table 11s. Selected Youth Indicators and Comparison by Demographics Region 2, HYS 2018

	5+ Servings per Day of Fruits and Vegetables	150+ Moderate or 75+ Vigorous Physical Activity	Overweight or Obese	Skip or Cut Meals
All SNAP-Eligible Youth Grades 8-12	20%	49%	36%	22%
<b>Gender</b>				
Female	21%	48%	36%	22%
Male	20%	51%	38%	22%
<b>Race</b>				
American Indian and Alaskan Native	38%	22%	38%	44%
Asian	0%	0%	17%	0%
Black	17%	40%	60%	33%
Hispanic	18%	46%	40%	21%
Native Hawaiian or Other Pacific Islander	0%	33%	33%	33%
White	22%	59%	35%	19%
Other	26%	47%	32%	27%
<b>Grade</b>				
8	25%	32%	32%	20%
10	16%	36%	36%	22%
12	22%	39%	39%	23%
<b>Mother's education</b>				
Less than HS or HS	18%	49%	39%	23%
Some college	26%	56%	46%	19%
4 year degree or higher	26%	63%	26%	22%

 Red indicates the demographic group has significant differences and the specific population has worse rates than the overall eligible population.

**Table 15s. Washington State Severity Scoring for Selected Indicators Region 2**

Region 2 Scoring	Change in Indicator	Eligible to Non-Eligible	Region 2 Compared to WA State	Demographic Disparities	Magnitude	Score
Physical Activity (150+ Minutes per week)- Adult	2	3	2	2	4	13
Physical Activity (60 min 5+ days per week)- Youth	2	3	2	2	4	13
Obesity- Adult	2	2	2	2	4	12
Obesity- Youth	2	3	2	2	4	13
Fruit and Vegetable Intake (5+ servings per day)- Adult	2	2	2	1	4	11
Fruit and Vegetable Intake (5+ servings per day)- Youth	2	2	2	1	4	11
Food Insecurity- Youth	2	3	2	2	3	12
Food Insecurity-Adult	2	3	2	3	4	14
<b>Scoring</b>	<b>1:</b> Getting Better <b>2:</b> No Change <b>3:</b> Getting Worse	<b>1:</b> Better <b>2:</b> No Difference <b>3:</b> Worse	<b>1:</b> Better <b>2:</b> No Difference <b>3:</b> Worse	<b>1:</b> None <b>2:</b> 1-2 Indicators w/ Differences <b>3:</b> More than 2 Indicators with Differences	<b>0:</b> Less than .01% <b>1:</b> .01-.9% <b>2:</b> 1-9.9% <b>3:</b> 10-24.9% <b>4:</b> >25%	Percentage of SNAP-Ed Eligible Experiencing Condition

## APPENDIX J: REGION 3 SUPPLEMENTAL TABLES

Table 9s. Selected Indicators and Comparison by Demographics Region 3, BRFSS 2017				
	5+ Servings per Day of Fruits and Vegetables	150+ Moderate or 75+ Vigorous Physical Activity	Overweight or Obese	Rarely or Never Stressed About Having Money to Buy Nutritious Meals
All SNAP-Eligible Adults	25%	56%	58%	56%
<b>Gender</b>				
Female	27%	57%	54%	45%
Male	23%	54%	64%	72%
<b>Race</b>				
White	29%	58%	57%	60%
Black	48%	62%	45%	43%
Asian	6%	66%	35%	59%
American Indian and Alaskan Native	34%	37%	71%	11%
Hispanic	15%	47%	73%	56%
Other	32%	67%	60%	47%
<b>Education</b>				
<HS Grad	14%	54%	56%	49%
HS Grad	20%	53%	74%	67%
Some College	32%	56%	49%	52%
College Grad	35%	63%	53%	55%
 Red indicates the demographic group has significant differences and the specific population has worse rates than the overall eligible population.				

**Table 11s. Selected Youth Indicators and Comparison by Demographics Region 3, HYS 2018**

	5+ Servings per Day of Fruits and Vegetables	150+ Moderate or 75+ Vigorous Physical Activity	Overweight or Obese	Skip or Cut Meals
All SNAP-Eligible Youth Grades 8-12	17%	46%	38%	28%
<b>Gender</b>				
Female	13%	40%	37%	33%
Male	22%	54%	40%	22%
<b>Race</b>				
American Indian and Alaskan Native	18%	55%	45%	33%
Asian	19%	31%	31%	19%
Black	9%	45%	42%	32%
Hispanic	14%	47%	47%	17%
Native Hawaiian or Other Pacific Islander	0%	50%	17%	50%
White	16%	47%	35%	33%
Other	23%	51%	33%	33%
<b>Grade</b>				
8	18%	39%	38%	24%
10	14%	43%	32%	27%
12	21%	54%	46%	30%
<b>Mother's education</b>				
Less than HS or HS	16%	46%	39%	29%
Some college	19%	45%	27%	31%
4 year degree or higher	26%	57%	30%	26%

 Red indicates the demographic group has significant differences and the specific population has worse rates than the overall eligible population.

**Table 15s. Washington State Severity Scoring for Selected Indicators Region 3**

Region 3 Scoring	Change in Indicator	Eligible to Non-Eligible	Region 3 Compared to WA State	Demographic Disparities	Magnitude	Score
Physical Activity (150+ Minutes per week)- Adult	2	1	2	1	4	10
Physical Activity (60 min 5+ days per week)- Youth	2	2	2	2	4	12
Obesity- Adult	2	1	2	2	4	11
Obesity- Youth	2	3	2	1	4	12
Fruit and Vegetable Intake (5+ servings per day)- Adult	1	2	2	1	4	10
Fruit and Vegetable Intake (5+ servings per day)- Youth	2	2	2	2	4	12
Food Insecurity- Youth	2	3	3	2	4	14
Food Insecurity- Adult	2	3	2	2	4	13
<b>Scoring</b>	<b>1: Getting Better</b> <b>2: No Change</b> <b>3: Getting Worse</b>	<b>1: Better</b> <b>2: No Difference</b> <b>3: Worse</b>	<b>1: Better</b> <b>2: No Difference</b> <b>3: Worse</b>	<b>1: None</b> <b>2: 1-2 Indicators w/ Differences</b> <b>3: More than 2 Indicators with Differences</b>	<b>0: Less than .01%</b> <b>1: .01-.9%</b> <b>2: 1-9.9%</b> <b>3: 10-24.9%</b> <b>4: &gt;25%</b>	Percentage of SNAP-Ed Eligible Experiencing Condition

## APPENDIX K: REGION 4 SUPPLEMENTAL TABLES

Table 9s. Selected Indicators and Comparison by Demographics Region 4, BRFSS 2017				
	5+ Servings per Day of Fruits and Vegetables	150+ Moderate or 75+ Vigorous Physical Activity	Overweight or Obese	Rarely or Never Stressed About Having Money to Buy Nutritious Meals
All SNAP-Eligible Adults	22%	48%	64%	55%
<b>Gender</b>				
Female	21%	48%	65%	61%
Male	24%	49%	64%	49%
<b>Race</b>				
White	24%	55%	66%	59%
Black	21%	51%	63%	41%
Asian	24%	37%	34%	66%
American Indian and Alaskan Native	34%	47%	85%	63%
Hispanic	12%	39%	76%	49%
Other	35%	54%	71%	38%
<b>Education</b>				
<HS Grad	10%	43%	66%	43%
HS Grad	27%	50%	71%	56%
Some College	26%	47%	61%	57%
College Grad	21%	57%	56%	61%
 Red indicates the demographic group has significant differences and the specific population has worse rates than the overall eligible population.				

**Table 11s. Selected Youth Indicators and Comparison by Demographics Region 4, HYS 2018**

	5+ Servings per Day of Fruits and Vegetables	150+ Moderate or 75+ Vigorous Physical Activity\	Overweight or Obese	Skip or Cut Meals
All SNAP-Eligible Youth Grades 8-12	18%	42%	35%	22%
<b>Gender</b>				
Female	16%	35%	36%	22%
Male	21%	50%	34%	21%
<b>Race</b>				
American Indian and Alaskan Native	26%	57%	50%	23%
Asian	18%	36%	22%	11%
Black	15%	35%	38%	23%
Hispanic	22%	42%	46%	18%
Native Hawaiian or Other Pacific Islander	18%	45%	61%	35%
White	16%	47%	33%	25%
Other	17%	44%	33%	29%
<b>Grade</b>				
8	22%	46%	30%	22%
10	17%	40%	36%	18%
12	16%	41%	39%	27%
<b>Mother's education</b>				
Less than HS or HS	17%	40%	38%	24%
Some college	17%	44%	32%	22%
4 year degree or higher	25%	46%	30%	22%

 Red indicates the demographic group has significant differences and the specific population has worse rates than the overall eligible population.

**Table 15s. Washington State Severity Scoring for Selected Indicators Region 4**

Region 4 Scoring	Change in Indicator	Eligible to Non-Eligible	Region 4 Compared to WA State	Demographic Disparities	Magnitude	Scoring
Physical Activity (150+ Minutes per week)- Adult	2	3	2	1	4	12
Physical Activity (60 min 5+ days per week)- Youth	3	3	3	2	4	15
Obesity- Adult	1	3	2	2	4	12
Obesity- Youth	2	3	2	3	4	14
Fruit and Vegetable Intake (5+ servings per day)- Adult	2	2	2	2	4	12
Fruit and Vegetable Intake (5+ servings per day)- Youth	3	2	2	3	4	14
Food Insecurity- Youth	2	3	2	2	3	12
Food Insecurity-Adult	2	3	2	2	4	13
<b>Scoring</b>	<b>1:</b> Getting Better <b>2:</b> No Change <b>3:</b> Getting Worse	<b>1:</b> Better <b>2:</b> No Difference <b>3:</b> Worse	<b>1:</b> Better <b>2:</b> No Difference <b>3:</b> Worse	<b>1:</b> None <b>2:</b> 1-2 Indicators w/ Differences <b>3:</b> More than 2 Indicators with Differences	<b>0:</b> Less than .01% <b>1:</b> .01-9% <b>2:</b> 1-9.9% <b>3:</b> 10-24.9% <b>4:</b> >25%	Percentage of SNAP-Ed Eligible Experiencing Condition

## APPENDIX L: REGION 5 SUPPLEMENTAL TABLES

Table 9s. Selected Indicators and Comparison by Demographics Region 5, BRFSS 2017				
	5+ Servings per Day of Fruits and Vegetables	150+ Moderate or 75+ Vigorous Physical Activity	Overweight or Obese	Rarely or Never Stressed About Having Money to Buy Nutritious Meals
All SNAP-Eligible Adults	23%	47%	64%	54%
<b>Gender</b>				
Female	28%	46%	61%	50%
Male	17%	49%	67%	59%
<b>Race</b>				
White	24%	49%	62%	56%
Black	54%	74%	54%	70%
Asian	0%	30%	46%	43%
American Indian and Alaskan Native	31%	29%	48%	34%
Hispanic	14%	41%	71%	46%
Other	33%	49%	91%	48%
<b>Education</b>				
<HS Grad	12%	39%	67%	48%
HS Grad	20%	45%	65%	63%
Some College	26%	52%	64%	47%
College Grad	42%	60%	57%	72%
<span style="color: red;">■</span> Red indicates the demographic group has significant differences and the specific population has worse rates than the overall eligible population.				

**Table 11s. Selected Youth Indicators and Comparison by Demographics Region 5, HYS 2018**

	5+ Servings per Day of Fruits and Vegetables	150+ Moderate or 75+ Vigorous Physical Activity	Overweight or Obese	Skip or Cut Meals
All SNAP-Eligible Youth Grades 8-12	18%	48%	35%	24%
<b>Gender</b>				
Female	15%	40%	39%	24%
Male	21%	56%	31%	23%
<b>Race</b>				
American Indian and Alaskan Native	31%	38%	47%	26%
Asian	13%	56%	32%	13%
Black	19%	74%	50%	39%
Hispanic	18%	39%	35%	21%
Native Hawaiian or Other Pacific Islander	17%	62%	45%	9%
White	15%	50%	32%	24%
Other	22%	48%	38%	27%
<b>Grade</b>				
8	16%	49%	34%	20%
10	21%	48%	38%	28%
12	19%	46%	34%	26%
<b>Mother's education</b>				
Less than HS or HS	19%	44%	37%	30%
Some college	19%	45%	40%	29%
4 year degree or higher	15%	57%	33%	28%
 Red indicates the demographic group has significant differences and the specific population has worse rates than the overall eligible population.				

**Table 15s. Washington State Severity Scoring for Selected Indicators Region 5**

Region 5 Scoring	Change in Indicator	Eligible to Non-Eligible	Region 5 Compared to WA State	Demographic Disparities	Magnitude	Score
Physical Activity (150+ Minutes per week)- Adult	2	3	2	1	4	12
Physical Activity (60 min 5+ days per week)- Youth	2	3	2	2	4	13
Obesity- Adult	2	2	2	1	4	11
Obesity- Youth	2	3	2	2	4	13
Fruit and Vegetable Intake (5+ servings per day)- Adult	1	2	2	2	4	11
Fruit and Vegetable Intake (5+ servings per day)- Youth	2	2	2	2	4	12
Food Insecurity- Youth	2	3	2	1	3	11
Food Insecurity- Adult	2	3	2	2	4	13
<b>Scoring</b>	<b>1:</b> Getting Better <b>2:</b> No Change <b>3:</b> Getting Worse	<b>1:</b> Better <b>2:</b> No Difference <b>3:</b> Worse	<b>1:</b> Better <b>2:</b> No Difference <b>3:</b> Worse	<b>1:</b> None <b>2:</b> 1-2 Indicators w/ Differences <b>3:</b> More than 2 Indicators with Differences	<b>0:</b> Less than .01% <b>1:</b> .01-.9% <b>2:</b> 1-9.9% <b>3:</b> 10-24.9% <b>4:</b> >25%	Percentage of SNAP-Ed Eligible Experiencing Condition