
The Southeast Multi-State Racial and Health Equity SNAP-Ed Needs Assessment

Federal Fiscal Year 2022



Report authors:

Amy DeLisio, MPH, RDN; Maggie Wilkin, MPH; Raissa Sorgho, MScIH, Ph.D.; Jamie Frederick, MSW, MPH

Acknowledgements

This material was funded by USDA's Supplemental Nutrition Assistance Program - SNAP. This institution is an equal opportunity provider.

We thank numerous staff from the Southeast Region's SNAP-Ed State and Implementing Agencies in Georgia, Mississippi, North Carolina, and South Carolina who completed surveys that are analyzed in this report. We are grateful for the Southeast Region Evaluation Workgroup members who engaged in webinar discussions and provided critical feedback on the tools and methods used in this report. We thank the leaders who participated in the key informant interviews that are included in this report. We appreciate the support of the United States Department of Agriculture, Food and Nutrition Service, Southeastern Regional Office, on this project.

Evaluation Working Group participants

State	Implementing Agency*
Georgia	Georgia Department of Public Health (DOH)
	HealthMPowers
	Open Hand Atlanta
	The University of Georgia College of Family and Consumer Sciences
Mississippi	Mississippi State University
North Carolina	Alice Aycock Poe Center for Health Education
	Down East Partnership for Children
	Durham County Health Department
	East Carolina University
	North Carolina Agricultural and Technical University
	North Carolina State University
	Second Harvest Food Bank of Northwest North Carolina
	University of North Carolina at Chapel Hill
South Carolina	University of North Carolina at Greensboro
	Clemson University, Youth Learning Institute (CYLI)
	Lowcountry Food Bank (LCFB)
	South Carolina Department of Health and Environmental Control (DHEC)
	University of South Carolina Arnold School of Public Health

We send extreme gratitude to our colleagues from the Southeast Region Evaluation Workgroup, **Nick Younginer** from the University of South Carolina Arnold School of Public Health, **Kathryn Hoy** from North Carolina State University, SNAP-Ed Steps to Health, and **Amanda Tyler** from the Public Health Institute Center for Wellness and Nutrition for their review and feedback that strengthened our final report.

***Please note all quotes in this report represent the perspectives and views of the survey participants and interviewees.

Table of Contents

Backgrounds	1
Methods	2
Literature Review	2
SNAP-Ed Implementer Survey	2
Stakeholder Key Informant Interviews.....	2
Results	3
Literature Review.....	3
SNAP-Ed Implementer Survey.....	5
Workforce.....	5
Populations Served.....	7
Direct Education.....	8
Evaluation.....	9
PSEs.....	10
Key Informant Interviews.....	11
Study Participants.....	11
Barriers to Implementing Racial Equity.....	12
Facilitators Implementing Racial Equity.....	12
Recommendations from Key Informants for Incorporating and Addressing Racial Equity.....	13
Overarching Recommendations	15
Overall Recommendations for SNAP-Ed Program and Evaluation.....	15
Specific Framework Indicator Equity-Focused Recommendations.....	17



Background

SNAP-Ed (Supplemental Nutrition Assistance Program Education) is the largest federal nutrition education program administered by the United States Department of Agriculture (USDA) Food and Nutrition Service (FNS). In the federal fiscal year (FFY) 2022, four FNS Southeast Region (SER) states (Georgia, Mississippi, North Carolina, and South Carolina) and 18 implementing agencies from these states in partnership with Public Health Institute Center for Wellness and Nutrition (PHI CWN), jointly decided to undertake a formative evaluation to identify strategies to ensure that racial equity lens is used in the context of the SNAP-Ed Evaluation Framework, specifically related to the following priority indicators: MT1, 2, 5, 6, and ST5. Equity and racial equity are ill-defined within SNAP-Ed and these concepts are also not well-defined outside of SNAP-Ed consistently. There is no definition of equity in the *SNAP-Ed Guidance or Evaluation Framework*. Equity involves giving people what they need to enjoy full, healthy lives. This project focused specifically on racial equity and defined racial equity as, “a process of eliminating racial disparities and improving health outcomes for everyone.” Racial equity is the intentional practice of changing policies, practices, systems, and structures by prioritizing measurable change in the lives of people of color (Race Forward).

PHI CWN facilitated monthly Evaluation Working Group (EWG) meetings with representatives from participating states and implementing agencies to collaborate on the project’s evaluation goals, objectives, and interpretation. The EWG provided input into the methods used, and survey tools implemented, identified key leaders to interview, and reviewed the overall results and recommendations with two volunteers who provided feedback on this report before finalizing.



Methods

Literature Review

A systematic and comprehensive literature review was conducted for selected indicators to determine the need for a racial equity lens to be applied to SNAP-Ed framework activities as well as to identify best practices and existing frameworks for conducting a similar type of evaluation with an equity lens. Indicators of interest were identified by participating states and implementing agencies (IAs) to include MT1: Healthy Eating, MT2: Food Resource Management, ST5: Need and Readiness, MT5: Nutrition Supports, and MT6: Physical Activity Supports.

SNAP-Ed Implementer Survey

An electronic survey for SNAP-Ed implementers was developed to better understand the perception of current practices and needs for tailored approaches for racial and ethnic groups served by SNAP-Ed programs. PHI CWN worked collaboratively with the SER EWG members to develop the survey tool.

SNAP-Ed implementers were contacted via email with information about the study and a link to the online survey hosted by SurveyMonkey. Before answering the first survey question, informed consent was obtained by informing participants that participation was strictly voluntary.

Stakeholder Key Informant Interviews

Key informant interviews (KIIs) were conducted with leaders in SNAP-Ed and related programs with expertise in racial equity strategies in the Southeast region and across the country to get a broad understanding of equity practices in SNAP-Ed implementation. The focus of the interviews was on nutrition and food security evaluation to inform promising practices and recommendations.

Purposeful sampling, including recommendations from EWG members, was used to identify key informants to complete the interviews. Notes were taken during the meetings, and audio recordings were transcribed on Zoom to supplement the notes. Finalized notes were uploaded and analyzed using Dedoose qualitative software. Data analysis was undertaken using content analysis and the use of an inductive analysis allowed unrestricted analysis of the data. The interviews were coded in Dedoose, then the codes were grouped into larger categories (Mayring, 2014).



Results

Literature Review

There were 931 peer-reviewed articles identified for review from the systematic search. After narrowing the selection based on applicability to nutrition, SNAP-Ed, and equity, 53 articles were included that explored disparities in outcomes based on racial/ethnic differences for SNAP-Ed-related indicators. In addition, various other relevant grey literature and organizational documentation were reviewed to examine best practices in programming and evaluation for racial equity.

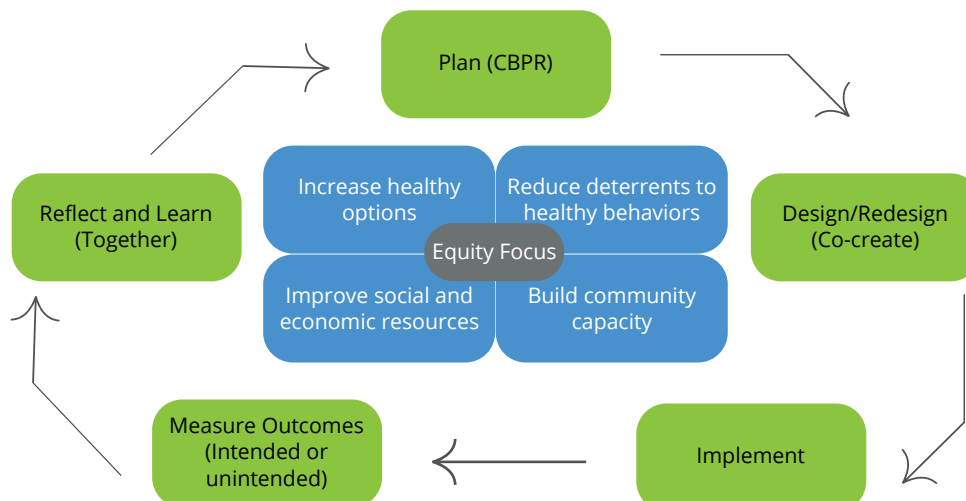
Summary of Literature Review Findings

Several racial disparities were identified in the literature for the SNAP-Ed indicators, indicating the need for modifications within the *SNAP-Ed Evaluation Framework* as well as to SNAP-Ed programming itself. It is also critical that SNAP-Ed programs consider systemic barriers to equity and are looking at data disaggregated by race/ethnicity to better understand disparities in their communities/interventions.

Framework for Racial Equity Practices in Evaluation

In examining best practices in evaluation for racial equity, the equity-oriented Obesity Prevention Action Framework and the Kellogg Foundation's practice guide three-part series [Doing Evaluation in Service of Racial Equity](#) for evaluation professionals were used to develop a combined framework (Figure 1).

Figure 1. Combined Equity Framework for Evaluation



Combined Equity Framework for Evaluation

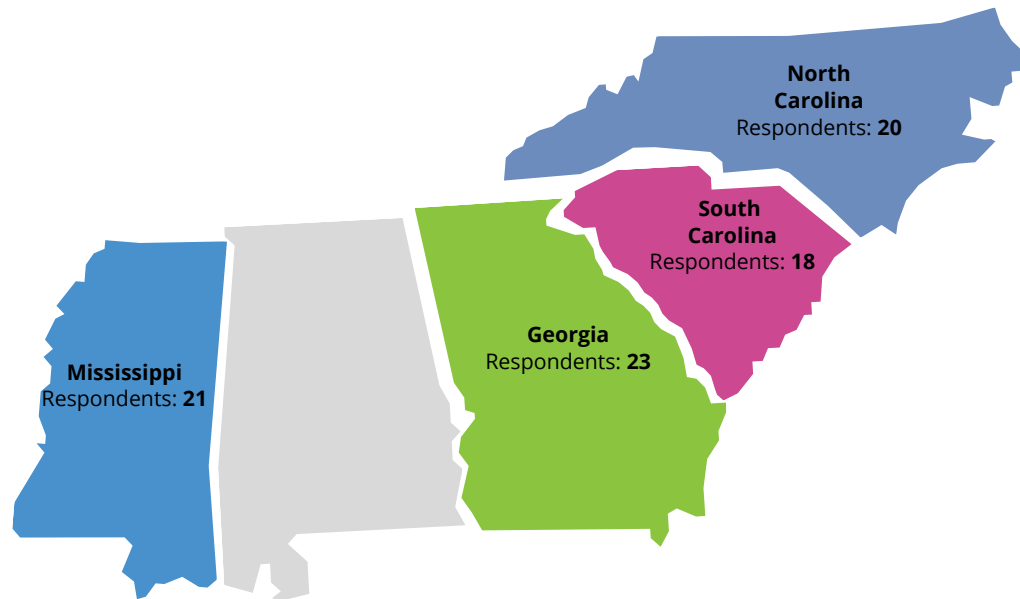
Table 1. Summary of Barriers and Implications by SNAP-Ed Evaluation Framework Indicator for Literature Review

SNAP-Ed Evaluation Framework Indicator(s)	System Barriers to Equity	Implications for SNAP-Ed
<p>MT1: Healthy Eating</p> <p>Selected Sub-Indicators: MT1c, MT1d, MT1g, MT1h, MT1i, MT1l, MT1m</p>	<ul style="list-style-type: none"> • Inequities in access, affordability, quality, safety of healthy foods and beverages • Predatory advertisement practices of unhealthy foods toward Black and Hispanic youth, leading to differing consumption patterns by group 	<ul style="list-style-type: none"> • Develop/tailor culturally appropriate curricula and nutrition education messaging • Consider systemic inequities in development of surveys and other data collection tools • Train staff on racial equity practices in the workplace to help equip educators to provide equitable nutrition education
<p>M2: Food Resource Management</p> <p>Selected Sub-Indicators: MT2a, MT2b, MT2g, MT2j</p>	<ul style="list-style-type: none"> • Policy preventing SNAP-Ed ability to promote enrollment in SNAP to participants • Lack of referral system of SNAP recipients to SNAP-Ed programs • Inequities in access to affordable, healthy food • Racial disparities in food insecurity rates 	<ul style="list-style-type: none"> • Pair direct education with PSE to help improve food resource management indicators • Pair SNAP-Ed with food distribution programs (GusNip, Food Pantry distributions, etc.) to improve food and nutrition security • Allow intentional SNAP-Ed and SNAP coordination through policy change
<p>Organizational Motivators: ST5: Need & Readiness ST6: Champions ST7: Organizational Partnerships</p>	<ul style="list-style-type: none"> • Need and readiness does not emphasize capacity in a system approach or equity principles • Lack of racial equity tools for needs assessments and priority on completion of assessments not on a collaborative process with residents • Champions are more focused on intermediaries or established leaders than community residents • Social, structural, political, historical barriers to forming equitable partnerships in SNAP-Ed • Current SNAP-Ed indicators focus more on organization-level vs. engaging community residents with lived experience 	<ul style="list-style-type: none"> • Include participants in collaborative process inclusive of assessing, planning, implementing, and evaluating • Compensate community champions for their participation in advancing SNAP-Ed goals • Amend the SNAP-Ed Evaluation Framework to capture community capacity which might measure leadership skills, knowledge gained, etc. • Consider innovative methods to identify and understand need/readiness in communities
<p>Organizational Adoption and Promotion: MT5: Nutrition Supports MT6: Physical Activity and Reduced Sedentary Behavior Supports</p>	<ul style="list-style-type: none"> • Lack of community-level disaggregated data by race/ethnicity to inform PSE development • Lack of community and cultural level metrics to inform success 	<ul style="list-style-type: none"> • Implement community engagement as a critical component in PSE prioritization, selection, and implementation • Use racial equity assessment tools to understand how racial/ethnic groups will be affected by PSE changes. • Use available data to map inequities across communities • Train staff on racial equity practices in the workplace to help equip educators to engage in equitable PSE work

SNAP-Ed Implementer Survey

There were 82 SNAP-Ed implementers across the SER states who consented to and completed the SNAP-Ed Implementer survey that was disseminated via SurveyMonkey. There were about 20 respondents from each of the four study states as shown in Figure 2.

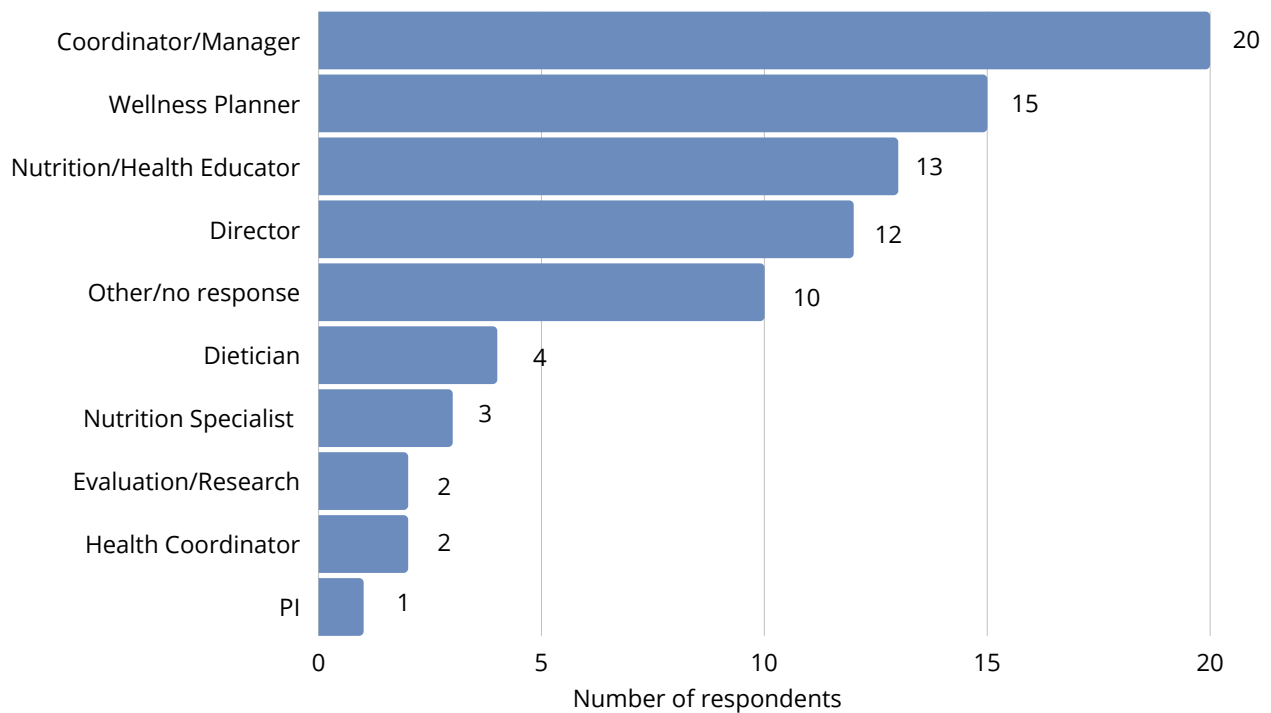
Figure 2. Number of SNAP-Ed Implementer Survey Respondents by State



Workforce

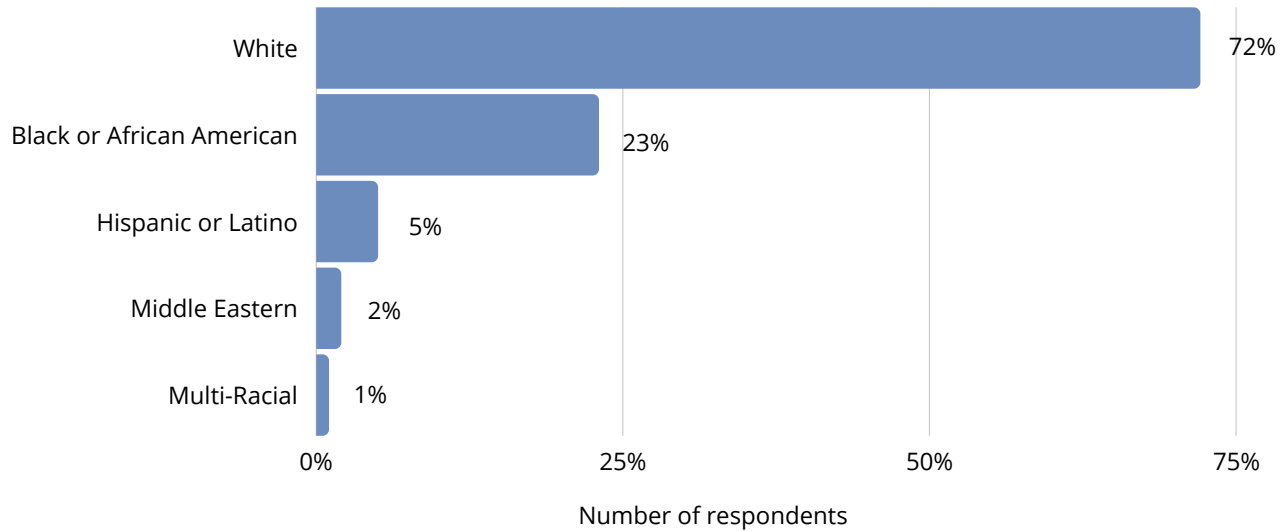
As shown in Figure 3, multiple roles were represented by the survey respondents including coordinators or managers (n=20), nutrition educators or specialists (n=16), wellness planners (n=15), and director-level staff (n=12), among others.

Figure 3. Number of SNAP-Ed Implementer Survey Respondents by State



Only 10 respondents (12%) reported being fluent in a language other than English (Spanish, n=8, Arabic, n=1, Farsi, n=1). Figure 4 shows the self-reported race and ethnicity of the SNAP-Ed implementers who responded to the survey, with over two-thirds identifying as White and almost one-quarter as Black or African American.

Figure 4. Race and Ethnicity of SNAP-Ed Implementer Survey Respondents (n=82)

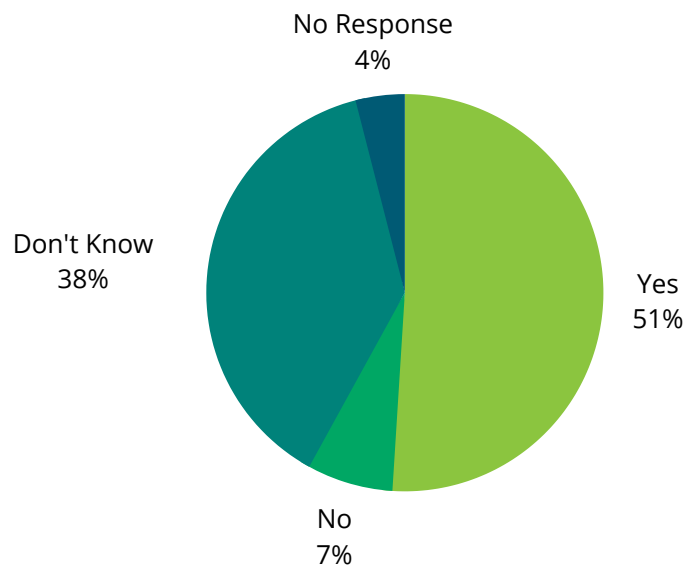


Note: Numbers do not add to 100% since respondents could check multiple categories.

About half of respondents (51%) reported that their organization has programs and/or initiatives that aim to increase the racial and ethnic diversity of staff at their organization, while 38% do not know if there are efforts and 7% said there are no efforts to increase staff diversity (Figure 5).

The most common programs include diversity, equity, and inclusion (DEI) (n=16) efforts and committees; recruitment aimed to diversify staff (n=12); and training and professional development opportunities (n=11). Among the training opportunities, staff reported participating in civil rights training, training organized by DEI committees, and racial equity inclusion training.

Figure 5. Respondents Report Efforts to Increase Staff Diversity (n=82)



Populations Served

When asked about the top three populations served through direct education efforts by their organization, most respondents (82%) listed the combination of Black or African American, Hispanic or Latino, and white, as shown in Table 2. Almost three-quarters of respondents (74%) said 1-25% of their population speak another language than English as their primary language.

Table 2. Populations Served by SNAP-Ed Implementer Organizations

Populations	Number of respondents	Percent of respondents
Black or African American, Hispanic or Latino, and White	67	82%
Asian, Black or African American, and White	4	5%
Black or African American	2	2%
Black or African American and White	2	2%
Asian, Black or African American, and Hispanic or Latino	1	1%
Black or African American and Hispanic or Latino	1	1%
Asian and Black or African American	1	1%
White	1	1%
No response	3	4%

Several different methods for promoting racial and ethnic diversity were mentioned in an open-ended question with the most frequently reported being translating materials or working with a translator. Training on diversity, equity, and inclusion for SNAP-Ed staff and using images of diverse participants in marketing materials were also mentioned by more than 10 respondents, as shown in Table 3.

Table 3. Methods Used for Promoting Racial and Ethnic Diversity in SNAP-Ed

Methods	Number of mentions
Translating materials and/or working with interpreters	30
Training and/or continuing education efforts for staff on diversity, equity, and/or inclusion	14
Using images of diverse participants on the website and in marketing materials	12
Inclusive recruitment efforts of SNAP-Ed participants	8
Using culturally appropriate recipes	8
Hiring a diverse workforce	5
Engaging with the community for program development, participation, and/or community voice	5

The top needs identified by respondents to better serve various racial/ethnic groups in SNAP-Ed align with some of the things that are already happening in the States to promote racial and ethnic diversity (Table 5).

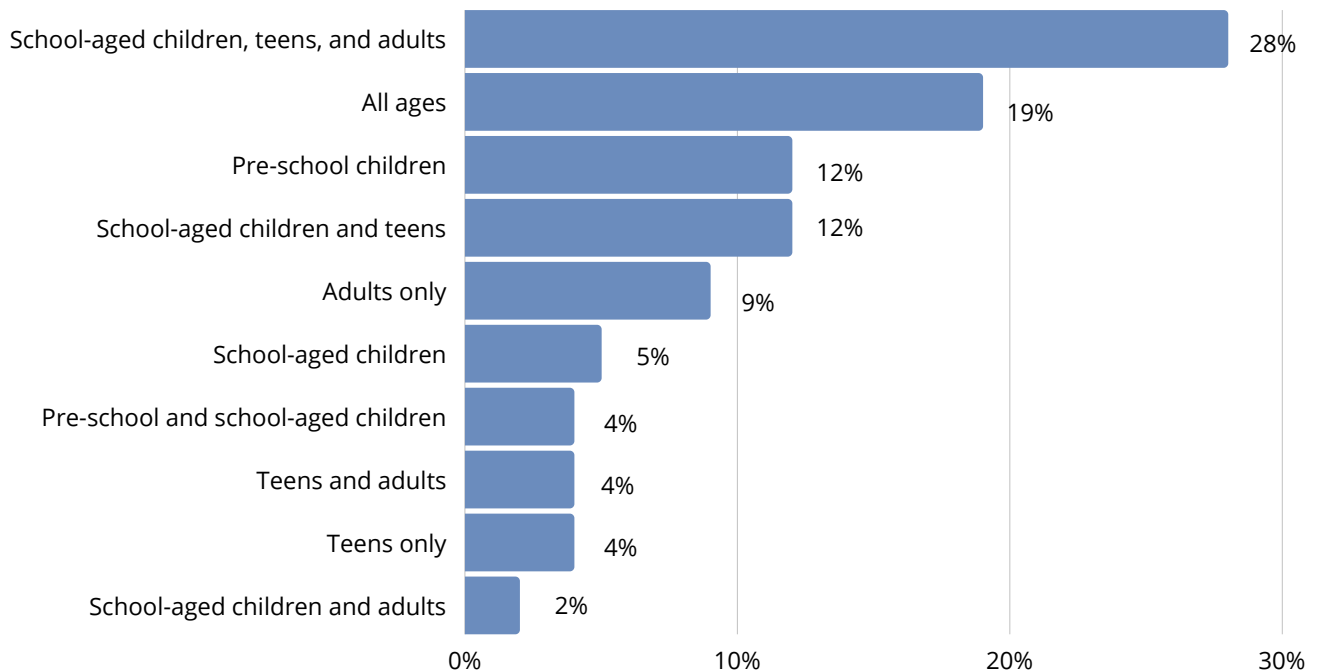
Table 4. Needs Identified to Better Serve Diverse Populations

Methods	Number of mentions
Translating materials and/or translators	20
Training and/or continuing education efforts for staff on diversity, equity, and/or inclusion	11
More culturally appropriate curricula	5
Needs assessment/ Engaging with the community for program development, participation, and/or community voice	5
Hiring a diverse workforce	4

Direct Education

Among survey participants, 69% (n=57) were involved in implementing direct education. Figure 6 shows the age groups served by direct education at the respondents’ organizations with many serving a wide range of participants.

Figure 6. Age Groups Served by Direct Education (n=57)



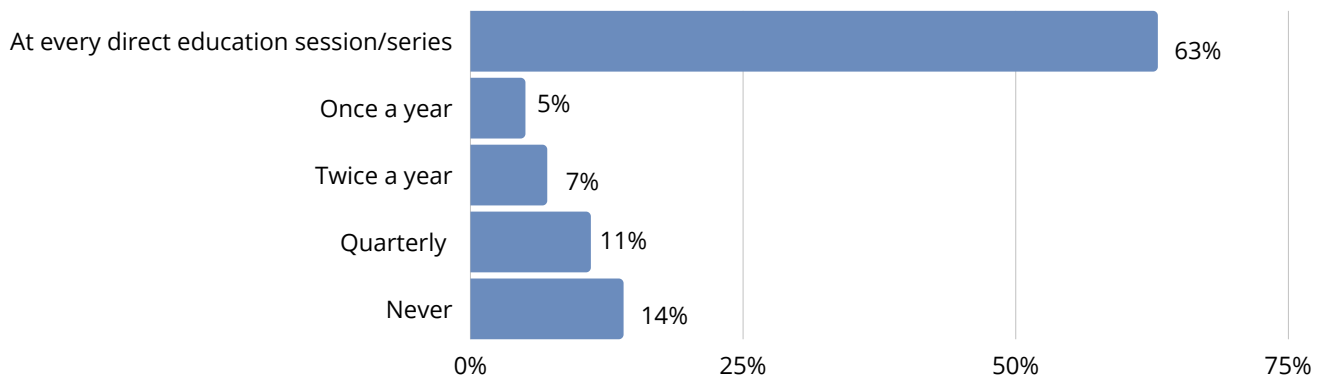
Almost all respondents implementing direct education indicated that they provide instruction in English (n=54, 95%), 30% (n=17) provide instruction in Spanish and 2% (n=1) use an interpreter for other languages.

Specifically adapted curricula currently used by agencies include Cooking Matters Spanish version (Cocinar es importante), Walk with Ease (Caminar con gusto), A Taste of African Heritage, and Color Me Healthy, with videos that have Spanish voiceovers (n=8). However, most respondents stated they either use recipe adaptations, translated materials/handouts, and/or translators to adapt curricula (n=14).

Evaluation

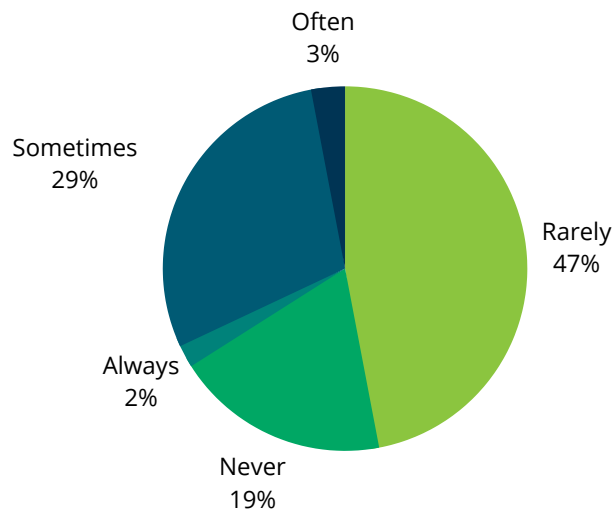
More than half of the respondents 72.0% (n=59) reported involvement in evaluation activities with SNAP-Ed participants. Many respondents (63%, n=36) stated they collect feedback from participants during every direct education session or series whereas 14% (n=8) reported never collecting feedback from participants (Figure 7).

Figure 7. How Often Feedback is Collected from Direct Education Participants (n=57)



As shown in Figure 8, about two-thirds of respondents involved in the evaluation indicated that participants rarely or never ask for help answering questions for direct education courses due to language barriers or cultural differences.

Figure 8. How Often Direct Education Participants Ask For Help Answering Evaluation Questions Due to Language or Cultural Barriers (n=57)

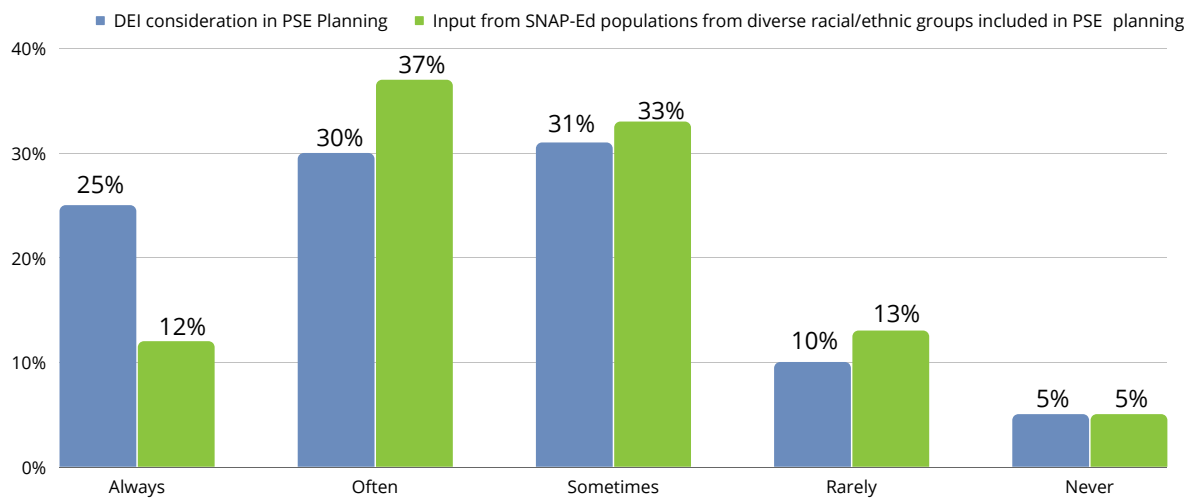


Types of questions that participants find difficult include identifying one’s race/ethnicity (n=4) and questions related to eating habits, behaviors, and/or food preparation (n=4). Others mentioned the surveys are long, and sometimes not translated well, and some organizations reported supporting participants by reading questions aloud to them.

PSEs

Almost three-quarters (73%, n=70) of respondents were involved in policy, systems, and environmental (PSE) implementation. As shown in Figure 9, almost all (86%) respondents involved in PSEs stated that racial/ethnic diversity and inclusion are sometimes, often, or always considered in PSE planning and 82% stated that input from SNAP-Ed populations from diverse racial/ethnic groups is included in PSE planning.

Figure 9. DEI and Community Input included in PSE Planning



The most frequent ways that SNAP-Ed implementers reported including racial/ethnic diversity and inclusion in their PSE planning are shown in Table 5.

Table 5. Ways in Which Racial and Ethnic Diversity is Included in PSE Planning (n=57)

Methods	Number of mentions
Tailoring or adapting to the needs of the community (e.g., language, location, and population adaptations)	16
Providing inclusive environments and/or providing interventions that are inclusive of the population	13
Including community voice directly or through community partners	13

Key Informant Interviews

Study Participants

Seven key informants with experience incorporating racial equity in SNAP-Ed or a closely related nutrition program and had familiarity with the *SNAP-Ed Evaluation Framework* were interviewed. The objectives of the interviews were twofold; first, to determine the barriers and facilitators faced by those implementing racial equity efforts with SNAP-Ed, and second, to collect recommendations for incorporating and addressing racial equity in the *SNAP-Ed Evaluation Framework*.

Three of the key informants work in the Southeast Region (2 states), while the remaining four work across the United States (1 Midwest Region; 1 from the Northwest Region; 1 from the Southwest Region; and 1 from the Western Region). Interviewees' experience ranged from 7 years working in evaluation to 30+ years working in SNAP-Ed (Table 6).

Table 6. Key Informants Interviewed

Code	State	Years in Evaluation
S1	New York	15 years
S2	Georgia	10 years
S3	Minnesota	7 years
S4	Georgia	10 years
S5	North Carolina	12 years
S6	Washington	20 years
S7	Oklahoma	30+ years

The points below summarize the findings across the Key Informant responses. For more detailed findings, please see the Full Report.

Themes	Sub-Themes
Barriers to conducting health and racial equity work	<ul style="list-style-type: none"> • Barriers in framing equity • Barriers at the organization and community level • Barriers at the systemic level
Facilitators in conduct health and racial equity work	<ul style="list-style-type: none"> • Creating partnerships • Building bridges in the community • Building capacity
Recommendations for conducting and evaluating health and racial equity work	<ul style="list-style-type: none"> • Individual and community level: Conduct internal assessment and facilitate community engagement • Institutional level: funding, timelines, diversity • Research and Evaluation: develop and use new data tools and methods

"A lot of it [equity work] is around communication and setting expectations. And not assuming that as the academic partner or mainstream organization partner that we know everything, and we bring everything to the table. But expecting that we will go in not knowing anything and will go in listening."



Barriers to Implementing Racial Equity

- ***Framing Equity: naming and defining the issue***
 - Challenges in their work around the following:
 - Framing racial equity
 - Defining equity
 - Naming racism
- ***Community: Engagement, Communication, Diversity, and Leadership***
 - Superficial community engagement, insufficient communication, and lack of diversity
 - Insufficient and non-transparent communication and exchange between programs and communities
 - Lack of diversity in leadership
- ***System: Structures, timelines, funding***
 - Unsupportive leadership
 - Rigid structures
 - Constrained timelines
 - Lack of funding

Facilitators Implementing Racial Equity

- Creating partnerships with trusted community organizations is vital to success.
- Building bridges with strong community champions are pivotal in authentically connecting with special populations
- Capacity building through training allowed organizations to increase and expand their health and racial equity knowledge and practices.

“People don’t understand what equity means. People don’t think it’s their place. People aren’t empowered to work on these issues. People have been doing the same thing, the same way, with the same money for years and years and years and change is hard...”



Recommendations from Key Informants for Incorporating and Addressing Racial Equity

- ***Perspectives at the individual and community level***
 - Assessment of personal biases
 - Gathering those in the community and in institutions who are motivated to push forward equity principles.
 - Making equity an explicit goal and central commitment
 - Having SNAP-Ed define and guide the inclusion of equity in programs and evaluation frameworks.
 - Center the community means including the community and creating feedback loops.
 - Consciously shifting power to the community
- ***Perspectives at the institutional level: Funding, Timelines, Diversity***
 - Timelines for funding and grants include sufficient time to engage thoroughly.
 - Expand funding lines and create funding processes that allow *the* program to compensate communities and community champions inclusively, and fairly
 - Increase diversity and the representation of staff
 - Informants recommended providing capacity building through training for the staff

“Partnerships are so important, [because] authentic work requires more than just SNAP-Ed guidance and personnel.”



“We need to hire and train folks from diverse racial backgrounds. We were focused on hiring diverse backgrounds....I’m hiring people with tribal backgrounds. It’s how we portray our work internal and external to our organization. We’re no longer directors, we’re partners, this signals signs of equity.”



- **Perspectives for research: Data, Tools, Methods**

- Evaluation of equity work begins with its appropriate use and application
- Recommended narrowing down the key components of the equity work to be monitored and evaluated
- Creating clear instructions and instruments to collect the desired information
- Reducing the survey burden on the population, and turning some of the evaluation processes inward
- Engage in a more qualitative and iterative process
- Programs would benefit from such participatory processes
- Recommended that data be disaggregated
- Tools and methods like geographic analysis and GIS mapping to displace disparity to visualize and innovate solutions

“We’re all measuring race/ethnicity equity differently. [There is] no clear instruments to do so.” “We need more thorough tools to measure equity, to understand our equity status and to move this forward.”





Overarching Recommendations

Overall Recommendations for SNAP-Ed Program and Evaluation

Below are specific recommendations that may make SNAP-Ed programming and evaluation activities more equitable and better serve the unique needs of diverse low-resourced communities in these Southeast states. Other states may find this information helpful. **Piloting these recommendations in practice to build evidence for using an equity approach in SNAP-Ed is advised.**

- 1. Adopt a Common Definition and Application of Equity for SNAP-Ed.** Aligning with the USDA Equity Action Plan: Priority 7: Upholding Civil Rights and Institutionalizing Civil Rights and Equity as part of the DNA and culture of USDA can set a road-map to institutionalize best practices into SNAP-Ed culture. Once the common definition is established, specifying the application of equity in the context of SNAP-Ed in the guidance would be helpful. Resource: [USDA Equity Action Plan](#)
- 2. Adapt Program Timelines and Funding Models for a more Equitable Approach.** SNAP-Ed historically runs on a one-year cycle funding cycle that includes a statewide needs assessment, program implementation, and outcome evaluation expected each year. This is not a feasible timeline to conduct community work. More flexibility is needed to better serve hard-to-reach populations more effectively. Resources: [Racial and Ethnic Approaches to Community Health](#) [The Value of Flexible Funding in the Together Toward Health Model](#)
- 3. Build a Diverse and Equity-Focused SNAP-Ed Workforce.** A competent, diverse workforce that understands how systems impact health outcomes as well as impact SNAP-Ed interventions and intended outcomes is critical to move health equity forward. Resource: [Tool for Internal Organizational Self-Assessment Related to Racial Equity](#)
- 4. Create and Adapt Nutrition Education Curriculum and Resources to be more Culturally and Linguistically Responsive.** There is a need for more culturally and linguistically relevant nutrition education resources to serve the diverse populations that SNAP-Ed reaches across the Southeast. Resource: [Systemic Racism and Diets | U.S. News \(usnews.com\)](#)
- 5. Build Strategic and Inclusive Partnerships.** Building strategic and inclusive partnerships with Community-Based and Racial Justice organizations at the state and local levels to facilitate trust, equity, and sustainability in programming is essential. Resource: [Developing Partnerships and Coalitions to Advance Health Equity](#)

6. **Community Engagement Opportunities for SNAP-Ed Eligible Residents.** Authentically engaging a community starts with the funder and evaluator being honest about both the power and the limits of community engagement. This requires a mechanism for compensating community members. Resources: [The Community Engagement Toolkit](#), [W.K. Kellogg Foundation's Doing Evaluation in Service of Racial Equity – Deepen Community Engagement](#)

7. **Disaggregate Data by Race/Ethnicity.** Reporting and disaggregating data by race/ethnicity to help identify inequities, successes, and better tailor program activities are recommended for SNAP-Ed programs. Resource: [Advocating for Data Disaggregation](#)

8. **Deemphasize Individual Behavior Change.** Since all curriculum administered with SNAP-Ed funding needs to be practice or evidence-based, it seems excessive to continue to survey participants repeatedly on positive behavior changes associated with participation in already proven programs. Resource: [Checklist for Evidence-Based Approaches](#)

9. **Fix Methodological Issues with priority indicators and Survey Tools.** Ensure metrics are clear and not ambiguous and have cultural and access considerations built in when collecting individual behavior change data. Avoid asking two concepts at once in a question or indicator and be specific.



Specific Framework Indicator Equity-Focused Recommendations

In general,

1. Reduce the required number of indicators and sub-indicators measured annually to support a more equitable approach to evaluation.
2. Allow different approaches like collecting qualitative feedback or other community inputs beyond traditional metrics to capture what success looks like in diverse communities.

Based on the overarching recommendations above, specific recommendations for this study's priority SNAP-Ed Evaluation Framework Indicators MT1, MT2, ST5, ST6, ST7, MT5, and MT6 are listed below in Table 7.

Table 7. Specific Recommendations for MT1, MT2, ST5, ST6, ST7, MT5, and MT6

MT1 Individual	MT2 Individual	ST5, ST6, and ST7 Environmental Settings	MT5 and MT6 Environmental settings
<p>Engage SNAP-Ed Eligible Participants throughout all aspects of the SNAP-Ed program (needs assessment, education, social marketing, PSE, evaluation, etc.) and develop feedback loops to gather input and share information regularly.</p>			
<ul style="list-style-type: none"> • Understand the systems, community conditions, power differences and histories that contribute to the patterns of behavior. Look at behavior changes when paired with PSEs. • Measure individual behavior changes through surveys to assess new or tailored interventions focused on a subset of indicators. Do not require this for proven interventions to reduce burden on participants. • Include mixed method approach using qualitative data to tell the community story. • Allow for community and cultural metrics to be collected as defined by the community. 	<ul style="list-style-type: none"> • Understand the systems, community conditions, power differences and histories created that impact food resource management behaviors. Look at behavior changes when paired with PSEs. • Measure individual behavior changes through surveys to assess new or tailored interventions focused on a subset of indicators. Do not require this for proven interventions to reduce burden on participants. • Consider metrics related to access, perceptions, and household resilience instead of the current Stretching Food Dollar Metrics. The Gretchen Swanson Center for Nutrition tools offer a more holistic assessment of the food and nutrition insecurity experience. 	<ul style="list-style-type: none"> • Include SNAP-Ed Workforce Capacity and Readiness in as a metric using tools like Workforce Readiness Assessment or Working Principles for Health Justice & Racial Equity Organizational Self-Assessment. • Implement a comprehensive needs assessment process using existing data to identify disparities and assets. This might include GIS mapping, combined with community listening sessions and organizational assessments. These activities should align with the ST environmental indicators. • Identify and compensate and fund champions that include both residents and partner organizations to ensure assets, improvements and solutions are identified by those most impacted. 	<ul style="list-style-type: none"> • Ensure an inclusive community engagement process is used to identify priorities, selection, implementation and sustaining PSE changes. • Use racial equity assessment tools to understand how racial/ethnic groups will be affected by PSE changes. • Collect qualitative data and benefits of the PSE process and implementation in combination with individual level data. • Establish community and cultural level metrics to inform success. • Consider measuring the impact of PSE change on communities in reducing disparities.



For more information or to access the full report, please contact:
The Public Health Institute's Center for Wellness and Nutrition
info@wellness.phi.org



This material was funded by USDA's Supplemental Nutrition Assistance Program – SNAP.
This institution is an equal opportunity provider.