

# FFY 2020-2022 SNAP-Ed Local Health Departments Programmatic Priorities (~~Addendum 1, June 14, 2018~~ **Addendum 2, December 10, 2018**)

## Introduction

The Nutrition Education and Obesity Prevention Branch (NEOPB) of the California Department of Public Health (CDPH) is one of several programs that receive grant funding for nutrition education and obesity prevention efforts from the Supplemental Nutrition Assistance Program-Education (SNAP-Ed) of the United States Department of Agriculture (USDA). The mission of CDPH-NEOPB SNAP-Ed is to reduce the prevalence of overweight and obesity among California (CA) SNAP-Ed eligible residents through educational strategies, and multi-level organizational and community-wide public health approaches that support healthy behaviors at multiple levels of influence.

At the local level, during Federal Fiscal Years (FFY) 2020-2022, SNAP-Ed work will aim to create change at the individual and community levels. This work will be more narrowed and focused than in previous years in order to increase the reach and impact of SNAP-Ed in California. To facilitate the more focused approach, the local Integrated Work Plan (IWP) application for FFY 2020-2022 will consist of a new set menu of options—titled the IWP Blueprint—that will define the allowable SNAP-Ed work at the local level. This menu of options will include a list of allowable settings for specific Policy, Systems, and Environmental Change strategies (PSEs) with specified outcomes. The LIAs will also select three-year objectives (for specific PSE strategies listed below) that will automatically populate with defined bundles of activities appropriate for each selected PSE strategy; there will be core (required) and complementary elements. Direct and Indirect Education activities will be reflected in the PSE objectives activity bundles, and there will be an additional Direct Education objective that targets reach. More information on the IWP Blueprint will be released late FFY 2018 by the CA SNAP-Ed lead SIA, the California Department of Social Services (CDSS).

Within the IWP Blueprint structure, CDPH-NEOPB created SNAP-Ed Programmatic Priorities specifically for funded Local Health Departments (LHDs). For FFY 2020-2022, the following nutrition education and obesity prevention Programmatic Priorities serve as guidelines that LHDs will use to complete a three year local CA SNAP-Ed IWP. CDPH-NEOPB will use the submitted IWP to generate the LHD's Scope of Work (SOW) for the SNAP-Ed three-year grant agreement with CDPH-NEOPB. For details of CDPH-NEOPB's SNAP-Ed funding application and requirements, refer to the [SNAP-Ed FFY 2020-2022 Funding Application Package](#) (FAP).

## Programmatic Priority Expectations

The minimum amount of work to be implemented will be based on projected funding amounts for FFY 2020. For more detail refer to the LHD Funding Tiers in Section III. Application Instructions, C. Description of Each Section of the Application of the [Funding Application Package](#).

## Programmatic Priorities: Background and Description

As a part of the FFY 2017 USDA Western Regional Office Management Evaluation of the CA SNAP-Ed program, a recommendation was made to provide the LHDs (and other Local Implementing Agencies) with a defined menu of options for their SNAP-Ed workplans. This would allow for the development and implementation of local workplans to be rooted in evidence-based effective strategies. To inform the development of Programmatic Priorities that would make up the menu of options for LHDs, CDPH-NEOPB created a list of criteria that each strategy must meet in order to be a part of the LHD FFY 2020-2022 local CA SNAP-Ed IWPs. In addition to the criteria, CDPH-NEOPB engaged key informants and interested stakeholders to inform inputs at every stage of the planning process. At each engagement point of the development process, CDPH-NEOPB involved internal program and evaluation staff, LHD staff (as well as other LIAs), and external subject matter expert stakeholders.

CDPH-NEOPB developed the Programmatic Priorities based on these eight criteria:

1. Evidence-based: effectiveness and impact of specific strategies at health behaviors and/or weight status through research-tested, practice-tested, and emerging strategies
2. Feasibility: strategy is appropriate and feasible for LHDs to implement
3. Maximizes SNAP-Ed impact in the community: strategies have significant reach and impact on eligible communities
4. Aligns with existing SNAP-Ed priorities in California: supports State Level Goals and Objectives and current USDA SNAP-Ed Plan Guidance
5. Aligns with USDA SNAP-Ed Evaluation Framework and California Priority Indicators
6. Timing: reasonable and achievable in a three-year work plan cycle
7. Leverage: can be leveraged by other known funding
8. Momentum: is timely and has support in the field

When determining programmatic priorities, CDPH-NEOPB reviewed and adhered to the [USDA SNAP-Ed Plan Guidance](#) and the FFY 2017-2019 CA SNAP-Ed state level goals and objectives. Additional inputs included established obesity prevention programmatic recommendations such as [Centers for Disease Control and Prevention \(CDC\) Overweight and Obesity Prevention Strategies & Guidelines](#), [The Community Guide](#), [County Health Rankings & Roadmaps](#), the [Dietary Guidelines for Americans 2015-2020](#), and the

National Academies of Science, Engineering, and Medicine’s [Accelerating Progress in Obesity Prevention: Solving the Weight of the Nation](#).

### Programmatic Priority: Domains and Settings

The following are the allowable Domains and Settings for LHD SNAP-Ed PSE work in FFY2020-2022 as determined by the Programmatic Priority development process:

| LHD Programmatic Priority Table for PSE Strategies by USDA Domain and Setting |                         |                              |                           |             |
|---|-------------------------|------------------------------|---------------------------|-------------|
| LEARN   | SHOP                    | EAT                          | PLAY                      | LIVE        |
| Early Care and Education  | Food Stores             | Restaurants                  | Parks and Open Spaces     | Health Care |
| Schools   | Food Banks and Pantries | <del>Summer Meal Sites</del> | Bicycle and Walking Paths |             |
| Afterschool Programs  | Farmers Markets         |                              |                           |             |

**All LHDs (or their proxies) receiving SNAP-Ed funds in FFY 2020-2022 will be required to work in the Early Care and Education (ECE) and/or Schools setting(s) in the LEARN Domain.** LEARN is established as a priority Domain with two specific priority Settings (ECE and Schools). The ECE and Schools settings were selected for priority focus as a result of research which indicates that youth who are overweight or obese are more likely to remain so into adulthood, thus a focus on early intervention is imperative. Additionally, interventions in the School and ECE settings are well documented and proven effective. For information about LHD work requirements by Funding Tier regarding required strategies and Domains, see the [FFY 2020-2022 Funding Application Package](#).

**The settings above are specific to PSE Strategy implementation. Education activities can occur in any qualified SNAP-Ed site that reaches the defined local target population.**

### Programmatic Priorities: Overarching Strategies

Based on the criteria and review of the resources mentioned above, CDPH-NEOPB created the following overarching strategies for SNAP-Ed funded LHDs:

1. Optimize and enhance the food system to support a healthy diet;
2. Adopt, implement, maintain, and support programs and policies that increase access to and demand for healthy food;
3. Adopt, implement, maintain, and support programs and policies that decrease access to and demand for unhealthy food;
4. Adopt, implement, maintain, and support programs and policies that promote drinking water and restrict sugar sweetened beverages; and
5. Adopt, implement, maintain, and support programs, policies, and enhancements to the natural and built environment to increase physical activity opportunities

Of these five overarching strategies, CDPH-NEOPB will place an emphasis on the promotion of drinking water and restriction of sugar sweetened beverages (SSBs) as the core behavioral strategy for implementation in FFY 2020-2022. Consumption of SSBs is more strongly linked to obesity than any other single type of food or beverage, and promotion of water consumption complements and strengthens other efforts to discourage SSB consumption.

**Therefore all settings and sites involved in SNAP-Ed efforts should include (but not necessarily be limited to) strategies to reduce SSB and increase water consumption.** The water and SSB work will be embedded into the menu of activities in the core elements for each appropriate PSE strategy. Additional programmatic supports, including trainings, materials, resources, and tools, will be a part of the IWP Blueprint to guide local program planning and implementation.

### Programmatic Priorities: PSE Strategies

The following constitute the levels and core Policy, Systems, and Environmental Change (PSE) strategies for SNAP-Ed LHDs in their work to address the five overarching strategies described above. Although other PSE strategies may be included, combinations of the strategies below (that vary by setting) should form the backbone of the PSE work.

#### PSE Levels:

1. Site Level Policy, Systems and Environmental (PSE) Changes: Targeted SNAP-Ed allowable activities to establish, implement and sustain written policies, systems and environmental changes through comprehensive programming, at the site level (e.g. at a school or store). Policies are meant to address the overarching strategies and the more specific PSEs below.
2. Organizational Level Policy, Systems, and Environmental (PSE) Changes: Targeted SNAP-Ed allowable activities to establish, implement and sustain written policies, systems, and environmental changes at the multi-site level (referred to as “organization or institutional” level in the USDA SNAP-Ed Program Guidance and Evaluation framework) would include work, for example, at a school district or chain store corporate office meant to influence multiple sites under their jurisdiction. Policies are meant to address the overarching strategies and the more specific PSEs below.
3. Community Level Policy, Systems, and Environmental (PSE) Changes: Targeted SNAP-Ed allowable activities to establish, and implement and sustain written policies, systems, and environmental changes at the community level. Community level is defined as work in neighborhoods, communities, and jurisdictions (e.g. cities, towns, districts, and counties). Community level efforts may involve work to mobilize multiple sectors (stores, schools, government, etc.) to promote and support common SNAP-Ed goals.

## PSE Strategies

1. Nutrition Standards: Work to develop and implement specific guidelines for food and beverages served, sold, or distributed in a variety of settings including meals, snacks, vending, distribution, nutrition assistance or other sales. The guidelines should support balanced eating patterns and healthy body weight, address California SNAP-Ed Goals, and be consistent with the Dietary Guidelines for Americans.

~~Pricing Strategies/Incentives: Work (or alignment with work) that addresses the pricing of healthy/less healthy food and beverage options to increase or decrease access as appropriate. This includes alignment with programs such as the Food Insecurity Nutrition Incentive Grant Program (FINI), Market Match and other price incentive programs.~~

2. ~~Marketing Strategies/Behavioral Economics~~ **Behavioral Economics: For SNAP-Ed purposes behavior economics is a subset of** marketing activities (product, place, price and promotion) designed to complement other PSE strategies to promote a specific behavior, preferably **specifically** at the point of decision. Includes activities that support the restricted marketing of less healthy food items in particular settings and strategies that use economic incentives/methods that apply psychological insights into purchasing and consumption behavior. Examples include access and placement of healthy or less healthy foods, **point of purchase prompts, pricing and other** innovations in food access, food restrictions, etc., and can also relate to physical activity (PA) e.g. point of decision prompts. This includes alignment with programs such as the Food Insecurity Nutrition Incentive Grant Program (FINI), Market Match, and other price incentive programs. **Behavioral economics is distinguished from other promotional strategies in that it usually does not involve education but rather influences spontaneous or even unconscious decision making at the point of decision.**
3. Healthy Default: Work in allowable settings to make healthier beverage options (water, fat-free or 1% unflavored milk) the default options when beverages are served as a part of a meal or package (does not take away any choice) for children (ages 0-17 years). Secondary work aligns with making the healthier food option the default option (example apples instead of fries) when choices are available. Are appropriate as a part of comprehensive policies and nutrition standards but can be implemented as a singular strategy where comprehensive approaches or nutrition standards are not feasible (i.e. restaurants where less healthy food is served).
4. Active Transportation: Work that promotes and supports any type of human-powered transportation and all of the aspects that relate to it (safety supports, PSEs, alignment with other funding, PA promotion, **creating opportunities and creating equitable opportunities for SNAP-Ed participants through**

**policy, system and/or environmental changes**).

5. **Daily Quality Physical Activity**: Work that establishes and **supports (through policy, systems and/or environmental changes)** daily, quality time for age- **and ability-** appropriate physical activity and ability **encourages individuals to meet the Physical Activity Guidelines for Americans. At ECE and school sites it is particularly important that quality structured PA (PE in the case of schools) be provided for all students/children on a daily basis.**
6. **Access to Farmers Markets**: **Policy and/or environmental** work that addresses access to farmers markets including locations, hours of operations, allowability of vendors and types of products sold; could be approached at the site or community level. Complementary activities can include supporting the purchase and use of fruit and vegetables at Farmers Markets. Can be used in conjunction with pricing incentives and nutrition standards.
7. **Access to Physical Activity Opportunities**: ~~Community PA opportunities:~~ Work that increases access to parks and/or bike/walking paths for physical activity; work that establishes and supports joint-use/shared-use of public properties/facilities that increase opportunities of physical activity; work that increases access to physical activity in other established FFY2020-2022 priority settings mentioned below.
8. **Portion Size Limits**: **Policy and system** work that supports or reinforces appropriate serving sizes in various settings, e.g. snacks or meals to children depending on age; limited or no (free) refills in restaurant or cafeteria settings. Are appropriate as a component of comprehensive policies and nutrition standards but can be implemented as a singular strategy where comprehensive approaches or nutrition standards are not feasible (i.e. restaurants where less healthy food is served).
9. **Access to Healthy Food** ~~Healthy Food Procurement:~~ **Policies, systems, and environmental changes that ensure food purchased, provided, or made available is healthy. Includes policy, system and/or environmental change** work that increases access to fresh, healthy, locally sourced fruit and vegetables, as well as other healthy products. Healthy food can come from farms, gardens, grocers, food rescue organizations, and/or food distributors (of locally sourced products), i.e. farm to community or institution, purchasing systems, and partnerships.

### Programmatic Priority: Strategies within Settings

Based on the criteria review, certain strategies and combinations of strategies were found to be more effective in some settings than in others. The following table outlines the PSE strategies that are appropriate for each setting.

Furthermore, attention to only one of the strategies at any given site is unlikely to produce measurable changes in behavior or weight in most cases. It is important to implement the combinations of strategies that are evidenced based for a given setting. Guidance will be provided regarding the combinations that are most appropriate for each Setting in the IWP Blueprint coming in fall 2018.

| LHD PSE Strategies   | LEARN   |         |               | EAT               |             | SHOP    |            |                 | PLAY    |                     | LIVE       |
|--|---------|---------|---------------|-------------------|-------------|---------|------------|-----------------|---------|---------------------|------------|
|  | Setting | Setting | Setting       | Setting           | Setting     | Setting | Setting    | Setting         | Setting | Setting             | Setting    |
| 1. Site wellness policies, systems, and environmental changes            | ECE     | Schools | After-Schools | Summer Meal Sites |             |         | Food-Banks |                 |         |                     | Healthcare |
| 2. Community level wellness policies, systems, and environmental changes | ECE     | Schools | After-Schools | Summer Meal Sites |             | Retail  | Food-Banks | Farmers Markets | Parks   | Bikes/Walking Paths | Healthcare |
| 1. Nutrition Standards   | ECE     | Schools | After-Schools | Summer Meal Sites |             |         | Food-Banks |                 | Parks   |                     | Healthcare |
| 2. Pricing Strategies and Incentives                                     |         | Schools | After-Schools | Summer Meal Sites |             | Retail  |            | Farmers Markets | Parks   |                     | Healthcare |
| 3. Behavioral economic and marketing strategies                          |         | Schools |               |                   |             | Retail  | Food-Banks | Farmers Markets | Parks   |                     | Healthcare |
| 4. Healthy default food beverage strategies                              |         |         |               |                   | Restaurants |         | Food-Banks |                 |         |                     |            |
| 5. Active Transportation strategies                                      |         | Schools | After-Schools | Summer Meal Sites |             |         |            |                 |         | Bikes/Walking Paths |            |
| 6. Time for age-appropriate physical activity                            | ECE     | Schools | After-Schools |                   |             |         |            |                 |         |                     |            |
| 7. Increase access to Farmers Markets                                    |         |         |               |                   |             |         |            | Farmers Markets |         |                     | Healthcare |
| 8. Community Physical Activity Opportunities                             |         |         | After-Schools |                   |             |         |            |                 | Parks   | Bikes/Walking Paths |            |
| 9. Portion size (calorie) limits   | ECE     |         | After-Schools |                   | Restaurants |         |            |                 |         |                     |            |
| 10. Healthy procurement practices  | ECE     | Schools | After-Schools |                   |             | Retail  | Food-Banks |                 |         |                     | Healthcare |

**NEW! LHD PSE Strategy and Setting Alignment Table:**

| PSE Strategies |   | Nutrition Standards | Behavioral Economics | Healthy Default | Active Transportation | Daily Quality Physical Activity | Increasing Access to and Utilization of Farmers Markets | Access to Physical Activity Opportunities | Portion Size Limits | Access to Healthy Food |
|----------------|---|---------------------|----------------------|-----------------|-----------------------|---------------------------------|---|---|---------------------|------------------------|
| DOMAIN         | PSE Settings                              |                     |                      |                 |                       |                                 |   |   |                     |                        |
| LEARN          | Early Childcare and Education             | X                   | X                    |                 | X                     | X                               |   | X   |                     | X                      |
|                | Schools (K-12)                            | X                   | X                    |                 | X                     | X                               |   | X   |                     | X                      |
|                | Before- and After-School                  | X                   | X                    |                 | X                     | X                               |   | X   | X                   | X                      |
| EAT            | Restaurants                               |                     |                      | X               |                       |                                 |   |   | X                   |                        |
| SHOP           | Retail (Small and Large)                  |                     | X                    |                 |                       |                                 |   |   |                     | X                      |
|                | Food Assistance Sites (Banks or Pantries) | X                   | X                    |                 | X                     |                                 | X   | X   |                     | X                      |
|                | Farmers Markets                           |                     | X                    |                 | X                     |                                 | X   |   |                     |                        |
| PLAY           | Parks and Open Spaces                     | X                   | X                    |                 |                       | X                               |   | X   |                     |                        |
|                | Bicycle and Walking Paths                 |                     |                      |                 | X                     | X                               |   | X   |                     |                        |
| LIVE           | Healthcare Clinics and Hospitals          | X                   | X                    |                 |                       |                                 | X   |   |                     | X                      |

## Steps for Building Local Integrated Work Plans

### Identify the intended audience, Domains and Settings, and PSE Strategies

From community needs assessments, LHDs should identify their 1) intended audience (in terms of geographic location and demographic characteristics), 2) domains and settings where they can most effectively reach a sufficient number of SNAP-Ed eligible participants, and 3) applicable and appropriate PSE strategies for each setting. Once the PSE strategies are selected the plan will automatically populate with the appropriate “bundle” of activities for each strategy/setting pairing. **LHDs will be tasked with making each activity specific to their local work. There will be state-developed activity tables to support this part of plan development.** Keep in mind with regard to the target population:

The primary target population for LHD’s SNAP-Ed work is children (any age group within the birth through high school age range) and therefore PSE work must include one of the LEARN Settings (ECE sites and/or schools).

Once you have selected the specific population that will be the target of your SNAP-Ed efforts, all of your approaches and activities within your work plan should target this specific population. Other populations may be reached and/or exposed to the interventions, but would not be a major focus of your efforts.

### Work with Local Partners

LHDs are encouraged and expected to work with all appropriate partners to ensure that SNAP-Ed work is maximizing impact within their selected target population. Partners can include SNAP-Ed funded and non-SNAP-Ed funded organizations and agencies. LHDs are highly encouraged to work with chronic disease prevention and cross-sector partners to enhance individual SNAP-Ed work plan deliverables and to support comprehensive, collaborative community-wide community health initiatives.

### Health Equity Approaches

The IWP should address health disparities by informing and educating those at most risk, and the organizations that provide them services, by creating supporting food and activity environments in collaboration with community partners and by applying resources and programs in a manner that builds skills, job, and career readiness among low-resource community members. When developing IWPs, consider local health

disparity issues to promote health equity and to address existing health inequities through PSE strategies. IWP development should directly involve SNAP-Ed eligible community members and representatives to ensure a health equity lens to community assessments, program planning, and evaluation.

Addendum 1 – published 6/14/18

**Addendum 2 published 12/10/18**